A study of select factors that predict foster care placement of African American children in Georgia

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ABSTRACT

SCHOOL OF SOCIAL WORK

JOHNSON, SHAUN ERVIN   B.S. SOUTH CAROLINA STATE UNIVERSITY, 1993
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A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE PLACEMENT FOR AFRICAN AMERICAN CHILDREN IN GEORGIA

Committee Chair: Richard Lyle, Ph.D.

Dissertation dated December 2013

This study explores the disproportionate rate of foster care placements of African American children by the Department and Family Children Services’ Child Welfare Case Workers in the State of Georgia. The predictors such as poverty, neglect, previous child protective history, caretaker's behavior and safety conditions are variables that are studied for the purpose of this study. The research study employed a survey questionnaire entitled A Study of Select Factors That Predict Foster Care Placement of African American Children. Items on the Predicting level of Risk Index were responded to on a five point continuum Likert scale. The targeted population for this research was composed of former and current case managers who obtained employment through the DeKalb or Fulton County Department of Family and Children Services. One hundred (100) respondents were selected utilizing nonprobability convenience sampling from
among the participants. The findings of the study indicated that the case managers agreed (82%) that they believed that African American children are overrepresented in foster care. In addition, case managers indicated that they agreed (73%) that African American children are disproportionate in foster care.
A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE PLACEMENT OF AFRICAN AMERICAN CHILDREN IN GEORGIA

A DISSERTATION
SUBMITTED TO THE FACULTY OF CLARK ATLANTA UNIVERSITY IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF DOCTOR OF PHILOSOPHY

BY
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ATLANTA, GEORGIA
DECEMBER 2013
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Proportion of Children in Foster Care Settings, End of Fiscal Year 2004
CHAPTER I
INTRODUCTION

This study explores the disproportionate rate of foster care placements among African American children by the Department of Family and Children Services' Child Welfare Case Workers in the southeastern state of Georgia. The predictors, such as poverty, neglect, previous child protective history, caretaker's behavior, and inadequate access, are variables that are studied for the purpose of this study. This researcher assumes that cultural incompetence among case workers plays a significant role in the placement of African American children.

This researcher believes that by training case workers to identify their misconceptions and biases, and separate their personal points of view while learning to understand the forms of communication that are utilized by African American families, it is expected that their level of cultural competence will increase and subsequently decrease the number of African American children placed in foster care. This chapter provides an overview of the background for this study, the statement of the problem, the purpose of the study, the significance of the study, and definitions of terms.

African American children enter and remain in foster care longer than any other race and ethnic group. According to National Kids Count (2005), the total children population in the State of Georgia was 2,419,965 and of this number, 795,926 were
African American. In 2005, African American children comprised 33% of the total population while their counterparts total population was 53%. At the end of the 2005 fiscal year, African American children totaled 7,559 or 50 percent of the 15,119 children in foster care in the state of Georgia (State of Georgia, 2006).

The Department of Health and Human Services (HHS) and National Incidence Study of Child Abuse and Neglect reported that all children of different races suffer an equal chance of being abused and/or neglected. However, African Americans are more likely to enter and remain in foster care at a higher rate than any other ethnic group.

The HHS National Incidence Study has shown since the early 1980s that children of all races and ethnicities are equally likely to be abused or neglected; however, African American children, and to some extent other minority children, have been significantly more likely to be represented in foster care, according to HHS data and other research. Nationally, African American children comprise less than 15 percent of the overall child population in the 2000 Census, but they represented 27 percent of the children who entered foster care during fiscal year 2004, and they represented 34 percent of the children remaining in foster care at the end of that year (United States Government Accountability Office, 2007, p. 7).

According to DeRoma, Kessler, McDaniel, and Soto (2006), case workers are charged with the decision making of the removal of a child from their birth family and/or primary caregiver, which involves weighing the risks and benefits of the child remaining in the home. Case workers consider the protection of a child from harm while reviewing other disruptions (i.e., change in school, separation from peers, and support system).
Before reunification becomes an option, the birth families must identify and address the areas of concerns (DeRoma et al., 2006).

According to Merginger (2004), there are inherent biases in worker's perceptions of families of color that lead to their decision to place children in foster care, thereby reflecting the disproportionate numbers of African American children in the foster care system.

Other possible factors that contribute to the disproportionate number of African American children in the child welfare systems are family variables, including parental incarceration, poverty, substance abuse, along with systemic factors such as reporting bias, and inequity in service delivery. In addition, the changes to federal policies for TANF and Adoptions and Safe Families Act possibly impacted children and families of color disproportionately, due to the reducing of welfare income and limiting services to families in the child welfare system (Hines, Lemon, Wyatt, & Merdinger, 2004).

According to The Center for the Study of Social Policy (2002), the federal government has increased its expectations for state performance with more intensive reviews and audits of the work being done in the states to reduce the number of children in out-of-home care or to prevent children from coming into care.

Racial disparities are evident at every critical decision point. Children of color enter foster care at higher rates, even when they and their families have the same characteristics as comparable white children and families. They remain in foster care for longer periods of time than white children. Longer stays in foster care contribute to racial disproportionality because they increase their numbers in the system in any given year. Families of
color receive fewer services and they experience lower reunification rates than white children (The Center for the Study of Social Policy, 2002, p. 11).

Hill (2006) also believed that Black or African American children are more likely to be reported, investigated, substantiated, and placed in care, and that African American children stay longer in care and are less likely to be reunified with their families. Black Administrator Child Welfare (2008) suggested that poverty, drugs and other substance abuse, child abuse, domestic violence and mental illness are believed by most experts to be contributing factors that often lead to the removal of children from their families. According to the Racial Disparity study, a number of states acknowledge that these are contributing factors; thus, states are beginning to develop policies, practices, and methods to providing services to families with the goal of reducing the overrepresentation of children of color in the child welfare system.

According to Roberts (2007), residents of poor and disadvantaged neighborhoods are forced to submit to the formal, punitive system of child welfare because of a relative absence of social programs and other potentially supportive resources. Professionals have the responsibility in the decision making process, to provide the birth family and child with the support services needed. During the decision making process, professionals need to clarify their roles and responsibility to the family. The decision makers need to understand where their views and/or ideas are formed from. To what extent do the professionals’ personal experience, knowledge of resources, or consideration of what is in the best interest of the child. It is important that everyone listen to one another to ensure decision making that is closer to the expressed needs of the child (Barrat, 2002).
According to United States Department of Health and Human Services (2003), there were over 500,000 children ranging in age from 0 to 21 years in the foster care system in the United States. The population of children in foster care increased from 262,000 in 1982 to 534,000 in 2002, according to the National Clearinghouse on Child Abuse and Neglect (2004). Figure 1.1 depicts the proportion of children by race in the Foster Care settings at the end of fiscal year 2004. African American children comprise 15 percent of the population in the United States; however, 34 percent of African American children are in the foster care system. Whereas their counterparts, White children, comprise 59 percent of the population in the United States and they represent 41 percent of the population in foster care.

Figure 1.1 Proportion of Children in Foster Care Settings, End of Fiscal Year 2004
Statement of the Problem

Children enter into the foster care system for several reasons. In order for a child to come into care, it has to be deemed that the child has either been physically and/or sexually abused. Other factors that can contribute are the birth parents living in poverty, substance abuse, mental illness, or neglecting the children's needs (Bass, Behrman, & Shields, 2004).

According to the Child Welfare League of America (2003), children of color, primarily African American and Latino/Hispanic, are disproportionately represented in the child welfare system. Moreover, the report showed that the overrepresentation of children of color in child welfare and other social service systems (e.g., juvenile justice) is linked to social, class, and economic factors.

Substantiation rates for abuse and neglect of white children compared with rates for other ethnic groups show that African American children are twice as likely to be substantiated as abuse or neglect, while Asian/Pacific Islander children are substantiated at half the rate of white children (Child Welfare League of America, 2003).

States are being required by the federal government to reduce the number of children in the child welfare system and increase the efforts for the prevention of children coming into care. According to Black Administrators in Child Welfare (BACW) (2008), African American children were tragically overrepresented in the child welfare system.

Dr. Robert Hill (2006) noted that “Black or African American children are more likely to be reported, investigated, substantiated, and placed in care, and that they stay longer in care and are less likely to be reunified with their families” (Hill, 2006, p. 17). According to the National Incidence Study (NIS) (2004), African American families’
challenges with having access to support systems and social services were also viewed as influencing African American children's entry to foster care. Such supports and services include affordable and adequate housing, substance abuse treatment, and family services such as parenting skills and counseling. It is difficult for African American families to access the support because the support is not normally in their communities. Access to legal representation in courts responsible for making decisions about children reported to have been abused or neglected was also a factor influencing African American children's entry into foster care.

Purpose of the Study

This study focused on the Afrocentric perspective of African American children being overrepresented in the foster care system. The primary purpose of this study is to examine the overrepresentation of African American children being raised in the foster care system. Current research supports that there are inherent biases in worker's perceptions of families of color that lead to their decision to place children in foster care, thereby reflecting the disproportionate numbers of African American children in the foster care system. African American children enter and remain in foster care longer than any other racial or ethnic group. At the close of fiscal year of 2005, African American children totaled 7,559 or 50 percent of the 15,119 children in foster care in the state of Georgia (State of Georgia, 2006).

African American children comprise less than 15 percent of the overall child population in the 2000 Census, but represented 27 percent of the children in the foster care system during fiscal year 2004 (U.S. Census Bureau, System Support Division,
The Department of Health and Human Services (HHS) (2003) and National Incidence Study of Child Abuse and Neglect reported that all children of different races suffer an equal chance of being abused and/or neglected. However, African Americans are more likely to enter and remain in foster care at a higher rate than any other ethnic group.

Foster Care Statistics, Child Welfare Information Gateway (2010) data showed that during the fiscal year of 2008, 273,000 children were in foster care: 44% were White/Non-Hispanic; 26% or 70,980 were Black/Non-Hispanic; 20% were Hispanic; and 11% were other races or multiracial. Additionally, of the estimated 285,000 children who exited foster care during fiscal year of 2008: 44% or were White/Non-Hispanic; 26% or 74,100 were Black/Non-Hispanic; 20% were Hispanic; and 10% were other races or multiracial (Child Welfare Information Gateway, 2010).

Contributing factors that experts consider are the underlying factors that results in the removal of children from their families are poverty, drugs and other substance abuse, child abuse, domestic violence and mental illness. A number of states and local child welfare agencies have acknowledged the existence of these factors and have begun to make changes in policies, practices, and methods used to provide services. Nine states (Arizona, Florida, Kentucky, Michigan, Minnesota, Mississippi, North Carolina, Oklahoma, and Texas) and two large urban jurisdictions (Los Angeles County and New York City) participated in a study regarding the overrepresentation of children of color. Of the nine states, five states showed a reduction of overrepresentation of children of color in their systems (BACW, 2008).
Research Questions

The research questions of the study are as follows:

1. Is poverty a predictor of foster care placement of African American children?
2. Is neglect a predictor of foster care placement of African American children?
3. Is history of abuse a predictor of foster care placement of African American children?
4. Is caretaker’s behavior a predictor of foster care placement of African American children?
5. Is inadequate access a predictor of foster care placement of African American children?

Hypotheses

The null hypotheses for the study are as follows:

1. There is no statistically significant relationship between poverty and the placement of African American children in foster care.
2. There is no statistically significant relationship between neglect and the placement of African American children in foster care.
3. There is no statistically significant relationship between history of abuse and the placement of African American children in foster care.
4. There is no statistically significant relationship between caretaker’s behavior and the placement of African American children in foster care.
5. There is no statistically significant relationship between inadequate access and the placement of African American children in foster care.
Significance of the Study

Individuals who suspect a child may be at risk of abuse or neglect can make a referral to Child Protective Services (CPS). In the United States, anyone can make a referral to CPS; however, mandated reporters, such as physicians, law enforcement officers, teachers, etc., are required to report any suspicion of abuse or neglect. Thus, this is the first point of decision making in the child welfare system and this becomes the introduction to disproportionality (Research Synthesis on Child Welfare, 20). The CPS hotline in 2005 revealed that educational staff, law enforcement officials, social service employees, and medical personnel are the top four sources of referral (U.S. Department of Health and Human Services, 2005).

In 2008, there were 3.3 million referrals made to CPS alleging child maltreatment and this included approximately 6 million children. This is more than half (57.9%) of the 3.3 million referrals made by professionals and most of them are mandated reporters, and the three top referral sources were teachers, lawyers or police officers, and social services staff (United States Department of Health and Human Services, 2010).

Child welfare agencies face numerous challenges with efforts to reduce African American children representation in foster care on the state and local levels. The goal is to ensure that decisions to place a child in foster care are not influenced by bias or cultural misconceptions about families and their communities. There are several things that can be done to reduce child maltreatment which will decrease abuse and neglect. A reduction in the number of abuse and neglect cases will decrease the number of African American children coming into the foster care system. The child welfare system has been charged with the responsibility for providing for the well being and safety of all
children. This could be done by strong child welfare programs that reduce family poverty by increasing the minimum wage, job creation policies, establishing a national healthcare system that covers everyone, providing quality subsidized child care, and increasing the supplies of affordable housing (Roberts, 2002).

Current research shows that if the above issues were addressed a smaller portion of children would be placed in foster care. The goal is to assist the families and with assisting the families we are helping the children. It is imperative that we stop developing short term solution and focus on long term solution. Long term solution could reduce the number of children being abused and/neglected along with reducing the trauma children faced when being removed from their families and environment.

Upon completion of this study, the researcher will present the findings to the leadership of the Department of Family and Children Services for Fulton and DeKalb Counties. The findings will be direct information gathered from two counties in the state of Georgia for the setting for this study. Then, this researcher will share the findings on the State level at the Georgia Department of Human Services Senior Administration. The goal is for the administrators to review information and utilize it to make appropriate changes within the organization. This study seeks to identify to the administration the areas that need improvement with the goal of decreasing the overrepresentation of African American children in the foster care system. In addition, this study will outline additional and effective training that the case workers could participate in to help with decision making skills along with learning skills to separate bias and misconception about the African American population.
The review of the literature provides the reader with more extensive related research in regards to the factors that predict foster care placement. The review of the literature also provides data on the policy and procedures that must be followed by child welfare case workers; data on the overrepresentation of African American children; case manager’s decision making; and factors influencing foster care placement.

Definition of Terms

Following is a list of terms used throughout this study:

1. Foster Care - “24-hour substitute care for children placed away from their parents or guardians and for whom the State agency has placement and care responsibility. This includes, but is not limited to, placements in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, child care institutions, and preadoptive homes. A child is in foster care in accordance with this definition regardless of whether the foster care facility is licensed and payments are made by the State or local agency for the care of the child, whether adoption subsidy payments are being made prior to the finalization of an adoption, or whether there is Federal matching of any payments that are made” (U.S. Government Printing Office, 2000, p. 1).

2. Overrepresentation - “Particularly in reference to African American children, has traditionally been used to define the high numbers of children of color in the child welfare system that are larger than their proportion in the general population” (Bettencourt & Doyle, 2004, p. 9).
3. **Disparity** - "Unequal treatment when comparing a racial or ethnic minority to a non-minority. This can be observed in many forms including decision points (e.g., reporting, investigation, substantiation, foster care placements, exit), treatment, services, or resources" (Hill, 2006, p. 3).

4. **Disproportionality** - "Refers to the differences in the percentage of children of a certain racial or ethnic group in the country as compared to the percentage of the children of the same group in the child welfare system. For example, in 2000 black children made up 15.1 percent of the children in this country but 36.6 percent of the children in the child welfare system" (Hill, 2006, p. 3).
CHAPTER II
REVIEW OF THE LITERATURE

The purpose of presenting this review of the literature is to provide the reader with a solid foundation on child welfare issues and the factors that continue to affect the African American population. This chapter is a review of the current literature on the overrepresentation and the disparities within the child welfare system. The goal of presenting this research is not only for scholars to agree that there is an issue with the overrepresentation of African American youth in foster care, but that there is need for a solution to this growing problem.

The literature review chapter is divided into five main sections: Historical perspective of the Child Welfare System; Child Protection Legislation; Overrepresentation/Disproportionate of African American children in foster care placement; Caseworker’s decision making; and Factors influencing foster care placement.

Historical Perspective of Child Welfare

During the Middle Ages, famine, wars, crop failures, pestilence and the breakdown in the feudal system all contributed to the number of people that was in need of financial support. Previous approaches, through family, church were unsuccessful with the meeting the needs of many and they were unable to become self-sufficient. Hence,
many of these individuals were forced to become beggars. In the attempts to solve this problem, England passed several Poor Laws between the mid-1300s and the mid-1800s (Hefferman, Suttersworth, & Ambrosino, 1997).

The English Poor Law of 1601 was enacted during the reign of Queen Elizabeth I. The fundamental provisions of the Poor Laws were incorporated into the laws of the American colonies and have had influence on our approaches to public assistance and other social legislation (Hefferman, Suttersworth & Ambrosino, 1997). The Elizabeth Poor Laws established three categories of relief for recipients, to include those who were abled-bodied or those who were capable of working, the impotent poor, those who were physically and developmentally disabled and also dependent children, which consisted of those children whose parents or grandparents were unable to support them (Zastrow, 2002).

The United States in the late 1800s passed legislation that allowed courts to remove children from their parents for their protection and placement in almshouses, orphanages, or families (Petr, 1998). In 1875, New York Society for the Prevention of Cruelty to children was established and founded throughout the United States. This initiative advocated for the passage of laws that enhanced children’s welfare (Downs, Costin, & McFadden, 1996).

Between the 1700s and 1800s, community leaders, philanthropists and social reformers who were concerned about child abuse and neglect focused primarily on the children of the poorest families and those who were orphaned, abandoned, or unsupervised. During this time, children of the “unworthy poor” were saved from
developing slothful ways by separation from their parents through indenture or placement in institutions (Costin, 1985).

In the 1900s, children were sent to institutions operated by private, charitable organizations. As a result, foundling hospitals were developed to care for unwanted babies. Poor and/or abandoned children were sent to live in almshouse for all ages. Almshouse provided a minimal standard of care to orphaned or needy children and to impoverished, insane or diseased adults (McGowan, 1983).

A gentleman by the name of Charles Loring Brace responded to needs of the homeless, ragged, hungry children prowling the streets of New York City by forming the Children’s Aid Society to care for those individuals. Within 75 years of services, the Children’s Aid Society sent more than 150,000 orphans by train to live in Christian’s homes in rural areas. Many of these homes were in the Midwest, where their labor was valued by farm families (McGowan, 1983; Folks, 1902).

