

EXPLORING THE CULTURAL EXPERIENCES OF FAMILY CASE MANAGERS:  
AN INTERPRETATIVE PHENOMENOLOGICAL ANALYSIS

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Submitted to the faculty of the University Graduate School  
in partial fulfillment of the requirements  
for the degree  
Doctor of Philosophy  
in the School of Social Work,  
Indiana University

August 2013

Accepted by the Faculty of Indiana University, in partial  
fulfillment of the requirements for the degree of Doctor of Philosophy.

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## DEDICATION

I must thank and dedicate this work to the family case managers employed with the Department of Child Services in Indiana, who shared their stories with me and are the hardest working group of social workers I know.

## ACKNOWLEDGEMENTS

When I began my doctoral education 10 years ago I remember Dr. Jerry Powers, first director of the school's PhD program, saying that completing the PhD was 10% intelligence and 90% perseverance; no truer words have ever been spoken. This has been one of the longest and hardest journeys of my life and I would not have persevered without the love and support of my family, friends, and social work colleagues.

I must begin by recognizing the encouragement, humor, and sacrifices made by my husband, Mark Whelpley, who always believed in me, made me laugh when I most needed it, and didn't skip town when my five-year deadline was up.

I also want to thank my family including my parents, my late great-aunt Doris, and most importantly my sister, Sara Horton-Deutsch, whose insistence that I complete this journey and reassurance that I could, carried me through many difficult times.

To my IU faculty writing mentor and friend, Jennifer Price Mahoney, you made academic writing more interesting and fun, and were the grease that kept this writing machine in motion.

Also, thank you to my social work friends and colleagues, Valerie Decker, Amy Murphy Nugen, Rob Richardson, and their significant others, who during this dissertation process I came to know and admire.

Additionally, I want to recognize and thank my dissertation committee, Lisa McGuire, Jeffry Thigpen, Sabrina Williamson Sullenberger, and Elizabeth Wood, who always empathized with my struggle, offered me encouragement, and assured me I had what it took to finish. I could not have put together a better committee.

## ABSTRACT

Janell M. Horton

### EXPLORING THE CULTURAL EXPERIENCES OF FAMILY CASE MANAGERS: AN INTERPRETATIVE PHENOMENOLOGICAL ANALYSIS

This study explored the lived experiences of family case managers who routinely work with families who are culturally different from themselves. The purpose was to understand and interpret the meaning of culture and cultural difference as it relates to the engagement process with families. The research also sought to understand whether cultural insensitivity or bias may contribute to the overrepresentation of children of color in the child welfare system. The author conducted 10 in-depth, semi-structured interviews with graduates of a large, research-intensive Midwestern university's Title-IV-E Social Work Program, who also were employed as family case managers in public child welfare. Interviews were transcribed and analyzed using Interpretative Phenomenological Analysis and the analytic process of the hermeneutic circle. Results suggest the concept of culture is a complex term that encompasses many characteristics and a number of dimensions. In addition, four themes were identified as underlying the engagement process with culturally different families. These themes routinely overlapped, and family case managers often had to attend to each of the thematic areas simultaneously. At nearly every step in the engagement process, family case managers modulated their interactions in order to find balance and stability in their relationship with the family. Finally, poverty was revealed to be the most salient cultural difference in working with families involved in the child welfare system. These results have important implications for social work

education, child welfare practice, and research on the overrepresentation of children of color in the child welfare system.

Lisa E. McGuire, PhD, Chair

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## ABBREVIATIONS

Abbreviation	Term
ACF	Administration for Children and Families
AFCARS	Adoption and Foster Care Analysis and Reporting System
ASFA	Adoption and Safe Families Act
APHSA	American Public Human Services
BSW	Bachelor of Social Work
CAPTA	Child Abuse Prevention and Treatment Act
CDF	Children's Defense Fund
CFTM	Conducting Child and Family Team Meetings
CPS	Child Protective Services
CSSP	Center for the Study of Social Policy, Alliance for Racial Equity in Child Welfare
CWIG	Child Welfare Information Gateway
CWLA	Child Welfare League of America
DCS	Department of Child Services
DHHS	Department of Health and Human Services
DOJ	Department of Justice
FCM	Family Case Managers
ICWA	Indian Child Welfare Act
IPA	Interpretative Phenomenological Analysis
IUSSW	Indiana University School of Social Work
MSW	Master of Social Work

MEPA	Multiethnic Placement Act
NABSW	National Association of Black Social Workers
NASW	National Association of Social Workers
NCANDS	National Child Abuse and Neglect Data System
NIS	National Incidence Studies
SES	Socioeconomic Status



## CHAPTER ONE: BACKGROUND AND RATIONALE FOR THE STUDY

### **Introduction**

The disproportionate representation of children of color<sup>1</sup> in child welfare is one of the most pressing problems facing the child welfare system today (Chipungu & Bent-Goodley, 2004; McRoy, 2008). Although the problem is not new and plagues many other systems, such as mental health, education, and juvenile justice (Children's Defense Fund [CDF], 2007), child welfare professionals and researchers alike have been stymied as to how to resolve it. This is because the problem is highly complex and appears to involve both micro- and macro-level practices and policies within child welfare and beyond (Derezotes & Hill, n.d.). Additionally, individual and institutional bias are believed to play important roles in contributing to the problem (Cross, 2008; Green, 2002; Hill, 2004) making it that much harder to address.

### **What is Disproportionality?**

The term “disproportionality” generally is defined in the literature as a situation in which a particular racial and/or ethnic group is represented in a social system, like child welfare, at a rate that is not proportionate to its representation in the general population (Casey Family Programs, 2002). This means children are either overrepresented or underrepresented in child welfare. Overrepresentation refers to children of a particular racial/ethnic group being represented at a higher rate than is seen in the general population, while underrepresentation refers to children of a particular racial/ethnic group being represented at a lower rate than is seen in the general population (Casey Family

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<sup>1</sup> “Children of color” and “minority children” are used throughout the manuscript to denote the largest minority groups in child welfare—namely, African American/Black, American Indians/Alaskan Natives, Asians/Pacific Islanders, and those of Hispanic/Latino heritage. These terms are consistent with the disproportionality literature.

Programs, 2002). Both situations are problematic because in either case vulnerable children and families fail to receive appropriate and vital services to address their needs.

Despite the importance of both phenomena, most of the disproportionality research in child welfare to date has focused exclusively on the overrepresentation of children of color. This is likely due to the overwhelming numbers of minority children affected. In 2008, children of color made up 46% of the U.S. child population but comprised 61% of the children in foster care (Federal Interagency Forum on Child and Family Statistics, 2008; United States Department of Health and Human Services [U.S. DHHS], Administration for Children and Families [ACF], 2009). African American<sup>2</sup> children were the most severely overrepresented, comprising 15% of the U.S. child population but constituting 31% of the children in foster care. This is particularly disturbing because research demonstrates that children of color receive unequal treatment at every point in the child welfare system and have poorer outcomes than their non-minority counterparts (Casey Family Programs, 2002; Hill, 2006; Roberts, 2002a). In regards to overrepresentation, the Child Welfare League of America (CWLA; 2005) states:

This issue needs to be addressed in order to ensure that all children, regardless of their cultural, ethnic, or racial background, receive access to the appropriate services to ensure safety, permanency and well-being at every stage in the child welfare system. (p. 1)

The unequal treatment of people of color across social systems is frequently referred to as “disparity.” This term often is interchanged with disproportionality because both terms are used to describe difference (Chapin Hall Center for Children at the

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<sup>2</sup> Racial/ethnic terms utilized in this manuscript are consistent with U.S. Census and child welfare data collection categories. The terms “Black” and “African American,” “White” and “Caucasian,” and “American Indian” and “Native American,” are used interchangeably depending on the literature.

University of Chicago, 2008). According to the American Public Human Services Association (APHSA), “disparity occurs when services to one segment of the community, relative to other segments, are presumptively allocated, poorly provided or inadequate in addressing a family’s underlying needs” and “these differences in service delivery are not justifiable” (2009, Definitions, Disparity). In child welfare, disparities are created by insensible policies and practices that result in children of color being removed from their homes more often, staying longer in foster care, and reuniting with their families or being adopted less frequently than White children (APHSA, 2009). Thus, it is these disparities in child welfare service delivery that produce disproportionate outcomes for children of color and these inequities must be addressed in order to influence the problem (Chapin Hall, 2008). Unfortunately, the disparate treatment of minorities in all social systems is difficult to change because it is frequently “social, political, economic and attitudinal in nature” (APHSA, Definitions, Disparity).

Conversely, the underrepresentation of certain racial/ethnic groups in child welfare has received almost no attention in the research literature. Although the reasons for this are not stated explicitly, the lack of attention may be attributable to the fact that underrepresentation primarily affects White children and families, who generally have better access to resources and services in American society (Roberts, 2003). Additionally, unlike underrepresentation, overrepresentation historically is rooted in the racial prejudice that resulted in the unnecessary and callous removal of Black and American Indian children from their families in the 1960s and 70s (Cross, 2000; Roberts, 2003). These two factors, along with the staggering numbers of minority children in foster care, may make the overrepresentation phenomenon a more pressing issue for many child

welfare professionals and researchers. Nevertheless, a fundamental understanding of why certain racial/ethnic groups are more likely to be underrepresented in child welfare is vital if we are to make the system more equitable for all.

This research study sought to address gaps in the social scientific understanding of the disproportionality problem by qualitatively investigating how child welfare workers employed in the public child welfare system understand and interpret the meaning of culture and cultural difference when working with families who are culturally different from themselves. Knowing how child welfare workers think about culture and cultural difference is a crucial first step to determining how cultural insensitivity or caseworker bias contributes to the disproportionality problem. To fully understand the phenomenon, a comprehensive review and critical examination of the disproportionate representation of children of color in child welfare systems is provided, highlighting its historical and theoretical foundations. Thus, the first chapter begins by explaining the scope of the problem and the risk factors associated with disproportionality. The second chapter provides a brief history of disproportionate representation in child welfare and reviews the legislation important to shaping child welfare policy and practice. This is followed by an account of the epistemological foundations of disproportionality research, a summary of the empirical literature, and an explanation of the theoretical perspectives underlying the disproportionate representation of children of color in child welfare. The third and fourth chapters describe the methodology and present the analysis and results of the research. The final chapter discusses the research findings and explicates the implications these findings have for child welfare education, practice, and research.

It must be noted that although attempts are made in the preliminary chapters to include empirical information on all of the children affected by disproportionality in child welfare, the majority of studies focus on the overrepresentation of African American children and families. Clearly this is a methodological flaw, but Hill (n.d.) observes that it is primarily due to the larger number and broader geographical dispersion of African Americans across the U.S. as opposed to other minority groups. Even so, the distinct focus on the overrepresentation of African American children and families could be argued as appropriate given the disturbing numbers that are negatively affected by this problem.

### **The Extent of Disproportionality**

A troubling detail about disproportionality is that, to some degree or another, it seems to affect most children involved in the child welfare system across the U.S. For example, although African American children have the highest overrepresentation rates of all ethnic groups, American Indians also are overrepresented. In 2008, American Indians made up 1% of the U.S. child population but accounted for 2% of the children in foster care (Federal Interagency Forum on Child and Family Statistics, 2008; U.S. DHHS, ACF, 2009). On the other hand, Asian and White children have a tendency to be underrepresented in the child welfare system. In 2008, Asians accounted for 4% of the U.S. child population but only 1% of the children in foster care, while White children made up 56% of the U.S. child population but represented 40% of the children in foster care. Hispanic/Latino children neared comparable representation in 2008 making up 22% of the U.S. child population and 20% of the children in foster care (Federal Interagency Forum on Child and Family Statistics, 2008; U.S. DHHS, ACF, 2009).

In a seminal report, Hill (2005a) conducted a descriptive analysis of the degree of overrepresentation of three minority groups—African Americans, Latinos, and Native Americans—in out-of-home placements for the 50 states and one province for which data on race and ethnicity were available for 2000. States were classified into five categories according to their disproportionality rates for each racial/ethnic group: underrepresented, comparable disproportion [or representation], moderate disproportion, high disproportion, and extreme disproportion. Whether or not each category was utilized depended on the specific racial/ethnic group distributions in each state. There were several notable findings in the study. First, African Americans were classified into only three of the five categories: moderate, high, and extreme disproportion. In other words, African American children were not underrepresented or comparably represented in any of the states examined. Instead Hill (2005b) found African American children had moderate disproportion in 19 states, high disproportion in 16 states, and extreme disproportion in 16 states (see Table 1). Latino children also were classified into three categories: underrepresented, comparable, and moderate disproportion. Latino children were underrepresented in 17 states, comparably represented in 24 states, and showed moderate disproportion in 10 states. Native American children were the only racial/ethnic group to be categorized into all five categories. Native American children were underrepresented in 6 states, were comparably represented in 15 states, and showed moderate disproportion in 14 states, high disproportion in 5 states, and extreme disproportion in 10 states. Although slightly dated, Hill’s analysis provides a useful overview of the extent of disproportionality across the U.S. and will be an important point of comparison for subsequent analyses utilizing 2010 Census data.

Table 1

*Overrepresentation of African American Children in Foster Care*

Disproportionality	Moderate Disproportion (19 states)	High Disproportion (16 states)	Extreme Disproportion (16 states)
State Order	MA, DC, MS, HI, LA, SC, AL, GA, AR, TN, NC, WA, FL, VA, ME, NY, OK, MD, AL	KY, TX, DE, NV, MO, UT, VT, NE, MI, WV, KS, CO, ND, SD, OH, CT	RI, NJ, NM, IA, IN, PA, AZ, MT, IL, CA, OR, WY, MN, ID, NH, WI

*Note.* States are listed in order of their disproportionality rates. Thus, MA disproportionality rate is greater than DC.

Nationally, disproportionality rates are useful for understanding the broad picture, but they also can be misleading because these rates fluctuate depending on the characteristics of the state and local population. For this reason, disproportionality is best considered a local phenomenon because “how disproportionality manifests itself will vary from one jurisdiction to another” (APHSA, 2009, Definitions, Disproportionality). This makes it difficult for researchers to apply national findings to what is happening in specific areas of the U.S. Nevertheless, disproportionality researchers have identified three population trends that appear to contribute to the disproportionate numbers of minority children in the child welfare system.

### **Population Trends**

First, large urban areas such as Los Angeles, Chicago, and New York City tend to show more extreme disproportionality rates due to the high numbers of poor minorities living in inner cities (Roberts, 2002b). In Los Angeles County, for example, the latest available data show African American children overrepresented at 9% of the population but 31% of the children in foster care (Court Appointed Special Advocates of Los Angeles, 2008; Lucille Packard Foundation for Children’s Health, 2009). At this same

time, White and Asian children made up 33% and 9% of the county population, respectively, but only 13% and 4% of the children in care. Secondly, states with large minority populations tend to have a disproportionate number of minority children in foster care (Roberts, 2002b). In South Dakota and Alaska, for example, American Indian and Alaskan Native children represent approximately 20% of the population but account for over 50% of the children in foster care (Ratner & Russo, 2007). Thirdly, out-of-home placements of children of color tend to be higher in neighborhoods where minorities make up a smaller percentage of the overall population (Roberts, 2002b). Researchers refer to this as the “visibility hypothesis” because there is a greater probability of minority children being placed in foster care in geographical areas where they are less represented (Hill, 2006; Roberts, 2002b). In other words, children and families of color are more noticeable or visible in certain communities, and this makes them more likely to come to the attention of child welfare workers. To illustrate this, Jenkins and Diamond (1985) conducted a study in which they found African American children were twice as likely to be placed in foster care in counties where they comprised 5%–10% of the population than in counties where they comprised 30%–50% of the population. Garland, Ellis-McLeod, Landsverk, Ganger, and Johnson (1998) reexamined this hypothesis over a decade later and found the hypothesis held true for African American children but not for Hispanic or Asian American children. Although these three trends appear to contradict themselves, all three indicate minority children, and especially African American children, are at greatest risk of out-of-home placement in communities where they represent too great or too small a percentage of the population. Additionally, these trends



point to the fact that child welfare agencies must consider the specific populations of the communities they serve before devising solutions to their disproportionality problem.

### **Children in Child Welfare as a Population at Risk**

Children and families involved with the child welfare system often share common characteristics that make them more vulnerable to adversity than other groups of people. In child welfare, these characteristics are called risk factors and include behaviors or conditions present in the family or social environment that increase the likelihood of children being maltreated (DePanfilis & Salus, 2003). These risk factors are briefly reviewed here in order to provide a general understanding of why some children end up in the child welfare system as opposed to others. It is important to note that many of the risk factors discussed here are interrelated and have a tendency to occur together (Chipungu & Bent-Goodley, 2004). Additionally, the same risk factors that bring children into the child welfare system also have been found to contribute to children's early involvement with the criminal justice system (Chapin Hall, 2008; Green, 2002).

Child maltreatment is defined by the Centers for Disease Control and Prevention as "any act or series of acts of commission or omission by a parent or other caregiver that results in harm, potential for harm, or threat of harm to a child" (2009, Child Maltreatment: Definitions, para. 1). The term usually refers to acts of neglect and physical abuse because these cases make up the majority of all reports to Child Protective Services (CPS) agencies in the U.S. (Childhelp, 2007). Also included in this definition are emotional and sexual abuses, which although grievous, are reported less frequently.

**Poverty.** The primary risk factor and prevailing reason why so many families enter the child welfare system is poverty or low socioeconomic status (Pelton, 1989;

Roberts, 2002b). This risk factor is complex but crucial to understand because over half of all children reported to CPS agencies are investigated and substantiated against for neglect, and “neglect is often a product of poverty” (McRoy, 2004, p. 7). Nationally, 27% of all children, more than 20 million as of 2008, live in families considered poor or extremely poor using the U.S. official poverty guidelines—currently set at \$22,050 a year for a family of four (Wight, Chau, & Aratani, 2010). These guidelines, issued each year by the U.S. DHHS (2010), are critical in determining financial eligibility for many public assistance programs that provide help to needy families. Yet, the National Center for Child Poverty asserts the current poverty guidelines are inadequate, obsolete, and considerably underestimate the number of families living in poverty (Wight et al., 2010). This is because the measure was devised more than 40 years ago and no longer reflects the realities of what families spend on food, housing, and other goods and services (Willis, 2000). According to Bernstein and Lin (2008), a family of four requires twice the federal poverty level, or \$44,100 a year, to make ends meet. Using this guideline, National Center for Child Poverty estimates 41% of children in the U.S., over 29 million as of 2008, live in low-income families (Wight et al., 2010). Unfortunately, efforts to update the official poverty measure have been unsuccessful due to the increased numbers of families that would qualify for public assistance and the added costs to the American people (Willis, 2000). Still, these numbers are important because research consistently demonstrates children from low socioeconomic households are at greater risk of maltreatment (Faulkner & Faulkner, 2004; Pelton, 1989). The “Fourth National Incidence Study of Child Abuse and Neglect” report (Sedlak et al., 2010) indicates children from

low socioeconomic status households<sup>3</sup> were five times more likely to be maltreated than other children. More specifically, these children were three times as likely to be physically or sexually abused and seven times as likely to be neglected.

Living in poverty, especially over an extended period of time, has significant consequences for children. According to the CDF (2005) children who are poor are more likely to die in infancy, have a low birth weight, lack health care, housing, and adequate food, and receive lower scores in math and reading. This is consistent with a “Child Trends” research brief that identified four negative consequences of child poverty (Anderson-Moore, Redd, Burkhauser, Mbwana, & Collins, 2002). These included poor educational achievement, poor social and emotional development, poor economic outcomes as adults, and poor health—as compared to children from families with higher incomes. Although the tendency is to blame poor parents for the negative outcomes of their children, Roberts (2002b) explains that living in poverty creates many hazards for children which are hard to avoid. For example, unsafe housing, inadequate utilities, poor nutrition, and living in high crime areas are all common experiences of poor families that place their children at greater risk of harm. Roberts (2002b) states:

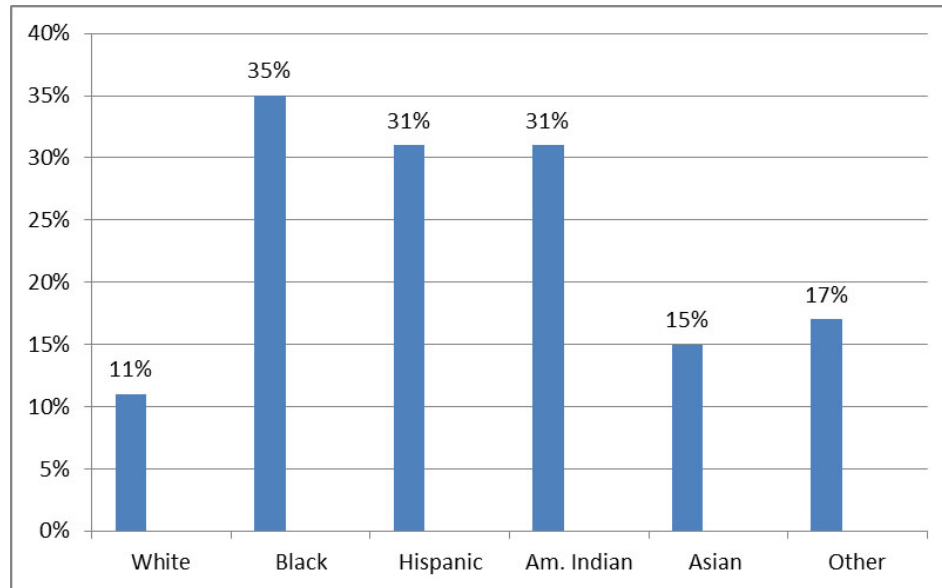
Children are often removed from poor parents when parental carelessness increases the likelihood that these hazards will result in actual harm. Indigent parents simply do not have the resources to avoid the harmful effects of their negligence, so the same parental behavior and careless attitude is more likely to lead to harm to children, and state intervention, in poor families than wealthier ones. (pp. 36–37)

Children and families of color are unduly affected by poverty in the U.S. (see Figure 1). The latest available statistics on child poverty show Black, Hispanic, and

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<sup>3</sup> National Child Abuse and Neglect Data System (NCANDS) defines low socioeconomic households as those with any of the following: an income below \$15,000 per year, parents’ highest education level less than high school, or any member of the household a participant in a poverty program, such as Temporary Assistance to Needy Families, food stamps, public housing, energy assistance, or subsidized meals.

American Indian children are excessively poor as compared to White children (Wight et al., 2010). This increased need places families of color at greater risk for involvement with the child welfare system. Furthermore, once families are involved, welfare receipt significantly increases the likelihood of substantiation of child maltreatment and out-of-home placement for children of color (Roberts, 2002b).



*Figure 1. Child poverty rates by race/ethnicity, 2008.*

The connection between race and poverty is strong. In their publication “Poverty and Racism: Overlapping Threats to the Common Good” (2008), Catholic Charities attributes the increased rates of poverty among people of color to the institutions of racism and White privilege, which have gratuitously disadvantaged minorities socially, politically, and economically for centuries. They point to wealth disparities, residential segregation, employment discrimination, and immigration policies as evidence that the U.S. is, what Emerson and Smith (as cited in Catholic Charities, 2008) call, a “racialized society” that deliberately excludes minorities from full and equal participation in American society. Two years earlier, in a 2006 policy paper, Catholic Charities affirmed:

Poverty and racism are so intertwined that it is impossible to fully separate them. Racism, in both its individual and institutional forms, is a cause of poverty and at the same time an additional barrier for people of color seeking to escape poverty. (2006, p. 13)

Thus, although the conditions of poverty are harmful to all children and families, it is especially destructive to racial minorities, who must contend with the added layer of racism and the challenges this poses.

Family size and structure also are correlated with child poverty and incidents of child maltreatment. In regards to family size, data have shown families with four or more children have the highest rates of maltreatment, while families with only two children have the lowest rates (Sedlak et al., 2010). This is likely related to the increased financial pressures experienced by larger families in providing for multiple children. In looking at family structure, children living with their married biological parents had the lowest rates of child maltreatment, while children living with a single-parent with a cohabitating partner in the household experienced over 10 times the rate of abuse and 8 times the rate of neglect (Sedlak et al., 2010). The latter statistic is especially troubling because most of the children involved with the child welfare system come from female-headed, single-parent households, and these homes are at greatest risk for poverty (McRoy, 2004). Research suggests lower income families experience greater stress and conflict in the home as a result of their financial instability, which often leads to parents using harsher and more inconsistent disciplinary practices (Sherman, 1997).

The connections among poverty, gender, and race in child welfare are indisputable, and for decades scholars have considered these factors to be interlocking oppressions (Ken, 2007). This means these oppressions often occur together and have a cumulative effect on people. Although historically oppression has been used to describe

tyrannical situations involving the domination of one group over another, Young (2000) offers a more contemporary definition that includes “the disadvantage and injustice some people suffer...because of the everyday practices of a well-intentioned liberal society” (p. 36). She asserts this oppression is structural in nature and includes policies and individual behaviors within institutions that have a disparate and/or harmful impact on target groups, whether or not they are so intended; thus, “its causes are embedded in unquestioned norms, habits, and symbols, in the assumptions underlying institutional rules and collective consequences of following those rules” (Young, 2000, p. 36). Consequently, structural oppression is often unseen and considered the normal way of doing business. In her essay, “Five Faces of Oppression,” Young (2000) outlines five forms or experiences of oppression she believes afflict social groups: exploitation, marginalization, powerlessness, cultural imperialism, and violence (see Table 2). She states that the presence of any one of these experiences constitutes oppression and most oppressed groups experience some combination of these. These forms of oppression have particular relevance for women of color involved with the child welfare system because these women typically are poor and unskilled and hold low-paying jobs (Bernstein, 1994). This combination of factors makes women of color highly vulnerable to experiencing Young’s (2000) first three forms of oppression: exploitation, marginalization, and powerlessness. As a result of these experiences, it becomes nearly impossible for these women to achieve financial stability, a common goal of the child welfare treatment plan (Roberts, 2002b). Young’s (2000) fourth form of oppression, cultural imperialism, is experienced through the child welfare system’s expectation that women of color live up to White, middle-class norms and values in order to have their

children returned from state care. Women who struggle to meet these standards often are negatively labeled and in danger of losing their parental rights (Pelton, 1989; Roberts, 2002b). Finally, minority women involved with the child welfare system also can experience violence, Young's (2000) fifth form of oppression, through ongoing disparaging remarks, threats of child removal, and threats of termination of parental rights by child welfare and other authorities. Although this type of violence is emotional and covert in nature, it nevertheless instills fear, damages the mother-child relationship, and humiliates poor minority mothers who have little power and few resources to overcome their position in society.

Table 2

*Young's (2000) Five Faces of Oppression*

Term	Definition
Exploitation	The relegation of vulnerable people and groups to menial labor and low paying jobs that solely benefit the dominant group.
Marginalization	The exclusion of vulnerable people and groups, called marginals, from the labor force.
Powerlessness	A state in which vulnerable people and groups lack skills, autonomy, and authority.
Cultural Imperialism	The universalization of the dominant group's experience at the expense of the others; leads to stereotyping.
Violence	Random, unprovoked attacks intended to damage, humiliate, or instill fear in persons or groups who have less power in society.

Specific to the oppression of African Americans in child welfare, Roberts (2003) equates the current child welfare system to an apartheid institution “designed primarily to monitor, regulate, and punish poor Black families” (p. 172). This is because Black children are twice as likely to be removed from their homes and placed into care as are

White children, and foster care is the main service offered to Black families. Roberts believes the placement of large numbers of Black children into state care constitutes a civil rights violation that destroys Black families and their communities. Furthermore, Davis (as cited in Roberts, 2003) explains that the large-scale disruption of Black families has been used throughout history as a chief tool of group oppression; therefore, the removal of large numbers of Black children from their homes and communities into foster care holds historical significance that must be questioned.

**Domestic violence.** A second risk factor for child maltreatment is the presence of domestic violence in the home (Chipungu & Bent-Goodley, 2004). In a review of the literature, Edelson (1999b) concluded that between 30%–60% of domestic violence cases in the U.S. also involved child maltreatment. In these cases, maltreatment occurs when children witness parental violence, become the targets of parental violence, or are neglected by parents who are preoccupied with the abusive relationship and unable to care for or protect their children (Goldman, Salus, Wolcott, & Kennedy, 2003). Women are most often the victims of intimate partner violence, and a government report by Greenfield et al. (as cited by Carter, 2003) indicates younger women and women in low-income households are at greatest risk. Research on the relationship between race and domestic violence is limited and varies depending on the year; however, rates of intimate partner violence for women of all races peaks at ages 20–24 (Rennison, 2000).

Exposure to domestic violence is detrimental to children and frequently leads to emotional, behavioral, and social problems that interfere with healthy development and well-being (U.S. DHHS, Child Welfare Information Gateway [CWIG], 2003a). Research shows children exposed to domestic violence often experience increased rates of



depression, anxiety, anger, and alcohol and drug abuse and decreased academic achievement (Edelson, 1999a). These children also are at greater risk of becoming violent themselves. Carter (2003) estimates 30% of children who witness domestic violence later become perpetrators of violence, either as adolescents or adults.

**Substance abuse.** A third risk factor believed to contribute to child maltreatment is parental substance abuse (U.S. DHHS, 1999). Although no one knows exactly how many children come into state care due to parental substance abuse, evidence suggests the number is high (Chipungu & Bent-Goodley, 2004). By McRoy's (2004) estimate, 75% of the children who enter foster care are placed for factors related to parental substance abuse. Studies also indicate that between one-third and two-thirds of child maltreatment cases involve substance use to some degree (U.S. DHHS, 1999).

Children who have a parent with a substance abuse problem are more likely to be removed from their homes than other children (CWIG, 2009b). The general explanation for this is that substance abuse hinders a parent's ability to think clearly, exercise good judgment, and protect their children from negative influences (Goldman et al., 2003). According to the U.S. DHHS (1999), children removed from their homes for parental substance abuse tend to come into care at a younger age and stay longer than children of parents who do not abuse substances. Although equal numbers African American and White women test positively for drugs after giving birth, African American women are 10 times more likely to be reported to CPS (Cross, 2008) and are more likely to have their children removed from their care (Roberts, 2002b). Roberts (2002b) attributes this discrepancy in part to the removal of drug-exposed newborns from indigent Black women, who are more likely to give birth in public hospitals that report positive infant

drug tests to local child welfare authorities. She explains that private doctors who treat middle- or upper-class women are less likely to test their patients for drug use and would be reluctant to turn them into child welfare authorities.

**Incarceration.** A final risk factor of child maltreatment that merits consideration is parental incarceration. According to a recent report by The Pew Center on the States (The Pew Charitable Trusts, 2008), the U.S. has the highest incarceration rate in the world with over 2.3 million adults imprisoned in 2008—approximately 1 out of every 100 Americans. Of these prisoners, the U.S. Department of Justice (DOJ; 2008) estimates 52% were parents to over 1.7 million minor children. The DOJ estimates that in midyear 2007, these adults were parents to over 1.7 million minor children (Glaze & Maruschak, 2008). In the DOJ's analysis of incarceration trends between 1991 and 2007, the number of incarcerated mothers grew by 122%, while the number of incarcerated fathers grew by 76% (Glaze & Maruschak, 2008). Nationally, the incarceration trend continues to rise for both sexes but at a much lower rate (Pew Charitable Trusts, 2008). Thus, more parents are being incarcerated than ever before with grievous consequences for their children.

Incarceration rates vary greatly by race and the disparate treatment of minorities in the criminal justice system is well-established (Sentencing Project, 2008). Fully two-thirds of incarcerated parents are racial minorities (Schirmer, Nellis, & Mauer, 2009). Black and Hispanic men have the highest incarceration rates with 1 in 15 Black men and 1 in 36 Hispanic men behind bars in 2008 (Pew Charitable Trusts, 2008). This is compared to 1 in 106 White men who are incarcerated. Similarly, Black and Hispanic women have higher incarceration rates than White women. In 2008, 1 in 100 Black women and 1 in 297 Hispanic women were incarcerated as compared to 1 in 355 White

women (Pew Charitable Trusts, 2008). This mass incarceration of minority parents leaves more families of color living in poverty and unable to provide adequately for their children. Even after their release from prison, these parents face major barriers in reclaiming their lives. This is because parents with criminal records are routinely stigmatized and excluded from applying for jobs, housing, public benefits, and other financial assistance that would stabilize their families (Hirsch et al., 2002).

