HEARING ON RACIAL DISPROPORTIONALITY IN FOSTER CARE

HEARING

BEFORE THE

SUBCOMMITTEE ON INCOME SECURITY AND FAMILY SUPPORT

OF THE

COMMITTEE ON WAYS AND MEANS

U.S. HOUSE OF REPRESENTATIVES

ONE HUNDRED TENTH CONGRESS

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HEARING ON RACIAL DISPROPORTIONALITY IN FOSTER CARE

THURSDAY, JULY 31, 2008

U.S. HOUSE OF REPRESENTATIVES,
COMMITTEE ON WAYS AND MEANS,
SUBCOMMITTEE ON INCOME SECURITY AND FAMILY SUPPORT,
Washington, DC.

The Subcommittee met, pursuant to notice, at 10:00 a.m., in room B–318, Rayburn House Office Building, Hon. Jim McDermott (Chairman of the Subcommittee) presiding.

[The advisory announcing the hearing follows:]

ADVISORY

FROM THE COMMITTEE ON WAYS AND MEANS

COMMITTEE ON INCOME SECURITY AND FAMILY SUPPORT

FOR IMMEDIATE RELEASE
July 24, 2008
ISFS–18

CONTACT: (202) 225–1025

McDermott Announces Hearing on Racial Disproportionality in Foster Care

Congressman Jim McDermott (D–WA), Chairman of the Subcommittee on Income Security and Family Support, today announced a hearing to examine racial disproportionality in the foster care system. The hearing will take place on Thursday, July 31, 2008, at 10:00 a.m. in room B–318 Rayburn House Office Building.

In view of the limited time available to hear witnesses, oral testimony at this hearing will be from invited witnesses only. However, any individual or organization not scheduled for an oral appearance may submit a written statement for consideration by the Subcommittee and for inclusion in the printed record of the hearing.

BACKGROUND:

Research has concluded that a significantly greater portion of African American children enter and remain in the foster care system when compared to children of other races and ethnicities. The disproportionate representation of these children in foster care occurs despite the fact that there are no inherent differences in the rates at which they are abused or neglected, according to the National Incidence Study of Child Abuse and Neglect. Native American children also experience higher rates of representation in foster care.

A report released by the Government Accountability Office (GAO) in July 2007 found African American children across the nation were more than twice as likely to enter foster care compared to white children in FY 2004, and these children remained in foster care roughly 9 months longer. Furthermore, GAO found Native American children represented just 1 percent of all children in the 2000 Census, but comprised over 2 percent of children in foster care at the end of FY 2004. Higher rates of poverty, limited access to vital support services, racial bias, and difficulty recruiting prospective adoptive families for these children are often cited as the primary factors that contribute to the problem.

The GAO report highlighted the potential benefits of increased Federal support for relatives who become legal guardians of foster children for reducing the overrepresentation of African American children in the system. Bipartisan legislation (H.R. 6307) introduced by Chairman McDermott and Ranking Member Jerry Weller and passed by the House last month would provide for these guardianship payments, among other things.

In announcing the hearing, Chairman McDermott stated: "Racial disproportionality challenges our ability to ensure the well-being and permanency of every child in our nation's foster care system. Overcoming this problem is critical to achieving positive outcomes for all children in care. This hearing will allow us to get a better understanding of the factors that contribute to this problem and promising strategies that will lead to a long-term solution."

FOCUS OF THE HEARING:

The hearing will examine the prevalence of racial disproportionality in the foster care system, the primary factors that contribute to this problem, and promising initiatives that are currently being implemented in several States to address it.

DETAILS FOR SUBMISSION OF WRITTEN COMMENTS:

Please Note: Any person(s) and/or organization(s) wishing to submit for the hearing record must follow the appropriate link on the hearing page of the Committee website and complete the informational forms. From the Committee homepage, *http://waysandmeans.house.gov*, select "110th Congress" from the menu entitled, "Hearing Archives" (*http://waysandmeans.house.gov/Hearings.asp?congress=18). Select the hearing for which you would like to submit, and click on the link entitled, "Click here to provide a submission for the record." Once you have followed the online instructions, complete all informational forms. ATTACH your submission as a Word or WordPerfect document, in compliance with the formatting requirements listed below, by close of business* **August 14, 2008**. Finally, please note that due to the change in House mail policy, the U.S. Capitol Police will refuse sealed-package deliveries to all House Office Buildings. For questions, or if you encounter technical problems, please call (202) 225–1721.

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The Committee relies on electronic submissions for printing the official hearing record. As always, submissions will be included in the record according to the discretion of the Committee. The Committee will not alter the content of your submission, but we reserve the right to format it according to our guidelines. Any submission provided to the Committee by a witness, any supplementary materials submitted for the printed record, and any written comments in response to a request for written comments must conform to the guidelines listed below. Any submission or supplementary item not in compliance with these guidelines will not be printed, but will be maintained in the Committee files for review and use by the Committee.

1. All submissions and supplementary materials must be provided in Word or WordPerfect format and MUST NOT exceed a total of 10 pages, including attachments. Witnesses and submitters are advised that the Committee relies on electronic submissions for printing the official hearing record.

2. Copies of whole documents submitted as exhibit material will not be accepted for printing. Instead, exhibit material should be referenced and quoted or paraphrased. All exhibit material not meeting these specifications will be maintained in the Committee files for review and use by the Committee.

3. All submissions must include a list of all clients, persons, and/or organizations on whose behalf the witness appears. A supplemental sheet must accompany each submission listing the name, company, address, telephone and fax numbers of each witness.

Note: All Committee advisories and news releases are available on the World Wide Web at http://waysandmeans.house.gov.

The Committee seeks to make its facilities accessible to persons with disabilities. If you are in need of special accommodations, please call 202–225–1721 or 202–226–3411 TTD/TTY in advance of the event (four business days notice is requested). Questions with regard to special accommodation needs in general (including availability of Committee materials in alternative formats) may be directed to the Committee as noted above.

Chairman MCDERMOTT. This meeting will come to order. Today we are going to talk about racial disproportionality, which is a fancy name for the fact that certain groups appear more in foster care than others.

Foster care is obviously a necessity for some children. Our goal, really, for every child is a permanent, loving home. Unfortunately, this goal seems like a distant dream for too many kids in foster

care, especially for African American and Native American children.

We are here today to focus on the over-representation of some children of color in foster care, a problem that has been called racial disproportionality. Big words don't do well in the press, so we will try and avoid them as much as possible.

As you can see from the chart which is in front of you on the screen which comes from the GAO, white kids are to the left, and then you've got African American kids. You can see that the number of children, the red bars, are the number of children in foster care. So, you can see that African American, and then you can see on the far right, Native Americans, there is very few Native American children, but disproportionately, again, they are in foster care. It's that issue that we are really trying to look at today.

Now, there is not really, in my view and I have been looking at these things, for a long time. When I was in the State legislature, I was involved as a child psychiatrist in looking at deprivation of kids, deprivation of parents, their parental rights. So, I know a lot about what goes on in a State.

There really is not a single factor driving the over-representation of these kids in the system. Poverty, limited services in certain communities, single-parent families, racial bias, difficulty in recruiting prospective adoptive homes all play a role in this. I think that I started the first, or maybe the second adoption subsidy program in the United States, and it was back in 1971, trying to get racially mixed kids into adoptive homes. So, I have seen the system for a long time, and we're really looking forward to hearing from the witnesses.

Unfortunately, I think some of what I saw in 1971 is still going on today. So, we may not learn much, but I think it's important for everybody at this time to really be thinking about it.

We are also looking and listening for solutions. I want to know if the panel agrees that investments in strengthening families will make abuse and neglect less likely to occur. If so, what are the interventions that we should focus on first? Obviously, we are not going to be able to do everything under the sun, but we can pick some things that may make some sense.

Additionally, improvements to child welfare practice needs to prevent racial bias from affecting placement decisions. I think we need to remember that the rate of entry into foster care is only part of the problem. Longer stays for some children also increases the disproportionality of these kids. It should trouble us when we hear that African American children, on average, remain in care about 9 months longer than white kids. More comprehensive service to help children return to their families, and improve the recruitment of potential adoptive families for children who cannot return home would both likely reduce the time these children spend in foster care.

Now, the Subcommittee recently acted on another response that may likewise move children more quickly from foster care to permanent homes, "The Fostering Connection Act," which Mr. Weller and I introduced, and which we rifled out of here like a rifle shot over to the Senate, and now we watch it sit over there. I understand there is going to be a hearing tomorrow, a mark-up in the

Senate, at least there was one scheduled in the Finance Committee, to look at this issue.

So, we are still hopeful that it may get through before we get out of here. The bill would give Federal payments to legal guardians of foster kids, so-called "kinship care." GAO specifically recommended this step to reduce the over-representation of African American children in foster care.

Supporting relative guardianship will open the doors for more permanent homes for all children, but it is especially felt to be helpful for African American kids, given their lower adoption rates in our system.

The same legislation also would provide direct access to Federal foster care and adoption assistance to Native American tribes. This is a bill that Mr. Weller and I cosponsored, allowing for tribal communities to find permanent homes for Native American children. I am hopeful, as I said, about the Senate taking this bill up.

Like so many complex problems, racial disproportionality is not explained by a single cause, and it isn't going to be solved by a single remedy. Saying a problem is difficult is not saying it is insurmountable. There are steps we can take today that will make a positive difference, even as we continue to search for additional solutions in the future.

I would like to yield the microphone to Mr. Weller, my Ranking Member. I said to him this is our last hearing with him on the Subcommittee. Now, there may be one in September. He wants to choose the subject, but we will see about that. Jerry.

Mr. WELLER. Well, thank you, Mr. Chairman. If this is our last hearing, I just want to say I have enjoyed working with you, and we still have six more months to work together in my role as your Ranking Member. I just want to commend you for the leadership you have given, and the opportunity to work with you in a bipartisan way. I thank you for that.

I also want to thank you for arranging today's hearing, and thank the witnesses for joining us. Today's hearing reviews complicated questions about race in the nation's child welfare system, including foster care.

As we have learned from prior hearings in this and other congresses, this is a system in need of improvement and reform. To our credit, and with the help of many advocacy and supportive groups and individuals, we have made progress this year.

Just last month, the House passed the Bipartisan Fostering Connections for Success Act, H.R. 6307. Chairman McDermott and I developed this legislation, based on many solid policy recommendations, and it includes important policy changes I have advocated for years. Those include: increasing Federal reimbursement rates for training child welfare workers; and ensuring that Native American tribes have equal access to Federal foster care funds.

Today's hearing will let us take a step back and consider how the changes in H.R. 6307 might help prevent abuse and neglect, quickly re-unify families, and promote adoption. As we will hear, these issues are especially important for African American and Native American children, who not only enter foster care more often than other children, but tend to stay there longer, compounding front-end concerns.

I want to welcome Daryle Conquering Bear, who will discuss the importance of providing more equitable access to foster care and adoption services for Native American children in tribal areas. I have long supported legislation to do so, as has my colleague, Dave Camp, amongst others. This provision is included in H.R. 6307, as unanimously passed by the House. Our first Americans should be treated as full Americans, including in child welfare programs.

It is our hope this provision will translate into better care and better outcomes for the approximately 10,000 young Native Americans in foster care today. Other provisions in our bill encourage young Americans to get more and better education.

For the first time, staying in high school through graduation will be a condition of receiving Federal foster care, relative guardian, or adoption payments. This requirement sends out a very clear message: that young people are expected to complete at least high school. Getting a high school diploma is the foundation for a successful and independent life. As David Brooks described in an excellent piece in the New York Times on July 29th, the skills gap caused by declines in high school graduation since the late sixties and rising family breakdown go a long way toward explaining rising concerns about insecurity and inequality in recent decades.

Given that, high school completion and continued education is especially important for youth in foster care, who face high hurdles in life, and certainly do not need more.

We are also joined by Dr. Terry Solomon, executive director of the Illinois African American Family Commission. The commission shares my view on the paramount importance of educational achievement to not only foster youth, but all youth. Without better educational outcomes, the building block of a better life for all families, we will not be able to realize our common goal: preventing abuse and neglect for children of all backgrounds.

I want to thank the Chairman for working with me on these important issues. It has been a pleasure. We have more to do. I look forward to our continued efforts to work with our colleagues in the Senate, ultimately seeing the Fostering Connections for Success Act signed into law before the end of this year. It is something we can get done. I am committed to working with the Chairman and my Senate colleagues to get it done.

I also want to work with our friends in the advocacy community to help us get it done as well, as we make it a priority in the remaining items of business for the House and Senate. I look forward to the testimony of our witnesses this morning. Good morning, and thank you.

I yield back, Mr. Chairman.

Chairman MCDERMOTT. All other Members will have five legislative days to submit anything they want to put in the record.

Our first witness is Kay Brown, who is the Director of Education, Workforce, and Income Security from GAO.

Ms. Brown.

STATEMENT OF KAY E. BROWN, ASSISTANT DIRECTOR OF EDUCATION, WORKFORCE, AND INCOME SECURITY, GOVERNMENT ACCOUNTABILITY OFFICE

Ms. BROWN. Mr. Chairman and Members of the Subcommittee, thank you for inviting me here to discuss our work on the disproportionate number of African American children in foster care. This information is from a report we issued in July 2007.

This morning I will focus on three things: the level of disproportionality for these children in the foster care system; the factors that contribute to this situation; and promising strategies that may help address it.

First, regarding the level of disproportionality, national studies have shown that children suffer from abuse and neglect at the same rates, regardless of their race or ethnicity. Yet we found that African American children were about three times more likely than white children to be placed in foster care in 2006. Furthermore, African American children remained in foster care about 9 months longer than white children. All but one State had some level of disproportionality.

Our study focused on African American children. However, nationally, Native American children, as evidenced by the chart we saw earlier, are also experiencing higher rates of representation in foster care.

Second, regarding the contributing factors, this is a complex issue. Many of the factors we identified are inter-related. Some are linked to poverty. While families of all races live in poverty, African American families are more likely to do so than white families. Families living in poverty may find it more difficult to access supports and services, such as affordable housing and counseling that could help them with their problems when they arise.

However, other factors also play a role. These include bias and cultural misunderstanding on the part of key decisionmakers, such as mandated reporters and caseworkers, as well as distrust of the child welfare system on the part of African American families.

In addition, when children cannot be reunited with their families, State officials reported difficulties in finding them appropriate permanent homes, in part because of the challenges in recruiting adoptive parents, such as for older African American children.

Finally, regarding promising strategies, most States report taking steps to address the factors I just mentioned. They are working to increase access to support services, providing training to help mitigate bias and cultural misunderstanding, and broadening their search for other relatives to serve as care givers, such as paternal kin.

State officials have also identified areas where Federal policies can help support promising practices. For example, these officials cited the benefits of Federal subsidies for adoptive families. However, this has not solved their struggle to recruit enough adoptive parents. Over the last 5 years, African American children, as well as Native American children, have consistently experienced lower rates of adoption than children of other races and ethnicities.

As an alternative to adoption, legal guardianship provides another permanency option. Some States believe subsidizing legal guardianship can help reduce disproportionality, because African

American children are more likely than white children to be placed with relatives for foster care. Although these relatives, such as grandmothers, may want to permanently care for the children, they may be less willing or able to adopt them, in part because adoption entails terminating the parental rights of their kin.

In States that have experimented with these subsidies, studies have found that they reduce the number of children in foster care without increasing costs, and provided comparable levels of stability and emotional and physical health. With this in mind, in our July 2007 report we suggested that Congress consider amending current law to allow subsidies for legal guardianships, similar to those provided for adoptions. The subsidies in the Fostering Connections to Success Act are very consistent with this idea.

In conclusion, the issues surrounding the disproportionality of African American children in foster care are complex, inter-related, and pervasive. No single strategy can fully address them. However, the circumstances warrant a concerted effort on the part of the Federal Government, States, and localities.

This concludes my prepared statement. I would be happy to answer any questions you or other Members of the Subcommittee have.

[The prepared statement of Ms. Brown follows:]

United States Government Accountability Office

GAO

Testimony

Before the Subcommittee on Income Security and Family Support, Committee on Ways and Means, House of Representatives

For Release on Delivery
Expected at 10:00 a.m. EDT
Thursday, July 31, 2008

AFRICAN AMERICAN CHILDREN IN FOSTER CARE

HHS and Congressional Actions Could Help Reduce Proportion in Care

Statement of Kay Brown, Director
Education, Workforce, and Income Security

GAO-08-1064T

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Accountability-Integrity-Reliability

Highlights

Highlights of GAO-08-1064T, a testimony before the Subcommittee on Income Security and Family Support, Committee on Ways and Means, House of Representatives

Why GAO Did This Study

A significantly greater proportion of African American children are in foster care than children of other races and ethnicities relative to their share of the general population. Given this situation, GAO was asked to analyze the (1) major factors influencing their proportion in foster care, (2) strategies states and localities have implemented that appear promising, and (3) ways in which federal policies may have influenced the proportion of African American children in foster care. This testimony is based on a GAO report issued in July 2007 (GAO-07-816), which included a nationwide survey, a review of research and policies, state site visits, analyses of child welfare data, and interviews with researchers, HHS officials, and other experts. It includes updates where possible.

What GAO Recommends

In our July 2007 report, GAO recommended that HHS further assist states in addressing disproportionality. HHS noted that GAO's recommendation was consistent with its efforts to provide technical assistance to states, but it has not addressed the specific actions. GAO continues to believe that further assistance is important for helping states address disproportionality. GAO also suggested that Congress consider amending current law to allow subsidies for legal guardianships. HHS believes its proposal for restructuring child welfare funding, first offered in 2004, would give states the option to do this, but the viability of this proposal is uncertain.

To view the full product, including the scope and methodology, click on GAO-08-1064T. For more information, contact Kay Brown at (202) 512-7215 or brownke@gao.gov.

July 2008

AFRICAN AMERICAN CHILDREN IN FOSTER CARE

HHS and Congressional Actions Could Help Reduce Proportion in Care

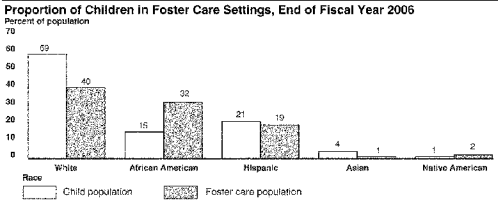
What GAO Found

According to our survey results, key factors contributing to the proportion of African American children in foster care included a higher rate of poverty, challenges in accessing support services, racial bias and distrust, and difficulties in finding appropriate adoptive homes. Families living in poverty have greater difficulty accessing housing, mental health, and other support services needed to keep families stable and children safely at home. Bias or cultural misunderstandings and distrust between child welfare decision makers and the families they serve also contribute to children's removal from their homes into foster care. African American children also stay in foster care longer because of difficulties in recruiting adoptive parents, the lack of services for parents trying to reunify with their children, and a greater reliance on relatives to provide foster care who may be unwilling to terminate the parental rights of the child's parent—as required in adoption—or who need the financial subsidy they receive while the child is in foster care.

Most states we surveyed reported using various strategies intended to address these issues, such as building community supports, providing cultural competency training for caseworkers, and broadening the search for relatives to care for children. Researchers and officials also stressed the importance of analyzing data to address the proportion of African American children in care in order to better understand the issue and devise strategies to address it. HHS provides information and technical assistance, but states reported that they had limited capacity to analyze their own data and formulate strategies to address disproportionality.

According to our survey, states viewed some federal policies, such as those that promote adoption, as helpful for reducing the proportion of African American children in foster care. However, they also expressed concerns regarding policies that limit the use of federal funds to provide preventive services and support legal guardianship arrangements. As an alternative to adoption, subsidized guardianship is considered particularly promising for helping African American children exit from foster care.

Proportion of Children in Foster Care Settings, End of Fiscal Year 2006



Source: GAO analysis of preliminary 2006 data from the Adoption and Foster Care Analysis and Reporting System and 2006 Census data.

Mr. Chairman and Members of the Subcommittee:

I am pleased to be here today to discuss our work on African American children and the extent to which they are disproportionately represented in foster care relative to their share of the general population.[1] Nationwide, about 510,000 children were in foster care at the end of fiscal year 2006, a significant proportion of them African American children. African American children were about three times as likely to be placed in foster care compared with White children in 2006, and African American children remained in foster care about 9 months longer as well.[2] This disproportionality occurs despite the fact that national studies have shown that children suffer from abuse and neglect at the same rates regardless of their race or ethnicity.[3] Although states vary considerably, data from nearly all states show some overrepresentation of African American children in foster care.

As you know, about 60 percent of children who enter foster care do so in response to reports of child abuse or neglect that are provided to a state's child welfare system by doctors, teachers, police officers, and others.[4] Child welfare staff make decisions about whether a child can or cannot remain safely at home with their families, which are then presented before a judge who corroborates or overturns the decision. If a child enters foster care, child welfare staff develop case plans, approved by the courts, outlining the actions that parents must take before a child can be returned home. If the courts decide that children cannot be safely returned home, caseworkers establish other goals for them, such as adoption or legal guardianship. Although states have the primary responsibility for establishing the structures and programs of their child welfare services, federal policies establish a framework within which states make their

[1]Racial disproportionality refers to the extent that children of a certain race or ethnic group are over- or underrepresented in foster care relative to their proportion in the population.

[2] The difference in length of time in foster care is based on 2004 Adoption and Foster Care Analysis and Reporting System data because we were not able to obtain more recent data in time for this testimony.

[3]See the National Incidence Study (NIS), a congressionally mandated, periodic effort of the National Center on Child Abuse and Neglect to obtain information about the current incidence of child abuse and neglect in the United States. NIS-1 was published in 1981, NIS-2 in 1988, and NIS-3 in 1996. The NIS-3 findings are based on a nationally representative sample of over 5,600 professionals in 842 agencies serving 42 counties in the United States. Reports from the NIS-4 are anticipated in December 2008.

[4]Children also enter foster care for other reasons, such as their parents' illness, death, or disability or because of the children's delinquent behavior and truancy.

programmatic and fiscal decisions. The Department of Health and Human Services (HHS) is the principal federal agency that provides federal oversight of states' child welfare systems.

My remarks today will focus on the following issues with regard to the proportion of African American children in foster care:

(1)The major factors that have been identified as influencing the proportion of African American children entering and remaining in foster care;

(2)the strategies that states and localities have implemented that appear promising in addressing African American children's overrepresentation in foster care; and

(3)the ways in which key federal child welfare policies[5] may have influenced African American children's representation in foster care.

This testimony is based on findings from our July 2007 report[6] on this subject, which we developed using multiple methodologies, including a nationwide Web-based survey of state child welfare administrators,[7] site visits to multiple states and counties, and interviews with child welfare researchers and HHS officials.[8] For our 2007 report, we also analyzed HHS data on foster care and adoption, conducted a review of research on racial disproportionality in foster care, and analyzed federal legislation and policies. For this testimony, we updated some information based on foster care and adoption data sources, but HHS did not provide us with any updates on its activities in time for this testimony. We conducted our work between June 2006 and July 2007 and updated as possible in July 2008 in accordance with generally accepted government auditing standards. Those

[5]We are using the term "policy" in this testimony to include federal laws, regulations, and informal agency guidance.

[6]GAO, *African American Children in Foster Care: Additional HHS Assistance Needed to Help States Reduce the Proportion in Care*, GAO-07-816 (Washington, D.C.: July 11, 2007).

[7]We surveyed the 50 states and the District of Columbia and received responses from 47 states and the District of Columbia.

[8]Although we focused on African American children in this testimony and our report, our report also noted points of similarity or difference with children of other races and ethnicities as appropriate. Native Americans are also overrepresented nationally, but some are affected by different child welfare laws and oversight authority than African Americans, making comparisons challenging. See GAO-07-816 for more information.

standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Summary

A higher rate of poverty and challenges in accessing support services, as well as racial bias coupled with distrust of the child welfare system, and difficulties in finding appropriate permanent homes were identified in our survey of child welfare directors as key factors influencing the proportion of African American children in foster care. Thirty-three states in our survey cited high rates of poverty among African Americans as a factor influencing children's entry into foster care. Also, families living in impoverished neighborhoods often do not have access to support services that can help them weather problems when they arise. However, research suggests that poverty does not fully account for differing rates of entry into foster care. State child welfare directors we surveyed also responded that bias or cultural misunderstanding and distrust between child welfare decision makers and the families they serve also contribute to the removal of children from their homes. For children who cannot be reunified with their families, state officials reported difficulties in finding them appropriate permanent homes, in part, because of the challenges in recruiting adoptive parents, especially for youth who are older or have special needs. African American children also stay in foster care longer, in part, because of a greater reliance on relatives to provide foster care. Although this type of foster care placement, known as kinship care, can be less traumatic for children, it is also associated with longer lengths of stay.

Researchers and officials stressed that no single strategy would fully address the issue of disproportionality, and most states in our survey reported implementing some strategies that experts have identified as promising for African American children. For example, some states are working to reduce bias by providing cultural competency training for caseworkers and to increase access to support services by collaborating with neighborhood-based support organizations. States also reported that they were working to increase the availability of permanent homes by diligently searching for fathers and other paternal kin who could provide care. However, public and private officials in the forefront of research and implementation said that the ability to analyze data was fundamental to any attempt to address racial disproportionality. State child welfare directors generally reported in our survey that they needed additional support in analyzing data on disproportionality and disseminating

strategies. Our July 2007 report therefore recommended that the Secretary of HHS provide states with additional technical assistance and tools to develop strategies to address disproportionality. In its comments, HHS noted that our recommendation was consistent with its efforts to provide technical assistance to states for addressing disproportionality, but the department did not address the specific actions we recommended. We continue to believe that it is important for HHS to take these actions to help states address this complex issue.

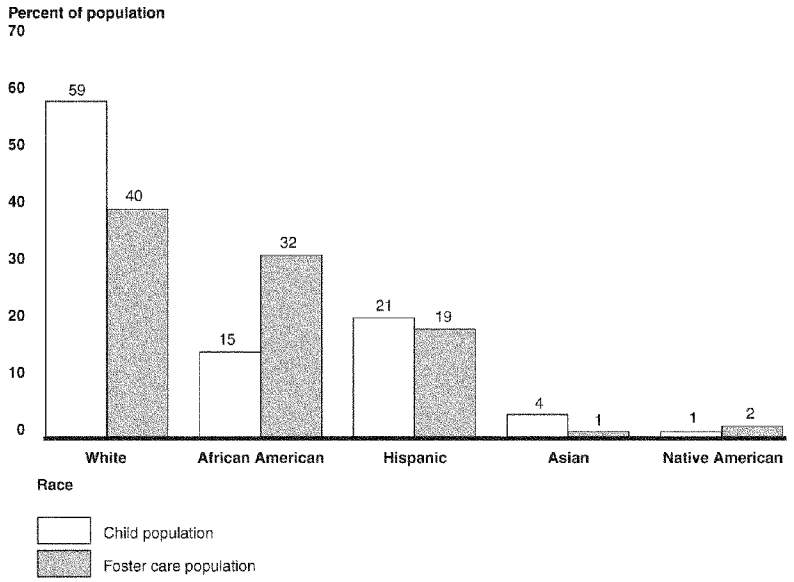
Finally, while states viewed some federal policies as helpful for reducing the proportion of African American children in foster care, they also expressed concerns regarding policies that limit the use of federal funds for services to prevent the removal of children in the first place and to place children with legal guardians. First, states expressed concerns that federal funding emphasized finding permanent homes for children after they had been removed, rather than on preventing the removal of children from their homes in the first place. With regard to finding homes for children who had already been removed, states generally viewed federal adoption policies as helpful in reducing disproportionality, including federal subsidies for adoptive families and the requirement to recruit minority adoptive parents. However, states faced challenges in recruiting enough adoptive parents. States also considered legal guardianship as particularly helpful in enabling African American children to exit foster care, but noted that while they can use federal funds to pay subsidies to adoptive parents, they cannot do so for legal guardians. Our draft report recommended that HHS pursue specific measures to allow adoption assistance payments to be used for subsidizing legal guardianship. In its comments, HHS disagreed with our recommendation, stating that its proposal for restructuring child welfare funding would give states the option to do this. However, HHS has presented this option in its budget proposal each year since 2004, but no legislation has been offered to date to authorize it. Because the viability of HHS's proposal is uncertain, in our July 2007 report we suggested that Congress consider amending current law to allow subsidies for legal guardianships. To date, the House of Representatives has passed a bill with a provision to allow states to use federal funds to subsidize legal guardianship for relatives, and the Senate has introduced a bill with a similar provision.

Background

African American children were more likely to be placed in foster care than White or Hispanic children in 2006, and at each decision point in the child welfare process the disproportionality of African American children grows. Nationally, although African American children made up less than 15 percent of the overall child population in the 2000 Census, they

represented 26 percent of the children who entered foster care during fiscal year 2006 and 32 percent of the children remaining in foster care at the end of that year (see fig. 1).[9]

Figure 1: Proportion of Children by Race in Foster Care Settings, End of Fiscal 2006



Source: GAO analysis of preliminary 2006 data from the Adoption and Foster Care Analysis and Reporting System and 2006 Census data.

There are various options for placing children in temporary and permanent homes through the child welfare system. Temporary options include foster care with relatives or nonrelatives—whether licensed or unlicensed—and group residential settings. According to HHS, approximately one-fourth of the children in out-of-home care are living

[9]Although racial disproportionality is most severe and pervasive for African American children, Native American children also experience higher rates of representation in foster care than children of other races or ethnicities. It is also important to understand local variations for Hispanic and Asian children, since they are underrepresented in foster care nationally and in most states but are overrepresented in some counties and states. For disproportionality rates for African American, White, Hispanic, Asian, and Native American children by state in fiscal year 2004, see appendix II of GAO-07-816.

with relatives, and this proportion is higher for Hispanic and African American families. For permanent placements, children can be reunified with their parents, or if reunification is not considered possible, children can be adopted or live with a legal guardian. Although both adoption and guardianship are considered permanent placement options under federal law,[10] an important difference is that adoption entails terminating parental rights, while guardianship does not. Another difference is that some adoptions may be subsidized with federal funds.

Federal funds account for approximately half of states' total reported spending for child welfare services, with the rest of funding coming from states and localities. In fiscal year 2004, total federal spending on child welfare was estimated to be $11.7 billion based on analysis of data from more than 40 states.[11] Titles IV-E and IV-B of the Social Security Act are the principal sources of federal funds dedicated for child welfare activities. Title IV-E supports payments to foster families, subsidies for families who provide adoptive homes to children who states identify as having special needs that make placement difficult,[12] and related administrative costs on behalf of children who meet federal eligibility criteria. Title IV-E payments for foster care maintenance are open-ended entitlements. Title IV-B authorizes funds to states for broad child welfare purposes, including child protection, family preservation, and adoption services; these funds are appropriated annually.[13] Federal block grants, such as the Temporary Assistance for Needy Families (TANF) and the Social Services Block Grant

[10]The Adoption and Safe Families Act of 1997 (Pub. L. No. 105-89) recognized legal guardianship under federal law as another option for placing children in permanent homes. Prior to this, children's options for exiting foster care included being reunified with their parents, adopted by a relative or nonrelative, or emancipated from foster care when they had reached a certain age, usually 18.