The New York Society for the Prevention of Cruelty to Children was formed following a famous case in New York City. A visiting nurse argued that a severely abused child by the name of Mary Ellen should receive the same intervention afforded an animal in the similar circumstances. In this same year 1877, New York State passed a law to protect children and punish wrong done to them. This law provided the society with the legal foundation and mandate to identify children who were being mistreated by their families. As a result, more states passed this law and this began laying the groundwork for the nation’s juvenile court system (Stevenson et al, 1996).

In 1909, the White House Conference on Children issued the following policy statement: “No child should be removed from the home unless it is impossible to
construct family conditions or to build and supplement family resources to make the home safe for the child” (Schulz, 1924, p. 209). The early twentieth century reforms developed a mission for child saving initiates. Child labor prohibition became a goal to prevent industries from exploiting youngsters as cheap and pliable workers (Smith & Merkel-Holguin, 1966). In 1904, the National Child Labor Committee (NCLC) was organized and social welfare leaders such as Jane Adams, Homer Folkes, and Grace Abbott worked together to prohibit children from working (Abbott, 1938a; Trattner, 1970).

During the 1840s, a crisis developed among youth in America with the increased social problem of pauperism and the many teenagers who found themselves without work opportunities at the end of apprenticeship programs. Youth were forced to roam the streets and countryside (Jansson, 2005). For much of the 18th and 19th centuries most poverty relief was provided in the almshouses and poorhouses. Traditionally, churches and/or private philanthropists funded these relief programs. During the 19th century, problems with youth on the streets created economic crises, homelessness and youth violence (Jansson, 2005).

The foster care system was designed to provide temporary care for children who were unable to live with their birth families. During the 1950s and 1960s, foster care was developed to look after children who were not able to be cared for by their birth parents due to hospitalization for either ill health or childbirth. Around the 1970, after a death of a child (Maria Colwell) in the 1973 brought awareness that children were suffering from serious abuse by adults. Then, this changed the face of foster care to caring for children who were known to be in danger with birth families (Barratt, 2002).
Children enter into the foster care system for several reasons. In order for a child to come into care, it has to be deemed that the child has either been physically and/or sexually abused. Other factors that can contribute are the birth parents living in poverty, substance abuse, mental illness, or neglecting the children's needs (Bass, Behrman, & Shields, 2004).

In 1959, Mills explored the belief of "private troubles and public issues" when discussing disproportionality in the child welfare system affecting African Americans and Native Americans. Mills believed that when examining disproportionality at the point of referrals as well as other key decision point that the views of needs to be reexamined. Mills stated that as long as disproportionality is being viewed as an individual or personal issues for African and Native American children that the system "will not focus in the public domain of child welfare system, a system that created and has continued to perpetuate disproportionality" (Mills, 1959, p. 202).

Aid to Families with Dependent Children (AFDC) is a program that was created under the name of Aid to Dependent Children (ADC) by the Social Security Act of 1935. The name was changed from Aid to Dependent Children to Aid to Families with Dependent Children in 1960 because the original program discouraged marriages. Aid to Families with Dependent Children is a program that was planned to provide cash assistance to families with dependent children in need. The program developed criteria to determine eligibility such as falling below the poverty standard, incapacity, death, absent parent or some cases where both parents are unemployed (Segal & Brzuzy, 1998).

This cost of the program was shared by federal, state, and local governments. For each federal dollar received, states were mandated to spend some predetermined amount
on the program this means matching grants. The federal rules incorporated requirements guaranteeing that anyone who wanted to apply could do so. All eligible persons were guaranteed assistance, if they were eligible for the program (Segal & Brzuzy, 1998).

Spending for public assistance escalated over a ten year period from $2.3 billion in 1950 to 3.3 billion in 1960. The overall quantity of individuals receiving public assistance rose by 13 percent (800,000), even though aged recipients declined in number from 2.8 million in 1950 to 2.2 million in 1965 (Handel, 1982). The AFDC population boomed along with the baby boom. By 1960, AFDC rolls had increased to more than 3 million persons and expenditures by 92 percent to more than $3 billion. During 1961, the first year under Kennedy, the number of AFDC recipients rose another half million, and expenditures rose another $2 million (Axinn & Levin, 1982). The reasons for the increase in women seeking assistance were due to population growth, number of divorces, out of wedlock birth rate, legislation and court decisions and ideas about employability (Day, 1989).

The legislation and the court decided to extend coverage to needy children regardless of the marital status of their parents. Parents and nonworking adults were added to the AFDC population. This change sent a message to society that women were given an incentive for trying to make it without a husband and men were paid for being unemployed. As a result, two values that were once respected by members of the society seemed to be less significant (Day, 1989). The Social Security Act AFDC program design was to remove women from the labor force competition with men. As well, society believed that mothers could care for their children much cheaper than in a
daycare. However, during the war and afterwards, wives and mothers worked to provide for their families in the absence of the fathers (Segal & Brzuzy, 1998).

For the states to maintain AFDC, states were required to restrict eligibility, reduce need levels, and restrict residency requirements. States also made attempts to embarrass recipients by publishing their names and terminating services forcing them to reapply. In 1948, 66 percent of applicants were accepted and, in 1958, only 54 percent were accepted. In the south, families’ services were terminated if it was assumed that the applicant could find work in the fields (Levitan, Martin, & Marwick, 1972).

Mandell (1971) reported that the welfare system has been used as an instrument of economic exploitation by communities and states that needed cheap labor. The farm policy adopted by Arkansas in 1953 states that able-bodied mothers and older children were required to accept employment when it was available. Between 1953 and 1960, with this policy, 38.6 to 58.6 percent of cases for services were terminated. Hostility was directed towards woman because of their “sexual immorality,” “great numbers” of illegitimate children, and the implication of mothers regarding their responsibility for juvenile delinquency (Levitan, Martin, & Marwick, 1972, p. 318).

During the 1960s, the “suitable home” rules were adopted, which stipulated that no illegitimate children or men friends were permitted to live in the house. This rule was adopted by 23 states. Louisiana, in the 1960s, terminated services with 22,000 illegitimate children receiving services and 95 percent of whom were African American (Bell, 1965). In Florida, AFDC applicants with unsuitable homes were informed to place their children in foster care and/or institutions or the courts would remove them. Out of
2,908 families only 186 complied and the remainder withdrew their applications (Day, 1989).

Handler (1972) stated that:

Sexual promiscuity, men in the house, divorce, remarriage and so forth...
patterns of sexual behavior outside of conventional moral standards are tolerated by the public as long as the public is not called upon to support those who engage in such activities. The poor must stay married or become celibate... As the price of survival, the poor are required to engage in certain behavior not required of the rest of society or to forego amenities and pleasures enjoyed by others (p. 319).

The AFDC workers were investigators in attempts to reduce the number of recipients receiving services. The workers investigated the recipients by questioning the neighbors, employers, banks and credit agencies. The investigation could take place at any time day or night. Workers checked the women's home for men items such as shoes or clothes in the closets. The recipients did not receive information about monies available, rights to fair hearing or other programs. In 1961, Arthur Fleming, the secretary of the Department of Health, Education and Welfare under the Kennedy administration, ruled that support services could not be terminated unless the welfare department found new "suitable homes" (Day, 1989, p. 320) for the children. During 1968, residence and "substitute parent" (Day, 1989, p. 320) / man in the house were eliminated.

The Child Abuse Prevention and Treatment Act (Public Law 93-247, called CAPTA) is a federal law enacted in 1974. CAPTA encouraged states to pass laws that required professionals and others to identify children who needed protection. In addition,
that social service department investigates reports of maltreatment and keeps track of substantiated cases. CAPTA established the National Center on Child Abuse and Neglect. National Center on Child Abuse and Neglect developed standards for receiving and responding to maltreatment reports (Schene, 1998).

Passage of Title XX of the Social Security Act in 1975 gave states the resources they needed to address child abuse and neglect and other social service needs. Consequently, by the end of the decade, three-fourths of all child welfare monies were devoted to foster care rather than to support of preservation services for the families (Burt & Pittman, 1985). During 1976 and 1993, abuse and/or neglect cases rose by more than 347% (U.S. House of Representatives, 1996). In consequence, this has caused criticism to the child protective agencies for not doing enough for the families identified as having problems. As well as, interfering unnecessarily in families through adversarial investigations of parenting practices (Costin et al., 1996).

During the 1970s, the public concern grew because of the number of children who were being placed in foster care and the length of time they remained in care. Additionally, a number of children who drifted from foster home to foster home and not returning to their homes or being released for adoption (Barth et al., 1994). For the aforementioned reasons, the Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) was established. This Act required states to make “reasonable efforts” to prevent out-of-home placement and to promote family reunification or permanent homes for children who had to be placed (Schene, 1998).

An amendment to the Social Security Act in 1993 was established to address Family Preservation and Family Support programs. The federal government provided
funds to help communities build a system of preventive and crisis intervention services for vulnerable children and families. Funding was allocated according to the needs and priorities of the community. This was identified through an extensive process for developing state plans for using federal dollars (Ahsan, 1996).

On August 22nd, 1996, President Bill Clinton signed into law, The Personal Responsibility and Work Opportunity Reconciliation Act of 1996. This is the welfare reform plan that changed the nation’s welfare system into one that requires work in exchange for time (limited assistance). The bill enclosed requirements on a performance bonus to reward states for moving recipients into jobs, state maintenance of effort requirements, child support enforcement, and supports for families moving from welfare to work to include increasing funding for child care and guaranteed medical coverage. This legislation significantly altered the sixty-one year old structure services provided to recipients (Segal & Brzuzy, 1998).

This Act of 1996 ended the federal guarantee of cash assistance and allowed states to develop and implement welfare reform programs. This new law required recipients to work after two years of receiving assistance with few exceptions. The state will provide families for support with transitioning into jobs. The law provides $14 billion in child care funding and guarantees women receipt of health coverage for their families. The state requires individuals to participate in unsubsidized or subsidized employment, on the job training, work experience, community service and/or 12 months of vocational training in order to receive benefits (Segal & Brzuzy, 1998).

Segal and Brzuzy (1998) noted that all families have a five-year limit to receive assistance and the states will have the option to provide non-cash assistance. The state is
required to assist the recipient with a personal employability plan that will assess the recipients' skills. Employability plan will identify education, training, and job placement level services needed to go into the workforce (Segal & Brzuzy, 1998).

The new law includes child support enforcement established by a Federal Case Registry and National Directory of New Hires to track delinquent parents across state lines. The registry allowed the states to locate parents who were not supporting their children and the monies would be deducted from their payroll check or wages garnished (United States Department of Health & Human Services, 2006). This law also facilitated the establishment of voluntary paternity and for individuals who fail to comply, their monthly cash assistance will be reduced by 25 percent.

All of the aforementioned are requirements in order to be eligible for Temporary Assistance to Needy Families (TANF) block grants (United States Department of Health & Human Services, 2006). In 1992, more than 15 million AFDC and non-AFDC cases were handled and child support collections were made in 18 percent of the cases (United States General Accounting Office, 1994a). The goal is to establish paternity and enforce payments of child support.

Aid to Families with Dependent Children (AFDC), Job Opportunity and Basic Skills Training (JOBS) were replaced by Temporary Assistance to Needy Families (TANF). TANF is a block grant program that provides benefits for a limited time while the recipient is actively looking for employment (Roberts, 2002). Under TANF, recipients are no longer guaranteed eligibility to receive assistance and families who received a cumulative five years of assistance will no longer be eligible for cash
assistance (Department of Health and Human Services, 1996; Center on Budget and Policy Priorities, 1996).

The employment of welfare recipients is an important step in realizing policy goals in federal welfare reform efforts. This provides an initial entry into the labor market and removes the individual from the welfare caseload. The ability of welfare recipients to retain their jobs after employment is an equally important step toward promoting long-term economic self-sufficiency (Gooden & Bailey, 2001).

An Urban Institute study revealed that the procedures from this legislation will push an additional 1.1 million children and 2.6 million people into poverty (Supper, Parrott, Steinmetz, & Mann, 1996). Matthews (1999) reported that states are federally mandated to protect children from abuse and neglect, however they are not mandated to provide basic economic support to poor families. Welfare to work programs provided services to some mothers regarding locating jobs and changing ability to support their children. According to Sawicky (2002) and Midgley (2000), critics of the law argued that a large reduction in the number of recipients was due to a strong economic growth in the years following the Personal Responsibility and Work Opportunity Act.

The AFDC program was not designed to be a permanent part of the social welfare system. The goal was to provide temporary assistance until all workers were covered by the Social Security system. However, due to the economic condition changing over the past sixty years, families are still in need of assistance. The number of single parent household has grown tremendously. Women are now head of the household and have never been married. The AFDC program provides low levels of cash assistance to
families, however, it represented a much needed safety net for poor children and their families (Segal & Brzuzy, 1998).

Segal and Brzuzy (1998) assert that the focus has shifted from a social problem to an individualized responsibility. With the changes in recent legislation, sixty years of guaranteed government support has ended. This has also resulted in a complete shift from the values of the New Deal era. Society no longer feels socially responsible for the poor. During 1996, the belief system was that it is each individual’s responsibility to provide for themselves. The Personal Responsibility and Work Opportunity Reconciliation Act was signed into legislation in 1996; however, the shift of individualism had already begun during the previous year. For example, in 1995, the state of Arizona implemented EMPOWER (Employing and Moving People Off Welfare and Encouraging Responsibility) program. This program limited the amount of funds available and encouraged the recipients to provide for their families. The families had to participate in On-The-Job training and in educational programs.

The Deficit Reduction Act of 2005 was passed by Congress and signed by President George Bush. This legislation reauthorized the Temporary Assistance for Needy Families (TANF) program of 1996. The Deficit Reduction Act of 2005 required states to bring more recipients into a productive work activities leading to self-sufficiency. The United States Department of Health and Human Services (HHS) (2005) was required to issue regulations consistent with the measurements of work participation rate. This required detailed information about work activities, uniform methods of calculation work hours and guidelines regarding verification of documentation of hours worked.
The Deficit Reduction Act provided funding of $150 million per year for healthy marriages and responsible fatherhood initiatives. The monies were provided to conduct research and demonstration projects by public and private sectors. The research findings were utilized to develop programs that encouraged healthy marriages and promoted committed and responsible fathers. The award money could be utilized for marriage education, marriage skills training, public advertising campaigns, high school education on the value of marriage and marriage mentoring programs. This Act also encouraged experts in domestic violence to provide educational programs to address issues of domestic violence (United States Department of Health and Human Services, 2005).

AFDC and TANF have many differences relative to what is believed to be important during that political era. Originally Aid to Dependent Children program started in 1935 and continued until 1962. It was realized that this program only provided services to dependent children and that families were in need of services as well. Conversely, TANF focused on providing services to the entire family according to their eligibility. Another difference from the original AFDC of the 1930s which encouraged mothers to stay at home and thirty years later TANF was developed which required mothers to work or to participate in job and educational training. This was a major shift in the views of society no longer believing that the children could benefit from the mothers staying at home. In 1967, an amendment created the Work Incentive Program (WIN) and this required mothers to work or participate in training (Abramvitz, 1996).

In the past, poor women with children were consider part of the worthy poor. The policy makers change their views about poor women with children from being worthy poor to unworthy poor. Policy-makers of the 1960s and 1970s viewed the poor as
needing experience and support with understanding the value of work. During the 1980s, the Reagan administration viewed the poor "as flawed, as lacking in civility and as victims of government benevolence" (Berkowitz & McQuaid, 1988, p. 209).

Under the Clinton Administration, almost everyone agreed the system was broken, liberals and conservatives had very different ideas about how to fix it (Gross, 1997). Human Health Services began granting federal waivers to states that would allow them to experiment with welfare reforms in their own states (Cohen, 1997; Breaux, Duncan, Keller, & Morris, 2002).

Federal dollars account for approximately half of states' total spending for child welfare services. During fiscal year 2004, the estimated spending on child welfare was 11.7 billion dollars; this is data from over 40 states. Fifty percent of funding comes from Title IV monies, 10% from Medicaid, 20% Temporary Assistance for Needy Families (TANF) and 11% from Social Services Block Grant (SSBG), according to the Urban Institute's 2005 Child Welfare Survey.

According to the Child Welfare League of America (2003), children of color, primarily African American and Latino/Hispanic, are disproportionately represented in the child welfare system. The report further stated that the overrepresentation of children of color in child welfare and other social service systems (e.g. juvenile justice) is linked to social, class, and economic factors. The United States Census data for 2000 revealed that there was no significant or marginal race differences in the incidence of maltreatment found either within the National Incidence Study (1996) or in the comparison of change since the National Incidence Study (1986). According to Sedlak
and Schultz (2001), the average African American child is not at any greater risk for abuse and neglect than a Caucasian child.

Substantiation rates for abuse and neglect of white children compared with rates for other ethnic groups reveal that African American children are twice as likely to be substantiated as abuse or neglect, while Asian/Pacific Islander children are substantiated at half the rate of white children (Child Welfare League of America, 2003). According to Schene (1998), this is an overview of the steps followed by cases processed through the Child Protective Services and Child Welfare System with the Department of Family and Children Services. For a family to become involved with the Child welfare system, someone has to make a report of abuse or neglect. Someone, being any mandated reporter, such as teachers, doctors, counselors, social workers and/or anyone who works in the helping profession. Reports are also made by family members or friends.

The first step is a screening to determine the next step, to either close the case due to insufficient information or investigation/assessment. During the assessment, the child welfare case worker decides there is no need for continuing services to protect child or need for continued CPS (Child Protective Service) involvement. If so, the case is reported to CPS and the CPS worker determines risks has subsided without services and close the case or services provided to the family by CPS or other agencies. Subsequently, the case is reviewed to determine whether the case needs to be closed, continue services, or remove the child from the home. Removal could take place with relatives or foster care. Then, birth families must appear before the Judge to determine reunification and/or continue stay in foster care (Schene, 1998).
Fortunately, organizations, like individuals, can evolve to become anti-racist. The transformation begins with developing a comprehensive understanding of how racism and oppression operates within an organization's own walls. From that analysis comes a commitment and concrete plans for dismantling racism within the organization and in the larger society (Western States Center Views, 2001, p. 14).

Morton (2002) warned The Adoption and Safe Families Act (ASFA) may have had tremendous consequences for the African American families. The Adoption and Safe Families Act requires 15 month timeframes and possible mandatory filing of termination of parental rights. According to Morton, this policy could cause thousands of African American children to become legal orphans.

