Individual and systemic/structural bias in child welfare decision making: Implications for children and families of color

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ABSTRACT

The factors contributing to observed racial disproportionality and disparity in the child welfare system have been the subject of national discourse for decades. This qualitative study used focus groups to engage child welfare and collaborating system decision makers, community partners, and families in a subjective interpretive analysis of racial disproportionality and disparity that had been demonstrated by a previous quantitative analysis of Oregon's child welfare system. Thematic analysis yielded eleven themes from the participant focus groups, four of which clustered around individual and structural/systemic bias and are examined in this paper: visibility bias; cultural bias and insensitivity; personal influences on determination of minimally adequate care; and foster and adoptive parent recruitment and licensing practices. Participants offered recommendations to improve outcomes for children and families of color in light of these observations: increase awareness of bias, create checks and balances in decision-making, contract with and hire culturally and racially diverse professionals, and increase funding for training.

1. Introduction

There is increased acknowledgment and concern about racial disproportionality and disparity in child welfare systems across the United States. National data consistently indicate that children and families of color are represented disproportionately in the child welfare system (Sedlak & Broadhurst, 1996; Sedlak & Schultz, 2005; Sedlak et al., 2010; U.S. General Accounting Office, 2007) and experience disparate outcomes at key decision points along the child welfare continuum (Chapin Hall at University of Chicago, 2009; Fluke, Yuan, Hedderson, & Curtis, 2003; Harris & Hackett, 2008; Hill, 2006; James, Green, Rodriguez, & Fong, 2008, 2011; Marts, Lee, McRoy, & McCroskey, 2008, 2011; McRoy, 2004). In response, organizations such as the Child Welfare League of America, Casey Family Programs, and child welfare agencies across the nation have focused their attention on the issue. Researchers have made a concerted effort to identify families most impacted, conduct research to determine causal factors, and identify equitable services once families become involved with child welfare (Alliance for Racial Equity in Child Welfare, 2009; Child Welfare Information Gateway, 2011; U.S. General Accounting Office, 2007).

1.1. Contributors to racial disproportionality and disparity

Scholars have attempted to identify the contributors to racial disproportionality and disparity in the child welfare system, yet the debates on the issue continue to dominate the national child welfare conversation. In an effort to identify and articulate both the antecedents of and barriers to resolving racial disproportionality and disparity, the child welfare literature offers a range of theoretical and conceptual explanations. Among these are: (1) higher prevalence of risks in communities of color; (2) individual bias; (3) systemic and structural bias; and (4) multiple determinants.

1.1.1. Higher prevalence of risks in communities of color

Studies have cited poverty, incarceration, substance abuse, mental health problems, single parenthood, and violence, factors that are prevalent in communities of color, as being associated with an increased risk for child maltreatment (Barth, 2005; Coulton, Korbin, & Su, 1999; Drake, Lee, & Johnson-Reid, 2009; Nelson, Saunders, & Landsman, 1993; Sedlak & Broadhurst, 1996). Thus, one theory advanced in the literature as a primary driver of racial disproportionality and disparity in the child welfare system is that children who live in communities with a higher prevalence of multiple risks are more vulnerable to maltreatment (Bartholet, 2009; Bartholet, Wulczyn, Barth, & Lederman, 2011). Specifically, Black families are characterized as being disproportionately

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affected by risk factors associated with child maltreatment and as a result are more likely to maltreat their children (Bartholet, 2009; Drake & Pandey, 1996).

Some scholars suggest that the relationship between child maltreatment and exposure to familial and contextual risks is so strong that bias (individual, systemic, or structural) can be discounted as a significant factor (Bartholet, 2009; Bartholet et al., 2011). Proponents of this argument also suggest that an emphasis on racial equity, with a focus on a reduction in the rates of Black children in child welfare similar to those of White children, poses significant risks to Black children's safety. For example, Bartholet (2009) asserts that Black families' representation in child welfare is proportionate to their exposure to risk. She identifies this association as the primary issue of concern and that designing interventions focused on racial bias may lead professionals to ignore the real risk of maltreatment of Black children.

While early waves of the National Incidence Study (NIS) of Child Abuse and Neglect concluded that Black children were not more likely than White children to be maltreated (Sedlak, 1991; Sedlak & Broadhurst, 1996), the recent NIS-4 and reanalysis of the data from prior studies found racial differences in the rates of maltreatment, specifically finding that there were higher incidences of maltreatment for Black children (Sedlak et al., 2010). The NIS-4 researchers recommended that future analyses examine the independent and interrelated associations between family factors (i.e., employment status, socioeconomic status, family structure) and the incidence of child maltreatment. Researchers suggested that further analyses examine whether racial differences in maltreatment rates remain when controlling for family vulnerabilities (Sedlak et al., 2010).