[11]These data were reported in the Urban Institute 2005 Child Welfare Survey in May 2006. This funding analysis is the most recent available that shows federal funding used specifically for child welfare.

[12]The term "special needs" is used in a distinct way in Title IV-E programs. In order to be considered a child with special needs for the purpose of providing adoption assistance payments, states must determine that the child should not return home and have a factor or condition that would make the child difficult to place for adoption without such payments. States are provided discretion under federal law to determine what these factors or conditions are and may include age, membership in a sibling or minority group, or having a medical or developmental disability that would make placement difficult. There are additional eligibility requirements to obtain adoption assistance subsidies as well.

[13]For further information on Title IV-B funds, see GAO, *Child Welfare: Enhanced Federal Oversight of Title IV-B Could Provide States Additional Information to Improve Services*, GAO-03-956 (Washington, D.C.: Sept. 12, 2003).

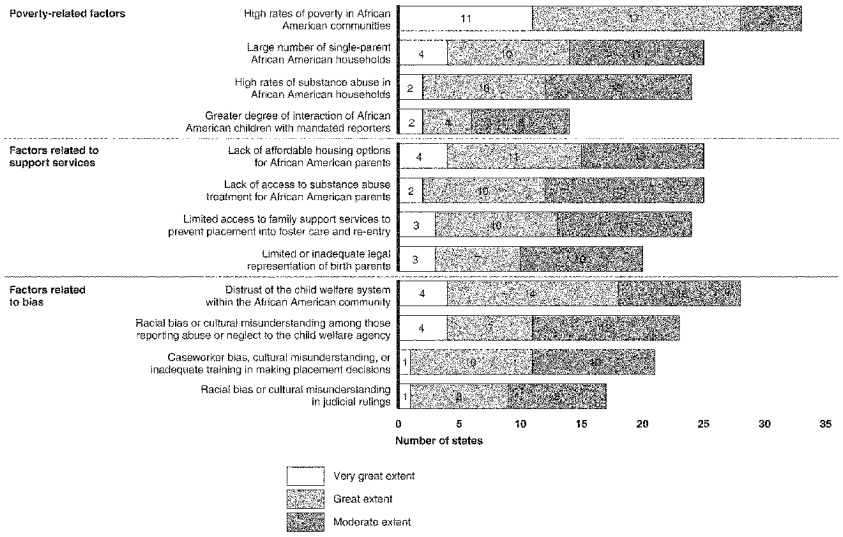
(SSBG), provide additional sources of funds that states can use for child welfare purposes. States have discretion to provide direct social services for various populations, including child welfare families, the elderly, and people with disabilities.

In 1994, the Congress authorized the use of demonstration waivers to encourage innovative and effective child welfare practices. These waivers, typically authorized for 5 years, allowed states to use Title IV-E funds to provide services and supports other than foster care maintenance payments. For example, four states had completed demonstrations that involved subsidized guardianships, and, as of May 2007, seven states had active guardianship demonstrations and one state had not yet implemented its guardianship demonstration. Demonstration waivers must remain cost-neutral to the federal government, and they must undergo rigorous program evaluation to determine their effectiveness.

States Report Poverty and Difficulty in Finding Permanent Homes Are among Major Factors Influencing African Americans Entry and Length of Stay

A complex set of interrelated factors influence the disproportionate number of African American children who enter foster care, as well as their longer lengths of stay. Major factors affecting children's entry into foster care included African American families' higher rates of poverty, difficulties in accessing support services, and racial bias or cultural misunderstanding among child welfare decision makers, as well as families' distrust of the child welfare system. Factors often cited as affecting African American children's length of stay in foster care included the lack of appropriate adoptive homes for children, parents' lack of access to support services needed for reunification with their children, and a greater use of kinship care among African American families. (See fig. 2.)

Fig. 2: State Views of Factors Affecting Higher Entry of African American Children to Foster Care



Source: GAO analysis of state child welfare survey responses.

In our survey, 33 of the 48 states from which we received responses reported that high rates of poverty in African American communities and issues related to living in poverty may increase the proportion of African American children entering foster care compared to that of children of other races and ethnicities. Across the nation, African American families were nearly four times more likely to live in poverty than White families, according to U.S. Census data.[14] Since foster care programs primarily serve children from low-income families, this could account for some of the disproportionate number of African American children in the foster care

[14]U.S. Census American Community Survey, 2006.

system. In addition, child welfare directors in 25 states reported that the greater number of African American single-parent households contributed to African American children's entry into foster care. According to the most recent National Incidence Study, children of single parents, who are also more likely than married couples to be poor, had a 77 to 87 percent greater risk of harm than children from two-parent families.[15] Across the nation, 34 percent of African American family households with children under 18 years of age were headed by single females compared to 9 percent for Whites and 19 percent for Hispanics, according to U.S. Census data.[16]

Moreover, families living in impoverished neighborhoods often do not have access to the kinds of supports and services that can prevent problems in the home from leading to abuse or neglect, according to states we surveyed and other research. Such supports and services include affordable and adequate housing; substance abuse treatment; access to family services such as parenting skills workshops and counseling; and adequate legal representation.[17] Also, there is some evidence that African American families, in particular, are not offered the same amount of support services when they are brought to the attention of the child welfare system.[18]

Coupled with African American parents' greater distrust of the child welfare system, racial bias or cultural misunderstanding among decision makers also emerged in our survey as major factors contributing to the disproportionate number of African American children entering foster care. According to state child welfare officials and some researchers we interviewed, African American families' distrust of the child welfare system stems from their perception that the system is unresponsive to their needs and racially biased against them. This perception can shape the families' dynamics in their initial contacts with mandated reporters, caseworkers, and judges, which can increase the risk the child will be

[15]A. Sedlak and D. Broadhurst, *Executive Summary of the Third National Incidence Study of Child Abuse and Neglect.* A report prepared for the U.S. Department of Health and Human Services, (Washington, D.C., 1996).

[16]U.S. Census American Community Survey data from 2006.

[17]Some child welfare officials also pointed out that lower income families may be referred to the child welfare system in order to gain access to such services.

[18]Ann F. Garland et al., "Racial and Ethnic Variations in Mental Health Care Utilization Among Children in Foster Care," *Children's Services: Social Policy, Research and Practice*, 3(3): 133-146 (2000).

removed from the home. In our survey, state child welfare directors also reported that they considered racial bias or cultural misunderstanding on the part of those reporting abuse or neglect---such as teachers, medical professionals, or police officers, as well as among caseworkers---as factors in the disproportionate representation of African American children entering foster care. In support of this view, some studies have found that medical professionals are more likely to report low-income or minority children to child protective services.[19] Although research on racial bias or race as a predictor for entry into foster care is not always consistent, a recent review of the current research concluded that race is an important factor that affects the decision to place children into foster care.[20]

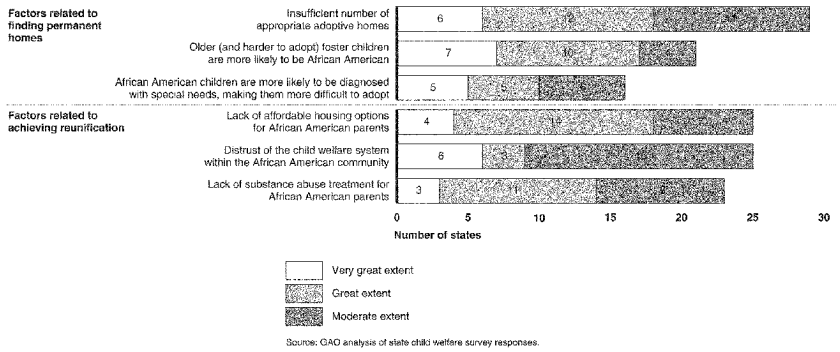
Among factors cited as affecting African American children's longer lengths of stay in foster care, officials from 29 states cited an insufficient number of appropriate adoptive homes as a key factor. African American children constituted nearly half of the children legally available for adoption in 2004, and they waited significantly longer than other children for an adoptive placement. Factors that make finding adoptive families for African American children challenging include the difficulty many states have in recruiting adoptive families of the same race and ethnicity as the children waiting for adoption and the unwillingness of some families to adopt a child of another race. In addition, states we surveyed reported that African American children waiting to be adopted were older, and prospective adoptive parents are more inclined to adopt younger children.[21] (See fig. 3.)

[19]For example: R. L. Hampton and E. Newberger, "Child Abuse Incidence and Reporting by Hospitals: Significance of Severity, Class and Race," *American Journal of Public Health* (75) 1: 56-60 (1985). For information on other studies, see Robert Hill, *Synthesis of Research on Disproportionality in Child Welfare: An Update* (Casey–Center for the Study of Social Policy Alliance for Racial Equity in the Child Welfare System, 2006).

[20]Robert B. Hill, *Synthesis of Research on Disproportionality in Child Welfare: An Update* (Casey-Center for the Study of Social Policy Alliance for Racial Equity in the Child Welfare System, 2006).

[21]According to our analysis of Adoption and Foster Care Analysis and Reporting System (AFCARS) fiscal year 2004 data, African American children are even more disproportionally represented in foster care at older ages than other children.

Fig. 3: State Views of Factors Affecting Longer Time in Foster Care for African American Children



Source: GAO analysis of state child welfare survey responses.

Additionally, the belief that African American children are more likely to be diagnosed as having medical and other special needs, which may contribute to their longer lengths of stay in foster care, was reported by state officials. In fact, African American children in foster care in 2004 were only slightly more likely to have been diagnosed as having medical conditions or other disabilities (28 percent) than White children in foster care (26 percent), according to HHS data. However, 23 percent of African American children who were adopted out of foster care had a medical condition or disability, compared to 31 percent of White children in the same category.

Some of the same factors that states view as contributing to African American children's entry also contribute to their difficulties in exiting foster care and being reunified with their families. In our survey, nearly half of the states considered the lack of affordable housing, distrust of the child welfare system, and lack of substance abuse treatment as factors contributing to African American children's longer lengths of stay. The lack of such supports and other services in many poor African American neighborhoods contributes to children's longer stays in foster care because services can influence a parent's ability to reunify with their child in a timely manner, according to our survey, interviews, and research.

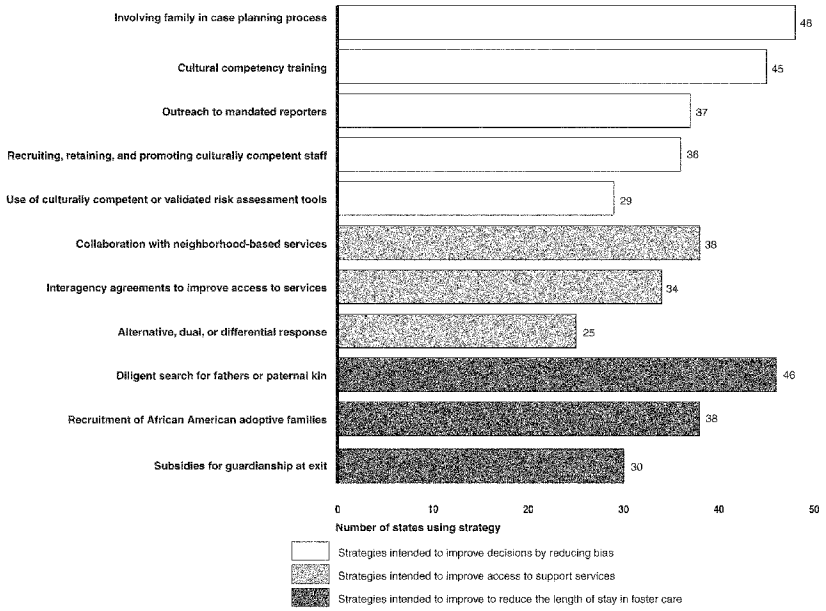
States also reported that the use of kinship care was a factor contributing to longer lengths of stay in foster care for African American children. African American children are more likely than White and Asian children to enter into the care of relatives, which is associated with longer lengths of stay. Relatives may be unwilling to adopt the child because it would require termination of their relative's parental rights or because they might lose needed financial support they receive as foster parents. However, despite the longer lengths of stay, child welfare researchers and officials we interviewed consider these placements to be positive options for African American children because they are less stressful to the child and maintain familial ties.

States Reported Implementing Strategies Considered Promising for Addressing Disproportionality but Also Reported Needing More Technical Assistance

Researchers and child welfare administrators we interviewed stressed that no single strategy could fully address disproportionality in foster care, partly because so many interrelated factors contribute to it. According to our survey, the strategies that states implemented tended to focus on addressing racial and cultural bias in decision making, families' problems in accessing support services, and agencies' challenges in finding permanent homes so that children can exit foster care more quickly. In addition, data collection and analysis were considered essential for identifying problems and devising strategies to address them, but states reported needing additional assistance in this area.

To help mitigate bias and cultural misunderstanding among decision makers, states reported implementing a range of strategies, such as including family members in case planning; providing training to strengthen caseworkers' competency in working with families from various cultures; reaching out to ensure that public officials are not inappropriately referring families for abuse and neglect through mandated reporting; and implementing the use of certain tools to help caseworkers make more systematic decisions regarding the level of a child's risk. (See fig. 4.) According to an evaluation in Texas, for example, for African American families who participated in case planning that included family group decision making, 32 percent of the children returned home—more than twice as many as in families who received traditional services.

Figure 4: Number of States Using Strategies to Address Disproportionality, Grouped by Type of Factor



Source: GAO analysis of state child welfare survey responses.

To improve families' access to services, states reported collaborating with neighborhood-based support organizations, establishing interagency agreements to improve access to these services, and implementing an alternative approach to the assessment process that emphasizes helping families obtain needed supports and services, instead of removing children from their families. For example, in Los Angeles County, child welfare officials went door to door in minority neighborhoods to find service providers beyond those with whom they historically contracted. This

collaboration helped build trust between the community and the child welfare agency and increased families' use of the services provided.

For African American children who cannot ultimately be reunified with their parents, states also reported devising strategies to increase the number of permanent homes available to them. To increase the options for African American children, 46 states reported making diligent searches for fathers and other paternal kin who can care for these children—not a routine practice until recently. Additionally, a federal law passed in 1994 and amended in 1996 require states to diligently recruit potential foster and adoptive families that reflect the ethnic and racial diversity of children in the state who need foster and adoptive homes.[22] Likely in response to these laws, states have adopted various strategies to recruit greater numbers of African American adoptive parents, such as contracting with faith-based organizations and convening adoption support teams. However, despite these efforts, the number of African American children adopted by African American parents has not increased in recent years. In addition, HHS's 2001 to 2004 review found that only 21 of 52 states were sufficiently recruiting minority families, and one report found that the recruitment of minority families was one of the greatest challenges for nearly all states.[23]

Using subsidized guardianship as an alternative to adoption may hold particular promise for reducing disproportionality, and more than half of the states surveyed reported using this strategy.[24] African American children are more likely than White children to be placed with relatives for foster care, which is generally a longer-term placement, and these relative caregivers are also more likely than nonrelative foster parents to be low-income. They may be unwilling to adopt because they may find it difficult

[22]See the Multi-Ethnic Placement Act of 1994 (Pub. L. No. 103-382, §§ 551-553), as amended in 1996 by the Interethnic Adoption Provisions included in the Small Business Job Protection Act (Pub. L. No. 104-88, § 1808), referred to as MEPA/IEP.

[23]Urban Institute Child Welfare Research Program, *Foster Care Adoption in the United States: A State by State Analysis of Barriers and Promising Approaches* (November 2004).

[24]A 2006 report by Generations United found that a total of 35 states and the District of Columbia were subsidizing legal guardianships, generally through federal IV-E waivers; federal block grants, such as TANF; or state and local funds. (See http://ipath.gu.org/documents/A0/GU-GeneralFactSheetJune.pdf.) Three of these states, Maryland, New Jersey, and Rhode Island, did not respond to our survey on disproportionality. Other states may subsidize guardianships but not limit these subsidies to families involved in the state child welfare system.

financially to forego foster care payments or because adoption entails terminating the parental rights of their kin. However, subsidized guardianship programs provide financial support for foster parents (often relatives) who agree to become legally responsible for children but are unable or willing to adopt. When Illinois and California implemented two of the largest of such programs, they subsequently saw an increase in permanent placements for all children. After instituting their subsidized guardianship programs, more than 40 percent of children who were in long-term relative foster care in both states found permanency. In Illinois, this decrease also coincided with a reduction in disproportionate numbers of African American children in foster care.

In addition to these types of strategies, child welfare administrators and researchers told us that data collection, analysis, and dissemination are needed to inform attempts to address disproportionality. These data can include not only disproportionality rates but also information that identifies the extent to which disproportionality occurs among different age groups, at different stages in the child welfare process, and in different locations. For example, a California researcher used state data to show that African American infants enter foster care at a much higher rate than infants of other races or ethnicities and that this disproportionality grows as children get older because African American children are also less likely to exit foster care. Such data analyses help states and localities devise strategies to address the issue and can also be useful for building consensus among community leaders and policymakers for action. However, some state and local agencies have limited capacity to do this. In responding to our survey, 25 states reported that receiving technical assistance from HHS in calculating disproportionality rates and tracking it over time would be useful.[25] California state child welfare officials told us that without the aid of a university researcher, they would not have the ability to help counties that lack the capacity to collect and analyze their data. Despite the importance of data analysis, 18 states reported that they were not regularly analyzing or using data in their efforts to address disproportionality.

HHS has made technical assistance and information on disproportionality available to states at conferences and through various HHS Web sites. In addition, the agency is compiling an inventory of tools and best practices

[25]Although 18 states in our survey believed that having reporting requirements on disproportionality rates in HHS's Child and Family Services Review process would be useful, nearly as many responded that it would not be useful. HHS officials told us that this process was governed by statute and that they could not add such a requirement.

for addressing disproportionality. Despite these efforts, states report that they need further information and technical assistance to strengthen their current efforts in addressing disproportionality. Accordingly, in our July 2007 report, we recommended that HHS take certain actions to further assist states in understanding and addressing the nature and extent of racial disproportionality in their child welfare systems. In its comments, HHS noted that our recommendation was consistent with its efforts to provide technical assistance to states for addressing disproportionality, but the department did not address the specific actions we recommended. We continue to believe that it is important for HHS to take these actions to help states address this complex issue.

States Reported That More Flexibility to Use Federal Funds for Prevention Services and Subsidized Guardianship Could Help Reduce Disproportionality

While states viewed some federal policies as helpful for reducing the proportion of African American children in foster care, they also expressed concerns regarding policies that limit the use of federal funds to provide preventive services and support legal guardianship arrangements. As an alternative to adoption, states considered subsidized guardianship as particularly helpful in enabling African American children to exit foster care but noted that while they can use federal child welfare funds to pay subsidies to adoptive parents, they cannot do so for guardians.[26]

At least half the states we surveyed noted that the structure of federal child welfare funding may contribute to disproportionality by favoring foster care placements over services to prevent the removal of children from their homes in the first place. Of particular concern to 28 states in our survey were the caps on funding for preventive and family support services under Title IV-B, and 25 states expressed concern about their inability to use foster care funds under Title IV-E for purposes other than making payments to foster care families. A recent GAO report similarly found that preventive and family support services were the services most in need of greater federal, state, or local resources.[27] According to California and Minnesota officials, because the majority of federal child welfare funds are used for foster care payments instead of preventive services, federal funding policies did not align with states' efforts to reduce the number of children entering foster care by serving at-risk

[26]As of May 2007, seven states that were granted waivers to use Title IV-E funds to provide services and supports other than foster care maintenance payments were actively using Title IV-E funds to provide subsidies for guardianships.

[27]See GAO, *Child Welfare: Improving Social Service program, Training, and Technical Assistance Information Would Help Address Long-standing Service-level and Workforce Challenges*, GAO-07-75 (Washington, D.C.: Oct. 6, 2006).

children safely in their homes. However, states do have the freedom to use other federal funds, particularly TANF block grants, to provide preventive and supportive services to families, and 23 states reported that the ability to use these funds contributes to a reduction in the proportion of African American children in foster care.[28] States face competing priorities for the use of their TANF block grant funds, and not all states use them for child welfare activities.

Once children are removed, states reported that federal policies promoting adoption were generally helpful; however, states' views were mixed on certain requirements specifically intended to eliminate race-related barriers to adoption. Policies that promote adoption of African American children were generally viewed as helpful, such as allowing states to classify African American children as having "special needs," which allows them to provide subsidies to adoptive parents, according to our survey results. However, views of other requirements were mixed. Although 22 states reported that the federal policies requiring states to diligently recruit ethnically and racially diverse adoptive families would help reduce disproportionality, 9 states reported the federal requirements had no effect, and 15 states reported that they were unable to tell.[29]

States continue to face challenges in recruiting adoptive families—such as a shortage of willing and qualified parents, especially for older African American children, or a lack of resources for recruiting initiatives—and more than half of states are not meeting HHS performance goals in this area.[30] Over the last 5 years, African American children and Native American children have consistently experienced lower rates of adoption than children of other races and ethnicities, and since 2000, adoption rates have reached a plateau, according to HHS data and other research.

As an alternative to adoption, many child welfare officials and researchers we interviewed considered subsidizing legal guardianship a particularly

[28]As with all block grants, state officials determine the use of these funds and their program priorities.

[29]MEPA/IEP also prohibits foster care and adoption agencies receiving federal funds from delaying or denying placement decisions on the basis of race, color, or national origin. Fifteen states reported that encouraging race-neutral adoptions would help reduce disproportionality, 18 states responded that this policy had no effect, and 12 states reported that they were unable to tell.

[30]This is based on HHS data from between 2001 and 2004. Challenges in recruiting are consistent with survey responses in an earlier GAO study as well. See GAO-07-75.

important way to help African American children exit foster care. However, there are no federal subsidies for guardianship similar to those available for adoption, which constrains states' ability to place children in these arrangements. Seven states have a federal demonstration waiver, which allows them to use Title IV-E funds for subsidized guardianship. All states did so in a cost-neutral manner, as required by the waivers.[31] In California and Illinois, subsidizing these legal guardianships has been found to reduce the number of children in foster care, including African American children. In addition, guardianship and adoption both have been found to provide comparable levels of stability for children and show similar outcomes in terms of emotional and physical health, according to an evaluation of Illinois's guardianship program. Because of the challenges states face finding adoptive homes for many African American children and because legal guardianship may offer a more suitable alternative for families who want to permanently care for related children without necessarily adopting them, we recommended, in our 2007 draft report, that HHS pursue specific measures to allow adoption assistance payments to be used for subsidizing legal guardianship. In its comments, HHS disagreed with our recommendation, stating that its proposal for restructuring child welfare funding, known as the Child Welfare Program Option, would give states the option to do this. However, HHS has presented this option in its budget proposal each year since 2004, but no legislation has been offered to date to authorize it. Moreover, even if enacted, it is unknown how many states would choose to implement this funding structure. Because the viability of HHS's proposal is uncertain, in our final July 2007 report, we suggested that Congress consider amending current law to allow adoption assistance payments to be used for legal guardianship. To date, the House of Representatives has passed a bill with a provision to allow states to use federal funds to subsidize legal guardianship for relatives, and the Senate has introduced a bill with a similar provision.

Mr. Chairman, this concludes my statement. I would be pleased to respond to any questions you or other Members of the Subcommittee may have.

[31]According to HHS officials, these programs can be cost-neutral because the administrative costs associated with maintaining a child in foster care are no longer incurred with permanent legal guardianships.

GAO Contacts and Acknowledgments

For further information about this testimony, please contact me at (202) 512-7215 or brownke@gao.gov. Individuals making key contributions to this testimony include Kim Siegal, Theresa Lo, Deborah A. Signer, Gale Harris, and Charlie Willson.

Related GAO Products

Disconnected Youth: Federal Action Could Address Some of the Challenges Faced by Local Programs That Reconnect Youth to Education and Employment. GAO-08-313. Washington, D.C.: February 28, 2008.

African American Children in Foster Care: Additional HHS Assistance Needed to Help States Reduce the Proportion in Care. GAO-07-816. Washington, D.C.: July 11, 2007.

Child Welfare: Improving Social Service program, Training, and Technical Assistance Information Would Help Address Long-standing Service-level and Workforce Challenges. GAO-07-75. Washington, D.C.: October 6, 2006.

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HHS Actions Could Improve Coordination of Services and Monitoring of States' Independent Living Programs. GAO-05-25. Washington, D.C.: November 18, 2004.

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Foster Care: Kinship Care Quality and Permanency Issues. GAO-99-32. Washington, D.C.: May 6, 1999.

Foster Care Implementation of the Multiethnic Placement Act Poses Difficult Challenges. GAO-98-204. Washington, D.C.: September 14, 1998.

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Chairman MCDERMOTT. Thank you very much for your testimony. I neglected to say that we ask you to contain your remarks to 5 minutes.

The GAO is absolutely trained. She ended just as it went to red. [Laughter.]

Chairman MCDERMOTT. That reminded me that I hadn't said anything about it. So, if you try and hold your comments to 5 minutes, that will give us some time for questions.

Ms. Harris is from Washington State Racial Disproportionality Advisory Committee, from Tacoma, Washington. Dr. Harris.

STATEMENT OF MARIAN S. HARRIS, PH.D., CO-CHAIR, WASHINGTON STATE RACIAL DISPROPORTIONALITY ADVISORY COMMITTEE, TACOMA, WASHINGTON

Dr. HARRIS. Thank you, Mr. Chairman, for inviting me here to talk about what we are doing in the State of Washington regarding disproportionality. I am here to report on findings from the Washington State Racial Disproportionality Advisory Committee.

In 2007, Substitute House Bill 1472 created the Washington State Racial Disproportionality Advisory Committee to determine if racial disproportionality exists in the State of Washington. Findings from this Committee are as follows. Yes, racial disproportionality does exist in Washington State's child welfare system.

What points in the Washington State child welfare system reflect the highest level of disproportionality for children of color? Those points are the following: The initial referral to child protective services; the decision to remove a child from the home; and if a child is in care for two years.

Compared with white children referred to child protective services after referrals, Indian children are 1.6 times as likely to be removed from home, and twice as likely to remain in foster care for over 2 years. Black children are 1.2 times more likely to be removed from their home, and 1.5 times more likely to remain in care for over 2 years. Hispanic children were no more likely to be removed from home, or to remain in care for over 2 years. Asian children were no more likely to be removed from home, and less likely to remain in care for 2 years.

Children from low income families are more likely to be in the Washington State child welfare system than children from more affluent families.

Are children from single-parent families more likely to be in the system than children from two-parent households? Our findings were yes; children of single-parent families are more likely to be in the Washington State child welfare system than children from two-parent families.

How do outcomes for children of color differ from outcomes of white children? For outcomes such as length of stay, Indian and black children have less favorable outcomes than white children. Asian and Hispanic children are as likely as white children to remain in foster care.

Additionally, when statistically controlling for poverty, family structure, and case characteristics, the patterns of disproportionality did not change for black, Hispanic, or Asian children. For Indian

children, however, disproportionality after referral was reduced for about 25 percent.

Now, what are we doing in Washington State? These findings were presented to our secretary on June 25th of this year. The next phase of this work calls for us, as a Committee, to come up with a remediation plan to address this problem. We are currently working on that plan. We have to have the plan in to the secretary of the department of health and social services by December 1st.

We are meeting on September 18th and 19th with members from the 6 regions in the State of Washington. We want to hear what, if anything, they are doing about this problem in their various regions.

Then, we, as a Committee, decided because racism and racial bias are at the root of this problem, we, as a Committee, went through undoing racism training, and we also have demanded that the secretary, all managers, and all regional directors go through this training.

As I am speaking to you this morning, supervisors and managers from the various regions are in Seattle, Washington, actually going through the undoing racism training.

It is very important for managers to be on board with any type of efforts that we are going to try to put in place to eradicate the problem of disproportionality. Our goal is that any child who comes into the Washington State system receive equitable treatment.

This ends my testimony.

[The prepared statement of Dr. Harris follows:]

Report for U.S. House of Representatives Committee on Ways and Means Sub-Committee on Income Security and Family Support

Testimony of Marian S. Harris, Ph.D., ACSW, LICSW

Co-Chair, Washington State Racial Disproportionality Advisory Committee

July 31, 2008

Washington State Racial Disproportionality Overview

In 2007 the legislature passed **SHB 1472** creating an advisory committee convened by DSHS Secretary Robin Arnold-Williams to report on racial disproportionality in the Child Welfare System by June 1, 2008 and create a remediation plan by December 1, 2008.

This committee is comprised of:

- Five representatives appointed by the Speaker of the House of Representatives.
- Five representatives appointed by the Senate Majority Leader.
- Five representatives appointed by DSHS.

According to the report:

- Racial disproportionality exists in the child welfare system in Washington.
- The greatest disproportionality for children of color occurs when:
  - The initial referral to CPS is made.
  - The decision to remove the child from home is made.
  - A child is in care for over two years.
- In Washington :
  - Indian children are almost three times as likely to be referred to CPS as White children.
  - Black children are almost twice as likely to be referred to CPS as opposed to their White counterparts.
  - Hispanic children are 1.3 times as likely to be referred to CPS as White children.
- The data shows that compared to White children referred to CPS, after referrals:
  - Indian children are:
    - 1.6 times as likely to be removed from home.
    - 2.2 times as likely to remain in care for over two years.
  - Black children are
    - 1.2 times more likely to be removed from home.
    - 1.5 times more likely to remain in care for over two years.
  - Hispanic children are:
    - No more likely to be removed from home.
    - No more likely to remain in care for over two years.
  - Asian children are:
    - No more likely to be removed from home.
    - Less likely to remain in care for over two years.
- Children from low income families are more likely to be in the Washington State Child Welfare system than children from affluent backgrounds.
- Children of single-parent families are more likely to be in the Washington State Child Welfare System than children from two-parent households.
- Lengths of stay in foster care differ for children of color as compared to White children with:
  - Indian and Black children having less favorable outcomes.
  - Asian and Hispanic children having outcomes similar to White children.

- Once children are referred to CPS certain decisions appear to contribute to disproportionality, including:
    - For Indian children as compared to White children, Indian children are:
        - More likely to be removed from home.
        - Less likely to reunify with parents within two years.
        - Less likely to be adopted within two years.
    - For Black children as compared to White children, Black children are:
        - More likely to have an accepted referral.
        - As likely to reunify with parents within two years.
        - Less likely to be adopted within two years.

June 25, 2008- The Advisory Committee presented the formal committee report to Secretary Robin Arnold-Williams. The Committee and the secretary provided their joint vision for how the Committee will move into the remediation planning phase.

July 2008-November 2008- The Committee will receive recommendations from the regions and statewide community. In conjunction with the secretary, the committee will create the remediation plan.

Executive Summary

In 2007, Substitute House Bill 1472 (SHB 1472) created the Washington State Racial Disproportionality Advisory Committee to determine if racial disproportionality exists in Washington State. [1] The legislation directed the Committee to answer the following questions:

Racial disproportionality occurs when the population of children of color in any system including the child welfare system is higher than the population of children of color in the general population.

These are the findings:

1. *Does racial disproportionality exist in the Washington State Child Welfare System?*
   Yes, racial disproportionality does exist in the Washington State Child Welfare System.