Griggs v. Duke Power 401 U.S. 424 (1971) and Hazelwood School District v. United States 433 U.S. 299 (1977) are two United States Supreme Court decisions that had a major impact on employment and educational testing. From these rulings, an eighty/twenty rule was established for validating the whole test and individual items within the test. For example, if a minority group did not score within 20% of the majority group on a test or individual item, then this test was considered biased and unusable.

According to Morton (2002), with the increasing attention being placed on the overrepresentation of African American children in the child welfare system, the child welfare system should be challenged to make the necessary changes. Additionally, Morton contended that the child welfare agencies should consider the potential disparate impact of assessment scales and indexes on different groups. He believed that the
development of such tools should include collecting and analyzing data regarding the overall differences in effect for different racial and gender groups.

Overrepresentation/Disproportionate African American Children

"Overrepresentation, particularly in reference to African American children, has traditionally been used to define the high numbers of children of color in the child welfare system that are larger than their proportion in the general population" (Bettencourt & Doyle, 2004, p. 9). "Disparity means unequal treatment when comparing a racial or ethnic minority to a non-minority. This can be observed in many forms including decision points (e.g., reporting, investigation, substantiation, foster care placements, exit), treatment, services, or resources" (Hill, 2006, p. 3).

African American and other children of color in the child welfare system have been disproportionately represented and the disparities in the treatment have been a major problem and concern for many years. According to Dr. Robert Hill (2006), "disproportionality refers to the difference in the percentage of children of a certain racial or ethnic group in the child welfare system" (p. 3).

According to the Child Welfare League of America (CWLA) (2003), children of color primarily African American and Latino/Hispanic are disproportionately represented in the child welfare system. The CWLA further stated that the overrepresentation of children of color in child welfare and other social service systems (e.g., juvenile justice) is linked to social, class, and economic factors.

The United States Census data for 2000 reported that there was no significant or marginal race differences in the incidence of maltreatment found either within the
National Incidence Study (1996) or in the comparison of change since the National Incidence Study (1986). According to Sedlak and Schultz (2001), research shows that the average African American child is not at any greater risk for abuse and neglect than the Caucasian child.

The National Incidence Studies found that there were no statistically significant differences in overall maltreatment rates between African American and Caucasian families (Hill, 2006). Additionally, the overall maltreatment rates for African American families were no greater than those for Caucasians. This study showed that race was a factor in making a report to child protective services (Hill, 2006; Sedlak & Schultz, 2001). Substantiation rates for abuse and neglect of white children compared with rates for other ethnic groups show that African American children are twice as likely to be substantiated as abuse or neglect, while Asian/Pacific Islander children are substantiated at half the rate of white children (Child Welfare League of America, 2003). Families in receipt of welfare benefits doubles the risk of substantiation, and when children themselves are on public assistance increases their changes of entering into the child welfare system (Derezotes, 2003).

Foster Care Statistics, Child Welfare Information Gateway (2010) data showed that during the fiscal year of 2008, 273,000 children were in foster care: 44 % were White/Non-Hispanic; 26 % or 70,980 were Black/Non-Hispanic; 20 % were Hispanic; and 11% were other races or multiracial. In addition, of the estimated 285,000 children who exited foster care during fiscal year of 2008: 44 % or were White/Non-Hispanic; 26 % or 74,100 were Black/Non-Hispanic; 20 % were Hispanic; and 10 % were other races or multiracial.
According to AFCARS report, for the fiscal year 2009, there were an estimated 423,773 children in foster care. African American children made up 30% or 127,821 of the children in foster care although they represented 15% of the child population in 2009 (The AFCARS Report, 2010). According to America’s Families and Living Arrangements (2010), there was about 37% or 4,000,000 of African American children living with both parents; nearly 47% or 5,000,000 of African American children living with their mother only; and almost 3% or 400,000 of African American children lived with their father only.

A study revealed the differential treatment of African America children as a result of discriminatory practices is often surfaced during the over reporting of child abuse and neglect of minority children (U.S. Department of Health and Human Services, 2003). Another study showed that less than 50% of reportable child maltreatment situations are reported and that there is bias in the report, who gets reported and the types of maltreatment reported (Hines, 2004).

In 2008, data from the State of California showed that 475,897 children were referred to the child welfare system. African American children comprised 5.8 percent of the child population but accounted for 13.8 percent of the child maltreatment referrals. This signified an overrepresentation at the decision-making point. In comparison, White children comprised 31.62 percent of the child population and 25.26 percent of the maltreatment referrals. Additionally, Hispanic children comprised 48.89 percent of the child population and 48.8 percent of the referrals (Needell et al., 2010).

Data from the National Child Abuse and Neglect Data System (NCANDA) and published by the U.S. Department of Health and Human Services reflects that blacks
fatality rate was 29.4%, significantly higher that their child population percentage, while 43% are white, significantly lower than their child population (U.S. Department of Health & Human Services, 2006). Dougherty (2003) found that overrepresentation is a significant issue in the United States despite no differences in the occurrence of child abuse among all races and this has been documented in all fifty states.

Washington State data indicated that African American children were nearly twice as likely as White children to be referred to CPS. African American children had the second highest rate at approximately 65 per every 1,000 children in the child population. White children were referred to CPS at approximately 46 per every 1,000 children in the child population (Washington State Racial Disproportionality Advisory Committee and the Department of Social and Health Services, 2008b).

States were being required by the federal government to reduce the number of children in the child welfare system and the prevention of children coming into care. According to BACW (2008), African American children were tragically overrepresented in the child welfare system. Hardin (2008) found that:

Racial disparities were evident at every critical decision point. Children of color enter foster care at higher rates, even when they and their families had the same characteristics as comparable white children and families. They remained in foster care for longer periods of time than white children. Longer stays in foster care contributed to racial disproportionality because they increased their numbers in the system in any given year. Families of color received fewer services and they experienced lower reunification rates than white children (p. 10).
Robert Hill noted that “Black or African American children are more likely to be reported, investigated, substantiated, and placed in care, and that they stay longer in care and are less likely to be reunified with their families” (Hill, 2006, p. 3).

A study conducted in the State of Florida re-examined and focused on permanency options for the 100 children in the child welfare system the longest, and it revealed that 85% were African American and 62% were African American males. A comprehensive review was conducted on each child’s case record in order to identify potential adults, especially relatives that may have been able and willing to provide a permanent home to the child through guardianship or adoption. Out of the 100 children identified, three had been adopted and three more were in adoptive placement (BACW, 2008).

The foster care system was designed to provide temporary care for children who are unable to live with their birth families. During the 1950s and 1960s, foster care was developed to look after children who were not able to be cared for by their birth parents due to hospitalization for either ill health or childbirth. In the 1970s, the death of a child (Maria Colwell) in the 1973 brought awareness that children were suffering from serious abuse by adults. This awareness changed the face of foster care to caring for children who were known to be in danger with birth families (Barratt, 2002).

Foster care in the state of Georgia is under intense criticism by public and private interests who question the Child Welfare system’s ability to fulfill its goals of protection, re-building the family unit and placement of children. According to Health and Human Services (HHS, 2007), there is a significant disproportion of African American children in foster care greater than any other race and ethnicity group. A Caseworker’s initial
decision to remove a child from his/her home involves weighing the risks and benefits of
the children remaining in the home against separation from caregivers. The Caseworker
has to address the factors of providing protection from harm and this sometime outweigh
disruption of the family system (i.e., changes in school, separation from peer support
systems).

Reunification is a term that includes physical reintegration as one component.
Reunification involves optimal emotional reconnection to the community of origin (Petr
& Entriken, 1995). Reunification is reasonable efforts made to reunify the child with the
family. The birth parents are given goals to address before the children can be returned.
Goals such as obtain housing, stable employment, attend and participate in substance
abuse treatment and/or parenting classes if applicable (Petr, 1998).

According to Lindsay (1994), guidelines for the removal of children may well be
vague and inconsistent. Lindsay reported that “an underlying guideline does exist,
although it may not be stated explicitly in many agencies: adequacy of income” (p. 154).
It is important that reasonable efforts be taken for keeping families together. Reasonable
efforts are as follows: Intensive, home-based family services and counseling, crisis
intervention, cash payments for emergency needs, food and clothing, housing, emergency
shelter, respite care, day care, treatment for substance abuse, treatment for physical,
sexual and emotional abusers and their victims, parenting skills training, life skills
training, household management and transportation (Petr & Barney, 1993). These
aforementioned are examples of efforts to prevent children from coming into foster care
as well as services for children, who were being reunified.
During 2003, 11 California counties were given modest funds to test the implementation of differential responses. Instead of Caseworkers having the same response for all child abuse and neglect reports; they responded differently based on the type and severity of the allegations, any history of previous reports, and the family’s willingness to participate in services. The preliminary findings showed that the differential response helped to keep children safe while avoiding being intrusive in families’ lives. Eighty-two percent of the families were referred for services to Family resource centers and 57 percent were referred to ongoing case management, which allowed the children to remain in the home (North American Council on Adoptable Children, 2007).

The Family Assessment and Stabilization Team (FAST) is comprised of staff members who immediately initiate efforts to contact birth parents and relatives. Relatives are located in other states and some even out of the country. FAST team members search for and located 40 or more relatives for each child and about 10 of who become permanent family placements (FAST, 2007). A six-year follow-up of a successful experiment study was conducted on 120 children that were receiving services from the state welfare system. At the beginning of the study, all of the children were in out-of-home placements. The families received 90 days of intensive in-home services, 75 percent of the children in the experimental group were reunified (Walton, 1998). The services in which these families participated were individual and family counseling. The families had access to their Caseworker 24 hours a day, seven days a week in an event of crises. Treatment plans were flexible and comprehensible and tailored to meet the specific needs of the family.
According to research completed by psychologists, it is believed that racial/ethnic matching of therapists with clients is beneficial evidence by lower rates of treatment drop-out, better attendance, and better therapeutic outcomes (U.S. Department of Health and Human Services, 2003). The National Incidence Study (NIS) (2004), African American families' challenges with having access to support systems and social services were also viewed as influencing African American children's entry into foster care. Such supports and services include affordable and adequate housing, substance abuse treatment, and family services such as parenting skills and counseling. It is difficult for African American families to access the support because the support is not normally available in their communities. Access to legal representation in courts responsible for making decisions about children reported to have been abused or neglected was also a factor influencing African American children's entry into foster care.

In a study conducted in Kings County, Washington focus groups revealed the differences in how family preservation and reunification efforts are handled. The findings showed that African Americans and Native Americans who support and the use of resources of extended family versus individuals are not considered. The national findings showed that 56% of African Americans were placed in foster care while 72% of Caucasian children received services in their home (U.S. Children's Bureau, 1997; Barth, 2001; George & Lee, in press; Needell et al., 2001).

Barth, Miller, and Green (2000) conducted a thorough review of the literature concerning the overrepresentation of African American children in foster care. Barth and his colleagues believed that there were a number of factors such as substance abuse, incarceration, and higher mortality rates for African American. Additionally, only a
small difference in the way black children are treated in child welfare’s decision making process attributes to the overrepresentation.

Barth and colleagues found no evidence that would lead them to think this disproportionality is not, generally, in the best interests of the children served. To support this conclusion they point to studies that show that black children benefit significantly from receiving child welfare services (i.e., reduced mortality and incarceration rates and increased access to services). Disproportionality would be a problem, they say, if the system was not providing children with what they need to be safe (Barth, Miller, & Green, 2000, pp. 1-2).

African American and Hispanic children are more than twice as likely to live in poverty as non-Hispanic white and Asian-Pacific Islander children. Almost one third of African-American (30%) and Hispanic (28%) children live in poverty while rates were much lower for White (10%) and Asian Pacific Islander (12%)(U.S. Bureau of the Census, 2001).

In a study that examined the factors associated with screening CPS reports in 12 sites, Gryzlak and colleagues (2001) found that race alone was not a factor in the decision to screen calls in (Gryzlak et al., 2001). However, white children were more likely to be investigated for cases of sexual abuse and children of color were more likely to be investigated for cases of physical abuse and neglect.

National Incidence Study-3 data, Sedlak and Schultz (2001) found no overall influence of race on the likelihood of investigation. Although, they did find that African American families were more likely to be investigated if the allegations included
emotional maltreatment, physical neglect, fatal or serious injury, or alcohol or drug involvement, or if a mental health or social service provider made the report.

A study conducted on three-year-old children 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 so, when one controlled for the likelihood of abuse injury, minority children continued to be reported more for abuse than white children (Lane et al., 2002). Chibnall, Dutch, and Jones-Harden (2003) selected nine public child welfare agencies to participate in a study on the overrepresentation of African American children. The nine public child welfare agencies were in the following States, Georgia, Virginia, Texas, North Carolina and two agencies in Minnesota. The individuals who were selected to participate were administrators and directors, supervisors of Child Protective Services (CPS), adoption and foster care workers and direct service staff.

Additionally, staff members from partner agencies participated in individual and group discussions. Below are examples of statements made in regards to what the individual believes to be reasons for the overrepresentation:

1. “There’s a lack of black resources. We don’t have resources in place for (black) people to get help. And if there are resources, there are so many hoops that you have to jump through to get something, even a little bit. People just say, “Forget it. Just take my kids or I’ll take them and whatever happens, happens.” It’s too hard. It’s too complicated for people to get anything” (Direct service worker);

2. “I think any individual, regardless of their minority status, that ends up in a poverty situation is more visible, because they’re having to access free clinics,
and social services, and welfare, and those types of things... Child abuse, it certainly crosses the broad range of socio-economic classes, however, if you have more wealth to your name, it's easier to cover up. People are less likely to report you” (Administration);

3. “I think it’s not only African Americans but also poor people in general. Here I am, a social worker with a Master’s degree. I’ve got the training. But, at my first court experience, I was really afraid to enter the courtroom (because the people were different from me). And so, if it (being African-American) has that kind of impact on me, imagine what kind of impact it could have on someone else that is not at my level” (Direct service worker); and

4. “The black culture that we’ve created since we’ve been in this country...is not about ‘old world’ customs. We don’t have ‘old world’ customs that (we brought) over here. The other nationalities that I’ve worked with, the Hispanics especially, there is a strong sense of culture...The child welfare system is a reaction to how society has fallen apart in the African American community. There is no culture. There is poverty, drugs, teen pregnancies, and no fathers at home. So we take the kids in, clean them up, and put them out, but the problems started a long time ago” (Direct service worker).

Children’s Rights, Inc. instituted lawsuits in approximately 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. A court-ordered settlement in Tennessee in May 2001, the state agreed to have an independent expert conduct statewide evaluations to
identify disparities in order to reduce disparate treatment of African American children in foster care (Hill, 2004).

Hill (2004) conducted a study that utilizing logistic regression models to discover the variables that were the strongest predictors of placement in foster care. His analysis revealed that there were five strong predictors: race of child (i.e. black versus white), substance abusing parents, children with disabilities, Medicaid recipients, and cases with abuse allegations. The analysis also revealed that 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. In addition, race remains a strong predictor of foster care placement, even when combined with other determinants (Hill, 2004).

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. On the other hand, Dworky et al. (2007) found that the risk of being investigated for maltreatment was lower among TANF applicants who were African American or Hispanic than among the families of TANF applicants that were non-Hispanic White.

A study conducted in five states: Arizona, Kentucky, Michigan, North Carolina and Texas participated in numerous training along with Undoing Racism Workshop. Each state showed a reduction in the number of children in care from fiscal year 2006 to 2007. Additionally, these states also showed a reduction in the number of African
American children in care during this same time period. A Los Angeles County study also revealed that they had the largest reduction with the overall decrease being 2468 fewer children, with 1100 fewer African American children in care in 2007 (BACW, 2008).

Undoing Racism Workshops were conducted in the state of Kentucky: Jefferson and Fayette counties. This training was offered to all human service providers, family court judges, community partners, law enforcement, agency contractors, members of local governments, and members of the public BACW, 2008). An evaluation of the Undoing Racism training was conducted by the Kent School of Social Work at the University of Louisville. The participants participated in a pre and post written survey. Findings from the evaluation revealed:

(1) that the participant’s knowledge of racial issues improved; (2) they became more aware of implications of institutional forms of racial discrimination and exclusion; (3) training was effective for participants from various backgrounds; and (4) a majority of the participants expected the training to positively impact their professional practice and personal relationships (Johns, Antle & Barbee, 2008).

Under President Bill Clinton’s Administration, the Race Advisory Board concluded four areas of concerns:

Racism is one of the most divisive forces in our society; racial legacies of the past continue to haunt current policies and practices that create unfair disparities between minority and majority groups; racial inequities are so deeply ingrained in American society that they are nearly invisible;
and most white Americans are unaware of the advantages they enjoy in this society and how their attitudes and actions unintentionally discriminate against persons of color (Dixon, 2008, p. 136; Sue, 2007).

Dixon (2008) proposed a legal federal legislative act to address disproportionality for African American children in the child welfare system by the name of African American Child Welfare Act. This federal act was designed to address the disparities identified at each decision point for children involved with the child welfare system. This act was structured to provide equal access and allow integration of the races. In addition, Dixon believed in order to have a radical change in institutional policies and subjective decision making that a change in federal law is important (Dixon, 2008).

The African American Child Welfare Act is a proposed federal act that addresses disparities in nine areas such as, legal burden of proof; risk assessment screen for racial bias; additional evidentiary support for removal; mandatory establishment of paternity; early intervention methods; cultural competence training, funding; and amendments to Adoption and Safe Families Act (Dixon, 2008). In each of these areas, Dixon has identified methods of addressing disparities for African American families.

In a book written by Martin Guggenheim titled, “What’s Wrong with Children’s Rights?,” he discussed a folk parable where people in a town are working extremely hard to save babies from floating down a cold stream. A visitor in the town is asked to assist in this crisis and he learns that the people have been rescuing babies all night down the stream. The visitor refuses to provide assistance and the people in the town became upset with him. The townspeople started asking him questions such as, “Don’t you care?” The visitor responds, “It strikes me that your efforts are ultimately inadequate-
obviously somebody keeps putting those babies in the stream, so I’m going to go upstream, find the source, and put an end to it once and for all” (Guggenheim, 2005).

Dixon believed that this book pointed out an important question; “Do we care enough to put more efforts into preventing children from entering the foster care system than into maintaining the institution itself” (Dixon, 2008, p. 145).

Case Manager Decision-Making

The foster care system was designed to provide temporary care for children who are unable to live with their birth families. During the 1950s and 1960s, foster care was developed to look after children who were not able to be cared for by their birth parents due to hospitalization for either ill health or childbirth. Around the 1970, after a death of a child (Maria Colwell) in the 1973 brought awareness that children were suffering from serious abuse by adults. Then, this changed the face of foster care to caring for children who were known to be in danger with birth families (Barratt, 2002).

