

Toward a Community-Based Approach to Racial Disproportionality

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A recent report prepared by sociologist Robert Hill (2004) documents extremely high levels of foster care placement of African-American and Native American children in several states. For example, in Washington State, 10% of all Native American children are in foster care. Figures like this are disturbing for any community that experiences the impact of state intervention in such a large share of its families.

The community impact of state child protection, however, is virtually invisible in the legal, sociological, and social work literature on the child welfare system as well as in research on the importance of communities in child development and family functioning (Roberts, 2005). Efforts to study and eliminate racial disproportionality in the child welfare system have also failed to address this community dimension. This essay explores a community-based approach to child welfare theory, policy, and practice, and its relationship to racial disproportionality, and concludes with examining the important role that Family Group Decision Making (FGDM) can continue to play in a community-based approach.

Community-based child welfare research and practice

It is now commonly recognized that communities affect children’s development, well-being, and life chances. The traditional African adage, “It takes a village to raise a child,” popularized by Hillary Clinton’s best-selling book, has become well-known in child welfare discourse (Clinton, 1996). A growing branch of social science research studies community-level social dynamics on children and families, and neighborhood effects, including the impact of neighborhood characteristics such as poverty, joblessness, and residential stability (Sampson 2002; Sampson, Morenoff & Gannon-Rowley, 2002). Noting that child-related problems tend to “come bundled together at the neighborhood level” (Sampson, 2001), a significant segment of these studies examines how neighborhood social composition and processes influence the well-being of children and adolescents. The latest research seeks to discover and understand the mechanisms by which living in a disadvantaged neighborhood creates health and behavior problems for children.

Inspired in part by the social science research linking communities and children’s welfare, social work theorists and practitioners have increasingly adopted community-based approaches to child welfare decision making and service delivery (Weil, 1996). They have also emphasized a research agenda that identifies interventions that are most effective at improving neighborhoods’



support for families, increasing neighborhood efficacy, and helping families deal with the neighborhoods' negative influences. The community approach to social work is still far from mainstream child welfare practice, but community-based initiatives are appearing in pilot projects scattered across the country and in theories about the future direction of social work in the United States.

Some of these initiatives integrate communities into traditional case work that investigates child maltreatment and provides services to individual clients. These programs typically draw on the strengths of families and communities, try to respect cultural norms, and engage in partnerships with neighborhood organizations

that support families. They may acknowledge a responsibility to be accountable to communities, for example, by consulting with neighborhood leaders and stakeholders in setting policy and designing services for families. As one advocate of this

approach describes it, "community social work is all about engaging with people to work through their troubles in a collaborative fashion. Community social work draws on and contributes to the resources of the community in dealing with problems" (Wharf, 2002).

Other community-based programs operate as an alternative or supplement to child welfare agencies by building the capacity of communities to provide healthier environments for children to grow up in (Weil, 1996). Not only is social work with families made more effective

by taking communities into account, but also the communities themselves are made the organizing principle of child welfare efforts. Recognizing that reforming child welfare and other service systems is inadequate to reverse the devastating consequences of neighborhood disadvantage, community-building initiatives seek to transform the social fabric of poor communities themselves by improving schools, increasing safety, creating jobs, mobilizing civic engagement, and otherwise expanding the resources available to families.

The community impact of disproportionality

Social scientists have examined the mechanisms that link community

characteristics to family functioning and child development while social work theorists and practitioners have begun to adopt community-based approaches to their work in poor neighborhoods. They have not considered, however, the sociopolitical impact of the concentration

of child welfare supervision in these neighborhoods.

Although researchers and state child welfare departments are investigating the extent of and reasons for racial disproportionality in child protective services (Courtney et al., 1998), they have not studied its *community* impact. There is evidence that many poor minority neighborhoods have extremely high rates of child welfare agency involvement, especially placement of children in foster care. For example, in 1997, one out of 10 children in Central Harlem had been

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placed in foster care (Katz, 2000). In Chicago, most child protection cases are clustered in a few zip code areas, which are almost exclusively African-American (Roberts, 2002).

Thus, racial differences in rates of foster care placement affect not only children's chances of becoming wards of the state but also their chances of growing up in neighborhoods where state supervision of children is prevalent. The spatial concentration of child welfare agency involvement in African-American neighborhoods is what makes the child welfare system a different institution for White and Black children in America.

The book *Shattered Bonds: The Color of Child Welfare* argues that intense levels of punitive state supervision of children and their families have negative consequences for family and community networks that are supposed to prepare children for civic life and self-governance (Roberts, 2002). Investigation of parents by caseworkers often results in years of agency regulation of families and placement of children in foster care. When child welfare agency involvement is heavily concentrated in a neighborhood, its effects are felt by the community as a whole. This kind of intense, coercive state supervision is antithetical to the relationship between the state and families contemplated by our constitutional democratic order – the same relationship we expect for White communities in America. Although child welfare agencies provide needed services to poor, minority communities, we must find less detrimental alternatives to our current reliance on coercive family supervision and foster care placement.