2. *What points in the Washington State Child Welfare System reflect the highest level of disproportionality for children of color?*
   The greatest disproportionality for children of color occurs when:
   - The initial referral to Child Protective Services (CPS) is made.
   - The decision to remove the child from home is made.
   - A child is in care for over two years.

   Compared with White children referred to CPS, after referrals:
   - Indian children are 1.6 times as likely to be removed from home and twice as likely to remain in foster care for over two years.
   - Black children are 1.2 times more likely to be removed from home and 1.5 times more likely to remain in care for over two years.
   - Hispanic children were no more likely to be removed from home or to remain in care for over two years.
   - Asian children were no more likely to be removed from home and less likely to remain in care for over two years.

3. *Are children from low-income backgrounds more likely to be in the Washington State Child Welfare System than children from more affluent backgrounds?*
   Yes, children from low income families are more likely to be in the Washington State Child Welfare System than children from affluent backgrounds.

4. *Are children from single-parent families more likely to be in the Washington State Child Welfare System than children from two-parent households?*
   Yes, children of single-parent families are more likely to be in the Washington State Child Welfare System than children from two-parent households.

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[1] SHB 1472, Chapter 465, Laws of 2007.

5. *How do outcomes for children of color differ from the outcomes of White children?* For outcomes such as length of stay, Indian and Black children have less favorable outcomes than White children. Asian and Hispanic children are as likely as White children to remain in foster care. Additionally, when statistically controlling for poverty, family structure and case characteristics, the patterns of disproportionality did not change for Black, Hispanic, or Asian children. For Indian children, however, disproportionality after referral was reduced by about 25 percent.

In Washington State:

- Indian children are almost three times as likely to be referred to CPS as White children.
- Black children are almost twice as likely to be referred to CPS as opposed to their White counterparts.
- Hispanic children are 1.3 times as likely to be referred to CPS as White children.

For Indian children, after referral certain decisions appear to contribute to disproportionality. Compared to White children, Indian children are:

- More likely to have a high-risk tag at intake.
- More likely to be removed from home.
- Less likely to reunify with parents within two years.
- Less likely to be adopted within two years.

The situation is not much better for Washington State's Black children. After referral, when compared to White children Black children are:

- More likely to have a referral accepted.
- More likely to be assessed high-risk at intake.
- As likely to reunify with parents within two years.
- Less likely to be adopted within two years.

Hispanic children have a greater likelihood of referral than White children. Asian children have a lesser likelihood of referral than White children. If Hispanic and Asian children enter the Washington State Child Welfare System, disproportionality does not increase at future decision points. [2]

Mandated Reporters

Our Washington State study shows that children of color are referred to CPS at disproportionate rates. In 2004, mandated reporters submitted about 60 percent of all referrals to CPS. Eighty percent of children who were removed from home were referred by mandated reporters.

Mandated Reporters usually are people that have frequent contact with children. They include: educators, medical providers, law enforcement, Department of Corrections' employees, mental health professionals, foster care providers, DSHS employees, social service professionals, and child care providers.

Informal Reporters include: friends, neighbors, relative, parents, guardians, and victims.

[2]Although some members of the Advisory Committee wanted statistics for Pacific Islanders separate from the Asian racial category, WSIPP concluded the numbers were too small (one percent of children referred to CPS were Pacific Islander) to be meaningful.

Disproportionality in Indian, Black, and Hispanic populations does not seem to be related to the type of referrer (i.e. non-mandated or mandated reporter). However, children from Black and Native American families are more likely to be poor; therefore more likely to be exposed to mandated reporters as they turn to the public social service system for support in times of need. [3] Ultimately, disproportionality will continue to exist if referral rates are not addressed.

Children from two-parent families were returned home faster than children from single-parent homes, regardless of the gender of the single parent. *Harris and Courtney (2003).*

Single-Parent Families

Children in households headed by single parents are more likely to be in foster care. According to the 2000 census, 25 percent of children in Washington live in a household headed by a single parent.

In Washington State, the percent of children in foster care who were living in single-parent homes at the time of out-of-home placement are as follows by race:

- 62 percent for Asian children.
- 88 percent for Black children.
- 74 percent of White children in foster care.

Children living in two-parent households are more likely to have an accepted referral an less likely to have the referral result in an out-of-home placement. However, children living with an unmarried couple are more likely to be in an out-of-home placement for over 60 days.

Children living with single fathers are:

- Less likely to have a referral accepted.
- More likely to have an out-of-home placement.
- Less likely to be in out-of-home care for over 60 days.

Low Income Families

Families of color who live in poverty are no more likely to abuse or neglect their children. Children whose birth family is Black, American Indian and Hispanic are almost three times as likely to be poor as children whose birth families are White and Asian.[4] For children in all age groups, their parent's income level was the major determinant of whether or not they were removed from home. [5]

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[3] Cahn, K., & Harris, M. S. (2005). Where have all the children gone? A review of the literature on factors contributing to disproportionality: Five key child welfare decision points. *Protecting Children, 20*(1), 4-14.

[4] Staveteig, S., & Wigton, A. (2000). *Racial and ethnic disparities: Key findings from the national survey of America's families*. Washington, DC: The Urban Institute.

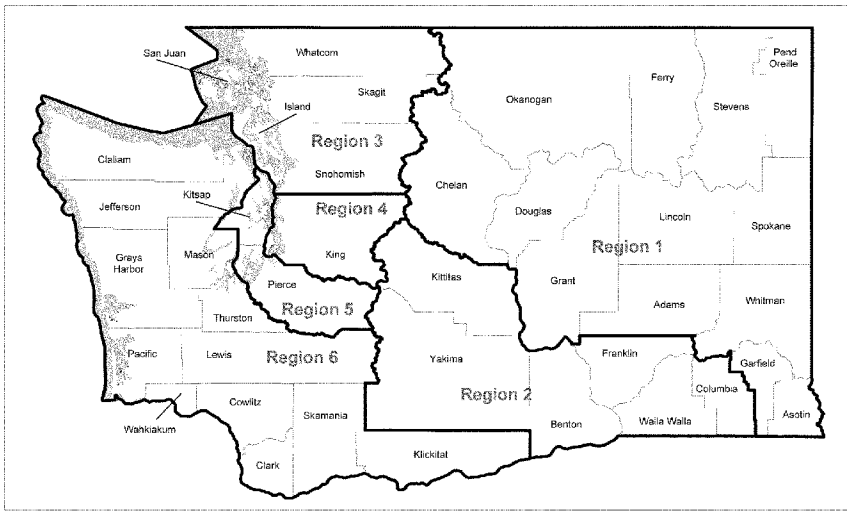
[5] Courtney, M.E., Barth, R.P., Berrick, J.D., Brooks, D., Needell, B., & Park, L. (1996). Race and child welfare services: Past research and future directions. *Child Welfare 75*(2), 99-137.

Poverty is generally considered to be a condition characterized by severe deprivation of basic human needs, including food, safe drinking water, sanitation facilities, health, shelter, education and information. For the purposes of this study, poverty is operationally defined on the basis of eligibility to receive food stamps.

In 2004, about one in four children (24 percent) in Washington State received food stamps. In 2004, 38 percent of the total referrals to CPS came from families that received food stamps. This means out of the 58,005 referrals to CPS, 22,619 of the children came from families that received food stamps. The 22,619 children represent seven percent of Washington State's total food stamp population.

At a Glance: Washington State Regions

The legislation directed the Committee to separate results by geographical region. In 2004, large differences in disproportionality, especially for Indian and Black children existed across the six DSHS-Children's Administration regions.



As compared to White children referred to CPS:

Region 1

- Indian children are more likely to be removed from home and to remain in care for over two years.
- Black children are more likely to be removed from home and to remain in care over for two years.
- Hispanic children are more likely to be in care for over two years.

Region 2

- Indian children are more likely to be removed from home and to remain in out-of-home care for over 60 days.
- Black children are less likely to be in care for over 60 days.
- Hispanic children are less likely to be in care for over 60 days or in care for over two years.

Region 3

- Indian children are more likely to be removed from home and to remain in care for over two years.
- Black children are more likely to be removed from home and to remain in care for over two years.
- Hispanic children are as likely to be removed from home. Hispanic children are less likely to be in care for over 60 days or in care for over two years.

Region 4

- Indian children are more likely to be removed from home and to remain in care for over two years.
- Black children are as likely to be removed from home and to remain in care for over 60 days. Black children are more likely to remain in care for over two years.
- Hispanic children are more likely to be removed from home.

Region 5

- Indian children are more likely to be removed from home and remain in care for over two years.
- Black children are more likely to be in placement for over 60 days.
- Hispanic children are more likely to remain in care for over two years.

Region 6

- Indian children are more like to be in an out-of-home placement and to remain in care for over two years.
- Black children are more likely to be in an out-of-home placement and to remain in care for over two years.
- Hispanic children are as likely to be removed from home. Hispanic children are more likely to be in care for over 60 days.

Recommendations

Although we recognize formal administrative and legislative recommendations will be provided in the remediation plan, as we move forward we would like to identify two areas of consideration.

1. **Consult with other states, such as Texas, Wisconsin, and Michigan, which have undertaken statewide efforts to reduce disproportionality.**
   DSHS is not embarking on this journey alone. Currently, there are states tackling the very issues we are now examining. As we move forward, gaining knowledge and lessons learned from other states will be a tremendous asset.

2. **Study issues surrounding the Indian Child Welfare Act and American Indian racial disproportionality.**
   Substantial amounts of racial disproportionality exist within the Washington State American Indian population. Emphasis on Indian Child Welfare compliance will be a priority. Also, an in-depth look at how racial disproportionality varies between the Reservation Indians, Rural Indians and Urban Indians will be examined.

SHB 1472
At a Glance: American Indian Children in Washington State
Taken from the Washington State Racial Disproportionality Advisory Committee Report

Racial disproportionality exists in the Washington State Child Welfare System.

The greatest disproportionality for American Indian children occurs when:

- The initial referral to Child Protective Services (CPS) is made.
- The decision to remove the child from home is made.
- A child is in care for over two years.

In 2004, mandated reporters submitted about 60 percent of all referrals to CPS. 80 percent of children removed from home were referred by mandated reporters.

Disproportionality is consistently greater for mandated reporters such as health care workers, educators, police officers and court officials. But it is observed even among non-mandatory reporters who are most often relatives, friends or neighbors.

Compared with White children referred to CPS in 2004, after referrals:

- American Indian children were 1.6 times as likely to be removed from home.
- American Indian children were 2.2 times as likely to remain in foster care for over two years.

For American Indian children, after referral certain decisions appear to contribute to disproportionality. Compared to White children, American Indian children are:

- More likely to be removed from home.
- Less likely to reunify with parents within two years.
- Less likely to be adopted within two years.

In 2004, 80 percent of American Indian children in the foster care were living in single-parent homes at the time of out-of-home placement.

At the point of removal from home, 25% of the disproportionality for American Indian children can be statistically accounted for by poverty, family structure, and case characteristics.

This information is based on Children's Administration data from 2004.

SHB 1472
At a Glance: Black Children in Washington State
Taken from the Washington State Racial Disproportionality Advisory Committee Report

Racial disproportionality exists in the Washington State Child Welfare System.

Black children are almost twice as likely to be referred to Child Protective Services (CPS) as opposed to White children.

The greatest disproportionality for Black children occurs when:

- The initial referral to CPS is made.
- A child is in care for over two years.

In 2004, mandated reporters submitted about 60 percent of all referrals to CPS. 80 percent of children removed from home were referred by mandated reporters.

Disproportionality is consistently greater for mandated reporters such as health care workers, educators, police officers and court officials. But it is observed even among non-mandatory reporters who are most often relatives, friends or neighbors.

Compared with White children referred to CPS in 2004, after referrals:

- Black children were 1.2 times more likely to be removed from home.
- Black children were 1.5 times more likely to remain in care for over two years.

After referral, when compared to White children Black children are:

- More likely to have a referral accepted.
- As likely to reunify with parents within two years.
- Less likely to be adopted within two years.

In 2004, 88 percent of Black children in the foster care were living in single-parent homes at the time of out-of-home placement.

This information is based on Children's Administration data from 2004.

SHB 1472
At a Glance: Hispanic Children in Washington State
Taken from the Washington State Racial Disproportionality Advisory Committee Report

Racial disproportionality exists in the Washington State Child Welfare System.

Hispanic children are 1.3 times as likely to be referred to Child Protective Services as White children.

In 2004, mandated reporters submitted about 60 percent of all referrals to CPS. 80 percent of children removed from home were referred by mandated reporters.

Disproportionality is consistently greater for mandated reporters such as health care workers, educators, police officers and court officials. But it is observed even among non-mandatory reporters who are most often relatives, friends or neighbors.

Compared with White children referred to CPS in 2005, after referral:

- Hispanic children were no more likely to be removed from home.
- Hispanic children were no more likely to remain in care for over two years.
- Disproportionality does not increase at future decision points.

In 2004, 80 percent of Hispanic children in the foster care were living in single-parent homes at the time of out-of-home placement.

This information is based on Children's Administration data from 2004.

SHB 1472
At a Glance: Asian Children in Washington State
Taken from the Washington State Racial Disproportionality Advisory Committee Report

"Asian children are underrepresented...Asian children are represented at rates significantly lower than White children. The overall disproportionality does not change with increased involvement in the system (page 47, Committee Report)."

Compared to White children:

- Asian children are half as likely to be referred to Child Protective Services (CPS).
- At each decision point and outcome after referral, Asian children are underrepresented in the Washington State Child Welfare System.

If Asian American children are referred, they are more likely to be referred by a mandated reporter. In 2004, 72 percent of Asian children referred to CPS were submitted by mandated reporters. 86 percent of children removed from home were referred by mandated reporters.

Disproportionality is consistently greater for mandated reporters such as health care workers, educators, police officers and court officials. But it is observed even among non-mandatory reporters who are most often relatives, friends or neighbors.

In 2004, 62 percent of Asian children in the foster care were living in single-parent homes at the time of out-of-home placement.

This information is based on Children's Administration data from 2004.

Washington State Racial Disproportionality Overview

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This committee is comprised of:

- Five representatives appointed by the Speaker of the House of Representatives.
- Five representatives appointed by the Senate Majority Leader.
- Five representatives appointed by DSHS.

According to the report:

- Racial disproportionality exists in the child welfare system in Washington.
- The greatest disproportionality for children of color occurs when:
  - The initial referral to CPS is made.
  - The decision to remove the child from home is made.
  - A child is in care for over two years.
- In Washington :
  - Indian children are almost three times as likely to be referred to CPS as White children.
  - Black children are almost twice as likely to be referred to CPS as opposed to their White counterparts.
  - Hispanic children are 1.3 times as likely to be referred to CPS as White children.
- The data shows that compared to White children referred to CPS, after referrals:
  - Indian children are:
    - 1.6 times as likely to be removed from home.
    - 2.2 times as likely to remain in care for over two years.
  - Black children are
    - 1.2 times more likely to be removed from home.
    - 1.5 times more likely to remain in care for over two years.
  - Hispanic children are:
    - No more likely to be removed from home.
    - No more likely to remain in care for over two years.
  - Asian children are:
    - No more likely to be removed from home.
    - Less likely to remain in care for over two years.
- Children from low income families are more likely to be in the Washington State Child Welfare system than children from affluent backgrounds.
- Children of single-parent families are more likely to be in the Washington State Child Welfare System than children from two-parent households.
- Lengths of stay in foster care differ for children of color as compared to White children with:
  - Indian and Black children having less favorable outcomes.
  - Asian and Hispanic children having outcomes similar to White children.

- Once children are referred to CPS certain decisions appear to contribute to disproportionality, including:
    - For Indian children as compared to White children, Indian children are:
        - More likely to be removed from home.
        - Less likely to reunify with parents within two years.
        - Less likely to be adopted within two years.
    - For Black children as compared to White children, Black children are:
        - More likely to have an accepted referral.
        - As likely to reunify with parents within two years.
        - Less likely to be adopted within two years.

June 25, 2008- The Advisory Committee presented the formal committee report to Secretary Robin Arnold-Williams. The Committee and the secretary provided their joint vision for how the Committee will move into the remediation planning phase.

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Executive Summary

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Racial disproportionality occurs when the population of children of color in any system including the child welfare system is higher than the population of children of color in the general population.

These are the findings:

6. *Does racial disproportionality exist in the Washington State Child Welfare System?*
   Yes, racial disproportionality does exist in the Washington State Child Welfare System.

7. *What points in the Washington State Child Welfare System reflect the highest level of disproportionality for children of color?*
   The greatest disproportionality for children of color occurs when:
   - The initial referral to Child Protective Services (CPS) is made.
   - The decision to remove the child from home is made.
   - A child is in care for over two years.

   Compared with White children referred to CPS, after referrals:
   - Indian children are 1.6 times as likely to be removed from home and twice as likely to remain in foster care for over two years.
   - Black children are 1.2 times more likely to be removed from home and 1.5 times more likely to remain in care for over two years.
   - Hispanic children were no more likely to be removed from home or to remain in care for over two years.
   - Asian children were no more likely to be removed from home and less likely to remain in care for over two years.

8. *Are children from low-income backgrounds more likely to be in the Washington State Child Welfare System than children from more affluent backgrounds?*
   Yes, children from low income families are more likely to be in the Washington State Child Welfare System than children from affluent backgrounds.

9. *Are children from single-parent families more likely to be in the Washington State Child Welfare System than children from two-parent households?*
   Yes, children of single-parent families are more likely to be in the Washington State Child Welfare System than children from two-parent households.

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[1] SHB 1472, Chapter 465, Laws of 2007.

10. *How do outcomes for children of color differ from the outcomes of White children?* For outcomes such as length of stay, Indian and Black children have less favorable outcomes than White children. Asian and Hispanic children are as likely as White children to remain in foster care. Additionally, when statistically controlling for poverty, family structure and case characteristics, the patterns of disproportionality did not change for Black, Hispanic, or Asian children. For Indian children, however, disproportionality after referral was reduced by about 25 percent.

In Washington State:

- Indian children are almost three times as likely to be referred to CPS as White children.
- Black children are almost twice as likely to be referred to CPS as opposed to their White counterparts.
- Hispanic children are 1.3 times as likely to be referred to CPS as White children.

For Indian children, after referral certain decisions appear to contribute to disproportionality. Compared to White children, Indian children are:

- More likely to have a high-risk tag at intake.
- More likely to be removed from home.
- Less likely to reunify with parents within two years.
- Less likely to be adopted within two years.

The situation is not much better for Washington State's Black children. After referral, when compared to White children Black children are:

- More likely to have a referral accepted.
- More likely to be assessed high-risk at intake.
- As likely to reunify with parents within two years.
- Less likely to be adopted within two years.

Hispanic children have a greater likelihood of referral than White children. Asian children have a lesser likelihood of referral than White children. If Hispanic and Asian children enter the Washington State Child Welfare System, disproportionality does not increase at future decision points. [2]

Mandated Reporters

Our Washington State study shows that children of color are referred to CPS at disproportionate rates. In 2004, mandated reporters submitted about 60 percent of all referrals to CPS. Eighty percent of children who were removed from home were referred by mandated reporters.

Mandated Reporters usually are people that have frequent contact with children. They include: educators, medical providers, law enforcement, Department of Corrections' employees, mental health professionals, foster care providers, DSHS employees, social service professionals, and child care providers.

Informal Reporters include: friends, neighbors, relative, parents, guardians, and victims.

[2]Although some members of the Advisory Committee wanted statistics for Pacific Islanders separate from the Asian racial category, WSIPP concluded the numbers were too small (one percent of children referred to CPS were Pacific Islander) to be meaningful.

Disproportionality in Indian, Black, and Hispanic populations does not seem to be related to the type of referrer (i.e. non-mandated or mandated reporter). However, children from Black and Native American families are more likely to be poor; therefore more likely to be exposed to mandated reporters as they turn to the public social service system for support in times of need. [3] Ultimately, disproportionality will continue to exist if referral rates are not addressed.

Single-Parent Families

Children in households headed by single parents are more likely to be in foster care. According to the 2000 census, 25 percent of children in Washington live in a household headed by a single parent.

In Washington State, the percent of children in foster care who were living in single-parent homes at the time of out-of-home placement are as follows by race:

- 62 percent for Asian children.
- 88 percent for Black children.
- 74 percent of White children in foster care.

Children living in two-parent households are more likely to have an accepted referral an less likely to have the referral result in an out-of-home placement. However, children living with an unmarried couple are more likely to be in an out-of-home placement for over 60 days.

Children from two-parent families were returned home faster than children from single-parent homes, regardless of the gender of the single parent. *Harris and Courtney (2003).*

Children living with single fathers are:

- Less likely to have a referral accepted.
- More likely to have an out-of-home placement.
- Less likely to be in out-of-home care for over 60 days.

Low Income Families

Families of color who live in poverty are no more likely to abuse or neglect their children. Children whose birth family is Black, American Indian and Hispanic are almost three times as likely to be poor as children whose birth families are White and Asian.[4] For children in all age groups, their parent's income level was the major determinant of whether or not they were removed from home. [5]

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[3] Cahn, K., & Harris, M. S. (2005). Where have all the children gone? A review of the literature on factors contributing to disproportionality: Five key child welfare decision points. *Protecting Children, 20*(1), 4-14.

[4] Staveteig, S., & Wigton, A. (2000). *Racial and ethnic disparities: Key findings from the national survey of America's families*. Washington, DC: The Urban Institute.

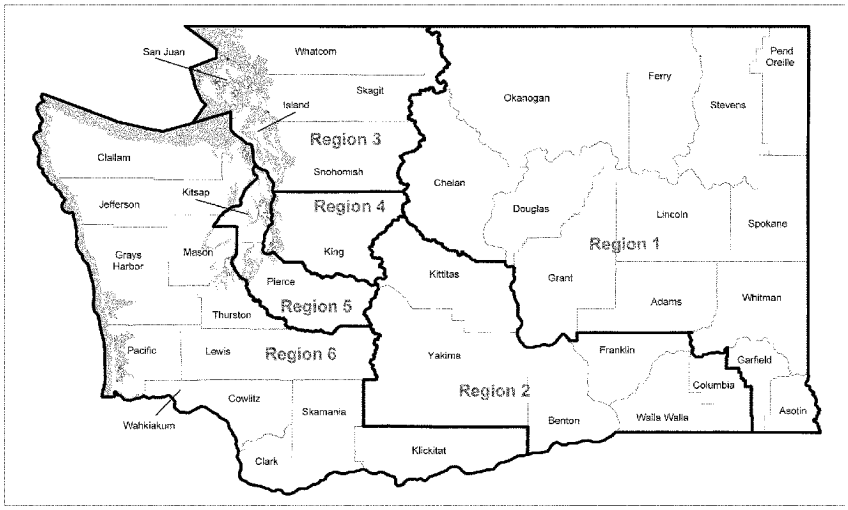
[5] Courtney, M.E., Barth, R.P., Berrick, J.D., Brooks, D., Needell, B., & Park, L. (1996). Race and child welfare services: Past research and future directions. *Child Welfare 75*(2), 99-137.

Poverty is generally considered to be a condition characterized by severe deprivation of basic human needs, including food, safe drinking water, sanitation facilities, health, shelter, education and information. For the purposes of this study, poverty is operationally defined on the basis of eligibility to receive food stamps.

In 2004, about one in four children (24 percent) in Washington State received food stamps. In 2004, 38 percent of the total referrals to CPS came from families that received food stamps. This means out of the 58,005 referrals to CPS, 22,619 of the children came from families that received food stamps. The 22,619 children represent seven percent of Washington State's total food stamp population.

At a Glance: Washington State Regions

The legislation directed the Committee to separate results by geographical region. In 2004, large differences in disproportionality, especially for Indian and Black children existed across the six DSHS-Children's Administration regions.



As compared to White children referred to CPS:

Region 1

- Indian children are more likely to be removed from home and to remain in care for over two years.
- Black children are more likely to be removed from home and to remain in care over for two years.
- Hispanic children are more likely to be in care for over two years.

Region 2

- Indian children are more likely to be removed from home and to remain in out-of-home care for over 60 days.
- Black children are less likely to be in care for over 60 days.
- Hispanic children are less likely to be in care for over 60 days or in care for over two years.

Region 3

- Indian children are more likely to be removed from home and to remain in care for over two years.
- Black children are more likely to be removed from home and to remain in care for over two years.
- Hispanic children are as likely to be removed from home. Hispanic children are less likely to be in care for over 60 days or in care for over two years.

Region 4

- Indian children are more likely to be removed from home and to remain in care for over two years.
- Black children are as likely to be removed from home and to remain in care for over 60 days. Black children are more likely to remain in care for over two years.
- Hispanic children are more likely to be removed from home.

Region 5

- Indian children are more likely to be removed from home and remain in care for over two years.
- Black children are more likely to be in placement for over 60 days.
- Hispanic children are more likely to remain in care for over two years.

Region 6

- Indian children are more like to be in an out-of-home placement and to remain in care for over two years.
- Black children are more likely to be in an out-of-home placement and to remain in care for over two years.
- Hispanic children are as likely to be removed from home. Hispanic children are more likely to be in care for over 60 days.

Recommendations
Although we recognize formal administrative and legislative recommendations will be provided in the remediation plan, as we move forward we would like to identify two areas of consideration.

2. **Consult with other states, such as Texas, Wisconsin, and Michigan, which have undertaken statewide efforts to reduce disproportionality.**
   DSHS is not embarking on this journey alone. Currently, there are states tackling the very issues we are now examining. As we move forward, gaining knowledge and lessons learned from other states will be a tremendous asset.

2. **Study issues surrounding the Indian Child Welfare Act and American Indian racial disproportionality.**
   Substantial amounts of racial disproportionality exist within the Washington State American Indian population. Emphasis on Indian Child Welfare compliance will be a priority. Also, an in-depth look at how racial disproportionality varies between the Reservation Indians, Rural Indians and Urban Indians will be examined.

SHB 1472
At a Glance: American Indian Children in Washington State
Taken from the Washington State Racial Disproportionality Advisory Committee Report

Racial disproportionality exists in the Washington State Child Welfare System.

The greatest disproportionality for American Indian children occurs when:

- The initial referral to Child Protective Services (CPS) is made.
- The decision to remove the child from home is made.
- A child is in care for over two years.

In 2004, mandated reporters submitted about 60 percent of all referrals to CPS. 80 percent of children removed from home were referred by mandated reporters.

Disproportionality is consistently greater for mandated reporters such as health care workers, educators, police officers and court officials. But it is observed even among non-mandatory reporters who are most often relatives, friends or neighbors.

Compared with White children referred to CPS in 2004, after referrals:

- American Indian children were 1.6 times as likely to be removed from home.
- American Indian children were 2.2 times as likely to remain in foster care for over two years.

For American Indian children, after referral certain decisions appear to contribute to disproportionality. Compared to White children, American Indian children are:

- More likely to be removed from home.
- Less likely to reunify with parents within two years.
- Less likely to be adopted within two years.

In 2004, 80 percent of American Indian children in the foster care were living in single-parent homes at the time of out-of-home placement.

At the point of removal from home, 25% of the disproportionality for American Indian children can be statistically accounted for by poverty, family structure, and case characteristics.

This information is based on Children's Administration data from 2004.

SHB 1472
At a Glance: Black Children in Washington State
Taken from the Washington State Racial Disproportionality Advisory Committee Report

Racial disproportionality exists in the Washington State Child Welfare System.

Black children are almost twice as likely to be referred to Child Protective Services (CPS) as opposed to White children.

The greatest disproportionality for Black children occurs when:

- The initial referral to CPS is made.
- A child is in care for over two years.

In 2004, mandated reporters submitted about 60 percent of all referrals to CPS. 80 percent of children removed from home were referred by mandated reporters.

Disproportionality is consistently greater for mandated reporters such as health care workers, educators, police officers and court officials. But it is observed even among non-mandatory reporters who are most often relatives, friends or neighbors.

Compared with White children referred to CPS in 2004, after referrals:

- Black children were 1.2 times more likely to be removed from home.
- Black children were 1.5 times more likely to remain in care for over two years.

After referral, when compared to White children Black children are:

- More likely to have a referral accepted.
- As likely to reunify with parents within two years.
- Less likely to be adopted within two years.

In 2004, 88 percent of Black children in the foster care were living in single-parent homes at the time of out-of-home placement.

This information is based on Children's Administration data from 2004.

SHB 1472
At a Glance: Hispanic Children in Washington State
Taken from the Washington State Racial Disproportionality Advisory Committee Report

Racial disproportionality exists in the Washington State Child Welfare System.

Hispanic children are 1.3 times as likely to be referred to Child Protective Services as White children.

In 2004, mandated reporters submitted about 60 percent of all referrals to CPS. 80 percent of children removed from home were referred by mandated reporters.

Disproportionality is consistently greater for mandated reporters such as health care workers, educators, police officers and court officials. But it is observed even among non-mandatory reporters who are most often relatives, friends or neighbors.

Compared with White children referred to CPS in 2005, after referral:

- Hispanic children were no more likely to be removed from home.
- Hispanic children were no more likely to remain in care for over two years.
- Disproportionality does not increase at future decision points.

In 2004, 80 percent of Hispanic children in the foster care were living in single-parent homes at the time of out-of-home placement.

This information is based on Children's Administration data from 2004.

SHB 1472
At a Glance: Asian Children in Washington State
Taken from the Washington State Racial Disproportionality Advisory Committee Report

"Asian children are underrepresented...Asian children are represented at rates significantly lower than White children. The overall disproportionality does not change with increased involvement in the system (page 47, Committee Report)."

Compared to White children:

- Asian children are half as likely to be referred to Child Protective Services (CPS).
- At each decision point and outcome after referral, Asian children are underrepresented in the Washington State Child Welfare System.

If Asian American children are referred, they are more likely to be referred by a mandated reporter. In 2004, 72 percent of Asian children referred to CPS were submitted by mandated reporters. 86 percent of children removed from home were referred by mandated reporters.

Disproportionality is consistently greater for mandated reporters such as health care workers, educators, police officers and court officials. But it is observed even among non-mandatory reporters who are most often relatives, friends or neighbors.

In 2004, 62 percent of Asian children in the foster care were living in single-parent homes at the time of out-of-home placement.

This information is based on Children's Administration data from 2004.

Chairman MCDERMOTT. Thank you very much. Ms. Solomon is from Illinois. Dr. Solomon is the head of the Illinois African Commission.

You may notice that the Chairman and the Ranking Member got their States up on the table here.

So, welcome, Dr. Solomon.

STATEMENT OF TERRY A. SOLOMON, PH.D., EXECUTIVE DIRECTOR, ILLINOIS AFRICAN AMERICAN FAMILY COMMISSION, CHICAGO, ILLINOIS

Dr. SOLOMON. Good morning, Chairman and Ranking Member Weller, and Members of the Subcommittee. I am Dr. Terry Solomon, executive director of the African American family commission for the State of Illinois.

Today I speak on behalf of the Illinois Department of Children and Family Services, and on behalf of the National Association of Public Child Welfare Administrators, an affiliate of the American Public Human Services Association. I appreciate the opportunity to testify before you today about how Illinois has implemented reforms to reduce disproportionality and disparity within our child welfare system.