Case Workers have to make the decision regarding the removal of a child from their birth family and/or primary caregiver involves weighing the risks and benefits of the child remaining in the home (DeRoma, Kessler, McDaniel, & Soto, 2006). Case Workers have to consider protecting the child from harm while reviewing other disruptions (i.e., change in school, separation from peers and support system). Before reunification can be an option, the birth families have to have identified and addressed the concerns.

Hill (2004) believed that the overrepresentation of African Americans in the foster care system is possibly linked to institutional racism in child welfare. Hill
describes an important characteristic for institutional racism as covert or overt, unconscious or conscious and unintentional or intentional. He believed for racism to occur it’s not necessary for a group of people to assemble in a backroom to consciously conspire against another group. Downs (1970) observed that 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).

Altstein and McRoy (2000) believe in order to reduce the prevalence of individual or institutional racism, professional need assistance with learning to enhance their sensitivity toward and appreciation of diverse cultural beliefs and customs. Training for social work leads to professional expectations of quality in social work. Social Workers have images of ‘good case management’ into their professional work (Andersen & Ahrenkiel, 2003). Social workers take a professional and individual view point according to their professional standards and ethics. This could sometimes lead into social workers being involved in conflicting pressures.
Social workers evaluate other social workers from their professional and pedagogical knowledge. Some social workers become frustrated after completing their education, when they are not able to maintain the standards that they learned during training (Anderson & Harris, 2005). Social workers have to meet requirements for performance and competition and this could become stressful and increase tension in the workplace. Staff tends to develop defense mechanisms such as major absences, criticism about the pressures and demands or a passive involvement in their work. Soft skills are skills that case workers could improve their own learning and performance through reflection, problem solving and working with others are important for complex case management work (Gorman, 2000).

The National Incidence Study (NIS) (2004), African American families’ challenges with having access to support systems and social services were also viewed as influencing African American children’s entry to foster care. Such supports and services include affordable and adequate housing, substance abuse treatment, and family services such as parenting skills and counseling. It is difficult for African American families to access the support because the support is not normally in their communities. Access to legal representation in courts responsible for making decisions about children reported to have been abused or neglected was also as a factor as influencing African American children’s entry into foster care.

Worship communities, extended families, friends and neighbors, youth groups and other community resources are viable resources. The aforementioned resources are important with keeping children safe within their community (Schene, 1998). In poor and disadvantaged neighborhoods, residents are forced to submit to the formal and
punitive system of child welfare due to the lack of social programs and other supporting resources (Roberts, 2007). In earlier years of history of child protection, individuals and community response was to protect children. Public support was needed to build the consensus necessary to intervene in family life. Community and neighborhoods needed to go back to supporting, strengthening, parenting, and protecting the child (Farmer, 1997).

Contributing factors that experts considered to be the underlying factors that resulted in the removal of children from their families were poverty, drugs and other substance abuse, child abuse, domestic violence and mental illness. A number of states and local child welfare agencies have acknowledged the existence of these factors and have begun to make changes in policies, practices, and methods used to provide services. In some of these states, they are showing the reduction of overrepresentation of children of color in their systems (BACW, 2008).

A study conducted in Tennessee counties and another of 700 counties in fourteen states identified similar relationships to placement disparity. In this study, single female-headed households and residents with less than a high school education tended to have higher placement rates but lower disparity rates (Wulczyn & Lery, 2007; Wule cyn, Lery, & Haight, 2006). The statement of the problem examined that few than 50% of all agencies that participated in a survey for Child Protective Services reported they actually utilize a structured decision-making model, safety assessment, or risk assessment (HHS, 2003). This shows that over 50% of Caseworkers are making decision to remove children from their birth parents without utilizing a structural method. Caseworker’s
biases in decision-making can be minimized with problem-solving in supervision with supervisor (Gold, Benvenishty, & Osmo, 2001).

In 2003, 11 California counties were given modest funds to test the implementation of differential response. Instead of Caseworkers having the same response for all child abuse and neglect reports; they responded differently based on the type and severity of the allegations, any history of previous reports, and the family’s willingness to participate in services. The preliminary findings showed that the differential response is helping to keep children safe while avoiding being intrusive in families’ lives. Eighty-two percent of the families were referred for services to family resource centers and 57 percent were referred to ongoing case management, which allowed the children to remain in the home (North American Council on Adoptable Children, 2007).

The Family Assessment and Stabilization Team (FAST) is comprised of staff members who immediately initiate efforts to contact birth parents and relatives. Relatives were located in other states and some even out of the country. FAST team members search for and located 40 or more relatives for each child and about 10 of whom became permanent family placements (FAST, 2007). It is important that reasonable efforts are made and steps for keeping families together. The reasonable efforts are as follows: Intensive, home-based family services and counseling, crisis intervention, cash payments for emergency needs, food and clothing, housing, emergency shelter, respite care, day care, treatment for substance abuse, treatment for physical, sexual and emotional abusers and their victims, parenting skills training, life skills training, household management and transportation (Petr & Barney, 1993). These were
efforts to prevent children from coming into foster care as well as services for children, who were being reunified. The important of community resources are major contributions in keeping a child safe are worship communities, extended families, friends and neighbors, youth groups, and other community resources (Schene, 1998).

In earlier years of the history of child protection, individuals and community response was to protect children. Public support was needed to build the consensus necessary to intervene in family life. Community and neighborhoods need to go back to supporting and strengthen parenting and protecting the child (Farmer, 1997). According to the Child Welfare League of America (2003), cultural competence is the ability of individuals and systems to respond respectfully and effectively to people of all cultures, classes, races, ethnic backgrounds, sexual orientations, and faiths or religions in a manner that recognized, affirmed, and valued the work of individuals, families, tribes, and communities, and protects and preserves the dignity of each.

Harris (2004) believes that it was imperative for practitioners to understand “their own biases, prejudices, racist thoughts and feelings” (p. 163). In a study conducted by Harris, mandated reporters were asked, “What do you do with culture as you are assessing risk?” Their responses were:

- “I don’t really think culture is a factor in assessing risk and safety. Some workers have the ability to adjust in their head given these people’s history and such. For example, what age do you leave children to be supervised? Our bilingual worker will decide if this is a higher or lower risk than for the general population. The risk factor will be based on her experience with families in this culture. We would accept the worker’s ability to adjust risk based on her own experience.”
• "They are not from a different country (African Americans and Native Americans), but they may be viewing things differently and we don’t think about that."

• "We don’t always recognize what differences we should be getting help on with African American families. We don’t consciously think about things that African Americans may be viewing differently. With African American families their cultural differences are so subtle than say a Samoan family. I don’t think we necessarily have done so much around African American families unless there is something that rises to the level that is different that we recognize and therein lies the problem. For African American families I am not sure that we recognize the differences we should be getting help on."

Cultural Diversity and Cultural Competence training for the child welfare workers in the State of Georgia occurs within the first 12 weeks of employment. Child Welfare workers received this training prior to receiving a caseload. The training was one day long and was conducted in combination with various training according to the Department of Human Resources (2007). A study completed in 2000 investigated the extent to which specific training programs influenced multicultural competencies. In Ontario, child welfare employees completed the Multicultural Awareness Knowledge and Skills Survey (MAKSS) on two separate occasions. The pre- and post-test, and with an experimental and comparison mixed method model design. This designed compared the pre and post test on measures of multicultural competence. The results from the study showed significant awareness of cultural and showed the employees felt that they benefitted from the cultural competency training. Age and level of education
significantly predicted 25% of the variance in overall multicultural competency scores. The findings had implications for developing similar training programs (DeRoma, Kessler, McDaniel, & Soto, 2006).

Cultural competence is the ability of individuals and systems to respond respectfully and effectively to people of all cultures, classes, races, ethnic backgrounds, sexual orientations, and faiths or religions in a manner that recognizes, affirms, and values the worth of the individuals, families, tribes, and communities, and protects and preserves the dignity of each (CWLA, 2006). Cultural Competency Training is designed for individuals to gain knowledge about different races, ethnicities, backgrounds, value systems, and orientations and incorporating that information into all aspects of practices with children and families (Child Welfare Information Gateway, 2005).

Child welfare agencies should enhance their cultural competency by recruiting bilingual and culturally proficient workers and foster families, ensuring that workers are sensitive to cultural differences, and incorporating assessments of cultural competency skills into workers performance evaluations (Bass, Shields, & Behrman, 2004). Child welfare agencies utilize the risk assessment to guide them in their decision-making to predict the risk of future harm to a family member in deciding the appropriate services needed (Hollinshead & Fluke, 2000). According to Baird and Wagner (2000), there are two types of risk assessments: consensus based systems and actuarial system. Consensus based system is based on the experts in the field judgments. Actuarial system is empirical factors that are statistically associated with future maltreatment.

There are a number of California counties that use an actuarial tool, named California Family Risk Assessment (CFRA). California Family Risk Assessment is
believed to be better than the consensus-based instruments because it accurately classify families into risk categories (Johnson, 2004). Research shows that CFRA are equally valid for white children and families of color. The findings from this research indicates that this instrument can contribute to reducing bias in child welfare decision making in addition, the potential of reducing disproportionality (Austin & D’Andrade, 2005).

Family Group Conferencing is another intervention that believes that families have the right to be involved in the decision making in reference to their child (Sundell & Vinnerljung, 2004). Additionally, this intervention assisted with improving the decision-making as well as increased the engagement with families of color (Waites, Macgowan, & Pennell, 2004). A study conducted in the State of Texas on FGDM revealed that families who participated in this intervention suggested that both parents and extended relatives were more satisfied with the process than the traditional child welfare practices (Sheets et al., 2009). In addition, the children reported feeling less anxious. This process allowed for the children to be “more adjusted” in kinship placements (Sheets et al., 2009, p. 1187).

A qualitative focus group with African American, American Indian and Hispanic professionals and non-professionals suggested that family group conferences are often culturally compatible with communities of color. African American focus group participants stated that it is customary for African American families to solve problems amongst themselves and this is believed to be tied their “history of enslavement” and segregation (Lemon, 2005, p. 22; Pennell, 2009). Waites et al. (2004) concur that the evidence stated above with a focus group of African American, American Indian (specifically Cherokee) and Hispanic communities and the participants revealed that
family group conferences intervention was "congruent with their traditions" (Pennell, 2009, p. 82).

Sweden conducted a study that examined family group conferencing and they found that children whose families participated in this model actually had higher rates of out of home placement, as well as higher rates of subsequent substantiated maltreatment when compared with children receiving traditional child welfare services (Sundell & Vinnerljung, 2004). Lemon (2005) believes the reason for these findings are that the overall lack of quality and accessible family services in the area as well as Sweden's socio-cultural climate precluding the full acceptance of this intervention.

Differential response is a response from child welfare agencies in regards to child maltreatment. Differential response is two different response categories: Investigation track or Assessment track. Investigation track are reports that involve clear and imminent danger to a child or involving possible criminal charges. Assessment track are families involving less serious reports of maltreatment and these families are offered intensive and culturally appropriate services (Schene, 2001). This differential response allows non-confrontational and supportive nature of engaging families that tend to distrust the child welfare system and allows for families to receive services that are strategically culturally diverse. This intervention also prevents families whose children are not in imminent danger out of the child welfare system (Austin & D'Andre, 2005).

Evaluators believes that differential response systems are effective with producing positive outcomes in areas of greater satisfaction with services, reduction of child maltreatment reports, improved child behavior and fewer problems with alcohol, drugs and domestic violence with the families who participated (Institute of Applied
Research, 2004; Loman & Siegel, 2004). Schene (2001) reports the importance of Differential Response (DR) to provide “intensive and culturally appropriate” (p. 4) family support services before, during and after the involvement with child welfare.

A randomized study in Ohio on the Alternative Response Pilot Project found that families under this intervention experienced an increase in overall services and there was no difference (or disparity) in the number or provision of services between White and African American families (Loman, Filonow, & Siegel, 2010). The State of Minnesota reported that the Differential Response had reduced the number of out of home placement which was keeping families intact, particularly for African American children and families (Ault, 2007). Franklin County in the State of Ohio reported that 54% of African American children in 2006 before the Differential Response and this number decreased to 50% in 2008. According to National Quality Improvement Center on Differential Response in Child Protective Services (2009), this was the lowest county percentage in 15 years.

A number of studies indicated that disparities at many points along the child welfare pathway during the referral of child maltreatment, assignment of investigation and substantiation of alleged abuse or neglect (Chand, 2000; Karp, 2001; Drug Policy Alliance, 2005; Zuravin et al., 1995; Hill, 2005a). According to Harris and Hackett (2008), referent bias has been cited as a source for disproportionality at the point of entry into the child welfare system. A common source of referrals to Child Protective Services (CPS) is the medical system. Karp (2001) and Drug Policy Alliance (2005) state that white women and black women were equally likely to test positive for drugs, African
American women were 10 times more likely to be reported to Child Protective Services (CPS) after delivery.

Several researchers found that African American families are more likely to be referred for mental health services and that these services were found to be inadequate (Garland, Landsverk, & Lau, 2002). A study conducted in Kings County, Washington revealed worker’s attitudes and bias plays a significant role in determining the quality and quantity of services. “Racist attitude of workers who assume there are no resources in the families or extended families (attitude of) so why bother, we can put services in and it will not help!” and/or “Racist belief that people don’t change based on the stereotype and so the worker has low expectations” (Harris & Hackett, 2008).

Racial bias among workers or other professional class or race differences with their client might lead to cultural misunderstanding (Chibnall, Dutch, & Jones-Harden, 2003); the findings from the study conducted in Kings County, Washington confirm this statement (Harris & Hackett, 2008). Harris and Hackett believe that checks and balances at each decision point in the child welfare system assure fair and equitable treatment of African American, Native American, and other children and families of color.

The findings from a research study that involved 39 pediatric hospitals revealed that when black children are found to have injuries, they are more likely to be evaluated for abuse than white children who have the same or similar injuries (The Children’s Hospital of Philadelphia, 2010). In another study, black women whose newborn babies tested positive for cocaine were 72 percent more likely to have their baby taken away than their white counterpart (Neuspiel, Zingman, Templeton, DiStabile, & Drucker, 1993). Another study reviewed the substantiation of allegations by caseworkers, and
found that caseworkers were more likely to substantiate allegations of neglect and maltreatment against black and Latino families. The only divergent variable between the cases was race (Eckenrode, Powers, Doris, Munsch, & Bolger, 1988).

Caseworkers were given hypothetical situations and asked to evaluate for risk to the child. The scenarios were identical except with the race of the family. According to Roberts (2002), caseworkers reported that if the family was black, the workers believed that the child was at greater risk.

Weibush, Freitag, and Baird (2001) conducted a study that examined the risk assessment tool and they found that there are no differences among ethnic groups in the ability to assess or predict future risk. Another study conducted by Rolock and Testa (2001) showed that Caucasian workers substantiated a higher proportion of their cases than their African American counterparts and were much more likely to substantiate physical abuse. Rolock and Testa (2001) also found that Caucasian caseworkers did not substantiate abuse and/or neglect in a larger proportion of cases involving African Americans than Caucasians. Moreover, in cases of substance exposed infants, Caucasian workers did substantiate a larger percent of cases involving African Americans. In the state of Illinois, black children were reported to CPS at three times the rate of white children (Rolock & Testa, 2004).

Chibnall, Dutch, and Jones-Harden (2003) conducted a thorough literature review on overrepresentation of African American children. Chibnall et al. concluded that there have been few studies to examine racial disparities in family preservation services, studies suggest racial discrepancies in decisions to maintain children of color in their homes or to reunite the child with their family of origin. Notwithstanding, the majority
of Caucasian children receive support to remain in their home whereas the majority of African American children receive foster care placement (Harris, Tittle, & Poertner, 2001).

A number of researchers utilize vignettes to explore how race affects caseworkers' decisions about case plans. Caseworkers were presented with identical cases and the only difference in the vignette was the race of the family. Roberts argues that in a training of caseworkers race was the preeminent factor influencing worker's decisions about the case. Britner and Mossier (2002) found that the differences in the decision to place a child in out of home care only in the weight various professionals (e.g., judges, social workers, CASAs) gave two different types of information (e.g. risk of re-abuse, stability of the family and severity of abuse). In this study, race was not considered in the decision making process.

James and colleagues (2008) work with staff in Texas in an attempt to reduce racial disparities. James addressed four categories: 1) Undoing Racism workshops; 2) cultural competence training; 3) community awareness initiatives; and 4) leadership development. The findings from this initiative showed that there was an overall reduction in disparity rates. An evaluation of the Undoing Racism training revealed that participants left the training experience with a feeling of satisfaction and an increased knowledge and awareness regarding race, racial dynamics and racism (Johnson, Antle, & Barbee, 2009).

A qualitative study of Michigan child welfare systems found a lack of an agency infrastructure, including policies, practices and resources as a result promoted equitable

Factors Influencing Foster Care Placement

Poverty/Neglect

Federman, Garner, and Short (1996) contend that poor families normally reside in extremely impoverished urban areas. Joblessness, out-of-wedlock births, substance abuse, crime, violence, and poor schools are public health burdens to which inhabitants of these neighborhoods are exposed. According to the U.S. policy today, these are some of the most serious challenges (Federman, Garner & Short, 1996). During the 1960s, the war on poverty focused on enhancing neighborhood employment opportunities and preparing poor community residents to take advantage of the new opportunities. Community Action Agencies (CAAs) spearheaded neighborhood-based initiatives and this allowed the federal strategy to accomplish these objectives (Halpern, 1996).

Research shows risk factors, such as poverty, living in impoverished neighborhoods, or single parent status, contribute to involvement with the child welfare system (Hines et al., 2002; Jargowsky, 2003). Jargowsky (2003) suggests that African Americans and Hispanics are more than likely to live in impoverished communities than their white counterparts.

Austin, D’Andrade, and Lemon (2005) theorize that the combination of the risk factors identified above along with a lack of adequate prevention services for African American families brings them to the greater attention of the child welfare system versus other families that are dealing with the same stressors. The risk factors stated above and
stressors can contribute to the differences in the number of referrals, investigations, substantiation and placement rates for families of color.

Contributing factors that experts consider are the underlying factors that result in the removal of children from their families are poverty, drugs and other substance abuse, child abuse, domestic violence, and mental illness. A number of states and local child welfare agencies have acknowledged the existence of these factors and have begun to make changes in policies, practices, and methods used to provide services. In some of these states, they are showing the reduction of overrepresentation of children of color in their systems (BACW, 2008).