Sentencing rates also vary by race, and the amount of time a parent serves in prison affects the outcomes of minority children in the child welfare system (Roberts, 2002b). In a meta-analysis of the relationship between race and prison sentencing, Mitchell and MacKenzie (1994) concluded African Americans and Latinos were sentenced more punitively than Whites, even after accounting for the defendant's criminal history and seriousness of the offense. Many criminal justice scholars trace this discrepancy in sentencing to a series of federal drug policies that began in the 1980s that called for the mandatory sentencing of certain drug offenses (Lurigio, 2004; Sentencing Project, 2008). These policies, also known as the "War on Drugs," were developed primarily to target crack cocaine sales and use in inner cities and led to extremely harsh prison sentences for a disproportionate number of African Americans (Sentencing Project, 2010). According to the executive director of The Sentencing Project, 80% of those charged with crack cocaine offenses over the past 20 years have been African American (Sentencing Project, 2010). Thus, African American and other minority children are likely to be separated from their incarcerated parents for longer periods of time than White children similarly situated (McRoy, 2004).

Having a parent who is incarcerated poses significant risks to children. In their study of the characteristics of children with incarcerated parents, Gabel and Shindledecker (1993) found that children with incarcerated parents were more likely to have been exposed to parental drug abuse than children whose parents had never been incarcerated. This is consistent with the findings of a U.S. DOJ (2008) report that found nearly half of all parents in the nation's prisons met the criteria for substance abuse or dependence. A recent study on the relationship between parental incarceration and child well-being shows children of incarcerated parents experience more material hardship, stigma, and residential instability and exhibit more behavioral problems than children of non-incarcerated parents (Geller, Garfinkel, Cooper, & Mincy, 2009). Although there are no reliable estimates of the numbers of children placed into foster care due to parental incarceration, research suggests that children with an incarcerated parent are four to five times more likely to be placed in the foster care system than those without an incarcerated parent (Princeton University, Bendheim-Thoman Center for Research on Child Wellbeing, 2008).

### **Chapter Summary**

In this chapter I introduced the disproportionality phenomenon in the child welfare system and its related concepts, including overrepresentation, underrepresentation, and disparity. I noted that most of the research and discussion about this phenomenon to date has focused exclusively on the problem of overrepresentation because of the overwhelming numbers of children of color affected. I presented the prevalence rates and risk factors that contribute to more children of color being involved with the child welfare system, including poverty, substance abuse, domestic violence, and

incarceration. Finally, I identified children and parents involved in the child welfare system as a population at risk due to the many forms of oppression they face. In the next chapter I provide a historical overview of the child welfare system in the U.S., describe how disproportionality and overrepresentation are measured, and introduce three theories that attempt to explain why the phenomenon exists.

## CHAPTER TWO: LITERATURE REVIEW

### **Introduction**

Historically, the U.S. has had a complex and checkered past in providing services to poor children and families, and especially to those of color. From the beginning, the services provided, or lack thereof, were a reflection of society's religious and moral values, as well as society's beliefs about the reasons for poverty and the character of the poor (Billingsley & Giovannoni, 1972). Racism and ethnocentrism also were prominent parts of this belief system, and many believe they continue to have a lingering effect on child welfare service delivery today (Billingsley & Giovannoni, 1972; McRoy, 2004). According to child welfare scholars, the American child welfare system never was designed to serve children and families of color (Billingsley & Giovannoni, 1972; Hill, 2004; Holt, 2001; McRoy, 2004); consequently, the plights of poor women and children of color have been largely ignored in historical texts. Early services provided to Black children were not considered until 1972, when Billingsley and Giovannoni published their seminal work on Black children in the American child welfare system (McGowan, 2005). Similarly, services provided to Native American children were not questioned until the passage of the Indian Child Welfare Act of 1978 (Holt, 2001). Thus, what follows is a historical review of the U.S. child welfare system and its policies with a particular focus on the account of African Americans and other children of color.

### **Seventeenth and Eighteenth Centuries**

The origins of the modern child welfare system in the U.S. can be traced back to the 17th and 18th centuries to the first English settlers (Day, 2009; McGowan, 2005). These early settlers primarily were concerned with religious freedom and survival and so

placed a high value on piety and hard work (McGowan, 2005). The concept of childhood was unknown at this time, and children were expected to work alongside their parents in supporting their families (McGowan, 2005). Adults and children who were incapable, unwilling, or unable to find work were viewed as a threat to the safety and moral fabric of the entire community (Day, 2009). Thus, poverty was regarded as a personal failing brought on by immorality, and the assistance provided was done on a begrudging basis (McGowan, 2005).

The social provisions provided to the poor during the Colonial period stemmed from English Poor Law tradition that had three major tenets: local responsibility, family responsibility, and categorization of the poor (Day, 2009). The tenet of local responsibility meant that a person had to be a resident of the town, either by owning property or having lived in the town for a set number of years, before becoming eligible for poor assistance. This requirement prevented newcomers and immigrants from becoming town dependents. The second tenet, family responsibility, required families to enforce community norms and take financial responsibility for their poor and sick relatives. The third tenet required the poor be categorized as either “worthy” or “unworthy” of the town’s assistance. The worthy poor included widows, the aged, and the ill or incapacitated and were considered worthy of assistance because their poverty was due to no fault of their own (Day, 2009). This group often was placed with relatives or offered “outdoor relief,” a form of in-kind aid that allowed them to remain in their homes (Crosson-Tower, 2007). If neither were possible, larger towns built poorhouses that offered minimal care to their discarded people (Day, 2009).

The unworthy poor included healthy, unemployed men and women, vagrants, strangers, and the mentally impaired (Day, 2009). This group was considered unworthy of assistance because their poverty was attributed to their own personal defects. These persons usually were sent to live in poorhouses, auctioned, or indentured to work in exchange for their necessities (Day, 2009). Poor parents who were labeled unworthy were blamed for their hardship and publicly condemned for being inept at raising their children (McGowan, 2005). These parents lost all rights to plan for their children's care and were viewed as having abrogated their parental responsibilities. According to Billingsley and Giovannoni (1972), the thinking at the time was that the non-poor—White middle- and upper-class citizens—were superior, knew what was best for the poor, and therefore had an obligation to reform the poor for the betterment of their communities.

Orphaned and dependent children posed unique problems for the early settlers, and this group was recognized as needing special assistance to prevent them from falling into poverty (McGowan, 2005). Incredibly, with no one to care for them, these children became property of the town and generally were sent to poorhouses until the age of 8 or 9 when they were indentured to learn a trade (Billingsley & Giovannoni, 1972). According to McGowan (2005), these arrangements “were designed to insure that children were taught the values of industriousness and hard work and received a strict religious upbringing” (p. 12). Although poor Black children were among these early settlers, they were unrecognized completely and most were subsumed under the institution of slavery (McRoy, 2004). Those who were “free” also were indentured and, evidence shows, treated more harshly than their White counterparts (Billingsley & Giovannoni, 1972).



In the 18th century the settlers also encountered Native American people; however, the U.S. government regarded them as “savages,” forced them from their lands, and relegated them to reservations (Ambrosino, Ambrosino, Heffernan, & Shuttlesworth, 2008). According to Holt (2001), during this time an extensive network of Native American relatives made it nearly impossible for an Indian child to be orphaned. This is because dependent children who were not being cared for by their parents were customarily adopted into an existing family network.

### **Nineteenth Century**

During the late 18th and early 19th centuries, several important events brought attention to the plight of poor children and families in America. Massive European immigration and U.S. migration from rural to urban areas created large numbers of displaced poor children and families looking for work (Ambrosino et al., 2008). As a result, “cities became human warrens of crowding, disease, plagues, crime, and unemployment, with little if any minimum sanitation or safety standards” (Day, 2009, p. 109). These social problems prompted the settlement house movement in which community action centers were built in slum neighborhoods to help immigrants address their troubles and adjust to life in the U.S. (Ambrosino et al., 2008).

Another event, the Industrial Revolution, led to greater awareness of cruel child labor practices, and for the first time people began to view children differently from adults (McGowan, 2005). This provoked a child saving movement in which children were removed from dangerous environments, such as poorhouses and workhouses, and instead placed where they could receive more appropriate care (Day, 2009). The idea of the social institution arose during this time and resulted in the development of

orphanages, reform schools, penitentiaries, and eventually hospitals. Orphanages for children usually were run by private religious and charitable organizations and these sprouted up across the U.S. (Billingsley & Giovannoni, 1972). While poor Black children were deliberately excluded from the orphanages, poor Native American children were not. In the mid-1800s, orphanages and boarding schools were established specifically to “civilize” poor Native American children through education and enculturation of Western values (Holt, 2001). Captain Pratt, credited with starting the boarding school movement, believed these schools would assimilate Native Americans into White society just as the institution of slavery had done for African Americans (Brown Foundation, 2001). The boarding school movement continued well into the 20th century during which time more than 100,000 Native American children were forced to leave their families and reservations (Smith, 2007).

Following the Civil War, the abolition of slavery created many more poor children and families in need of assistance (Billingsley & Giovannoni, 1972). Despite this fact, Black children continued to be excluded from White orphanages and relegated to segregated poorhouses and prisons (McRoy, 2004). Black families unable to provide for their children also relied heavily on extended family networks, churches, and benevolent societies (Roberts, 2002b). Although the first Black orphanages appeared during the mid-19th century— the Colored Orphan Asylums in Philadelphia and New York—both later were burned in acts of racial violence by angry White mobs (Billingsley & Giovannoni, 1972).

Billingsley and Giovannoni (1972) credit the philosophies of racism and social Darwinism for the continued exclusion of Black children from these early child services.

They note these ideologies were complementary and reinforced the belief that the poor, and the Black, were unfit and inferior. Additionally, they state: “The belief in individual responsibility for poverty did not provide for an understanding of the massive socially and environmentally engendered poverty that followed emancipation” (Billingsley & Giovannoni, 1972, p. 40). Indeed, it would be decades before the needs of Black children and families finally would be recognized.

A number of organizations established during the mid- to late-19th century were crucial to eventually changing the landscape for poor and maltreated children. The Children’s Aid Society in New York, founded in 1853, publicly recognized the difference between children and adults and recommended orphaned children be provided with an education, work, and a wholesome family atmosphere (McGowan, 2005). They also recognized a difference between poor children and delinquent children and advocated that these children be cared for differently from one another. This led to the development of free foster homes in which poor, urban children were placed in rural home-like settings and expected to work for a family until they reached adulthood (McRoy, 2004). Although similar to the indenture system, the word “free” meant the family was not paid and the child could, in theory, leave at any time (Billingsley & Giovannoni, 1972). Between 1854 and 1929 over 200,000 orphaned, abandoned, and homeless children, many of whom were European immigrants, were sent to live in these foster homes in the Midwest via the Orphan Train movement (National Orphan Train Complex, n.d.). These children ranged from ages 6 to 18 years (Children’s Aid Society, n.d.), and countless numbers of them were mistreated, ran away, died, or just disappeared (Day, 2009). Critics of the movement argued that the foster homes were no different than the indenture system and

that the foster parents were ill-prepared to instruct the children (McGowan, 2005).

According to Billingsley and Giovannoni (1972), Black children largely were excluded from these foster homes, unless they could pass as White, because pro-slavery citizens worried the free labor of poor White and immigrant children would make the institution of slavery unnecessary.

In 1875, The New York Society for the Prevention of Cruelty to Children was established as the first child protection agency in the world (n.d.). This agency was an integral part of the state government's recognition that they had an obligation to intervene in situations where children were abused or neglected (McGowan, 2005). A few years later in 1877, Charity Organization Societies set out to organize and evaluate assistance to the poor by investigating the family's needs on a case-by-case basis to determine their worthiness of aid (Goodwin, 2004). This was done by "friendly visitors," the forerunners to social workers, who offered advice, guidance, and oversaw the family's progress. These societies opposed providing direct financial assistance to the poor because they feared this would encourage laziness and immorality (McGowan, 2005). Although the services provided by Charity Organization Societies allowed more poor children to remain in their homes, Richmond and Hall (as cited in Billingsley & Giovannoni, 1972) estimate that half of the Charity Organization Societies refused to provide assistance to poor Black children and families.

### **Twentieth Century**

Concerns over the breaking up of families and removal of children for reasons of poverty did not arise until the first White House Conference on Children in 1909 (McRoy, 2004). At this conference, early child welfare reformers re-affirmed that

families, and not institutions, were the ideal environments for rearing children. Herrick (2009) reports “this was a reversal of practices long in effect that forced impoverished female-headed families apart by placing their children in orphanages or other institutions” (p. 124). Consequently, between 1910 and 1960 the numbers of children placed in institutional settings declined, while the number of children placed in family settings increased. By 1960, Barr (as cited by The Adoption History Project, n.d.) reports approximately 70,890 children still lived in institutions, and 270,000 children lived in foster families or other adoptive homes. The White House Conference on Children in 1909 also stimulated the development of the U.S. Children’s Bureau (i.e., U.S. DHHS, ACF) in 1912, the first federal agency devoted to advocating for children (McGowan, 2005). The agency’s purpose was to investigate and report on infant mortality, birth rates, orphanages, juvenile courts, and other social issues related to children at that time (U.S. DHHS, n.d.). Several years later, in 1920, the national CWLA was created as a coalition of private and public agencies to expand services to children and families and ensure the quality of those services (McGowan, 2005). This organization, along with the American Association for Organizing Social Work (later, the Family Service Association of America), helped to establish the first child welfare practice standards and continues to influence the development of child welfare programs, research, education, and legislation to this day (Crosson-Tower, 2007).

Another significant development of the 1920s was the beginning of formal adoptions (McGowan, 2005). These adoptions were developed as a service to help wealthy, White couples who were unable to have children, however, and not as a service for poor, dependent children who needed care (Adoption History Project, 2007a).

Consequently, the only children available for adoption at this time were young, healthy, White children born out of wedlock to middle- or upper-class women (McGowan, 2005). Black childless couples and dependent Black children were ineligible for adoption services (McGowan, 2005). Thus, until the 1950s when child welfare workers began to experiment with mixed race adoptions, African Americans relied heavily on informal adoptions to care for their own (Billingsley & Giovannoni, 1972; McGowan, 2005).

With the passage of the Social Security Act in 1935, the modern child welfare system was born, and the federal government assumed responsibility for addressing the social ills of its citizenry (McGowan, 2005). In the years before its passage, the Children's Bureau (i.e., U.S. DHHS, ACF) and the National Urban League played pivotal roles in calling attention to the plight of Black children and families. In 1929, at the third White House Conference on Youth, the National Urban League highlighted the discrimination Black parents faced in obtaining social assistance due to the arbitrary rules and policies that worked against them (McRoy, 2004). Accordingly, in crafting the Social Security Act of 1935, the Children's Bureau (i.e., U.S. DHHS, ACF) advocated for provisions to help all women and children, regardless of race, and to make states responsible for the delivery of welfare services (McGowan, 2005). The Social Security Act and its subsequent provisions had major impacts on the structure and financing of child welfare services and recognized the fact that individuals could be poor due to social factors over which they had little or no control (Billingsley & Giovannoni, 1972).

A major component of the 1935 Social Security Act that directly affected poor families was the development of mothers' pensions (Ambrosino et al., 2008). These pensions were renamed in 1960 to Aid to Families with Dependent Children, and then

replaced in 1996 by the Temporary Assistance to Needy Families block grant program (O'Neill Murray & Gesiriech, n.d.). The pensions provided financial assistance to fatherless families with dependent children and were extended eventually to families with a permanently or totally disabled parent (McGowan, 2005). However, because of how the pensions were funded, states were allowed to set guidelines to determine who would be eligible to receive these benefits. Consequently, many states in the South adopted "suitable home" or "man-in-the-house" policies to weed out what were considered "immoral" homes from being eligible for these benefits (O'Neill Murray & Gesiriech, n.d.; McRoy, 2004). These homes typically were defined as homes where a child had been born out of wedlock or the mother was cohabitating with a man who was not the child's biological father; thus, these discriminatory policies routinely were used to rule out many Black families from receiving public welfare benefits (McRoy, 2004). In 1960, in an unprecedented move that caught the U.S. government's attention, the state of Louisiana suddenly expelled 23,000 children from its welfare rolls after determining the children were born out of wedlock (O'Neill Murray & Gesiriech, n.d.). According to Lawrence-Webb (1997):

The expulsion of clients and their children from the welfare rolls had extreme significance for the child welfare system because these children were then classified as being neglected due to a lack of adequate income to provide properly for them. (p. 12)

The public outcry that followed led to the passage of the Flemming Rule in 1962, which mandated states either provide services to make the home suitable or move the child to a suitable placement while continuing to provide financial support on behalf of the child (O'Neill Murray & Gesiriech, n.d.). Either way, states could no longer simply ignore the needs of poor children from unsuitable homes, and states were offered federal financial

assistance to help with the costs of child removal and out-of-home placements (Lawrence-Webb, 1997).

The public's heightened awareness of the needs of families was accompanied by increased organization and professionalization of child welfare services, as well as increased intervention in the lives of children and families (McGowan, 2005). Yet, in spite of these steps forward, the belief that poor children needed to be saved from their neglectful families and instructed in proper moral values persisted (McRoy, 2004). Child welfare workers continued to emphasize child removal over providing in-home services, and under the Flemming Rule, workers now had financial incentives to remove children from their homes (Lawrence-Webb, 1997). Thus, the Flemming Rule, although intended to help poor women and their children, in reality further weakened family systems (Lawrence-Webb, 1997; McRoy 2004). McRoy (2004) states, "culturally insensitive service providers quickly removed children from what they judged to be 'undesirable family situations' and placed them in foster care" (p. 39–40). Consequently, by 1963, the majority of children in foster care (81%) were there because their parents were unmarried or because they came from "broken homes" (Lawrence-Webb, 1997). Contributing to these high numbers was the Indian Adoption Project, which, between 1958 and 1967, removed thousands of American Indian children from their families in order to place them into White foster homes (Cross, 2008). This was done in an attempt to help these children escape poverty and other social ills affecting Native Americans on reservations (Cross, 2008). Thus, during this time period, African American and Native American children increasingly became represented among the foster care population (McRoy, 2004).



As the numbers of minority children in foster care increased and the Civil Rights Movement progressed, children of color slowly gained more access to social services (McRoy, 2004). Child welfare workers also began to recognize the need for permanency planning in order to prevent minority children from languishing in foster care for years (Crosson-Tower, 2007). This recognition coincided with the introduction of contraceptives, liberalized abortion laws, and the increasing acceptability of unwed parenthood, which led to fewer White infants being available for adoption (McRoy & Zurcher, 1983). For these reasons, private adoption agencies began to promote adoptions of Black children by White couples, also known as transracial adoptions (McRoy, 2004). According to The Adoption Project (2007a), transracial adoptions peaked around 1970 when approximately 2,500 such adoptions took place, and the majority of these children were Black or racially mixed (McRoy, 2004).

In the 1970s, several laws challenged American ideas about what was best for children and families. Specifically, in 1972 the National Association of Black Social Workers (NABSW), in response to the experiences of American Indian children, issued a position statement advocating against transracial placements of Black children and equated the practice with cultural genocide (McGowan, 2005). In their view, “the developmental needs of Black children are significantly different from those of white children” in our society, and “only a black family can transmit the emotional and sensitive subtleties of perception and reaction essential for a black child’s survival in a racist society” (Adoption History Project, 2007b, para. 3). The organization disputed the notion that there were not enough Black couples to adopt Black children and criticized the use of White middle-class standards to evaluate minority adoptive applicants

(Crosson-Tower, 2007). The NABSW also asserted that Blacks routinely were screened out<sup>4</sup> from the adoption process because they lacked the income, education, and residential status of the White middle-class lifestyle (Adoption History Project, 2007b). In the years that followed, foster care and adoption agencies began to emphasize same-race placements; but, in 1994 the NABSW modified its 1972 position acknowledging that in some cases transracial placements were acceptable (Evan B. Donaldson Adoption Institute, 2008).

Following the NABSW's lead, in 1978 the Indian Child Welfare Act (ICWA) was passed, which prioritized the placement of American Indian children with foster or adoptive families in the same tribe or another tribe before considering placement elsewhere (McGowan, 2005). The act also encouraged tribal court arbitration of child custody proceedings involving American Indian children (Race Matters Consortium, 2002). This act marked a major shift in child welfare policy because states now were expected to protect and honor American Indian families instead of forcing them to assimilate into White culture (McGowan, 2005). According to Satz and Askeland (2006):

The NABSW's stance and the ICWA itself were responses to the fact that poverty and racism place great stress on nonwhite families, and the foster care and adoption systems were designed by whites who have not been adequately trained in the histories and cultural integrity of nonwhite peoples in the United States. (p. 55)

Although the ICWA was an integral step toward giving American Indian tribes the authority to plan for the care of their own children, the federal government provided little funding for child welfare agencies and tribes to implement the ICWA (Race Matters Consortium, 2002). As a result, child welfare workers received little training in carrying

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<sup>4</sup> The "screening in" and "screening out" process is done over the phone and is how the workers determine which cases they actually need to investigate. Screened in refers to those chosen or selected for investigation; screened out refers to those who are eliminated for investigation.

out the law, and many tribes, without financial resources, were forced to relinquish their rights to tribal children who lived off the reservation (Race Matters Consortium, 2002).

Occurring between these two events, the Child Abuse Prevention and Treatment Act (CAPTA) of 1974 called for the mandatory reporting of child abuse and provided federal funding to states for research into child maltreatment (CWIG, 2004). To qualify for funding, each state was required to pass laws for mandated reporting of child maltreatment (McGowan, 2005). Unfortunately, the act did not provide a standardized definition of child abuse and neglect but left this up to each individual state to determine. According to McGowan (2005), the lack of a consistent definition has caused numerous problems for clients, social service, and court personnel over the years because some states offer exceptions in their reporting laws that excuse certain acts or omissions from the legal definitions of child abuse and neglect (CWIG, 2009a). In 12 states and the District of Columbia, for example, the inability to provide financially for a child is exempted from the definition of neglect. Additionally, in 16 states and the District of Columbia, physical discipline of a child that causes no bodily injury is exempted from the definition of abuse (CWIG, 2009a). McGowan (2005) notes poor federal funding of the act also has driven many states to emphasize child abuse reporting over its prevention and treatment functions, which has resulted in more children being brought into state care (McRoy, 2004; Murray & Gesiriech, n.d.).

As the number of children entering state care continued to increase so did concern that too little was being done to find permanent homes for these children (Murray & Gesiriech, n.d.). This led to the passage of the Adoption Assistance and Child Welfare Act in 1980 that mandated states create programs and make procedural reforms to

provide in-home services, prevent foster care placement, and facilitate family reunification following placement (McGowan, 2005). This legislation was significant because it required states to make “reasonable efforts” to keep families together instead of moving too quickly towards out-of-home placement (McGowan, 2005). According to Roberts (2002b), this landmark legislation altered the focus of child welfare from one of saving children to that of preserving children in their families; however, she adds that “although child welfare agencies abandoned an official policy on removing children on the grounds of poverty alone, they never fully embraced the policy of supporting poor families” (p. 104). Poor federal funding of the act meant programs aimed at prevention and providing in-home services were never fully realized (Harrison & Johnson, 1994). Still, the legislation decreased the number of children in foster care and their average length of stay for a brief time in the early 1980s (McGowan, 2005).

In the mid to late 80s reports of child abuse and neglect drastically increased as did the number of children in foster care (McGowan, 2005). Although the reasons for this are not entirely clear, Roberts (2002b) points to the federal government’s weak investment in family preservation services. Murray and Gesiriech (n.d.) suggest the poor economy, the crack cocaine epidemic, AIDS, and higher incarceration rates among women offenders contributed to these increases. Regardless of the reasons, between 1986 and 1995 the number of children in foster care nearly doubled—from 280,000 to 500,000 (Murray & Gesiriech, n.d.).

During the early 90s, several forces converged to shift the focus of child welfare away from family preservation towards child protection. According to McGowan (2005), a conservative ideology arose that questioned the success of family preservation efforts

and once again blamed poor parents for their predicaments. Lawmakers also challenged the use of race-matching policies that sought to place Black children with Black foster and adoptive parents (Roberts, 2002b). These policies, previously viewed as good social work practice, now were seen as a barrier to finding permanent homes for minority children in foster care. These issues led to the passage of the Multiethnic Placement Act (MEPA) of 1994 that prohibited states from denying or delaying the placement of a child for reasons of race or ethnicity and required states to recruit adoptive and foster parents from different racial and ethnic backgrounds which more closely resembled the children in care (Murray & Gesiriech, n.d.). Lawmakers hoped the MEPA would decrease the length of time children waited to be adopted, prevent racial discrimination in the placement of children, and increase the number of foster and adoptive parents who could meet these children's needs (McGowan, 2005). In 1996, the act was amended by the Interethnic Placement Provisions to prohibit all agencies from considering race or ethnicity in making placement decisions for children (Murray & Gesiriech, n.d.).

Roberts (2002b) disagrees that the MEPA was developed to meet the needs of Black children in foster care. Instead, she asserts the assault on family preservation, race-matching policies, and subsequent passage of the MEPA was intended to increase the supply of adoptable minority children for White couples. She notes American adoption policy always has served the needs of White couples seeking to adopt over the needs of children and that "all of the literature advocating the elimination of racial considerations in child placements focuses on making it easier for white people to adopt Black children" (p. 166). Furthermore, "transracial adoption advocates don't mention the possibility of Blacks adopting white children" (Roberts, 2002b, p. 167). Although

transracial adoptions and racial-matching remain controversial issues to this day, the general consensus of many child welfare professionals is that race is important and “children’s best interests are served—all else being equal—when they are placed with families of the same racial, ethnic, and cultural background as their own” (Brooks, Barth, Bussiere, & Patterson, 1999, p. 169).

In 1997 the Adoption and Safe Families Act (ASFA) was passed in an effort to decrease the amount of time children waited for permanent placement, increase permanency options, and establish performance measures to improve state accountability in finding permanent homes for children (O’Neill et al., n.d.). The act mandated that children’s safety be the primary concern of child welfare workers, over and above their efforts to preserve and reunify children with their parents (McGowan, 2005). One of the most significant provisions of the law was the establishment of a timetable that requires states to file a petition for the termination of parental rights once a child has been in care for 15 of the previous 22 months. For parents who are incarcerated, this strict timetable collided with mandatory drug sentencing policies that ensured African American parents and other parents would not be able to resume their parental responsibilities within the ASFA timeframe (Roberts, 2002b).

ASFA also provided extra funding to states to increase their number of adoptions (McGowan, 2005). This created financial incentives for terminating parental rights and adopting children out to permanent homes as soon as possible. Although exemptions are allowed in certain cases (Roberts, 2002b), the law also identifies situations in which child welfare workers are not required to make reasonable efforts to preserve or reunify families (McGowan, 2005). This is problematic because similar to the Flemming Rule,

the passage of the ASFA made child removal and adoption the official solution to the foster care crisis (Roberts, 2002b). According to Roche (2000), as a result of this legislation, the number of adoptions increased 28% between 1998 and 1999, and in 2000, 42 states earned \$20 million in federal adoption bonuses.

### **Twenty-first Century**

The first part of the 21st century has been relatively quiet in regards to child welfare policy development. In 2000, the Child Abuse Prevention and Enforcement Act was passed to assist law enforcement in providing timely and accurate criminal history information to child welfare organizations and other agencies engaged in protecting and serving children (McGowan, 2005). The act also allows state law enforcement agencies to use federal grant money to enforce child abuse laws and to promote programs for the prevention of child abuse and neglect. Although the law does not directly impact the lives of children, it is a positive step in the right direction because it encourages law enforcement and child welfare agencies to share information and work together to ensure the safety of America's children. The law also acknowledges what many child welfare and criminal justice workers have known for years: the two systems are linked explicitly.

To review, for most of American history the physical and emotional needs of poor children, and especially children of color, largely were ignored. Although various attempts were made in the 18th, 19th, and 20th centuries to help poor children and their families, these attempts often were misguided and rooted in cultural and racial bias and resulted in the destruction of familial ties. This is especially true for African American and Native American children who traditionally were viewed as inferior and in need of rescuing from their deficient parents. As a result of this bias, Davis and Cloud-Two Dogs

(2004) state, “American public policies have historically created, maintained, and exacerbated socioeconomic inequality along racial, ethnic, and social class lines” (p. 3). Furthermore, the interconnected nature of these policies has disadvantaged families of color across multiple systems, resulting in a cumulative effect upon their lives. Evidence of this is seen in the public welfare arena, for example, in policies such as the mothers’ pensions programs that unnecessarily discriminated against women of color by preventing them from qualifying for public assistance. This action left more African American women living in poverty and unable to care for their children. According to Hill (2006), welfare laws and child welfare policies inherently are linked because most of the children in foster care come from families that rely on or qualify for public assistance. Similarly, in the criminal justice system, harsh drug sentencing policies have collided with child welfare policies, and this has resulted in fewer parents of color reuniting with and caring for their children. This is because it is difficult for a Black incarcerated parent to reclaim his/her child(ren) and their lives when the parent typically is sentenced to a term longer than 15 months, resulting in a separation greater than that allotted by ASFA (Roberts, 2002b). While many of these policies sound reasonable and were designed with good intentions, the fact remains that minorities are unduly and negatively impacted. Within this context, it is easy to understand how social policies can contribute to the disproportionate representation of children of color in the child welfare system.

### **Empirical and Theoretical Knowledge**

To fully appreciate the empirical research on this problem it is important to understand how disproportionality is measured and the epistemological influences that guide the discussion. Due to its complexity, researchers have relied primarily on national



data sources to measure the problem (Hill, 2006). These data sources are reviewed briefly here in order to provide a more thorough understanding of the origins of child welfare data. The statistics derived from these sources are based almost exclusively on quantitative research methods and are what guide most child welfare research.

### **National Data Sources**

The child welfare system has two federal reporting systems: the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the NCANDS. Both systems collect case-level information about children in child welfare but are quite different.

AFCARS is a federally mandated system that tracks data specifically on foster care and adoptions (Hill, 2006). This data is reported annually and allows for the monitoring of permanency outcomes for children in all 50 states and the District of Columbia (U.S. DHHS, National Resource Center for Child Welfare Data and Technology, 2008). The system looks at five specific areas: foster care re-entries, stability of placements, length of time to reunification, length of time to adoption, and length of stay in foster care (Michigan Department of Human Services, 2002). This information enables the federal government to determine each state's level of compliance with the national child welfare standards of safety, permanency, and well-being for children in foster care (National Resource Center for Child Welfare Data and Technology, 2008). It also is used for making policy and budget decisions. The primary limitation of AFCARS is that the data is often incomplete, especially for children who leave care through reunification with their biological families or through arrangements with kin (Wright & Freundlich, 2005).

The system records the characteristics of abuse and neglect referrals made to CPS agencies such as the types of maltreatment reported, dispositions of the investigations,

risk factors of the child and the caregivers, and the services provided to each family as a result of the report (U.S. DHHS, Administration for Children and Families [ACF], 2011). Findings are published each year by the Children's Bureau (i.e., U.S. DHHS, ACF) in its "Child Maltreatment" report series. As with the AFCARS data, NCANDS is an important source of information for the federal government and often is cited in publications and reports. Yet, due to the voluntary nature of the program, a few states usually fail to report NCANDS data. The system records the characteristics of abuse and neglect referrals made to CPS agencies such as the types of maltreatment reported, dispositions of the investigations, risk factors of the child and the caregivers, and the services provided to each family as a result of the report (U.S. DHHS, ACF, 2011).

The second system, NCANDS, is a federally sponsored, voluntary reporting system that tracks the quantity and nature of child abuse and neglect referrals from CPS calls across the U.S. (Hill, 2006). The data is reported annually and focuses on safety outcomes by looking at incidents of child abuse and neglect and the recurrence of maltreatment (Michigan Department of Human Services, 2002). For 2007<sup>5</sup>, a total of 48 states reported case-level data, up from 44 states in 2004 (U.S. DHHS, ACF, 2009).