1.1.2. Individual bias

Individually biased decision-making from child welfare and collaborating system professionals (e.g., law enforcement, educators, and medical personnel) is often postulated as a contributor to the overrepresentation of children and families of color in child welfare systems (Hill, 2005; Morton, 1999; Roberts, 2002). Individual bias is defined in this context as a positive or negative attitude, assumption, or judgment of any particular racial or cultural group that affects child welfare decision-making practices and policies. The complex relationships among individual practice, institutional and legislative requirements, and other factors make it difficult to point with certainty to evidence of individual bias that is racially or culturally based. Nevertheless, child welfare research generated over the past ten years supports the notion that this bias may indeed exist and contribute to disproportionality and disparate treatment. For example, studies have shown that disparate outcomes for Black children and families existed throughout the decision-making continuum (e.g., referral, substantiation, and length of foster care stay), even when factors such as family income, child characteristics, and the type of maltreatment were controlled (Ards, Myers, Malkis, Sugrue, & Zhou, 2003; Fluke et al., 2003; Lu et al., 2004; Needell, Brookhart, & Lee, 2003).

Qualitative studies have revealed negative preconceptions about persons of color and their life circumstances among some child welfare decision makers, which lend further support to the role that individual bias may play in disproportionality (Chibnall et al., 2003; Dettlaff & Rycraft, 2008, 2010, 2011). In a study conducted by Chibnall et al. (2003), participants suggested that while poverty and associated risks contributed to racial disproportionality, they also had observed school and medical personnel over-reporting families of color to child welfare agencies independent of those risks. For example, school teachers/ administrators often confused factors that resulted from poverty as child maltreatment and consequently provided a (possibly unnecessary) child welfare intervention, rather than a poverty-related intervention. They observed that medical professionals made assumptions about African American women, in particular, regarding the possibility of drug use during pregnancy, which resulted in higher referrals for African

American children in the presence of similar risk factors as their White counterparts. In another qualitative study, Dettlaff and Rycraft (2008) reported that participants from the legal community observed culturally biased negative language used in caseworkers' affidavits. In addition, they witnessed patterns of caseworkers raising standards for Black families with children in foster care while not doing the same for White families. Such negative perceptions can have a devastating and compounding effect on families of color, especially when negative perceptions of a racial group exist at multiple points on the child welfare continuum — placing them at greater risks for reports to and deeper and extended involvement with the child welfare system.

1.1.3. Systemic and structural bias

Scholars have also proposed systemic and structural racial bias as a contributor to racial disproportionality and disparity (Roberts, 2002; Rodenborg, 2004). Rodenborg advanced a definition of institutional discrimination that focuses on indirect institutional bias as an organization's routine actions that unintentionally negatively affects people or communities of color. Although often conceptualized differently, systemic and structural biases are aligned closely with individual bias. Individual bias, whether intentional or not, has the potential to influence system level practices and policies, since systems and policies are both created and enacted by individuals. Similarly, system and structural level practices and policies can also influence individual level decision-making and conduct. Roberts (2002) proposed that racial disparities found in the child welfare system and structural racial inequalities are ultimately linked. In her view, it is inaccurate to suggest that when controlling for family income and other risks, the circumstances between White families and families of color are equal and that race is no longer a factor in child welfare decision-making.

Cahn and Harris (2005) found evidence in the research literature that structural concerns might contribute to disparate treatment within the child welfare system. Structural issues included data issues, the absence of structured risk assessments, and bias embedded in foster care placement standards that differentially affected children and families of color. In other work, child welfare and collaborating system professionals have identified aspects of institutional structures such as licensing regulations, staffing requirements, hiring patterns, workforce issues, and a lack of cultural fit in service array as institutional barriers to equitable outcomes for children and families of color (Chibnall et al., 2003; Dettlaff & Rycraft, 2010, 2011; Roberts, 2002).

1.1.4. Multiple determinants

Finally, some child welfare scholars posit a multiple determinants theory as a probable contributor to racial disproportionality and disparity. In an effort to comprehensively explore the contributors to the overrepresentation of particular racial groups, understand decision-making processes, and identify the effects of practice and policy decisions in the child welfare system, Baumann, Dalgleish, Fluke, and Kearn (2011) developed the Decision-Making Ecology Framework. The framework may assist researchers and practitioners in their efforts to capture the variety of factors that influence disproportionate and disparate outcomes for children and families of color. The multi-causal framework identifies and analyzes various sources of decision-making and conceptualizes the interaction of case, organizational, external, and individual factors in the decision-making process. The framework also proposes conducting a comprehensive examination of the context that child welfare decisions are made; psychological processes of those decisions; types of decision errors; and extent to which errors negatively or positively influence practices and policies.