Chibnall, Dutch, and Jones-Harden (2003) selected nine public child welfare agencies to participate in a study on the overrepresentation of African American children. The nine public child welfare agencies were in the following states: Georgia, Virginia, Texas, North Carolina and two agencies in Minnesota. The individuals that were selected to participate were administrators and directors, supervisors of Child Protective Services (CPS), adoption and foster care workers and direct service staff. In addition, staff members from partner agencies participated in individual and group discussions. Below are some of the statements made in regards to poverty:

- "I think (racial disproportionally) has a great deal to do with socio-economics. It has to do with society. It has to do with politics. It has to do with all the barriers that society and the world has put up for people of color, for poor people. It has to with the struggle" (Administration);
• "You have your money, and then you (have the) people...and the blacks are going to fall at the bottom because of their income and their locality, and the lack of jobs and education and all of that" (Direct service worker); and
• "We have waiting lists forever to get any kind of services, (including) substance abuse, domestic violence, (and) parenting classes. When you go into different neighborhoods, Caucasian neighborhoods, we make a referral... within days, they have the services they need. My clients wait months. If we put in the referral or the case is in court but the client hasn't gotten services yet, they'll pull those kids" (Direct service worker).

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 and not for actual abuse (Administration for Children and Families, 2003). Research shows that African American families are least likely of all racial groups to receive family preservation services and/or be reunified with their biological family (U.S. Government Accountability Office, 2007a).

In a study conducted in Kings County, Washington, focus groups revealed the differences in how family preservation and reunification efforts are handled. Findings showed that African Americans and Native Americans who supported the use of resources of extended family versus individuals were not considered. However, national findings showed that 56% of African Americans were placed in foster care while 72% of Caucasian children received services in their home (U.S. Children’s Bureau, 1997; Barth, 2001; George & Lee, in press; Needell et al., 2001).
Other factors believed to contribute to the disproportionate number of African American children in the child welfare system includes family variables such as parental incarceration, poverty, substance abuse, along with systemic factors such as reporting bias and inequity in service delivery (Hines, Lemon, Wyatt, & Merdinger, 2004). The study on the overrepresentation of African American children, which was conducted by Chibnall, Dutch, and Jones-Harden (2003), involved the selection of nine public child welfare agencies from Georgia, Virginia, Texas, North Carolina, and Minnesota. Other observations made in individual and group discussions were:

- “It isn’t until the family situation becomes worse and worse and worse and then there is some sort of crisis that involves physical abuse or something more serious that child protection gets involved...There would be a benefit and maybe you would avoid the crisis later on if you could give appropriate services for families earlier” (Supervisor);

- “One of the things that is a real impediment for us is that we are somewhat crisis oriented and it cuts down a lot on the plan for a thoughtful approach to constructing a service system. We’re trying but it is really a hindrance when we are always kind of running ragged trying to prevent some imminent crisis from occurring” (Supervisor); and

- “We are now diverting families to community based agencies where there are family advocates who go out and provide services. The goal is that they will not come back to our attention. They will get the services they need to remain intact and stable” (Supervisor).
The U.S. Census Bureau (2007) and United States Government Accountability Office (2007b) reported that poverty has strong relations to minority status in the United States. With the economic improvements with Welfare Reforms, there is little improvement for minority families in the poverty category, although there has been a decrease in welfare receipts and an increase in employment (Moore & Vandivere, 2000).

African American children are more than three times more likely to live in poverty than non-Hispanic White children and up to 14 times more likely to live in impoverished neighborhoods than their White counterparts (Drake & Rank, 2009; U.S. Census Bureau, 2007). According to data from the NIS-3, “children from families with annual incomes below $15,000 were 22 times more likely to experience harm” (Barth, 2009, p. 12).

NIS-4 reported that higher rates of maltreatment were found among children from low socioeconomic backgrounds and they experienced maltreatment five times the rate of their counterparts from higher socioeconomic backgrounds (Sedlak et al., 2010). NIS-4 also revealed that alcohol and drug abuse is only implicated in a small portion of child maltreatment (Sedlak et al., 2010). Texas Health and Human Services Commission and Department of Family and Protective Services (2006) found that poverty and neglect together increased the likelihood of a CPS intervention.

Family Characteristics

A comparative study of risk assessment and recommended interventions in Canada and Israel was conducted to examine how professionals assessed children at risk and their parents and decisions about interventions. One hundred and eighty one (181)
child welfare workers participated in this study from the two different countries. The results from the study showed that there is significant difference found between the countries in regards to worker's age and level of experience. Canadian workers tended to be older and more experienced than Israelis. There was a significant difference with recommendations for removal of more Canadian children than Israeli children. Israeli workers were more influenced by the mother's cooperation than Canadians (Gold, Benbenishty, & Osmo, 2001).

According to America's Families and Living Arrangements (2010), there were about 37% or 4,000,000 African American children living with both parents; nearly 47% or 5,000,000 African American children living with their mother only; and almost 3% or 400,000 African American children living with their father only. Bartholet (2012) and Sedlak and Broadhurst (1996) identified characteristics that predict child maltreatment from the NIS-3:

- Children of single parents had a 77 percent greater risk of being harmed by physical abuse, and 87 percent greater risk of being harmed by physical neglect, and an 80 percent greater risk of suffering serious injury or harm from abuse or neglect than children living with both parents.
- Children in the largest families were physically neglected at nearly three times the rate of those who came from single-child families.
- Children from families with annual incomes below $15,000 as compared to children from families with annual incomes above $30,000 per year were over 22 times more likely to experience some form of maltreatment that fit the Harm Standard [the NIS more serious maltreatment category] and over 25 times more
likely to suffer some form of maltreatment as defined by the Endangerment Standard [the NIS less serious maltreatment category]

- Children from the lowest income families were 18 times more likely to be sexually abused, almost 56 times more likely to be educationally neglected, and over 22 times more likely to be seriously injured from maltreatment as defined under the Harm Standard than children from the higher income families.

Inadequate Legal Representation

African American children higher entry into foster care include lack of affordable housing options, lack of access to substance abuse treatment, and limited or inadequate legal representation of birth parents (GAO, 2007). In a study conducted, about twenty states reported that African American families had difficulties with obtaining adequate legal representation in court and this attributed to the disparities of African American children in foster care. Additionally, public attorneys who were assigned to represent these families were not prepared to adequately represent the families and this put these families at a disadvantage (Dixon, 2008; Hawkins-Leon, 1997).

With inadequate legal representation, this added to the distrust that African Americans have for the child welfare system as well as their belief that racial bias affects caseworker decisions and judicial rulings (Dixon, 2008; GAO, 2007). This study also revealed that in twenty eight states, African American families distrust of the child welfare system was a contributing factor for their children entering into the foster care system (Dixon, 2008; GAO, 2007).
Findings from a study on cultural competency in the field, revealed that once children and families enter the child welfare system that is evidence that indicates differential treatment with regard to services provided, both in terms of quantity and quality (Abney, 2002). Dixon found that there were few programs utilized by lawyers or the court system that required any cultural competency training of the judges or attorneys, who worked with African American families and children. The State of Illinois offered forums to educate policymakers, advocates, and politicians about the policies that affected African-American families (Dixon, 2008; Hill, 2004).

Inadequate Access to Supportive Services

A study conducted by the Child Welfare League of America (2008) revealed that children of color may be less likely to return home because of service disparities that “create [barriers] to both prevention of abuse and reunification when a child has been removed” (p. 3). The lack of available services and resources could “cause and/or exacerbate the very risk factors that often been cited as reasons for not reunifying children (of color) with their families” (Fluke et al., 2010, p. 47). Many families of all races are in need of supportive services to prevent the removal of child. The services that the families could benefit from are affordable housing, mental health services, counseling, substance abuse treatment, parenting classes, child care services and home visitation (CWLA, 2008; Washington State Racial Disproportionality Advisory Committee and the Department of Social and Health Services, 2008b).

U.S. Government Accountability Office (2007a) reports that African American families experience disparate access to and receipt of supportive services. According to
Fluke et al. (2010), when supportive services are inaccessible, inappropriate and or inequitable this leads to or expose other disparities with in the child welfare system. For the purpose of this study, the focus is on the disparities facing African American families. African American children receive greater number of services through public agencies than private agencies.

Rodenborg (2004) found that families of color were less likely to receive supportive services to improve risk factors, such as employment and housing services when controlling for poverty. African American children’s higher entry into foster care include lack of affordable housing options, lack of access to substance abuse treatment, and limited or inadequate legal representation of birth parents (GAO, 2007). Affordable public housing is a critical factor that allow African American children and their families to stay together and allows for in home supportive services and this decreases the chance for children to be removed from their homes (GAO, 2007).

Theoretical Framework

Murray Bowens, M.D. developed Family Systems Theory or Bowen Theory around the 1950’s. During Dr. Murray Bowen’s 40 year career, he developed this theory and new methods of conducting psychotherapy. Bowen Family Systems Theory is a theory of human behavior that looks at the entire family as an emotional unit. Bowen utilized systems thinking to describe the complex interactions of the unit. He believed that you could not treat the individual without treating the entire family. With this understanding that the family is emotionally connected to one another. Family members affect each other’s thoughts, feelings and actions. The members of the family seek out
the attention, approval, support and reaction of each other. This describes the family as being interdependent of each other (Bowen Theory, 2012).

Bowen identified eight interlocking concepts that explain this theory. The eight basic concepts are: triangles, differentiation of self, nuclear family emotional system, family projection process, multigenerations transitional process, emotional cut off, sibling position, and societal emotional process (Bowen Theory, 2012). For the purpose of this study, this researcher will focus on the concepts of emotional cut off and societal emotional process.

There are a number of theoretical perspectives that enhance the understanding of foster care and the impact it has on African American children. Family systems theory addresses areas of concerns with the problems of relationships, of structures, and of interdependence, rather than with constant attributes of object (Katz & Kahn, 1996). Systems theory is a way to view the understanding of present situations with regards to past relationships along with assessing the family history. Family system theory allows you to view an individual needs as well as the collective group. The goal of applying Bowen’s theory is to increase the effectiveness of developing lasting “stable” relationships.

Emotional cut-off is a mechanisms family members use to reduce anxiety about their unresolved feelings towards other members of the family. Children who are separated from their family members and placed in foster care tend to have a difficult time with their family in dealing with unresolved issues (i.e., issues of being separated, anxiety, guilt, depression, resentment and distrust). With children being placed in foster care, this also allows the family to avoid sensitive issues. These very same children who
were removed to protect them from harm or further abuse, now have unresolved problems and this prevents them from developing health future relationships. During stress situation, they tend to allow unresolved issues to resurface (Bowen Theory, 2012).

The Bowen Theory asserts that everyone has some degree of unresolved issues with their family of origin, but well-differentiated people have much more resolution than less differentiated people. For example, one sibling is believed to be responsible for the sibling group spending time or growing up in foster care because the child could have shared with a professional about possible allegations of abuse or neglect. The other siblings blames their sibling for causing distressed on their family, even if the family is seen as being dysfunctional and/or in need of intervention. However, the family members felt that there family was intact and not in need of intervention from the Department of Family and Children Services. Drawing on family systems theories, when the siblings are around the anxiety level is high and it makes a stressful time for the entire family.

Another concept from the eight interlocking concept to apply to this study is societal emotional process. According to the Bowen Theory (2012), “the concept of societal emotional process describes how the emotional system governs behavior on a societal level, promoting both progressive and regressive periods in a society” (para. 1). In addition, “cultural forces are important in understanding how a society functions but are insufficient for explaining the ebb and flow in how well societies adapt to the challenges that face them” (Bowen Theory, 2012, para. 1). Following World War II, a regressive pattern developed and worsened during the 1950s, and rapidly intensified during the 1960s. The societal regression included a growth in crime and violence, an
increase in divorce rates, more litigious attitude, polarization between racial groups, less principled decision making by leaders, increased drug abuse, and a focus on rights versus responsibilities.

It is more conducive for people to examine their own contributions to societal regression and work on themselves rather than focus on improving the future generation (Bowen Theory, 2012). Thus, the challenges that are facing America today is the overrepresentation of African American children in foster care. The federal government has charged all the states within the United States to identify a method for addressing this epidemic. For states that identify methods for addressing this issue, the federal government is providing financial assistance as the federal government is in need of positive outcomes for African American families. This issue has plagued the United States for over fifty years and it still continues to be an issue and challenge for the child welfare system. There is no solid explanation for the reason this problem exists, although there are several theories; however, there has not been a solid intervention developed to combat this issue.

Research shows that children who age out of foster care often become homeless, or turn to prostitution and crime (Johnson-Reid & Barth, 2000). In addition, other studies have 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).

This researcher believes that the removal of the child from his/her family in some ways not protecting the child because of the changes the family unit. Research has shown that supportive services in the home tends to reduce the risk of the child being
placed in foster care and further maltreatment. The services tend to be beneficial for the families and provide the families with the necessary tools to be effective.

Conclusion

This chapter provides historical information about the child welfare system that dates back to the 1800’s. The prevention of Cruelty to children was established in 1875 by New York Society founded throughout the United States. This was the beginning of the laws that were established to protect children while enhancing the child welfare system (Downs, Costin, & McFadden, 1996). Leaders such as Jane Adams, Homer Folks, and Grace Abbott worked together to prohibit children from working and this was organized by the National Child Labor Committee (NCLC) in 1904.

The literature review provides documentation regarding the Caseworker’s perception of expectations, education, factors surrounding placement, and information relative to Cultural Competency training. Findings also show that there is a considerable disparity among African American children in foster care compared to other racial and ethnic groups. The literature shows that with higher level of education, Caseworkers are more equipped with moving into the work force with a thorough knowledge base. The literature also revealed that Caseworker’s life experiences help to shape the way their professional decisions are made. It is evident from the research that African American children are in need of Social Workers to advocate for policy changes to decrease the number of children who are coming into care.

Findings from the literature review further revealed that African American children and families are disproportionately more likely to receive an involuntary
government intervention when child maltreatment arises. This intervention is more likely to last longer causing separation of family members and some children and parents may never reunite. The systematic governmental destruction and separate reconstruction of the African American is difficult to believe is in the best interest of these families (Morton, 2002).

Harris and Hackett (2008) acknowledged that on the national level conversation about addressing and solving the racial and ethnic disproportionality of negative outcomes has focused on changes and recommendation to the policy and practice. Additionally, Harris and Hackett believe that an intervention at the individual perception and knowledge level is needed evidence by ongoing training to address the dynamics of racism.

In Bartholet’s opinion, “black parents are neither inherently more likely to abuse and neglect their children than whites, nor inherently more likely to be associated with poverty, single parenting, substance abuse, and other risk factors associated with child maltreatment. They are victims of historic and ongoing racial and economic injustice that has put them in a seriously disadvantaged position in our society” (Bartholet, 2012).

Researcher Jimenez (2006) poses a question that should challenge politicians, policy makers, social workers and other professionals: How can public child welfare now draw on the strengths of the African American families to develop policies to meet the needs of African American children?

The literature is limited in regards to cultural competency training that focus on the African American perspective. Many of the cultural competency training are geared towards working with the Latino/Hispanic population. Research shows that children who
age out of foster care often become homeless, or turn to prostitution and crime (Johnson-Reid & Barth, 2000). In addition, other studies have 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).
CHAPTER III

METHODOLOGY

Chapter III contains an explanation of the methods and procedures that were used to conduct this study. They include the research design, description of the site, population sample, and instrumentation.

Research Design

A descriptive and explanatory research design was utilized for this study. The purpose of this explanatory study is to examine the overrepresentation of African American children being raised in the foster care system. African American children are overrepresented in the foster care system and this study will explore factors preventing African American youth from remaining with their biological family with services to address the areas of concern. Current research supports that there are inherent biases in worker's perceptions of families of color that leads to their decision to place children in foster care, thereby reflecting the disproportionate numbers of African American children in the foster care system.

Description of the Site

This research study was conducted in Atlanta, Georgia. The State of Georgia has a total of 159 counties. DeKalb and Fulton are the two counties that are the
centralization for this study. DeKalb County is the third largest county and Fulton is the largest county in Georgia. The surveys were administered at Fulton and DeKalb County local Department of Family and Children Services' offices.

Sample and Population

The target population for this study was composed of workers responsible for investigating abuse and neglect and determining placement for children who were investigated for child abuse or neglect with the Department of Family and Children Services. One hundred (100) respondents were selected utilizing nonprobability convenience sampling from among the participants from DeKalb and Fulton County in the State of Georgia.

Instrumentation

The research study used a survey questionnaire entitled, *A Study of Select Factors That Predict Foster Care Placement of African American Children*. The survey questionnaire consisted of two sections with a total of thirty-three (33) questions. Section I inquired about demographic information about the characteristics of the respondents. Section II employed the factors influencing foster care placement among the participants being investigated for abuse and/or neglect.

Section I of the survey questionnaire consisted of seven questions (1 thru 8). Of the eight questions, selected questions were used as independent variables for the study. The questions in Section I were concern with gender, age, race, marital status, educational and income level of the participants, who are responsible for determining if the child is placed in foster care or will receive preventative services. These questions
provide information for the presentation of a demographic profile on the respondents of the research study.

Section II contained twenty-five questions (9 thru 33). Section II utilized the risk assessment which measures to what extent perception plays in the decision to place a child in foster care. Items on the Predicting level of Risk Index were responded to on a five point continuum Likert scale. The scale was as follows: 1 = Strongly Disagree; 2 = Disagree; 3 = Agree 4 = Somewhat Agree and 5=Strongly Agree.

Treatment of Data

Statistical treatment of the data employed descriptive statistics, which included measures of central tendency, frequency distribution, and cross-tabulation. The test statistics for the study were phi and chi square. Frequency distribution was used to analyze each of the variables of the study in order to summarize the basic measurements. A frequency distribution of independent variables was used to develop a demographic profile and to gain insights about the respondents of the study.

Cross-tabulations were utilized to demonstrate the statistical relationship between independent variables and the dependent variable. Cross-tabulations were conducted between the case manager’s demographic, case manager’s decision making in placement and case manager’s beliefs regarding factors predicting placement with Case Managers who were employed with Fulton or DeKalb Department of Family and Children Services.
The test statistics employed in the research study was chi square. Chi Square was used to test whether there was a significant statistical significance at the .05 level of probability among the variables in the study.

Limitations of the Study

This study has the following limitations:

1. The survey questions limited responses to the questions asked. There was no opportunity for additional data or points of clarification.