Census data is an essential resource for child welfare researchers because it allows for demographic comparisons between children involved in the child welfare system and those in the general population. The U.S. Census Bureau collects information on the number, geographic distribution, and social and economic characteristics of the population including official estimates of income and poverty (U.S. Department of Commerce, Census Bureau, 2006). The census categories most commonly used by child welfare researchers include age, gender, housing, income, and racial categories.

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<sup>5</sup> The most recent report available on the ACF website.

Information on specific demographic areas also can be accessed for making comparisons between regions. The danger in using census data is that it is only collected every ten years, and minorities and the poor often are missed in the official count. For the 2000 census, the Census Bureau estimated it missed at least 6.4 million people and may have counted at least 3.1 million people twice (Schmitt, 2001). These errors have a huge impact on the distribution of government services and can negatively impact disadvantaged citizens. The 2010 census, considered the most accurate in American history, is said to have wholly undercounted minorities, young children, renters, and middle-aged men (U.S. Census Bureau, 2012). Specifically, the Census Bureau believes it undercounted 2.1% of the Black population, 1.5% of Hispanics, and 4.9% of American Indians and Alaskan Natives. These errors have a huge impact on the distribution of government services and can negatively impact disadvantaged citizens.

Another primary source of information in child welfare is the National Incidence Studies (NIS). These studies are a congressionally mandated periodic research effort designed to obtain more accurate estimates of the incidence of child abuse and neglect in the U.S. and to measure changes from one study to the next (Hill, 2006). The studies have been conducted at four points in time—1980, 1986, 1993—and the NIS-4 was completed in 2010 (Sedlak et al., 2010). An important goal of the NIS is to collect information on abused and neglected children who are not reported to CPS. To do this, researchers recruit and train community professionals to report maltreatment to the NIS whether the case is reported to CPS or not (Hill, 2006). The NIS-4 consisted of a representative sample of more than 10,791 professionals in 1,094 agencies serving 122 counties in the U.S. (Sedlak et al., 2010). The analysis examined the number of children harmed, child

and family characteristics, perpetrator characteristics, report sources, and CPS investigations. Although many of the results of the NIS-4 were consistent with those of previous NIS reports, one surprising finding was the presence of statistically significant differences in the overall maltreatment rates of African American children as compared to White and Hispanic children (Sedlak et al., 2010). This finding was unexpected because all three previous waves of the NIS found no overall differences in child maltreatment between African American and White families (Barth, 2005; Hill, 2005a). The authors of the NIS-4 attribute this change to greater precision in estimating incidents of maltreatment, thereby allowing the statistical tests to detect more underlying differences (Sedlak et al., 2010). They further add that while overall child maltreatment rates declined from the NIS-3 to the NIS-4, these declines did not occur equally for all races. Critics of the NIS question the accuracy of the findings considering that the studies only capture a fraction of maltreated children due to the underreporting of child abuse in general (Bartholet, 2009); however, these studies provide the most reliable estimates of child maltreatment across the U.S. (Barth, 2005).

Finally, the National Survey of Child and Adolescent Well-Being is the first national longitudinal probability study of children involved in child welfare services (U.S. DHHS, ACF, 2010b). The study was commissioned by Congress as part of the Personal Responsibility and Work Opportunities Act of 1996 and is intended to track the health status and experiences of children and families served by the child welfare system (McCarthy & Woolverton, 2005). Unlike the other national data sources mentioned, National Survey of Child and Adolescent Well-Being has an interview component in which parents, caregivers, caseworkers, and children are questioned using a computerized

technique (U.S. DHHS, ACF, 2010b). Presently, the data is released on a limited basis due to the longitudinal nature of the study and its complex design; therefore, it is not available to most researchers or child welfare professionals at this time (U.S. DHHS, ACF, 2010b). However, for those with access, the National Survey of Child and Adolescent Well-Being data is an important source of information for investigating the problem of disproportionality in child welfare.

### **Epistemological Influences**

Literature on the disproportionality of children of color in the child welfare system has been shaped largely by three epistemological paradigms: post-positivism, interpretivism, and critical theory. The influence of these three paradigms and their relationship to the literature is briefly reviewed here.

**Post-positivism.** Most of the research on disproportionality to date has utilized quantitative methodologies that stem from a post-positivist perspective; consequently, this perspective has been and continues to be the most powerful in developing the disproportionality knowledge base. Studies initiated from this perspective mainly have been descriptive and focused on defining terms and using statistical methods to measure prevalence rates and risk factors (Hill, 2006). The majority of these studies have been funded by the federal government and an influential coalition known as the Center for the Study of Social Policy (CSSP, n.d.). The Alliance for Racial Equity in Child Welfare was established in 2004 to develop a national, multiyear campaign to address racial disparities and reduce the disproportionate representation of children of color in the nation's child welfare system (CSSP, n.d.). It continues to provide private funding for the research effort and considers bias in child welfare policies and discrimination by caseworkers to

be two important causes of disproportionality in child welfare (Roberts, 2002a). Bartholet (2009) notes the CSSP-Alliance has had a major impact on shaping the discourse on racial disproportionality and believes this could be problematic if African American and other children of color are maltreated at higher rates than non-minorities, as some researchers suspect.

**Interpretivism.** Unlike post-positivism, interpretivism has had little influence on the development of knowledge in this area and qualitative methodologies largely have been ignored by disproportionality researchers. This is unfortunate because qualitative methods are ideal for describing and understanding complex social phenomena and the context in which they occur (Creswell, 2007). In a search of three large databases (JSTOR, Social Service Abstracts, Sociological Abstracts), only four qualitative studies directly exploring the disproportionality problem were found (Dettlaff & Rycraft, 2008; Michigan Department of Human Services, 2009; Roberts, 2008; U.S. DHHS, ACF, 2003). In each of these studies the researchers utilized focus groups and in-depth interviews to elicit participants' understanding of the problem and its connection to issues of race, class, and gender. Additionally, the participants—many of whom were local community members—identified changes in the child welfare system that could possibly reduce the overrepresentation of children and families of color.

Dettlaff and Rycraft (2008) view the lack of qualitative studies investigating disproportionality in child welfare as disconcerting because state and national data sets lack the robust information essential to fully explaining and understanding the problem. Additionally, quantitative data alone fails to give voice to oppressed populations who are most affected by the problem. Further qualitative inquiry on the disproportionality

phenomenon would provide a more holistic account of the problem and could address many of the areas identified by child welfare researchers as needing further study. Some of these areas include eliciting the perspectives of families, caseworkers, and supervisors of color (Roberts, 2003); uncovering hidden assumptions and biases about families of color (Harris & Hackett, 2008); identifying protective factors in communities of color (U.S. DHHS, ACF, 2009); examining the role and meaning of culture in providing services and making child welfare decisions (Elliott & Urquiza, 2006); and further delineating the variables of race, ethnicity, class, and gender (Derezotes & Hill, n.d.).

**Critical social theory.** Critical social theory, an offshoot of interpretivism, has helped to frame the disproportionality problem by calling attention to inequitable policies and institutional racism in the child welfare system. In fact, Roberts (2003) believes the problem should be viewed as a group-based civil rights violation and has called the child welfare system an “apartheid institution...designed primarily to monitor, regulate, and punish poor black families” (p. 172). She notes that removing children from their homes and placing them into foster care is the main service provided to African American children and that disproportionality in child welfare is linked intricately to issues of race and class. Furthermore, Roberts (2003) asserts the child welfare system subjugates African American people and disrupts their families and communities—the key tools of oppression. From this viewpoint, the disproportionality of African American children in child welfare is seen as a continuation of the marginalization and dominance of African American people by those in power.

In reviewing the literature, critical theory is never mentioned explicitly but often alluded to in theoretical articles or studies which focus on organizational and systemic

factors that foster inequitable treatment in the child welfare system. Cross (2008), for example, asserts the pervasive negative outcomes for children of color involved in the child welfare system “compels that we critically examine the values and practices in the field and move forward with a new strategy” (p. 14). She recommends a truth and reconciliation process in which the child welfare field examines the negative consequences of its policies, acknowledges the harm done to minority families, and embraces culturally different ways of healing. According to Brookfield (2005), examining and acknowledging the harms done by dominant groups against subordinate groups is a central theme of critical theory. In another example, Dettlaff and Rycraft (2008) identify factors in child welfare agencies that create a climate of fear and cultural bias for caseworkers and administrators. The authors recommend child welfare agencies share power with minority communities and create community-based family service centers that emphasize local support and prevention. Similarly, Roberts (2008) explored the impact of one child welfare agency on a Chicago neighborhood and concluded that “to end racial inequity and improve child welfare we need to transform the child welfare system into a community-based institution that generously and non-coercively supports families” (p. 148). Thus, in both of these studies the researchers examine and critique our current child welfare system and imagine a new community-based system that serves everyone equally. This envisioning of a more equitable system that empowers children and families in their communities is another characteristic of critical theory (Brookfield, 2005).

In summary, greater emphasis on post-positivism and quantitative methodologies in the study of disproportionality in child welfare has created an imbalance of knowledge



resulting in many voices being left out of the discussion. In particular, child welfare recipients and caseworkers—those closest to the problem—have had almost no input into the causes and consequences of disproportionality in child welfare. This paints an incomplete picture of the phenomenon and overlooks the relevance of personal experience. As the inclusion of multiple perspectives and research methods is essential to solving any complex social problem (Petr & Walter, 2005), more emphasis on interpretative and critical paradigms is needed. Additional qualitative studies would broaden our understanding of the problem and create greater opportunities for identifying solutions. Also, formally documenting the perspectives of child welfare recipients and others who have been ignored may inadvertently provide these groups with the political power needed to initiate the changes they want to see in the child welfare system (Shdaimah, 2008).

### **Theories on Disproportionality**

Research on the disproportionate representation of children of color in the child welfare system can be divided into three categories based on the prevailing theories as to why it occurs (Derezotes & Poertner, 2005; Dettlaff & Rycraft, 2008; Hill, 2006). Each of the theories and the corresponding literature is reviewed in the following sections. Although the studies reviewed herein are not exhaustive, they represent general trends in the literature from the past 15 years. Many of these studies have been assembled in two important publications, although studies from other sources are considered as well. First, in 2005, the Race Matters Consortium published its first compilation of papers examining the disproportionate representation of African American children in the child welfare system. The book, *Race Matters in Child Welfare*, contains papers investigating child

welfare policy and practice, the causes of child maltreatment, and how each of these affects the problem of disproportionality (Derezotes, Poertner, & Testa, 2005). The second publication, a special issue of *Child Welfare, Journal of Policy, Practice and Program*, is a collection of articles providing in-depth analyses of issues related to disproportionality and promising practices seen in child welfare systems across the U.S. (Belanger, Bullard, & Green, 2008). Both publications serve as important resources for child welfare professionals and were sponsored by the Child Welfare League of America.

**Individual and family factors.** The first theory found in the literature, which underlies the risk model of overrepresentation in child welfare, posits African American children and other children of color are overrepresented in the child welfare system not due to their race but to disproportionate need (Dettlaff & Rycraft, 2008; Hill, 2006). Researchers who subscribe to this theory believe the overrepresentation of children of color in child welfare is appropriate because these families experience more of the risk factors associated with child maltreatment. As indicated by the NIS-4, these risk factors include low socioeconomic status (SES), single-parenthood, and large numbers of children in the home (Sedlak & Schultz, 2005). Additionally, factors such as teen parenthood, mental illness, and substance abuse have been found to impact families of color at higher rates and to increase the likelihood of child maltreatment (Chaffin, Kelleher, & Hollenberg, 1996; Connelly & Straus, 1992; Walker, Zangrillo, & Smith, 1994). According to Bartholet (2009), a major proponent of this theory:

Given the powerful connection repeatedly demonstrated between poverty and related risk factors and maltreatment, and the fact that black families are disproportionately exposed to such risk factors, black parents would have to possess extraordinary compensatory features to enable them to overcome all these predictive factors so as to achieve comparable child maltreatment rates with white parents. (p. 35)

Based on this reasoning, many researchers expect to find African American and other parents of color mistreating their children at higher rates than non-minority parents; however, this generally has not been the case. In fact, until the NIS-4 release in 2010, no national research had demonstrated racial differences in child maltreatment rates, and most of the literature has cautioned against this assumption (Hill, n.d.; Roberts, 2002a; Sedlak et al., 2010; Shaw, Putnam-Hornstein, Magruder, & Needell, 2008). Yet, more recently, Drake (2012) re-examined the NIS-2, NIS-3, and NIS-4 results and offered clarification of their findings. He submits the NIS-2 and NIS-3 results were misinterpreted and that all three of the NIS reports actually are consistent in their findings, which show Black children being maltreated and reported to CPS at higher rates than White children. Drake (2012) concludes the following:

It appears that while certainly some bias exists, and unquestionably individual instances will exist and could be chronicled, it seems unlikely that that is driving the 2 to 1 disproportionality in black overrepresentation at the front end of the child welfare system. (Transcript, p. 16)

Can increased risk factors and need among children and families of color explain their disproportionate representation in the child welfare system? Overall, studies that support this theory have found a positive relationship between family risk factors and child maltreatment, with poverty being the strongest predictor of maltreatment. Poor children who were reported to CPS have been found to experience greater parent risk factors and higher rates of negative outcomes than children who are not living in poverty (Jonson-Reid, Drake, & Kohl, 2009). African American families, in particular, have been found to be poorer, have greater needs, are more likely to receive public assistance, and be substantiated for child neglect (Rodenborg, 2004). Lastly, studies investigating the relationship between welfare receipt—a frequently used indication of poverty—and

involvement with the child welfare system have found that receiving welfare benefits doubles the risk of substantiation of child maltreatment (Goerge & Lee, 2005), and increases the likelihood of out-of-home placements for African American children (Barth, 2005). Thus, these studies tend to support the idea that living in poverty creates added risks that may lead to child maltreatment.

In contrast, some studies point to a more complicated relationship between risk factors and child maltreatment. In one of the few studies to include Latino children, Dettlaff, Earner, and Phillips (2009) compared prevalence rates, characteristics, and risk factors for child maltreatment between U.S. born Latinos and immigrant Latinos. Although the researchers expected children in immigrant families to be at greater risk of maltreatment due to the stress of immigration and enculturation, this was not the case. In fact, even though the immigrant Latino families were found to be poorer, there were no differences in child maltreatment substantiation rates between the two groups. Additionally, U.S. born Latinos were found to experience more of the family risk factors associated with child maltreatment than their immigrant counterparts. In another study, Berger (2005) used economic theory to investigate the relationship between family characteristics and child maltreatment. In regards to family income, his research showed that low income and a high local unemployment rate raised the risks of child maltreatment in single-parent families, but not in two-parent families. Although this finding may be due to single-parent families in the study having lower incomes to begin with, it also could indicate that other factors mediate the effects of family income (Waldfoegel, 2005). Regardless, Berger (2005) concludes the care children receive at home is more sensitive to economic conditions in single-parent families than in

two-parent families. Thus, although the research notes a strong association between family risk factors, poverty, and child maltreatment, these relationships are not causal and cannot explain fully the overrepresentation of children of color in the child welfare system (Waldfogel, 2005).

**Community factors.** This theory attributes the overrepresentation of children of color in child welfare to greater risk factors in minority communities (Hill, 2006). That is, some studies suggest the overrepresentation phenomenon “has less to do with the race or ethnicity of minority groups and more with the disadvantaged characteristics of the communities in which they reside” (Hill, 2006, p. 25). Proponents of this theory believe families of color living in communities with high levels of crime, unemployment, homelessness, female-headed households, welfare assistance, and a large number of families living in public housing are more susceptible to child maltreatment and more visible to public scrutiny (Coulton & Pandey, 1992; Drake & Pandey, 1996; Garbarino & Sherman, 1980; Hines, Lemon, Wyatt, & Merdinger, 2004). This increased visibility is thought to lead to more families of color being reported to child welfare agencies and other authorities.

To examine this theory several studies have sought to explain how neighborhood characteristics may contribute to child maltreatment rates. In Ohio, Coulton, Korbin, Su, and Chow (1995) investigated three urban neighborhoods and found that those neighborhoods with the entwined conditions of poverty, unemployment, female-headed households, abandoned housing, and population loss had the highest child maltreatment rates. Notably, poor women and children tended to be clustered together in areas that increasingly were abandoned, disinvested, bereft of economic resources, and highly

segregated by race. A year later, Drake and Pandey (1996) analyzed 185 economically homogeneous zip code areas in Missouri and found neighborhoods with the highest poverty rates had the highest number of substantiated cases of child maltreatment. The authors found that child maltreatment substantiation rates increased steadily along with higher poverty rates in the neighborhoods. Also in consideration of community risk factors, Freisthler, Bruce, and Needell (2007), investigated 941 neighborhoods in California to examine how neighborhood characteristics contribute to substantiated child maltreatment rates for Black, Hispanic, and White children. Although the results showed different risk factors for each of the culturally different communities, the variable of poverty was associated positively with child maltreatment in all of the neighborhoods investigated. Finally, in 2002 Testa and Furstenburg (as cited in Dettlaff & Rycraft, 2008) conducted a study of poor communities in Chicago and discovered the same neighborhoods that are occupied currently by African Americans were the same neighborhoods that had high rates of child maltreatment when occupied by European immigrants almost 100 years ago. Of note, neighborhoods with the highest child maltreatment rates were situated near the center of the city or downtown area as opposed to the outer edges of the city, “suggesting that specific processes that increase stress on families may be more prevalent in the concentric circles of poverty that surround the inner city” (as cited in Coulton, Crampton, Irwin, Spilsbury, & Korbin, 2007, p. 1133). Thus, these studies support the current theory that community factors—namely concentrated neighborhood poverty—are important risk factors for child maltreatment; however, the exact processes by which this occurs in neighborhoods is still unknown and needs further study (Coulton et al., 2007).

**Agency factors.** The third and final theory attributes the overrepresentation of children of color—especially of African American children—to cultural insensitivity and institutional racism in the child welfare system (Hill, 2006). This theory, which underlies the bias model of overrepresentation in child welfare, is not new and was first proposed by Billingsley and Giovannoni (1972) more than thirty years ago. At that time, the authors defined institutional racism in the following way:

It is the systematic oppression, subjugation and control of one racial group by a dominant or more powerful racial group, made possible by the manner in which society is structured. In this society, racism emanates from white institutions, white cultural values, and white people. The victims of racism in this society are Black people and other oppressed racial and ethnic minorities. (p. 8)

Billingsley and Giovannoni (1972) noted three ways racism manifested itself in the child welfare system: by the types of services developed, by the inequitable treatment in the system based on race, and by incomplete efforts to change the system. Many child welfare scholars and researchers, including members of the CSSP-Alliance, believe these manifestations of racism still exist in the child welfare system today. Proponents of this theory contend biased child welfare practices and policies combine to produce inequitable treatment and services that lead to greater numbers of children of color in the child welfare system (Lemon, D'Andrade, & Austin, 2005).

To investigate this theory, the majority of studies have focused on whether racial differences exist at various decision points in the child welfare system (Hill, 2008). The four major decision points considered in this review include reporting, investigation, substantiation, and placement. These decision points are important to study because they guide our current child welfare system, and each point can impact child welfare outcomes (Derezotes & Poertner, 2005). Other studies have focused on determining whether racial

differences exist in the availability and delivery of child welfare services. According to Harris and Hackett (2008), racial inequity in this area is the strongest contributing factor implicated in the disproportional numbers of children of color in placement in child welfare.

To begin, several reviews of the literature have considered bias and decision-making in the child welfare system. First, Courtney and his colleagues (1996) conducted a review of the literature prior to 1996 with a focus on race, services, and outcomes. The authors concluded there was a pattern of inequality and differential treatment towards African American children and families at every point in the child welfare system. Yet, the authors noted complex relationships among some of the variables that were difficult to separate and stated that in every area reviewed there was at least one study showing little or no effect of race and ethnicity. Since 1996 little progress has been made in separating the effects of these variables; thus, although the majority of studies indicate some level of racial bias in child welfare decision-making, the evidence remains inconclusive (Derezotes & Hill, n.d.; Hines et al., 2004).

In another review Drake and Zuravin (1998) considered the literature on child welfare and socioeconomic status to determine whether bias led to overestimates of child maltreatment among the poor. Although the authors concluded there was insufficient evidence to support the assumption, they did identify four types of systematic bias in child welfare decision-making: (a) labeling bias, assuming maltreatment because of class membership or poverty; (b) reporting bias, focusing on poor families; (c) substantiation bias, basing substantiation of a report more on group membership than the facts of the case; and (d) visibility bias, increasing interaction frequency of the poor with service



providers making them more visible to mandated reporters. While these types of bias are viewed as unconscious and unintentional, they can lead to overestimates of child maltreatment among the poor, thereby increasing the number of children of color involved with the child welfare system.

Finally, the CWIG (2003b) reviewed the literature on decision-making in unsubstantiated CPS cases and identified several factors that influence decision-making. The factors were grouped into four main categories: case factors, decision-making factors, organizational factors, and external factors. The case factors found to influence CPS decision-making were child and caretaker characteristics, the caretaker/ child relationship, severity and chronicity of the maltreatment, social and economic factors, and the perpetrators' access to the child. Decision-making factors included the tendencies and characteristics of the individual caseworker such as his/her beliefs, values, and level of experience. Organizational factors included workload stress and the role of supervision, while external factors consisted of state policies that impact caseworker decisions. Importantly, all three of these reviews emphasized the complexity of the child welfare decision-making process and recommended further research to standardize this process across the field.

**Reporting.** The first point in the child welfare decision-making process is when a community member or professional calls in a report or allegation of child maltreatment to the CPS telephone hotline. In 2008, the latest year for which data is available, CPS received 3.3 million reports for child maltreatment—or a national rate of 44.1 reports for every 1,000 children (U.S. DHHS, ACF, 2010a). The majority of these reports (57.9%) were called in by mandated reporters such as teachers, social service workers, police

officers, and healthcare workers. Bias at the reporting stage occurs when identically situated maltreated children of different races are reported to CPS at different rates by mandated reporters (Ards, Myers, Chung, Malkis, & Hagerty, 2003a). Studies that have investigated these reports by race generally have found African American children are excessively reported to CPS as compared to White children (Ards, Chung, & Myers, 1998; Ards, Myers et al., 2003b; Fluke, Yuan, Hedderson, & Curtis, 2003). American Indian children also have been found to be excessively reported to CPS as compared to White children (Ards, Myers, Malkis, Sugrue, & Zhou, 2003b). Yet, these differences in report rates tend to disappear once poverty is controlled for, indicating poverty may play a larger role than race in the reporting of child maltreatment (Ards, Myers et al., 2003b; Drake, Lee, & Jonson-Reid, 2008).

In the past fifteen years, a few studies have found no evidence of racial bias at the reporting stage (Gryzlak, Wells, & Johnson, 2005; Levine, Doueck, Freeman, & Compaan, 1996). Gryzlak et al. (2005) studied the role of race in decision-making at this stage by considering both the race of the child and the caseworker in their investigation. Their results showed the child's race alone had no overall effect on the decision to screen cases in. In regards to the worker's race, the researchers found that workers of color screened in more of their cases for investigation as compared to White workers (65% versus 50%). When the worker and the child were both of color, 46% of the cases were screened in for investigation as compared to 49% when both the worker and child were White. When workers of color made decisions for White children, 76% of the cases were screened in for investigation while White workers screened in only 40% of the cases involving children of color. Although the authors conclude there was no evidence of

racial reporting bias in their study, they emphasize that bias at this stage cannot be ruled out. This is because of the lack of research exploring child welfare workers' beliefs and perceptions about child maltreatment reporting: a critical shortcoming in the literature (U.S. DHHS, ACF, 2003; Gryzlak et al., 2005).

***Investigation.*** Once a CPS worker decides to accept a child maltreatment report, the allegations must be investigated—the second point in the decision-making process. During the investigation process CPS workers visit the home to determine whether any child in the referred family has been maltreated, to assess family functioning and the risk of future maltreatment, and to initiate services for children who need protection (Texas Department of Family and Protective Services, 2010). In 2008, 62.5% of the 3.3 million CPS reports were screened in for investigation (U.S. DHHS, ACF, 2010). Racial bias at this decision point occurs when identically situated maltreated children of different races are investigated by CPS at different rates. Most of the research on this decision point suggests that race alone or race interacting with other factors is related strongly to the rate of CPS investigation (Hill, 2006).

Several research studies have demonstrated that children of color are more likely to be accepted for CPS investigation. In one of few mixed methodological studies Harris and Hackett (2008) considered the referral and investigation process of three racial/ethnic groups: African Americans, Native Americans, and Whites. The results showed a disproportionate number of CPS cases were accepted for investigation for African American and Native American children as compared to White children. The authors confirmed the existence of racial bias in the assessment of risk for these families because focus group responses revealed attitudinal and structural factors influenced

decision-making outcomes. In another study Lavergne, Dufour, Trocmé, and Larrivée (2008) explored the CPS investigation process by comparing the report profiles of Caucasian, Aboriginal, and other visible minority children (African American, Asian, Latino, and Arab) in Canada to the same groups in the general population. The findings revealed Aboriginal and other visible minority families were selected for CPS investigation 1.77 times more than children in the general population. Among the cases selected for investigation, Aboriginals were investigated most frequently followed by African Americans and Latinos. Caucasians were the least likely to be investigated followed by Asians and then Arabs. The authors concluded that some level of racial bias existed and suspected clashes in child rearing practices and cultural values may have impacted a worker's decision to investigate a case. Finally, Fluke et al. (2003) compared NCANDS data for more than 700,000 children in five states across the country and found African American children were overrepresented and White children underrepresented at the stage of investigation for each of the five states.

Some studies suggest families of color are assessed differently or more harshly during the investigation process. Rivaux et al. (2008) looked at the investigation and assessment process to determine how assumptions about race, poverty, and risk affected CPS decisions. The researchers found during the investigations that although White families in the sample were shown to be poorer and at higher risk for child maltreatment, African American families were 20% more likely to have their cases acted upon and 77% more likely to have their children removed—this is in spite of having lower risk assessment scores. The authors attributed this finding to fundamental attribution error by the caseworker in which the risk threshold for maltreatment is affected by the worker's

view on race. Hence, even though African American risk scores were found to be lower in this study, the researchers suspect African Americans and other racial/ethnic groups may have a different or lower risk threshold for child removal due to other factors.

Similarly, Church, Gross, and Baldwin (2005) explored child welfare practices with Hispanic children as compared to non-Hispanic, White children. The researchers hypothesized that child welfare staff offer differential treatment to Hispanic populations based on their individual level of cultural awareness. The results showed that although Hispanic and non-Hispanic, White families were reported for child maltreatment at roughly the same rates, the Hispanic families with younger children were assessed more rapidly and punitively during the investigation process. The Hispanic children also were removed from their homes more quickly and placed into foster care for longer periods of time than their White, non-Hispanic counterparts. The authors attributed this differential treatment to systemic discrimination and suggested two causes. First, child welfare workers may have perceived younger Hispanic children to be at higher risk for maltreatment than non-Hispanic, White children. Secondly, workers may have perceived Hispanic families with younger children as less capable of caring for them.

Lastly, Sedlak and Schultz (2005) explored the impact of a child's race on CPS investigations by analyzing data from the NIS-3 in 1993. The authors tested four factors—child, family, maltreatment, and perpetrator characteristics—utilizing different logistic regression models. The analyses revealed no racial differences based on the child or family characteristics as almost equal numbers of African American and Caucasian children (20% versus 23%) were investigated by CPS. Racial differences did emerge, however, in the models depicting maltreatment and perpetrator characteristics. That is,

emotionally maltreated and physically neglected African American children were much more likely to be investigated by CPS than White children with similar allegations. The authors conclude that race does play a role in investigation decisions but that other factors may mediate this influence. Thus, all of these studies demonstrate some racial differences during the investigation process and tend to support the existence of bias at this decision point.

***Substantiation.*** Following the investigation, a worker must decide whether to substantiate the allegations of child maltreatment—the third point in the decision-making process. According to the Children’s Bureau (U.S. DHHS, ACF, 2010), in 2008, 22.3% of the cases investigated by CPS were substantiated, 64.7% were unsubstantiated, and the rest either were indicated closed with no finding, determined to be false, or received another response. Thus, there were a total of 772,000 substantiated cases of child maltreatment in 2008, or a national rate of 10.3 victims per 1,000 children. Most of these cases (71%) were substantiated for child neglect with African American children, American Indian/Alaskan Native children, and children of multiple races having the highest rates of victimization at 16.6, 13.9, and 13.8 per 1,000 children. Racial bias at this decision point occurs when allegations of child maltreatment faced by identically situated children of different races are substantiated at different rates by CPS workers (Ards, Myers et al., 2003b).

Zuravin, Orme, and Hegar (1995) conducted a review of the literature and identified four key predictors of child maltreatment substantiation: the status of the reporter, prior reports of maltreatment, the type of maltreatment, and the race or ethnicity of the victim or family. That is, substantiation of child maltreatment was more likely to

occur when the report was made by a professional, when there had been prior reports of maltreatment, when the report was for physical abuse as opposed to neglect, and when the family was Black or Hispanic (Zuravin et al., 1995). Since 1995, many studies have continued to find higher substantiation rates among racial minority families reported to CPS as opposed to White families, even after controlling for other factors (Ards, Myers et al., 2003b; Church et al., 2005; Sabol, Coulton, & Pouousky, 2004).

Still, some studies have found no evidence of racial bias in substantiation rates. Levine et al. (1996) compared 270 African American and Caucasian families reported to CPS to assess the degree to which the two groups were differentially referred and processed. The findings revealed African American families were no more likely to be substantiated for child maltreatment than Caucasian families. The authors concluded there was no evidence of racial bias and that the differences in the CPS referral source and/or differences in the attention to the case by the worker did not explain the overrepresentation of children of color in the child welfare system. In another study, Ards et al. (1998) hypothesized African American children would have higher substantiation rates than White children in states with large populations of African Americans. Contrary to their hypothesis, the results showed that although African American children were reported for maltreatment at higher rates than Whites, they had lower substantiation rates. Fluke et al. (2003) made similar findings in their study in that African American children were more likely to be reported and investigated by CPS, but their substantiation rates tended to be proportionate to Whites. Thus, studies investigating racial bias at the substantiation decision point have yielded inconsistent findings indicating the need for additional research in this area.

**Placement.** The fourth decision point considered in this review occurs once maltreatment allegations have been substantiated and the CPS worker must decide whether to provide services to the family in the home or to remove the child for placement into foster care. Bias at this decision point occurs when identically situated children of different races are placed into foster care at different rates by CPS workers. This is a critical decision because although the child's removal may be necessary to keep the child safe, it can also further traumatize the child and disrupt the parent-child bond (Harris, Tittle, & Poertner, 2005). Additionally, forced removal of a child sets the stage for an antagonistic relationship between the family and the child welfare worker, which can be difficult to overcome. For this reason, out-of-home placement is considered the last resort for protecting children (Goldman et al., 2003). In 2008, of the 772,000 children substantiated for child maltreatment, approximately 20% or 273,000 children were removed from their homes and placed into foster care while the remaining 80% received services in the home (U.S. DHHS, ACF, 2010). Of the 273,000 children removed, the majority (57%) were children of color with Black (26%), Hispanic (20%), and those of other races or multiracial children (11%) making up the largest percentages (U.S. DHHS, ACF, 2009). Most of these children were removed for neglect (70%), with physical and sexual abuses accounting for much smaller percentages of the removals (8.8% and 3%, respectively).

Many studies have found race to be a strong predictor of out-of-home placement for children of color—suggesting bias may play a role in the type of care and services minority children receive. American Indian/Alaskan Native children, for example, have been found to be placed into foster care at much higher rates than non-Indian children in



several studies (Carter, 2009; Donald, Bradley, Day, Critchley, & Nuccio, 2003; Fox, 2004). Carter's (2009) study in particular showed that as compared to non-Indian children, American Indian/Alaskan Native children were eight times more likely to be removed when the caregiver abused alcohol, and three times more likely to be removed when the caregiver reported difficulty paying for the child's basic needs. According to the author, poverty was used as an excuse to break up these families, and bias contributed to the decision to remove American Indian/Alaskan Native children (Carter, 2009). Studies of Aboriginal children in Canada have shown similar results in that these children are more likely to be placed in out-of-home care than non-Aboriginal children (Blackstock, Trocmé, & Bennett, 2004; Trocmé, Knoke, & Blackstock, 2004).