Researchers have illustrated the complexities in attributing a single cause to the overrepresentation of children and families of color in the child welfare system (Dettlaff et al., 2011; Rivaux et al., 2008). Dettlaff et al. (2011) found that race was a predictor of

substantiation for maltreatment. When family income and caseworkers' perceptions of risks for maltreatment were controlled, race emerged as a significant predictor in decisions to substantiate cases. Researchers concluded that racial disproportionality is not easily explained by a single determinant; rather that future research must consider several complex factors.

1.2. Racial disproportionality and disparity in Oregon

Oregon child welfare administrative data from 2008 indicated that Oregon's children and families of color were represented disproportionately in child welfare and that these families faced disparate outcomes at many points in the process. In particular, American Indian/Alaskan Native and Black children in Oregon had less favorable experiences/outcomes at several decision points than their White counterparts. Specifically, American Indian/Alaskan Native and Black families were nearly 2 and 2.5 times respectively, more likely to be represented among Child Protective Services (CPS) reports than they were found in Oregon's general population. American Indian/Alaskan Native and Black children were nearly 5.5 and 2 times respectively, more likely to be represented in Oregon's foster care population than in Oregon's general population. Children of color represent 10.7% of Oregon's general population yet they represented 19.7% of the foster care population. These findings did not provide any causal explanation for the differences; rather revealed concerning patterns similar to the national data and increased a sense of urgency to understand and address the contributors of racial disproportionality and disparity in Oregon's child welfare system.

1.3. Purpose of the current study

The purpose of the qualitative study was to engage child welfare and collaborating system decision makers, community partners, and families in a subjective interpretive analysis of the practice context for the Oregon's child welfare administrative data that indicated the existence of racial disproportionality and disparity. In addition, the Child Welfare Equity Task Force that commissioned the study envisioned that the focus groups would provide one source of recommendations to shape action planning and promote equity in decision-making across the child welfare continuum. There was neither a predetermined theory tested nor an intention to generate a new theory; rather, the intent of the research was to obtain perspectives from participants on the phenomenon of the decision-making processes along the child welfare continuum (Creswell, 2003; Denzin & Lincoln, 2000; Guest, MacQueen, & Namey, 2011; Strauss & Corbin, 1998).

This paper reports on a single dimension of the multi-dimensional findings that focus group participants identified as contributors to racial disproportionality and disparity. In addition, the paper provides participants' practice and policy recommendations as part of the state's action planning process to address racial disproportionality and disparity.

2. Methods

This study was conducted on behalf of the Governor's Taskforce on Disproportionality in Child Welfare with funding from the state of Oregon and Casey Family Programs. The research team was commissioned to conduct a statewide and eight county study designed to: 1) determine whether racial disproportionality and disparity existed at critical decision points in the state's child welfare system; 2) explore the context for findings with regard to child welfare system practices and policies; and 3) collect recommendations for action planning to promote safe equitable services for all children and families in Oregon's child welfare system. The "Decision Point Analysis" work of Feyerherm and Butts (2002) and Pope and Feyerherm

(1992) in juvenile justice informed the current study's mixed quantitative and qualitative approach. The qualitative findings presented here were used to contextualize, enrich, and provide assistance in interpreting the results of the administrative data (Morgan, 1996) as well as understand whether the administrative data resonated with the experiences of child welfare and collaborating system decision makers, community partners, and families with active or past child welfare involvement.

2.1. Study design and sample

To ensure wide representative voices, researchers collaborated with members of the Task Force to use a purposive sampling design. Working with the Task Force Members, the research team created a matrix displaying various decision makers, stakeholders, and child welfare participants at each stage of the child welfare decision-making process. Potential focus group participants were representative of racial, ethnic, cultural, and regional diversity (i.e., urban, suburban, rural). Guided by the matrix, members of the Task Force and researchers worked with potential focus group sponsors to recruit participants from their communities, ethnic/racial groups, professional disciplines, and geographical regions. Focus group sponsors were sent letters with an invitation to participate, a description of the study's purpose, measures to ensure confidentiality, and description of the potential risks and benefits of participation. Potential participants were provided in advance with a sample "informed consent" to participate in the focus groups.

Seventeen focus groups were convened, resulting in more than 100 participants. Through the use of the matrix and purposive selection of sponsors, the team assured a breadth of perspectives among participants in terms of race, culture, profession, and role in the child welfare system or community. The research team had information on the professional backgrounds and in many cases the participants' cultural, racial, and ethnic identities (through self-identification during focus group discussions or organization/agency affiliation). However, recognizing the sensitivity with which service users and professionals approach discussions of racial disproportionality and disparity, coupled with the vulnerability of many participants by virtue of membership in these communities, the research team intentionally did not ask about or record participants' demographic information in each individual focus group. Although demographic data on each group may have been useful in subsequent analysis, the research team opted in favor of protecting participants' confidentiality and alleviating their potential concern or perception that demographic data might reveal their position or identity.