2. Questionnaires tend to be impersonal and employees may not be willing to provide honest answers.

3. Questionnaires frequently elicit response biases, such as the tendency to answer questions in a socially acceptable manner.

These issues make it difficult to draw valid conclusions. There is no way to determine how truthful the respondent is being.
The purpose of this chapter is to present the findings of this study in order to describe and explain the case manager’s decision making and factors predicting the overrepresentation of African American children in the child welfare system. The findings are organized into two sections: demographic data and research questions and hypotheses.

Demographic Data

This section provides a profile of the study respondents. Descriptive statistics were used to analyze the following: county, gender, age group, race, marital status, education, and income level.

The target population for this study was composed of former and current case managers who obtained employment through the DeKalb or Fulton County Department of Family and Children Services. Utilizing the convenience sampling method, 88 participants from Fulton & DeKalb completed the survey.
Table 1
Demographic Profile of Study Respondents (N=88)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>County</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fulton</td>
<td>44</td>
<td>50.0</td>
</tr>
<tr>
<td>DeKalb</td>
<td>44</td>
<td>50.0</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>14</td>
<td>15.9</td>
</tr>
<tr>
<td>Female</td>
<td>73</td>
<td>83.0</td>
</tr>
<tr>
<td>No answer</td>
<td>1</td>
<td>1.1</td>
</tr>
<tr>
<td>Age Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 30</td>
<td>24</td>
<td>27.3</td>
</tr>
<tr>
<td>30 – 39</td>
<td>32</td>
<td>36.4</td>
</tr>
<tr>
<td>40 – 49</td>
<td>18</td>
<td>20.5</td>
</tr>
<tr>
<td>Over 50</td>
<td>14</td>
<td>15.9</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>85</td>
<td>96.6</td>
</tr>
<tr>
<td>White</td>
<td>3</td>
<td>3.4</td>
</tr>
</tbody>
</table>
Table 1 (continued)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>23</td>
<td>26.1</td>
</tr>
<tr>
<td>Never Married</td>
<td>51</td>
<td>58.0</td>
</tr>
<tr>
<td>Divorced</td>
<td>14</td>
<td>15.9</td>
</tr>
<tr>
<td>Educational Level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technical</td>
<td>1</td>
<td>1.1</td>
</tr>
<tr>
<td>Bachelor</td>
<td>42</td>
<td>47.7</td>
</tr>
<tr>
<td>Master</td>
<td>44</td>
<td>50.0</td>
</tr>
<tr>
<td>Doctoral</td>
<td>1</td>
<td>1.1</td>
</tr>
<tr>
<td>Income Level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under $30,000</td>
<td>3</td>
<td>3.4</td>
</tr>
<tr>
<td>$30k - $34k</td>
<td>40</td>
<td>45.5</td>
</tr>
<tr>
<td>$35k - $39k</td>
<td>23</td>
<td>26.1</td>
</tr>
<tr>
<td>$40k - $49,999</td>
<td>13</td>
<td>14.8</td>
</tr>
<tr>
<td>Over $50,000</td>
<td>4</td>
<td>4.5</td>
</tr>
<tr>
<td>No answer</td>
<td>5</td>
<td>5.7</td>
</tr>
</tbody>
</table>

As indicated in Table 1, the typical respondent of this study was an African American female who had never been married, between the ages of 30-39 with a Master’s degree and an income level that ranged between $30,000 to $34,000 annually.
Research Questions and Hypotheses

There were five research questions and five null hypotheses in this study. This section provides an analysis of the research questions and a testing of the null hypotheses.

Research Question 1: Is poverty a predictor of foster care placement of African American children?

Hypothesis 1: There is no statistically significant relationship between poverty and the placement of African American children in foster care.

Poverty

Children enter into the foster care system for several reasons. In order for a child to come into care, it has to be deemed that the child has either been physically and/or sexually abused. Other factors that can contribute are the birth parents living in poverty, substance abuse, mental illness, or neglecting the children's needs (Bass, Behrman, & Shields, 2004).

Research reveals other possible factors that contribute to the disproportionate number of African American children in the child welfare systems are family variables, including parental incarceration, poverty, substance abuse, along with systemic factors such as reporting bias, and inequity in service delivery. Additionally, the changes to federal policies for TANF and Adoptions and Safe Families Act possibly impacted children and families of color disproportionately, due to the reducing of welfare income and limiting services to families in the child welfare system (Hines, Lemon, Wyatt, & Merdinger, 2004).
Research Question 2: Is neglect a predictor of foster care placement of African American children?

Hypothesis 2: There is no statistically significant relationship between neglect and the placement of African American children in foster care.

Neglect

Dr. Robert Hill (2006) noted that “Black or African American children are more likely to be reported, investigated, substantiated, and placed in care, and that they stay longer in care and are less likely to be reunified with their families” (p. 17). According to the National Incidence Study (NIS) (2004), African American families’ challenges with having access to support systems and social services were also viewed as influencing African American children’s entry to foster care. Such supports and services include affordable and adequate housing, substance abuse treatment, and family services such as parenting skills and counseling. It is difficult for African American families to access the support because the support is not normally in their communities.

Access to legal representation in courts responsible for making decisions about children reported to have been abused or neglected was also as a factor as influencing African American children’s entry into foster care. Substantiation rates for abuse and neglect of white children compared with rates for other ethnic groups show that African American children are twice as likely to be substantiated as abuse or neglect, while Asian/Pacific Islander children are substantiated at half the rate of white children (Child Welfare League of America, 2003).
Table 2

Poverty/Neglect factors predicting foster care placement

<table>
<thead>
<tr>
<th></th>
<th>Disagree</th>
<th></th>
<th>Agree</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
<td>%</td>
<td>#</td>
<td>%</td>
</tr>
<tr>
<td>Poverty/Neglect 1: Socioeconomic status</td>
<td>59</td>
<td>67.0</td>
<td>26</td>
<td>29.5</td>
</tr>
<tr>
<td>Poverty/Neglect 2: Adequate resources</td>
<td>20</td>
<td>22.7</td>
<td>66</td>
<td>75.0</td>
</tr>
</tbody>
</table>

As shown in Table 2, case managers indicated that they disagreed (67%) with socioeconomic status being a factor predicting foster care placements. Also, case managers indicated that they agreed (75%) that not having adequate resources could predict foster care placements.

Table 3 is a frequency distribution for the computed variable of poverty. As shown in Table 3, of the 88 respondents, 67% indicated that they disagreed while 30% indicated that they agreed that socioeconomic status affect their opinions about families.
Table 3

<table>
<thead>
<tr>
<th>Poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>59</td>
<td>67.0</td>
</tr>
<tr>
<td>Agreed</td>
<td>26</td>
<td>29.5</td>
</tr>
<tr>
<td>Total</td>
<td>85</td>
<td>96.6</td>
</tr>
<tr>
<td>Missing</td>
<td>03</td>
<td>03.4</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 2.18  Std. Dev. 1.187

Table 4 is a frequency distribution for the computed variable of adequate resources. As shown in Table 4, of the 88 respondents, 23% indicated that they disagreed while 75% indicated that they agreed with the statement that the caregiver’s lack of adequate resources influences their decision making.
Table 4

Adequate Resources

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>20</td>
<td>22.7</td>
</tr>
<tr>
<td>Agreed</td>
<td>66</td>
<td>75.0</td>
</tr>
<tr>
<td>Total</td>
<td>86</td>
<td>97.7</td>
</tr>
<tr>
<td>Missing</td>
<td>02</td>
<td>02.3</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 3.24 Std. Dev. 1.105

Research Question 3: Is history of abuse a predictor of foster care placement of African American children?

Hypothesis 3: There is no statistically significant relationship between history of abuse and the placement of African American children in foster care.

History of abuse

In 2003, 11 California counties were given modest funds to test the implementation of differential responses. Instead of caseworkers having the same response for all child abuse and neglect reports, they responded differently based on the type and severity of the allegations, any history of previous reports, and the family's willingness to participate in services. The preliminary findings showed that the
differential response is helping to keep children safe while avoiding being intrusive in families’ lives. Eighty-two percent of the families were referred for services to family resource centers and 57 percent were referred to ongoing case management, which allowed the children to remain in the home (North American Council on Adoptable Children, 2007).

Table 5

Previous involvement with DFCS

<table>
<thead>
<tr>
<th>History with DFCS 1: History of abuse</th>
<th>Disagree #</th>
<th>%</th>
<th>Agree #</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>History with DFCS 1: History of abuse</td>
<td>8</td>
<td>9.1</td>
<td>80</td>
<td>90.9</td>
</tr>
<tr>
<td>History with DFCS 2: Previous Involvement</td>
<td>6</td>
<td>6.8</td>
<td>80</td>
<td>90.9</td>
</tr>
</tbody>
</table>

According to the data in Table 5, 91% of the case managers agreed that history of abuse is a factor predicting placement in foster care. As well, 91% of the case managers agreed that if families had previous involvement with the department it is a factor predicting placement in foster care.

Table 6 is a frequency distribution for the computed variable of prior history of abuse. As shown in Table 6, of the 88 respondents, 9% indicated that they disagreed while 91% indicated that they agreed that prior history of abuse plays a role in substantiating a case.
Table 6

History of prior abuse

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>8</td>
<td>9.1</td>
</tr>
<tr>
<td>Agreed</td>
<td>80</td>
<td>90.9</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 3.68  Std. Dev. 1.105

Table 7 is a frequency distribution for the computed variable of prior history of abuse. As shown in Table 7, of the 88 respondents, 9% disagreed while 91% agreed that previous involvement with the department is a factor utilized in assessing risk.
Research Question 4: Is caretaker’s behavior a predictor of foster care placement of African American children?

Hypothesis 4: There is no statistically significant relationship between caretaker’s behavior and the placement of African American children in foster care.

Caretaker’s Behavior

A comparative study of risk assessment and recommended interventions in Canada and Israel was conducted to examine how professionals assess children at risk and their parents and decisions about interventions. One hundred and eighty-one (181) child welfare workers participated in this study from the two different countries. The results from the study showed that there is a significant difference between the countries in regards to worker’s age and level of experience. Canadians workers tended to be older
and more experienced that Israelis. There was a significant difference with recommendations of removal in that more Canadians than Israelis recommended the removal of the child. Israelis workers were more influenced by the mother’s cooperation than Canadians (Gold, Benbenishty, & Osmo, 2001).

Table 8

Caretaker’s Behavior

<table>
<thead>
<tr>
<th></th>
<th>Disagree</th>
<th></th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>#</td>
<td></td>
</tr>
<tr>
<td>C1: Assertive Parent</td>
<td>61</td>
<td></td>
<td>26</td>
</tr>
<tr>
<td>C2: Assertive Parent</td>
<td>74</td>
<td></td>
<td>12</td>
</tr>
</tbody>
</table>

The data cited in Table 8 reveal that 69% of the case managers disagree with the statement that they are affected by the assertiveness of parents. As well, 84% of the case managers disagreed that they are offended by an assertive parent.

Table 9 is a frequency distribution for the computed variable of caretaker’s behavior. As shown in Table 9, of the 88 respondents, 69% indicated that they disagreed while 30% indicated that they agreed with the statement that they are affected by the assertiveness of parents.
Table 9

Caretaker's Behavior: Affected

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>61</td>
<td>69.3</td>
</tr>
<tr>
<td>Agreed</td>
<td>26</td>
<td>29.5</td>
</tr>
<tr>
<td>Total</td>
<td>87</td>
<td>98.9</td>
</tr>
<tr>
<td>Missing</td>
<td>01</td>
<td>01.1</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 2.15  Std. Dev. 1.029

Table 10 is a frequency distribution for the computed variable of caretaker's behavior. As shown in Table 10, of the 88 respondents, 84% indicated that they disagreed while 14% indicated that they agreed with the statement that they are offended by the assertiveness of parents.
Table 10

Caretaker’s Behavior: Offended

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>74</td>
<td>84.1</td>
</tr>
<tr>
<td>Agreed</td>
<td>12</td>
<td>13.6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>86</strong></td>
<td><strong>97.7</strong></td>
</tr>
<tr>
<td>Missing</td>
<td>02</td>
<td>02.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>88</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Mean 1.88 Std. Dev. .873

Research Question 5: Is inadequate access a predictor of foster care placement of African American children?

Hypothesis 5: There is no statistically significant relationship between inadequate access and the placement of African American children in foster care.

Inadequate Access

Child Welfare League of America (2008) identified that children of color may be less likely to return home because of service disparities that “create [barriers] to both prevention of abuse and reunification when a child has been removed” (p. 3). The lack of available services and resources could “cause and/or exacerbate the very risk factors often cited as reasons for not reunifying children (of color) with their families” (Fluke et al., 2010, p. 47). Many families of all races are in need of supportive services to prevent
the removal of child and prevention of reunification successful because families are in need of affordable housing, mental health services, counseling, substance abuse treatment, parenting classes, child care services and home visitation (CWLA, 2008; Washington State Racial Disproportionality Advisory Committee and the Department of Social and Health Services, 2008b).

U.S. Government Accountability Office (2007a) reports that African American families experience disparate access to and receipt of supportive services. According to Fluke et al. (2010), when supportive services are inaccessible, inappropriate and or inequitable, this leads to or exposes other disparities within the child welfare system. For the purpose of this study, we will focus on the disparities facing African American families. African American children receive greater number of services through public agencies than private agencies.

| Table 11
| Inadequate Access

<table>
<thead>
<tr>
<th></th>
<th>Disagree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
<td>%</td>
</tr>
<tr>
<td>Inadequate Access 1: Court Appointed Attorney</td>
<td>6</td>
<td>6.8</td>
</tr>
<tr>
<td>Inadequate Access 2: Adequate Legal Representation</td>
<td>21</td>
<td>23.9</td>
</tr>
<tr>
<td>Inadequate Access 3: Supportive Services</td>
<td>22</td>
<td>25.0</td>
</tr>
</tbody>
</table>
As shown in Table 11, case managers indicated that they agreed (93%) that their families are represented by a court appointed attorney. In addition, the case managers believed (76%) that their families are adequately represented. Additionally, case managers indicated that they agreed (75%) that their families receive adequate supportive services.

Table 12 is a frequency distribution for the computed variable of inadequate access. As shown in Table 12, of the 88 respondents, 7% indicated that they disagreed while 93% indicated that the majority of their families utilize court appointed attorneys.

Table 12
Inadequate Access: Court Appointed Attorney

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>06</td>
<td>06.8</td>
</tr>
<tr>
<td>Agreed</td>
<td>82</td>
<td>93.2</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 4.03 Std. Dev. 1.055

Table 13 is a frequency distribution for the computed variable of inadequate access. As shown in Table 13, of the 88 respondents, 24% indicated that they disagreed while 76% indicated that they believed that their families are adequately legally represented.
Table 13

Inadequate Access: Adequate Legal Representation

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>21</td>
<td>23.9</td>
</tr>
<tr>
<td>Agreed</td>
<td>67</td>
<td>76.1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>88</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Mean 3.23 Std. Dev. .991

Table 14 is a frequency distribution for the computed variable of inadequate access. As shown in Table 14, of the 88 respondents, 25% indicated that they disagreed while 75% indicated that they believed that their families have access to adequate services.

Table 14

Inadequate Access: Supportive Services

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>22</td>
<td>25.0</td>
</tr>
<tr>
<td>Agreed</td>
<td>66</td>
<td>75.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>88</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Mean 3.31 Std. Dev. 1.097
The data presented below in table 15 indicate that 58% of the case managers agreed that their caseloads are manageable. However, 65% case managers indicated that their caseloads are too large.

Table 15
Case Manager’s Decisions

<table>
<thead>
<tr>
<th></th>
<th>Disagree</th>
<th></th>
<th>Agree</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
<td>%</td>
<td>#</td>
<td>%</td>
</tr>
<tr>
<td>Caseload 1: Manageable</td>
<td>36</td>
<td>40.9</td>
<td>51</td>
<td>58.0</td>
</tr>
<tr>
<td>Caseload 2: Too Large</td>
<td>30</td>
<td>34.1</td>
<td>57</td>
<td>64.8</td>
</tr>
</tbody>
</table>

Table 16 is a frequency distribution for the computed variable of manageable caseload. As shown in Table 16, of the 88 respondents, 41% disagreed while 58% agreed that their caseloads were manageable.
Table 16

Caseload Manageable

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>36</td>
<td>40.9</td>
</tr>
<tr>
<td>Agreed</td>
<td>51</td>
<td>58.0</td>
</tr>
<tr>
<td>Total</td>
<td>87</td>
<td>98.9</td>
</tr>
<tr>
<td>Missing</td>
<td>01</td>
<td>01.1</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 2.78  Std. Dev. 1.104

Table 17 is a frequency distribution for the computed variable of caseload. As shown in Table 17, of the 88 respondents, 34% indicated that they disagreed while 65% indicated that they believe that their caseload was too large.
The data cited below in Table 18 reveal that case managers disagreed (55%) that there is a relationship with the level of education and placement of African American youth in foster care. In addition, case managers indicated that they agreed (72%) that there is a relationship with cultural competence with placement of African American youth in foster care. Table 18 also indicates that 82% of the case managers agreed that the education of a case manager matters in assessing families. Equally important, case managers indicated that they agreed (94%) that it is important for case managers to understand African Americans' values, norms and customs in order to assess an African American family.
Table 18

Case Manager’s Education/Training

<table>
<thead>
<tr>
<th>Case Manager</th>
<th>Disagree #</th>
<th>Disagree %</th>
<th>Agree #</th>
<th>Agree %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Manager 1: Education</td>
<td>48</td>
<td>54.5</td>
<td>38</td>
<td>43.2</td>
</tr>
<tr>
<td>Case Manager 2: Culture Competence</td>
<td>24</td>
<td>27.3</td>
<td>63</td>
<td>71.6</td>
</tr>
<tr>
<td>Case Manager 3: Assessing Families</td>
<td>16</td>
<td>18.2</td>
<td>72</td>
<td>81.8</td>
</tr>
<tr>
<td>Case Manager 4: AA values/norms/customs</td>
<td>05</td>
<td>05.7</td>
<td>83</td>
<td>94.3</td>
</tr>
</tbody>
</table>

As shown in Table 19, of the 88 respondents, 55% disagreed while 43% agreed that there is a relationship between case workers’ levels of education with the placement of African American youth in foster care.
As shown in Table 20, of the 88 respondents, 27% indicated that they disagreed while 72% indicated that they agreed that there is a relationship between case workers' cultural competence with the placement of African American youth in foster care.
Table 20

Cultural Competence

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>24</td>
<td>27.3</td>
</tr>
<tr>
<td>Agreed</td>
<td>63</td>
<td>71.6</td>
</tr>
<tr>
<td>Total</td>
<td>87</td>
<td>98.9</td>
</tr>
<tr>
<td>Missing</td>
<td>01</td>
<td>01.1</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 3.26     Std. Dev. 1.196

Table 21 is a frequency distribution for the computed variable of assessing families. As shown below in Table 21, of the 88 respondents, 18% indicated that they disagreed while 82% indicated that they agreed that the education of a case manager matters in assessing families for level of risk.
Table 21

Assessing Families

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>16</td>
<td>18.2</td>
</tr>
<tr>
<td>Agreed</td>
<td>72</td>
<td>81.8</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 3.65  Std. Dev. 1.185

Table 22 is a frequency distribution for the computed variable of African American values and norms. As shown in Table 22, of the 88 respondents, 6% indicated that they disagreed while 94% indicated that they agreed that it is important for case managers to understand African Americans' values, norms, and customs in order to assess an African American family.
Table 22

African American Values/Norms

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>05</td>
<td>05.7</td>
</tr>
<tr>
<td>Agreed</td>
<td>83</td>
<td>94.3</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 3.65  Std. Dev. 1.185

As shown in Table 23, case managers indicated that they agreed (74%) that they are aware of the research on the outcomes of children being removed from their family unit. Also, case managers believed (97%) that they understand the emotional connectedness of a family unit.