The term "disproportionality" refers to the over or under-representation of a race or cultural group within the system. "Disparity" refers to inequity in the access to and utilization of and/or quality of services received by racial or ethnic minority, compared to a non-minority within the system.

Illinois has an unfortunate and extensive history of disproportionality and disparity within its child welfare system. In 1996, national data showed that Illinois had the highest per capita rate of children in foster care in the nation, and that 79 percent of the children in foster care were African American. Although the State reduced its overall number of children in care in 2007, African American children made up 19 percent of Illinois's general population, but accounted for 59 percent of the population of children in the child welfare system.

The data showed that Illinois African American children were more likely to be removed from their families, remain in substitute care for longer periods, and were more likely to transition or age out of substitute care than children from other racial groups.

Most troubling, African American children were more likely to be investigated for maltreatment than others. It was clear that the system was in need of urgent reform to address the problem of disproportionality and disparity.

In July 2006, the Illinois Department of Children and Family Services center region engaged key community partners, and began planning for a permanency enhancements symposium to examine permanency options, practices, and procedures. The symposium provided a forum for child welfare stakeholders to discuss systemic disproportionality.

This group is in the process of developing transformation teams that will identify the policies and procedures that contribute to disproportionality, recommend legislation and policy changes, improve relations with court personnel, birth parents, and community leaders, and improve permanency outcomes, including reunification.

Although the initiative is still in its early stages, the commission has already recognized quantitative outcomes of this work.

First, the permanency enhancement symposium effectively engaged a wide range of child welfare stakeholders in an open, honest, and difficult dialog that allowed the group to directly address the issue of disproportionality within the system.

Second, the symposium involved court personnel and judges in their examination of systemic shortcomings. They have responded with heightened awareness to the issue of disproportionality and disparity.

This model of change relies heavily on the principles of community engagement, and includes involving the child welfare community, the courts, the educational community, social workers, and other professionals that work directly with families. The work in which Illinois is engaged in mirrors strategies of other States, such as Texas, are employing to ensure that African American children are not more likely to be removed from their homes or age out of foster care.

Nationally, NAPCWA has made the issue of disproportionate representation of children of color in the child welfare system one of its highest priorities. In partnership with Casey Family Programs, NAPCWA is leading a national project called "Positioning Public Child Welfare Initiative: Strengthening Families in the 21st century," which will position the field to speak with one voice about its purpose and roles in improving outcomes for vulnerable children, youth, and families.

A disproportionality Subcommittee of subject matter experts are currently concentrating on developing written guidance to be used by the child welfare system.

In closing, I do want to offer some recommendations. First, States are already struggling to meet existing program costs with limited resources. Their ability to continue to develop initiatives and implement strategies that address disproportionality and disparity within the child welfare system will require additional Federal support.

Also, the Federal Government could also include carefully considered process in outcome measures in the child and family services review. Additions to the child and family service review should be accompanied by additional technical systems in support to States as they work to effect change in the system.

Also, federally supported research around this issue will further enhance the efforts of both the current and future child welfare workforce and other systems of professionals to reverse the trend of disproportionality.

Illinois is one of many States that are struggling to address institutional disproportionality and disparity.

We also finally urge Congress to consider legislation that will more fully support reunification services to children returning to permanency with their family.

I thank you for the opportunity to testify, and I am happy to answer any questions you may have.

[The prepared statement of Dr. Solomon follows:]

Statement of Terry Solomon, Ph. D., Executive Director, Illinois African American Family Commission, Chicago, Illinois

Good morning, Chairman McDermott, Ranking Member Weller, and members of the Subcommittee. I am Dr. Terry A. Solomon, Executive Director of the African American Family Commission for the State of Illinois. The African American Family Commission was created by Governor Jim Edgar in 1994 to assist the Illinois Department of Children and Family Services (DCFS) in developing and implementing programs relevant to African American families. In August 2004, Public Act 093–0867 expanded the scope of the Commission. The purpose of the Illinois African American Family Commission is to guide the efforts of and collaborate with various state agencies, including DCFS, to improve and expand existing human services and educational and community development programs for African Americans. The Commission is a fifteen-member statewide commission whose members are appointed by the Governor of Illinois, and include community leaders, child welfare professionals, ministers, parents, business leaders, educators and community activists dedicated to enhancing the welfare of children and families.

I am also speaking on behalf of the National Association of Public Child Welfare Administrators (NAPCWA), an affiliate of the American Public Human Services Association (APHSA). APHSA is a nonprofit, bipartisan organization representing state and local human service professionals for over 76 years. NAPCWA, created as an affiliate in 1983, works to enhance and improve public policy and administration of services for children, youth, and families. As the only organization devoted solely to representing administrators of state and local public child welfare agencies, NAPCWA brings an informed view of the problems facing families today to the forefront of child welfare policy.

On behalf of APHSA, NAPCWA, and the state of Illinois, I would like to thank the Subcommittee for recognizing the importance of addressing the issue of disproportionate representation of children of color in the nation's child welfare system. I appreciate the opportunity to testify before you today about how Illinois has implemented systemic reform measures to reduce conditions of disproportionality within our state child welfare system.

DISPROPORTIONALITY IN THE CHILD WELFARE SYSTEM

Disproportionality permeates the entirety of our National child welfare system—from the children who enter the system to outcome disparities for children and youth of color throughout their time in the system. Sadly, this systemic trend is not limited to the child welfare system alone. Disproportionality has been a burgeoning issue in various programs and systems, including special education services, juvenile justice, and the criminal justice system.

When considering disproportionality within the child welfare system, it is necessary to focus on both population differences, as well as differences in treatment outcomes. According to the Casey-Center for the Study of Social Policy Alliance for Racial Equity in the Child Welfare System, both "disproportionality" and "disparity" exist within the system. The term disproportionality refers to the over—or under-representation of a particular race or cultural group within a system, meaning that this group populates that system at a lower or higher rate than their percentage of the general population. Disparity refers to unequal treatment in the need for, access to, utilization of, and/or quality of services received by children of color when comparing a racial or ethnic minority to a non-minority within the system itself.

There are a number of factors that may contribute to a disproportionate number of African American children entering the child welfare system, including socio-economic status, departmental policies and procedures, and the decisionmaking of departmental staff and administrators. When more children of color are in fact entering the system, it means that these children are more likely to be removed from their homes upon report and investigation of abuse and neglect. Research has shown that incidents of abuse and neglect are not more prevalent among African American families versus those of other races, however these families are more likely to be reported and investigated for abuse and neglect.

Disparity can be examined throughout the system by focusing on treatment plan development, service delivery, and resources allocation. It can also be examined by focusing on key decision points within the life of a case, including kin placement and exits to family permanency through relative placement, guardianship, or adoption. Over-representation occurs when there is racial or ethnic disparity at any of these points of intervention, which in turn contributes to the condition of disproportionality within the system.

ILLINOIS' STORY

Illinois has had an unfortunate and extensive history of disproportionality within its child welfare system. A 2008 study by the University of Illinois at Urbana-Champagne School of Social Work's Children and Family Research Center shows that the state's foster care population climbed from 15,000 children in care in 1987 to 51,000 children in care in 1997, and that this growth in the overall service population was primarily in the African American and kinship care populations.

In 1987, 56% of the children in care were African American, and 28% of the population was living with kin. Beginning in the early nineties, there was an increase in the number of African American children living with kin that came into foster care. At that time, children left by a parent in the care of kin could be brought into state custody on a neglect petition (neglect by a parent who may have been absent from the home since birth). Whether the child was safe, or in need of protection, was not the top consideration. By 1996, national data showed that Illinois had the highest per-capita rate of children in foster care in the nation at 17.1 per 1,000, and the majority of the children in foster care (79%) were African American.

This trend continued beyond the 1990's. Although the state reduced its overall number of children in care down to 16,000 children in 2007, African American disproportionality still permeated the system. In 2007, African American children made up 19% of Illinois' general population but accounted for 59% of the population of children in the child welfare system. The data showed that in Illinois, African American children were more likely to be removed from their families, remain in substitute care for longer periods and were more likely to transition or "age out" of substitute care than children from other racial groups.

The greatest amount of disparity was in the likelihood that an African American child would be investigated for maltreatment. African American children were over represented in the rate at which they entered foster care across the state, and this disparity had worsened over the previous five years. In Cook County, African American children were less likely to exit to permanence. It was clear that the system was in urgent need of reform to address the perpetuation of disproportionality and disparity.

THE PROCESS OF REFORM IN ILLINOIS

In July 2006, DCFS and the Central Region (the state region representing over half the state's counties) in partnership with the DCFS African American Advisory Council, Illinois State University School of Social Work, and the Illinois African American Family Commission began planning for a Permanency Enhancement Symposium to examine permanency options, practices and procedures in the Central Region.

The goal of the Permanency Enhancement Symposium was to share information on the importance of building a partnership with birth and foster parents, community—based organizations, private and public child welfare professionals, and court personnel to improve permanency outcomes, safety and stability for children in the care of the state. The Symposium guided the development of Action Teams and Action Plans that are charged to: 1) maintain children in the home; 2) improve reunification outcomes; 3) improve adoption/guardianship outcomes and; 4) address the disproportionate representation of African American children in foster care.

The Permanency Enhancement Symposium provided a forum for discussion among key child welfare stakeholders about the uncomfortable reality of perpetuated systemic disproportionality. Information from the Permanency Enhancement Symposium process revealed that race acts as a key factor in placement and permanency decisions. Moreover, the conversation showed that race relations in the respective counties and the role of race-based DCFS internal policy, procedures and practices may contribute to the disproportionate representative of African American children in out-of-home placements.

The Central Region has taken the lead in understanding and analyzing systemic racism to address the over representation of African Americans in the state's child welfare system, and to improve permanency outcomes and quality assurance. Community dialogs have been held to engage key stakeholders in the Action Team process. Conversations regarding disproportionality are linked with conversations of racial equity, or the lack thereof, for African Americans and other people of color. We believe that to have productive conversations regarding disproportionality, it is important that all participants have a shared definition and common language concerning racial equity. Moreover, we believe that teams of committed and dedicated individuals are needed to guide the Department in this effort. Therefore, Transformation Teams are being formed statewide to help the Department.

The purpose of the Transformation Teams is to examine the role institutional racism plays in the overrepresentation of African American children in the child wel-

fare system and in the practices within the Illinois Department of Children and Family Services. Racism can be defined as "racial prejudice coupled with the misuse of power by systems and institutions" (DCFS Workshop on Racism and Anti-Racism, Crossroads Antiracism Organizing and Training, 2008).

Since the road to racial disparity and disproportionality often begins at the point of entry into the child welfare system (e.g., calls to child abuse hotlines, investigations), it is important that child welfare professionals, from frontline staff to agency administrators, are aware of how their personal and cultural biases, as well as their power to make decisions, may contribute to the overrepresentation of African American children in substitute care.

Throughout 2008 and 2009, Transformation Teams will work to shape awareness of systemic racism within an institution and analysis of the specific barriers to change; create an anti-racist multicultural "table" with a new understanding of the task of building an anti-racist institution; and build new organizational structures that share power of decision of making. The Central Region Transformation Team will also select targeted communities in which to implement family advocacy and support projects.

This model of change relies on heavily on the principles of community engagement, and seeks to engage the many varied stakeholders that comprise the child welfare community. These include parents and families, faith-based organizations, the courts, the educational community, and social workers and other professionals that work directly with families.

THE OUTCOME OF REFORM IN ILLINIOS

Ultimately, the reform process in Illinois seeks to identify DCFS policies and procedures that contribute to disproportionality; recommend anti-racism legislative and policy changes; improve relations with court personnel, birth parents and community leaders; and improve permanency outcomes, including intake and reunification.

Although the initiative is still in its early stages, the Commission has already recognized several qualitative outcomes of the ongoing work. First, the Permanency Enhancement Symposium effectively engaged a wide ranging group of child welfare stakeholders in an open, honest, and difficult dialog that allowed the group to directly address the issue of disproportionality within the system. This forum for frank discussion enabled the group to begin to identify decision points and institutional practices that have contributed to ongoing conditions of disproportionality and disparity.

Second, because the Permanency Enhancement Symposium involved court personnel and judges in the shared process of examining the systemic shortcomings that continue and exacerbate racial disproportionality and disparity, these key stakeholders in the system have responded with heightened awareness to the issue. Disclosure by some judicial professionals revealed that their intent to focus on "families and not their skin color or background" may have obscured the issue of systemic disproportionality and not allowed them to directly address it. This important realization has enabled them to begin to take steps to incorporate an understanding of disproportionality's causes and costs into their work.

University of Illinois at Urbana-Champagne School of Social Work's Children and Family Research Center has recently published an assessment of the conditions of disproportionality and disparity presented by Illinois' public child welfare system, and will continue to actively evaluate the work and outcomes of the reform process.

OTHER STATE SUCESSES

The work in which Illinois is engaged mirrors strategies other states are employing to ensure that African-American children are not more likely to be removed from their homes or age out of foster care without an adoptive family or other permanent placement, or less likely to be reunited with their families.

2005 data from Texas showed that African-American children in Texas were almost twice as likely as Anglo or Hispanic children to be reported as victims of child abuse or neglect. African-American children were also more likely to be the subject of substantiated reports of abuse and neglect, and ultimately to be removed from their families. They were also spending significantly more time in foster care or other substitute care, were less likely to be reunified with their families, and waited longer for adoption than other children.

Senate Bill 6 was passed in 2005 and pushed the state toward comprehensive reform of Child Protective Services (CPS). The state analyzed data related to removals and other enforcement actions, reviewed policies and procedures in each child protection region, and developed plans to remedy disparities. CPS has enhanced training for service delivery staff and management, developed collaborative relationships

with community partners, increased staff diversity, and improved targeted recruitment efforts for foster and adoptive families.

In addition, Texas was one of 13 states selected to participate in a "Breakthrough Series Collaborative on Disproportionality" sponsored by Casey Family Programs and the Annie E. Casey Foundation. The goal of this initiative was to identify practices, policies, and assumptions that contribute to disproportionality in the child welfare system, and engage agency staff, community partners and leaders in eliminating those problems. Illinois' collaborative approach to reform is closely aligned to the successful model of agency action and stakeholder involvement used in Texas.

NAPCW DISPROPORTIONALITY WORK

Nationally, NAPCWA has made the issue of disproportionate representation of children of color in the child welfare system one of its highest priorities. Public child welfare administrators recognize that disproportionate representation and the disparate treatment of certain cohorts of children exist in child welfare; furthermore, NAPCWA acknowledges that the over-representation of these cohorts negatively impacts child and family outcomes. As a result, NAPCWA has focused on developing materials and tools to help members assess how their agencies are performing under a more systematic and systemic approach. Our most recent effort is the development of the Disproportionality Diagnostic Tool created to help state and local jurisdictions examine disproportionality.

The Disproportionality Diagnostic Tool helps users examine societal, agency, and individual factors that may be contributing to disparate treatment of certain groups of children (e.g. African American or Native American Indian children). The tool provides a preliminary assessment to help users identify and analyze the root causes of disparate treatment that children of color tend to face. The tool also contributes to the agency's understanding of baseline data about the existence of disproportionality in child welfare.

NAPCWA will be improving the diagnostic tool by adding a section of written guidance, including reflective questions that child welfare agency personnel should consider as they develop a plan of change and move to take corrective action against disproportionality and disparities within their agencies. APHSA's *Policy & Practice* magazine will also feature an article about the diagnostic tool this winter to raise continual awareness about the issue.

As another effort to reduce disproportionality and eliminate disparities, NAPCWA, in partnership with Casey Family Programs, is leading a national project called the Positioning Public Child Welfare Initiative: Strengthening Families in the 21st Century (PPCWI). PPCWI is designed to reform child welfare by positioning the field to speak with one voice about its purpose and roles in improving outcomes for vulnerable children, youth and families; the principles and standards that guide the work of the field and its professionals; and the ways in which the field evaluates itself and continuously innovates. Because disproportionality has been a historically pervasive issue throughout the child welfare system, the issue of disproportionality is addressed as an area of concentration in the PPCWI project. A Disproportionality Subcommittee comprised of subject matter experts are currently concentrating on developing written guidance to be used by the child welfare field.

POLICY RECOMMENDATIONS

The Commission and NAPCWA recommend several actions that Congress should take to support states in their efforts to curtail the systemic continuation of disproportionality and disparity.

First, states are already struggling to meet existing program costs with limited fiscal resources. Their ability to continue to develop initiatives and implement strategies that address disproportionality and disparity within the child welfare system will require additional Federal support.

In addition to increased funding to support state-level work around disproportionality, a strong Federal commitment to addressing disproportionality and disparity may be demonstrated by including carefully considered process and outcome measures in the Child and Family Services Review (CFSR). This addition to the CFSR should be accompanied by additional technical assistance and support to states as they work to effect change in their systems.

The issue of disproportionality should also be incorporated into training and education for future child welfare professionals, mandated reporters, and workers within other systems. Congressional support for this integral element of preparation and workforce development would ensure that the next generation of professionals working with children and families enter the workforce aware of this issue and better able to address it. Federally supported research around this issue would further en-

hance the efforts of both the current and future child welfare workforce, and other system professionals to reverse the trend of disproportionality and disparity.

Recent legislation developed and championed by this subcommittee has highlighted the need for Federal support of subsidized guardianship. We urge Congress to extend IV–E funds to relatives who assume legal guardianship of relative children. We also urge Congress to support relative care givers by offering them the opportunity to benefit from Kinship Navigator Programs and other family connection services. Finally, we urge Congress to consider legislation that will more fully support reunification services to aid children in returning to permanency with their family of origin.

CONCLUSION

Illinois is one of many states that are struggling to address institutionally embedded disproportionality and disparity through efforts grounded in "bottom-up" processes of practice and policy change, as well as the principles of community engagement. We ask that members of the subcommittee support states in this bold and important work by taking steps to more fully support the systemic reform and policy development that is needed to reverse the decades-old trend of disproportionality and disparity in our country's child welfare system.

Thank you for the opportunity to testify, and I'm happy to answer any questions you may have.

Chairman MCDERMOTT. Thank you very much for your testimony.

Oronde A. Miller is the director of something called systems improvement methodologies at Casey Foundation. If you could take a moment to tell us what that is.

Mr. Miller.

STATEMENT OF ORONDE A. MILLER, DIRECTOR, SYSTEMS IMPROVEMENT METHODOLOGIES, CASEY FAMILY PROGRAMS

Mr. MILLER. Thank you, and good morning, Mr. Chairman and Members of the Subcommittee. I am Oronde Miller, senior director of systems improvement at Casey Family Programs.

While this work is important to me professionally, it is also important to me, personally. In 1972, my brother and I were placed in foster care. After being separated for a period of time and one failed adoptive placement, we were placed with our permanent family in Detroit, Michigan, through Homes for Black Children, an adoption agency there in Detroit, Michigan.

I and Casey Family Programs thank you for the invitation to testify today before the Subcommittee about promising State and community-based programs and policies to address racial disproportionality in child welfare. I would ask that my full written testimony be entered into the record.

Chairman MCDERMOTT. Without objection.

Mr. MILLER. Casey Family Programs is the nation's largest operating foundation focused solely on providing, improving, and ultimately preventing the need for foster care. In 2005, Casey called for a comprehensive change of foster care and the child welfare system to safely reduce the number of children in foster care by 50 percent by the year 2020, and reinvest savings to improve the well-being of children and their families.

As part of our strategic efforts, we are investing $2 billion of our endowment to improve outcomes for children who are at risk, or who are already involved in the child welfare system.

A number of States have begun to identify and address racial disproportionality in child welfare. Texas is one State that has been particularly comprehensive and innovative in their scope of work.

The Texas experience illustrates six core elements for addressing this issue. The first element is build political will to reform the child welfare system overall, with a focus on prevention and early intervention. In Texas, after a number of tragic child welfare cases, the child welfare agency, State legislature, and Governor committed to improving the entire child protective services system. The redesign added significant resources, which reflected a strong political commitment to improving safety for all children, and increased supports for relative care givers.

These additional resources and the following programmatic initiatives have produced significant results, not the least of which is a reduction in the number of children entering care, with the greater reduction in those jurisdictions where the State focus is on disproportionality efforts.

The next essential element is data analysis. The political climate I just described created an opportunity for child welfare agencies to talk about racial disproportionality. This was possible, however, because the State had begun collecting and analyzing data years before the reform efforts began. Their research found that, even after controlling for factors such as poverty, children of color were more likely to enter care, and fare worse once in care.

Given the data and political support, child welfare officials committed to make a cultural shift within the State child protective services system. Data should be collected by race and ethnicity, age, and gender, taking into consideration the characteristics of the population, analyzed by region, office, and even supervisory unit level whenever possible. This level of data allows States to target their response and prioritize interventions.

Casey Family Programs supported research conducted by Chapin Hall Center for Children, which found that age is a critical factor in racial disproportionality. They report that both placement and disparity rates are consistently higher for infants. They also found that these disparities at the county level vary in relation to characteristics within population.

Texas officials were committed to operating a values-based leadership approach. Child welfare managers and staff evaluated how their own practices and day-to-day decisions affected outcomes for children of color in care, as well as their families. They also developed a culturally competent workforce, which includes both training and skills development of current staff, as well as efforts to create a more diverse workforce.

They also implemented the community engagement model, which is based on the understanding that community members are best equipped to create solutions that work for their specific needs, which creates necessary stakeholder buy-in.

Finally, Texas employed targeted recruitment of foster and adoptive families who can meet the needs of children and youth who continue to wait for permanent homes.

States and communities across the country have implemented a range of additional initiatives that I would like to highlight, but in

the interest of time, I will refer to my written comments for a full description, and just briefly mention a few topical areas, such as: cross systems collaboration; performance-based contracting and accountability on racial disparities across the continuum; the identification and engagement of fathers, paternal relatives and members of the extended family support network in the case planning and decisionmaking process; and, finally, the identification of community-based organizations and support resources available to assist families. This is only a small snapshot of the exciting and promising work being done at the State and local level.

We believe that the following Federal policy recommendations will help States take these initiatives to scale where they do exist, and help more communities develop them, if they are just beginning to take on this work: invest Federal resources and prevention activities that keep children safely out of foster care; two, improve efforts to locate relatives and engage them in placement decisions that serve the best interest of the child; three, grant Indian tribes and native children and families equal access to all Federal child welfare supports; four, allow Federal training dollars to be used to train the full continuum of workers who work with children and families who come to the attention of child welfare; and five, collect data on the disproportionate representation of children of color in all stages of child welfare involvement at the Federal level, and require States to have in place a plan to collect such data at the State and regional level.

In addition, mandate the States create a plan in collaboration with key stakeholders, including families, birth parents, alumni of foster care, courts, and other child and family serving agencies to address any disparities that are revealed.

We applaud this Subcommittee and the House for passing H.R. 6307, which includes provisions that address a number of these recommendations.

In closing, as I participate here today, I do so with a strong belief that change is possible, and that the outcomes that we seek can be achieved, but time is of the essence. On average, each day in America, approximately 800 children are removed from their homes and placed in foster care. Approximately half of those children are children of color.

I thank you for seeking real change on their behalf, for having the courage to address the issue of racial disproportionality in child welfare, and for seeking to learn about what is working at the State and local level.

Casey Family Programs is available as a resource to this Subcommittee, or to individual Members, for more specific data, best practices, or technical assistance, as you continue to pursue policy solutions to this issue. Thank you.

[The prepared statement of Mr. Miller follows:]

Testimony of Casey Family Programs

Hearing on Racial Disproportionality in Foster Care
Before the Subcommittee on Income Security and Family Support
U.S. House of Representatives
Thursday, July 31, 2008

Presented by
Oronde Miller
Senior Director, Systems Improvement
Casey Family Programs
omiller@casey.org

Good morning Mr. Chairman and members of the Subcommittee. I am Oronde Miller, Senior Director of Systems Improvement at Casey Family Programs. Casey Family Programs thanks you for the invitation to testify today before the Subcommittee on Income Security and Family Supports about promising state and community based programs and policies to address racial disproportionality in child welfare. We thank you for your continued commitment to address the issue of racial disparities. It is a challenging issue, but one that must be addressed.

Casey Family Programs is the nation's largest operating foundation focused solely on providing, improving and ultimately preventing the need for foster care. The foundation draws on over 40 years of experience and expert research and analysis to improve the lives of children and youth in foster care in two important ways: by providing direct services and supports to children and families involved in foster care, and by promoting improvements in child welfare practice and policy. In 2005 Casey began a 15-year strategic vision that we call our 2020 Strategy for Children.

As a nation, we need to take action to better care for our vulnerable children. If nothing changes in the United States between 2005 and 2020:

- 22,500 children will die from child abuse and neglect.
- Nearly 14 million children will be confirmed as victims of abuse or neglect.
- 9 million more children will experience foster care.
- 300,000 youth will age out of foster care, most with inadequate supports to build successful adult lives.
- Most of these children are children of color.

Our 2020 Strategy calls for a comprehensive change of foster care and the child welfare system. Casey's 2020 Strategy seeks to safely reduce the number of children in foster care by 50 percent by the year 2020 and reinvest savings to improve the well being of children and their families, especially in the areas of education, employment, and mental health.

As part of our strategic efforts, we are investing two billion dollars of our own endowment to improve outcomes for children who are at risk or are already involved in the child welfare system. We are partnering with states, tribes and local communities to provide technical assistance and share promising approaches to help them address many of the challenges that plague child welfare systems. We recognize that in order to reach our 2020 goals for children and families, strategies to address issues of racial disparities must be integrated into all efforts to reform the current child welfare system. Some of our work directly addresses racial disproportionality. For instance, Casey Family Programs, in collaboration with the Annie E. Casey Foundation, Casey Family Services, and the Center for Community Partnerships in Child Welfare, sponsored a Breakthrough Series Collaborative (BSC) on "Reducing Disproportionality and Disparate Outcomes for Children and Families of Color in the Child Welfare System" to help jurisdictions identify key components of change to reduce and ultimately eliminate these disparities. In addition, we have partnered with states and counties including the Texas

Child Protective Services (CPS) system to address systemic factors and identify and implement practice improvements that can address the disproportional representation and disparate outcomes of children of color and their families. Casey Family Programs also is proud to be part of the Casey/CSSP Alliance on Racial Equity in Child Welfare (Alliance). One critical element of the Alliance's work is to identify locations or sites across the country, where work is being done to promote racial equity and improve outcomes for children of color in child welfare.

Some of the work we do is designed to reform child welfare more generally but has a particularly significant impact on children of color. We believe that both types of activities are necessary if we are to effectively address racial disparities in child welfare. Efforts to address racial disproportionality within states and local jurisdictions also often take this dual approach. Targeted acts to address cultural and racial bias must be accompanied by more global efforts to address the needs of all children in care or who are at risk of coming into care.

Through our work with the BSC sites, our partnerships with states and communities throughout the country and our efforts as part of the Alliance, Casey Family Programs has identified several promising and effective practices and policies to address racial disproportionality. As I highlight the initiatives in Texas and other jurisdictions, I will describe some of the policies that enabled them to intentionally address racial disproportionality. My remarks will conclude by noting what changes in federal policy can help more states to engage in effective and promising approaches.

The Texas Approach and Experience

A number of states have begun to identify and address racial disproportionality and disparate outcomes for children and families of color. In fact a number of these states are represented on this panel today. Texas is one state that has been particularly comprehensive and innovative in their scope of work.

Casey Family Programs has worked in Texas for a number of years, providing direct services to many children in foster care, supporting families and communities involved in the child welfare system, and providing strategic consulting to improve the state's child welfare system. A large focus of this relationship has been to reduce racial disproportionality and disparate outcomes for children and families of color involved with Texas' foster care system as part of our overarching goal of improving the child welfare system for all children.

The Texas experience illustrates six core elements of a successful effort to address racial disproportionality in child welfare:

1) **Building Political Will to Reform the Child Welfare System Overall with a Focus on Prevention and Early Intervention –** Understanding and addressing racial disproportionality and disparate outcomes formally became a central component of the Texas child welfare system reform efforts in 2005, although the

work to make this happen began much earlier. It is important to point out the policy and political context in which these changes occurred. After a number of tragic child welfare cases, the child welfare agency, state legislature and Governor committed to improving the entire child protective services system with both improved policies that focused on prevention and a substantial increase in resources. The redesign added significant resources which reflected a strong political commitment to improving safety for all children and increased supports for relative caregivers. These additional resources and the following programmatic initiatives have produced significant results. For the first time in seven years, the number of children entering foster care in Texas decreased. Although there was a reduction in the total number of children entering care, the impact was greater in the jurisdictions where the state had focused its disproportionality efforts, particularly in the areas where they targeted community engagement.

2) **Data Driven Planning** – This political climate created an opportunity for child welfare agencies to talk about disproportionality. They were able to include this issue as part of the larger discussion on child welfare reform because they had begun collecting and analyzing data about disproportionality in child welfare years before the reform efforts began. Their research found that, even after controlling for factors such as poverty, children of color were more likely to enter care and fare worse once in care. The data was incontrovertible: patterns of poor outcomes for children of color in the Texas child welfare system was a result of historic patterns of inequity and racism that disadvantaged children, families and communities of color. Armed with this information and with the support and leadership of the executive and legislative branch, child welfare officials committed to make a cultural shift within the state child protective services system. Strategies to address racial disproportionality and disparate outcomes must begin with an analysis of data, specifically disaggregated by race and ethnicity at each of the critical decision points in a child and family's involvement with the child welfare system. In addition, data should be collected by age and gender, taking into consideration the characteristics of the population, analyzed by region, office and even supervisory unit level whenever possible. This level of data allows states to target their response and prioritize interventions. Casey Family Programs supported research conducted by Chapin Hall Center for Children, which found that age is a critical factor in racial disproportionality in child welfare. They report that both placement and disparity rates are consistently higher for infants. They also found that these disparities at the county level vary in relation to characteristics of the population. Data analysis has guided Texas CPS efforts to identify problem areas and needed practice and policy changes. Data-driven planning ensures that the actions taken are relevant (both internal to DFPS/CPS and external to the community) and verifies that outcomes are indeed linked to changes in practice, policy or programming.

3) **Leadership Development** – Texas child welfare officials were committed to operationalizing a values-based leadership approach. Anti-racism initiatives and

a fundamental commitment to families and communities was central to this approach. Child welfare managers and staff evaluated how their own practices and day-to-day decisions affected outcomes for children of color in care as well as their families. Part of their leadership development involved learning to lead from a position of values and character, and a commitment to shape future outcomes through immediate acts. The values underlying Texas CPS leadership activity are intended to guide leaders towards humane practices and policies in their behavior with staff, youth, families, and others.

4) **Community Engagement Model** – External stakeholders are actively engaged in the Texas approach to address racial disproportionality. This engagement model is based on the understanding that community members are best equipped to create solutions that work for their specific needs; that stakeholder buy-in is necessary for intervention success; and that their involvement is critical to sustain change over time. In Texas, there are essentially four components that define the community engagement model:

    a. *Community Awareness and Engagement*—Making the problem and issues visible, sharing the data, telling the story with the media and with constituents, enrolling community leaders, and building local allies.
    b. *Community Leadership*—Expanding the leadership beyond organizations/institutions to the level where it belongs, that is, at the community level. Participation in *Undoing Racism* training is available to reinforce the committee members as agents of social change.
    c. *Community Organization*—Going to the community, being guided by it to learn what its strengths are, and hearing from residents while bringing them to the table as key informants to address their issues.
    d. *Community Accountability*—Working towards desired outcomes and measurable results to achieve the ultimate goal of sustainability, and ensuring that communities own the solutions.