2.2. Study procedures

At the beginning of each focus group, researchers stated the purpose of the meeting, discussed confidentiality, and answered questions concerning informed consent, and discussed the purpose of the audiotapes and notes. Finally, participants were assured that only the research team would have access to the audio-recordings, transcripts, and notes and that individual- or group-level demographic data would not be collected. Focus groups were audiotaped and transcribed. In addition, the group facilitators took their own notes and prepared post-group memos to capture participants' comments and the context of the focus group dynamics. The transcripts, notes, and memos were incorporated into subsequent analyses.

The focus group questions were formulated by the research team and the Child Welfare Task Force. Focus group participants were given a brief overview of the administrative data findings that were relevant to their role on the child welfare continuum, geographic area, and/or cultural niche. The quantitative findings were presented as patterns for which no interpretation was offered. Following the presentation of the quantitative data, a semi-structured interview

format was used to ask three global research questions designed to elicit participants' reactions to, interpretations of, and implications for the quantitative findings:

1. What are your reactions to the quantitative data on Oregon's disproportionality and disparity?
2. What do you think may account for the pathways children and families of color experience that are different from their White counterparts at the various decision points (e.g., intake and length of stay in foster care)?
3. What action steps do you think are needed to change the pathways for children of color?

To ensure balance of input within and across focus groups, the research team asked clarifying questions to elicit participants' responses, explore exceptions, and identify emerging themes.

2.3. Research team

A racially diverse research team was recruited to support the cultural and professional trustworthiness of the research and support the theoretical sensitivity of the analytical process (Creswell, 2003). Four of the six researchers were persons of color. Each focus group was facilitated by at least one research team member of color. The diversity of the research team offered an important balance of cultural lenses based on personal and professional experiences and created checks and balances of the potential analytical "blind spots" due to differing cultural experiences and worldviews.

2.4. Data analysis

The research team consisted of six analysts who utilized a constant comparison approach to analyze focus group data. Each analyst independently reviewed the transcripts, memos, and focus group facilitator notes. The analysts then presented emergent themes observed in the data. As a group, the analysts revisited the transcripts, notes, and memos, testing themes across all reviewers' independent observations. In the final stage, the researchers distinguished the relationships among and between themes and tested the relationships for consistency or variation across data sources (focus group transcripts, notes, and memos). Throughout data analysis, research team members discussed what they observed in the data to control for and explore any differences in reaction and interpretation to the focus group statements. The team also discussed how focus group participants' perceptions of the facilitators' racial identities may have affected the level of candor in the group. Trustworthiness and credibility of the study's findings were supported with multiple peer investigator triangulation, data triangulation (data collection from a variety of individuals as already noted), and the use of a transcriber not associated with the research team (Creswell, 2003; Denzin, 1978; Lincoln & Guba, 1985). Finally, a primary intent of the thematic analysis was to bring clusters of ideas and recommendations back to the action system (Guest et al., 2011). A member checking process was used by presenting the findings to members of the task force and specific community groups.

3. Results

Analysis resulted in eleven themes that participants named as contributors to racial disproportionality and disparity, four of which clustered around individual and systemic/structural bias as influencing child welfare decision-making: (1) visibility bias; (2) cultural bias and insensitivity; (3) personal influences on determination of minimally adequate care; and (4) foster and adoptive parent recruitment and licensing practices.

3.1. Theme 1: Visibility bias

Focus group participants identified visibility of people of color in White majority communities as a contributing factor to racial disproportionality and disparity in child welfare. Participants expressed that within their communities, particularly White majority communities, people of color were at greater risk for involvement in child welfare and other systems. One participant noted:

There are so few people of color in our community that they are clearly more visible. People are more likely to pay attention to the person who is Black or Hispanic than they would someone White.

Participants suggested that when parents' issues and families' circumstances are exposed, they face an increased risk of being reported to child welfare. For example, participants across cultural groups stated that adverse social activities/behaviors such as substance abuse, domestic violence, and criminality drew greater attention from social service systems when seen in communities of color than the same behaviors exhibited by White people. They reported more negative interpretation of and negative responses to behaviors exhibited by people of color even when similar to those exhibited by White families. One participant with prior child welfare involvement shared her experience of caseworkers minimizing the risk in her situation:

When I had my oldest daughter, we were both positive [for drugs] when she was born. But, I lived in a fancy house by the river. I was committing crime and using drugs every day. They didn't take my baby away. I have a feeling that if I was of a different color, they would've taken her away. I was a pretty little blond girl with blue eyes that lived in a fancy house, and had a nice car. It [the house, car, and lifestyle] was all gotten criminally. I lied [about how the possessions were obtained] and they believed me.

Some participants discussed how accessing services from public agencies made private family troubles a matter for public record. Family circumstances such as poverty and the resulting need to access public services, increased visibility to mandated reporters. Participants believed that this issue was particularly pronounced in communities of color and suggested that the need for public assistance and child maltreatment become blurred in the minds of mandated reporters.