Table 23

Theoretical Framework

<table>
<thead>
<tr>
<th>Theory 1: Emotional Connectedness</th>
<th>Disagree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>#</td>
<td>%</td>
<td>#</td>
</tr>
<tr>
<td>22</td>
<td>25.0</td>
<td>65</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Theory 2: Family Unit</th>
<th>Disagree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>#</td>
<td>%</td>
<td>#</td>
</tr>
<tr>
<td>02</td>
<td>02.3</td>
<td>85</td>
</tr>
</tbody>
</table>
Table 24 is a frequency distribution for the computed variable of emotional connectedness. As shown below in Table 24, of the 88 respondents, 25% indicated that they disagreed while 74% indicated that they are aware of the research on the outcomes of children being removed from their family unit.

Table 24

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>22</td>
<td>25.0</td>
</tr>
<tr>
<td>Agreed</td>
<td>65</td>
<td>73.9</td>
</tr>
<tr>
<td>Total</td>
<td>87</td>
<td>98.9</td>
</tr>
<tr>
<td>Missing</td>
<td>01</td>
<td>01.1</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Mean 3.36   Std. Dev. 1.181

Table 25 is a frequency distribution for the computed variable of family unit. As shown below in Table 25, of the 88 respondents, 2% indicated that they disagreed while 97% indicated that they understand the emotional connectedness of a family unit.
Table 25

Theory 2: Family Unit

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>02</td>
<td>2.3</td>
</tr>
<tr>
<td>Agreed</td>
<td>85</td>
<td>96.6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>87</strong></td>
<td><strong>98.9</strong></td>
</tr>
<tr>
<td>Missing</td>
<td>01</td>
<td>01.1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>88</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Mean 4.17  Std. Dev. 1.025

Table 26

Overrepresentation/Disproportionate AA in foster care

<table>
<thead>
<tr>
<th></th>
<th>Disagree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
<td>%</td>
</tr>
<tr>
<td>Overrepresentation 1: AA foster care</td>
<td>15 17.0</td>
<td>72 81.8</td>
</tr>
<tr>
<td>Disproportionate 2: AA foster care</td>
<td>23 26.1</td>
<td>64 72.7</td>
</tr>
</tbody>
</table>

The data cited in Table 26 indicates that the case managers agreed (82%) that they believed that African American children are overrepresented in foster care. In addition,
case managers indicated that they agreed (73%) that African American children are disproportionate in foster care.

Table 27 is a frequency distribution for the computed variable of overrepresentation. As shown below in Table 27, of the 88 respondents, 17% indicated that they disagreed while 82% indicated that they agreed that African American children are overrepresented in foster care.

Table 27

Overrepresentation

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>15</td>
<td>17.0</td>
</tr>
<tr>
<td>Agreed</td>
<td>72</td>
<td>81.8</td>
</tr>
<tr>
<td>Total</td>
<td>87</td>
<td>98.9</td>
</tr>
<tr>
<td>Missing</td>
<td>1</td>
<td>1.1</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 28 is a frequency distribution for the computed variable of disproportionate. As shown in Table 28, of the 88 respondents, 26% indicated that they disagreed while 73% indicated that they agreed that African American children are disproportionate in foster care.
Table 28

<table>
<thead>
<tr>
<th>Value</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>23</td>
<td>26.1</td>
</tr>
<tr>
<td>Agreed</td>
<td>64</td>
<td>72.7</td>
</tr>
<tr>
<td>Total</td>
<td>87</td>
<td>98.9</td>
</tr>
<tr>
<td>Missing</td>
<td>1</td>
<td>1.1</td>
</tr>
<tr>
<td>Total</td>
<td>88</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 29 is a cross-tabulation on the case managers' belief about their caseload. This table shows the association of case manager's belief about their caseload sizes and the ability to manage the work. In addition, this table indicates whether or not there was a statistically significant relationship between the two variables.
Table 29
Cross-tabulation on the case managers' belief about their caseload

<table>
<thead>
<tr>
<th>Caseload-Manageable</th>
<th>Disagreed</th>
<th>Agreed</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
<td>%</td>
<td>#</td>
</tr>
<tr>
<td>Caseload-Too Large</td>
<td>1</td>
<td>1.1</td>
<td>29</td>
</tr>
<tr>
<td>Disagreed</td>
<td>35</td>
<td>40.2</td>
<td>22</td>
</tr>
<tr>
<td>Agreed</td>
<td>36</td>
<td>41.4</td>
<td>51</td>
</tr>
</tbody>
</table>
| df = 1              | p = .000

As indicated in Table 29, one percent (1%) of case managers indicated that they disagreed that their caseloads were/are unmanageable or too large to manage. A majority (66%) indicated that they agreed that their caseloads were manageable and too large. However, when too large caseload was cross-tabulated with manageable caseload, 40% of the respondents indicated that although they agreed that their caseloads were too large, they did not think the caseloads were manageable.

As shown in Table 29, the chi-square statistical test for significance was applied, the null hypothesis was rejected (p = .000) indicating that there was a statistically significant relationship between the two variables at the .05 level of probability.
Table 30 is a cross-tabulation on the factors of poverty and neglect. This table shows the association of poverty and neglect being a factor in placement for African American children. In addition, this table indicates whether or not there was a statistically significant relationship between the two variables.

Table 30
Cross-tabulation on the factors of poverty and neglect

<table>
<thead>
<tr>
<th></th>
<th>Disagreed</th>
<th>Agreed</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adequate resources</td>
<td>#</td>
<td>%</td>
<td>#</td>
</tr>
<tr>
<td>Disagreed</td>
<td>16</td>
<td>19.3</td>
<td>3</td>
</tr>
<tr>
<td>Agreed</td>
<td>43</td>
<td>51.8</td>
<td>21</td>
</tr>
<tr>
<td>Total</td>
<td>59</td>
<td>71.1</td>
<td>24</td>
</tr>
</tbody>
</table>

df = 1 \quad p = .151

As indicated in Table 30, 19% of case managers indicated that they disagreed that socioeconomic status is a risk factor. A majority (77%) indicated that they agreed that not having adequate resources for caring for a child is significant in their decision making. However, when adequate resources was cross-tabulated with socioeconomic status, 52% of the respondents indicated that although they agreed that not having adequate resources is significant in their decision making of placement of youth in foster
care, they did not agree that socioeconomic status plays a role in the decision making of placement. As shown in Table 30, the chi-square statistical test for significance was applied, the null hypothesis was not rejected ($p = .151$) indicating that there was no statistically significant relationship between the two variables.

Table 31 is a cross-tabulation on the caretaker’s behavior. This table shows the association of caretaker’s behavior and the assessing families for risk. In addition, this table indicates whether or not there was a statistically significant relationship between the two variables.

Table 31
Cross-tabulation on the caretaker’s behavior

<table>
<thead>
<tr>
<th>Assertiveness-Affected</th>
<th>Disagreed</th>
<th>Agreed</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>#</td>
<td>%</td>
<td>#</td>
</tr>
<tr>
<td>Assertiveness-Offended</td>
<td>57</td>
<td>67.1</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>73</td>
<td>85.9</td>
<td></td>
</tr>
<tr>
<td>Disagreed</td>
<td>3</td>
<td>3.5</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>14.1</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>70.6</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>85</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

$df = 1$    $p = .000$

As indicated in Table 31, 67% of case managers indicated that they disagreed that working with assertive parents has an effect on their decision making. Fourteen percent
(14%) indicated that they agreed that they are offended by assertive parents. However, when with being offended by the assertiveness of parents was cross-tabulated with affected by assertive parents, 3% of the respondents indicated that although they agreed that they are offended by assertive parents, this did not affect their decision making. As shown in Table 31, the chi-square statistical test for significance was applied, the null hypothesis was rejected (p = .000) indicating that there was a statistically significant relationship between the two variables at the .05 level of probability.

Table 32 is a cross-tabulation on prior history of abuse. This table shows the association on prior history of abuse in substantiation and assessing families. In addition, this table indicates whether or not there was a statistically significant relationship between the two variables.

Table 32
Cross-tabulation on prior history of abuse

<table>
<thead>
<tr>
<th>Prior History-Substantiation</th>
<th>Disagreed</th>
<th>%</th>
<th>Agreed</th>
<th>%</th>
<th>Total</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disagreed</td>
<td>2</td>
<td>2.3</td>
<td>4</td>
<td>4.7</td>
<td>6</td>
<td>7.0</td>
</tr>
<tr>
<td>Agreed</td>
<td>6</td>
<td>7.0</td>
<td>74</td>
<td>86.0</td>
<td>80</td>
<td>93.0</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
<td>9.3</td>
<td>78</td>
<td>90.7</td>
<td>86</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Prior History-Assessing

<table>
<thead>
<tr>
<th>Disagreed</th>
<th>2</th>
<th>2.3</th>
<th>4</th>
<th>4.7</th>
<th>6</th>
<th>7.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreed</td>
<td>6</td>
<td>7.0</td>
<td>74</td>
<td>86.0</td>
<td>80</td>
<td>93.0</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
<td>9.3</td>
<td>78</td>
<td>90.7</td>
<td>86</td>
<td>100.0</td>
</tr>
</tbody>
</table>

df = 1  p = .036
As indicated in Table 32, 2% of case managers indicated that they disagreed that families having prior history of substantiation is not a factor in assessing for risk. A majority (93%) indicated that they agreed that having prior involvement with the department is a factor that is utilized in assessing for risk. However, when assessing prior history of abuse was cross-tabulated with prior history of substantiation, 7% of the respondents indicated that although they agreed assessing prior history is a factor, they did not believe that prior history of abuse investigation plays a role in substantiating a case. As shown in Table 32, the chi-square statistical test for significance was applied, the null hypothesis was rejected (p = .036) indicating that there was a statistically significant relationship between the two variables at the .05 level of probability.

Table 33 is a cross-tabulation on adequate legal representation. This table shows the association of adequate legal representation and court appointed attorney. In addition, this table indicates whether or not there was a statistically significant relationship between the two variables.
Table 33
Cross-tabulation on adequate legal representation

<table>
<thead>
<tr>
<th></th>
<th>Court Appointed Attorneys</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Disagreed</td>
<td>Agreed</td>
</tr>
<tr>
<td></td>
<td>#</td>
<td>%</td>
</tr>
<tr>
<td>Adequate Legal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Representation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disagreed</td>
<td>2</td>
<td>2.3</td>
</tr>
<tr>
<td>Agreed</td>
<td>4</td>
<td>4.5</td>
</tr>
<tr>
<td>Total</td>
<td>6</td>
<td>6.8</td>
</tr>
</tbody>
</table>

df = 1  p = .573

As indicated in Table 33, 2% of case managers indicated that they disagreed that their families utilize court appointed attorneys the majority of the time. A vast majority (76%) indicated that they agreed that their families are represented by court appointed attorneys. However, when having adequate legal representation was cross-tabulated with court appointed attorney, 5% of the respondents indicated that although they agreed that their families are adequately represented, they did believe that majority of their families utilize court appointed attorneys. As shown in Table 33, the chi-square statistical test for significance was applied, the null hypothesis was not rejected (p = .573) indicating that there was no statistically significant relationship between the two variables.

Table 34 is a cross-tabulation on overrepresentation. This table shows the association of overrepresentation and disproportionate of African American children in
foster care. In addition, this table indicates whether or not there was a statistically
significant relationship between the two variables.

Table 34
Cross-tabulation on overrepresentation

<table>
<thead>
<tr>
<th>Overrepresentation</th>
<th>Disproportionate</th>
<th></th>
<th>Agreed</th>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Disagreed #</td>
<td>%</td>
<td></td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Disproportionate</td>
<td>Disagreed 7</td>
<td>8.0</td>
<td>16</td>
<td>18.4</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>Agreed 8</td>
<td>9.2</td>
<td>56</td>
<td>64.4</td>
<td>64</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>17.2</td>
<td>72</td>
<td>82.8</td>
<td>87</td>
</tr>
</tbody>
</table>

df = 1          p = .051

As indicated in Table 34, 8% of case managers indicated that they disagreed that
African American children were overrepresented in the foster care system. A majority
(74%) indicated that they agreed that African American children are overrepresented in
care. However, when disproportiononate was cross-tabulated with overrepresented, only
9% of the respondents indicated that although they agreed that African American
children were disproportiononate, a vast majority of case managers did believe that African
Americans are overrepresented in foster care. As shown in Table 34, the chi-square
statistical test for significance was applied, the null hypothesis was rejected (p = .051) indicating that there was a statistically significant relationship between the two variables at the .05 level of probability.
CHAPTER V

CONCLUSIONS AND RECOMMENDATIONS

The research study was designed to answer five questions concerning the factors predicting foster care placement for African American children. The conclusions and recommendations of the research findings are presented in this chapter. Recommendations are proposed for future discussions for policy makers, social workers, practitioners, and administrators. Each research question is presented in order to summarize the significant findings of interest.

Research Question 1: Is poverty a predictor of foster care placement of African American children?

Research Question 2: Is neglect a predictor of foster care placement of African American children?

Nineteen percent (19%) of case managers indicated that they disagreed that socioeconomic status is a risk factor. A majority (77%) indicated that they agreed that not having adequate resources for caring for a child is significant in their decision making. However, when adequate resources was cross-tabulated with socioeconomic status, 52% of the respondents indicated that although they agreed that not having adequate resources is significant in their decision making of placement of youth in foster
care, they did not agree socioeconomic status plays a role in the decision making of placement (See Table 30).

As shown in Table 30, the chi-square statistical test for significance was applied, the null hypothesis was not rejected (p = .151) indicating that there was no statistically significant relationship between the two variables (See Table 30).

Research Question 3: Is history of abuse a predictor of foster care placement of African American children?

Two percent (2%) of case managers indicated that they disagreed with families having prior history of substantiation is not a factor in assessing for risk. A majority (93%) indicated that they agreed that having prior involvement with the department is a factor that is utilized in assessing for risk. However, when assessing prior history of abuse was cross-tabulated with prior history of substantiation, 7% of the respondents indicated that although they agreed assessing prior history is a factor, they did not believe that prior history of abuse investigation plays a role in substantiating a case (See Table 32).

The chi-square statistical test for significance was applied, the null hypothesis was rejected (p = .036) indicating that there was a statistically significant relationship between the two variables at the .05 level of probability (See Table 32).

Research Question 4: Is caretaker's behavior a predictor of foster care placement of African American children?
Sixty-seven percent (67%) of case managers indicated that they disagreed that working with assertive parents has an effect on their decision making. Fourteen percent (14%) indicated that they agreed that they are offended by assertive parents. However, when with being offended by the assertiveness of parents was cross-tabulated with affected by assertive parents, 3% of the respondents indicated that although they agreed that they are offended by assertive parents, this did not affect their decision making (See Table 31).

The chi-square statistical test for significance was applied, the null hypothesis was rejected (p = .000) indicating that there was a statistically significant relationship between the two variables at the .05 level of probability (See Table 31).

Research Question 5: Are inadequate access a predictor of foster care placement of African American children?

Two percent (2%) of case managers indicated that they disagreed that their families utilize court appointed attorneys majority of the time. A vast majority (76%) indicated that they agreed that their families are represented by court appointed attorneys. However, when having adequate legal representation was cross-tabulated with court appointed attorney, 5% of the respondents indicated that although they agreed that their families are adequately represented, they did believe that majority of their families utilize court appointed attorneys (See Table 33).

The chi-square statistical test for significance was not applied, the null hypothesis was rejected (p = .573) indicating that there was no statistically significant relationship between the two variables (See Table 33).
In sum, 8% of case managers indicated that they disagreed with that African American children were overrepresented in the foster care system. A majority (74%) indicated that they agreed that African American children are overrepresented in care. However, when disproportionate was cross-tabulated with overrepresented, only 9% of the respondents indicated that although they agreed that African American were disproportionate, a vast majority of case managers did believe that African Americans are overrepresented in foster care (See Table 34).

The chi-square statistical test for significance was applied, the null hypothesis was rejected (p = .051) indicating that there was a statistically significant relationship between the two variables at the .05 level of probability (See Table 34).

Recommendations

Research shows that African American children and families are disproportionately more likely to receive an involuntary government intervention when child maltreatment arises. This intervention is more likely to last longer causing separation of family members and some children and parents may never reunite. The systematic governmental destruction and separate reconstruction of the African American family is difficult to believe is in the best interest of these families (Morton, 2002).

Harris and Hackett (2008) acknowledged that, on the national level, conversation about addressing and solving the racial and ethnic disproportionality of negative outcomes has focused on changes and recommendation to the policy and practice. In addition, Harris and Hackett believe that an intervention at the individual perception and
knowledge level is needed evidence by ongoing training to address the dynamics of racism.

Researcher Jimenez (2006) poses a question that should challenge politicians, policy makers, social workers and other professionals: How can public child welfare now draw on the strengths of the African American families to develop policies to meet the needs of African American children?

The literature is limited in regards to cultural competency training that focuses on the African American perspective. Many of the cultural competency trainings are geared towards working with the Latino/Hispanic population.

As a result of the findings of this study, the researcher is recommending that:

1. Policy makers, politicians, and social workers work together to develop an effective plan to address the overrepresentation and the disproportionate rate of African American youth in foster care.