5) **Creating a Culturally Competent Workforce** – Developing a culturally competent workforce has included both training and skills development of current CPS personnel as well as efforts to create a diverse workforce. Trainings primarily involved the *Undoing Racism* workshop and the *Knowing Who You Are* training developed by Casey Family Programs. The state legislature appropriated funds to hire five disproportionality specialists to help move their remediation plan forward across the state.

6) **Targeted Recruitment of Foster and Adoptive Families** – Texas has increased targeted recruitment efforts for foster and adoptive parents who can meet the needs of children and youth who are waiting for permanent homes, including an expansion of the Department's faith-based effort and One Church, One Child programs. This effort has sought to decrease the number of African American children waiting for permanent homes.

Much of the work for Texas child welfare reform has been strengthened by clear and assertive leadership at both the legislative and executive branches of state government. The state legislature was very actively involved in guiding the work of this system reform effort, and developed clear accountability guidelines and requirements in Texas state law. In partnership with Casey Family Programs, Texas child welfare officials have chronicled their efforts to reduce and eliminate racial disproportionality and disparate outcomes in a publication entitled, *Engaging Communities in Taking a Stand for Children and Families,* and its accompanying Executive Summary. I would like to submit for the record a copy of this report as an attachment to my written testimony.

Additional Examples of Emerging and Promising State and Local Practice and Policy:

Cross Systems Partnership: Child Welfare and Public School Systems – Several jurisdictions including Ramsey County, MN, Guilford County, NC, and the state of Connecticut have developed effective partnerships between their respective child welfare and public school systems. In these jurisdictions social workers have completed intensive training of school personnel on mandatory reporting responsibilities and procedures and co-located social workers in schools with the highest rates of CPS referrals. Co-location allows workers to identify children and families in need of additional supports before families enter the child welfare system. This cross system collaboration prevents unnecessary child welfare system involvement.

Private Agency Performance Based Contracting and Accountability – In Jefferson County, KY, the public child welfare agency developed and implemented a system of performance based contracting and accountability that included a data driven focus on racial disparities and cultural responsiveness in services for children and families. Private agencies and other community based organizations with public agency contracts are now required to report outcomes for children and families, including the provision of services to children and families (timeliness and effectiveness) by race and ethnicity of service providers and recipients. Organizations must demonstrate effectiveness in culturally responsive practice, an outcome data-driven determination, in order to maintain their contractual relationship with the public agency.

Identification and Engagement of Fathers, Paternal Relatives and Members of the Extended Family Support Network in Case Planning and Decision Making Process – A number of public child welfare agencies, including those in Wake County and Guilford County, NC and Des Moines, IA, realized that they had not done an effective job of identifying fathers and/or subsequently engaging them or their extended family in the discussion about their child's well-being and potential involvement in the foster care system. As a result, agencies developed formal protocols for social workers to follow in an effort to first identify fathers, and for engaging them in the case planning and subsequent decision making process regarding their children. Agencies also developed additional support programs aimed at educating fathers on how to most effectively navigate the foster care and related human service systems.

Identification of Community Based Organizations and Family Support Resources Available to Assist Families – According to the most recent federal data available, nearly one out of four children who enters foster care exits in less than six months. This suggests that many of these placements could have been prevented in the first place. However, with few home and community based resources available or known to the child welfare agencies, children and families unnecessarily endure the trauma of foster care involvement. This is particularly pervasive in communities of color. Several public child welfare agencies, including those in Connecticut, dedicated the time of one or more social workers to go into the community and identify existing resources. Connecticut child welfare staff compiled this information providing descriptions of the organizations, services offered and contact information. They then distributed this information to social services personnel, schools and other child and family serving professionals, as well as families. The community resource directories are continually updated and made available so that community members, including mandatory reporters, have information needed to refer families to the appropriate support resources when needed and appropriate.

Parent Advocate Programs – A number of jurisdictions, including Jefferson County, KY have begun to develop formal programs that match mothers and fathers, who were once involved with the foster care system, with mothers and fathers who are currently involved with the child welfare system. This approach provides support to parents attempting to navigate what is frequently a frightening, painful and very traumatic process. Research shows that when parents participate in this type of program, children experience higher rates of reunification, spend less time in foster care, experience fewer placement moves while in care, and are more likely to be placed with and/or maintain significant levels of contact with their immediate and extended family members while in care.

Deliberate and Thoughtful Engagement of Foster Youth, Alumni of Foster Care, and Birth Parents with Foster Care System Involvement in Ongoing Systems Improvement Efforts – Several public child welfare agencies, including those in Jefferson County, KY, Des Moines, IA, and Connecticut have developed effective methods of engaging youth, alumni of care, and birth parents. Their involvement has sensitized child welfare professionals to the experience of families negotiating the child protective and foster care systems, and has provided child welfare professionals with practical strategies for improving family engagement as well as youth and family compliance with case plans. Strategies include: the development of youth and birth parent boards and constituent organizations; involvement in agency training and professional development activities; testimony at agency and local government child welfare hearings; and agency reform-focused community organizing roles.

Community Outreach, Organizing and Cultural Responsiveness Strategies - Poor and sometimes hostile relationships often emerge between the predominantly Caucasian public child welfare agency workforce and the various communities of color. In Ramsey County, MN the public agency leadership developed a strategy of employing "cultural consultants" to bridge the mutual level of trust, understanding and responsiveness

between the agency and the various cultural communities. The cultural consultants organized and facilitated hearings and discussion forums within the child welfare agency as well as within the community, and eventually between both. These forums and information exchange opportunities allowed for more transparency and cooperation between agency personnel and community members. Ultimately these strategies resulted in more thoughtful and sustained engagement of family members, as well as faith and civic organizations in prevention and direct family support activities. This also led to sustained opportunities for community participation in ongoing child welfare system improvement efforts.

In Woodbury County, IA, the Minority Youth and Family Initiative (MYFI) Special Native American Project Team (SNAP), created in 2004 to meet the needs of children and families in out of home care, provides active efforts to all children self-identified as American Indian. The SNAP team consists of a Supervisor, Native family liaison, Native tribal liaison and social workers. Through efforts of CINCF, team efforts have expanded to include collaborations with child protective and adoptions workers. Because SNAP team members and other local DHS staff are partners in the collaboration, SNAP efforts continue to grow and improve. Some goals of SNAP include working with relatives from the onset of placement, connecting with tribes early and often, and the involvement of the Native Liaisons from the onset of a child protective services case.

This is only a small snapshot of the exciting and promising work being done at the state and local level to address racial disproportionality in child welfare. The Alliance has created a network of state and local leaders to continue the shared learning of the BSC initiative. State leaders in more than 10 states and counties have committed to share effective strategies with one another. Per your request, we will continue to share these lessons with this Subcommittee.

Federal Policy Recommendations:

1. Invest federal resources in prevention activities that keep children safely out of foster care.

2. Improve efforts to locate relatives and engage them in placement decisions that serve the best interests of the child. When family members are identified and engaged in all aspects of service delivery, the outcomes for all children are significantly improved. This is especially true for children of color.

3. Federal child welfare funds should support a range of permanency options, including reunification, adoption, and guardianship. Currently, federal funds support one form of permanency: adoption. The adoption assistance program provides financial supports to families who adopt eligible children from foster care and the adoption incentive program provides financial rewards to states that increase the number of children adopted from foster care over and above an established baseline. Support should also be available for children who exit foster care through reunification or guardianship. These modifications to funding

should provide states with incentives to move children out of foster care for a full range of permanency options. In addition, federal funds should provide a full array of post-permanency services and supports to families, whenever a child exits foster care through reunification, adoption or guardianship, in order to ensure that a child remains safely in his or her permanent home. These provisions benefit all children in care. They are especially essential for children of color by strengthening the ability of extended family members and kin to provide permanent, loving homes for children when their biological parents are unable to do so.

4. Grant Indian tribes and native children and families equal access to all federal child welfare supports. In too many states, native children are placed in foster care at rates 4-5 times greater than their proportion of the population. Tribal child welfare systems are disadvantaged by the way that federal child welfare funding is provided for child welfare services. Tribes are not allowed to directly receive federal Title IV-E foster care funds, and, as a result, their ability to provide the necessary care and services for vulnerable children and their families is severely limited. Currently funds must be negotiated with the state in which the tribe is located. This pass-through approach is cumbersome, costly to tribes and inconsistently applied across states. American Indian/Alaskan Native children in the care of tribal social services agencies should receive direct federal child welfare support by allowing Indian tribes to have direct access to Title IV-E funding.

5. Allow federal training dollars to be used to train the full continuum of workers who work with children and families who come to the attention of child welfare. Most states contract with private non-profit agencies to provide many child welfare services. In addition, many systems outside the child welfare agencies serve and impact the children and families involved in child welfare. However, current federal law limits the use of training funds to only public agency workers.

6. Collect data on the disproportionate representation of children of color in all stages of child welfare involvement at the federal level and require states to have in place a plan to collect such data at the state and regional level. In addition, mandate that states create a plan in collaboration with key stakeholders including families, birth parents, alumni of foster care, courts and other child and family serving agencies to address any disparities that are revealed.

We applaud this Subcommittee and the House for passing H.R. 6307, which includes provisions that address a number of these recommendations.

In closing, as I participate here today I do so with the strong belief that change is possible and that the outcomes that we seek can be achieved – but time is of the essence. On average, each day in America, approximately 800 children are removed from their homes and placed in foster care, approximately half of those children were

children of color. I thank you for seeking real change on their behalf, for having the courage to address the issue of racial disproportionality in child welfare and for seeking to learn about what is working at the state and local level. I also thank you again Mr. Chairman, Congressman Weller, and Subcommittee members for the opportunity to share Casey Family Programs' perspective with you today. Casey Family Programs is available as a resource to the Subcommittee, or to individual members, for more specific data, best practices or technical assistance as you continue to pursue policy solutions to this issue.

Thank you.

Chairman MCDERMOTT. Thank you for your testimony. Mr. Conquering Bear.

Mr. CONQUERING BEAR. Good morning.

Chairman MCDERMOTT. You are from South Dakota, is that correct.

Mr. CONQUERING BEAR. Originally, yes.
Chairman MCDERMOTT. Originally? Okay.

STATEMENT OF DARYLE CONQUERING BEAR, FOSTERCLUB, STONEHAM, COLORADO

Mr. CONQUERING BEAR. Chairman McDermott, Ranking Member Weller, and the Members of the Subcommittee, thank you for inviting me to testify today. I thank the Members of the Subcommittee for their commitment to creating a better life and a better future for the half-a-million children who are living in foster care today.

At the age of 13, I was removed from my family and my Lakota Sioux tribe. I was placed in foster care in Colorado. Five years later, at the age of eighteen, I aged out, completely on my own. During the five years I spent in foster care I lost touch with my siblings, became disconnected from my tribal customs, and drifted from placement to placement.

I moved four times during the 5 years I was in foster care. Living in two group homes and two foster homes, adjusting to different schools and rules each time I moved, made it harder to stay connected to both my heritage and my family. I was separated from my grandmother, the one person that connected me with my culture and my heritage. I missed so many important moments: my sister's birthday, my brother's high school graduation, and holiday celebrations.

Traditionally, Native American Indian families are very close. Before I entered foster care, my younger sister was my best friend. As the oldest brother, my role would be to pass along my knowledge to my younger siblings.

In foster care, however, I was separated from my brothers and sisters. At first, we saw each other every week, and tried to stay in touch as much as we could. Then my brothers and sisters were moved to another town. I didn't see them for over a year. One brother ran away from his group home, and I was sent to a placement far away.

Being separated from your family is unbelievably hard for anyone. It is particularly hard for a child or a teenager, but when you are separated from your family, and isolated from your traditions and culture, it is even more difficult. Foster care took both my family and my culture away.

When I was young, I looked forward to the day I could participate in powwows and sweat lodges, rites of passage that in my culture would mean I was becoming an adult. In foster care, I wasn't able to take part in those cultural events that meant so much to me. As a result, I often feel like an outsider in my own Lakota Sioux tribe in South Dakota and in Colorado.

My experience is not, unfortunately, uncommon. Many other American Indian children have similar stories to mine.

I am convinced one reason I lost connection to both my culture and my family is that most tribes cannot access Federal child welfare funding to help them serve the children and families in their care. More than 560 federally recognized tribes are struggling to meet the needs of their members, but current Federal law does not allow tribes to receive the direct title IV–E funding that would help

pay for these services, only those tribes that have developed special contracts, where their States can be reimbursed for providing supports and services to children and families.

This inability to directly access Federal foster care funds limits tribes' capacity to meet the needs of children and families in crisis. As a result, tribes are only able to provide services to 30 to 40 percent of Native American children in foster care, and there is little or no capacity for tribes to engage in efforts to help children and families remain safely together.

Tribal children often must go in the care of State agencies, reducing the chance that they and their families will receive services that are specifically geared to their culture and community.

Thanks to the leadership of this Committee, especially Chairman McDermott and Ranking Member Weller, earlier this summer the House unanimously passed the Fostering Connections for Success Act, H.R. 6307. Among its many important provisions, this bill addresses one of the biggest barriers facing tribes in their ability to serve abused and neglected tribal youth like myself.

The bill would allow tribes to receive direct Federal foster care funding, so that more American Indian children and families could remain intact, and children would be able to stay strongly connected to the two things that define them: their family, and their culture.

Many experts agree on this policy, including the National Non-Partisan Pew Commission on Children and Foster Care. The Pew Commission studied the nation's foster care system, and recommended that Indian tribes have the option to directly access funding to title IV–E. A recent report joined by Pew and National Indian Child Welfare Association finds that American Indians and Alaska Native children are over-represented in foster care, and at more than 1.6 times the expected level.

In foster care, it shows that American Indian and Alaska Native children are less likely than other children in foster care to have experienced abuse, but more likely to have experienced neglect. States with the greatest over-representation of Native American children in foster care include Alaska, Minnesota, Montana, Nebraska, North Dakota, Oregon, South Dakota, Utah, and Washington. Native American children make up one fourth to over one half of the foster care population in South Dakota, my home State, Alaska, Montana, and North Dakota.

My experiences in foster care have taught me how important tradition, culture, heritage, and family are. Today, I am voicing the hopes of American Indian and Alaskan Native young people across the country who are currently or have formerly been in foster care.

My name is Daryle Conquering Bear, and I am waiting to reconnect with my grandmother, who I lost in touch with, as a result of leaving my community of the Lakota Sioux tribe when I was placed in foster care. We ask you very simply to make certain that other children don't have to endure the unnecessary losses so many of us have experienced.

Right now, as we listen to my story, there are more stories taking shape, stories of native children being removed from their homes and being placed with strangers, losing their brothers and sisters. More importantly, losing who they are as individuals, los-

ing their culture. We hope that Congress will change child welfare legislation to give tribes the ability to serve their children and families with culturally appropriate care and understanding.

American Indian and Alaskan Native kids and families have waited long enough. The time for real lasting and meaningful reform is now. Thank you.

[The prepared statement of Mr. Conquering Bear follows:]

Statement of Daryle Conquering Bear
Former Foster Youth, Colorado
Before the Subcommittee on Income Security and Family Support
of the House Committee on Ways and Means

Hearing on Racial Disproportionality in Foster Care
Thursday, July 31, 2008

Chairman McDermott, Representative Weller, and Members of the Subcommittee, thank you for inviting me to testify today. I thank the Members of the Subcommittee for their commitment to creating a better life and a brighter future for the half a million children who are living in foster care today.

At age 13, I was removed from my family and my Lakota Sioux tribe, and I was placed in foster care in Colorado. Five years later, at age 18, I "aged out" completely on my own. During the five years I spent in foster care, I lost touch with my siblings, became disconnected from my tribal customs and drifted from placement to placement. I moved four times during the five years I was in foster care, living in two group homes and two foster homes. Adjusting to different schools and rules each time I moved made it hard to stay connected to both my heritage and my family. I was separated from my grandmother, the one person that connected me with my culture and my heritage. I missed so many important moments – my sister's birthday, my brother's high school graduation, and holiday celebrations.

Traditionally, American Indian families are very close. Before I entered foster care, my youngest sister was my best friend and, as the oldest brother, my role would be to pass along knowledge to all my younger siblings. In foster care, however, I was separated from my brothers and sisters. At first, we saw one another every week and tried to stay in touch as much as we could. But then my brothers and sisters were moved to another town, and I didn't see them for over a year. One brother ran away from his group home and was sent to a placement far away. After the age of 13, I had no opportunity to be either the older brother or the tribal member I dreamed of becoming.

Being separated from your family is unbelievably hard for anyone. It is particularly hard for a child or teenager. But when you are separated from your family and isolated from your traditions and heritage, it is even more difficult. Foster care took both my family and my culture away. When I was young, I looked forward to the day I could participate in pow wows and sweat lodges – rites of passage that, in my culture, would mean I was becoming an adult. In foster care, I wasn't able to take part in those cultural events that meant so much to me. As a result, I often feel like an outsider in my own Lakota Sioux tribe in Colorado. My experience is not, unfortunately, uncommon. Many other American Indian children have similar stories to tell.

I am convinced one reason I lost connection with both my culture and my family is that most tribes cannot access federal child welfare funding to help them serve the children and families in their care. More than 560 federally recognized tribes are struggling to meet the needs of their members, but current federal law does not allow tribes to receive the direct Title IV-E funding

that would help pay for these services. Only those tribes that have developed special contracts with their states can be reimbursed for providing supports and services to children and families.

This inability to directly access federal foster care funds limits tribes' capacity to meet the needs of children and families in crisis. As a result, tribes are only able to provide services for 30 to 40 percent of Native American children in foster care, and there is little or no capacity for tribes to engage in efforts to help children and families remain safely together. Tribal children often must go into the care of state agencies, reducing the chance that they and their families will receive services that are specifically geared to their culture and community.

Thanks to the leadership of this committee, especially Chairman McDermott and Representative Weller, earlier this summer the House unanimously passed the Fostering Connections to Success Act (H.R. 6307). Among its many important provisions, this bill addresses one of biggest barriers facing tribes and their ability to serve abused and neglected tribal youth. The bill would allow tribes to receive direct federal foster care funding, so that more American Indian families could remain intact and children would be able to stay strongly connected to two things that define them—their family and their culture. Many experts agree on this policy, including the national, nonpartisan Pew Commission on Children in Foster Care. The Pew Commission studied the nation's foster care system and recommended that Indian tribes have the option to directly access funding for Title IV-E.

A recent report, released jointly by Pew and National Indian Child Welfare Association, finds that American Indian and Alaskan Native children are overrepresented in foster care at more than 1.6 times the expected level. It shows that American Indian and Alaskan Native children are less likely than other children in foster care to have experienced abuse, but more likely to have experienced neglect. States with the greatest overrepresentation of Native American children in foster care include Alaska, Minnesota, Montana, Nebraska, North Dakota, Oregon, South Dakota, Utah, and Washington. **Native American children make up from one-fourth to over one-half of the foster care population in South Dakota, Alaska, Montana, and North Dakota.**

My experiences in foster care have taught me how important tradition, cultural heritage, and family are. Today I am voicing the hopes of American Indian and Alaskan Native young people across the country who are currently or have formerly been in foster care. My name is Daryle Conquering Bear, and I waiting to reconnect with my grandmother, who I lost touch with as a result of my leaving the community of the Lakota Sioux tribe when I was placed in foster care. We ask you very simply to make certain that other children don't have to endure the unnecessary losses so many of us have experienced.

Right now as you listen to my story, there are more stories taking shape – stories of native children being removed from their homes and being placed with strangers, losing their brothers and sisters, but more importantly, losing who they are as individuals, losing their culture. We hope that Congress will change child welfare legislation to give tribes the ability to serve their children and families with culturally appropriate care and understanding. American Indian and Alaskan Native kids and families have waited long enough. The time for real, lasting and meaningful reform is now. Thank you.

Chairman MCDERMOTT. Thank you very much. Thank you all, particularly Daryle for telling your own personal story.

One of the questions I have in listening to the witnesses today, and I am interested, there are many places where you can jump in in the system and have an impact.

The whole question of the referral to the child welfare system, that sort of intake position. In my experience, there were lots of policemen and social workers from other sources who wind up mak-

ing the decisions. What States have had the best success in injecting services at the front end to prevent children from being taken out of the family.

Is there anything you have to recommend, in terms of what's going on, either in your own States or places that you have had opportunities to look at, that would suggest a way to use additional money or resources to cut off the intake? That is, stop the number who come into the system in the first place. We know what happens to them once they get in; they are kept longer, and so forth.

So, it seems to me, one of the places we would like to have an impact is how to prevent them from getting there in the first place. Would money, for instance, kinship money, have made it possible for Daryle to stay with his grandmother? These kinds of questions arise in my mind.

So, I would like to hear those of you who are involved. Tell us what you have found, what you think.

Dr. HARRIS. I would like to respond. One of the programs that the State of Washington is looking at is a program in Ramsey County, Minnesota. What they have done, in terms of child protective services and referrals, is the following: they have a very elaborate screening process in place, in terms of hiring workers for their system. Workers are screened, they are trained prior to hiring, so that their rates of cases coming into child protective services have dropped by the thousands, and it's because people are screened before becoming CPS workers.

What happens in a lot of States, we have people who are working in child protective services who are not "professional social workers," they don't have the background to adequately assess these cases. Consequently, we have inappropriate referrals coming in. Some children who are in CPS could actually be served in their own homes.

Chairman MCDERMOTT. Mr. Miller.

Mr. MILLER. I would like to share some of our observations and experiences working with three jurisdictions in particular. One is Ramsey County in Minnesota, one is Guilford County, in North Carolina, and the other is the State of Connecticut, particularly in Waterbury. Each of those jurisdictions——

Chairman MCDERMOTT. Are these rural counties? Ramsey? I don't know the——

Mr. MILLER. Ramsey County is, yes, the St. Paul/Minneapolis area.

Chairman MCDERMOTT. Okay.

Mr. MILLER. Guilford County is the Greensboro area in North Carolina.

Chairman MCDERMOTT. Okay.

Mr. MILLER. In Connecticut, it is in Waterbury.

Chairman MCDERMOTT. Okay.

Mr. MILLER. Each of those jurisdictions, and this really speaks to some of what was presented in the written testimony, but process with partnerships. Particularly, we are working with the school systems, because they found that their highest referrals were coming from the schools.

So, they developed really close working relationships, and it involved retraining the staff at the school, both counselors, adminis-

trators, and teachers on mandatory reporting requirements. What they also did was develop a pretty elaborate process of identifying community-based organizations that provided services to children and families, because the schools were familiar with those organizations.

When they observed whether it had to do with cleanliness, hygiene, clothing, parent supervision, but it wasn't necessarily inappropriate to refer it to the child welfare agency if they didn't know of any other resources, but if they knew of other resources, they could go to those resources to try to identify services and supports for those families.

So, in each of those jurisdictions, they went through a pretty comprehensive process of identifying what existed in the community, and developing resource summaries for the schools and for other entities in the community.

Chairman MCDERMOTT. Did they have similar results as Ramsey County? Did Guilford and Danbury [sic] reduce the number of kids referred.

Mr. MILLER. They did. They reduced the number of referrals, which were their highest, from the schools, and diverted those families to community-based resources.

Chairman MCDERMOTT. Okay. Ms. Solomon.

Dr. SOLOMON. In Illinois, our child protection workers are able to screen calls that are inappropriate for coming into care, particularly related to poverty. We can refer them to our TANF agency and refer them to community-based organizations to get care.

The other part of this is that the state of child welfare is that many child protection workers are reluctant to screen children out, because all it takes is a headline in the State agency, it's under scrutiny and lawsuits.

I think the other part of it is that there exists racial bias in the reporters. We know some health professionals are more likely to report children of color to child protection services, as opposed to non-children of color.

I think it is important for us to look at how we can train all mandated reporters to be sensitive to the cultural needs and cultural foundations of other ethnic groups. So, I think we have to look at how we train social workers, and how we train mandated reporters. So, money coming into the child protection system to help deflect children, that's important, but also training.

Chairman MCDERMOTT. Thank you. I remember, myself, I have seen the whole panoply, from the days when we didn't have mandatory reporting, and passed the laws in the State legislature, and then watch it go into effect. So, you are right, there are real biases that exist.

Mr. Weller will inquire.

Mr. WELLER. Thank you, Mr. Chairman, and again, thank you to our panelists for your testimony. Mr. Chairman, it is particularly helpful when we have those who bring life experiences to this issue, which both Mr. Miller and Mr. Conquering Bear have shared with us.

Daryle, I particularly want to thank you for your compelling testimony, and personally sharing the experiences you have had. I

would like to ask you a few additional questions, based on your testimony.

For you personally, what difference would it have made for you, as an individual, if you had been able to be placed in foster care with another member of your tribe, or within your tribal community, rather than with the State.

Mr. CONQUERING BEAR. Being placed with another Native American family, or even with my grandmother, I would probably not even be at the place that I am right now. Right now, I am struggling for independence. I am independent right now, and being part of my culture, relearning every aspect of it is pretty hard, because my cousins who are my age, they are already at sun dances, they're at sun lodges right now. The Sioux nation is going on a powwow that is part of my culture, where I'm supposed to be at. I am here. I am outside. I go in and watch.

So, if I was placed with my grandmother, there would be a whole lot of changes. I would be proud, and I would be more appealing to the Lakota Sioux tribe than I am right now. Being placed in foster care, I have become an outsider. Every time I go back on the reservation, it takes many steps for me to even get my tribal ID, as an example.

They see being placed in a foster care as kind of a disgrace to the family. If I was placed with my grandmother, the transition to my adulthood, and manhood would be smoother than it is right now, being placed in foster care.

Mr. WELLER. What steps have you had to take to reconnect.

Mr. CONQUERING BEAR. To reconnect? Well, at first, when I was placed in Colorado, I didn't even know that, in the Indian Child Welfare Act, that they're supposed to ask me if there were other family or relatives who could take me in.

Seeing that Native Americans have substance abuse, all my family was on the reservation. That was one place I guess they didn't want to place me with, but my grandmother lived in Colorado at the time, and I did not know that until I was at the age of 17, getting ready to age out.

So, we finally had contact, with the help of my foster parents, who are now my adoptive parents. There was that step, knowing where she was, and then finally getting my tribal ID. They asked for my birth certificate, my Social Security card. If they all had that in my file, I wouldn't have bypassed those steps, instead of going back on the tribe. They're like, "We can't help you." What can you do? I am stuck, as a foster kid at the age of 17. What am I supposed to do.

Mr. WELLER. In your testimony, you stated that you had moved five times during the 5 years you were in foster care, that you lived in two different group homes and two different foster homes, and that you made the point it was difficult to adjust to different environments, different families, different situations, different schools. That particularly made it difficult to stay connected with your heritage.

From the standpoint of being able to do well in school, how did that affect your ability to progress, along with your peers, in the classroom in school.

Mr. CONQUERING BEAR. Well, when I was first placed in foster care, I was moved to a group home. Then, for that time, they said, "Two weeks, you're going home," and I was like, okay. Then 2 weeks turned into 3 months, 3 months turned into a year. Then I was placed into a foster home. That didn't work out. I went back to the group home. Then, at the age of 14, I moved into a foster home where I then stayed until I aged out.

I went from an urban high school to a high school in the middle of nowhere where I graduated with a class of 10. So, being able to have my education at one high school was very great, and also having foster parents that were really, "Hey, this is my child," and that were there for me, and really helped me, but still, that cultural aspect was still missing.

During my senior year, I had my brothers and sisters in the State of Colorado. I finally spoke up and was like, "Can I have my brothers and sisters move with me?" I had to go in front of the court. I don't know about the system, but that was one step taken that I was passing down the knowledge of my customs to them. Hopefully they can learn.

I picked up some of my culture while I was in care, but not all of it. It was a struggle, still.

Mr. WELLER. It grows from your testimony you are a strong advocate of allowing tribal governments to directly access tribal IV–E funds, something I have personally been a strong advocate of, so I welcome your support for that provision, and appreciate the Chairman agreeing that should be a priority in the bipartisan bill that we passed, with unanimous support from our colleagues.

Besides allowing tribal governments to have direct access to these Federal funds, what other recommendations would you share with us regarding tribal youth and foster care, things, initiatives, that we should consider.

Mr. CONQUERING BEAR. Well, one thing that, I don't know if this still falls under the title IV–E, but there was just a recent article in the ESPN magazine. If we can connect something with the youth that will provide them a stable foster home with a native family, because I know on the reservation they have kinship care, but they don't report it to the State. My cousin, who was featured in that story, had something to look forward to something, to have a goal with them. I know with that, they have an opportunity to go play college ball if they stayed in high school, on the reservation, and they got picked up by an Indian school.

So, saying that having some kind of leadership based on Native American—I know that in Colorado we have the Denver Indian Health and Child Center. One of the members is really promoting the culture, headmaster, head dancer. If we could have somebody go down or be connected with foster care like that and have them look up to you, big brother or big sister thing, being native, being the same culture where you come from, that would have really been helpful, or would be helpful for my other brothers and sisters.

Mr. WELLER. Thank you. Thank you, Daryle. You are very well spoken. We appreciate your testimony this morning.

Chairman MCDERMOTT. Ms. Berkley will inquire.

Ms. BERKLEY. Thank you, Mr. Chairman. I appreciate you holding this hearing. I think it's very important. Daryle, I am sure

that your grandmother is very, very proud of you. I think all of us are very impressed with not only what you have gone through, but what you have become. So thank you for being here.

I represent the State of Nevada. And 7 percent of the children in our population are African American, but 21 percent of those that are in foster care are African American. So, consequently, this is an issue that we feel profoundly in the State of Nevada.

I know what the research suggests about the disproportionality, and all of the many reasons for it, including poverty, and single parent homes, and limited access to services. We certainly have all of that and more in the State of Nevada.

One area that the people that run these programs in my district and in the State tell me would be of help in reducing the disproportional share of African American children in foster care is the expansion of benefits to kinship caregivers, which is a huge issue. I have met with many grandparents, aunts, and uncles who have taken in children with no help whatsoever, and how challenging this is, to add additional people into your family, when you're struggling to keep your head above water as it is, with the responsibilities that you already have.

I think many of us are cosponsors of the Kinship caregivers Support Act, and the "Fostering Connections for Success Act," which would expand assistance to relatives in the form of subsidized guardianship payments. I think that's very important, and I would like to see us move forward on that.

I have introduced legislation, and I believe it is very similar to the Chairman's legislation on child welfare. My legislation is called "The Partnership for Children and Families Act." Now, in Nevada, to give you some idea of how much stress and strain is on the foster care program in our State, in two short years, between 2004 and 2006, the number of foster children that we have in the system has increased by 30 percent. I suspect that when the statistics are in from 2006 to 2008, we will see a similar, if not higher, percentage of increase.