I think what comes to mind with me, especially when you're talking about reporters, is confusing poverty or lack of financial means with neglect. Reporters are just making a lot of assumptions.

3.2. Theme 2: Cultural bias and insensitivity

Cultural bias and insensitivity emerged as possible reasons for differential treatment reflected in the quantitative findings and this suggestion generated intense, in-depth discussions in the focus groups. Many participants indicated that in their experience individually biased decision-making exists at every level (i.e., reporters, caseworkers, administrators) and at various points on the child welfare continuum. However, participants stated that many child welfare and collaborating system professionals failed to acknowledge their personal biases and resisted acknowledging that racial/cultural bias existed within the child welfare system.

We pretend we don't have bias, yet we make decisions every day when those calls come in, when we return or do not return children to their parents.

We assume that supervisors are in touch with their own biases, and that's not my experience.

Participants commented that acknowledgement of such bias could offer an opportunity for better decision-making:

If we can acknowledge our own biases it would create a better worker–client relationship. It is our discomfort that often creates uncomfortable dynamics between ourselves and our clients.

Participants with child welfare involvement as clients expressed resentment for the lack of cultural sensitivity in child welfare decision-making practices and frustration over the power individuals from different (primarily White) racial and cultural backgrounds had over their families. They indicated that the power differences associated with race compounded the negative effects of cultural bias and misinterpretations on families of color. These participants attributed cultural insensitivity, in part, to an overall absence of racially diverse child welfare professionals. One participant voiced the frustration of the lack of professionals of color and White professionals' insensitivity to cultural differences:

It's not fair that all the caseworkers are White! That is why they are taking our children because they don't understand. We are very much judged because we are strong and we are stern. They [caseworkers] don't understand that when we say, 'Sit down!' and our children sit down. To them it's…wow, look at how she's treating her kid. So, they rip our Black children out of our Black homes and take them to Caucasian people.

3.2.1. Subtheme 2.1: Culturally appropriate services

Participants noted that as a systemic issue, it was not standard practice for professionals to consider racial or cultural context in making service recommendations. Participants stressed that the structure and format of the services workers offer to families are influenced by White middle class norms:

What I've experienced related to African American vs. White families is there is a kind of a one size fits all mentality. Like we treat everyone the same and I am not sure that is the best approach.

Maybe the skills you've learned with White families might not work and maybe a different set of skills will work with families of color. Do we have any information on how often we connect African American families with African American supports? We think we have the information against them but we aren't comfortable letting them choose their services.

An educator who participated in the focus groups reported that when families seek to address their issues, the type of helping services that families' access may prevent or promote child welfare involvement.

Sometimes we [mandated reporters] are less likely to report if we see families working through their issues. If they are going to counseling or something—yet another White construct.

3.3. Theme 3: Personal influences on determination of minimally adequate care

Participants stated that individuals make judgments on what constitutes appropriate child-rearing practices from a point of reference that is rooted in personal experiences and values. These individuals described how race- and class-based perceptions of what is in "the best interest" of the child drive decision-making practices rather than the legal standards to meet minimum requirements for responsible parenting. Participants indicated that White-normative standards of adequacy are often applied, not adequacy through a cultural context. Participants

reported that determining what was minimally adequate was challenging for workers. They said that in asking, "What is the *good enough* family?" a worker's expectation is that all families meet, at minimum, the "middle class" standard of living.

As a mandatory reporter, we have to go through our mandatory reporter training. But we are not taught to look at our own background and not told to avoid judging the situation based on our own thinking about what is okay. In certain cultural communities [non-White or non-middle class communities] there is a standard of what is okay to raise a child and it may be different from your standard.

The truth is that child abuse is culturally defined, and it changes. Who a professional thinks warrants a report is based upon their understanding of what's proper parenting.

It's [child abuse] defined by our general definition but also our own personal culture may make you more likely to report something from someone of another culture that you didn't grow up with finding acceptable. I think that could certainly play into it.

3.3.1. Subtheme 3.1: Determination of threat of harm

Participants questioned whether changes in the definitions of risk and safety that occurred over the years affected children and families of color visibility to mandated reporters. In Oregon, "threat of harm" is a reporting category that, according to participants, lacks a clear definition of what constitutes a behavior or situation that compromises a child's safety. The lack of clarity has potentially created an unintended consequence of allowing individual and systemic bias to enter into child welfare decision-making. For example, participants suspected bias in the decision to report in this category because "threat of harm" asks mandated reporters to identify what *might* be occurring or what *could* potentially occur in families. They believed that the suspicion of what *may* be occurring in families is more likely to be directed at families that are culturally or racially different from the dominate community. In the context of discussing assumptions about families of color, one participant from the judicial system indicated that the "threat of harm" reporting category has created subjectivity in what is considered child maltreatment and consequently introduced bias into the threshold for state intervention:

The threat of harm category allows reporters to make reports based on assumptions…the assumption of we don't know what the problem is, but there is a problem.