Research also suggests African American children are more likely to be placed in out-of-home care as compared to White children. Hill (2005b) investigated the role of race in foster care placements and found African American children were more likely to be placed than White children with similar characteristics. In the author's analysis the five main predictors of foster care placement were race, drug abuse, the type of allegation, Medicaid receipt, and the child having a disability (Hill, 2005b). In another study, Needell, Brookhart, and Lee (2003) showed that African American children in California were more likely to be removed from their homes and placed into foster care than White or Hispanic children, even when controlling for age, the reason for maltreatment, and neighborhood poverty. Finally, Goerge and Lee's (2005) study in Illinois showed African American children were 55% more likely to be placed in foster care than White children, even after controlling for covariates such as region, welfare receipt, community poverty, and the mother's education.

Studies also point towards racial bias in the type of foster care placement African American and other children of color receive. This is because African American children are almost twice as likely as White children to be placed into foster care with kin as opposed to non-kin (Hill, 2004). Although research indicates there are many advantages to children being placed with relatives (see Hurley, 2008; Schwartz, 2008; Shearin, 2007), there are disadvantages as well. Harris and Skyles (2008) reviewed the literature on kinship care placements in child welfare and concluded the practice is overused and misused in regards to African American children. In support of this analysis, studies show African American children placed with kin spend more time in foster care and are less likely to be adopted than children placed in non-kin foster care (Geen, 2003; Hurley, 2008). Some researchers suspect this is due to child welfare workers making less effort to reunify a child who is already placed with family, as opposed to strangers (Harris & Skyles, 2008). Also, a biological parent may be less motivated to make the necessary changes to have her/his child returned if the parent knows the child is being cared for by a relative (Roberts, 2002b). Thus, over time many kin placements become permanent arrangements for African American children. Another concern is that kin caregivers tend to be older, poorer, single, African American, and less educated than non-kin caregivers (Ehrle Macomber, Geen, & Clark, 2001; Harris & Skyles, 2008). Consequently, kin placements can create added stress and financial hardship for a caregiver who is already living in poverty and struggling to make ends meet. Hill (2004) noted approximately two-thirds of kin placements are headed by grandparents, many of whom fail to receive adequate welfare payments and the higher foster care payments that non-relatives receive.

Despite the abundance of literature demonstrating that race influences placement decisions; a few studies have shown otherwise. Tittle, Harris, and Poertner (2000), for example, utilized logistic regression modeling to determine which variables most accurately predicted the placement of children into foster care. The results showed these variables included the characteristics of the child, family, and the child welfare system—not race. Years later Harris, Tittle, and Poertner (2005) made similar findings when they determined race, economic status, family characteristics (except for family size), and the agency location did not predict foster care placement. Although the findings of these two studies are cause to be hopeful—that bias does not affect placement decisions—much of the research continues to support the conclusion that race does play a role in the decision to place a child into foster care.

*Service delivery.* The last area to be reviewed, in which bias is suspected of contributing to the overrepresentation of children of color in the child welfare system, is in the availability and delivery of services. Of note, this is one of the few areas of child welfare research where many of the studies agree. That is, the research has consistently demonstrated that African American and other children of color involved with the child welfare system tend to receive fewer and lower quality services, fewer foster parent support services, fewer contacts by caseworkers, and less access to drug treatment, mental health, and family preservation services (Courtney et al., 1996; Denby, Curtis, & Alford, 1998; Garland, Landsverk, & Lau, 2003; Harris & Hackett, 2008; Harris & Skyles, 2008; McRoy, 2004). Additionally, it is significant that the majority of African American children receive the most intrusive intervention the child welfare system has to offer, foster care placement, while the majority of Caucasian children receive the least

intrusive intervention, at-home support services (Harris, Tittle, & Poertner, 2005). How can this be explained?

Rodenborg (2004) attempted to investigate whether bias impacted the delivery of services to African American children and families by analyzing secondary data from a national study involving public child welfare agencies from all 50 states and the District of Columbia. The author posed two questions: (a) Do poor children and families receive services to meet the conditions of poverty? (b) Does service delivery impact African American and Caucasian children differently? The findings revealed the services provided to poor families of both races were inadequate to meet their needs. Also, a higher percentage of African Americans families (56%) went without poverty-related services than White families (36%) in all situations except for when the caregiver's physical health was compromised. According to the author, the higher poverty rate of African American families combined with their receipt of fewer poverty-related services created a differential and negative impact on African American families that is suggestive of institutional racism (Rodenborg, 2004).

The State of Michigan's Department of Human Services (2009) conducted the largest and most comprehensive qualitative study to date on this issue. The department analyzed its policies and protocols to assess the institutional features of Michigan's child protective services system that directly produced or contributed to racial disproportionality and inequity in the system. The study had five critical findings: (a) African American families failed to receive necessary supports that could have prevented or diverted their involvement with CPS, and the offered services were irrelevant, difficult to access, or inadequate; (b) African American families experienced

the child welfare system as intrusive, and interventions did not fairly assess or appreciate their unique strengths and weaknesses and failed to explore least restrictive placement options for their children; (c) African American youth and families were characterized negatively and labeled by workers in the system, and these labels followed them throughout the life of their cases; (d) Advocacy on behalf of African American families and children was insufficient in helping them to participate in, challenge, and negotiate the system; and (e) There were inadequate mechanisms for African American parents and youth to hold the child welfare providers and advocates accountable for equitable treatment and quality services. Interestingly, many of the recommendations made to address these critical findings included addressing bias in the following areas: child welfare leadership, the collection and management of data, protocols and policies, and the delivery of child welfare services.

**Summary.** To review, the disproportionality literature is supported by three theories that attempt to explain the overrepresentation of children of color in the child welfare system. The first theory attributes the overrepresentation to individual risk factors, mainly poverty; the second theory attributes the overrepresentation to community risk factors, such as high unemployment and crime rates; and the third theory attributes the overrepresentation to agency factors, or institutional racism and cultural bias in the child welfare system. All three of these theories have made important contributions to our understanding of the problem; however, theories of individual and agency factors have received the most attention from child welfare scholars and researchers. This is primarily due to the strong evidence linking poverty to child maltreatment and to the overwhelming and irrefutable data showing that children of color receive inequitable treatment and have

poorer outcomes than their Caucasian counterparts. Additionally, a powerful coalition of researchers, the CSSP-Alliance, has made addressing institutional racism in the child welfare system a national priority and continues to provide research funding for this effort.

Although each of the theories discussed in this section has value, none of them alone fully accounts for why so many children of color are involved with the child welfare system. The literature points to disproportionality being caused by a combination of highly complex factors that are not easily separated and measured. For nearly every study that did find evidence of racial bias, some did not. In spite of these inconsistencies, a vast amount of evidence supports the existence of racial disparities in the child welfare system. Thus, most child welfare scholars are in agreement that biased child welfare policies and practices exist, but they are uncertain as to exactly where in the system bias occurs and to what degree.

This review of the literature reveals that nearly all of the disproportionality research to date stems from a post-positivist perspective. That is, quantitative methodologies utilizing national data sets to compare children involved with the system to those in the general population have dominated the examination of the phenomenon. Such a narrowed focus has limited our knowledge and excluded important sources of information that could broaden our understanding and bring new insights and solutions to the problem. In particular, the viewpoints of child welfare workers and recipients—those closest to the problem—have been ignored completely. This needs to be corrected if the child welfare system hopes to find effective, culturally sensitive, long-term solutions to the disproportionality problem.

## **Chapter Summary**

In this chapter I provided an historical overview of the child welfare system as it relates to poor children and families and those of color from the 17th century to the present day. I also explained how disproportionality is measured, identified the epistemological influences, and discussed the three theories of disproportionality along with a review of the empirical research. These theories included (a) individual and family factors, (b) community factors, and (c) agency factors. Importantly, the first and third theories are the most influential and also have been termed the risk and bias models. In the next chapter I introduce my research design, discuss the purpose of the study, present my evaluation criteria, and discuss the ethical considerations of the study.

## CHAPTER THREE: RESEARCH DESIGN

### **Introduction**

The empirical research reviewed in the last chapter points to three important gaps in the literature that must be addressed if we are to fully understand disproportionality in child welfare and find effective solutions to the overrepresentation problem. The first two gaps are the lack of qualitative research and the omission of the perspectives of child welfare caseworkers who are closest to the problem. These gaps are perplexing given that Petr and Walter (2005) assert these two components, qualitative inquiry and professional practice wisdom, are essential components to any practice inquiry. In their framework, empirical approaches—which combine qualitative and quantitative research methods—are considered along with professional practice wisdom and client experiences in determining the best interventions for a given problem. Although this research study will not address client experiences, it will deal with the two other parts of the framework by adding to the qualitative research knowledge base and exploring the experiences of child welfare practitioners “who operate in the real practice world, a world that is quite different from the research-about-practice world” (Petr & Walter, 2005, p. 257).

The third gap noted in the literature is the nearly singular focus on racial bias in studying cultural insensitivity in the child welfare system. Although the variable of race is essential and easily measured in quantitative research, this spotlight presents a narrow view of the concept of culture that could result in the omission of other equally important personal, familial, and social factors. This concern with the overreliance on race as a proxy for culture is inferred by the National Association of Social Workers’ (NASW) policy statement on cultural competence that states, “culture is not just an attribute of



racial and ethnic groups” (2009, p. 70). Certainly, such a limited focus does not begin to capture the range of diversity that exists among families involved with the child welfare system. Therefore, this qualitative study will add to the research literature by taking a broader view of the term culture and the myriad ways it is defined, understood, and addressed by child welfare workers. This will help to delineate some of the cultural variables that quantitative researchers have found so difficult to separate. For clarification, the social work profession states the word *culture* implies “the integrated pattern of human behavior that includes thoughts, communications, actions, customs, beliefs, values, and institutions of a racial, ethnic, religious, or social group” (NASW, 2009, p. 73).

### **Purpose of the Study**

The broad purpose of this study then was to investigate the third theory of overrepresentation which posits agency factors such as cultural insensitivity and case worker bias contribute to the overrepresentation of children in the child welfare system. To accomplish this, I focused specifically on exploring how family case managers<sup>6</sup> (FCMs) in a mid-Western state understand and interpret the meaning of culture and cultural difference in engaging their culturally different clients. The term *engagement* has explicit meaning in the context of the state’s child welfare system and refers to the skills involved in establishing trust-based relationships with families (Indiana Department of Child Services [DCS], 2009). FCM’s are encouraged to engage with families by exhibiting the qualities of empathy, professionalism, genuineness, and respect.

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<sup>6</sup> Family case manager (FCM), child welfare worker, and caseworker are used interchangeably throughout the document.

Additionally, engagement is viewed as an ongoing process and a necessary component to sustaining the therapeutic work.

In keeping with the study's purpose, the principal research question was: How do FCMs think about and make sense of the experience of engaging with families who are culturally different from themselves? As this question contains overlapping ideas that require explicit consideration, the following sub-questions were investigated:

1. How do FCMs understand and interpret the meaning of culture and cultural difference?
2. What meaning and significance do these cultural differences have for the engagement process?

As this is a study of lived experience, I decided not to describe the concept of culture for the participants, but to include their definitions because culture is a broad term that can mean different things to different people.

## **Research Design and Methods**

### **Design and Rationale**

Interpretative Phenomenological Analysis (IPA) is a research approach for examining how people make sense of and understand their lived experiences (Smith, Flowers, & Larkin, 2009). These experiences are the everyday habits, activities, practices, and meanings of concern to people as they relate to and interact with their world (Benner, 1994). In particular, IPA is concerned with understanding the *lifeworld*. The lifeworld encompasses the world of objects—how we recognize the things around us—and our immediate experience of them, before we have a chance to construe them (Finlay, 2008). Thus, “the lifeworld is understood as what we experience pre-reflectively,

without resorting to categorization or conceptualization, and quite often includes what is taken for granted or those things that are common sense” (Husserl, as cited by Lavery, 2000, p. 22). This is to suggest that the true meaning of a lived experience usually is hidden or veiled from the person experiencing it because, as human beings, we are generally caught up in the automatic, unreflective, habitual activities of everyday life (van Manen, 1990). The goal of an IPA study then is “to return and re-examine these taken-for-granted experiences and perhaps uncover new and/or forgotten meanings” (Lavery, 2003, p. 22).

IPA was the appropriate methodology for this study because the meaning and significance of culture to the FCM engagement experience, and how this affects overrepresentation in child welfare, can never be fully understood by solely examining a set of characteristics, demographics, or other factors. Rather, by skillfully listening to the participants tell their stories and describe their subjective experiences, the investigator can obtain a richer understanding of the real meaning of the engagement experience. Additionally, IPA was appropriate because the uncontrived perceptions of FCM’s while they are engaging with the cultural “other” are the primary concern of this investigator. When a FCM first receives a substantiated child maltreatment report and must make her<sup>7</sup> initial contact with a family to begin the engagement process we must address the questions of what thoughts, feelings, memories, words, or pictures run through her mind? No other qualitative research approach can illuminate the intricacies of engaging with a family from another culture in the way the IPA method can.

Although IPA is a relatively new research method (Smith et al., 2009), it is informed by two longstanding philosophies that have significant influences on its

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<sup>7</sup> The pronoun “her” is used throughout this chapter as the sample was limited to female participants.

development. These two traditions, phenomenology and hermeneutics, formed the theoretical underpinnings to this study and helped to guide the research process. While the two philosophies are separate in their origination, they are ultimately brought together by the work of Martin Heidegger (1889–1976), a German philosopher and leading figure of hermeneutic phenomenology (Dahlberg, Dahlberg, & Nystrom, 2008).

**Phenomenology.** The first philosophical tradition, phenomenology, is the study of lived experience or the lifeworld (van Manen, 1990). Phenomenology is a Greek word that literally means to give an account of phenomena and of how things appear (Sokolowski, 2000). First introduced by Edmund Husserl (1859–1938), the philosophy was developed out of his disappointment with the natural sciences and their focus on objectivity as a means to studying human experiences (Dahlberg et al., 2008). He wanted to re-establish the everyday human world as the foundation of knowledge and science (Smith et al., 2009). For this reason, phenomenology’s emphasis is on the subjective world as experienced by a person, as opposed to the objective world as experienced as something “out there,” separate from us (Sokolowski, 2000).

Husserl’s main focus was on how phenomena appeared through consciousness (Lavery, 2003). He posited that by accurately describing the internal meaning structures of an experience, one could get to the true essence of it (Smith et al., 2009). He coined the term *intentionality* to explain the conscious relationship we have with an object<sup>8</sup>.

Sokolowski (2000) clarifies:

Every act of consciousness we perform, every experience that we have, is intentional: it is essentially “consciousness of” or an “experience of” something or other. All our awareness is directed towards objects. If I see, I see some visual object, such as a tree or a lake; if I imagine, my

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<sup>8</sup> Note that intended objects include not only objects in the traditional sense, but also feelings, thoughts, ideas, and events.

imagining presents an imaginary object, such as a car that I visualize coming down the road; if I am involved in remembering, I remember a past object; if I am engaged in judging, I intend a state of affairs or a fact. Every act of consciousness, every experience, is correlated with an object. Every intending has an intended object. (p. 8)

Thus, intentionality refers to a person's directed awareness of an object or event and highlights the fact that as human beings we always are engaged, interacting, and making sense of our life experiences (Schwandt, 2007). For Husserl then, intentionality was the foundation for understanding an experience and for describing the particular realities of others (Lavery, 2000).

Heidegger, Husserl's successor, had more ontological concerns in regards to phenomenological philosophy and was focused on understanding and interpreting the way human beings exist, act, or are involved with the world (van Manen, 1990). He presented the concept of *Dasein* as a facet of our humanness that allows us to wonder about our own existence and question the meaning of our own being (van Manen, 1990). From Heidegger's perspective, "Dasein is 'always already' *thrown* into this pre-existing world of people, and objects, language and culture, and cannot be meaningfully detached from it" (Smith et al., 2009, p. 17). In other words, we can never step outside of ourselves because we are always subjectively interpreting the world and questioning what it means for us. For Heidegger then, understanding an experience or phenomenon was predicated on our connection and interpretation of it.

Just as the concepts of intentionality and *Dasein* both assume an inseparable connection between human beings and their world, the investigator and the participant similarly are connected in phenomenology, and this relationship has been characterized by Finlay (2009) as an "intersubjective interconnectedness" (p. 6). This refers to the investigator being indelibly tied to the participant in the co-construction of reality and in

describing, interpreting, and understanding the lived experience (van Manen, 1990). This relationship requires the investigator to be self-reflective and to always keep personal subjectivity in check. Finlay (2009) states that “in research terms this means that the [investigator] shifts back and forth, focusing on personal assumptions and then back to looking at the participant’s perceptions in a new way” (p. 7). Consequently, the principle of openness is central to phenomenological philosophy. Dahlberg et al. (2008) explains: “Openness is the mark of a true willingness to listen, see, and understand. It involves respect, and certain humility toward the phenomenon, as well as sensitivity and flexibility” (p. 98). Thus, it is only by the investigator maintaining an open and thoughtful attitude—about the participants, their experiences, and her/his own personal contributions to the research—that phenomena can truly present themselves (Dahlberg et al., 2008). In keeping with the principle of openness, I include a description of one of my own engagement experiences in the following paragraphs.

In my role as a professional social worker, I have had many experiences engaging with families who were culturally different from me. I remember one Native American family that I worked with who lived on a reservation in upstate New York. The family included the mother, her two middle school-aged children, and her live-in boyfriend. I knew little about the family before making my first home visit, but I had been told the couple’s relationship was volatile, the young boy was having anger problems, and his younger sister had a history of sexual abuse. Based on my limited knowledge, I assumed there would be alcohol and financial problems but also some sense of community on the reservation.

I remember feeling very anxious and acutely aware of my own ignorance of Native American culture as I drove to meet this family for the first time. Once on the reservation I was struck by the scarcity of buildings and people, the openness, and the strange sense of quiet. I was in the middle of nowhere; I saw and heard nothing. There were no formal street signs, no public transportation, and no signs of usual city services. There was a feeling of emptiness and isolation. When I located the family's residence, it was a run-down trailer with toys and junk strewn about. It was muddy from the rain, dogs were barking, and the trash was burning. It occurred to me that I had never experienced this level of poverty. I remember feeling self-conscious and wondering what this family would think of me: a young, middle-class, educated, White woman. The family was welcoming when I entered the home, and they hurried about to make a place for me to sit. I remember making a conscious decision to be open to learning about their way of life and how they viewed their situation. I felt like a stranger in a strange land.

During the first four months of our working together the family made good progress. We created a household routine, worked on family communication skills and anger management, and instituted new disciplinary strategies. As a result, the atmosphere in the home became calmer, and the boy's behavior and grades in school improved. Difficulties arose in my relationship with the mother, however, when her live-in boyfriend began spending the family's money on drinking. He would disappear for days at a time with the rent or bill money then show up remorseful, promising to change. Although the mother repeatedly kicked him out of the home, she always accepted him back. This often led to verbal and physical altercations among the boyfriend, the mother, and her young son that eventually culminated in a restraining order against the boyfriend.

Despite this, and the mother observing that her son was less angry when the boyfriend was not around, she continued to allow him to return. I remember thinking that she chose a drunken boyfriend over her own son, and this annoyed and angered me. I resented her for this, and my ability to empathize with her and her situation slowly waned. I also learned of times when she had lied to me about seeing the boyfriend or about his staying at the home, so the trust in our relationship disappeared.

For two months I continued to try and work with the mother and re-connect with her, but to no avail. She avoided my phone calls and my home visits. I think she also was avoiding my judgment. We had come to an impasse: she would not end the troubled relationship, and I would not stop expecting her to put her children first. I closed the case at the six-month mark, which was the maximum amount of time I was allowed to work with a family under the terms of our grant.

This description of my engagement experience demonstrates openness to the phenomenon in that I recalled my thoughts, feelings, and assumptions of the family and Native American culture in an authentic way. I also acknowledged my inexperience and tried to reflect on the experience of the phenomenon—its sights, sounds, and smells—to fully immerse myself and relive it, but without judgment. Furthermore, in writing down this experience, I made a concerted effort to slow my thought process and truly listen and understand what had occurred. This thoughtful and honest attention to the phenomenon is what I bring to this IPA research.

**Hermeneutics.** The second of the two philosophical traditions and guiding methodologies for this study was hermeneutics. Hermeneutics refers to the art, theory, and science of interpreting texts (Schwandt, 2007). Texts are words produced orally or in



writing and are important to analyze because, as Crotty (1998) notes, “we are essentially languaged beings” (p. 87) and only through language do people think and understand the world. Language is also the means by which groups of people transmit culture—ideas, beliefs, values, behaviors, and practices—from one generation to the next (Allen, 1995). This means of transmitting culture holds particular relevance for this research study because by examining the language used by FCMs, the investigator can develop a deeper understanding of what it means for these workers to engage with a family from another culture.

One of the most important concepts to arise from hermeneutic philosophy is the analytic process for interpreting texts: the hermeneutic circle. This metaphor is a way to enhance an interpreter’s understanding and experience of a text by relating parts to wholes and wholes to parts (Patton, 2002). These two activities are interdependent because an interpreter cannot make sense of the whole without understanding its parts and cannot make sense of the parts without having an understanding of the whole (Schwandt, 2007). To clarify, “parts” refers to a component of the text such as a single word, phrase, episode, or interview, while the “whole” refers to a sentence, a section, the complete text, the research project, or the complete life of a person (Smith et al., 2009). Thus, it is a dynamic and circular process in which an interpreter moves back and forth between the parts and the wholes refining her/his thinking, interpretation, and understanding of the text and the experience. It is believed that by working through the hermeneutic circle, the interpreter eventually will attain a level of understanding that is deeper or goes further than the author’s own understanding (Crotty, 1998). Smith and Osborne (2003) suggest IPA involves a double hermeneutic because “the participants are

trying to make sense of their world; [as] the researcher is trying to make sense of the participants trying to make sense of their world” (p. 53).

For Heidegger, the process of understanding depicted by the hermeneutic circle is directly related to the interpreter’s previous knowledge of the experience (Dahlberg et al., 2008). This previous knowledge, also called the forestructure, is comprised of three parts: fore-having, fore-sight, and fore-conception (Benner, 1994). Fore-having means that in interpreting anything, a person always comes to an experience with a practical familiarity, or pre-understanding of it. Fore-sight means that a person also experiences the world from a particular perspective or point of view. Lastly, fore-conception means that a person also anticipates and predicts what the experience will hold (Benner, 1994). As this forestructure is always present and can interfere with interpretation, it is essential for the investigator to consider his/her own background and connection to the experience, or his/her own *historicality*, and make these preunderstandings as explicit as possible (Dahlberg et al., 2008). This is in direct contrast to Husserl, who believed an interpreter needed to set aside or *bracket* out her/his previous beliefs and biases about the experience (Lavery, 2003). From Heidegger’s perspective, the suspension or bracketing of the interpreter’s beliefs is not possible “as one cannot stand outside the pre-understandings and historicality of one’s experience” (as cited in Lavery, 2003, p. 27). In keeping with hermeneutic phenomenology, I include my pre-understandings of the phenomenon in the paragraphs that follow.

I came to this study of FCMs and culture in 2009 after working as a graduate assistant on an evaluation project of the state DCS practice model. During that time I took part in observations of child and family team meetings, as well as structured interviews,

in which FCMs were evaluated on whether they considered the family's culture in case planning. At this time I began to think about the meaning of culture, its role in the therapeutic relationship, and the importance of cultural competence in providing child welfare services. This train of thought eventually led me to reflect upon my own cultural experiences as a social worker and how difficult it was at times to suspend cultural bias. I wondered about the meaning and significance of these preconceptions as I worked with my clients. If I successfully set them aside, did they still seep back in and color the therapeutic relationship? I also wondered about the clients' cultural biases and, taken together, how this dissonance was resolved. Underlying these questions was my assumption that we all have biases and that this is part of being human; however, professional social workers—who primarily work with people who are culturally different from themselves—must work diligently to stay self-aware and be mindful of how these biases may affect their relationships with clients. My own experiences as a social worker and graduate assistant gave me a particular view of the engagement phenomenon, but I had never worked for DCS as a FCM so my understanding (as all understanding) was limited. If I became an FCM for DCS, I think engagement with culturally different clients would be more difficult because we all have baggage that we bring to a relationship, but our baggage would be even more dissimilar than if the client and I were culturally the same.

In my pre-understandings of the phenomenon I outlined my forestructure and acknowledged my past familiarity, present perspective, and future expectations of the engagement experience with culturally different clients. This was done so that I might

keep this forestructure in mind and, throughout the study, consider how it might be impacting my interpretations of the data.

In summary, IPA research combines phenomenological and hermeneutic philosophies and is an approach to studying how people make sense of their lived experiences. It is phenomenological in that it is concerned with the rich, detailed description and examination of the lifeworld; it is hermeneutical in that it is primarily an Interpretative endeavor that is dependent on understanding a person's perspective and context. This includes understanding not only the participant's point of view, but also the investigator's. Thus, IPA can be characterized as the empathetic questioning of a participant's experience that requires the investigator to be open and thoughtful about her/his own contributions to the research.

### **Sample**

The sample for the research study consisted of 11 FCMs, all of who had experienced the phenomenon of interest of having engaged with a DCS family that they considered culturally different from themselves. The sample was both purposive and homogenous and each participant met the following criteria: (a) White and female; (b) currently enrolled or recently graduated from the Indiana University School of Social Work's (IUSW) bachelor of social work (BSW) or master of social work (MSW) program; (c) currently or recently employed with DCS as an FCM; (d) working in an urban environment; (e) experience with the phenomenon of interest; and (f) able to demonstrate fluency in the use of descriptive language via a telephone pre-screening interview. The race and gender of participants was kept uniform and restricted to workers

who were White and female in an effort to capture the cultural understandings of the dominant group working in child welfare.

All of the participants recruited for this study were current or former students of the Title IV-E program, a federal entitlement program created by the Child Welfare and Adoption Assistance Act of 1980. This program provides financial support for undergraduate and graduate education in social work and was instituted as a way to address the workforce crisis in state child welfare agencies (Zlotnik, 2003). These students were ideal participants for the study because they had all worked for DCS for a minimum of two years, had caseloads of families they either were working with or had worked with recently, and were receiving their BSW or MSW degrees. Additionally, these students were distinct from other social work students in that they had made a commitment to pursue a long-term career with DCS, thereby declaring their intent to stay and be invested in the organization (L. McGuire, personal communication, November 15, 2011). This is a significant personal obligation because, nationwide, the average length of employment for child welfare workers is less than two years (U.S. General Accounting Office, 2003).

## **Recruitment**

Participants were recruited via referral from university gatekeepers such as BSW and MSW professors and advisors. These gatekeepers sent out emails to BSW and MSW IV-E students they had taught in classes and believed would be good candidates for the study. In this way the participants learned about the study from people they knew and trusted. Although study recruitment flyers (see Appendix A) were placed at the IUSSW, all of the participants eventually were recruited through gatekeepers' emails. The lack of

response from the flyers was likely due to the study taking place in the summer months and all of the students being employed full-time as FCMs for DCS. Because some of the participants were actively enrolled in graduate school and employees of the DCS, no monetary incentive was offered.

### **Data Collection**

Once a student or former student decided she was interested and wanted to volunteer for the study she contacted me by phone or email. If the initial contact was by email, I set up a time to talk to her more in-depth by phone. During this phone conversation, I pre-screened each person for the study by asking her to briefly describe a culturally different family she had worked with using as much detail as was comfortable for her. At this time I paid close attention to the words and descriptions to ensure she had experienced the phenomenon of interest and could demonstrate fluency in using descriptive and expressive language. At the end of the phone conversation a date and time for the formal interview was scheduled. All of the persons who were pre-screened appeared appropriate for the study and were included for participation in the study. The interviews took place at a location and time of each participant's choosing. The interviews then proceeded as follows:

1. I arrived at the meeting place early and made initial field notes.
2. Once the participant arrived, I introduced myself and provided a copy of the study information sheet for her review (see Appendix B), and answered any questions she had.
3. I asked the participant to complete a brief demographic questionnaire and to select a pseudonym for the study (see Appendix C).

4. I reminded the participant the interview was being recorded digitally and turned on the recorder.
5. Following the interview schedule (see Appendix D), I began with five warm-up questions to develop rapport and reduce the participant's anxiety. I then transitioned to the main study questions.
6. At the end of the interview, I asked the participant if she experienced any emotional distress from the interview and offered counseling referrals: no one accepted.
7. After the participant left I made ending field notes.

During the interview I asked probing questions to encourage the participant to describe her thoughts and experiences in as much detail as possible. For example, participants were asked: "Can you tell me more about that?" "Tell me what you were thinking then," or "How did you feel?" As indicated previously, before and after each interview, I logged field notes to enrich the interview and to document my observations, impressions, and interactions (Smith et al., 2009).

The interviews were transcribed by a paid transcriptionist who turned the interview audio files into text for analysis. This person signed a confidentiality agreement prior to beginning the transcription process (see Appendix E). I also reviewed the data handling process with the transcriptionist to ensure that the confidentiality of the participant and the integrity of the data were preserved. After each interview was completed and the field notes were made, I downloaded the digital file to a password-protected computer where the transcriptionist then accessed the file. Each interview was de-identified by replacing the participant's real name with a pseudonym

and each digital file was given a number. As each transcription was completed the transcriptionist emailed me the file. I then compared the transcription to the recorded interview to assure the accuracy of the transcription. All printed copies of the transcriptions and identifying forms were kept in a locked office. Electronic copies were kept on a password-protected computer and removable media drive.

In addition to the digitally recorded and transcribed interviews and the field notes, I also kept a reflexive journal. This is where I documented my personal thoughts, feelings, insights, and impressions that arose during the research process, including what happened in terms of my own values and interests (Lincoln & Guba, 1985; Patton, 2002). These personal reflections were recorded on an ongoing basis throughout the life of the study.

### **Data Analysis**

The analysis strategy for this study followed Smith et al.'s, (2009) six-step process for analyzing IPA data. Their process is similar to those proposed by other interpretative phenomenological researchers (see Ajjawi & Higgs, 2007; Crist & Tanner, 2003) but provided a clear guide for novices. In the first step I listened to a recorded interview and read and re-read the transcribed interview. This enabled me to slow my thinking and become immersed in the data. Immersion in the interview data was crucial because I was then able to focus on the participant as the unit of analysis and to fully enter the participant's world. I did not begin making any notes until I had read the interview through at least once.

In the second step I followed Smith et al.'s (2009) recommended process for initial noting by cutting and pasting the interview text into a Microsoft Word document



with three columns. The interview text was pasted into the middle column while the first and third columns were left blank. The first column was entitled “Emergent Themes” and the third column was entitled “Exploratory Comments.” I then made analytic notes in the form of descriptive, linguistic, and conceptual comments about the data. Descriptive comments focused on describing the content of what the participant said; linguistic comments focused on exploring the participant’s language (words and phrases); and conceptual comments focused on interrogating the text on an abstract level.

In the third step, I tried to reduce the volume of the data by identifying emergent themes, while still maintaining the complexity of the data. These themes were expressed as condensed phrases that captured the essence of a portion of the text, while still relating back to the entirety of the text and the lived experience. In this step the hermeneutic circle came into play as I constantly moved back and forth between the parts and whole of the text to interpret the participants’ experiences and to understand the data.

In the fourth step, I looked for connections across emergent themes to grasp how they related and fit together. In this way I developed an organized structure for highlighting the most salient aspects of the participant’s account of the experience. In their book, Smith et al. (2009) propose six ways to help the investigator identify patterns between emergent themes: abstraction, subsumption, polarization, contextualization, numeration, and function. In total, I utilized four of these strategies to move the textual analysis forward and to achieve a higher level of understanding. The strategies of subsumption and polarization seemed unsuitable to my study.

In the fifth step, I moved to the next case and transcript and repeated the analytic process described in the previous paragraphs. I also tried to set aside my analysis of the

previous case, and look upon the new transcript with a fresh view so as not to color my perception of each participant's individual experience. This proved more difficult to do as each transcript and case was analyzed.