2. DFCS Administrators conduct a focus group with the front line case managers to obtain recommendations for decreasing the overrepresentation of African American youth in foster care.

3. Social workers and/or case managers conduct a focus group with African American families that are involved with the department to solicit feedback and recommendations on ways to develop a better working relationship.

4. Additional research should be conducted on cultural competency training and, subsequently, a training curriculum should be developed specifically for working with African American families.
5. Social workers and case managers participate in cultural competency training pertaining to working with African American families.
APPENDIX A

SURVEY QUESTIONNAIRE

A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE

Section 1: Consent Form

A Study of Select Factors That Predict Foster Care Placement of African American Children

Consent Form

You are invited to be in a research study on the overrepresentation of African American children being placed in the foster care system. You were selected as a possible participant because you are a Caseworker with the Department of Family and Children Services in Bibb, Decatur, or Fulton County. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

This study is being conducted by Shem Johnson, a student at the Clark Atlanta University School of Social Work.

Background Information

The study evaluates the disproportionate rate of foster care placements among African American children by the Department and Family Children Services’ Child Welfare Case Workers in the Southwestern State. The predictors such as poverty, neglect, previous child protective history, caregiver’s behavior, and safety conditions are variables that are studied for the purpose of this study.

Procedure:

If you agree to be in this study, we would ask you to do the following things. Read this consent form and answer the question if you consent in completing this survey, and complete a survey that should take no more than 15 minutes.

Risk and Benefits

There are no risks in participating in this study. The benefits are that this study will provide researchers with additional knowledge about the child welfare system.

Confidentiality:

The records of this study will be kept private. In any sort of report we might publish, we will not include any information that will make it possible to identify a participant. Research records will be kept in a locked file. only the researchers will have access to the records. The consent form will be destroyed upon the completion of the study which is May 2019.

Voluntary Nature of the Study:

Your decision whether or not to participate will not affect your current or future relationships with the researcher, or Clark Atlanta University. Your participation in this study is totally voluntary and you have the freedom to withdraw at any time without affecting these relationships previously identified.

If you have any questions now or later related to the integrity of the research (the rights of research subjects or research-related injuries, where applicable), you are encouraged to contact Dr. Giorgio E. Bolden at the Office of Sponsored Programs (404-857-4878) or Dr. Paul L. Macey (404-857-8129) at Clark Atlanta University.

You will be given a copy of this form to keep for your records.

1. Do you agree to the consent information listed on this form?

☐ Yes, I agree to the above consent form

☐ No, I don't agree to the above consent form

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A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE

2. What county do you work?
   - Bibb
   - Fulton
   - DeKalb

3. Gender
   - Male
   - Female

4. Age Group
   - Under 30
   - 30-39
   - 40-49
   - Over 50

5. Race
   - Black
   - White
   - Hispanic
   - Asian
   - Other

6. Marital Status
   - Married
   - Never married
   - Divorced
   - Widowed
A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE

<table>
<thead>
<tr>
<th>7. Educational Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School Graduate</td>
</tr>
<tr>
<td>Bachelor</td>
</tr>
<tr>
<td>Master</td>
</tr>
<tr>
<td>Doctorate</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. Income Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>$100 - $999</td>
</tr>
<tr>
<td>$10K - $19.9K</td>
</tr>
<tr>
<td>$20K - $29.9K</td>
</tr>
<tr>
<td>$30K - $39.9K</td>
</tr>
<tr>
<td>$40K - $49.9K</td>
</tr>
<tr>
<td>$50K - $59.9K</td>
</tr>
<tr>
<td>$60K - $69.9K</td>
</tr>
<tr>
<td>$70K - $79.9K</td>
</tr>
<tr>
<td>$80K - $89.9K</td>
</tr>
<tr>
<td>$90K - $99.9K</td>
</tr>
<tr>
<td>$100K - $199.9K</td>
</tr>
</tbody>
</table>
## APPENDIX A (continued)

### A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE

**Section II: How much do you disagree or agree with the following statements?**

| 9. Do you believe in the mission statement of DFCS? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |

| 10. Do you feel that your caseload is manageable? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |

| 11. Do you feel that your caseload is too large? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |

| 12. Do you feel that DFCS have structures in place to prevent children from coming into foster care? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |

| 13. Have you ever disagreed with a Judge's decision to deprive a child? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |

| 14. Does socioeconomic status affect your opinion(s) about families? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |

| 15. Are you affected by the assertiveness of parents? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |

| 16. Do you believe there is a relationship between case worker's levels of education with placement of African American youth in foster care? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |

| 17. Do you think there is a relationship between case worker's cultural competences with placement of African American youth in foster care? |
|---|---|---|---|---|
| Strongly Disagree | Disagree | Agree | Somewhat Agree | Strongly Agree |
| | | | | |
### APPENDIX A (continued)

#### A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Somewhat Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Do you believe that prior history of abuse investigation plays a role in substantiating a case?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Does Caregiver not having adequate resources for caring for a child is significant in your decision making?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Does majority of your families utilize court appointed attorneys?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. If the family had previous involvement with the department do you believe that this is a factor in assessing risk?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Do you believe that your families are adequately legally represented in court?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Do you believe that your families have access to adequate supportive services?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Have you ever agreed with the Judge's decision on depriving a child?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Do you get offended by an assertive parent?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Do you think the education of a case manager matter in assessing families?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. Is it important for case managers to understand African American's values, norms and customs in order to assess an African American family?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Do you believe that the removal of a child is beneficial?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX A (continued)

A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE

28. Are you aware of the research on the outcomes of children being removed from their family unit?
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree

30. Do you understand the emotional connectedness of a family unit?
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree

31. Do you believe that African American children are overrepresented in foster care?
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree

32. Do you think that African American children are disproportionately in foster care?
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree

33. Do you believe that a number of the abuse allegations are made by medical officials?
   - Strongly Disagree
   - Disagree
   - Agree
   - Strongly Agree
APPENDIX B

INFORMED CONSENT FORM

A Study of Select Factors That Predict Foster Care Placement of African American Children
Consent Form

You are invited to be in a research study on the overrepresentation of African American children being raised in the foster care system. You were selected as a possible participant because you are a Caseworker with the Department of Family and Children Services in Bibb, DeKalb or Fulton County. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

This study is being conducted by: Shaun Johnson, a student of the Clark Atlanta University School of Social Work

Background Information:
This study explores the disproportionate rate of foster care placements among African American children by the Department and Family Children Services' Child Welfare Case Workers in the Southeastern State. The predictors such as poverty, neglect, previous child protective history, caretaker's behavior and safety conditions are variables that are studied for the purpose of this study.

Procedures:
If you agree to be in this study, we would ask you to do the following things. Read and sign this consent form; and complete a survey that should take no more than 15 minutes.

Risk and Benefits:
There are no risks in participating in this study. The benefits are that this study will provide researchers with additional knowledge about the child welfare system.

Confidentiality:
The records of this study will be kept private. In any sort of report we might publish, we will not include any information that will make it possible to identify a participant. Research records will be kept in a locked file; only the researchers will have access to the records. The consent form will be destroyed upon the completion of this study which is May 2013.

Voluntary Nature of the Study:
Your decision whether or not to participate will not affect your current or future relations with the researcher, or Clark Atlanta University. Your participation in this study is totally voluntary and you have the freedom to withdraw at any time without affecting those relationships previously identified.

If you have any questions now, or later, related to the integrity of the research, (the rights of research subjects or research-related injuries, where applicable), you are encouraged to contact Dr. Georgianna Bolden at the Office of Sponsored Programs (404 880-6979) or Dr. Paul I. Musey, (404) 880-6829 at Clark Atlanta University.

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You will be given a copy of this form to keep for your records.

Statement of Consent: I have read the above information. I have asked questions and have received answers. I consent to participate in the study.

Signature ___________________________ Date: ________________
Signature of Investigator ________________ Date: ________________
APPENDIX C

IRB APPROVAL LETTER

CLARK ATLANTA UNIVERSITY
Institutional Review Board
Office of Sponsored Programs

February 11, 2013

Ms. Shaun Johnson <shawn.a.johnson@att.net>
School of Social Work
Clark Atlanta University
Atlanta, GA 30314

TITLE: A Study of Select Factors That Predict The Foster Care Placement of African American Children in a Southeastern State.

Principal Investigator(s): Shaun Johnson

Human Subjects Code Number: HR2013-1-464/1

Dear Ms. Johnson:

The Human Subjects Committee of the Institutional Review Board (IRB) has reviewed your protocol and approved it as exempt in accordance with 45 CFR 46.101(b)(2).

Your Protocol Approval Code is HR2013-1-464-1/A

This permit will expire on February 10, 2014. Thereafter, continued approval is contingent upon the annual submission of a renewal form to this office.

The CAU IRB acknowledges your timely completion of the CITI IRB Training in Protection of Human Subjects—"Social and Behavioral Sciences Track". Your certification is valid for two years.

If you have any questions, please contact Dr. Georgianna Bolden at the Office of Sponsored Programs (404) 880-6819 or Dr. Paul I. Mussey, (404) 880-6829.

Sincerely:

[Signature]

Paul I. Mussey, Ph.D.
Chair
IRB: Human Subjects Committee

Office of Sponsored Programs. "Dr. Georgianna Bolden" <gbolden@cau.edu>
December 5, 2012

Shaun E. Johnson
Provider Relations Manager
2 Peachtree Street NW, 18-434
Atlanta, GA 30303

Project: 121108 - A Study of Select Factors That Predict Foster Care Placement Of African-American Children

Dear Researcher,

The DPH Institutional Review Board has determined that the above-referenced project is exempt from the requirement for IRB review and approval.

Reason:
- Program evaluation

This exemption applies only to the protocol described in your application. Any modification to this protocol may change the status of this project and may require IRB review and approval except where necessary to eliminate apparent immediate hazards to human subjects.

If you have any questions regarding this letter or general procedures, please contact the IRB Chair at luis@health.state.ga.us. Please reference the project # in your communication.

Best wishes in your research endeavors,

Luke Fiedorowicz, Ph.D.
APPENDIX D

SPSS PROGRAM ANALYSIS

TITLE 'A STUDY OF SELECT FACTORS THAT PREDICT FOSTER CARE PLACEMENT'.
SUBTITLE 'Shaun Johnson - PhD Program CAU School of Social Work'.

DATA LIST FIXED/
ID 1-3
COUNTY 4
GENDER 5
AGEGRP 6
RACE 7
MARITAL 8
EDUCAT 9
INCOME 10
MISSION 11
MANAGE 12
LARGE 13
PREVENT 14
DECISION 15
STATUS 16
PARENTS 17
BELIEVE 18
CULTURAL 19
HISTORY 20
CAREGIVER 21
ATTORNEY 22
PREVIOUS 23
ADEQUATE 24
ACCESS 25
JUDGESDI 26
OFFENDED 27
MANAGER 28
VALUES 29
REMOVAL 30
AWAREOF 31
EMOTION 32
OVERREP 33
CHILDREN 34
MEDICAL 35.

VARIABLE LABELS
ID 'Case Number'
COUNTY 'Q2 What county do you work'
GENDER 'Q3 Gender'
AGEGRP 'Q4 Age Group'

132
APPENDIX D (continued)

RACE 'Q5 Race'
MARITAL 'Q6 Marital Status'
EDUCAT 'Q7 Educational Level'
INCOME 'Q8 Income Level'
MISSION 'Q9 Do you believe in the mission statement of DFCS'
MANAGE 'Q10 Do you feel your caseload is manageable'
LARGE 'Q11 Do you feel that your caseload is too large'
PREVENT 'Q12 Do you feel that DFCS have structures in place to prevent
children from coming into foster care'
DECISION 'Q13 Have you ever disagreed with a judges decision to deprive
a child'
STATUS 'Q14 Does Socioeconomic status affect your opinions about
families'
PARENTS 'Q15 Are you affected by the assertiveness of parents'
BELIEVE 'Q16 Do you believe there is a relationship between case workers
levels of education with placement of African American youth in foster
care'
CULTURAL 'Q17 Do you think there is a relationship between case workers
cultural competences with placement of African American youth in foster
care'
HISTORY 'Q18 Do you believe that prior history of abuse investigation
plays a role in substantiating a case'
CAREGIVE 'Q19 Does Caregiver not having adequate resources for caring
for a child is significant in your decision making'
ATTORNEY 'Q20 Does majority of your families utilize court appointed
attorneys'
PREVIOUS 'Q21 If the family had previous involvement with the department
do you believe that this is a factor in assessing risk'
ADEQUATE 'Q22 Do you believe that your families are adequately legally
represented in court'
ACCESSTO 'Q23 Do you believe that your families have access to adequate
supportive services'
JUDGESDI 'Q24 Have you ever agreed with the Judges decision on depriving
a child'
OFFENDED 'Q25 Do you get offended by an assertive parent'
MANAGER 'Q26 Do you think the education of a case manager matter in
assessing families'
VALUES 'Q27 Is it important for case managers to understand African
Americans values,norms and customs in order to assess an African
American family'
REMOVAL 'Q28 Do you believe that the removal of a child is beneficial'
AREWAREOF 'Q29 Are you aware of the research on the outcomes of children
being removed from their family unit'
EMOTION 'Q30 Do you understand the emotional connectedness of a family
unit'
OVERREP 'Q31 Do you believe that African American children are
overrepresented in foster care'
CHILDREN 'Q32 Do you think that African American children are
disproportionate in foster care'
MEDICAL 'Q33 Do you believe that a number of the abuse allegation are
made my medical officials'.
VALUE LABELS
COUNTY
1 'Bibb'
2 'Fulton'
3 'Dekalb'/
GENDER
1 'Male'
2 'Female'/
AGEGRP
1 'Under 30'
2 '30-39'
3 '40-49'
4 'Over 50'/
RACE
1 'Black'
2 'White'
3 'Hispanic'
4 'Asian'
5 'Other'/
MARITAL
1 'Married'
2 'Never Married'
3 'Divorced'
4 'Widowed'/
EDUCAT
1 'High School Graduate'
2 'Technical'
3 'Bachelor'
4 'Master'
5 'Doctoral'/
INCOME
1 'Under $30,000'
2 '$30,000-34,000'
3 '$35,000-39,000'
4 '$40,000-49,999'
5 'Over $50,000'/
MISSION
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Somewhat Agree'
5 'Strongly Agree'/
MANAGE
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Somewhat Agree'
5 'Strongly Agree'/
LARGE
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
APPENDIX D (continued)

1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'/

PREVENT
1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'/

DECISION
1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'/

STATUS
1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'/

PARENTS
1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'/

BELIEVE
1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'/

CULTURAL
1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'/

HISTORY
1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'/

CAREGIVE
1. 'Strongly Disagree'
2. 'Disagree'
3. 'Agree'
4. 'Somewhat Agree'
5. 'Strongly Agree'
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<th>4 'Somewhat Agree'</th>
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<td>4 'Somewhat Agree'</td>
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<tr>
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<td>ACCESS TO</td>
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<td>3 'Agree'</td>
<td>4 'Somewhat Agree'</td>
<td>5 'Strongly Agree'</td>
</tr>
<tr>
<td>JUDGES DI</td>
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<td>5 'Strongly Agree'</td>
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<tr>
<td>OFFENDED</td>
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<td>2 'Disagree'</td>
<td>3 'Agree'</td>
<td>4 'Somewhat Agree'</td>
<td>5 'Strongly Agree'</td>
</tr>
<tr>
<td>MANAGER</td>
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<td>2 'Disagree'</td>
<td>3 'Agree'</td>
<td>4 'Somewhat Agree'</td>
<td>5 'Strongly Agree'</td>
</tr>
<tr>
<td>VALUES</td>
<td>1 'Strongly Disagree'</td>
<td>2 'Disagree'</td>
<td>3 'Agree'</td>
<td>4 'Somewhat Agree'</td>
<td>5 'Strongly Agree'</td>
</tr>
<tr>
<td>REMOVAL</td>
<td>1 'Strongly Disagree'</td>
<td>2 'Disagree'</td>
<td>3 'Agree'</td>
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</tbody>
</table>
APPENDIX D (continued)

4 'Somewhat Agree'
5 'Strongly Agree'/

AWAREOF
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Somewhat Agree'
5 'Strongly Agree'/

EMOTION
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Somewhat Agree'
5 'Strongly Agree'/

OVERREP
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Somewhat Agree'
5 'Strongly Agree'/

CHILDRN
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Somewhat Agree'
5 'Strongly Agree'/

MEDICAL
1 'Strongly Disagree'
2 'Disagree'
3 'Agree'
4 'Somewhat Agree'
5 'Strongly Agree'/.

RECODE MISSION MANAGE LARGE PREVENT DECISION STATUS PARENTS BELIEVE (1 THRU 2.99=2)(3 THRU 5.99=3).
RECODE CULTURAL HISTORY CAREGIVE ATTORNEY PREVIOUS ADEQUATE ACCESS TO (1 THRU 2.99=2)(3 THRU 5.99=3).
RECODE JUDGESDI OFFENDED MANAGER VALUES REMOVAL AWAREOF EMOTION (1 THRU 2.99=2)(3 THRU 5.99=3).
RECODE OVERREP CHILDREN MEDICAL(1 THRU 2.99=2)(3 THRU 5.99=3).

MISSING VALUES
   COUNTY GENDER AGEGRP RACE MARITAL EDUCAT INCOME MISSION
MANAGE LARGE PREVENT DECISION STATUS PARENTS BELIEVE
CULTURAL HISTORY CAREGIVE ATTORNEY PREVIOUS ADEQUATE ACCESS TO
JUDGESDI OFFENDED MANAGER VALUES REMOVAL AWAREOF EMOTION
OVERREP CHILDREN MEDICAL (0).
APPENDIX D (continued)

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APPENDIX D (continued)

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END DATA.

FREQUENCIES
/VARIABLES COUNTY GENDER AGEGRP RACE MARITAL EDUCAT INCOME MISSION
MANAGE LARGE PREVENT DECISION STATUS PARENTS BELIEVE
CULTURAL HISTORY CAREGIVE ATTORNEY PREVIOUS ADEQUATE ACCESSTO
JUDGES DI OFFENDED MANAGER VALUES REMOVAL AWAREOF EMOTION
OVERREP CHILDREN MEDICAL
/STATISTICS=DEFAULT.
REFERENCES


Barth, R. (2009). Racial disproportionality in child welfare: The debate is missing and we need to find it. On addressing disparities and disproportionality in child welfare: “Best practices and emerging opportunities.”


Special data tabulation of 2000 NCANDS, and U.S. Census data (for maltreatment data calculations).