Across multiple focus groups, participants noted this experience (of greater negative attention to and assumptions about the home life or parenting practices of families of color).

3.4. Theme 4: Foster and adoptive parent recruitment and licensing practices

Several focus group participants discussed how individual and systemic/structural bias operated in the recruitment and licensing of same-race or kinship caregivers. Some participants stated that children often fare better when they maintain connections with relatives because they are more likely to have a sense of belonging, identity, and improved self-concept. Most participants also expressed that kinship placements were protective mechanisms that potentially mitigate the trauma associated with parent–child separation and improve outcomes for children.

One little girl was in care a long time. They were pushing for permanent foster care because guardianships fell through because her behavior was so bad. When we started getting her connected to

family, her behavior changed. She said, "I didn't feel accepted before." Now she knows that she belongs, that she's wanted.

Participants indicated that they did not always see efforts to seek extended family or cultural connections as viable placement options, and wondered aloud whether that might be due to bias against particular families or a culturally limiting definition of the state's broad definition of kin. When participants did recognize efforts to seek relative placements, it was often minimal or operated within a narrow definition of kin that reflected White cultural definitions.

My perception has been that we were supposed to be colorblind and I don't think that's a good approach. We've emphasized kin and we should be working with kin and a broader perspective on who is part of these children's lives.

In the Black social structure, family structure, there's that aunty that's not related, but she's very, very much a part of that family structure and part of a number of families and can be a real resource. I don't know if those folks are routinely incorporated in some way into planning for kids who are in care that they've known for a long time.

Participants of all racial and cultural backgrounds had concerns about the barriers many families of color face in recruitment and licensing as potential foster care or adoptive placements. Participant parents and grandparents expressed acute frustration over caseworkers' perceived judgments of whether families of color were fit to foster their children and the lack of appreciation for what families and communities of color provide:

Is there that same push in the Black community to go to churches and try to get those people [Black people] to be foster parents so then these children are still in a Black family?

I just don't think that there are enough Black foster homes and Native American foster homes. My son is Native American, but there was no place for him to go unless they sent him away [away from his proximal community].

He's been staying with me [a licensed caregiver who was related to the child] for ten months. Why would you take this baby from me and place him with strangers? Why? I said if anybody's ready to adopt him, it would be me. You know I'm certified. My health checks out. My home is certified—I'm already ready. It's just signing papers and going before the adoption board. What more could there be?

4. Discussion

The study's findings illustrated many participants' experiences and perceptions that individual or systemic bias contributed to racial disproportionality and disparity in child welfare. Further, participants argued that this bias should be addressed to create safe equitable pathways for children and families of color. It is important to note, of course, that these findings reveal the perspectives and experiences of participants in this study's focus groups. They should not be interpreted as statistical evidence that the child welfare system itself is inherently racist, nor that intentional or conscious racism exists on the part of child welfare workers, mandated reporters, attorneys, judicial officers, or foster parents. Nevertheless, these findings are consistent with results from other qualitative studies that suggest the existence of cultural bias, cultural insensitivity, and failure to seek culturally responsive resources as key contributors to racial disproportionality (Chibnall et al., 2003; Dettlaff & Rycraft, 2008, 2010). The study, however, is unique in that the second-phase focus groups deliberately drew from a wide range of stakeholder groups,

drawing on experiences and voices across professional, regional, racial, and cultural diversity. More importantly, individuals with active or prior child welfare system involvement were included in the discussions. This inclusion gave voice to an often-underrepresented group within the broader racial disproportionality and disparity conversation. The representation of the diverse participant voices provided a richer and more in-depth analysis.

While some of the themes presented in this study were more closely associated with individual and systemic/structural factors concerning racial and cultural bias, it is noteworthy that some of the findings overlap with other types of bias. For example, several participants identified situations or instances that could arguably fall within the realm of class bias. As previously discussed, individual bias has the potential to shape system level policies that in turn can promote biased system and structural practices. The foster care recruitment and licensing practices theme, as an example, cannot be easily attributed solely to either individual bias or systemic/structural bias. For these reasons, and with attention to the complicated intersections of individual and structural influences, complex phenomena such as racial disproportionality and disparity are not easily deconstructed.

The themes presented in this study illustrate that participants' perceptions of the contributors to racial disproportionality and disparity in child welfare are fluid and contextually interactive. Thus, it is not assumed that any type of bias is a sole contributor to racial disproportionality and disparity in child welfare systems. It is essential that researchers and practitioners seek to address this issue refrain from framing the current debate in compartmentalized terms, reducing the discussion into competing causal frameworks (e.g., poverty vs. structural racism and individual bias vs. risk exposure). Instead, it is imperative that the multiple contributors be given equal consideration. This suggestion is consistent with scholars' recommendations for understanding the complicated nature of this issue (Baumann et al., 2011) and researchers' conclusions from their findings (Dettlaff et al., 2011; Johnson-Motoyama, Dettlaff, & Finno, 2012).