In the sixth and final step, I looked for patterns across cases. This involved developing a master table of themes so I visually could determine how they fit together and related to one another. During this time, I reorganized and relabeled and discussed my impressions of the data with members of my committee to help move my analysis to a more theoretical level. Any questions or gaps that emerged from the analysis of categories and themes of the text were filled by reviewing the literature. Analysis and interpretation stopped once I found commonality among the themes and I achieved a holistic interpretation of the FCMs' cultural engagement experience.

### **Trustworthiness**

All scientific inquiry must have a means by which researchers can evaluate the quality of the work. In empirically based research this evaluation generally has been based on the researcher's establishing validity, reliability, and objectivity of the data (Patton, 2002). Recognizing that these positivist terms do not readily apply to naturalistic inquiries, some researchers have proposed alternative criteria for evaluating qualitative research. Perhaps the most well-known among these are Lincoln and Guba (1985), who coined the term *trustworthiness* to refer to a specific set of criteria by which to judge the integrity of qualitative inquiry. Yet, Lincoln and Guba's (1985) criteria have been criticized for being too similar to those used by quantitative researchers and for failing to take into account the basic philosophical differences that underlie the two perspectives (Smith & Heshusius, 1986). Therefore, Yardley's (2000) four broad principles for

assessing the value of qualitative research were selected to guide the present research. Each of Yardley's (2000) principles and suggestions for increasing the value of the study are reviewed in the subsequent paragraphs. Importantly, these principles are meant to be flexible and open to interpretation, so how a researcher addresses each of the principles may differ depending on the characteristics of a particular study.

Yardley's (2000) first principle is sensitivity to context. This means that in a good qualitative study the investigator will be familiar with the following: theoretical literature on the topic, empirical data, socio-cultural setting, participants' perspectives, and any ethical issues that could impact the study. To address this principle, I read the disproportionality literature extensively and familiarized myself with both the theoretical and empirical data. I also reflected on my prior experiences with the FCMs and the DCS organization. This enabled me to be more sensitive to the participants' situations and stressors and to quickly build trust and rapport during each interview. I discussed ethical concerns that could arise with my dissertation chair.

Yardley's (2000) second principle is commitment and rigor. Commitment is similar to the authors' sensitivity to context principle in that the investigator is encouraged to have prolonged engagement with the topic, be attentive to the participants, and be totally immersed in the data (Yardley, 2000). Rigor, on the other hand, refers to the thoroughness of the study. To address commitment, the interviews were conducted at a neutral location to protect the participants' privacy and reduce any anxiety they may have felt. Counseling referrals also were made available for participants who desired additional support following the interview. Finally, I met with two members of my dissertation committee periodically to ask questions, check my ideas, discuss dilemmas,

and reflect upon my own personal reactions to the data (Schwandt, 2007). This enabled me to minimize my own subjective bias and ensure my interpretations were thoughtful and clear. Rigor was demonstrated thorough the data collection and analyses. For example, I conducted one pilot interview on March 23, 2012, to hone my phenomenological interviewing skills and develop my technique. During the study interviews, I utilized iterative questioning and probes to elicit detailed information and flush out any inconsistencies and contradictions in the data (Shenton, 2004). Once the interviews were transcribed, I read the transcripts while listening to the recorded interviews to ensure all of the interviews were transcribed correctly. After the accuracy of each transcription was verified, I emailed the transcript to the participant to ask for confirmation that her interview statements were transcribed correctly. Finally, I made the transcripts, field notes, data analysis documents, and my reflexive journal available for review upon request.

Yardley's (2000) third principle for addressing the value of the research is transparency and coherence. This principle refers to how clearly the stages of the research process are explained and the rationality of the investigator's argument (Smith et al., 2009). To address this principle, meticulous notes were maintained to detail all aspects of the data collection process and my analyses of the data. Additionally, in the write-up of the study, excerpts of the textual data were presented along with my interpretations so readers can discern patterns and themes for themselves. In combination, these two activities should allow others to follow my line of reasoning for the study.

Yardley's (2000) fourth principle is impact and importance. This principle addresses the theoretical and practical value of a study, as well as its socio-cultural

impact. Accordingly, a quality IPA study should enrich our understanding of a phenomenon, have practical implications for those affected, and include some social purpose with social effects. Although it is impossible to predict the usefulness of this study, minimally, it will “open up new ways of understanding” (Yardley, 2000, p. 223) how cultural differences relate to the overrepresentation of children of color in child welfare system.

### **Ethical Considerations**

Several ethical issues were important to address to ensure the safety of the participants in the study and to receive approval from the University’s human subjects review board. The two issues that posed the greatest concern were obtaining informed consent and maintaining confidentiality. Informed consent is defined as “the voluntary and revocable agreement of a competent individual to participate in a therapeutic or research procedure, based on an adequate understanding of its nature, purpose, and implications” (Sim, 1986, p. 584). According to Sim, informed consent is composed of four parts: disclosure (providing adequate information), comprehension (understanding the information), competence (ability of participants to make a rational decision), and voluntariness (no coercion). To address these parts, each participant interviewed for the study was provided with an information sheet (Appendix B) explaining the study’s purpose. This sheet was written in clear, understandable language. Participants also were encouraged to ask me questions to ensure they had a clear understanding of the project and what was expected of them before signing the consent form. No deceptive research practices were used, and the participants were told they had the right to withdraw at any time without consequences. This last piece was especially important because some of the

participants for this study were enrolled in graduate school and needed assurance that their participation was not linked to their grades.

With regard to confidentiality, both I and the informed consent form explained to the participants that their identities would never be revealed, nor would their names ever be linked to the information they provided during the interview (Padgett, 1998). Each audio-recorded participant was assigned/selected a pseudonym and an identification number at the time of transcription, and all detailed information that was disclosed during an interview that could be linked back to the participant was changed or omitted to protect the participant's identity. As another precaution, each interview was conducted at a neutral location of the participant's choosing. Additionally, before each interview began, each participant was reminded that her/his participation was voluntary and that the interview could be stopped at any time. These measures appeared to lessen the participant's apprehensions of any repercussion as a consequence of study participation.

Underlying the two ethical issues previously discussed is a principle found in all social science research, that of doing no harm. According to Smith et al. (2009) there is seldom a reason to violate the no harm principle in qualitative research and deception is rarely used. However, the investigator must be cognizant that talking about sensitive issues could constitute harm for some participants. For this reason, all of the research participants were offered referrals for professional support after the interview. The only anticipated risk for participation in study was brief psychological discomfort.

One final ethical consideration for this research study involved socio-political ramifications. This was a concern for two reasons: (a) the close relationship that exists between the IUSSW and DCS; and (b) my objective to explore cultural differences,

including any bias beliefs or worker insensitivity that might arise during the interviews. In order to be transparent and affirm my positive intentions, I met with the director of the Partnership Programs on March 5, 2012, and the Dean of the IUSSW on March 12, 2012, to describe the project and answer any questions they might have. My dissertation chair and the director of the Partnership Programs also notified the appropriate persons at DCS, verbally and in writing, about the research study. This resulted in my receiving approval from the Deputy Director of Operations for DCS on March 14, 2012.

The research was approved for exempt research status from the University Institutional Review Board on February 15, 2012. Exempt research status was appropriate as no physical or emotional harm was expected to come to the participants. Consequently, study participants did not have to sign an informed consent statement but merely were given the study information sheet and offered counseling referrals as needed.

## CHAPTER FOUR: PRESENTATION OF ANALYSIS AND RESULTS

### **Introduction**

Analysis for this study centered on two primary research questions. The first question was: “In your work, how do you define and think about culture?” I then requested the participants discuss a DCS case involving a family that was culturally different from them in some way and asked the second research question which was: “How did these cultural differences affect your engagement with this family?” The purpose of these questions was to explore the meaning of culture and to understand how cultural differences shape the FCM engagement process with culturally different families. The results are presented here in two sections (see visual synopsis Appendix F). These sections correspond to the two research questions and follow Smith et al.’s (2009) recommended procedure for presenting IPA results in which the researcher selects transcript extracts and provides detailed analytic interpretations of the text. This allows the researcher to give an account of the data, to offer interpretations, and to make a case for what it all means. In the first section, entitled “Chapter Four A,” I briefly describe the recruitment process along with the demographic characteristics of the study participants and the DCS cases they selected for discussion. This is done in an effort to contextualize the data and enrich the readers’ understanding of the narrative excerpts. This is followed by an account and explanation of how the FCMs define and think about the concept of culture. In the second section, entitled “Chapter Four B,” I introduce my thematic analysis and explain each theme, along with the participant responses that support each theme. In Chapter Five, I discuss the findings, limitations, and implications for social work education, research, and practice.



## **Chapter Four A: Defining Culture**

### **Participants**

I interviewed 11 FCMs from the state's DCS between April and July, 2012. From the beginning, recruitment was slow, and I received only two responses from the initial study email and the flyers that were posted at the IUSSW. To address this issue I scheduled meetings with the chair of my dissertation committee along with the Title IV-E Program staff to discuss the problem. From these discussions we suspected the low response rate to be due to these reasons: (a) the interviews took place in the summer months; (b) the MSW graduates were promoted rapidly to supervisory roles within the DCS; and (c) FCMs believed they worked in a rural environment, thus not meeting the criteria for the study. After further investigating the state's population, I discovered complete rurality is rare in the state, and most counties are considered urban or feature mixed urban and rural areas (Waldorf, 2007). Consequently, to increase participation in the study I decided to expand the inclusion criteria to incorporate BSW graduates and to omit the urban environment criterion from subsequent recruitment emails. These modifications had positive results, and all of the participants were recruited after these changes were made.

Although 11 participants were interviewed for the study, only 10 were included in the final analysis. The eighth interview was discarded due to the FCM having only brief experiences with culturally different families and insufficient use of descriptive language during the interview. The 10 participants represented eight counties across the state (Floyd, Hendricks, Johnson, Lake, Madison, Marion, Marshall, and Morgan), with five of these counties having populations of a million people or more (Waldorf, 2007). The ages

of the FCM participants ranged from 22–44 years old, and all were of the Caucasian race and female gender. In considering the educational attainment of participants, three had earned their MSW degrees, seven had earned BSW degrees, and all but one had graduated with their degrees within the previous three years. Each of the FCM participants reported carrying a caseload of between 12 and 17 families, and most of these families included multiple children. All of the participants had worked for DCS as FCMs for a period of one to three years.

All of the participants recruited for the study were assigned as *ongoing* FCMs except for two participants who were assigned as *assessment* FCMs. Assessment FCMs are distinct from ongoing FCMs in that they make the first contact with a family reported to CPS and have 30 days to complete the initial assessment, investigate the allegations, and determine whether the maltreatment occurred and can be substantiated. If the allegations are confirmed, the case is transferred then to the ongoing FCM who is responsible for performing a comprehensive assessment of the family's circumstances, devising a case plan, arranging for services, evaluating the family's progress, and closing the case (Goldman et al., 2003). If the allegations are unsubstantiated, the assessment FCM must close the family's case with DCS. Although she may still refer the family for services, these are incurred at the family's expense. This difference in the FCM assignments is important because by the very nature of their job assignments, assessment FCMs have much less time to build rapport and engage with a family.

Participant interviews lasted between 40 and 94 minutes and were conducted primarily at coffee shops and restaurants in the community; however, four of the participants requested their interviews take place at the DCS office where they worked.

When asked why they preferred to be interviewed at work, all four FCMs indicated it was easier to fit the interview into their busy workday if they did not have to leave the office. In these instances each FCM obtained permission from her immediate supervisor, and the interview was conducted at the agency in a private office. Participant information is illustrated in Table 3. Pseudonyms are used throughout the manuscript to protect the FCMs' anonymity and confidentiality.

Table 3

*Participant Demographics*

Participant Name and Number	Degree	Interview Location	Age	FCM Assignment
#1 Madison	MSW	DCS	28	Ongoing
#2 April	MSW	DCS	25	Ongoing
#3 Beth	MSW	Coffee Shop	27	Assessment
#4 Katie	BSW	Coffee Shop	23	Ongoing
#5 Joy	BSW	DCS	29	Ongoing
#6 Angelina	BSW	Restaurant	27	Ongoing
#7 Carrie	BSW	Coffee Shop	24	Ongoing
#8 Candy	BSW	DCS	44	Ongoing
#9 Jessica	BSW	Restaurant	22	Assessment
#10 Susan	BSW	Coffee Shop	23	Ongoing

**Cases**

After defining and describing their understandings of culture, I asked each participant the following question: "Of the families on your caseload, how many do you consider to be culturally different from you?" Eight of the 10 FCMs quickly responded with "all of them"; one stated "three or four"; one FCM replied "none of them." I then requested each participant to discuss a case she found particularly challenging to work with due to the cultural differences that existed between the FCM and the family. The majority of FCMs chose families who were different from them based on race; thus,

FCM narratives included four African American families, one Nigerian family, one African American–Ugandan family, and one Hispanic family. Of the three remaining FCMs, two selected families who were different from them based on the families’ experience of generational poverty, and one FCM selected a family because the father identified as transgender. Still, when the FCMs were asked to identify the most common cultural differences between them and all of the families they work with, nearly all reported SES. Of the 10 families the participants discussed, there were three single-parent homes and seven two-parent homes; however, two of the single-parent homes had other relatives living with them. Lastly, four of the families had been reported to CPS for physical abuse, five were reported for neglect, and one family was reported for emotional abuse.

### **Defining and Thinking about Culture**

Social and behavioral scientists generally describe the word culture as the full range of learned human behavior patterns. The social work profession extends this definition by describing culture as “the integrated pattern of human behavior that includes thoughts, communications, actions, customs, beliefs, values, and institutions of a racial, ethnic, religious, or social group” (NASW, 2000, p. 61). Although this definition appears straightforward, the participants’ descriptions of their daily experiences and understanding of the word culture were not. In fact, when asked to define the word culture, many of the participants initially were hesitant to respond and required reassurance that there was no right or wrong answer. For example, when Madison and Katie were asked to define culture, they each immediately responded with “Oh gosh, umm...” followed by silence and worried expressions until verbal support was provided.

After receiving this support, the participants generally explained their definitions by identifying cultural characteristics common to individuals and groups. As they elaborated on their definitions, however, their narratives pointed towards a definition of culture that was more complicated and nuanced. These nuances added several dimensions and provided breadth and depth to the concept of culture.

By far the most common responses the participants provided were that culture was defined as “family,” “race,” “religion,” and “socioeconomic status.” More than half of the participants mentioned these characteristics. Less frequent responses were “where a person grew up,” “place of birth,” or “the community you live in,”—all of which refer to the location of a person’s background. The characteristics least mentioned were “sexual orientation,” “gender,” “traditions,” “values,” “beliefs,” “routines,” “housekeeping,” and “discipline strategies.” Three of the more unusual responses were “parenting,” “parent intentions,” and “personal motivations.” After providing their definitions, participants were asked how or where they had learned about culture. Most responded with “school” or “college,” “personal experience,” and “family.” This information is summarized in Table 4.

Table 4

*Participant Definitions of Culture and Learning*

Participant	Definition	Where Learned
#1 Madison	Family, values, beliefs, race, SES, housekeeping, religion	College and particularly social work classes
#2 April	Family, race, physical characteristics, religion,	Personal experience and social work classes

Table continues

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#3 Beth	Worldview, family roles and structure, discipline practices, parent intentions	Family, personal experience, traveling, social work books and classes
#4 Katie	Would not define	Family, work experience at DCS
#5 Joy	Race, routines, family values, religion, SES, personal motivations	Family and personal experience
#6 Angelina	Place of birth, background, SES, race, upbringing, way of thinking	School, family, work and personal experience
#7 Carrie	The community you live in, expectations, religious beliefs, traditions, lifestyle	School, personal experience
#8 Candy	Race and religion	Upbringing and college
#9 Jessica	Race, religion, SES, sexual orientation	Upbringing and college
#10 Susan	How a family lives, routines, where a person grew up, how they were raised, race, gender, SES	School and personal experience

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After reading and re-reading the transcripts, considering the FCM descriptions of culture, and listening to the participants struggle to explain the concept, I identified three dimensions to their descriptions that help to explain why the word is so complex and hard to pin down.

**The narrow to broad dimension.** The first dimension to arise from the participants' responses was the narrow-to-broad dimension of culture. This dimension, which closely resembles an upside down funnel, captures the full range of participant meanings of the word and illustrates how the concept can be understood as both narrow and broad at the same time. At the narrow end of the funnel, culture encompasses micro systems such as individuals and families and all of the specific personal and familial characteristics that apply to that person or group of people; for instance, race, religion, SES, and gender. As the funnel expands, it widens to include mezzo systems such as

neighborhoods and local agencies. At the broad end, the funnel encompasses macro systems such as organizations and large geographic areas; for instance, an organization's or country's values, beliefs, and practices. Participants also noted that many of these cultural characteristics can be applied to both individuals and groups simultaneously. For example, religion can refer to a single person or family's faith or that of an organization or country.

Nearly all of the participants referred to one or both aspects of this dimension in their descriptions of the word culture. Madison's narrative demonstrates this when she explains: "It's a really generic term, so it is hard to pinpoint exactly what it is; but, it comprises basically everything that the person and family is and all those characteristics that fit that group of people." Her definition of culture begins at the narrow end of the funnel with "everything that person and family is" and widens to include "all those characteristics that fit that group of people." Similarly, Susan states culture is "where a person is from, how they grew up, how they were raised...how they're raising their kids. There's a culture of the family and a culture of the community." Finally, April explains culture this way:

When I think of culture it's more about what makes that person who they are. There is a culture for your family, how you look, your race, and those types of things. But then there is also the culture of DCS County 1, as opposed to DCS in County 2, or DCS in County 3: They're all different.

In all three of these descriptions, the definition of culture begins at the narrow end of the funnel with micro systems and slowly widens to include larger systems. Yet, most of the participant definitions were described in a less linear fashion, and in listening to the narratives I recognized the participants had difficulty presenting their ideas about culture

in a clear way. In Joy's definition, she alludes to knowing there are both narrow and broad dimensions to culture, but she has trouble articulating this:

I feel that almost every person I have ever worked with had a different culture than my own. I don't think it's just African American or Asian culture. I think it's so much more and gets even more individually based....My family values and just my way of living is completely different from what my families believe. So I think it can go from religion, to African American or Asian discipline and things of that nature to just individual household cultures.

In this excerpt, Joy acknowledges ethnic groups and individual families as having their own cultures but aside from mentioning religion and discipline, she does not explain what culture is. Jessica's response is stated more clearly but is still confusing because she depicts layers of culture in her definition:

Well it's kind of like what I've always been talking about with culture: there are many definitions. There's the culture of religion, the culture of poverty, the culture depending on what race you are and what religion, and your sexual identification. There are so many different cultures and I'm sure I'm missing a few, but that's really how I define culture. It encompasses so many different aspects of an individual, their environment, and what defines who they are.

As Jessica explains in her definition, some cultural traits, such as religion and poverty, have their own subculture, or are a culture within a culture. These layers of culture are reminiscent of "Russian nesting dolls" and denote a complex relationship of an object nestled within another object. Thus, while a person's religion, SES, race, and sexual identification are characteristics of culture, each characteristic also includes its own background, customs, behaviors, and mores. Carrie's narrative is the most succinct, and her definition of culture flows back and forth between the narrow and broad dimensions of culture:

I definitely feel when I think about culture that it's kind of the atmosphere or the community that you're raised in and your set of beliefs in terms of appropriate lifestyles. It's just an all-encompassing word I feel like, but



obviously the lifestyles and any religious beliefs or traditions you have are part of it. Like I said, you can really narrow it down to family cultures, but then if you're just thinking about culture in general, it really is the community that you're raised in and the expectations within your communities and sub-communities.

Finally, two of the participant definitions were notably atypical in that one FCM took an extremely limited view of the word culture and the other FCM was reluctant to provide a definition. Candy explains that her definition is based on her experiences in the county where she lives and works:

In this county there is not nearly the culture you would get in other places. I think I've had maybe one family that's not Caucasian, and so to me, [when assessing families], the culture part is always easy for me because there's almost a non-issue. I think the culture around here is about being Caucasian in our values and culture. And I know it encompasses many more things, but in my mind it always goes back to race and religious beliefs. And we don't even have a lot of religious beliefs out here.

This restricted viewpoint was not shared by any of the other participants. Candy's definition intently focuses on just two cultural characteristics, that of race and religion, both of which she applies to the families and county where she works, or to the micro and mezzo system level of the funnel. She also acknowledges disregarding other cultural characteristics that do not fit into her preconceptions about culture. In contrast, when Katie was asked to share her definition of culture she stated:

I think I've always thought everything was defined by the way people perceive it. Culture can mean so many different things to so many different people so I always, when I work with families, I ask what it means to them. But for me, wherever you are at that point and whoever you're with is how culture is defined. I don't put people into bubbles. People don't come in bubbles and cultures don't either.

In this excerpt, Katie suggests culture is a very big concept that covers a lot of area when she says it "can mean so many different things to so many different people." In her work as an FCM, she attempts to simplify the concept by asking each of her families what it

means to them on a personal level. Her statement that “wherever you are at that point and whoever you’re with” implies her definition is present-day and narrowly focused.

Although Katie’s reticence to “put people into bubbles” and label them is understandable in a profession that generally resists such activity, her refusal to elaborate on her own definition and to distinguish diverse groups suggests she may not fully grasp the importance or benefit of viewing people on a broader level, in relation to their own cultural group and society.

**The intrinsic–extrinsic dimension.** The second dimension to the participants’ definitions of culture is the intrinsic–extrinsic dimension. In this dimension participants described certain cultural traits as being innate to a person whereas others are acquired. That is, participants expressed the belief that persons are born with some cultural traits that are fixed and beyond their control and others that are changeable, depending on personal preferences. April explains:

There are certain things you are born with. You are born with your race, and most of the time, in my world, I was born with my religion. Those things are inherent to you, but then as you grow up, where you go and where you’re from...you know going to Ball State made me a different person than had I gone to Purdue. So I think that’s part of my culture.

In this excerpt April describes her personal, physical, and spiritual traits as intrinsic and fixed, while her choice of where to attend college as extrinsic and changeable. Thus, April was able to choose a particular college and cultural experience over another. Carrie expresses a similar belief in this dimension:

I feel a lot of it [culture] is specifically lifestyle choices and maybe even the expectations of them: expectations of others and how they expect others to treat them, how they expect others to interact with them, what they expect others to give them, and how they expect that they should treat you.

Carrie does not specify which cultural traits she considers intrinsic versus extrinsic, or “lifestyle choice,” and her attention to “expectations” is unusual, but both lifestyles and expectations share a common feature in that both are malleable can be changed. Although only two of the FCMs included the intrinsic–extrinsic dimension specifically in their definitions of culture, all of the participants referred to it in their narratives when discussing their interactions and interventions with families. Participants often wavered in this dimension of culture when discussing families who live in poverty. In her interview, Candy describes most of the DCS parents she works with as being born into poverty: what she believes is an intrinsic condition for which they have no control. Consequently, she becomes highly frustrated when the mother in her culturally different case, who has a nursing license, decides to stay home with her infant daughter instead of placing the baby in day care and returning to work. Candy states:

Why don't you work, why don't you work, why don't you work? It was almost like they chose to remain socioeconomically low. But they had strong religious beliefs, and I really struggled with...I don't get this. But then that's typical. I get a lot of people in DCS for reasons that I don't understand. But really they, or she, could have chosen to have enough money to support her family easily, but they [the parents] relied on reduced lunches [for their two older children]. I can't recall if they were TANF [Temporary Assistance to Needy Families] or not, but they had food stamps, and that was a choice.

When I later inquired about the infant's father, Candy responded: “the husband was just disabled, and he chose not to work. And I couldn't get that.” Throughout the interview Candy is completely exasperated by the parents' unwillingness to change their beliefs and values, and she blames them, especially the mother, for the family living in poverty. Eventually Candy explains “almost every family is frustrating for some reason. It just happened to be that there was a little bit more of a frustration because they had so much more potential than the other clients.” Interestingly, this family initially was referred to

CPS for excessively disciplining an older child and not for reasons of neglect or poverty. Candy had surmised it was the family's financial stress and strong religious beliefs that led to the corporal punishment. As a result, Candy spends much of her time trying to persuade the mother to return to work and to attend a church closer to the family's home, instead of focusing on the excessive discipline problem that brought the family into contact with DCS.

Many of the FCMs struggled with the intrinsic–extrinsic dimension as it relates to poverty. When the FCM viewed the family's poverty as extrinsic, as in the previous case example, it was seen as learned behavior within the family's control, and this often elicited condemnation from the FCM. Alternatively, when the FCM viewed the family's poverty as intrinsic, it was seen as beyond their control and this elicited empathy from the FCM. Carrie's narrative illustrates this more empathetic view:

I guess in a way it [the cycle of poverty] doesn't really bother me that much. I kind of feel like with my clients, when I talk to them, I do try to show them the positives of maybe getting employment, or finishing school, or whatever. But I also understand that a lot of them, not only is it difficult because it would be like breaking an entire cycle of this lifestyle—so that is obviously difficult—but there's also other barriers. It's not just a matter of going to get a job. A lot them don't have cars, and we live in X county, and even in Indianapolis, public transportation isn't good. When you're in X county it's worse. So you can take the bus, but that usually means you are going to have to leave for work two hours earlier than you normally would and I wouldn't want to do that: and so I understand. Like I said, I can't agree with it but I understand it, and it doesn't really affect me.

Carrie expresses more empathy because she attributes the poverty her families face to both intrinsic and extrinsic conditions and has a greater understanding of the systemic and oppressive nature of poverty. In this excerpt she suggests poverty is sometimes ingrained as a way of life and not simply the result of individual failings but also the failings of larger society to provide adequate transportation and other services.

**The dynamic dimension.** The third dimension of the FCMs' definition of culture is that the concept is ordinarily dynamic and always growing and changing. In their narratives, participants noticed this occurring in two ways. First, they related that their own definitions and understandings of culture were being amended constantly as they gained more familiarity and experience with different types of people. Second, they observed that the cultures of the families they worked with also changed. That is, a family's beliefs, attitudes, behaviors, and practices—the external traits of culture—usually grew and expanded to integrate new ideas and information. The FCMs indicated this was especially true for immigrant families new to the United States.

During the interviews, after the FCMs had shared their basic definitions of culture, I asked them to explain how their definitions developed or changed over time. I asked the participants to begin by sharing their earliest memories of noticing culture. All 10 of the participants easily recalled these first experiences, which usually occurred between the ages of 7–14 years and involved their noticing racial differences or hearing racial slurs at home or in school. For the most part, these initial experiences made great impressions on the participants and left them feeling that something was not right with how certain people were talked about or treated. As adolescents, the participants reported they did not give much thought to the concept of culture in high school because they did not have to. It was not until they entered college and routinely interacted with different types of people that participants reported truly thinking about culture and what it meant. Hence, 8 of the 10 participants related learning about culture from their undergraduate educations in social work. These participants explained they were assigned readings and activities in their social work classes that made their definitions of culture grow and

expand. Seven of the participants additionally referred to personal experiences that had broadened their definitions of culture. These experiences included working, interning, volunteering for different organizations, and traveling abroad. Six of the 10 participants noted their ideas about culture were influenced by their family upbringings. For example, two of the participants had fathers who were church ministers, and one had parents who were missionaries. These upbringings sometimes resulted in participants receiving mixed messages about culture because as children they were taught to accept and love others, while at the same time learning their religious beliefs were better than others. Several of the participants mentioned being more open-minded than their family members and attributed this to their educations and life experiences. All of these responses imply that, to a large degree, the more exposure and experience a person has to diverse groups of people, the more comprehensive their definition and understanding of culture. April recognizes this connection between experience and culture when she states, “I think everything you interact with at some point in time in your life kind of rubs off on you and becomes part of you and your culture.” Thus, the concept of culture is expanded and refined as new information is absorbed.

Participants also noticed the dynamic dimension of culture occurring in the DCS families with who they worked. Beth explains how this dimension applied to immigrant families:

It’s a very fine line. It really does have less to do with any kind of book definition or even any one person’s understanding of his culture....What I’ve found with immigrants is that it [culture] changes a lot. Things get integrated and mixed in and it’s not the same anymore: you’ve got a new culture you’re working with.

Beth goes on to describe immigrant families as being in various stages of integration and notes a single household often contains two cultures that collide: the culture of the

family's native country and the culture of the family's adopted country of America. From this collision a new, third culture arises that is an amalgamation of the other two. This situation illustrates the dynamic nature of culture and how cultures often merge to retain old beliefs and values but incorporate new ideas, too. In reviewing the FCM narratives, the most common cultural changes that occurred within both immigrant and non-immigrant DCS families were these: (a) Parents learned new discipline practices; (b) Parents learned new skills to cope with problematic behaviors in themselves or their children; and (c) Parents learned how to keep children safe by increasing supervision or cleaning and organizing their homes. Regardless of the family's status, once they were involved with the DCS, the parents were challenged to make cultural changes within their family to improve the safety, permanency, and well-being of their children.

Another type of cultural collision occurred when an FCM's own cultural traits did not match those of the family she was trying to help. In these situations, either the FCM or the family had to change their cultural viewpoint in order for the relationship to move forward. Usually the FCM was forced to reflect on her own cultural beliefs and change her expectations of families. One of the more common cultural collisions described in the participant narratives was about work. Carrie explains:

Obviously, in the culture that I grew up in, you went to school, most of us went to college, and we got jobs. And that's how we make our living. But most of my clients, and just our clients in general, it's like when you try to talk to them about the possibility of getting employment, it's almost like "no."

In this excerpt Carrie describes her upbringing and values as conflicting with most of her DCS families in regards to the importance of work. She attributes her DCS parents' unwillingness to work to their being surrounded by family and friends who also do not value work. In the DCS case Carrie shares for her interview, she initially tries to persuade

the parent to find employment, but quickly realizes this is a losing battle and does not want to jeopardize her engagement with the parent. Thus, she opts to change her own cultural expectations and accept the parent's lifestyle, along with that of similarly situated DCS families. She relates, "I have families that literally only get Section 8 housing and food stamps and that's all. And they're still managing to make it: and it's okay."

Similarly, Joy emphasizes her strong work ethic in her interview and describes how she spent the early stage of her culturally different case gently pressuring the parents to find jobs, despite their managing to pay their debts and their child having severe behavior problems. In the end, however, she understands the family's situation more and realizes she has to let this go as it was not the parents' issue, but hers. She states:

They were able to support themselves, or their grandmother was able to support them. We were able to get the child on disability so that they could maybe have that little source of income. And one thing that really helped me let go of the job situation was the child didn't sleep through the night at all. She was having trouble with her medication, and they [the parents] would be so exhausted where she would keep them both up. And so just kind of taking [this] in: it's even helped me with my other cases....And so working with them has helped me to realize and just take into account all factors.

In this excerpt Joy describes how she "let go of the job situation" by changing her perspective and her cultural expectations of the family. She realizes she had not taken "all the factors" or barriers to parental employment into consideration. This understanding allows her to accept and support the family in living their life the way they see fit, instead of forcing her cultural values upon them.

In the previous examples, both Carrie and Joy reflected on their own cultural values and decided to change how they perceived and understood their DCS families' situations. This allowed them to move past the cultural collision over work ethic and continue to engage with and help the parents. In two of the FCM cases, however, cultural



collisions could not be overcome because the parents were unwilling to change their perceptions of the FCMs' culture. April's narrative illustrates this when she describes a family on her caseload:

They weren't different than some of the other families on my caseload, but they took offense to that fact that I was different from them. They made it very apparent that the reason I was doing the things that I was doing was because I was White and from an affluent family, which I'm not, but they perceived me in a way that made it difficult [for them] to want to work with me. But most of the other families didn't have an issue with that; I got along fairly well with most of my cases, but this one. And they perceived it was because I was, in their words, "a rich, young, White girl" was actually what I was told I was. But it was their issue with me, not my issue with them.