Consequently, the legislation that I introduced, and is very similar to the Chairman's, is very important for my State, and for the children that are in foster care. Among other things, my legislation would allow States to set up a baseline for projected child welfare expenditures. If the States were able to spend less than the baseline by safely reducing the number of removals of children from their homes, or expediting placement to a safe, permanent setting, then the difference could be reinvested back into the system in the form of support services or training for child welfare workers.

I wanted to ask Mr. Miller and then Dr. Solomon. Mr. Miller, in your testimony, you mentioned the six core elements of addressing disproportionality, including reforming the child welfare system to increase the focus on prevention and early intervention, investing those resources up front, and keeping our kids out of the foster care system is not only better for the kids, but it's also cost effective.

Can you give me some idea of how this additional funding for preventative services would impact disproportionality.

Mr. MILLER. On a number of levels. This certainly is the case in Texas, where the more detailed description comes from, and cer-

tainly from the other jurisdictions that we have had the opportunity to support and work with.

The largest thing for the jurisdictions is for the jurisdictions, but also for community-based organizations to have access to resources to provide services to families. That includes substance abuse treatment services, it includes child care and other resources for families who work particularly awkward hours and very challenging hours, families that work at night, families that work evening shifts, and what have you, what people might consider non-traditional hours.

Some of it is basic support, whether it is items for the home, like beds and other kinds of items, upkeep and maintenance for homes, some of those things that can, in a relative sense, easily remedy some of the challenges that families are facing.

So, just jurisdictions having access to resources that they can use to make some of those changes, it would prevent families from having to lose their children.

Ms. BERKLEY. It seems like a no-brainer, doesn't it? Yes, I know.

Mr. Chairman, I have one more quick question of Dr. Solomon, if I may. Okay.

Dr. Solomon, in your testimony you mention the need for increased Federal support to States to help them provide prevention services to at-risk children and families. Do you think that legislation such as the reinvestment portion of my pending legislation could have a beneficial effect on the disproportionality in foster care.

Dr. SOLOMON. Yes, I do. I think allowing States to be creative in identifying and creating State-specific solutions is definitely helpful. As we look at how to address racial disproportionality, as I stated in my testimony, States are using their own resources. I think legislation such as yours will allow them to apply, again, specific programs, services, and create programs that are unique, not only to the State, but also to the different counties within the State. So, I see your legislation as being helpful.

Ms. BERKLEY. Well, I want to thank you all again for being here. I appreciate it. I know in a State like mine, that has so many needs and has three shifts, so you've got a lot of non-traditional families and work situations, that I have met so many truly wonderful families and relatives that want to take care of these kids, and they just can't afford it. A little help from the State or the feds would make such an extraordinary difference, it would give them an opportunity to take care of their loved ones, and that's what they want to do. Thank you.

Chairman MCDERMOTT. Mr. Weller will inquire. Or Mr. Herger, excuse me. They look exactly alike; I don't know what's the matter with me.

[Laughter.]

Mr. HERGER. Thank you very much, Mr. Chairman. I want to join in thanking each of our witnesses for your testimony today. It is great to have you, Daryle, to hear your story, even with all the incredible challenges that you have been through in your life.

I can tell you, sitting up here, to think of someone when I was your age, testifying before a Subcommittee of Congress, to say it

would be terrifying to me would be an understatement. To see how well you handle yourself, how well you are doing certainly speaks to you, and the great example you can be, and role model you can be to those who need help.

Certainly, Mr. Miller, to see you doing so well, coming through the system, what you are doing is so very important.

The fact that there are disproportionate numbers of kids abused and neglected, or even killed, is a terrible tragedy. It is a tragedy for any child to be abused or neglected. During my 6 years as Chairman of this Subcommittee, we spent a great deal of time focusing on abuse and neglect in our child welfare system, and we heard some incredibly tragic stories.

What we focused on then, and what I would like to focus my question on today and this question has been brought up by several other members on the panel, is what we can be doing in Congress to prevent this abuse and neglect from occurring in the first place.

In 2004, I introduced legislation that would have reformed the Federal child welfare system. Right now, as the Federal funding system is structured, the financial incentive is there to place and keep kids in foster care. To me, that's the wrong incentive. It contributes to excess numbers of children in foster care, as we are discussing today.

My 2004 bill would have given States more flexibility in spending Federal money up front for prevention activities and other services to prevent abuse and neglect in the first place.

Mr. Miller, again, you have referred to this some, but do you think that these reforms, giving States flexibility to spend current Federal dollars on prevention activities would help, and what more can we do to see that this type of front-end prevention-based approach is promoted.

I might add this. As you are undoubtedly aware, we are tight with funds here. We are spending more than what's coming in. So, particularly, I would be interested in what you see perhaps we can redirect to spend in a wiser way. Again, if we can spend it up front to help prevent this before we get into the cycle of what you have been through, where we go from family to family, I would be very interested.

I also want to State that I want to thank the Casey Foundation, which has been so instrumental in working in this area in the work that you are doing. Again, I would like to further hear your comments.

Mr. MILLER. What I would say is that I think that the efforts to increase the flexibility that public child welfare agencies have to draw on resources for prevention activity, I think that's the right direction.

What I would also say is that I think that there are examples around the country of jurisdictions who have been very creative. I think one of our challenges really is to better understand what those jurisdictions have done, and how effective they have been. I think that could really guide our efforts, moving forward. Particularly, I look at jurisdictions like Los Angeles, and some of the creative work that they have done.

I think that there is more that we can learn from jurisdictions that have been successful. So, I don't mean this necessarily in a

disrespectful way for anybody who is involved in this work, but sometimes I think that we get into a space where we think that there are new answers that we just haven't discovered. I really think that we have strong success stories around the country, and I think part of our challenge is better understanding what has worked.

Mr. HERGER. I thank you. Anyone else have a comment, and would like to respond? Ms. Brown.

Ms. BROWN. I would just like to add that in our survey with State child welfare directors across the country, we did hear a lot of the same kinds of things, as far as the fact that they would like to see more flexibility and a greater emphasis on prevention in the front end, before children do run into trouble and enter the system.

The other thing that I heard consistently in these stories was the fact that data helped people understand where the problems began, and what the sources were. To the extent that we can continue to collect meaningful data that sheds light both on what other kinds of prevention services are needed, as well as what works, I think it would be very helpful. We actually suggested that HHS do more of this in our report.

Mr. HERGER. Thank you very much. Thank you, Mr. Chairman.

Chairman MCDERMOTT. Thank you. Mr. Stark will inquire.

Mr. STARK. Thank you, Mr. Chairman. I have some good news for those States who choose to do the right thing. I will tell you, Dr. Harris, Dr. Solomon; Ms. Brown knows this, but Mr. Miller is going to find out, that for 40,000 African American children in foster care, we suspect that they are eligible for survivor or disability benefits, and they're not getting them. That's $400 a month, $5,000 a year.

There are 30,000 foster care children now receiving those benefits. The trouble is that some States, who I choose not to identify here for fear of embarrassing the highest ranking member of this Subcommittee, some States take that money and just dump it in the general fund. It belongs to the kids, by law. Although we had a little fight, up to the Supreme Court, but the States put it in their general fund pocket, and they can pave roads with it, or pay for cops, or build prisons, whatever they want to do, and they don't give it to these children.

Think a minute. Most of the children qualify because of a disability. Some qualify because they are orphans, and they get a survivor benefit. I am going to submit to you that, in either case, those almost 100,000 kids out of the 500,000 are the most severely hurt, because they have a disability of either being an orphan or a disability that is a physical disability.

So, if we did what I think is the right thing, and I am hoping that I can get certain States to change their mind, and other States to come along. California, by the way, Mr. Herger, does the right thing. That money, by law, belongs to the child. The State gets a hold of it because they become the guardian.

Most guardians have to report to Social Security each year what they do with that money, either spend it on the child's behalf which, in the case of a disabled child, would mean maybe getting them treatment, extra help at school, tutoring, perhaps medical

help that they might need. If, in fact, they get it as a survivor, it could be saved.

I am going to ask Daryle what he would have done if he had had 4 years and put $5,000 a year. If he matured out of being in foster care, wouldn't it have been nice to have $20,000 set aside in a savings account, which you could have used for education, or to buy a car, or to move out.

Now, what I think we're doing is the wrong thing. I didn't go to law school, so I can't define shyster, but it comes pretty close. There are companies who go to States and they say, "Let us go through your list. We will find the kids that are eligible for these benefits, and then we will turn it over to the States, and we will take something off the top, a commission for finding them." So, not only do the States not get the full tilt, they have to give some to these highbinders who go through it.

I guess what I am going to ask you all is that shouldn't we, in a matter of fairness, take this money, which goes to the most severely challenged children in our system, and act as good guardians for them, and do what the law intended, either spend it on their behalf, or save it for their adulthood, which is what the law would require for, say, children of regular parents.

Is there anybody, I won't embarrass Dr. Harris, Ms. Brown I am going to ask to do more research on this, to certify my numbers, but Mr. Miller, Dr. Solomon, what do you think? Would you support that law? The States won't like it who get it now, because it goes to pay salaries.

Dr. SOLOMON. I think you have more wisdom on this topic than I do.

Mr. STARK. Yes.

Dr. SOLOMON. It's a complicated issue. So, as a scholar, I need to see more research, and I am looking for a report——

Mr. STARK. Okay, I get you——

Dr. SOLOMON [continuing]. From GAO on this.

Mr. STARK. You gave me some of the information, didn't you, Ms. Brown.

Mr. Miller, can we get Casey Foundation to help us raise some money for these poor kids.

Mr. MILLER. I would just like to reiterate that I think that both are very important, just in terms of the prior discussion about flexibility, but also increased resources, and jurisdictions really using those resources to support children and families.

Mr. STARK. Yes, but there is no guarantee that they do. That's the problem. The States can just pop this money into the general fund and use it for whatever they want.

I would stipulate with you if they used it for the kids, they would make a difference, but in most cases, they don't. The States' answer is, "Well, we have a burden of supporting the foster care system," which is true.

I am talking about the most critically damaged children because, in addition to the problems of foster care, they have a problem of a disability. I am hoping that I am going to get some sympathetic help here from the States other than California, which do the right thing, as we change the laws a little bit to require the States to handle this money properly.

Thank you, Mr. Chairman, for letting me trash the State of Washington.

Chairman MCDERMOTT. I will remember that.

[Laughter.]

Chairman MCDERMOTT. Mr. Davis will inquire.

Mr. DAVIS. Thank you, Mr. Chairman. Let me, if I can, ask the panel about something that has been of interest to me for a while, and it is the persistent problem in recruiting African American families, particularly African American families who are reasonably upper income, who have the means to adopt.

I was looking at the briefing material that the Committee prepared, and I think that HHS did a review in the first part of this decade, and found that something like less than half, 21 of 50 States, were actually deigned to be sufficient or successful in recruiting minority families.

So, I wanted to ask two questions. What States are doing a good job? Empirically, what are they doing.

[No response.]

Mr. DAVIS. Don't want to ask everyone to respond at the same time, but who is doing a good job of recruiting minority families to adopt.

Dr. SOLOMON. Well, I think one issue that we have always said and looked at is that African American families adopt equally to non-African American families. So that's one part.

As for the adoption of Safe Family Act, there was no moneys or any penalty attached to non-recruitment, but State agencies are required to recruit based on the racial composition of children coming into care, but I don't think there was any moneys there to support recruitment, and also any, and I don't like using the word "penalties," but there were no penalties or any accountability around recruitment.

So, I think the first step is to start there. What's the accountability, and are we putting moneys there to support more recruitment.

Mr. DAVIS. Let me maybe come at it this way, because obviously, financial incentives are a part of it; making sure that families get the benefits that they need.

Let's take, hypothetically, a black lawyer at a firm in Atlanta who is making $200,000 a year, his wife is a doctor at the hospital, she is making $170,000 a year. Whether or not they adopt, I suspect, is not based on a set of financial incentives, particularly if they have a reason they can't conceive, don't have children of their own, or just want an expanded family, and see a social need to do this.

I know we're a Subcommittee, I know we're a Government Committee, and we have resources, but put the resource question aside for a moment. What is it that we can do, in terms of affecting cultural mindsets? What is it that we can do, in terms of encouraging more African American families of means to adopt? What cultural social message do we need to carry.

Mr. MILLER. I would like to say I think that there are——

Dr. HARRIS. I think that we need to get the message out there, that there are African American children who need homes. We have, in my community, there are middle class African American

families who do have the resources to adopt children. They don't know that these children are out there, waiting for families.

I volunteer for the Children's Home Society of Washington, to actually go out and recruit families. I am not getting paid to do this, but it is something I am doing on my own, because there are infants, there are young children, who need homes. I am going around to churches, particularly targeting churches with middle-class families, to try and find families for these children.

I think that we need to educate middle class and upper class families about the adoption process. Some families have very negative messages that they have received regarding social service agencies and the adoption process.

Mr. DAVIS. Well, my time is running out, but I would just make this observation. There have been times when we have managed to change mindsets. We reduced smoking in this country, as we have educated people about the dangers around it, for example, and we changed our notions about welfare in the mid-nineties.

I think it would be very interesting for the Committee and for the congress to look at the question of what kind of advertising, what kind of message we could engage in at the State level with the agencies to try to let African American families know, because I would only disagree with one thing you said, Dr. Harris.

I can't imagine that anyone well educated and well heeled doesn't understand there are a lot of black kids who don't have families who are in foster homes. I suspect it's not that they don't know about the problem, but I think that, for whatever reason, they are not motivated or instigated to engage themselves by going out and adopting.

Thank you, Mr. Chairman.

Chairman MCDERMOTT. Mr. Miller, you were going to say something earlier.

Mr. MILLER. Yes, and I will be brief. What I wanted to say, a couple of things. One is that I think there are very effective programs that are out there. One that I think most people, or a lot of people, are familiar with is One Church, One Child. So, that motto has been adopted around the country.

I don't know that jurisdiction——

Mr. DAVIS. What do they do, exactly? What does One Church, One Child do.

Mr. MILLER. One Church, One Child started in Virginia, but it really is a model for recruiting, targeted recruitment efforts of families to adopt. The program really started with a focus on recruitment of families to adopt black children. So a lot of jurisdictions have adopted that motto and approach. There are a lot of programs and private agencies who have been very effective at doing it.

I think one of the problems that I have experienced is that public child welfare agencies don't always have the dedicated staff to follow up with families, and so there are, in fact, many families that come in, and since you're raising the question, African American families that come to the child welfare agency and inquire, but the child welfare agency isn't always as timely in responding. A lot of that is just because of resources, physical human resources, to respond to the inquiries that come in, and to keep those families engaged.

Psychologically, it takes about a year for families to really make the commitment after they have started to think about it. So, somehow, agencies being able to stay connected to those families after they express an initial inquiry, until they start the licensing process, is challenging for agencies to really dedicate the staff to really reach out and stay connected, and keep those families engaged.

If agencies had more staff time or dedicated resources to really make those connections, keep them coming to the interest meetings and what have you, then they would probably increase the rate of adoption of children, and particularly African American and other cultural families staying engaged through the licensing process.

Mr. DAVIS. Okay. That's helpful. Thank you.

Mr. WELLER. Mr. Chairman.

Chairman MCDERMOTT. Yes.

Mr. WELLER. As Dr. Solomon knows, actually, the One Church, One Child program was actually started at Holy Angels on the south side of Chicago in Illinois. So, we take the pride of ownership of that as a program which HHS and so many others——

Mr. DAVIS. They make good presidential candidates from the south side of Chicago, too.

[Laughter.]

Chairman MCDERMOTT. You get a rebuttal.

Mr. WELLER. I am going to refrain from getting into common politics and presidential politics here, but I do want to note that that One Church, One Child program is a program that is successful. It has received national recognition. Minority children have been the primary beneficiaries of this program.

I would ask unanimous consent if we could put some additional information at this point in the record this program, because it's a program where churches agreed to share information, and encourage someone in the parish or within the church to provide an adoptive home.

So, thank you, Mr. Chairman.

Chairman MCDERMOTT. Without objection.

Chairman MCDERMOTT. Also, if there are questions that members want to put to any of the witnesses, they want to send them in writing, there is no objection to doing that, as well.

Dr. Solomon, you have been held up here, so you get your say, too.

Dr. SOLOMON. Well, thank you. I do support what Mr. Miller stated, in terms of having more—looking at how child welfare agencies respond to families who are interested in adopting.

Also, I do want to state that the NAPCWA is in support of the adoption incentive program that is currently before the Senate that will focus on recruitment.

So, I think, as child welfare agencies look at how they respond to families, and particularly African American families, because many families are reluctant to come forward, there is a lot of the information you want to know, background information that's important when you're placing children, but how you help families agree to open up and to share information not only about the parents, but children in the home as well.

So, it is a difficult process that requires some more sensitivity training by the child welfare staff when they start going into the homes and into communities. This is not just a family for your upper-class families, but it's for families who are concerned about the well-being of children. Thank you.

Chairman MCDERMOTT. I am going to take the prerogative of starting a second round of questions here for a second, if other Members want to ask other questions.

My question to you, Dr. Solomon, it wasn't a throw-away line exactly, but it was a line you just stuck in your testimony, and didn't follow up on. I wonder, it's been nagging at me as I have listened to all this, and that's the business about how much is the fear of the newspaper headline driving the intake of youngsters into the system.

That is, I know that's kind of an amorphous question, but I would like to hear you talk about it. If others want to respond to that whole issue, every State has a child welfare law based on some horrible example of what has happened in that State. I do recognize it and I would like to hear you talk about that.

Dr. SOLOMON. Well, as you know, we have had some serious cases in Illinois, where there were about six or seven children living in poor conditions. When that hit the headline, the child worker, the child welfare investigator, several supervisors, their careers were put at jeopardy.

When that happens, the message to the other child welfare investigators and workers is that it's better to bring children in, to protect your career, if you will, than to err and leave the children at home, and for something to happen two or 3 months later, because you never, as a professional, you never recover from that.

So, it's best to bring children in, and to have someone monitor the case, to provide resources to support the family, than to say, "Well, maybe this family, they don't need to come in, but if something happened to that family, I don't want to risk the chance." It's really just that simple.

Chairman MCDERMOTT. Does the level of experience, or the level of training make any difference? That is, somebody was talking about Ramsey County in Minneapolis or St. Paul. If you screen and you train very carefully those folks that you give this responsibility to, does that make a difference in terms of their ability to take the risk that is inherent in letting a kid stay in a home setting.

Dr. SOLOMON. Well, let me answer you this way. First, yes, it makes a difference.

If there is one child in your State or your district——

Chairman MCDERMOTT. Jurisdiction.

Dr. SOLOMON. Right, is injured or severely maimed, that's an issue. So, all it takes is one child. I can be a perfect caseworker and make good decisions on 99 of my cases, but that one case, that's all it takes.

Chairman MCDERMOTT. Okay. Mr. Weller, have you got any further questions? If not——

Mr. WELLER. Thank you, Mr. Chairman. If we have any further questions, we will submit them to the witnesses for the record in writing.

Thank you, Mr. Chairman, and thank you to the panel.

Chairman MCDERMOTT. Thank you to all the witnesses. The meeting is adjourned.

[Whereupon, at 11:33 a.m., the hearing was adjourned.]

[Submissions for the Record follow:]

HEARING

ON

RACIAL DISPROPORTIONALITY IN FOSTER CARE

UNITED STATES HOUSE OF REPRESENTATIVES

SUBCOMMITTEE ON INCOME SECURITY

AND FAMILY SUPPORT

July 31, 2008

2345 Crystal Drive, Suite 250, Arlington, VA 22202
Phone 703-412-2400; Fax 703-412-2401; www.cwla.org

The Child Welfare League of America represents hundreds of state and local child welfare organizations including both public and private, and faith-based agencies. CWLA members provide a range of child welfare services from prevention to placement services including adoptions, foster care, kinship placements, and services provided in a residential setting. CWLA's vision is that every child will grow up in a safe, loving, and stable family and that we will lead the nation in building public will to realize this vision.

The Overrepresentation of Racial and Ethnic Minorities in Child Welfare

The members of this Subcommittee are well versed on the statistics, 506,000[1] children in foster care placements at the end of the federal fiscal year 2005, and 800,000[2] children spend at least some time in foster care each year. In addition in 2005 there were 3.3 million reports of abuse and neglect which resulted in 899,000 children substantiated as abused or neglected in that same year. For reasons we will outline it is important to note that approximately 40 percent of those children did not receive follow up services[3]. In another part of the child welfare system, which is often overlooked, more than 24,000 youth leave foster care simply because they become too "old" or "aged-out" of the system. [4]

Children of color, belonging to various cultural, ethnic, and racial communities (primarily African American, Latino/Hispanic, and Native/Indigenous American) are disproportionately represented in the child welfare system and frequently experience disparate and inequitable service provision. 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 that must be addressed to ensure that the needs of all children are fairly and appropriately served. Federal, state, and local governments; the child welfare system; and the communities they serve must ensure that all children, regardless of their cultural, ethnic, or racial identity, receive services that address the full spectrum of their needs in a manner that reflects the cultural strengths of their families.

As the GAO and others have determined, while African American children made up less than 15 percent of the overall child population based on 2000 census data, they represented 27 percent of the children who entered foster care in 2004. The GAO also found that in that same year African American children represented 34 percent of the children remaining in care at year's end. [5]

Research Cites Poverty as a Contributing Factor to Disproportionality

The GAO report found that 23% of African Americans lived below poverty levels compared to only 6% of white children.6 The rate of single-parent families, an issue also related to poverty, is higher for African American families. The challenge of poverty is important in addressing this issue because families in poverty have difficulty accessing needed services, which support families and prevent incidents of neglect or conditions that can add to the stress of parenting. Lack of access to services hinders the ability of parents to complete required services if a child is removed.

In some instances affordable and adequate housing, substance abuse treatment, mental health services and family services such as parenting classes, home visiting and counseling are critical to family reunification. A service in short supply or not available creates a barrier to both prevention of abuse and reunification when a child has been removed.

Points of Entry

Key to understanding this issue is to not overlook another important finding GAO and others have offered, that African American children not only were more likely to be placed in out of home care but with each decision point in the child welfare process the disproportionality or over representation grows. In some areas of the country depending on the population and community this overrepresentation is found among Native American children and Hispanic populations.

Frequently the first point of access to services can be the Child Protective Services (CPS) system. As we have already referenced annual data indicates that of the approximate 900,000 substantiated as abuse and or neglected, 40 percent do not receive follow up services. [7] There can be a variety of reasons for this annually consistent number including the way data is collected to refusal to participant in follow up services but the fact that such a high percentage do not receive services indicates that a significant number of families do not have access to supports that could prevent more serious incidents of abuse and neglect.

A recent analysis by the Congressional Research Services (CRS) conducted at the request of the Chairman of this Committee, Representative Charles Rangel, determined that overrepresentation of children of color was found at several points of the child welfare system starting from the investigation or entry point CRS [8]noted:

> "...at least one large five-state study has shown that the race/ethnicity of victims is largely in proportion to the population of children investigated. This suggests that the community of reporters, (e.g., family, friends, and neighbors, and social service, medical and school personnel) tends to over-report Black children but that once the decision to investigate is made, race/ethnicity is not an important factor in the determination of maltreatment. Nonetheless, because Black children are over-represented in the population of children investigated, a proportionate victim determination means Black children will make up a larger share of child maltreatment victims than their share of the general child population."

In examining other factors such as age and poverty CRS wrote:

> "Separate analysis of National Child Abuse and Neglect Data System data that looked at race/ethnicity, area poverty rate, and age in relation to removals, found that the risk of removal was highest for all income groups and race/ethnicities for children under age one. At the same time, Black infants living in counties with

high poverty rates had a removal rate of 50 per 1000 black children in the population. This appears to leave them extraordinarily vulnerable compared to their Hispanic and White counterparts who had removal rates of 13 and 10 per 1000 children of their respective race/ethnic groups. [9]

Reunification

The same barriers and problems at the entry point can exist at the exit point as well. In recent years we have made progress in reducing the number of children in out of home care. Nationally the number of children in care has been reduced from 562,712 in 1999 to 509,483 in 2005.[10] Despite this decline, barriers to permanency remain and can be quite extensive. Reunification is the first permanency option states consider for children entering care. Yet, in many ways, it is the most challenging option to achieve. We know that of the 280,660 children exiting out-of-home care in 2005, sixty-four percent were reunited with their parents or other family members. Research of national data indicates that White children were almost four times more likely to be reunified with their families than Black children. [11] For single-parent households, reunification of Black children with their families is less likely than for White and Hispanic children and their families. [12]

An examination of the data on the length of stay while in foster care also reflects on the challenges. On September 30, 2004 there were 509,662 children in out-of-home care. Of these children approximately 34 percent were African American and 40 percent were White. Overall, children were in care for an average of 30 months with a median of 17 months. African American children were in foster care significantly longer than children of other races. Both the mean and the median for time spent in care were higher for ethnic and racial minorities. While White children spent, on average about two years in foster care it was significantly higher for other populations. (Table below) [13]

Length of Time in Out-Of-Home-Care, 2004

Race/Ethnicity of Children in Care	Mean (months)	Median (months)
African American	39.4	22.8
American Indian/Alaskan Native	26.1	15.0
Asian	26.0	15.2
Hispanic	28.7	16.4
Native Hawaiian/Pacific Islander	21.9	14.0
White	23.5	13.6
Two or More Races	23.4	14.6

Adoption

One area that has received special focus in regard to overrepresentation is the field of adoptions from the foster care system. Since the 1970s, the number of White infants available for adoption has sharply declined in the U.S. Although U.S. agencies continue to provide adoption services for infants generally, this group now constitutes a small part of the population of children in need of adoption planning and services.

By contrast, the number of children in the nation's out-of-home care placements who need adoption has grown significantly. As a result of a range of social conditions and policy changes, an increasing proportion of children in care have the goal of adoption. In 2005 122,195 children in care were waiting to be adopted, meaning parental rights had been terminated or other steps were taken, following state policy or law, to move the child toward adoption.[14] These children may have a range of challenging needs, including prenatal exposure to alcohol and other drugs, medical fragility, a history of physical or sexual abuse, or membership in a sibling group. Thousands of older children, for whom agencies traditionally have had difficulty finding placements, also await adoptive families. Although Black children exited care via adoption in higher numbers than other ethnic groups, adoption finalizations for children still take longer than for white children [15]

A recent report from the Evan B. Donaldson Adoption Institute evaluated the impact of legislation aimed at addressing the over-representation of minority children in the population of children awaiting adoption. The Multi-Ethnic Placement Act (MEPA) of 1994 was enacted to ensure that race was not a barrier to the timely adoption of children whose parental rights had been terminated. The conclusion drawn was that MEPA "has not removed barriers to permanency for African American children". The Donaldson report noted that between FY 1998 and FY 2005, there was only a slight decline in the amount of time minority children awaited adoption from 45 months to 42 months.[16] The 2007 GAO report similarly found that minorities continue to be in foster care longer than Caucasian children by 9 months.[17]

Permanency Through Kinship Care

Research demonstrates the importance of children being nurtured in a stable family environment, confirming the need to move those who must enter foster care into permanent living situations as quickly as possible. Recent studies suggest that, when children must leave their families, well-supported kinship placements have the potential to provide more stable and normalizing environments than unrelated family care.[18]

Kinship care is a situation in which an adult family member, such as a grandparent, aunt, uncle, or other relative, provides a caring home for a child who is not able to live with his or her parents. The practice is not new, but it is growing partly because repeated studies and CWLA Best Practice Guidelines have revealed the value of placing children with a relative when appropriate. The financial difficulties many relatives experience potentially threaten the use and merit of this practice, however.

Subsidized guardianship is another important permanency option for relatives who care for children. In 2005, the U.S. Department of Health and Human Services (HHS) released findings and evaluations of the seven state waiver demonstration programs that allow federal Title IV-E Foster Care and Adoption Assistance funding to support guardianship programs. These findings reflect that non-relative guardianship is a viable and effective option for child welfare workers to consider. The major findings include: the availability of assisted guardianship as a permanency option may

decrease the length of out-of-home placements; combined data from two states reveals that less than 5% of the children in guardianship placements return to foster care; children in guardianship placements fare as well as those in other permanency settings on several measures of well-being, including school performance, engagement in risky behaviors, and access to community resources; and the use of guardianship placements shows statistically significant signs of positive outcomes, with more exits from foster care resulting in reunification or adoption.

The GAO report we have cited here also recognizes the important and significant role that the use of kinship care can have in moving children in to a permanent family arrangement.

Recent new research presented here in Washington this past June examined children from three groups, those who remained in foster care, those who entered kinship care at the outset of a placement and those that went from foster care to kinship care at a later period. The study, "Impact of Kinship Care on Behavioral Well-being for Children in Out-of-Home Care," showed that children in kinship care had fewer behavioral problems 3 years after placement than those children in foster care after an equal time frame. [19]

Youth Leaving Foster Care

In 2005 over 24,000 [20] young people exited the foster care system due to age, a number that appears to be increasing. Young people transitioning out of foster care are significantly impacted by the instability that accompanies long periods of out of home placement. Youth in the foster care system are often confronted with emotional, behavioral, developmental, and health challenges. The life events of these young people place them at an increased risk for experiencing adversity. In the midst of elevated rates of homelessness, poor educational outcomes, low wages, unemployment, long-term dependency on public assistance, incarceration and health issues, young people "aging out" of the foster care system are also experiencing pregnancies and early parenthood. Confronting and overcoming these challenges is more difficult without support networks or familial connections and impedes their transition into adulthood.

The nation's child welfare system is starting the implementation stages of collecting more accurate information on the fate of young people who leave the foster care system as a result of becoming too old. We do know that a disproportionate percentage of children waiting to be adopted are ethnic and racial minorities. We also know that over 21 percent of foster children are sixteen or older and that a disproportionate percentage are ethnic and racial minorities. So we can draw broad conclusions in regard to young people aging out and the overrepresentation of racial and ethnic minorities in this part of the child welfare population.

Tribal Populations

In 1978, Congress passed the Indian Child Welfare Act (ICWA, P.L. 95-608) to preserve cultural and family ties among Native American children and families and to ensure

respect for tribal authority in decisions concerning the placement of Indian children in out-of-home care. ICWA requires that states identify Indian children and notify the child's parents and tribe of their rights to intervene in a custody proceeding. ICWA also requires certain procedures regarding the use of tribal courts, child custody proceedings, tribal intervention standards, and placement preferences. The act establishes requirements for states before they remove an Indian child, which involves efforts to prevent the breakup of the Indian family, and standards for court findings.

Studies preceding the passage of ICWA showed that between 1969 and 1974, 25% to 35% of all Native American children in some states were removed from their homes and placed in foster care or adoptive homes. In certain states, Native American children were 13 times more likely to be removed from their families than were non-Indian children. [21]

In 2005, Congress directed the GAO to study the impact of ICWA to determine if the ICWA requirements were causing delays in the placement of Native American children. The GAO concluded that it did not result in poorer outcomes for children. Those states that could provide data showed that there was no clear link or evidence ICWA was harmful in its impact. Interviews with tribes and states that participated in the study indicated that the law facilitated the availability of greater resources and cooperation between tribes and states in providing services to and protection of Indian children. [22]

The GAO proposed that HHS review information made available by states through their Child and Family Service Reviews (CFSRs). This review found that 10 of 51 state reports did not mention ICWA implementation. GAO also proposed that states be required to include in their annual progress and services reports any significant ICWA issues not addressed in the Program Improvement Plans (PIPs) that resulted from the CFSRs. One of the key findings of the GAO study was the problem of measuring ICWA compliance and assisting improved compliance when there was no explicitly named oversight agency.