These focus groups were not designed to isolate feedback from individual stakeholder groups, or specifically to compare experiences based on race, profession, or position within child welfare. Coding of detailed demographic information would be required for such a comparative analysis, and the research team made a deliberate decision not to collect this information, in the interest of mitigating participants' potential experiences of mistrust in the research process. However, in several post analysis discussions, the researchers observed differences in how some identified focus group participants (i.e., child welfare administrators, judicial officials, Black families) articulated their perspectives of the data, identified contributors to the overrepresentation of children and families of color in child welfare agencies, and provided recommendations for equitable child welfare practices and policies.

Regardless of profession, position within the child welfare system, or child welfare involvement status, participants whose self-identification as people of color were recorded in the transcripts (e.g., "As a Black woman, I…") more often unequivocally named individual bias as a key contributor to the disproportionate rates and disparate outcomes for American Indian and Black children and families. White participants or those who did not explicitly identify their race during the focus group itself more often pointed to individual bias as a contributor to the under-reporting of White families to child welfare agencies. While White participants shared the perspective that individual and/or systemic/structural bias is a contributor to racial disproportionality and disparity, they more often paid equal attention to other contributing factors (e.g., poverty and familial factors). These findings are reported elsewhere (Miller, Cahn, & Orellana, 2012). A comparative analysis of focus group participants' perspectives and processes that are based on demographic differences is an area for future research.

4.1. Practice and policy recommendations

The views from diverse ethnic/racial groups, professional disciplines, and geographical regions inform and aid in the interpretation of more empirical data regarding racial disproportionality in child welfare. Following the study design, participants also provided input on recommended actions to safely improve trajectories for children and families of color who encounter this system. Their input informed the researchers' practice and/or policy recommendations to mitigate the negative impact of bias on children and families of color, specifically: (1) increase awareness of bias; (2) create checks and balances in decision-making; (3) contract with and hire culturally and racially diverse professionals; and (4) increase funding for training on the importance of understanding the cultural lens.

4.1.1. Increase awareness of bias

Focus group participants expressed a need for system-wide training to raise awareness of bias, and lead to greater care in decision-making. Therefore, it is recommended that formal trainings such as new worker trainings, special conferences and workshops, and university coursework be implemented to increase professional awareness of the dynamics of bias and provide meaningful information concerning cultural practices and historical issues related to child welfare. Research shows the impact of training is limited without follow up coaching, supervisory support, and experiential application of concepts learned (Fixsen, Naoom, Blase, Friedman, & Wallace, 2005). Thus, child welfare is urged to prioritize mechanisms that support transfer of learning such as coaching, supervision, and application of culturally sensitive and responsive practices.

Participants noted the value of information sharing and awareness building between liaisons from specific racial/cultural groups, tribal child welfare programs, and the state's child welfare programs. While urging caution that persons of color are not expected to be primarily responsible for cultural training, participants noted the value of having representative of various racial/cultural groups leading training and awareness building for workforce development. A multi-faceted cross-systems training implemented with mental health, education, health care, and criminal justice systems can help mitigate the compounding effects of individual and systemic/structural bias between systems. While training can be part of the solution, participants cautioned against relying solely on training to change historic, multi-generational, and hidden biases.

4.1.2. Create checks and balances in decision-making

Given the pervasive potential for bias among individual decision makers, embedded bias in system practices, and participants' observations of widespread denial that bias exists, it is necessary to implement and strengthen checks and balances to decision-making. Participants provided examples of checks and balances utilized during reflective supervision, in structured decision-making protocols such as judicial bench cards, in structured risk assessment, and by accessing family or cultural experts in court and case staffing processes (such as those required by the Indian Child Welfare Act). Efforts to amplify cultural voice and input with the use of advisory committees/meetings with cultural experts were also recommended.

4.1.3. Contract with and hire culturally and racially diverse professionals

Individual bias can be counterbalanced by the voices of cultural experts and racially diverse decision-making teams. Participants stressed the importance of contracting with and hiring culturally and racially diverse professionals to provide a more diverse cultural lens to child welfare systems. Recruitment and retention of diverse professionals with the sensitivity to interpret both problem behavior and articulate resilience in new ways was identified as a promising intervention. Voices of persons of color, however, will be most effective with the support of supervisors, other colleagues of color, and

cultural communities. Focus group participants felt that being the only representative of a particular cultural or racial group increases the possibility of being silenced by the majority and potentially shut out by the communities they represent. Thus, workforce development must prioritize efforts to ensure that culturally and racially diverse professionals have the organization's commitment to cultural change, support for promoting community engagement, and supervisory support.