The individualized focus of child welfare research and practice

In the early twentieth century, progressives like Jane Addams conceived of their child welfare crusade as a social

reform movement that addressed a wide range of children's problems. Rescuing children from maltreatment by removing them from their homes was part of a broader campaign to remedy the social ills, including poverty, that harmed children. To be sure, the early reformers judged poor immigrant families by elitist standards and excluded Black children altogether. But they advocated a view of child maltreatment as an urgent social problem that should be addressed through various forms of social welfare and society-wide reforms (Gordon, 1994).

Efforts to develop a system rooted in a social vision of child welfare were defeated in the 1970s by the definition of child maltreatment as an individualized problem found in dysfunctional families. Instead of pursuing social remedies, child welfare agencies typically treat parents' perceived deficits and depravities with coercive and therapeutic "cures" such as mandated psychological counseling and parental training classes. They intervene only after struggling families are already in crisis, providing special institutionalized services, especially placing children in foster care (Waldfogel, 1998). Although advocates are experimenting with community-based initiatives, the federal government made it clear in the 1997 Adoption and Safe Families Act (ASFA) that state child welfare services' top priority must be child protection and not family preservation. Far from promoting social reforms, ASFA relies on a private remedy – adoption – as the preferred means for reducing the alarming size of the foster care population.

Like policy makers, judges and researchers also have a very individualized focus. Judges hold individual parents accountable for harms to children and ask whether it is better to place a child in foster care or leave him or her at home. Social scientists ask the same kinds of questions, except

they aggregate their findings to provide answers for a population of children. The current norm for child welfare practice insists on outcome-based evaluation of services or “evidence-based practice.” Researchers have developed methodologies and performance indicators designed to help caseworkers and administrators assess the impact of their services (Ward, 2002). Despite the recent interest in community-based practice, these research methods share a focus on individual children and families as the unit of analysis. But researchers cannot fully understand the child welfare system’s community-level effects by aggregating the effects of foster care placement on individuals.

The contribution of family group decision making

The community-level effects of child welfare agency involvement in neighborhoods of color suggest that solutions to racial disproportionality must be community-based. Family group decision making can play a critical role in community-based efforts to transform child welfare practice.

First, FGDM recognizes the need to intensively involve communities in the design and implementation of conferencing and service provision. Although FGDM adheres to certain basic principles, there is no precisely prescribed way of conducting it. Instead, one of the basic principles is that FGDM must adapt to the cultural context of each community. In addition, by involving families in child welfare decision making, FGDM allows caseworkers to learn about the strengths and resources that communities have to offer families. It is families themselves who best know their communities and can best strategize about how to develop and tap community assets to solve family problems.

Much of the new community-based practice involves incorporating information about communities into traditional work with individual clients. Theorists now treat communities as a critical aspect of services to individual families, but they do not acknowledge how communities are affected by agencies’ intervention in families. A common response to racial disparities in the child welfare system has been the implementation of “culturally competent” social work practice. The purpose of this approach is to make child welfare services more sensitive to the distinctive needs and customs of minority communities. Learning to be culturally competent helps caseworkers deliver services more effectively to a diverse clientele and uncover unrecognized biases in their view of minority families.

But this strategy does not necessarily acknowledge the most significant implications of the system’s racial disparities. Without recognizing and addressing the system’s institutional relationship to minority communities, teaching caseworkers to be culturally sensitive could help them regulate minority families more effectively. Social work scholars have noted that cultural sensitivity “increases client receptiveness to intervention” (Sherraden & Segal, 1996). Whether this is a good thing depends on the nature of the intervention. This remedy might also convince caseworkers, administrators, and judges that they are acting fairly while the system they are administering continues to have negative consequences for the communities in which it is concentrated.

The potential for negative consequences is why cultural competence must be accompanied by a change in child welfare decision making. Family group decision making

contributes an important insight about the role of cultural competence; changing child welfare practice to involve families in decision making, in their own cultural contexts, makes the practice culturally competent.

More fundamentally, the philosophy of FGDM can promote a deeper understanding of the connections between families and communities. As child welfare professionals, we are in the midst of an intense ideological battle that is connected to broader political debates in this country. We are witnessing a frightening move toward punitive state interventions

into the most disadvantaged communities coupled with the dismantling of social programs that have historically provided a meager safety net for struggling families. Those communities are growing poorer as jobs, Medicaid, and income assistance disappear and more and more of their residents are sent to prison. As part of that trend, some child welfare policies try to fix foster care by speeding up termination of parental rights and moving more children into adoptive homes.

To a large extent, contemporary American social policy has written off the most disadvantaged families and the communities they belong to. Family group decision making is part of the resistance to these policies of shrinking supports and intensified punishment. FGDM gives voice to those families and communities: it respects what they have to say rather than imposing authoritarian requirements on them; it capitalizes on their strengths rather than scrutinizing their deficits; it aims to support them

rather than tear them apart. Countering the way coercive state supervision of families contradicts a democratic relationship between communities and government, the practice of FGDM promotes the democratic ideals of voice, freedom, equality, and respect (Merkel-Holguin, 2004). It is no wonder that FGDM was originally demanded by the Maori as a means of addressing their overrepresentation in New Zealand's child welfare system.

A community approach to child welfare theory, policy, and practice makes clear the devastating impact caused

by a child welfare system that relies on coercion and punishment imposed disproportionately on communities of color. It also reveals how FGDM, along with other reforms focused on supporting families and strengthening neighborhoods, can

help transform the child welfare system into one that really promotes the welfare of children.

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