In this example, April's perceived SES, age, and race collided with the cultural characteristics of the family immediately and she was never able to overcome this. Yet, these cultural traits were innate to the FCM and things she could not change. Although April continued to utilize many of her skills to try and connect with the parents, they simply refused to change their perception of her and in their minds, what her innate characteristics stood for. Similarly, Madison struggled to engage with her culturally different parent—a single, African American mom of four children—who refused to change her perception of the FCM. In her narrative, Madison explains the mother made the assumption that because she was not a parent, she could not understand what it was like to be one. Additionally, Madison speculates, "I think there was a level of distrust with me just being White." She reports she often invited her African American DCS supervisor or director to attend the CFTMs (Conducting Child and Family Team Meetings) with the mother, believing this would help build trust with her, and describes the situation this way:

There were a lot of times where you could just see how she reacted to him [the African American supervisor] as someone who was of the same race

as her. It was much more respectful, much less defensive than how she generally reacted to me, even though we were saying the same thing in our own ways.

This excerpt also demonstrates the impasse that occurs when a DCS parent refuses to change his/her perception of the FCM's culture. Madison could not change her race or the fact that she was not a parent, and so the onus was on the mother to amend her cultural perception of what these characteristics meant to her. Madison goes on to explain that, at times, the mother would come around and work with her, but these moments were fleeting and inconsistent. She concludes, "I never really felt the kind of rapport or connection that I normally do with most of my families, which made it very difficult." Thus, in situations where the definition of culture is not dynamic, and no cultural change occurred with either the FCM or the family, progress was limited and permanent reunification between the child and the parents was less likely.

In summarizing how FCMs define and think about culture most of the 10 participants viewed culture as a complex term that encompasses both narrow and broad characteristics of individuals and groups. Additionally, the term usually was conceptualized as having both intrinsic and extrinsic components, some of which were innate to people and others that were learned. Lastly, the majority of participants described culture as a developing and changing concept that challenged both them and their families to think about culture—and everything it encompasses—in new ways and from different perspectives.

#### **Chapter Four B: The Meaning of Cultural Difference for Engagement**

In my analysis and interpretation of the narratives for the second research question that asked participants to describe how they engaged with families who were culturally different from themselves, I identified four themes coursing throughout the

interviews: (a) striving to understand and connect, (b) managing power, (c) accepting a culture of poverty, and (d) adapting communication. These themes, presented here in no particular order, appeared to overlap with one another, requiring the FCMs to attend to each of the thematic areas simultaneously as they interacted with their families. This means that at nearly every step in the engagement process, FCMs modulated their interactions in order to find balance and stability within and between each of the four themes and in the FCM–family relationship. As a reminder, the engagement process is conceptualized in child welfare as an ongoing process with several distinct phases and consists of “a series of intentional interventions that work together in an integrated way to promote safety, permanency, and well-being for children, youth, and families” (National Resource Center for Permanency and Family Connections, n.d., para. 1). Each phase of the engagement process necessitates that the FCMs be in tune to themselves and others in order to preserve their relationship with the family.

During my analysis of the interviews, I paid close attention to the words and phrases the FCMs used to describe their understandings and experiences with families. This resulted in the discovery of many idiomatic phrases that revealed the FCMs’ inner thoughts about a person, family, or situation. Idioms commonly are defined as a combination of words that have figurative as opposed to literal meaning. Van Manen (1990) posits these phrases are common in phenomenological research because they are “born out of lived experience” (p. 60). For this reason, reflecting on the meaning and use of these phrases provides important insights into the position of the FCMs and their experiences of engaging families. In total, I identified 16 unique idiomatic phrases in the interviews as being relevant to the FCM engagement experience, and all were easily

categorized into the four identified themes. Some of the idiomatic phrases applied to two of the themes because they were interpreted as having a dual meaning. The meanings of some of these phrases and their relationships to the engagement experience are discussed as they arise in participant excerpts under each theme. A full list of the idiomatic phrases can be viewed in the Appendix G. Before presenting my interpretations of these themes, I first provide a brief overview of the DCS cases that the FCMs selected for discussion.

### **Theme 1: Striving to Understand and Connect**

The first theme I interpreted from the FCMs' engagement with culturally different families was their striving to understand and connect with the parents. From the first meetings to the time the cases were closed with DCS, most of the FCMs made continual efforts to join with the parents and comprehend their family situations. Sometimes the FCMs were successful in connecting with the parents and sometimes they were not, but, for the most part they kept trying. When the FCMs, for various reasons, could not connect with the parents, they focused more intently on building relationships with the children and usually were successful; however, this was uncommon as most of the FCMs were able to engage the parents to varying degrees. To fully illustrate this theme, I first explain the primary strategies the FCMs utilized to build their connections to the parents and their understandings of the family situations. Next, I present the evidence for my analysis by submitting a narrative account and transcript excerpts from one FCM interview that exemplifies the theme and corresponding strategies. Although FCM participants employed many different strategies to increase their understanding and build their connection to the families with whom they worked, three strategies stood out as being used more consistently and successfully than the others.

First and foremost among these strategies was their comprehending the parents' perspective by listening openly and intently to them discuss their lives through a series of conversations. This required the FCMs to use active listening skills, to ask perceptive questions, and to display a warmth and genuineness in their demeanor that encouraged the parents to "open up." As the FCMs came to know and appreciate the parents' personal circumstances and histories, their feelings of empathy grew. *Empathy* is defined in the social work profession as "the act of perceiving, understanding, experiencing, and responding to the emotional state and ideas of another person" (Barker, 2003, p. 141), and is considered vital to engaging parents in child welfare (DePanfilis & Salus, 2003; NASW, 2013). Empathy also was fostered when the FCMs compared their own childhood upbringings and lives to those of the parents and children with who they were working. Participants routinely made this comparison in their work with the families and usually recognized themselves as having been "lucky" or "privileged" in their personal backgrounds. Although this strategy for developing empathy was not verbalized openly by the FCMs, I interpreted it as a natural reaction to a new affiliation as people often look for similarities and differences between themselves and others, especially in novel situations.

The second strategy the FCMs utilized to understand and connect with their culturally different families was to ensure they communicated clearly, honestly, and respectfully with the parents at the start of the working relationship. All of the FCMs emphasized this was an essential part of building trust and particularly important when there were cultural barriers to communication or the parents had previous negative experiences with DCS or other organizations. Other responsibilities the FCMs identified

as important to communication were being forthright with each family about the DCS process and what they could expect, answering the family's questions, being available by phone, and not appearing judgmental in behavior or tone of voice. These tasks were crucial at the start of the working relationship because, as one FCM noted, "first impressions matter."

A third strategy the FCMs employed to engage with culturally different families was to focus on family strengths and what the parents were doing right to keep their children safe and healthy. This is opposed to focusing on weakness, dysfunction, and all that the parents were doing wrong in raising their children. This strategy is not surprising given that a strengths perspective lies at the foundation of current child welfare practice (DePanfilis & Salus, 2003) and is emphasized heavily in social work education. The strengths perspective is an orientation that emphasizes clients' internal and external resources in addressing problems and overcoming hardships (Barker, 2003). Ligon (2002) further adds that the perspective "acknowledges that the client possesses knowledge, abilities, resilience, coping, and problem-solving skills that are there to be employed" (p. 99). In regards to the FCM participants of this study, this strategy appeared to foster respect for the parents and instilled hope that each family's and child's situation could improve.

Katie's interview strongly demonstrated the first theme and corresponding strategies. This is because she attempted to understand and connect to her culturally different parents by listening intently and openly to them, communicating clearly and honestly, and focusing on the family's strengths. As Katie reflected on her own background and began to comprehend the parents' situation, her level of empathy grew.

In what follows, specific excerpts of Katie's interview are highlighted to show each particular strategy. Although these strategies are being presented here separately, all three strategies were essential to Katie's building a positive relationship with the parents and usually occurred simultaneously. In considering all of the interviews, when one or more of these strategies were missing, the FCM's connection to the parents and their understanding of the family's situation became tenuous.

Katie represented the first theme and strategy at the beginning of her interview before she introduced her culturally different family. After explaining her personal definition of culture and where it came from, she immediately acknowledged the importance of FCMs, as a group, understanding the families' experiences when they are reported to DCS and the value of giving these families time to come to grips with what's happening to them. She states:

I think one of the things that a lot of the case managers will make a mistake about is that they come in and they just start boom, boom, boom; this is what's going to happen; this is how it's going to go. They don't ever stop and let the families breathe. Because from the assessment period and ongoing, you know, if you end up going to court, to starting services, it can seem like a whirlwind of people coming in and just taking over your life. And people wonder why families fail. Well, if you don't ever help them understand or let them have time to understand what's going on, then [the parents] can't process what's happening, let alone how to fix it.

In this excerpt Katie demonstrates her comprehension of the parents' perspective and the empathy she feels for them as a group when she equates DCS services to "a whirlwind of people coming in and just taking over your life." She acknowledges how quickly things occur and the task-focused approach that many FCMs take in helping families. She appears sensitive to the fact that the abrupt entry of DCS into families' lives can be distressing and that parents need information and time to make sense of things before they can move forward. Katie continues to show her understanding of the parents'

perspective and emphasizes the importance of FCMs taking the time to get to know families in the following:

We kind of just impose all of our resources and services and people into their lives and don't take time to learn about the families. I think it's kind of, well, I know we're on a timeframe, I know we have things that have to get done, but we can't help people if we don't understand where they're coming from.

When Katie states “we can't help people if we don't understand where they're coming from,” she alludes to the significance of appreciating the families' personal circumstances and histories in order to empathize with the parents and know how to help them. She also recognizes that building a connection with people doesn't happen overnight but takes time. This is especially true for DCS families, who may unwillingly allow the FCMs into their homes or face legal consequences. Katie seems to understand and empathize with the parents' precarious positions in the previous excerpts. She concedes the reality that services are “imposed” very quickly and that families have little or no choice in the matter. Her empathy also was expressed when she compares her own upbringing to most of the DCS families. She reflected:

They've all kind of been brought up differently than I have. Not all of them were given the same opportunities or experiences that I had. You know, some of them had similar experiences or similar backgrounds, but most of them didn't have the positives that I think I was privileged with most of my growing up: like two parents involved, a steady home, the same school system my whole life, all of that.

In this quote Katie reveals she feels fortunate to have had a childhood with many positive opportunities and experiences and recognizes that many of the parents and children she works with have not had this stable upbringing. This helps her to see the bigger picture and not blame the parents for their unfortunate circumstances.



After sharing her thoughts about the DCS families and their experiences with the organization in general, Katie moved on to discuss her culturally different case involving Nigerian parents with three children: a baby, a toddler, and an elementary school-aged child. The oldest child, a step-son to the mother, came to the attention of DCS after the school noticed bruises and marks on his chest, back, arms, and face and reported the step-mother to CPS for physically beating her step-son with a piece of leather strap. He was removed from the home and temporarily placed into foster care until the situation could be resolved. The son's biological mother still lives in Nigeria, and he has had no contact with her since the family moved out of the country. Katie describes the family in the following excerpt:

The dad came here a few years ago to set up roots here in the United States. And then he saved up his money and he brought his wife and three children to the United States. They rent a home. He works, and she is now employed. He speaks English fairly well, but it's easier to talk to him in person than it is over the phone just because there's still some dialogue that is easier to see in his face when he's talking. She doesn't [pause] she talks, she talks more now than she did in the beginning, but she's still very reserved and quiet. Her English is still very broken.

During the investigation the step-mother admitted to disciplining her step-son for acting up in school but didn't understand what she had done wrong. Katie explained that when the family's case was first assigned to her, she knew very little about the family's culture and history. She had to do a lot of "digging" about the family's culture and where they came from—which she enjoyed—then she slowly obtained additional information through a series of conversations with the parents. Regarding her first meeting with the parents, she remarked:

Well, we met in court and then after that we sat down and had actual meetings and I think I got a little too enthusiastic. I think they were kind of thrown back by my inquisitiveness because I recognized that I was spouting off questions too quickly, and I had to stop myself because I was

like “When did you come? How did you get here?” And then I could tell that they were like, “Okay, what is this crazy lady talking about.”

When Katie was asked how she could tell the family thought she was crazy, she responded, “It was just the way the dad was kind of [pause] he would just straighten up, adjust himself; [from his] body language, it was very obvious that I was pushing a little bit more for my own selfishness than for their well-being.” To her credit, Katie recognizes immediately that she came off too strong with this family, and she quickly decides to slow down her communication and become more reserved in her demeanor. She made adjustments to both her verbal and non-verbal approach and tames her curiosity so that the family’s story and culture can unfold in a more natural way. Additionally, she emphasized the following about her communication with the parents in this first meeting:

I was up front with them. Regardless of culture, I didn’t sugarcoat that their son wasn’t going to be home for a while. I didn’t sugarcoat that they had work to do and what that work was. I told them exactly what we would need to see before we could recommend him coming home, but I allowed them to ask as many questions as often as they needed to. They still don’t ask a lot of questions, but I think it’s because they don’t know what the questions are. But as time goes by they are more comfortable with saying what they think or what they need.

In this excerpt Katie’s discussion demonstrates the second strategy to building connection and understanding by communicating clearly, honestly, and respectfully with the family. She immediately views the situation from these particular parents’ perspective, empathizes with them, and continues to do this throughout their working together. She uses the idiomatic phrase “I didn’t sugarcoat” to express that she communicated clearly, honestly, and without embellishment. Regarding the parents’ communication, she posited the following:

I think they held back because they were scared. I know there's a lot of persecution going on in Africa, and from talking to the oldest son, it sounds like they have some personal experiences that they're not ready to talk about, and things they have seen that they're afraid to talk about, so there was hesitation. There still is at times, when you try to talk to them about it, they don't really want to talk about the back then, so I don't push them too much to do that.

Katie again empathizes with these parents and reasons that it was likely they experienced various forms of oppression in their home country that made it difficult for them to open up and trust her. She was respectful of this fact and did not "push them" to open up in this way. She offered other cultural observations about the step-mother's communication style and the parents' roles in the family in the following excerpt:

I guess I probably talked to them a little differently at first to try to learn what they [understood] because I didn't know how much English they spoke. And the step-mom was [pause] I really struggled with her because she wouldn't necessarily speak to me. She would just kind of say "hi" and "bye" and that was about the extent. She barely made eye contact with me but does more now because I assert myself and make her make eye contact with me. But she and I have talked about things she needs to do to help herself because she was looking for employment. So that's one of the things we kind of have been working on: just small things that I'm really not supposed to do as a case manager, but we work on it anyway when we're talking. And then she's [pause] like they don't typically, the male is the dominant one so he would take care of all the business and to them, this is considered business. But because she was the one that caused the injuries, and she was the one caring for the child, I have to make sure she is the one understanding what's going on: so she and I have [had] to meet without the father, which has been very invasive in their relationship.

In the first line of this excerpt Katie reflects on having to alter her communication style and assess the language barriers that impacted her and the step-mother's working together. Although not explicitly stated, Katie implies she slowed down her dialogue, spoke more simply and clearly than usual, and encouraged the mother to make eye contact and converse freely. The step-mother's passive communication style in particular posed an important challenge, not only to her working with the FCM, but to her adjusting

and being successful in her new cultural environment. Katie is sensitive to this fact and acknowledges that the step-mother's incorporation of new ways of communicating and behaving places an added strain on the marital relationship. When I asked Katie how the father responded to the marital intrusion, she responded:

I think it frustrated the father a whole lot. I don't think he understood why we had to do it, but we've been able to kind of talk with him about it and make it work. Even though it's not something I think they will even be comfortable with. They have one provider that's in the home probably 3–4 times a week that is also from another culture, so they've been working on understanding. You know, they [the provider and mother] talk a lot about how she came to understand U.S. culture, and what she did to learn about it. And trying to connect them [the parents] with groups that can help them, and resources in the community, because they don't have anybody here.

In the previous narrative Katie again demonstrates her empathy for the Nigerian couple and the cultural confusion they must feel. She and the home-based provider additionally recognize the family's social isolation and need to associate with others who can truly relate to what they are going through and provide long-term support. In regards to Katie contacting the biological mother to notify her of the events, she explained:

Getting in touch with the biological mother has been a big challenge. Financially it was a challenge because we had to figure out who was going to pay for the money to make the call and how it was going to happen. And then also, how we get her information that she needs translated into what she can understand. I don't think I've accomplished that yet: it's still very challenging. The case has been open about three months and I just made contact with her last week.

And then also trying to get her any kind of paperwork, which I don't know that sending it is any more helpful. She didn't have a mailing address and there's no P.O. Box. She doesn't have email. She has a phone, but there's no address.

In these excerpts, Katie describes the practical barriers to communicating with the biological mother in Nigeria and explicates the added time and resources this took. After three months she is still figuring out the logistics of how to communicate with the

biological mother and provide her with the necessary information in a clear and culturally appropriate manner. Katie offered one final comment about her and the family's communication when she was asked whether reciprocal respect exists in the working relationship. She stated:

Yeah, I mean they have done a wonderful job of calling me and letting me know if they're not able to make a visit. They call the [DCS] facility, but they also call me—which is a big deal I think—for clients who feel they shouldn't have to check in, but they do. They call me for everything basically. Anything that happens, they pretty much call me right away.

In this excerpt Katie alludes to how far the family has come in their communication with her and praises them for this. She interprets the family's frequent communication with her as a sign of respect and appreciates their openness about what is going on with them.

As Katie comes to know this family, she immediately hones in on their strengths, the third strategy to building connection and understanding. After describing how the father and the rest of the family immigrated to the U.S., she remarks:

I know I definitely have a lot of respect for them: just being able to come to a new country and start a new life with very small children and the father is still financially struggling with paying for everything. But understanding why they came [pause] I mean it had to be the hardest thing ever to leave everyone you know.

In this excerpt Katie seems in awe of everything this family has been through and the risks the parents have taken to secure better lives for themselves and their children. She sees them as having worked hard to get to the U.S. and as continuing to work hard to pay their debts and settle into their new environment. In discussing the physical abuse of the child, Katie explained:

They [the parents] were very remorseful when they realized what it meant they had done. I don't know that they were remorseful for what they did, because it's what they are used to, it's how they were raised. And it was hard to be harsh with them knowing that it wasn't their fault. That's how

they were brought up and how they were taught. And with talking to the biological mother, I was trying to explain to her that her son was not with his father anymore, that he was with a person that is trained to take care of children, but foster care is like a foreign term. She was like, “he needs to be back with his dad.” She didn’t really, I mean, I guess she was sad he had been injured. I was trying to explain he had been injured and that he had to heal from marks and bruises, but she said if he’s better he just needs to go back.

In this explanation, Katie clearly views the parents’ remorse for physically abusing their son as a strong point and as demonstrating their willingness to change and learn new discipline practices. She also notes the cultural differences in raising children and empathizes that the parents disciplined their child in the only way they knew how and in a way that was consistent with their culture. Katie fully realizes the extent of the cultural divide after speaking to the biological mother in Nigeria through an interpreter, as the mother was less concerned about the boy’s injuries and more concerned that he had been removed from his father’s custody. This results in Katie assigning less blame to the parents for their harsh discipline practices than she would if the parents had been born and raised in the U.S. This interpretation holds true for two other FCM cases whose families included parents from other countries. That is, immigrant parents were given more latitude for their parenting mistakes because they were viewed as less familiar with the laws and customs in the U.S. In the present case, this was also true for the Nigerian-born son, whose disruptive behavior in school was attributed partially to the cultural differences between the two educational systems. Katie expressed much empathy and understanding for the parents, the child, and their situation as she further discussed why she believes the physical abuse occurred:

But it was a cultural difference in their disciplining techniques. And he is a child that can test your patience, and he does. He was six when he came so now he is starting to realize that his biological mother is still in Nigeria: he

is dealing with that. He is dealing with the fact that school in Nigeria was a lot more active. They don't do the sit-in-your-seat type of thing: they do the stand up and yell out the answers thing, you know, very vocal. They do a lot of singing. We don't do that here. So for him being in his seat for any extended period of time is very challenging. Raising his hand and being quiet is very challenging.

Katie clearly feels empathy for the son and the adjustments he has had to make in his new educational environment. Although she views his liveliness as a strength that served him well while being educated in Nigeria, his enthusiasm must now be channeled in a new way and in a new direction so he can be educated appropriately in the U.S. Later in the interview, as Katie ponders the case more, she attributes the physical abuse to the parents simply not knowing how to help their son and stated that “counseling, things like that, I don't think is something they do. I think we did have to impose that on them to help him.” Again, Katie demonstrates her empathy and insight by recognizing that different cultures have diverse ways of doing things and, at times, this may interfere with a family's ability to ask for or receive help.

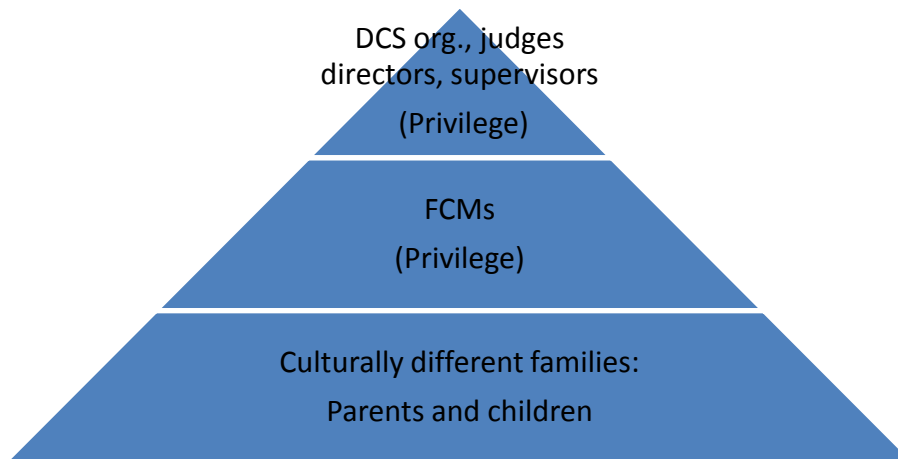
In summary, Katie's account of her interactions and engagement with this culturally different family demonstrates her continual striving to understand and connect with the parents throughout their working together. She does this by using three strategies that allow her to engage the parents in an open, honest, and positive way. She displays a genuine interest in learning about the family as well as the parents' perspective of the problem. This facilitates her developing of empathy and a strong desire to help the parents to be successful. She also works diligently to build her relationship with the parents—especially the step-mother—by communicating clearly, honestly, and respectfully. Finally, Katie's maintenance of a strengths perspective allows her to stay

focused on the good qualities this family possesses and to see the child physical abuse for what it was—a harmful discipline practice amenable to change.

## **Theme 2: Managing Power**

The second theme I interpreted from the FCMs' engagement with culturally different families was their finding a way to manage concurrent levels and forms of power. In its simplest definition, power is defined as “the possession of control, authority, or influence over others” (Power, 2013). In this context I conceptualized three levels of power within the DCS as a pyramid (Figure 2) with three horizontal sections. At the top of the pyramid, or pinnacle, are those people whom the FCMs' perceived as having the most power with regards to setting DCS policies and procedures, enforcing the rules of child welfare practice, and making ultimate decisions about cases and families. This top section contains the monolith that is the DCS organization, family court judges, directors, and supervisors. In the interviews, participants identified these entities as establishing the tone for the DCS organization, its county offices, and the overall work with families. The middle section of the pyramid contains the FCMs, who perceive themselves as having less power than those above them but still having the ability to exercise some autonomy and control over resources and decision-making. Finally, the bottom and largest section of the pyramid consists of the culturally different families—parents and children—who are perceived as having the least amount of power and control in the child welfare process. In general, there was a constant restrained tension among these three levels of power in each family's case, but the tension became more prominent if the family refused to cooperate with DCS services.





*Figure 2.* Three levels of power within the DCS conceptualized as a pyramid.

Another plane of power underlying the top two sections and groups of the hierarchical pyramid is that of privilege. According to Johnson (2010), privilege exists when a set of rights or advantages is given to one group of people but denied to another because of the groups they belong to, rather than because of anything they have done or failed to do. In this study, privilege existed based on the FCMs and others in charge of decision-making usually being of the dominant race, middle class, and in positions of authority over others. Some of the FCMs recognized their own privilege and spoke about it in their interviews. One FCM commented:

It was kind of thrown in my face. Somebody, I guess at some point, had told me I was privileged because I was White. And it never occurred to me that I was White: I just was. So I didn't see a color barrier until someone pointed it out to me and said there was one.

At times, this privilege proved to be a barrier to the FCM and DCS parents working together. In one DCS case, the African American parents negatively mentioned the FCM's race and SES, and then accused her of exercising her power imprudently just because she was in a position of authority over them and could do so with impunity. It is worth noting that the FCMs' privilege is viewed solely in relation to the DCS families

they worked with and is not meant to describe the vocation as a whole. This is because child welfare work in general is well-known to be underpaid, physically and emotionally taxing to its mostly female case workers, and commonly disrespected by other professionals and in the media (CWLA, 2002). Nevertheless, I considered all of the FCM participants interviewed for this study socially and economically privileged because all were Caucasian, had college degrees and full-time employment, were living lifestyles associated with the middle class, and were in positions of authority in their profession. These characteristics of privilege ensured the FCMs held more power than the DCS families they helped, who were often racial minorities, typically had minimal educations, were regularly unemployed or underpaid, always of lower SES, and had little to no social influence. All of the FCM participants interviewed for this study acknowledged, to various degrees, the power and privilege they held in relation to their families.

Aside from identifying the various levels of power contained in the DCS system, FCM participants discussed several forms of power that they and others in authority possess. These forms of power are best understood using French and Raven's (1959) prominent typology that distinguishes five types of power that leaders have with which to affect change in others. These types of power include legitimate, reward, expert, referent, and coercive. Briefly, legitimate power comes from the belief that leaders have a right to make demands and expect compliance and obedience from others. This type of power usually comes from a job position. Reward power results from a leader's ability to compensate others for their compliance. Expert power is based on a leader's superior skill and knowledge in a particular area. Referent power is the result of a leader's perceived attractiveness, worthiness, and right to respect from others. Lastly, coercive power comes

from the belief that a leader has the right to punish others for disobedience. In French and Raven's (1959) typology, expert and referent power are considered the most positive forms of power because they tend to foster guidance and are affirming of others.

Although the individual FCMs in this study preferred to rely on expert and referent power in interacting with their families, all five types of power were in play because the legitimate, reward, and coercive power of the DCS organization was truly omnipresent. This was due to the organization's ability to reward or punish each family for their compliance or noncompliance with DCS. This is to say, most of the DCS families lived in regular fear of losing their children or not having them returned, especially at the start of their case.

These levels and forms of power are the basis for my interpretations of the managing power theme. In what follows, specific excerpts from participant interviews are highlighted and analyzed to illustrate the FCMs' understanding of power: how it affected them and their engagement with culturally different families. Of note, all of the FCMs interviewed acknowledged the harm of taking an authoritarian approach to working with DCS families, and many made mention of the organizations' efforts to depart from this approach by introducing a new practice model in 2005 that stressed partnering with families and communities (Folaron & Williamson-Sullenberger, 2009; Indiana Department of Child Services, n.d.). This new practice model clarified the vision, mission, and values of the Indiana DCS organization and introduced new child welfare practices that included teaming, engaging, assessing, planning, and intervening with families. The cornerstone of this new practice model, CFTMs, allows family members to play more active roles in decision-making in regards to their cases. The new practice

model is thought to be more egalitarian because it emphasizes a cooperative rather than authoritarian approach to working with families. Those FCMs who mentioned the new practice model spoke positively about it and commented that it was more in-line with their own ways of thinking and practicing. Yet, from the interviews, it appears that remnants of the old system still exist and sometimes present conflicts for the caseworkers.

Beginning at the top of the pyramid, FCMs often referenced the legitimate power the DCS organization and its agents hold in relation to the families. This type of power provided the FCMs, as agents acting on behalf of DCS, the authority to tell families what to do and to make important decisions that affected their lives. The FCMs recognized this and often commented that this type of power made them uncomfortable because it was a new role and situation they had never before encountered. This is seen in the beginning of Madison's interview when she compares her old place of employment, a community mental health center, to DCS:

It [was] a different perspective than the DCS perspective. DCS is [pause] we are trying to get away from it as much as possible, but there is still an aspect of "this is what you need to do to keep your kids safe." And in my other job it was solely voluntary, like none of it was required: it's just a different mindset.

So in the beginning it was difficult to get used to, almost telling people "No, you can't actually do that because it's our policy" and those types of things. But now it's, "How do we get to, you know, make sure your kids are safe?" And I like the way that the State [of Indiana] is going with the child and family teaming process and really trying to get input from the family.

In the first part Madison describes DCS as having a strict perspective as compared to her previous place of employment but attributes this, in part, to DCS serving involuntary clients, as opposed to voluntary clients who desire help. This point of view was difficult

for her to adjust to so she appreciates DCS moving away from it and incorporating a cooperative practice like the CFTMs, which give more power to the families. Similarly, Beth liked the CFTMs because they represent a move away from exercising legitimate authority and power. She also views CFTMs as family-focused and as valuing the families' input:

It's a great thing to have when you're working with the family on raising children because a lot of times these families feel like you're coming in and telling them what to do. This is a way of telling them, "No, we want to know what you know because you know your family, and we want to be able to help your family in a way that will actually be beneficial to you."

Thus, Beth describes the CFTMs as occasions for her to build expert power in the parents and acknowledge them as the authority on their families. This is particularly important for culturally different families involved with the DCS because these parents usually are bombarded by professionals, who are culturally different from them, telling them how to perform one of the most essential and personal tasks of humanity—that of raising and parenting children. In another interview, Katie echoed Madison's previously shared sentiments in noting the difficulty of working with involuntary clients and adapting to a position of having legitimate authority over others. She further empathized with the intractable position that DCS families find themselves in and, in her role as an FCM, deliberately chose a softer, more supportive approach to working with her families. She explains:

DCS is eye-opening because I had never been into homes like that. I had never been, you know, pretty much you insert yourself into their lives. They don't ask you to be there. They don't call you and say "Hey, I need help." So you're pretty much just walking into their lives and saying, "This is where we're at, now, what are you going to do to fix it?" To be in that role of almost power is kind of nerve-racking. You pretty much take over. I'm still uncomfortable with it, which I think is good. I don't like being in power like that, and I think this has benefited me because I don't

walk in and tell families what they are going to do. More or less I give them the opportunity to tell me what they need more than anything, and I let them work through the process of being in denial and being ticked-off that we're there. Because I don't know that I would ever want somebody inserting themselves into my life, especially when kids are involved.

At the end of this excerpt, Katie emphasizes the importance of asking instead of telling DCS families what help they need and allowing these families time to work through their feelings and absorb everything that is happening to them. Finally, Susan reiterated the importance of not being heavy-handed and in utilizing other types of power with DCS families:

So really, the way that my approach to it is, not trying to be fake, not trying to pretend that I am something that I am not, not trying to pretend that I 100% understand what they are going through because I don't know what they're going through. I can empathize, but I'm not in [their] shoes. And I think that's really important for me, not to go in and be like, "Ok, I got this report, I understand what you're going through, here's what we're going to do." No, I'm kind of like, "Why do you think I'm here? Tell me what's going on; tell me about your family." [I'm] not going in with any of those assumptions. I'm letting them tell me about their family, letting them tell me what they think they need to work on, telling me what their strengths are, what they're good at.

It's something that, I don't pretend that I'm better than them or that I know more than them, because when it comes to them and their family, and what's going to work for them, I don't know better. And there's no way that I know what it's like to live in their shoes day to day.

Similar to Beth, Susan's narrative illustrates how she takes a modest approach and tries to build expert power in the families by asking for and validating their opinions. She also downplays her own knowledge and skills. In this way she deemphasizes the legitimate power that automatically exists when FCMs interact with their families. These excerpts point towards the FCMs sharing their expert and referent powers by acknowledging the parents' expertise and believing all of the families are deserving of respect.

The legitimate power of DCS was sometimes described by the FCMs as a barrier to building trust between themselves and their families. In her interview, Beth noted the FCMs' identification badges to be a problem. She stated, "It's the DCS badge, so people don't trust you." For families reported to CPS for child abuse and neglect, this badge likely symbolizes formal power, and the person wearing it as having the authority to take their children. Susan concurred when she stated:

[My] just showing up at someone's door automatically puts me in a place of authority over them. Not me doing that intentionally, but just me showing my badge automatically puts me in authority over them. It's really, what I try to do is get down on their level, because I'm not trying to be an authority in this situation.