Participants also noted that to reduce bias, it is important that statewide and local offices build cultures of respect and establish relationships with tribal communities and other communities of color. These changes could improve service effectiveness for children/families of color and may build more trust of child welfare agencies. Recommendations were made for contracted professionals of color to collaborate on cases with a focus on culturally based preventive in-home services, reunification support, and recruitment of families with cultural connections with children in foster care. Such efforts would include involvement of family, cultural, and tribal communities in case planning and hearings. External support and partnership can provide expertise to reduce over-reliance on any single worker's subjective case decision-making and bring in multiple cultural lenses.

4.1.4. Increase funding for training on the importance of understanding the cultural lens

It was recommended that more funding should be provided for race/racism and cultural training at all levels of the child welfare system. Coaching by and for supervisors would expand the transfer of training to practice. Expansion of training in these ways and addition of personnel with the linguistic and cultural skills to teach this content would require dedicated funds. However, participants stressed that funding training at the individual level is insufficient. Individual bias may be reinforced by child welfare and collaborating system structures and mechanisms; therefore, funding is also needed at the structural level. Participants mentioned that their efforts to proceed in a culturally responsive manner are halted by structural barriers created by the intersections between policies, regulations, and funding. Participants shared that individual bias can be encoded into and reflected by institutional structures such as licensing regulations, assessment criteria, and practice/intervention methodologies. Individual bias can be controlled for and more culturally responsive services (e.g., prevention, in-home) could be offered if systems funded practices that support attitudinal change.

4.2. Limitations

Consistent with the goals of qualitative research, this study was designed to provide a robust and trustworthy analysis of a specific phenomenon and to surface patterns for consideration. Further, it was designed as part of an engagement stage of a larger political and decision-making process and to clarify and aid in the interpretation of findings from the study's quantitative component; these data cannot necessarily be generalized to other settings. The relatively small sample size, non-probability sampling, and potential uniqueness of Oregon's child welfare policies and procedures limit the study's generalizability to the broader child welfare system.

The lack of time was another limitation of this study. Qualitative analysis can be an extensive evaluative process — involving multiple layers of coding, member-checking, and external review. Efforts to assure the trustworthiness of the analysis were implemented; however, time limits imposed by operating in an action system with clear task force deadlines prevented the implementation of additional approaches that may have proven valuable such as greater member checking and deeper cross-transcript analysis.

Oregon's predominantly White population, with notably little racial and ethnic diversity in the general population, imposed distinct political context and dynamics on the individual, community, and

state levels. While focus group participants represented diverse racial, cultural, community, and professional backgrounds, funding and timing constraints limited the research team's ability to conduct additional focus groups with more representation of diverse communities of color, within other aspects of the child welfare system, and across more statewide rural and urban communities. For example, some rural and urban communities were not accessed and they may have provided different perspectives from the rural and urban communities represented in this study. In addition, specific religious communities or law enforcement may have provided a unique and important lens to the discussion. The research team was unsuccessful in recruitment efforts to have such groups widely represented in the study. While the research team kept records of who comprised each focus group during the recruitment phase to ensure wide representation of participant demographics, the research team made a conscious decision neither not to collect/document demographic information on study participants nor record the exact number of participants in attendance. This decision was primarily to minimize fears of a breach of confidentiality. The decision, however, prevented a precise quantifiable analysis of the diverse representativeness of the sample.

Research has shown that interviewing participants with different positions within an organization supports diverse perspectives on issues pertaining to agency dynamics and political climate (Ellett & Ellett, 2005). In this study, some focus groups consisted of agency-based caseworkers and their supervisors/managers, while others consisted of child welfare professionals and collaborating systems from small communities. The potential power differential and perceived social and political cost of expressing differing opinions may have limited differing opinions and constrained communication. Similarly, the sponsorship from the Child Welfare Task Force may have given the impression that the researchers were representatives of the state, which may have imposed constraints on participants' willingness to share freely. Despite the researchers' efforts to clarify the researchers' roles, to include researchers from diverse backgrounds, and to ensure confidentiality, the perception of a power differential could have been a barrier to participants providing open and honest responses.

5. Conclusion

This study's findings illustrate the perceptions by multiple child welfare decision makers, child welfare system collaborators and families with child welfare that individual bias is one possible contributor to the racial disproportionality and disparity observed in the Oregon's public child welfare system. While it may be impossible to eliminate individual bias in the child welfare system, several focus group participants articulated how important it was that child welfare practitioners, policy-implementers, and researchers maintain an awareness of its existence and influence on children and families of color. Moreover, participants expressed the necessity for implementing practices and policies that moderate or control for individual bias decision-making. Implementation of such recommendations takes time and resources that are not always available in child welfare systems, yet it is essential that child welfare make every effort to consider practices and policies that improve outcomes for all children and families.

Acknowledgments

child welfare system, and it appears that disparities have been reduced along the decision-making continuum.

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