In addition to these overall challenges is the reality that most federal funds that could address the needs of children from tribes that come into contact with the child welfare system are not provided directly to tribal governments. This is especially significant in regard to Title IV-E foster care and adoption assistance, the two biggest sources of funding.

Legislative Recommendations

CWLA is especially pleased that this Subcommittee has taken the initiative and provided the leadership in taking a first but significant step in addressing some of these challenges with its drafting and passage of the Fostering Connection to Success Act (H.R. 6307.) In particular we appreciate the efforts of Chairman McDermott and Ranking Member Weller. This bipartisan legislation takes some critical steps by extending Title IV-E funds to kinship placements and to tribal governments. In addition the legislation would provide extended services to foster youth who are forced out of the system at an age before they are fully prepared to live independently. The bill also takes the important step

of extending the adoption incentives program with an added focus on those older children who remain in the system waiting to be adopted. There are also several other provision which can help address some of the challenges that contribute to the overrepresentation ir child welfare. We should not overlook the impact that adequate training for caseworkers, and access to important basic needs for children in care including education and health care can have on these challenges.

Once again CWLA commends the leadership of this Subcommittee and the House for crafting and passing a bill that is significant, bipartisan, and is paid for. We are encouraged by the scheduled action by the Senate Finance Committee to address their version of this legislation in the next few days. We hope that in the remaining weeks of this Congress agreement can be reached on this legislation.

In the next Congress we hope members will examine other areas of need. We need to look at ways that the entry points of the system can be improved upon. There are some innovations in the way some child welfare agencies are redesigning their protective services systems including the use of differential response. We also need to look at family group decision making and other approaches that seek to involve families and communities in some of these child welfare cases.

There is a great need to expand prevention, although it is challenging to define. One promising approach is home visitation programs. Congress must also look to ways to build and improve on the child welfare workforce. Again, Representative Weller and other members of the Subcommittee have assisted in this area by advancing H.R. 6307, which expands access to caseworker training, and it appears that Congress is about to allow loan forgiveness for some social workers—both needed improvements.

CWLA also hopes that members will examine ways we can increase adoptions in the foster care system, not just to address the increasing number of older children now waiting to be adopted but also to examine ways to increase the recruitment of minority adoptive parents, and to strengthen training in this area and to re-examine the Multi-Ethnic Placement Act (MEPA) and its impact in this area.

Conclusion

We hope Congress will complete the action that members of this Subcommittee and the House have initiated. In addition to legislation there are other avenues that must be pursued. The following major areas require further review, analysis, and action by public and private child welfare and social service administrators, staff, researchers, advocates, youth, families, and their communities. Specifically all parties need to:

- Examine the rates at which children of various ethnic groups are reported and/or substantiated as abused or neglected, and the types of maltreatment that are reported and/or substantiated for these groups;
- Examine the relationship between poverty, culture, individual racism, and institutional racism (within the system and in society as a whole);

- Addess the lack of resources, protective factors, and community-based supports as contributing factors;
- Review the decision making process, beginning with case referral and intake, and its effects on children of color and their families;
- Examine the path through the service system children of color follow;
- Take action to assure the availability and equitable provision of family preservation and support services;
- Examine the rate of placement of children of all cultural, racial, and ethnic communities in foster and formal kinship arrangements;
- Address the manner in and rate at which children of color exit the system; and
- Provide special focus on the overrepresentation of children and families of color at all stages of the child welfare process.

FOOTNOTES:

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Children's Defense Fund

Statement for the Record
Children's Defense Fund

Hearing on
Racial Disproportionality in Foster Care
Subcommittee on Income Security and Family Support
of the
Committee on Ways and Means
U.S. House of Representatives
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Submitted by:
MaryLee Allen
Director, Child Welfare and Mental Health
Children's Defense Fund
25 E Street, NW
Washington, DC
202-662-3573

25 E Street, NW
Washington, DC 20001
Tel: (202) 628-8787
Fax: (202) 662-3510
Email:
cdfinfo@childrensdefense.or
Internet:
www.childrensdefense.org

The Children's Defense Fund (CDF) thanks you for the opportunity to submit this written statement for the record of the July 31, 2008 Hearing on Racial Disproportionality in Foster Care held by the House Ways and Means Subcommittee on Income Security and Family Support.

The Children's Defense Fund's *Leave No Child Behind*® mission is to ensure every child a *Healthy Start*, a *Head Start*, a *Fair Start*, a *Safe Start* and a *Moral Start* in life and successful passage to adulthood with the help of caring families and communities. CDF provides a strong, effective voice for all children of America who cannot vote, lobby, or speak for themselves. CDF pays particular attention to the needs of poor and minority children and those with disabilities. CDF is a private non-profit organization and has never taken government funds.

CDF has a long history of advocating for better outcomes for vulnerable children and their families. We recently launched the Cradle to Prison Pipeline® Campaign, a national call to action to stop the funneling of tens of thousands of youth, predominantly minorities, down life paths that often lead to arrest, conviction, incarceration, and, in some cases, death. A Black boy born in 2001 has a 1 in 3 chance of going to prison in his lifetime; a Latino boy a 1 in 6 chance; and a White boy a 1 in 17 chance. Poverty is the largest driving force behind the Pipeline crisis, exacerbated by race. Black children are more than three times as likely as White children to be born into poverty and to be poor, and are almost four times as likely to live in extreme poverty.

The Pipeline dramatizes the racial disparities that pervade our child-serving systems, including child welfare, and put children of color at greater risk of entering the Pipeline and not escaping. To help to dismantle the Pipeline, our Nation needs to eliminate child poverty, ensure every child and pregnant woman access to affordable, seamless, comprehensive health and mental health coverage and services, make quality early childhood programs accessible to every child, ensure every child can read at grade level by fourth grade, guarantee quality education through high school graduation, protect children from abuse and neglect and connect them to caring permanent families, and stop criminalizing children at increasingly younger ages and shift the focus of the juvenile justice system from one of punishment to one of early intervention and rehabilitation. These priorities for children will help keep children safely out of the child welfare system and improve outcomes for those children who are at risk and do need the services that the system has to offer.

CDF's specific advocacy for reforms on behalf of children who are abused or neglected or at risk of maltreatment predates the passage of the Adoption Assistance and Child Welfare Act of 1980. For several decades, CDF staff have worked closely with Members of the Subcommittee to make improvements in many aspects of the child welfare system. An important set of protections for children at risk of placement or in foster care was established in 1980 and strengthened with the Adoption and Safe Families Act in 1997. Important, but far too limited, investments in preventive services have been put in place. Significant expansions occurred in adoption and supports for older youth who exit care at 18 without being returned home or finding other permanent homes. The additional improvements passed by the House of Representatives in June 2008, with the Subcommittee's leadership, when enacted in September, will represent major improvements through promoting permanent families for children through relative guardianship, adoption, and sibling connections, and for children and youth in foster care.

Though cumulatively these measures have led to some reductions in racial disproportionality and disparities in the child welfare system, major problems still exist for children of color. To ensure that all children benefit from improvements, the child welfare system must address continuing disproportionality and disparities faced by children and families of color who interact with the system.

The Problem of Racial Inequities

The U.S. Government Accountability Office (GAO) 2007 report, *African American Children in Foster Care*, requested by Ways and Means Committee Chairman Charles Rangel, documented the disproportionate number of African American children in foster care and the disparate decisions made for them at different points in the system. Not only do a significantly greater proportion of African American children enter and remain in foster care longer than children of other races and ethnicities, but, once placed, the disproportionality of African American children grows at each decision point in the child welfare process. Disparities exist too for American Indian children and for Hispanic children in some states.

- Both African American and American Indian children are in foster care at a rate that is double their representation in the general population. [1]
- According to the GAO Report, African American children are overrepresented in foster care in all 50 states and they are represented in foster care at 3, 4, or even 6 times their representation in the general state population in 16 states. [2]
- American Indian children are overrepresented in about half of the state, and, in a few states they are overrepresented at 6, 7, or 8 times their representation in the general population. [3]
- Hispanic children are also in foster care at double the rate in the general population in 4 states and are overrepresented in 15 additional states. [4]

The GAO findings confirmed research on racial disproportionality and disparities in child welfare undertaken by Dr. Robert B. Hill for the Casey-CSSP Alliance for Racial Equity in Child Welfare.[5] Multiple studies have found that while children of all races and ethnicities are equally likely to suffer abuse or neglect, minority children are more likely to be reported as victims of abuse and neglect. Once reported for abuse or neglect, African American families are more likely to be investigated. Even when controlling for other relevant factors, multiple studies have found that substantiation of abuse or neglect is more likely when the family being investigated is African American or Hispanic.[6] African American infants and toddlers are more likely than other children to be removed from their homes following accusations of abuse or neglect and are only half as likely to receive services.[7] Studies have also found that once removed, minority children spend more time in foster care. One national study found that white children were approximately four times more likely to return home than were African American children.[8] Another study conducted by Dr. Hill in King County, Washington (Seattle) of disproportionality at the county-level, found disproportionality rates increased at each decision point for all races and ethnicities examined (African American, American Indian, Asian/Pacific Islander, and Hispanic). Within each ethnicity, the rates of disproportionality increased from investigation to substantiation to placement into foster care.[9]

Exploring the Causes of the Racial Inequities

The General Accountability Office survey of state child welfare agencies and its own review of the research cited "a higher rate of poverty and challenges in accessing support services, as well as racial bias and difficulties in finding appropriate permanent homes," as the major factors resulting in the disproportionality identified.[10] About half the state child welfare administrators surveyed attributed the disproportionality to lack of family support and preventive services, including parenting skills and counseling, of substance abuse treatment, and of adequate housing. Twenty states cited the difficulties African American parents have in obtaining legal representation in court as contributing problems. Challenges in helping these children return home, often attributed to lack of services and treatment, or move to adoption, coupled with their greater likelihood of being with kin in foster care, were cited by a large number of states as impacting their length of stay and disproportionality.

Using Federal Policy to Address Racial Inequities

The Children's Defense Fund believes federal policies can help to address racial disproportionality and disparities in child welfare directly. They also can help to eliminate child poverty and ensure comprehensive health and mental health coverage to all 9.4 million uninsured children – key factors underlying racial disparities. Addressing disparities in education, housing and other basic supports to families also will help to address racial disparities in child welfare.

Federal policy can positively impact racial equity in child welfare in four important ways:

- Improving child welfare policies and practices to promote better child and family outcomes and racial equity;
- Improving the child welfare infrastructure (i.e. data, child and family service reviews, etc.) to increase knowledge and awareness about and reduce racial disproportionality and disparities.
- Engaging community stakeholders in child welfare improvements for children; and
- Promoting awareness of racial disparities and biases and the importance of racial equity in child welfare among policymakers, providers, advocates for children and families and the broader public.

In this statement, we will address how Congress can improve child welfare policies and practices to promote better child and family outcomes and racial equity. Improvements are needed in policies that promote prevention and early intervention, specialized treatment, new permanency options and post-permanency services for children, improvements in the child welfare workforce, and enhanced accountability. Here we focus specifically on pending child welfare improvements in some of these areas, but urge the Subcommittee in the next Congress to also make major improvements in child welfare financing to increase opportunities for prevention and early intervention, reunification and specialized treatment also needed to promote racial equity.

Attention to racial disparities and racial disproportionality must be a central part of broader child welfare reform efforts. We thus encourage the Subcommittee to host additional

hearings to explore more consciously and intentionally specific strategies for addressing racial disparities and racial disproportionality. Many of the state initiatives in place have resulted because state legislators have mandated collecting and assessing specific data, the convening of multiple stakeholders, and the crafting of solutions targeted on reducing racial disproportionality and disparities. Several examples follow:

- The Michigan Advisory Committee on the Overrepresentation of Children of Color brought together the Director of the Michigan Department of Human Services with representatives of the Judiciary, Department of Civil Rights, and other agencies, and the community. The Advisory Committee was established in response to a state legislative directive to convene a task force to study the disproportionate representation of children of color at each stage in the state's child welfare and juvenile justice systems. The group reported to the Legislature in March of 2006, and now the Michigan Department of Human Services, working with others, is seeking to reduce disproportionality by developing a long-term strategic plan focused on programs and reforms identified through research and self-review and using a Title IV-E waiver to focus on family strengthening and preservation and on expedited reunification.[11]

- In Texas, Senate Bill 6, which became law in 2005, required the Texas Department of Family and Protective Services (DFPS) to determine whether disproportionality existed in the state child welfare system and, if so, to submit a plan to remediate it. In January of 2006, after completing an analysis of their child welfare data by race and ethnicity, DFPS submitted a report to the legislature stating that disproportionality was indeed present and is now implementing their extensive plan for improvements.

- More recently, Washington's state legislature passed HB1472, which mandated a statewide focus on disproportionality. The Disproportionality Advisory Committee must identify where and how disproportionality and disparities are found in the child welfare system and present a plan by the end of 2008 to remediate them.

The GAO Report makes clear that the collection and analysis of data by race is a crucial first step in addressing racial disparity. CDF recommends that the Subcommittee explore and develop recommendations to require, collect and analyze data about racial disproportionality/disparities and use the data to inform decisions and practice, assess the movement of children in and out of the system and services provided, promote relevant training among staff and stakeholders, engage the diverse community in planning decision making and governance, examine the impact of existing protections and hold the system accountable.

Taking Steps Now to Address Racial Inequities

The Children's Defense Fund believes that the Subcommittee and the Congress have the opportunity this year, before the end of September, to impact still pervasive racial disproportionality and disparities in the child welfare system. We strongly support passage of the Fostering Connections to Success Act as an important step toward this goal. The Act responds directly to problems that have kept children, often children of color, in the child welfare system too long, denied them the basic support and specialized treatment they needed, and kept

them from moving to permanent families through relative guardianship or adoption. Below are the key provisions of the Act that can help to reduce racial inequities.

Supporting Children Being Raised by Relatives

Research and anecdotes have documented that children of color, particularly African American children, remain in foster care longer than other children because of the fact that they are living with relatives who may not feel adoption is appropriate and believe their only option to care for the children is continued foster care. Currently, relatives who have guardianship and want to care for children outside of foster care do not have the same opportunities for ongoing assistance, as do relatives or others who adopt children from foster care.

Subsidized Guardianship

The Fostering Connections to Success Act, for the first time in federal law, would offer federal support to all states that opt to offer subsidized guardianship as an alternative permanency option to help children exit foster care to live permanently with relative guardians. Currently 37 states and the District of Columbia offer such assistance, but often to only small numbers of children. The availability of federal support will help move more of these children out of care and into permanent families with relative guardians. In fact, the GAO, in its report, specifically called on Congress to amend federal law to offer states federal support to assist relative guardians.

The GAO's study and other research have recognized that guardianship often is a more appropriate response to cultural norms in African American, Hispanic, and American Indian cultures, many of which do not recognize the concept of termination of parental rights – a step required to go forward to adoption. Research has also found that children often do better in placements with relatives. They are as safe, if not safer, than children placed in non-relative foster homes. Children and youth placed with relatives experience fewer placements than those in non-relative homes, giving them greater stability both at home and in school. They also are more likely to be placed with their siblings and more likely to say that they feel they are part of the family. Recent research also has found that children placed with relatives are less likely to exhibit behavior problems.

Kinship Navigator Programs, Family-Group Decisionmaking, and Notice

Several of the kinship provisions in the Fostering Connections to Success Act also will support children of color living with relatives by keeping them with the relatives and out of foster care, and thereby reduce the number of children of color entering foster care. Relative caregivers report that one of their greatest challenges in raising children is getting accurate information about the benefits and services that are available to the children. The Family Connection grants in the Act will support states in establishing Kinship Navigator programs that will help link relatives with support groups, respite care programs, and other services.

Family group decisionmaking, also supported by the Family Connection grants, was recognized by the GAO as a successful strategy in reducing racial disproportionality in the states.

It allows states to ensure that families are engaged in the decision-making process from the beginning. This can help prevent removal when the family identifies alternative family placements, help ensure that children return home more promptly from care, and when that is not possible, help to identify another permanency option for the child or youth. Texas' experience with family group decision making has had a remedial effect on racial disproportionality, in addition to being good policy and practice. All families who participated in family group decisionmaking in Texas were more likely to have their children return home than families who received traditional services, but the benefits were larger for African American and Hispanic families. When families received traditional services, only 14 percent of African-American children and 13 percent of Hispanic children returned home; however, when the families participated in FGDM, 32 percent of African American children and 39 percent of Hispanic children returned home.[12]

The requirement in the Fostering Connections to Success Act that certain relatives be given notice when a child is placed in foster care also will increase the likelihood that children will be placed with relatives and kept out of foster care. Sometimes relatives do not know that a child has been taken into custody and do not get involved until the child has already been living with and bonded with foster parents. Providing notice to relatives immediately allows them to decide early on whether and to what extent they can be involved in caring for the child. Even when relatives cannot provide a home for the child, their involvement may help maintain connections that help ease the child's sense of loss. When the relative is able to care for the child, early notice can help minimize the number of moves a child has to make and, if the child cannot be returned to his birth parents, the early involvement of relatives can help the child find a permanent home more quickly. States have recognized the benefits of these early connections. More than half the states surveyed by GAO for its report had implemented policies calling for the diligent search of relatives who might be willing to provide permanent homes.

Keeping Siblings Together

The requirement in the Family Connections to Success Act that reasonable efforts be made to place siblings together in all placements unless it is contrary to the children's safety or well-being will also help to keep families together, and thus positively impact the children. Research has documented that the sibling bond is one of the most important and long-lasting bonds created in our lives, and it is especially important for children in foster care who often do not have other connections to family members.

Enhancing Adoption Incentives

The GAO report found that states are still struggling to find and recruit families for children of color, and as a result children of color wait in foster care for adoptive families. The majority of children waiting for adoption at the end of FY 2006 were children of color. In fact, race is one factor states may choose to use in determining that children have special needs and would benefit from adoption assistance. The Fostering Connections to Success Act reauthorizes the Adoption Incentive Program and also increases the incentives available to states that increase the numbers of children with special needs and older children being adopted. The additional incentive payments should help states find adoptive families for some of the children of color

awaiting adoptive families, particularly those who are older, and thus reduce the number of children of color who wait.

Improving Outcomes for Children and Youth in Foster Care

When it is necessary to place children of color in foster care, it is important to ensure that once in care they do not fall further behind. For children who may be facing the challenges of poverty and the risks that accompany it and also of separation from their families and familiar surroundings, it is important that steps be taken wherever possible to improve their outcomes while in care. The Fostering Connections to Success Act takes a number of steps to try to improve better outcomes for children and youth in foster care, and at the same time hopefully improving their opportunities for success when they leave care.

Increasing Supports and Protections for American Indian and Alaska Native Children

American Indian children are overrepresented in foster care at nearly twice their representation in the general population. These children make up from one quarter to more than one half of the foster care population in Alaska, Montana, and North Dakota. Minnesota, Nebraska, Oregon, South Dakota, Utah, and Washington also have large overrepresentations of American Indian children in their foster care populations.

Currently these children are eligible for federal support and protections under the Title IV-E Foster Care and Adoption Assistance Programs only if they are in Indian tribes that have tribal agreements with the states in which they are located. Currently, only 86 of the more than 500 federally-recognized tribes have such agreements. This means that many American Indian and Alaskan Native children have never benefited from the additional assistance and protections afforded through the Title IV-E Programs – requirements to make reasonable efforts to keep children out of care, place them in the least restrictive setting appropriate to their needs, and assure that they have case plans and periodic case reviews so they do not get stuck in foster care. They also are not eligible for federally supported foster care or adoption assistance payments or for independent living programs. It is estimated that tribal governments provide foster care to 30 to 40 percent of all American Indian and Alaskan Native children in care. These children being cared for by tribal governments, however, are not counted in the federal data sources because they are not placed by state child welfare agencies. The Fostering Connections to Success Act will help ensure long overdue protections for many of these children, including efforts to promote permanence for children through relative guardianship. This is particularly important as termination of parents' rights, a prerequisite for adoption, is often not consistent with tribal traditions.

Promoting Educational Stability

Research shows that, on average, each change in school placement for a child results in a loss of six months of educational progress. More than one-third of children in foster care have experienced four changes in school placement. The Fostering Connections to Success Act would require state child welfare agencies to improve educational stability for children in foster care, thus improving the experiences for many children of color. It would require them to coordinate

with local education agencies to ensure that children remain in the school they are enrolled in at the time of placement into foster care, unless that would not be in the child's best interests. If it is not, the state must ensure immediate enrollment in a new school with all of the educational records of the child provided to that new school. The Act also would increase federal funding opportunities to assist with education-related transportation costs to help children remain in their school of origin. In addition, it also requires states to provide assurances in their Title IV-E state plans that every child in foster care or who is receiving an adoption assistance or subsidized guardianship payment, who has attained the minimum age for compulsory school attendance under state law, is enrolled is a full-time elementary or secondary school student or has completed secondary school. Research demonstrates that youth in foster care are twice as likely to drop out of high school when compared to the rest of the population. Increasing their likelihood of high school graduation will help to promote better outcomes.

Extending Foster Care Beyond Age 17

Compared to youth in the general population, youth who have been in foster care are more likely to become homeless, unemployed or be incarcerated when they age out of care. They also are more likely to have physical, developmental, and mental health challenges. Unlike youth outside the child welfare system, most youth in foster care lose the only support system they know when they reach 18. Research by the Chapin Hall Center for Children at the University of Chicago has documented increased benefits to young people who stay in care longer. They are more likely to graduate from high school, pursue higher education, graduate from college, have higher incomes, and delay pregnancy. For the approximately 25,000 youth who age out of foster care each year, an option in the Fostering Connections to Success Act allows states to provide care and support to youth in foster care or in supervised independent living settings until the age of 19, 20, or 21. This will help to ensure that those young people who have not been able to find a permanent family will have the support they need for a smoother transition to adulthood.

Thank you for the Subcommittee's attention to racial disproportionality and disparities in foster care. Helping increase awareness of the problems of racial inequities and the steps and solutions that can be taken to address them will help improve outcomes for children of color and other children in the child welfare system. The Fostering Connections to Success Act is an important step in the right direction. We look forward to working with you to ensure it is enacted this year and even more importantly that it is fully implemented so that children and youth, particularly children and youth of color, truly benefit from its improvements. We also look forward to working with you in the 111th Congress to craft reforms that will address racial disproportionality and disparities directly by addressing a number of infrastructure concerns and will also promote long overdue child welfare financing improvements that are needed to enhance outcomes for children and families and increase racial equity in child welfare. [13]

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[1] Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services, *The AFCARS Report Preliminary FY 2006 Estimates as of January 2008* (Washington, DC: 2008). Available online at www.acf.dhhs.gov/programs/cb/stats_research/afcars/tar/report14.pdf. States were unable to determine the race/ethnicity of 3 percent of children in foster care.

[2] Government Accountability Office. GAO-07-816. African American Children in Foster Care: Additional HHS Assistance Needed to Help States Reduce the Proportion in Care. Appendix II.

[3] Government Accountability Office. GAO-07-816. African American Children in Foster Care: Additional HHS Assistance Needed to Help States Reduce the Proportion in Care. Appendix II.
[4] Government Accountability Office. GAO-07-816. African American Children in Foster Care: Additional HHS Assistance Needed to Help States Reduce the Proportion in Care. Appendix II.
[5] Robert B. Hill, Ph.D. *Synthesis of Research on Disproportionality in Child Welfare: An Update:* Casey-CSSP Alliance for Racial Equity in Child Welfare. October 2006.
[6] Robert B. Hill, Ph.D. *Synthesis of Research on Disproportionality in Child Welfare: An Update:* Casey-CSSP Alliance for Racial Equity in Child Welfare. October 2006.
[7] Stahmer, A.C. et al. (2005). Developmental and behavioral needs and service use for young children in child welfare. *Pediatrics, 116*(4), 891-900.
[8] Robert B. Hill, Ph.D. *Synthesis of Research on Disproportionality in Child Welfare: An Update:* Casey-CSSP Alliance for Racial Equity in Child Welfare. October 2006.
[9] Robert B. Hill, Ph.D. *An Analysis of Racial/Ethnic Disproportionality and Disparity at the national, State, and County Levels.* Casey-CSSP Alliance for Racial Equity in Child Welfare. 2007.
[10] United States Government Accountability Office, *African American Children in Foster Care: Additional HHS Assistance Needed to Help State Reduce the Proportion in Care.*" GAO-07-816. Available at www.gao.gov/cgi-bin/getrpt?GAO-07-816.
[11] Casey-CSSP Alliance for Racial Equity. *Places to Watch: Promising Practices to Address Racial Disproportionality in Child Welfare Services.* Center for the Study of Social Policy. Washington, D.C. December 2006.
[12] Texas Department of Family and Protective Services. *CFSR Statewide Assessment.* January 2008. Available at: http://www.dfps.state.tx.us/Documents/Child_Protection/pdf/2008-01-24_CFSR_Statewide_Assessment.pdf .

Statement of Darlene King

My name is Darlene King and I am providing my testimony for the Members of this Committee to hear the silent voices of families who have improperly lost their children to the child welfare system. The issue of Disproportionality in Foster Care is only a part of the problem.

I am community advocate who sits on the Building Community Partners Committee with Michigan Department of Human Services Family to Family Initiative

in Grand Rapids Michigan Kent County and Our minority community is targeted by zip codes 49507, 49506, 49504, for removal of our children. Falsified documents are generated to keep the children in the system longer and Termination of Parental Rights are massive. The limited services offered to families are only between 9 to 5 and makes it an obstacle to get the children back also extended family are never included.

These Contracting Agencies have no oversight or accountability therefore children remain in the system for years if they are not adopted The State of Michigan has a budget of $16,000 dollars for each adoption finalization that is given to the contracting agency which is why children remain in foster care it is profitable for the agency to intentionally keep the children in foster care, and for each foster care license for relative caregivers the agency receives $2,300 for each facilitated licensure.

The Office of Children's Obudsman, can only make policy recommendation that go nowhere and The Bureau of Adult and Children Licensing, give 6 month provisional licensures to the contracting agencies when a violation is substantiated and the contracting agency only are required to send in a correction action plan which is never implemented. Targeted Case Management Fund directs them to target populations which are minorities because they will qualify for special needs funds. There is no other way for these families to access services.

MCI Michigan Children's Institute is headed by one man Superintendent William J Johnson who is the guardian over the State of Michigan's State Wards and he is neither elected nor appointed as he is a civil servant yet he is the final decision-maker in adoption he knows nothing about the culture of families in minority communities because he does not meet with them. Relative placement is not implemented as it should be and Family Preservation is non existent

If you want to reduce the disproportionality in foster care stop taking the children, all you have to do is provide the services.

Statement of Elizabeth Bartholet

My name is Elizabeth Bartholet. I am a Professor of Law at Harvard Law School, and Faculty Director here of the Child Advocacy Program. I have taught and written about child welfare issues generally, and child maltreatment and foster care issues specifically, for more than two decades. I am the author of two books and many articles addressing these issues, including Nobody's Children: Abuse and Neglect, Foster Drift, and the Adoption Alternative (Beacon 1999). I have focused significant attention during this time on issues of race in the child welfare system, and have authored many articles on such issues, including a leading article on race matching and transracial adoption entitled Where Do Black Children Belong: The Politics of Race Matching in Adoption, 139 U. Penn. L. Rev. 1163 (1991). Selected publications are listed on my website at www.law.harvard.edu/faculty/bartholet.

I am now at work on a major article addressing the issue of Racial Disproportionality in the child welfare system, the topic of your hearing. I am troubled by the nature of the Advisory for this Hearing, as it appears to buy into ideas about the nature of Racial Disproportionality that I think are fundamentally flawed. I hope that the Subcommittee will take into account a full range of views on the issues.

There is no question but that African American children enter and remain in the foster care system in disproportionate numbers as compared to their percentage of the general population and as compared to children of some other races and ethnic backgrounds. I will refer to this as Racial Disproportionality. I share the Subcommittee's view that this represents some kind of problem. But the question is, *what kind of problem*.

There is a large and powerful group of advocates promoting the idea that Racial Disproportionality results from racially discriminatory decisionmaking in the child welfare system, and that the solution is to stop removing as many black children from their parents, and to do more to reunify those removed with their parents. I'll refer to this as the Racial Disproportionality Movement. This Movement bases its assumption about discrimination on the claim that black and white rates of child maltreatment are the same, and relies as the Subcommittee Advisory does on the National Incidence Studies for support of this claim. The problem is that this aspect of the NIS studies has been persuasively debunked by respected scholars, and there are many reasons to conclude that blacks have higher child maltreatment rates because as a group they are disproportionately associated with characteristics that have been generally agreed to be valid predictors for child maltreatment, including poverty, single parent status, and serious substance abuse.

Assuming that black children are being removed to foster care because of actual serious maltreatment rather than discriminatory decisionmaking, it would be dangerous for black children to pursue the Movement's goal of keeping more black children at home—it would put more children at risk of ongoing serious abuse and neglect.

This does not mean we should do nothing. Racial Disproportionality is a problem even if it is better for black children at risk of maltreatment at home to be removed to foster care. Black children should not be maltreated in the first place, and although foster care serves as a protective institution for those who are at risk at home, it is still true that children maltreated and then removed to foster care, will as a group not do especially well in the future.

But the solutions for this problem are very different than those proposed by the Racial Disproportionality Movement. The appropriate solutions are to focus more efforts and resources on up front child maltreatment prevention programs—programs such as Intensive Early Home Visitation which reach first-time pregnant women and give them the kind of supportive services that can prevent them from falling into the patterns that generate child maltreatment.

I hope that the Subcommittee will look into the Racial Disproportionality issue in depth, and not accept the simplistic analysis and related prescriptions for "reform" that will be pressed upon it at this Hearing, and that were uncritically adopted in the GAO July 2007 report addressing Racial Disproportionality.

I have attached hereto as requested my testimony on a related matter, in which I responded to the Donaldson Institute Report calling for amending the Multiethnic Placement Act. In this testimony I rebut the Donaldson Report's various claims, and I urge Congress to reject the call to amend MEPA.

Response to

Donaldson Institute Call for amendment of the Multiethnic Placement Act (MEPA) to Reinstate use of Race as a Placement Factor

CCAI Briefing

6/10/2008

Dirksen Senate Office Building

by Elizabeth Bartholet

Professor of Law and Faculty Director, Child Advocacy Program, Harvard Law School

I am here speaking on my own behalf, but I am also authorized to speak on behalf of the National Council on Adoption, the American Academy of Adoption Attorneys, the Center on Adoption Policy, and Harvard Law School's Child Advocacy Program, for which I serve as Faculty Director. We all join in urging you to resist any attempt to amend the Multiethnic Placement Act, an Act that took a hugely important step forward to protect black children from delay and denial of adoptive placement, an Act which the Department of Health and Human Services has only recently begun to vigorously enforce, an Act which has begun to make an important difference for children.