Thus, regardless of Susan's demeanor, the DCS badge represents the legitimate power of the DCS organization and her as their agent. She tries to overcome this by "getting down to their level," which in this situation I interpret as matching the family in their style and communication so as not to appear haughty or threatening. In her narrative Susan clarifies that her families have never questioned her personal power, skills, or knowledge, but they do sometimes ask her private questions to get to know her better. Angelina also experienced the legitimate power of DCS as a barrier to her immigrant family trusting her and notes the Hispanic father was fearful and regularly questioned her intentions. She explained:

[I] was constantly trying to remind them that our plan is reunification and that, you, know, "I do want to see you succeed. I am not here to send you back to Mexico." The trust was very, the most, the hardest thing for me to build and get them to understand that my goal is not to sabotage the family and send [them] back.

Dad would especially question me [pause] questioning like, what were my intentions and still that whole, "you're going to take my kids." That was what he thought. And asking, was I going to send them to Mexico?

In another case, Jessica encountered parents who felt threatened by their involvement with DCS. As respected members of their religious community, these parents feared the loss of their own referent power and also their livelihood, if their connection to DCS became known. She described the situation in the following way:

So I think really she was caught up on not wanting to be viewed as a bad person because the stepfather was an upcoming, I think it was a pastor, an upcoming pastor at their church. It was hard for her to think that other people thought that she was a bad person or that he was a bad person, or that they go around doing this kind of thing all the time. At one point she said to me, “My next door neighbor is a sheriff. Don’t you think that if we beat our kids all the time, he would have called?” And I was like, “Probably. I am not saying this happens all the time.” And that was a big thing I remember repeating to her over and over: “I don’t think this happens all the time. I don’t think you’re bad people. I don’t think that was [stepfather’s] intent.”

The impact of the DCS organization’s—and thereby the FCMs’—legitimate power, and the families’ perception of this, cannot be overstated. Carrie reported that even her not returning a family’s phone call in a timely manner created problems with trust. She commented, “You really are in a way, and especially in their mind, you’re holding their lives in the palm of your hand, and their livelihood. And if you don’t call them back, that’s a lot of stress and anxiety.” These excerpts demonstrate how hard it is for DCS parents to trust the FCMs and the system as a whole, especially in the beginning stages of a case. Parents typically feel extremely threatened and afraid of what is going to happen to them and their children as a result of their involvement with DCS. These fears are reasonable given the historical context of child welfare services in the U.S. and the inequitable treatment of children of color in the system. Katie captured many DCS families’ sentiment when she stated: “A lot of families look at us for what we’re doing to



them and how we are destroying their family.” This sentiment can be difficult for the FCMs to overcome.

A few of the FCMs went further in their discussions of power and described having an internal struggle within themselves when families challenged the various forms of power they held. In discussing her culturally different family, Jessica explained:

It was hard to empathize at first, honestly. And I think it’s easy to get caught up in wanting to prove a point with people, especially in our line of work, because [parents] are going to question you. So sometimes it’s easy to get caught up in arguing with people because you want to prove that you’re right and you want to justify what you are doing, but so do they. So I think it was hard to empathize because [the mother] just couldn’t understand why this was a big deal. She couldn’t see that this was abuse. And I was so [pause] I got stuck in wanting to prove a point that for probably an hour or two, it was like, “Well, this is why.”

In this excerpt Jessica describes how the mother’s questioning challenged her expert power and interfered with her ability to feel empathy toward her. Yet, she also reasons that the mother was merely trying to defend her parenting and minimize the child abuse to avoid being perceived as a bad parent. In this way both the FCM and the mother became “caught up” in trying to be right and were at an impasse for a time. However, Jessica’s narrative goes on to explain that the mother soon came around and she became more open to learning after spending time with her family in a nearby town. The mother’s family, along with her religious faith, enabled her to see the situation as a learning experience that would allow her to become a better parent. In considering all of the interviews for this study, DCS parents’ having this type of realization, even to a small degree, was crucial to engagement. Without this realization, the FCM and parent relationship became stuck and was unable to move forward in a collaborative way. Katie also described an internal struggle when her expert power is challenged:

I can recognize when I'm intimidating, or when I'm imposing too much on a person, or when I am [pause] As an FCM I think all of us get a little power struggle inside when we get too wrapped up in just getting through it, rather than working with them.

As Katie's narrative continued she shared that at times she needed to take a step back from this case and think about what she had learned about the family in order to regain her objectivity, composure, and a new perspective. She viewed this as a part of her learning process to be a better case worker and noted, "it's nice to be thrown off my feet every once in a while."

Nearly all of the FCMs believed strongly that the judicious use of their powers was crucial to engaging the DCS families. Like a "Chinese finger trap," the abrupt use of power to force families to change always was met with extreme resistance. Susan summed this up nicely and spoke to the influence of referent power in family engagement:

The respect that you show people takes you a long way. And I'm still in that authority position, and I am still there to assess safety and that sort of thing, but it doesn't have to be in the strict sense of the word and be someone that is telling them what to do or being harsh and mean [to them]. You can be on their level, you can respect them, [and] you can earn their respect. And honestly, it will take you a lot further than doing it any other way.

In this narrative, Susan uses the idiomatic phrase "on their level" to refer to FCMs sharing power and not unnecessarily wielding authority over DCS families. She makes a distinction between having authority and flaunting it and suggests FCMs garner more respect from families when they keep their power hidden or below the surface. Additionally, she emphasizes the reciprocal relationship of respect and alludes to the fact that it must be given to families first, before it is received by the FCM.

Two of the FCM cases stood out from the rest with regards to the utilization of power. In the first case, Candy has a difficult time engaging her African American parents who were reported to CPS for physically abusing their child and leaving marks on his skin with a shoe. In her narrative, Candy describes the parents as very religious, strict, and believing strongly in their right to corporally punish their child. Although she makes several attempts to teach the parents alternative forms of discipline, she eventually realizes the parents are not going to change their method of discipline. She explains:

I had to compromise....I've had some hard cases where it's just obvious. Like leaving your baby in the car while [the parent] is in the bar drinking: "You can't ever do that again." But this was like [pause] corporal punishment is legal. "So [to the mother], what can we do to make sure your kids are not reported on again because you don't want to deal with this again. I know you're being nice to me, but you really don't want me here. So, what can we do?" And I even said, "There are some people that aren't as understanding as I am. If you sat with them, they might be [harsher] with you than I am: that's just not my personality. So, if this happens again, you might not get a caseworker that you like so much."

In the last few lines Candy demonstrates the use of her legitimate power by telling the mother, if she is reported to CPS again, she might not be as lucky in being assigned such an understanding caseworker. Although this warning may seem trivial, it is intended to coax the mother into compliance and, in effect, jeopardizes the engagement with the parent, if the mother feels intimidated or manipulated. This is contrasted with the beginning of the excerpt where Candy takes a cooperative and constructive approach and tries to problem solve how the mother can avoid being in a similar situation again. This is the only case in which the FCM admitted to trying to coerce the mother into cooperation. I interpreted the FCM's utilization of this type of power as her attempt to get the mother to take her parenting suggestions seriously and force her to change.

In the second case, April struggled to engage her culturally different family throughout the life of the case due the parents' untreated mental health and substance abuse problems and the cultural divide that existed between the FCM and the parents. This African American family was reported initially for educational neglect because their middle-school age son never attended school. The parents were aware of this and, in fact, encouraged him to stay home and take care of them. In the beginning April tried to accommodate the parents and their underlying issues, but in the end wished she had exercised her legitimate authority sooner and been more "by-the-book" with the parents. At the start of the case April immediately clashed with the parents and they called her a "rich, young, White girl" when she tried to enforce a court order for a substance abuse assessment on which the previous worker never followed through. She explained, "They literally told me that the reason I did that was because I think all Black people are on drugs." The family continued to make racial accusations towards April and when asked about it during her interview she reasoned:

To them, if you weren't African American you were a majority. Like, that's literally the impression I got from them is that they felt so oppressed and felt as though we were doing this because we could. And a lot of that also stems from the fact that, you know, big, bad, DCS, we can do what we want....We were just using what we had, to take from them what we wanted.

In the first part of this excerpt, the FCM's words and tone convey a lack of awareness about the prejudice and discrimination African Americans and other people of color continue to experience in American society. However, the second part of the excerpt illustrates the FCM's understanding of the parents' perception that DCS is a legitimate and oppressive authority primarily comprised of Caucasians who want to dominate and hurt families of color. In my interpretations of the interviews, this perception was not

uncommon when DCS first entered a family's life; but the FCMs' usually felt this perception diminish as the family came to know and trust their caseworker and understand how she could help them. In April's situation, this family's perception never changed, but she did notice a change in their position once the case plan was modified from the child's being in non-relative foster care to guardianship with a relative. She explained:

When I started working the plan that they felt like they wanted, I think they felt less power on them. Because they felt like they had no control. I don't know that the resistance decreased a little bit but what was going on with them changed. Because once we switched to guardianship as the case plan they no longer had to be compliant with services.

They, from that point, started to work with me. They still did not like me. They still wanted nothing to do with me. But, from that point, they perceived that I was doing what they wanted me to do and they worked with me from that point forward.

Thus, once the FCM stopped making demands and insisting that the parents change, they became more cooperative. This situation speaks to the reality that some parents will not or cannot change, even if it means losing their children. As April reflected back on this family's case, she wished she'd been firmer in the beginning and relied more on DCS policy to show the family that everything she did was by the book. She had spent a lot of time justifying herself and her actions with this family. However, ultimately she decided the following:

I think honestly, the only thing that would have helped them is if we had a different worker...not to change the parent's mindset or an entire culture of people: I don't have enough time in the world to do that. But [their] having a different worker might have been the only thing: somebody that was closer to their age and race [pause] would have met with less resistance, no doubt in my mind.

April's case is unique in that it is the only family in this study in which the parents suffered from serious untreated substance abuse and mental health problems. As a result, the parents often were irrational and unpredictable in their behavior and expressed great hostility for what the FCM represented. These factors made them exceptionally difficult to work with and to engage in any meaningful way. Nevertheless, April believes that had an assertive African American FCM been assigned to this case, the power dynamics may have altered and the parents' resistance lessened.

Although all the parents in this study undoubtedly felt powerless in the face of DCS, they did find ways to exercise some measure of control over the FCMs and their situations. This usually took the form of manipulative behaviors to increase their own feelings of personal power. Difficult parents were described by the FCMs as often withholding information or misinforming them. They also avoided contact, refused to cooperate or comply with requests, and intimidated the FCMs. In her culturally different case, Beth explained the mother withheld information and says "she played it pretty tight." I interpret this idiomatic phrase as the mother's way of maintaining some semblance of power and control and protecting herself in the face of an overwhelming foe. In April's case, the mother routinely yelled and cursed during their phone conversations to try and intimidate her:

Every phone call I had with [the mother] ended in me saying her name and "I'm going to hang up on the phone with you because at this point in time the conversation is not productive. I will call you back when you have cooled down or you feel free to call me back." And I'd have to have somebody else standing there next to me to say that's what I said to her, instead of cussing her out, because that was her version of the story.

Regarding an interaction with an 18-year-old culturally different mother, Jessica described the intimidation she felt at their first meeting:

I remember being very nervous. She was obviously very icy towards me and in the first meeting I had with her she brought her dad, who is very creepy. I realize this is not a social work term, but he [was] known to expose himself to a lot of other caseworkers and he just looks creepy, he acts creepy, and he's almost like a bully. He tries to bully you into doing what he wants. I felt really nervous the whole time....I had this man who was creepy and pretty much trying to bully me into telling him that the kids were going to be back next month.

This teenage mother also threatened to call her lawyer and get the FCM into legal trouble. Jessica surmised some parents just won't cooperate and stated, "A lot of our families are really resistant to us, obviously, and never come around. They never see it. Their purpose in our case is to continually try to prove us wrong, and that's what they try to do."

In another participant's case, Madison described her African American mother as being highly defensive, untruthful, and screaming and yelling at her by "getting up in my face." To minimize these occurrences, Madison asked her African American supervisor to attend their meetings every four to six weeks, and she noticed an immediate difference in their interactions. Madison suspected that his being of the same race and male may have helped the situation, but she also concluded the mother's behavior was an attempt to "gain some power back." She explained:

[The mother] saw the power differential between the two of us and it didn't matter what I tried to do or how I tried to lessen her perception of what power I had. She always had that as a focus. You know, that might have been the reason she bucked against us so much because she perceived that we did have all this power and that we were in control and that she wasn't getting anywhere.

In trying to make sense of the mother's behavior, Madison added, "I don't know if I want to call them betrayals, but some things happened at the hands of White people to her that might have influenced the way she reacted to me." Thus, as she reflected back on this

case during her interview, Madison recognizes that the racial differences between herself and the mother likely played a role in their engagement, and she came to see the mother's intimidation of her as an attempt to regain power and, in some small way, even the playing field. This narrative calls attention to a very important point: that people from diverse cultures experience power differently based on their past experiences. For example, some of the culturally different parents discussed in this study seemed to have different understandings of power and what it meant based on their country of origination. Beth recognized this when she discussed why it was hard for her Ugandan mother to admit she had done something wrong in disciplining her son and could not trust anyone to help her. She explained:

I am not really familiar with Africa. I did a lot of Central America and European things, but I don't get the impression that there are a lot of social service programs in Africa, especially in that part of the world where there is so much turmoil right now. And then you think about that fact that in most places, especially Uganda, you know, the military is very corrupt and police officers are corrupt, so you're dealing with a lot of that perception that they have brought with them too. So you've got the government [public child welfare] coming in and telling you [the mother] you're doing something wrong. Okay, if I tell you that this is wrong, and that I did it, what are you going to do to me? What are you going to do to my child? You know, we know very well that we're [public child welfare] not going to put this child into a work camp or make him go be in the military or anything like that, but [in] some parts of the world, it's very much a reality for people.

This excerpt from Beth's narrative illustrates how DCS parents from culturally dissimilar countries or backgrounds can have different understandings of power and how it affects them. For this Ugandan mother, admitting she had done something wrong could have had dire consequences for both herself and her son in their home country. This perception of power and what it means to people can be very hard to change, as Beth later noted, "I think in those instances it takes a very long time to gain anyone's trust and you really



can't do it in 30 days or the two to three meetings [an assessment FCM] gets with someone. It's just not possible."

Although the DCS families tended to view the FCMs as being in the top tier of the pyramid (Figure 2), the FCMs were aware of their middle position and the limits of their power. This is seen in two cases where the FCMs were told by family court judges to close the cases even though the FCMs disagreed. When asked about the outcome of her particular family's case, Joy responded, "At the end of three months, I was asked to close the case. I wanted to keep the case open an extra three months, just to kind of help with the educational piece of the [child's] behavior," but the judge disagreed. Similarly, when Madison was asked about the outcome of her family's case, she stated, "He [the judge] just wanted the case closed that had been open for two and a half years. I think it was closed prematurely." In these two excerpts, the FCMs acknowledge the ultimate power of family court judges to decide when DCS has done enough and a family's case should be closed.

Finally, one FCM interview stands out because she disclosed disregarding her supervisor's power and authority after he made an inappropriate request. Joy's case involved two parents reported for an unclean home. Aside from living in poverty, the parents were culturally different because the father was transgender and identified as female; thus, he usually cross-dressed and wore mini-skirts and heels. Joy's supervisor found this offensive, and on two separate occasions directed Joy to tell the father never to come into the DCS office dressed in women's clothing again. Joy stood her ground, refused to comply with his requests, and eventually the supervisor dropped the issue. During her interview, when asked about what this was like for her, she stated:

I don't care. When I know I'm right, I know I'm right, and especially when it comes to the treatment of people. I don't care; I just say no. And if you do anything different then I'll tell on you. I don't know, I mean I'll tell the director and if that doesn't work, then I'll take it up the chain because ethics is the first thing that comes to my mind when we are working with our families. And my supervisor knows that. So we've had several battles over things, and I think he understands that.

This excerpt is revealing because even though Joy held less legitimate power than her supervisor, her expert power allowed her to disregard his request without consequence. She also felt an ethical obligation to accept her culturally different father for who he was, and stand up for him and his family. Although no other FCMs mentioned similar scenarios, this situation speaks to the importance of caseworkers having expert knowledge and skill along with feelings of self-efficacy to do what is right in the face of authority.

In summary, I interpreted the second theme as including three levels and five forms of power that FCMs continually manage in their engagement with culturally different families. These levels were conceptualized as a pyramid (Figure 2) with underlying planes of privilege in the top two sections. Privilege exists for those in the middle and top sections of the pyramid because these groups hold rights and advantages—from their race, class, education, and authority—that the groups at the bottom of the pyramid do not hold. All of the FCMs interviewed for this study recognized various forms of power in their relationships with families, and especially the legitimate power of the DCS organization, to coerce the parents into compliance. This formal power created an atmosphere of distrust between the parents and caseworkers, especially in the beginning of their working together. For this reason, most of the FCMs described minimizing the legitimate power they held and primarily relying on expert and referent forms of power, along with an authoritative approach in interacting with their families.

Only one FCM wished she had been firmer and more rigid with DCS policy in interacting with her culturally different family. Overall, the participants' excerpts on power—their understanding of it and how it affects them and their work with families—reinforces the idea that DCS should continue its move away from the exercise of legitimate, authoritarian power and embrace more positive and shared forms.

### **Theme 3: Accepting a Culture of Poverty**

The third theme I interpreted from the FCMs' engagement with culturally different families was their acceptance of a *culture of poverty*. This theory, first introduced by Oscar Lewis in 1961, posits some poor people possess traits—attitudes, beliefs, and behaviors—that are passed down generationally and, in effect, keep them mired in poverty, even when their financial situations improve (Harding, Lamont, & Small, 2010; Lewis, 1966). These traits included chronic unemployment, poor or overcrowded housing conditions, a matriarchal family environment, single motherhood, hostility toward basic societal institutions, inability to defer gratification or plan for the future, and strong feelings of fatalism, helplessness, dependence, and inferiority. More recently, educator and author Ruby Payne (2001) has used the culture of poverty theory to describe the traits and habits poor children and their families possess that interfere with their educational attainment and ability to climb up the socio-economic ladder. Importantly, although the traits described by both Lewis (1966) and Payne (2001) are accepted in the culture of poverty, they run counter to middle class values and ideals and are, therefore, considered undesirable. Critics of the theory point to several flaws: (a) It assumes that the concept of culture is fixed and unchanging; (b) It is constructed of stereotypes of the poor; (c) It blames the poor for their poverty and ignores social and

economic inequalities; and lastly, (d) Research now shows there is just as much diversity in the values and behaviors of poor people as there are in any other socioeconomic class of people (Gorski, 2008). Yet, despite these criticisms, the theory has been widely used to explain criminal behavior, inform social policy, and guide teacher education (Blau & Blau, 1982; Bomer, Dworin, May, & Semingson, 2008; Katz, 1990; Smiley & Helfenbein, 2011).

In the interviews conducted for this study, all of the participants discussed the problem of poverty and 7 of the 10 FCMs identified it as being the main cultural difference between them and their DCS families. This was often true even when the FCM and the DCS family were of different races. FCMs routinely differentiated reasons for their families living in poverty, and over half attributed it to their culture. Participants regularly referred to poverty as being “generational” or “a cycle” and described it as an ingrained way of life that is difficult to change. For example, when Susan was asked how the majority of her families were different from her, she responded, “I think the majority of them—it really is socioeconomic status. It’s really the big thing because everything else really falls underneath that.” Susan’s statement suggests no other cultural factor is as significant to working with DCS families as SES, or a family’s living in poverty, and all other cultural differences are overshadowed by it. When she described her culturally different family, Susan focused on the generational aspects of poverty and how different this was from her own family upbringing:

So there’s four generations of this family living in one house. And that, on its own, is just something that is different for me. I never had to have grandparents live with us. I never did go through that. It’s always just been my immediate family in our home and so that, on its own, is a slew of cultural differences...

It's all women in the home. There's no husbands, there's no, well, the youngest one, she has a boyfriend who is staying there now, and that's something that's culturally different. It's like I said, very much a matriarchal family: it's run by great-grandma, grandma, moms, and that sort of thing.

Susan goes on to describe the family as consisting of four adult women, a teenager, a toddler, and two infants, all of whom—except for the great-grandmother—have developmental delays, “whether that be a low IQ or lack of education.” This description is consistent with the culture of poverty theory that depicts poverty as generational, often involving a matriarchal family environment, and many children in the home. Similarly, in her interview, Candy emphasized the problem of poverty among her DCS families:

A lot of ours [pause] we don't get a lot of wealthy clients. I do have some that hug the poverty line more than others, but none of them are wealthy. Some of them don't struggle as much as others but most of them qualify for reduced lunches. And lots of them are real interested in any type of resources that I can give them that would help them out...and most of them [the children], at least when they are with their family of origin, are kind of at the poverty line or at least barely scraping by.

In this excerpt, Candy notes, “we [DCS] don't get a lot of wealthy clients” and, in fact, none of the FCMs interviewed for this study related ever having helped a middle or upper class family referred to CPS. Candy uses idiomatic phrases such as “hug the poverty line” and “barely scraping by” to describe her DCS families as having enough money only to pay for the very basic necessities of life and always being close to financial failure. She further alludes to DCS families being dependent on assistance when she states they are “real interested in any type of resources...that would help them out.” The tenuous financial situations these families face often mean not having extra food in their homes and being behind on, or even doing without, certain utilities. Jessica's narrative underscored this when I asked her what advice she would give a new caseworker about culture:

To really open up your eyes and look at how [DCS families] function in [their] culture, especially the culture of poverty. We have so many families that go without heat, electricity, water, all of these utilities, but how do they make it work? That may not be how you were raised, but this is how they survive and how they live. And especially with social workers working with DCS, or anyone working with DCS, separating how you were raised and how you would live from how somebody else was raised and how they live. And is that really abuse and neglect? Is it really [child] neglect if you don't have water? One family in particular, they didn't have running water but [in] one of their bathtubs, the faucet still dripped, and they could get up to 3–4 gallons of water a day just on that drip into milk jugs that they had: empty milk jugs. So yeah, they don't have water, but they're making it work. And this is how they bathe and this is how they live. Is that neglect? I don't think so, I don't.

In this excerpt, Jessica describes a lack of home utilities as a normal occurrence for many DCS families and emphasizes how different this existence is from the way she and others are raised. She struggles with labeling these situations as abusive or neglectful to children and admires one family's resourcefulness in "making it work." Jessica's words and tone suggest she refrains from judging these families, but, on some level, she accepts their living situation as tolerable and simply what some people have to do to get by. Earlier in her interview, Jessica related she first learned about the culture of poverty in college and remarked, "that was a new thing for me to learn in school, and it rang true in my work." In this statement, Jessica hits upon one reason the culture of poverty theory remains so popular, because it corroborates what she sees in her work at DCS. Joy provided a more detailed description of the culture of poverty and explained her understanding of it in the following way:

I think that poverty is a culture in and of itself, and just survival. You see a lot of people come in and it's always retraining my thought process. Sometimes they're just trying to survive that day, and it's hard for them to exercise, to get a job, or even get their personal identification because they were never raised to forward through success and get their jobs and get an education. So it's re-training, and I see that a lot with people that live in poverty: that they live on a day-to-day basis and they're not really able to have long-term goals. And I think that is one of the hardest things to work

with, to try to get people who are in poverty stabilized because they don't have those coping skills and that's one of the hardest things I struggle with is to help people get stabilized.

Joy's belief in the culture of poverty theory is evident throughout this excerpt. She describes DCS families as living in a survival mode, being present-focused, not valuing education or work, unable to set long-term goals, and having no coping skills to stabilize their lives. Her use of the word "re-training" is unusual because she uses the word to describe adjustments she makes to her own thinking when working with poor families but also to describe the hands-on teaching poor people need to live more stable lives. Joy's latter description is unsettling because it assumes DCS families are characteristically flawed and need to learn new ways of thinking and behaving that mimic the middle class. Madison's account of the culture of poverty also hints at the poor being flawed. She described her family in the following way:

I call it the condition, or like the cycle of poverty where their home is, well, they're satisfied with the condition of their home even though it's kind of falling down upon them. And they really hold tight to the importance of family and non-financial things, even though they desire to be more financially capable.

In this excerpt, Madison calls attention to the family's housing situation and their lowered expectations for their home. She assumes the family is "satisfied" with the disrepair of their home, even though they more likely lack the extra funds required for home maintenance. Madison also describes the family's poverty as a "condition" and "cycle," suggesting the family has a disorder that is passed down through generations. Although slightly disturbing, Madison's use of the word "condition" is not surprising given poverty is often referred to this way in the popular media. Also, another of Lewis' (1966) traits that he identified as part of the culture of poverty is the poor having a high tolerance for

psychopathology within the family. Finally, in her narrative, Carrie described her DCS family as being a perfect example of the culture of poverty:

This family is the epitome of that. They pretty much, I would imagine, everyone in their entire family for years back probably has never really had a stable job. They're very dependent on welfare to support [them]. There's no sense of, they also, this girl in particular, her father he's got to be very savvy because he's been able to get a couple of settlements, big settlements for various car accidents and stuff like that. So that's another big mindset for them is when are we going to get our next settlement. That's a big way of getting their income.

I know this isn't the most social work term so I apologize, but they're emergency room hoppers too, so they're probably pretty good at knowing which doctors they can go to because there's several doctors in X county that are kind of known for being the med prescribers. You just tell them what you want and they'll get it for you. So I think there's probably a lot of that [prescription drug abuse] that plays into it. They kind of know what they need to do in order to get what they need. [They're] very smart actually, and very resourceful. But like I said, it really, I wish I had something different to tell you, but it's literally everything I talked about. This family, they're the epitome of it; they meet the stereotype in almost every single way. The girl is 19, just turned 19, but she has four children with four different men. She had her first baby when she was 13. This family is well known in X county because they're in and out of trouble with the law as well. She's had other pregnancies, I mean she's almost been pregnant consistently [*sic.*] from the time she was 12, is what we hear now. So like I said, it's just almost everything I think of when I think about [inaudible], but that's perfectly acceptable for her and for her friends. The drug use is another big thing; the culturally acceptable drug use, and that's perfectly acceptable, it's perfectly appropriate. It's very hard for them to understand why that would be considered endangerment to their children. So that's a big one too. The whole family, I mean her parents, step-parents, and her siblings. She's the oldest, and she's only 19, so she has many younger siblings and they're all avid drug users and there's really no [pause], you can't convince them otherwise because their parents are the same way and [they're] like, "I turned out fine, so why are you telling me I can't raise my kids?"

Carrie's narrative features many of the traits associated with the culture of poverty. She highlights the generational nature of the family's behaviors, including their chronic unemployment, dependency on welfare, and alternative ways of obtaining income. Carrie also mentions their prolonged drug abuse, legal problems, and the family's poor



judgment in raising their children around such activities. In regards to the 19-year-old mother, she describes her as promiscuous and as having initiated sexual contact early, both of which are consistent with Lewis' (1966) culture of poverty theory. Earlier in her interview, Carrie mentioned this mother was likely the victim of childhood sexual abuse, but, in this excerpt, she depicts the mother's sexual behavior as a character flaw instead of a response to emotional distress. In this way, the focus is kept on fixing the poor and their deviant behaviors, instead of fixing the social and economic inequalities that produce poverty. This skewed perspective allows dominant groups to view poverty as the culture of another group of people and not question any of their own beliefs or responsibilities. Beth's narrative further touches on this aspect when she described an epiphany she had about poverty while on her honeymoon in Jamaica. She explained that prior to this event "it had been instilled in me as part of my thinking and my culture that if you're not as well-off as I am or something, that you must be in need of help with something." However, at the end of their trip, Beth's husband commented that the poor in Jamaica "look so happy." Beth explained "and at that point, it was kind of the first time I had this understanding that, you know, not everybody wants your help and not everybody, because they're in a situation different from yours, is in need of your help." In the end she concludes "a lot of people [living in poverty] are just simply fine." Although Beth's narrative initially seems insightful, her way of thinking is dangerous because it strengthens the idea that the poor are content living in poverty, and it absolves society from the responsibility of bettering circumstances for the poor.

In summary, all of the FCM participants recognized living in poverty as an essential difference between themselves and their families, and more than half believed

this was the dominant cultural difference. Also, FCMs regularly differentiated reasons for their DCS families living in poverty and over half of them attributed it to characteristics of the families' culture that keep them mired in poverty for generations. Some of these characteristics included having a poor work ethic and chronic unemployment, being dependent on assistance programs, being present-focused, living in substandard housing conditions, having matriarchal home environments, and living with many children in the home as well as several cohorts of family members living together. All of these traits are consistent with Lewis' (1966) culture of poverty theory and point towards poor people being flawed and needing to learn middle class values and behaviors to be successful. One FCM also commented on the muddled relationship between poverty and child abuse and neglect, noting what a fine line this is. In this situation, the FCM decided poverty does not necessarily equal abuse or neglect. Finally, a few of the FCMs commented that people living in poverty do not necessarily need help from others because the poor seemed content and were resourceful in getting their basic needs met.

#### **Theme 4: Adapting Communication**

The fourth theme I interpreted from the FCMs' engagement with culturally different families was the caseworkers adapting their communication. This is to say, the FCMs often adjusted or modified how they communicated with their culturally different families throughout the working relationship to maintain their engagement.

*Communication* refers to "the verbal and nonverbal exchange of information, including all of the ways in which knowledge is transmitted and received" (Barker, 2003, p. 83).

This definition implies two parts: that communication includes the knowledge or content of a message and how it is interpreted, as well as how the message is exchanged and

structured. According to some of the FCMs, the DCS parents often talked differently and used words, phrases, and interpreted meanings that did not match or with which the caseworkers were unaccustomed. Some of the parents were also more boisterous in their communication because of the difficult and stressful situations in which they found themselves. As a result, the participants were considering constantly how to convey information and respond to the families appropriately.

Communication problems primarily arose when the parents were uncooperative and resentful of DCS involvement in their lives or there were significant language barriers between the FCM and the parents. An additional challenge for the FCMs was that they often had to communicate information to their DCS parents that was unwanted or difficult for the parents to hear. In these situations, the FCMs communicated very carefully so as not to offend or appear judgmental. Regardless of the type of communication problem, open and regular communication was vital to maintaining the FCMS relationship with each DCS family.

In her narrative, Carrie emphasized the importance of frequent communication and the regular exchange of information between her and the DCS parents. She believes this strategy is helpful for getting her DCS parents to like and trust her and keeping them engaged in the working relationship. She states:

I tend to be pretty friendly with my clients so I think that right off the bat gets them to like me. But in general, what I've found that really seals the deal for them is that, I don't necessarily know this is true, but what I have heard from clients that have had other caseworkers: they say they don't communicate with them very well. When they try to call them they maybe won't hear back from them at all and, if they do, it will be a few days later. And I generally keep my cellphone on me as long as I am at work. I don't keep it with me in the evenings, and I tell my clients that up front. I will not answer my phone in the evening or on the weekends, but I keep it on me during the day, and if I can answer it I do, and if I don't answer it I call

them back that day. And then, if I get a message like in the evening, the first thing I do in the morning is return phone calls.

In this excerpt Carrie notes that a common complaint she hears among DCS families is that their caseworkers don't communicate with them or call them back in a timely manner. She recognizes this as a problem that interferes with engagement and resolves it by being frank with the families about when she will accept their phone calls and return them. By Carrie conveying this to her DCS parents, each of them knows when they can expect to hear back from her. In this way Carrie structures her communication with the family and establishes her professional boundaries. This conversation sets limits on both the FCM's and parents' behavior and helps to keep the relationship between them respectful.

In her narrative, Madison described a very basic communication problem that made conversing with her African American DCS mother challenging: she and the mother defined things differently and used in words conversation differently. This speaks to the content of message and the different ways messages can be interpreted. She explained:

Her [the mother's] values on, you know, her definitions of what meant safe and what didn't mean safe, and even our communication was difficult because I come from, you know, I am an educated person, I have a graduate degree, and even though I'm trained to adapt my skills to meet the person where they're at, because I don't expect them to meet me where I'm at, it was difficult to get through to her and really feel like we had any sort of connection: it was either hot or cold with her.