I have devoted a good deal of my professional life for more than two decades to studying issues of transracial adoption. I wrote what is generally considered the leading law review article, in which I dealt extensively with the social science related to transracial adoption, and also with the evidence as to the impact on black children of pre-MEPA race-matching policies, policies which resulted in holding children in foster care for months, years, and often their entire childhood, rather than placing them in other-race homes.[1] I have written many articles and book chapters since, bringing that research up to date.[2]

It is that research, and that evidence, which I have followed over the years to date, that led me to the position that we needed MEPA in exactly the form we have

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[1] "Where do Black Children Belong? The Politics of Race Matching in Adoption," 139 U. Pa. L. Rev. 1163 (1991).

[2] "Commentary: Cultural Stereotypes Can and Do Die: It's Time to Move on With Transracial Adoption," 34 J. Am. Acad. Psychiatry Law 315(2006); "The Challenge of Children's Rights Advocacy: Problems and Progress in the Area of Child Abuse and Neglect," 3 Whittier J. Child & Fam. Advoc. 3 (2004); NOBODY'S CHILDREN: ABUSE AND NEGLECT, FOSTER DRIFT, AND THE ADOPTION ALTERNATIVE (Beacon Press, 1999); "Private Race Preferences in Family Formation," 107 Yale L.J. 2351 (1998); FAMILY BONDS: ADOPTION, INFERTILITY, AND THE NEW WORLD OF CHILD PRODUCTION (Beacon Press, 1999), originally published as FAMILY BONDS: ADOPTION & THE POLITICS OF PARENTING (Houghton Mifflin 1993).

it today, in order to protect black children from the devastating damage that delay in adoptive placement causes.

As a result I worked closely with Senator Metzenbaum and those in Congress supporting him in the struggle to get MEPA passed in its current form. I'm very familiar with the goals of the MEPA legislation, both the 1994 version, which is the legal regime that the Donaldson Institute wants us to return to, and the reasons that Sen Metzenbaum and others felt it essential in 1996 to amend MEPA to give us the law that we have today.

I have also testified at the Congressional hearing held to investigate problems with MEPA enforcement in the early years. And this past fall I testified at the hearing held by the U.S. Civil Rights Commission on the very same topic raised by the Donaldson Inst. Report—whether there is any need to amend MEPA. Notably the CRC has not called to date for any legislation amending MEPA, and I think, based on the tone of that hearing, it is exceedingly unlikely it will. I urge you if interested in the CRC's views to consult with the Chair at that hearing, Abigail Thernstrom.

The Donaldson Institute Report at issue in today's briefing (5/27/08) calls for a change in MEPA so that it would again allow what MEPA was designed to prohibit the use of race to delay or deny adoptive placement. Congress should ignore this Report, and I assume it will have the sense to do so. The requested amendment to MEPA would return us to a regime in which social workers try to "match" foster children waiting for homes with same-race parents, delaying and denying adoptive placement as occurred pre-MEPA.

By authorizing state officials to use race to decide important issues regarding family formation, this amendment would fly in the face of our Nation's body of civil rights law, and almost surely be found unconstitutional by the courts. Federal and state civil rights laws uniformly forbid any use of race as a factor in official decision-making. MEPA in its current form is consistent with that great body of law. MEPA regulations make clear that race can only be used in truly exceptional cases and consistent with what is known in constitutional law as the "strict scrutiny" standard. This is exactly what is called for to satisfy the U.S. Constitution, which forbids the use of race by official decisionmakers except in an extraordinarily small category of cases.

A great deal of work and thought went into the development of MEPA, and into the regulations and guidelines issued by the Department of Health and Human Services interpreting and applying MEPA. Similar work and thought has gone into implementing MEPA throughout the land, with the first major enforcement decisions issued in 2003 and 2005.[3] We now finally have civil rights law governing foster care and adoption that is consistent with the rest of the nation's civil rights law and with the Federal Constitution. The burden of proof is on anyone who at this stage, when we are finally beginning to reap the rewards of this process, wants to roll the law back. The Donaldson Report has done nothing to meet that burden.

The Donaldson Report consists of little more than a series of false and misleading claims. First is that the Report is a "research-based" publication, and that the Institute is "the pre-eminent research" organization in the field. The Donaldson Institute is well-known in the adoption area as an advocacy organization committed to the idea that birth and racial heritage are of central importance, and this Report is an advocacy document, endorsed by organizations with well-known hostility to MEPA. There is nothing wrong with advocacy. But nobody should be deceived that this Report contains a fair-minded, unbiased assessment of the facts or the social science research.

A second Donaldson claim is that MEPA is not working to enable increased numbers of black children to find adoptive homes, as it was supposed to. The fact is that transracial adoptions have increased post-MEPA, although not yet as much as we might hope. But it takes time for laws to have an impact, and it is only recently that the Federal Government began serious implementation efforts, issuing its first enforcement decision in 2003, with that decision not upheld on administrative appeal until 2006.[4] In any event, there is certainly no reason to think that recreating a barrier to transracial adoption as the Donaldson Report calls for will do anything other than make it harder to find homes for waiting children. The fact is that more than half the kids in foster care are kids of color, and the overwhelming majority of the population of prospective parents is not color-matched for these kids. Recre-

[3] These decisions appear on my website at http://www.law.harvard.edu/faculty/bartholet/ under Adoption Resources, MEPA Decisions.

[4] Id.

ating race as a reason to disqualify prospective parents, and deter them from even applying, is not the way to find more homes for the waiting children.

A third claim is that MEPA harms black children by preventing social workers from adequately preparing transracial adoptive parents to raise black children. However MEPA allows such preparation as any fair reading of the law and the HHS Guidelines makes clear. Many many agencies throughout the land are currently engaged in educating and socializing prospective parents regarding racial issues pursuant to this law and these Guidelines. Nothing in the current law requires that social workers operate on a race-blind or color-blind basis in helping prospective parents understand the challenges involved in transracial parenting, or in preparing prospective parents to meet those challenges, or in enabling prospective parents to decide if they are capable of appropriately parenting other-race children. Nobody that I know in the large group of those who support the current MEPA regime do this because they believe in an entirely "race-blind" system or because they don't think race matters. Of course race matters, and of course social workers should be free to talk about racial issues as they educate and prepare prospective parents.

What MEPA forbids is segregating the transracial from other prospective adopters, and subjecting transracial prospective parents to a pass-fail racial attitude test, a test in which they can be disqualified if they don't give the state-determined "right" answer to complex issues about how to address children's racial heritage. It also forbids otherwise using race as the basis for eliminating prospective parents. History tells us what would happen if social workers were again empowered to use race in making adoptive decisions, even if they were to be authorized only to use race as "a factor," as the Report argues.

I'll mention just two pieces of that history. First, the fact is that from the seventies until MEPA's passage the Federal Constitutional rule was that race could be "a factor" but not the determinative factor in adoptive decisionmaking, the same rule the Donaldson Report calls for, and in the name of that rule state agencies engaged in rigid race-matching, often locking black children into foster care for their entire childhood rather than placing them across racial lines. The 1994 version of MEPA forbid the use race to delay or deny placement, but permitted the use of race as "a factor." Senator Metzenbaum came out of retirement to help pass the 1996 amendments to MEPA because he and others had concluded based on seeing how the 1994 MEPA was working, that it was *not* working, that allowing social workers to use race as "a factor" meant that they were continuing to use it systematically to delay and deny placement, and accordingly the 1996 amendment changed the law to forbid social workers from any use of race as a basis for decisionmaking.

The second bit of history I'll mention are the cases in Ohio and South Carolina that triggered the Dept. of HHS's first two MEPA enforcement decisions. I urge all who might even contemplate the idea of following the Donaldson recommendation to amend MEPA to read these decisions for themselves. These decisions show in horrifying detail how social workers who thought they had the power to use race as "a factor" in screening prospective transracial parents used that power. The decisions describe case after case in which black foster care children with serious disabilities were denied homes with eager transracial adoptive parents based on decisions that the parents had the wrong friends, or the wrong paintings on their walls, or went to the wrong church, or lived in the wrong neighborhood, with the children then relegated to waiting in foster care yet longer for that needed permanent home.

A fourth Donaldson claim is that there is new research demonstrating, in contrast to prior research, that transracial adoptees have "problems." The fact is that the entire body of good social science still provides no evidence that children suffer in any way by being placed in a transracial rather than a same-race home, and it provides lots of evidence that children suffer by being delayed in finding permanent homes, as they are when we reduce the number of eligible homes by using race as a placement factor. The alleged "new and different" research relied on in the Report shows only that different parents may have different parenting styles, and that different parenting styles may have an impact on children's attitudes including some of their ideas about racial matters. This is hardly surprising or new, and it says nothing about whether children are better or worse off by virtue of transracial as compared to same-race parenting. Indeed despite misleading claims in the Report's Executive Summary, the relevant section in the body of the Report concedes that the research does "not provide sufficient basis for reaching conclusions about the level of problems experienced by Black children in foster care who are adopted transracially compared to those adopted by Black families." (P. 29)

The Donaldson Report also expresses concern that there has not been enough recruitment of prospective parents of color so that their numbers would match the kids of color in the foster care system. The fact is that such recruitment has gone on for decades, with the result that black Americans adopt at the same or higher

rates as whites, which is surprising given the socio-economics of race and the fact that it is usually the relatively more privileged who feel capable of stepping forward to do the volunteer parenting that adoption represents. In any event, MEPA in its current form already provides for the kind of recruitment that the Report calls for, so there is no need to amend MEPA in order to enable such recruitment.

The reality is that most of the children needing permanent homes in this country and in the larger world are children of color, while most of the people in a position to step forward to adopt are white. The additional reality revealed by the research on transracial adoptive families is that love works across color lines. If we want children to have the permanent homes they desperately need, we must recognize these realities. I urge the CCAI and Congress to reject these calls to move backward in time, and instead to embrace MEPA in its current form.

ELIZABETH BARTHOLET

Education:

J.D. magna cum laude, Harvard Law School,1965; Harvard Law Review, 1963–65

B.A. cum laude in English Literature, Radcliffe College,1962

Employment:

Harvard Law School, Cambridge, MA, Professor of Law, 1983-present

Morris Wasserstein Public Interest Professor of Law, 1996-present

Faculty Director, Child Advocacy Program, 2004-present

Assistant Professor of Law, 1977–83

Founding Director and President, Legal Action Center, New York, NY, 1973–77

Counsel, Vera Institute of Justice, New York, NY, 1972–73

Staff Attorney, NAACP Legal Defense and Educational Fund, Inc., New York, NY, 1968–72

Staff Counsel, President's Comm'n on Law Enforcement & Admin. of Justice, Washington, DC, 1966–67

Selected Committee and Board Memberships:

Harvard Embryonic Stem Cell Research Oversight (ESCRO) Committee, 2007-present

Legal Action Center: Board of Directors, 1977-present; Vice-Chair of the Board, 1998-present

American Academy of Adoption Attorneys, Honorary Membership, 1992-present

Boston Fertility & Gynecology Association, IVF Ethics Committee, 1991-present

U.S. State Department Advisory Committee on Intercountry Adoption, 1990–2000

Brigham and Women's Hospital, Assisted Reproductive Technology Ethics Committee, 1990-present

NAACP Legal Defense & Educational Fund, Inc., New England Committee, 1994–98

Selection Committee for Harvard University Nieman Fellowship Program, 1996–97

American Association of University Professors, Committee A on Academic Freedom and Tenure, 1990–93

Society of American Law Teachers, Board of Directors, 1977–89

Civil Rights Reviewing Authority of the United States Department of Education, 1979–81

Board of Overseers of Harvard College, 1973–77

Executive Committee of the Association of the Bar of the City of New York, 1973–77

Overseers' Committee to Visit Harvard Law School, 1971–77

Bar Memberships:

Commonwealth of Massachusetts, 1978-present

United States Supreme Court, 1969-present

District of Columbia, 1967–99

State of New York, 1965–98

Arbitration and Mediation Associations and Panels:

American Arbitration Association (AAA)

Labor Panel, 1980-present

Commercial Panel, 1995-present

Massachusetts Commission Against Discrimination, Roster of Mediators, 1998–2002

American Postal Workers Union and U.S. Postal Service, Regular Arbitration Panels, 1988–1999

Federal Mediation and Conciliation Service, Roster of Arbitrators, 1991-present

Mediation Research & Education Project, Inc., Mediation Panel, 1995-present

JAMS, Alternative Dispute Resolution Panel, 1997–2004

Selected Publications:

"International Adoption: The Human Rights Issues," forthcoming chapter in Michelle Goodwin, ed., BABY MARKETS, (Cambridge Univ. Press 2008)

"International Adoption: The Child's Story," 24 Ga. St. U. L. Rev. 333 (2008)

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"International Adoption," chapter in CHILDREN AND YOUTH IN ADOPTION, ORPHANAGES, AND FOSTER CARE, ed., Lori Askeland, (Greenwood Publishing Group, Inc. 2005)

"Guiding Principles for Picking Parents," 27 Harv. Women's L. J. 323 (2004); also published in a slightly revised form as chapter in GENETIC TIES AND THE FAMILY, Rothstein et al, ed. (Johns Hopkins Unviersity Press 2005).

"The Challenge of Children's Rights Advocacy: Problems and Progress in the Area of Child Abuse and Neglect," 3 Whittier J. Child & Fam. Advoc. 3 (2004)

Book Review of Rachel F. Moran's "Interracial Intimacy: The Regulation of Race and Romance," 33 Journal of Interdisciplinary History 320 (2002)

Reply, "Whose Children? A Response to Professor Guggenheim," 113 Harv. L. Rev.1999 (2000)

"Taking Adoption Seriously: Radical Revolution or Modest Revisionism?," 28 Cap. U.L. Rev. 77 (1999)

NOBODY'S CHILDREN: ABUSE AND NEGLECT, FOSTER DRIFT, AND THE ADOPTION ALTERNATIVE (Beacon Press, 1999)

FAMILY BONDS: ADOPTION, INFERTILITY, AND THE NEW WORLD OF CHILD PRODUCTION (Beacon Press, 1999), originally published as FAMILY BONDS: ADOPTION & THE POLITICS OF PARENTING (Houghton Mifflin 1993)

"Reporting on Child Welfare and Adoption Policies," 53 Nieman Reports 74 (1999)

"Private Race Preferences in Family Formation," 107 Yale L.J. 2351 (1998)

"International Adoption: Propriety, Prospects and Pragmatics," 13 J. Am. Acad. Matrim. Law
181 (1996)

"What's Wrong with Adoption Law?," 4 The International Journal of Children's Rights 263 (1996)

"Debate: Best Interests of the Child?," with Nerys Patterson, Prospect, no. 11, 18–20 (Aug./Sept. 1996)

"Beyond Biology: The Politics of Adoption & Reproduction," 2 Duke J. Gender L. & Pol'y 5 (1995)

"Race Separatism in the Family: More on the Transracial Adoption Debate," 2 Duke J. Gender L. & Pol'y 99 (1995), reprinted as "Debate 15: Should Transracial Adoptions Be Allowed?," Controversial Issues in Social Policy, Howard J. Karger et al, 2nd Ed., 220–27 (Pearson Education, 2003)

"Adoption Rights and Reproductive Wrongs," in POWER & DECISION: THE SOCIAL CONTROL OF REPRODUCTION 177–203 (Harvard Press, 1994)

Articles based in part on FAMILY BONDS: "Blood Knots," *American Prospect* 48–57 (Fall 1993);

"Family Matters," *Vogue* 102–06 (Nov. 1993); "What's Wrong with Adoption Law," *Trial* 18–23 (Winter 1994)

"In Vitro Fertilization: The Construction of Infertility and of Parenting," in ISSUES IN REPRODUCTIVE TECHNOLOGY I, 253–60, Holmes, ed. (Garland Press, 1992, paperback ed. New York Univ. Press, 1994).

"International Adoption: Current Status and Future Prospects," in 3 *The Future of Children* No.1, 89–103 (Center for the Future of Children, Spring 1993

"Parenting Options For The Infertile," in Frug, WOMEN AND THE LAW 523–30 (Foundation Press, 1992)

Book Review of Cheri Register's ARE THOSE KIDS YOURS?, 33 Harv. Int'l. L. J. 649–53 (Spring 1992)

"Where Do Black Children Belong? The Politics of Race Matching in Adoption," 139 U. Pa. L. Rev. 1163 (1991)

International Adoption: Overview,“ chapter 10 in ADOPTION LAW AND PRACTICE (Matthew Bender 1988, Supp. 1997)

“Proof of Discriminatory Intent Under Title VII,” 70 Cal. L. Rev. 5 (1982)

“Application of Title VII to Jobs in High Places,” 95 Harv. L. Rev. 945 (1982)

Consulting and Advisory Arrangements:

Project Consultant to The Hastings Center, Reprogenetics Project, resulting in related report entitled “Reprogenetics and Public Policy: Reflections and Recommendations,” by Parens and Knowles, Hastings Center Report Special Supplement (July-August, 2003).

Selected Honors and Awards:

Henry J. Miller Distinguished Lecture Series at Georgia State University, 2007

Sullivan Lecture at Capital University Law School, 1999

Massachusetts Appleseed Center, Award for Advocacy on Behalf of Foster Children, 1998

Radcliffe College Alumnae Recognition Award, 1997

Morris Wasserstein Public Interest Chair at Harvard Law School, 1996

Open Door Society, Friends of Adoption Award, 1994

Catholic Adoptive Parents Association, Media Achievement Award, 1994

Adoptive Parents Committee, Friends of Adoption Award for Adoption Literature, 1993

Statement of Joe Salmonese

Written Statement of Joe Solmonese President Human Rights Campaign to the Subcommittee on Income Security and Family Support

On behalf of the Human Rights Campaign (HRC), America’s largest civil rights organization working to achieve gay, lesbian, bisexual and transgender (GLBT) equality and our over 700,000 members and supporters nationwide, I submit this statement about the barriers which often prevent prospective gay, lesbian, bisexual, and transgender individuals or families from becoming foster or adoptive parents.

In an effort to increase the number of permanent families for children in foster care and to maximize efforts to identify relatives who can become the legal guardian for children in the foster care system, we must ensure the removal of barriers faced by prospective gay, lesbian, bisexual and transgender foster/adoptive parents and guardians. We know from a recent study published by the Williams Institute at UCLA that two million GLB adults report an interest in adopting a child or children in the future. This sample includes people from all racial and ethnic categories, and suggests that there is a potential pool of African-American and Latino GLBT parents, both single and couples, who would strongly consider adopting from foster care if they were encouraged to do so.

Recently, the issue of whether same-sex couples should be able to adopt was again in the headlines. A presidential candidate stated that he believed that only traditional “two parent” families should adopt, even in light of the thousands of children and youth still waiting for what they deserve—a permanent family. Such a position is nothing more than an opinion based on personal beliefs, and does not reflect the myriad of facts and findings from over 30 years of peer-reviewed research concluding that children raised by gay and lesbian parents do just fine compared to those raised by heterosexual parents, nor is it the opinion held by the leading national child health and welfare organizations, including the Child Welfare League of America, the American Academy of Pediatrics, North American Council on Adoptable Children, and the Evan B. Donaldson Adoption Institute, all of which have favorable positions on adoption by gays and lesbians. A personal opinion should never stand in the way of placing children in a loving family, and it is irresponsible to put up barriers when there are thousands of GLBT individuals who are ready, willing, and qualified to provide love and support to these children.

Even though most recent attempts at the state level to ban or restrict foster and adoptive parenting by gay and lesbian parents have failed, GLBT people continue to experience discrimination in the adoption process. The discrimination may be blatant, such as laws or policies that restrict or prohibit adoption by lesbian and gay people (Florida, Utah, Mississippi laws and religiously affiliated agencies that have written policies which forbid placement of children with GLBT adults), or a more subtle form of rejection by agencies that will accept applications from GLBT individuals and same-sex couples but has no intention of placing “certain children” with this population and often treats them as a family of “last resort.” These negative

experiences keep many loving, qualified adults from taking their first step toward foster/adoptive parenting. Research shows that "word of mouth" is the most effective recruitment tool, and in the GLBT community the "word of mouth" all too often is that we will be held to higher standards, more closely scrutinized, and will wait longer for placement of a child. For GLBT people of color, the dual stigma of being gay/lesbian/bisexual/transgender AND a person of color often generates more anxiety about whether and if one can expect to be treated with respect, dignity and viewed as a viable resource for a child in need of a permanent family.

In addition to the potential pool of foster/adoptive parents who are GLBT people of color, there are missed opportunities within the "relative pool" of some children in foster care. When social workers engage in exploring all options for keeping a child in their family of origin, there may be relatives who are GLBT, and because of that are not considered as viable resource, either by the social worker or by other family members who do not approve of or believe in placing children with GLBT parents. When a social worker is doing this "case mining," it is imperative to ask about all relatives, including those who might be GLBT, regardless of what opinion a family member might have about their ability to be a parent/guardian, or the perceived "closeness" to the family of origin.

Our recommendations for increasing the number of potential families for children in foster care include: non-discrimination categories be expanded to include sexual orientation/gender identity; training and education for recruiters and other agency staff include information about working with the GLBT community; recruitment efforts that target communities of color be adapted/expanded to specifically reach GLBT-identified individuals/couples within those communities.

On behalf of the Human Rights Campaign, I thank you for holding this important hearing and for providing the opportunity to submit testimony demonstrating how removing barriers to qualified potential GLBT parents can help address the challenges facing our Nation's foster care system.July 31, 2008, Statement for the Record, Washington Health Policy Coalition, Statement

Statement of Washington Health Policy Coalition

Cover

The leadership of the National African American Drug Policy Coalition and its affiliate Washington Healthcare Empowerment Coalition (WHEC) hereby respectfully submit as testimony in support of the evidence-based practice of the Kinship Care Placement Option and further suggest to mainstream into the Child and Family Services Agency placement protocols. Our primary concern is the lack of practice and no attempt to place legacy CFSA wards with kin therefore remaining in foster care and "aging-out" to the streets of the United States of America.

Introduction

Washington Healthcare Empowerment Coalition (WHEC) is an affiliate of the National African American Drug Policy Coalition (NAAPDC) organized exclusively for charitable, scientific and educational purposes; more specifically to advocate, identify and secure resources to ensure access to healthcare, mental health, substance abuse treatment and supportive services to the residents and community of the District of Columbia. Inasmuch, the District of Columbia like other cities throughout the United States is challenged with keeping our children safe and in the least restrictive family environment. These service systems struggle daily to ensure that our children's families are secure and services are appropriate and effective in meeting their needs. It is reported that while some children become safer and their families grow stronger in the child welfare system, others receive inadequate treatment, resulting in outcomes for children that fall short of the desired goals of safety, permanence, and well-being (Robert Hill, 2005). The Child Welfare system/services was initiated to ensure the safety of our children and to provide services and advocacy to ensure that these young folks will grow up to be productive citizens of our communities. Casey-CSSP Alliance for Racial Equity in the Child Welfare System: Synthesis of Research on Disproportionality in Child Welfare (2006) espouse that 60 percent of our nation's children who live in foster care are children of color; that while under state mandated care they suffer far worse outcomes in terms of physical and mental health, educational performance, and access to basic services and resources despite evidence that parents of color are no more likely than white parents to abuse or neglect their children. Albeit, the literature of disproportionate representation of children of color in the child welfare system has been documented for dec-

ades; that is, the number of minority children served versus the number of children occurring in the population show marked differences and disparities in treatment and services. "Hill (2005) further notes that more than half of the 500,000 children in foster care on any day in America come from ethnic minority families even though children from minority communities make up far less than half of the children in this Country's child welfare system."

Literature Review

The words used to describe differences among children and families of different races are "disproportionality" and "disparity". Hill (2007) gives the following definitions: 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 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 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 placement, and exit), treatment, services, or resources. Research shows that children of color in foster care and their families are treated differently from and often not as well as, white children and their families in the system. For example, fewer African American children receive mental health services even though the identified need for this type of service may be as great (or greater) for African Americans as for other racial or ethnic groups. It should be noted that when children and their families are met by the child welfare system they are confronted with the advent of decisions made by professionals including but not limited to caseworkers, supervisors, agency administrators, legal professionals, school personnel, and policy makers. At placement from the home many previous decisions are made by these professionals to ensure that the child is being placed in a secure environment but also their track through the child welfare system. Paxson, (2000) indicated that the decisions that researchers examine include: The decision to make a report of potential child abuse or neglect to a hotline call; The decision to accept or not a report made to the hotline for investigation (accepted report); The decision to indicate/initiate a report following investigation (indication of substantiation); The decision of placement in foster care; The decision of exiting from care; and The decision of return to care (i.e. reentry). Paxson (2000) notes that many studies have looked at whether a child's or family's race influences the decisions professionals make at these stages; while some earlier studies have shown conflicting results that may have been due to study design, most of the larger, national level studies and more recent research show that race is related to professional's decisionmaking at almost every stage of the process. As a child move through the system decisions made by "professionals" regarding care in a wide range of services become paramount in the child becoming a productive citizen in our society. Hill (2007) notes that "Numerous studies have found racial disparities in services to people of color in a wide range of fields (Institute of Medicine, 2002; Krieger 2003; U.S. Children's Bureau, 1997; U.S. Surgeon General, 2001; Van Ryn & Fu, 2003; Williams, Neighbors, & Jackson, 2003). Research studies in child welfare have revealed racial disparities regarding the following: fewer and lower quality services, less access to drug treatment services, and higher placement in detention or correctional facilities (Courtney, Barth, Berrick, et. al., 1996; Everett, Chipunga, & Leashore, 1991; Fein, Maluccio, & Kluger, 1990; Stenho, 1990). As a result these individuals often are lost in an ineffective system. Concomitant to which these individuals find themselves entrenched in situations that include but not limited to homelessness, chronic medical conditions such as HIV/AIDS, poverty, lack of employability, non-medical care, profound feelings of despair and hopelessness and related criminal activity. Saunders, Nelson, and Landsmen (1993) found that child welfare system was less responsive to the needs of black families than white families in (a) delaying intervention until their problems were perceived as chronic and (b) failing to address the most processing problems, such as poverty, ill health, inadequate housing and unsafe neighborhoods. The notion of maintaining the family intactness and reunification has remained an important ingredient in foster care services; these intervention techniques are not utilizing a means to reunite the family. The notion of Kinship Care has been a part of the African American family for decades. Services to kin families have been another example of racial disparities in service delivery in child welfare (Berrick, Barth, & Needell, 1994). While "informal adoption" or the rearing of children by extended family members has been a cultural trait of blacks for generations, it was not until the late 1980's that the term "kinship care" was coined to denote families in which relatives raised their kin within the child welfare system (Geen, 2003; Hill 1977). Black and Hispanic children are about

twice a likely as white children to be placed with kin (U.S. Children's Bureau, 1997). With the advent of crack cocaine and HIV/AIDS in the inner cities in the 1980's the number of children placed with relatives steadily rose. Between 1986 and 2003, for example, the proportion of foster children living with kin went from 18 percent to 23 percent (HIll, 2007). In many large cities today, most foster children are living with kin (Barbell & Freundlich, 2001). Research has revealed that despite their disadvantaged economic status, kin caregivers receive fewer services and benefits and lower financial assistance than non-related caregivers receive fewer services and benefits, and lower financial assistance than non-related caregivers (Alstein & McRoy, 2000; Chipungu, Everett, Verdick, & Jones, 1998; Gennaro, York, & Dunphy, 1998). Many kinship care families do not receive important government benefits: 72 percent receive no welfare benefits, about half (47 percent) receive no Medicaid support, and 40 percent receive no food stamps (Ehrie, Geen, & Clark, 2001). While some kinship care families do receive full foster care payments, many do not and instead rely on lower TANF (formerly AFDC) payments, while non—relative foster families receive higher boarder home stipends; (Hill, 2007). In addition, research studies have also found that kin caregivers are less likely than non—kin foster parents to receive foster parent training, respite care, educational or mental health assessment, individual or group counseling, or tutoring for their children; this may be due in part to societal expectations that family members should not be paid or should be paid less for caring for their family members because of "filial obligations" (Schorr, 1980). It is noted that Kin placements may contribute to longer stays for children for children in their care (Courtney, 1994; Iglehart, 1994; Scannapico, Hegar, & McAlpine, 1997; Wulczyn & George, 1992); also children placed with non-relatives are three times more likely to be moved to different homes than children in kinship care (Geen, 2003). Kinship care is also an important cultural strength for family preservation and continuity until biological parents are able to resume primary responsibility for their children; moreover extended family networks have served as a protective factor in mediating child abuse and neglect among black families (Cazenave & Straus, 1979; Gould, 1991; Hill, 1999; McPhatter, 1997). It is further inferred that children when placed with extended families are less likely to be involved with criminal behavior, and less likely to be in and out of treatment. Hill (2007) notes that a comprehensive review of child welfare research concludes that there is "a pattern of inequity, if not discrimination, based on race and ethnicity in the provision of child welfare services". This is seen when extended family members are denied custody of family members due to economic circumstances and the children are sent to "stay" in foster homes. Services to low income children and families in related fields can make more and important contributions to reducing the disproportionate representation of minorities in child welfare. Increasing funding to Kinship Care is an important catalyst in the longevity of children and family cohesiveness to ensure a sense of family, unity, and the advent of reunification with the biological family members. Inasmuch the following service needs and recommendations are being made:

Service Needs & Recommendations

Child Welfare Agencies to ensure equal opportunity for Kinship Care across all cultures if the extended family demonstrates a desire to accept children family members in their care; 2. Child Welfare Agencies work with other local government agencies, i.e. housing agencies to secure funds and/or subsidies to afford housing for Kinship Care; 3. Child Welfare Agencies work with local government agencies and/or community based or faith based organizations to assist in Kinship Care in providing counseling and other adjunct supportive services to ensure the longevity of child stay with extended family members; 4. Child Welfare Agencies work with public welfare as a means of additional funding; i.e. Medicaid, TANF, and other financial sources to ensure a financial solvency for Kinship Care; 5. Child Welfare Agencies begin to develop a system that embraces, enhances and promotes parent engagement/enhancement opportunities for our youth; Conclusion Thus, we recommend increase funding and increase services to Kinship Caretakers to reduce the number of African American children being placed in Foster Care and support efforts to move in this direction aggressively to accomplish this objective. Respectfully, Judge Arthur L. Burnett, Sr., National Executive Director National African American Drug Policy Coalition (NAADPC) Author: Dr. Irvin R. Barnes, WHEC Editor: Katrina A. Wilkins, WHEC REFERENCES Bardell, K. & Freundlich, M. (2001) Foster Care today. Washington, DC: Case Family. Programs. Barth, R. (1997). Family reunification. Child Welfare Research Review, 2: 109–122 Berrick, J., Barth, R., & Needell, B. (1994) A comparison of kinship foster homes and foster family homes. Children and Youth Service Review, 16 (1/2): 33–63 Cazenave, N. & Straus, M, (1979). Race, class and network embeddedness and family violence. Journal of Com-

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