In another part of her interview, Madison reiterated this point when she stated, "even just some of the verbiage was different language than I use, some of the wording was different. So I had to get used to what that meant coming from her." These two excerpts are informative because they demonstrate that people from different cultures often have

divergent meanings for common words or use slang that may be misunderstood by one party in a conversation. Madison calls attention to this cultural difference in communication when she states, “I come from, you know, I am an educated person, I have a graduate degree.” In this statement and what follows, Madison infers people from different social classes speak differently and it is her responsibility, as the more educated and trained professional, to adapt her communication and “meet the person where they’re at.” I interpret this statement to mean that Madison tries to match the parents’ communication in style and content by using similar verbal and nonverbal body language. This is because she wants her DCS parents to see her as an equal or as someone they have things in common with, as opposed to a pretentious person who is above them in social status. The situation Madison describes further suggests that it is important for FCMs to ask parents for clarification about what they mean when they speak and then reflect back to the parents what their understanding is during the conversation. When I asked Madison what she did to try to improve her communication with the mother she related having made the mother’s personal strengths a big focus. She explained:

I think I tried to kind of butter her up, you know, like, “I see all these great things in you,” and make them very specific so she understood that I appreciated her, and that I valued her. So that was one thing I tried to do. I tried to respect her [pause] like do things that would make her more comfortable. Like, I knew if I called her first thing in the morning that I’d get a different [mother] than if I called her at the end of the day. Or I talked to both her and her boyfriend in the end, as compared to just talking to her, you know, whatever made her more comfortable. I tried to do as long as it fit in with what I was trying to accomplish. So I don’t know if I [pause] sometimes I almost felt like I was walking on eggshells around her because I never knew what would set her off.

In this excerpt, Madison demonstrates the content and methods she utilizes to decrease the mother’s defenses and facilitate their communication. She uses the idiomatic phrase “butter her up” to explain how she tried to gain favor with the mother through praise and

flattery. Although on some level this seems manipulative, my interpretation is that Madison was genuine in her comments and admired the mother's strength in the face of everything she had been through. Madison also adapted her communication by being respectful and calling the mother at a preferred time of day and including the boyfriend in their conversations because she recognized this made the mother more comfortable. Even with these efforts, however, Madison uses another idiomatic phrase, "walking on eggshells," to explain that she continued to tread lightly around the mother and made every effort not to offend her in conversation. She further explained, "And it didn't matter if I almost begged and pleaded, kind of, you know, really humbled myself to get down and try to bring down her defenses. It didn't seem to work on a consistent basis." This quote indicates Madison sometimes took a more passive or one-down approach when speaking to the mother. It also reveals a communication problem she had with the mother—the mother's inconsistent response. Madison explained that at times the mother would "yell and scream at me and cuss me out and threaten me and so all these sorts of things and then the next day she'd be thanking me for something else." This behavior greatly challenged Madison and she described how she managed it:

I felt supported at my office but it was still very disappointing for me to know that I let [the mother] get to me, even though it wasn't about me. I was just the focus of her attention because I was her contact here at DCS. But it was still so hard to sit there and listen to all of that and to hear her say things that I supposedly said, but I never said, and to make things up. And so it was a lesson in self-control for me. It got to the point where I could almost ignore that piece and try to keep my voice calm, you know, and do all of those de-escalation techniques like lower my voice, talk slowly, but, there were times when she just wouldn't, and so I would have to say "you know, I have to end this call." And so I got really good at saying, "I'm sorry; we're not going to be able to discuss this anymore because it doesn't sound like we can do this in a respectful manner, so I'm going to be hanging up." The first time I hung up on her while she was still ranting and raving, it was really hard for me because I don't hang up

on people: that's disrespectful. But it got to the point where like my respect for myself, knowing that that conversation wasn't going anywhere and it didn't matter how long we stayed on the phone. And the support coming from my leadership saying, "You know you don't have to take that. You don't have to listen to that. She doesn't need to treat you that way," kind of encouraged me to respectfully end the phone call at times. So communication was very difficult.

Here Madison explains how she structured her conversation with the mother and set limits in order to protect herself. Furthermore, she keeps the mother's hostility towards her in perspective and tries not to personalize it. She also monitors her own communication exchange and exercises self-control by remaining calm and utilizing de-escalation techniques to prevent her from yelling back and contributing to the mother's anger. Madison upholds her professional boundaries when she ends her phone conversation with the mother early for becoming irate and disrespectful. She mentions this was very hard for her to do, but with the support of her leadership, comes to realize this communication skill is part of her showing respect for herself. In a similarly difficult case, April had problems communicating with her African American DCS parents because the content and exchange of information between her and the parents was perceived differently. She reported:

[The mother's] version of the story is that every time I cussed her out and hung up the phone on her. Now everybody around me was like, "Why do you call her? Why don't you just send her a letter?" and I'm like, "because I have to call her, I have to do these things." And [co-workers] would always joke with me that as soon as I would say "Hi. Is so and so there?" the people around me would go, "Oh god, you're a glutton for punishment," and I'm like, "I know I am." So, I mean I understand I am, but I definitely was going to do my job. It was always so funny to me because the dad would, to my face, say he understands what I am doing. He understands that, you know, "We need to do better," and say "You know, you're a good worker" and all those fun things. Mom had no taste for me whatsoever: couldn't stand me. Dad to my face would say I was doing what I was supposed to, and all of that. Dad behind my back: different story.

In this excerpt, April describes the mother as lying about her and becoming irate over the phone to the point that it became a running joke among her co-workers in the DCS office. Additionally, she often received mixed messages from the father who would complement her and take responsibility in person, but later disparage her to others. She uses sarcasm and calls this situation with the father “funny” and “fun,” when it was likely very frustrating. April also uses the idiomatic phrase “had no taste for me whatsoever” to clarify that no matter what she did as an FCM, this mother did not like her. Like Madison, April learned to set limits and often ended her phone conversations with the mother by saying, “I’m going to hang up the phone on you. At this point in time the conversation is not productive.” When I asked April how she maintained her composure with these particular parents she admitted, “They worked my last nerve. They absolutely did.” She then explained:

...I [remind] myself that this is what I want to do, and that they’re frustrated at me because of the situation, and they’re not placing the blame where it should fall, but never allowing myself to get to that point. And that was something my supervisor really helped me with and reminded me, “You can’t go there with them because all they’re trying to do is suck you in and get you to say or do something. You have to remain a professional and accept that they’re upset with the situation, and because you’re a part of that situation is why they have an issue with you. If they met you out in public, they probably wouldn’t feel the same way,” so I never, never [allowed] myself to go there with them. Stopping when it got to that point of, okay, I can’t do this. We have to end the conversation. And towards the end, middle-endish, when it got really bad: not putting myself in the situation in front of them. Not being right in front of them where I could be the target for them. Using the phone as a way to keep that separation instead of them sitting there looking at me and coming up with more things to say about me. Having the phone, and being able to end it, instead of having to end it, and you know, get up and walk out and leave. So it was easier to do for a good chunk of the time, it was easier and safer for me to do phone contact with them. And then as it got better, I would go back to doing home visits.



In her narrative, April reveals how she coped with the animosity of these parents by reminding herself how much she loved her job and wanted to help others. Also, with her supervisor's assistance, she was able to put the parents' ill-feelings towards her into perspective and realize it had nothing to do with her personally, but that they were likely angry at themselves and their situation. When the working relationship became too heated, April structured the content and exchange of information by only speaking with the parents by phone and communicating pertinent information, until a time when the relationship improved. In this way, April was constantly assessing her relationship with the parents and adjusting how she communicated with them. However, similar to Madison, April needed the support of her supervisor to enforce her professional boundaries.

DCS parents who were non-English speakers also posed special communication problems for the FCMs, and this made the engagement with the family more difficult. FCMs generally had to work harder and longer to communicate with the parents and be more creative in getting through to them about their concerns for child safety. Angelina was challenged by her culturally different family who was originally from Mexico and only spoke Spanish. The parents were reported initially to CPS by the police who had responded to the family's home on a domestic violence call. During her interview, Angelina stated, "That was a hard case for me, because it was really hard to build rapport. When you can't speak to them, it's hard. The kids could speak English, but the parents couldn't." In the beginning of the case Angelina relied on the two children to translate between her and the parents and explained:

I tried not to do that. I didn't want to put them in that spot, but if I went out to do a home visit, and I was just talking about, "How is your day

going?” then I used the kids. But I did, towards the end of the case, I learned I could use an interpreter over the telephone. We had a hotline that translates for you: it’s like a third person on the call. So that made it a little easier to start calling and being like, “Hey, we have an appointment,” because that was another difficult barrier just in the language: contacting the [parents].

I was just there on a visit and to ask the kids questions. [Mom] would try to speak a little English, and I knew a little Spanish, so we would laugh about that. I would try to use some of my Spanish. I would ask them how to say things.

In these excerpts, Angelina shares that she saw little harm in asking the children to facilitate benign conversation between her and the family but recognizes this was not the ideal situation. She tries to make the best of the communication difficulties by using humor and encouraging the family to teach her Spanish. These actions likely allowed the family to see Angelina as non-threatening and as trying to connect with them on their terms. Eventually, Angelina discovered the interpreter services, but until this time, she noted that everything with the family took longer to accomplish because of the language barrier. This suggests that, prior to the interpreter services, she pared down the content of her communication and simplified the exchange of information. Angelina further explained it was harder for her to help the father comprehend the reason for his offense because they had different meanings of domestic violence and she had trouble finding service providers that spoke Spanish. She states:

It was really hard for me to find service providers that spoke Spanish, for like therapy, and this was a domestic violence case. Again that cultural difference of, “Well, that’s just how we do it [in Mexico]. That’s how we treat each other, and I don’t see anything wrong with me hitting [my wife] a couple of times. She didn’t do what I said.” That’s the mentality that we got. So trying to make them have a different way of thinking, and what is acceptable here and what is not. That was one of the main things. “Well, it may be okay there, but these are our rules and these are our standards, and we do have to follow them.” But being sensitive to [the family’s way of thinking] as well. I did have an interpreter that would go on visits, but also

I found a therapist that was Spanish speaking. And being in X county was really a blessing because we do have more service providers than other counties, so I don't know how you would do it in another county. Also my home-based provider [spoke Spanish]. The only thing was it took a long time to get these services in place, so their case kind of lagged a bit.

This excerpt illustrates how the language barrier complicated the FCM and the parents work together. When I asked Angelina at what point she secured the interpreters and Spanish speaking services, she responded it was at the half-way point, or four months into the case. This is a long time to go without the FCM and family being able to communicate in a clear and open way. The fact that Angelina was still able to engage the parents and maintain the relationship throughout this period, speaks highly of her communication and personal skills. By the time the case was closed, Angelina reported the father did comprehend why domestic violence was harmful to his family and he seemed committed to not letting it happen again. Additionally, on the way out of the final court hearing, the mother commented to Angelina, "I not scared anymore." Angelina took this to mean the mother was no longer afraid of her husband and understood her rights and that she deserved respect. Even when immigrant parents were able to converse more freely in English, however, this did not always ensure better communication. This is seen in Beth's case that involved a Ugandan mother who had physically abused her son. According to Beth, the mother spoke English, but the meaning and significance of what she said to the mother was often lost. She explained:

With this particular mom, there was just no way to make her understand. She'd say, "Okay, yeah, I don't do that, no." Like she knew she wasn't supposed to, but you never really saw it click that she understood: she knew it, but she didn't get it. And I think even if you have information in your brain, if you don't get it, then, it's like algebra never worked for me. I know that this equation equals this, I don't know why though, and therefore, I don't get it. So I think with her, she never got it.

It's very difficult. There are some questions that are difficult to articulate without making yourself sound like a jerk. So you really have to be very conscious about the way you're saying the word, the tone of voice that you're saying it, your body language: all that stuff matters. It's not just about how receptive you are to their culture, but how you're representing yours. You don't want to come off to someone as a jerk because you asked this question.

In the first excerpt, Beth clarifies that although the mother verbalized she would not hit her son again and knew this was wrong, the mother really did not understand why she could not use this form of discipline and was merely agreeing with Beth because she was supposed to. Beth empathizes with the mother by noting how difficult it was for her to learn Algebra and that, like the Ugandan mother; she never "got it." Unfortunately, the mother never did truly understand Beth's message of why she should not hit her son because after 30 days the physical abuse allegations were not substantiated and the FCM had to close the family's case. In the second excerpt, Beth acknowledges that, in her role as an FCM, she must ask her DCS families very difficult questions that can be upsetting. She stresses the importance of FCMs being in tune to their own verbal and non-verbal communication and how they represent their own culture to families. This suggests FCM questions must be phrased sensitively and with a definite purpose in mind so as not to "turn the family off" and jeopardize the engagement; thus, adapting both the content and exchange of communication is a critical caseworker skill.

Susan echoes Beth's concern for FCMs paying attention to their own verbal and non-verbal communication and phrasing questions and comments sensitively, when she described her DCS family that was reported to CPS for an unclean home. First she explained that the family's household consisted of four generations of women living in the same home: great-grandma, grandma, two adult daughters, and four minor children.

When Susan first visited the home she recognized immediately the different roles the women held in the household. She explained:

It really calls into question knowing those roles in that family, that grandma is just like the matriarch of that family. Things don't get done without her approval. If you want any real changes in that home, if you want any real progress in that home, you have to get grandma on board. Because you can try to do your best when you are working down here with the youngest mom and kid, but nothing is systematically going to change in that home unless you go from the top down.

In this excerpt, Susan makes clear that although she was officially supposed to be working with one of the adult daughters—the parent of the child reported to CPS—she quickly realizes that her communication must include the grandmother, the matriarch of the family, if she is going to make any changes in the household. This is because the grandmother held the most power in the family and could undermine the working relationship and any progress if she did not approve of what was going on. Susan further described how self-conscious she was and worried about her exchange with the family when she commented:

The home conditions were dirty enough that it was unsafe for those kids in that home. And so for me going in, I always get a bit self-conscious, okay, I don't want to disrespect them, so it's like how am I going to go into this home and not want to sit down on their couch when they offer it to me? Not want to go walking around. I want to stand out on your front porch and talk with you. And so that's always challenging for me because I want to keep myself safe, and not get any kind of lice or ticks or all those kinds of things. But also like showing that family respect because I am not [pause] I don't want to disrespect them, and I don't want to have that ever come across my face. Kind of maintaining your own composure and professionalism when inside I want to scream.

Here Susan explains that she has to keep her facial expressions and other non-verbal body language in check so she these do not give away how she really feels inside. If her true feelings did come through then the family would likely feel disrespected and Susan

would lose any chance to positively engage with and help them. Susan also mentions thinking of her own personal safety. Thus, she has to find a delicate balance between keeping herself safe, while finding a way to communicate the seriousness of her concerns for the child's safety without offending the family and their housekeeping practices. When I asked Susan how she did this, she explained that she puts herself in the family's shoes and thinks about how she would want to be treated in a similar situation. She also tries to remain calm and nonchalant about the matter. She further elaborated:

Seeing what their perception is of their house. I could see a kitchen with dirty dishes all over the place. They might look at that as "Oh, we haven't had a chance to do the dishes this week." Whereas I look at it as, you have a toddler and there's rotting food, things like that. But me just telling that, that's not going to stick. So I'll say, "Okay, you haven't been able to do the dishes for a while. Is this normal for you? When do you normally do the dishes?" I ask them open-ended questions. And asking them, "What do you think would happen if [your child] went over and got into the dishes?" So that helps you gauge where they're at with it. And I think it opens the doors more to them being receptive to what you're going to tell them instead of just telling them. So that does help a lot. I do have to keep myself in check. Occasionally, you just want to point things out. It's really, it's not going to get [through to them]. It might be a temporary solution, and they might clean up those dirty dishes because you told them too, but they're going to be back there a week later if you don't kind of gauge their perception of those dirty dishes to see what they think could possibly go wrong. And then kind of educating them about what could go wrong.

In her narrative, Susan describes using a casual and curious manner to ask open-ended questions of the family to "gauge" their perception of the problem and its seriousness. She admits it can be difficult to use this indirect approach with the family but notes simply pointing out problems and needed corrections to them are not going to change their behavior long-term. Ultimately, she wants the family to arrive at their own solutions after providing them with needed information about how their unclean home impacts child safety.

In summary, the FCMs routinely monitored both the content and structure of their communications and then adapted their skills as needed to maintain the engagement with their DCS families. They recognized that people from other cultures sometimes spoke differently from them and this required adjustments to how they communicated. When the caseworkers' exchanges with the parents became heated they usually opted to call them on the phone or to send letters as opposed to conducting in-person home visits. They also sought stand-by support from co-workers and supervisors when a family communications were especially difficult. These strategies allowed the FCMs to set limits on parental behavior and establish professional boundaries; yet, this was hard for them to do. In responding to families, the FCMs tried different communication styles such as being passive and humbling themselves or being more assertive. All of the FCMs avoided using an aggressive communication style as they recognized this would only make the communication problems with the DCS parents worse.

### **Chapter Summary**

In this chapter I presented the analysis and results of the two primary research questions for this qualitative study following the IPA procedures recommended by Smith et al. (2009). For the first research question "In your work, how do you define and think about culture?" the words and characteristics of the participant responses were categorized and counted to obtain a general sense of how FCMs conceptualized the term culture in their work with DCS families. The results showed that participants usually defined culture as a set of characteristics common to individuals and groups. Additionally, the participant responses demonstrated that most of the FCMs learned about culture from their college educations, personal experiences, and family upbringings. In

my analysis I further identified three dimensions to the word that helped to explain how the participants understood the concept of culture. These dimensions included the narrow to broad dimension, the intrinsic–extrinsic dimension, and the dynamic dimension. Taken together, these three dimensions revealed the word culture to be a very complex term that needs further examination.

The second research question, “How did these cultural differences affect your engagement with this family?” was explored through the participants re-telling of their experiences engaging a culturally different family on their caseload. These stories were then analyzed and interpreted using the process of the hermeneutic circle. This resulted in the identification of four themes: (a) striving to understand and connect, (b) managing power, (c) accepting a culture of poverty, and (d) adapting communication. These themes routinely overlapped requiring the FCMs to attend to multiple thematic areas simultaneously as they interacted with their culturally different families. In addition, at nearly every step in the engagement process, FCMs modulated their interactions in order to find balance and stability within their relationships with the family. Thus, the engagement process with culturally different families involved a delicate balancing act in which FCMs must constantly tune their own thinking about the families’ culture and how this impacts engagement. Notably, nearly all of the FCMs in this study believed most of their DCS families were culturally different from them and that these families’ low SES, or experience of living in poverty, was the greatest cultural difference. In the following chapter I discuss these findings, identify the limitations of the study, and present the implications of this research for social work practice, education, and research.



## CHAPTER FIVE: DISCUSSION, LIMITATIONS, AND IMPLICATIONS

### **Introduction**

In previous chapters I defined and described the problem of disproportionality with a particular focus on the overrepresentation of children of color in the child welfare system. I provided a historical overview of how this problem developed, explained how it is measured, and highlighted the epistemological influences and theories that underpin the debate. Finally, I presented the research design and results of how caseworkers employed in the child welfare system define and understand the meaning of culture when engaging with families who are culturally different from themselves. In this chapter, I discuss these results, identify the limitations of the study, and share the implications these research findings have for social work education, practice, and research.

### **Discussion**

In keeping with the IPA method, Smith et al. (2009) recommend the IPA researcher ultimately place the study's analysis and results in a wider context and connect it to the existing literature. This includes explaining what I have learned from this process, identifying any expected and unexpected findings, discussing the implications of the study, and endorsing areas for future research. With this in mind, the focus of this discussion is to illuminate how the FCM participants' definitions and understandings of culture and descriptions of engaging culturally different families enhance our understanding of the disproportionality literature. As previously mentioned, understanding how these caseworkers think about culture and culturally different families is the first step towards knowing whether cultural insensitivity and caseworker bias may

possibly contribute to the overrepresentation of children of color in the child welfare system.

### **Discussion of Research Question 1**

In 1983, Williams, an academic and critic of language, literature, and society, posited the word “culture” to be one of the most complicated words in the English language (p. 87). Yet, little progress has been made since that time to examine seriously the concept and to deconstruct what it really means. Park (2005) points out, “neither the meaning nor the significance of the concept of culture has been sufficiently examined in social work” (p. 13). This assertion is supported by the narratives of the participants of this study who, for the most part, put forth much effort to explain their definitions of culture in both concrete as well as abstract terms. More explicitly, after the FCMs identified common characteristics they associated with culture, they described the word as big and complicated then suggested it was confusing at times due to its dimensions. This is not surprising given that a review of the literature, for both the social work profession and the field of child welfare, shows the word culture is merely defined for the purposes of discussing cultural competence and diversity and is not scrutinized in any way.

The first research question of this study sought to elucidate how caseworkers in the child welfare system, who face cultural issues daily in their work with families, define and understand this concept. As expected, participants provided a variety of answers regularly associated with culture, such as race, religion, family upbringing, socioeconomic status, gender, and sexual orientation. All of these characteristics are consistent with the aforementioned definition of the word provided by the social work

profession that defines culture as “the integrated pattern of human behavior that includes thoughts, communications, actions, customs, beliefs, values, and institutions of a racial, ethnic, religious, or social group” (NASW, 2000). However, three of the participants provided answers that were unexpected and stood out from the rest in that these participants believed “personal motivations,” “parenting,” and “parent intentions” to be a culture. In considering these answers, a personal motivation is not consistent with the definition of culture because, by its very nature, culture is shared with other people and is not an individual concept. However, since the act of parenting is an action, and intentions are a belief, both of these responses can be considered a culture, following the NASW’s (2000) comprehensive definition. Yet, since all cultures perform the act of parenting, the parenting practices are what differ by cultural group, not the actual act of being a parent. Similarly, identifying intentions of parents as a culture seems overreaching because individuals within groups may intend differently, depending on the circumstances. Certainly a person could argue whether or not these words constitute culture. Thus, these unusual responses from the participants beg the following questions: Is everything a culture? Also, is there any characteristic of a group of people that should not be considered a culture? In a profession such as social work, which is focused on helping diverse groups of vulnerable people, it is valuable to consider the efficacy of having an overly broad conception of this word. This is contrasted with having an overly narrow concept of the word that has been the trend in the disproportionality literature.

After participants provided their basic definitions of culture, they further explained their descriptions. These descriptions suggested three dimensions of culture that demonstrated why the word is so complex and difficult to understand. In particular,

the intrinsic–extrinsic and dynamic dimensions appeared to confound participants the most because both dimensions dealt with cultural change.

In regards to the intrinsic–extrinsic dimension, participants described some cultural traits as innate and others as acquired. Cultural traits perceived as innate were fixed and unchangeable. These included physical characteristics such race and gender. Cultural traits perceived as acquired were learned over time and changeable. These included behavioral characteristics and lifestyle choices. Although most cultural traits were distinct and easily classified as innate or acquired, one cultural trait that was not was low SES or poverty. This is because some participants viewed it as intrinsic and others as extrinsic, depending on each family’s personal circumstances. When an FCM determined a family’s poverty was intrinsic, the parents were described as having been born into poverty and stuck in a situation over which they had little or no control. This viewpoint elicited much empathy and support from the caseworker. On the other hand, when an FCM determined a family’s poverty was extrinsic, the parents were described as having no work ethic and choosing to live that way. This viewpoint elicited hostility and blame from the caseworker. In the context of child welfare, this latter viewpoint is vital to address because it shows some of the social work participants lack the awareness that poverty and classism are forms of oppression, and *blaming the victim*, one of its key elements (van Wormer, 2004). According to van Wormer, “Victim blaming occurs when the downtrodden or underdogs of society are held responsible for creating their own distress” (2004, p. 30). She further describes it as a natural and universal way of people distancing and shielding themselves from those who suffer. Lott (2002) concurs and argues that distancing is the leading response to poor people by those who are not poor.

Given this explanation, and the overwhelming challenges to helping poor children and families, it is not surprising that some of the caseworkers in this study would respond this way. Yet, there can be little doubt that an extrinsic viewpoint about poverty and a victim-blaming mentality harms the engagement process with families. Thus, this finding establishes that more needs to be done to educate child welfare workers about poverty being a condition resulting from oppressive institutions and social practices, rather than an extrinsic trait that parents can control or change. This education likely would improve child welfare workers' understanding of poor families and could increase their cultural sensitivity towards this oppressed group. It also would help to dispel the erroneous assumptions and negative labels commonly associated with people and families living in poverty, both of which are barriers to social and economic change.

In regards to the dynamic dimension, participants related that their ideas about culture often changed as they became more knowledgeable and gained more experience with diverse groups of people. This information is essential as it validates experiential learning via field education as the signature pedagogy to both undergraduate and graduate social work programs (Shulman, as cited in Council on Social Work Education, 2008). It further suggests that service learning activities in which students are exposed to diverse groups of people in different settings can facilitate student learning about culture. This finding also provides support for the *contact hypothesis* or *intergroup contact theory* that posits bias can be reduced and cultural sensitivity increased through interpersonal contact between majority and minority group members (Cogan, 2003). This idea has been greatly supported in the literature with minority groups such as gay men and lesbians, the poor, African Americans, and many others (Herek & Capitanio, 1996; Lott, 2002; Pettigrew &

Tropp, 2006; Sigelman & Welch, 1993). Recently, Schiappa, Gregg, and Hewes (2005) conducted a study in which they found *parasocial contact*, or exposure to communication media, can reduce biased attitudes in the same way face-to-face interpersonal contact can. This is encouraging because it means social work students and child welfare workers with limited opportunities for interpersonal contact with minority group members may benefit from positive exposure to these groups through regular viewing of communication media such as television or movies.

Participants additionally observed cultural changes in immigrant and non-immigrant families as they learned new behaviors, practices, and skills to keep their children safe. This ordinarily required the DCS parents to let go of old ways of doing things, be open to new information, and choose to conduct themselves differently. The idea that some culture or behavior can be changed cuts to the very heart of child welfare philosophy—that parents want to and can change their abusive and neglectful behaviors towards their children (Gelles & Schwartz, 1999). In the majority of the DCS cases, this idea proved to be true as the parents did want to learn and change their behaviors in order to become better parents. Yet, in a few of the cases, the parents did not want to change, and the FCMs struggled with how to maintain their professional demeanor while continuing to engage the parents. In these instances, the caseworkers indicated their child welfare supervisors were indispensable in helping them to overcome the conflict and to not give up. This discovery provides further confirmation of the crucial role of supervision to child welfare work.

A novel idea to arise from the dynamic dimension of culture was the notion of cultural collision. Cultural collision occurred when different cultures clashed with one

another. The participants of the study described this as occurring when immigrant families were assimilating into American culture and also when the FCMs' cultural beliefs and values "bumped against" those of their DCS families. In the former situation, participants depicted immigrant families as merging their various cultural beliefs and practices in order to form a new culture that was an amalgamation of new and old beliefs and practices. This depiction is consistent with the view that culture is malleable and can be changed. In the latter situation, participants described circumstances in which their own cultural traits or values bumped against those of their DCS parents. This often occurred when the FCMs perceived their parents as not valuing work. When this happened, the participants usually attributed the lack of work ethic to a generational mindset that was impossible to alter. This depiction is consistent with the view that some cultural traits are rigid and cannot be changed. Importantly, in the DCS cases in which this type of cultural collision occurred, the FCMs' ultimately reevaluated their own values and changed their perceptions of the parents. This information is valuable because the ability to examine one's own personal and cultural values and beliefs is one of the standards for cultural competence developed by the NASW (2001). This finding suggests that caseworkers are more likely to scrutinize their own thinking and principles when they find themselves at an impasse in their work with DCS families.

The participants' characterizations of the word culture and the three dimensions identified represent a beginning step towards deconstructing and demystifying this critical concept. Further examination of this concept is needed to delineate the repercussions of having too narrow or too broad of a definition of culture and also to sort out the relationship between low SES or poverty and culture. Finally, the dynamic

dimension of culture suggests the malleability of culture is a critical issue that needs more consideration.

## **Discussion of Research Question 2**

The four themes interpreted in the second research question provided many unexpected and useful findings. In this section I discuss these themes and how they relate to the engagement process with culturally different families. I also indicate what these findings mean for the disproportionality phenomenon and the third theory of overrepresentation.

**Theme 1: Striving to understand and connect.** In the first theme, striving to understand and connect, I discovered three strategies the participants used to engage their DCS parents. These strategies included understanding the parents' perspective by listening openly and intently to them; communicating clearly, honestly, and respectfully; and focusing on the families' strengths. In Chapter Four, these themes were illustrated through one exemplar case. With this in mind, the theme of striving to understand and connect offers several substantial findings for social work practice in child welfare.

The first finding is that all three of the aforementioned strategies often were maintained throughout the life of the DCS families' case, and even when the parents engaged in behaviors the participants found frustrating. Although I had expected these strategies to be employed during the initial engagement period, I was surprised to find the caseworkers continually tried to incorporate the strategies over the long term. While the engagement was not a linear process and the participants often experienced obstacles including lapses into deficit thinking, these were usually transitory moments in which they briefly felt hopeless in not knowing how to help the family. When this occurred, the



participants generally were able to regain their focus once they had talked through their feelings and frustrations with a supervisor or coworker or had taken the time to step back from the case and regain their objectivity.

Another finding is that all three of the strategies that were utilized to understand and connect with the parents went hand-in-hand and were equally important to developing and maintaining engagement with culturally different parents. This is consistent with previous research that suggests a helping relationship is related to “spending time with clients, communicating clearly, providing positive reinforcement, and emphasizing client strengths” (Steib, 2004, p. 16). To be sure, each strategy was connected to the other and seemed to produce a corresponding positive outcome that was needed to sustain the FCM–parent relationship. For instance, as the participants listened openly and intently to the parents discuss their lives and how they came to be in in their present situations, their feelings of empathy grew, and this positively impacted the working relationship. Similarly, as the participants communicated clearly, honestly, and respectfully with the parents they were able to build the parents’ trust. Finally, as the participants highlighted the families’ strengths, they fostered respect and instilled hope in the working relationship. In this way, all three of the strategies contributed to positive engagement with culturally different families. Although none of these strategies are new, they hold particular relevance for working with culturally different parents involved in the child welfare system because many of these parents are members of oppressed groups (Rooney, 2009). Thus, when these strategies are used consistently and in combination, they provide opportunities for vulnerable parents to be heard, understood, and appreciated by people and an institution that historically has disregarded them.

A third finding for this theme is that nearly all of the participants easily empathized with their DCS families and, in fact, this seemed to come naturally to them. This discovery supports the participants' ability to properly engage with their parents because empathy is one of the main components to the process (DePanfilis & Salus, 2003). Furthermore, a majority of the participants demonstrated aspects of *culturally sensitive empathy*, described in the literature as "seeing the world through another's eyes, hearing as they might hear, and feeling and experiencing their internal world," but without "mixing your own thoughts and actions with those of the client" (Ivey, Ivey, & Simek-Morgan, 1993, p. 21). This type of empathy enabled the DCS social workers to understand, accept, and "feel for" the parents' situations, while still maintaining a separate sense of self (Ridley, 1995).

One behavior that interfered and undermined the participants' expression of culturally sensitive empathy, however, was their inability to openly acknowledge—to the parents—the cultural differences that existed between them. This is to say that while most of the participants recognized and discussed being culturally different from their DCS families in private with coworkers, some had difficulty admitting these differences directly to the parents, and instead, tried to point out similarities they shared. For African American parents who were resentful of DCS being in their lives, this strategy did not work and further drove a wedge in the caseworker–parent relationship. Examples of this behavior were seen in two participant narratives in which the caseworkers described trying to increase their engagement with their African American DCS parents by highlighting commonalities in their backgrounds and emphasizing shared religious beliefs. In both of these situations, the DCS parents responded with hostility or by

refusing to cooperate. This may be because, rather than feeling heard and understood, the parents were offended and angered that their caseworker had disregarded their different life experiences and positions in society. According to a preliminary study conducted by Sue, Yau, and Mao (as cited in Chung & Bemak, 2002), counselors' credibility with clients is increased when counselors are able to communicate an understanding of the clients' worldview and acknowledge the cultural differences between them. Based on this information, it is better for caseworkers to openly recognize and discuss cultural differences with the parents rather than minimize or pretend they do not exist. Culturally different DCS parents need to know their caseworkers accept and understand the diverse experiences that have shaped their lives.

**Theme 2: Managing power.** In the second theme, managing power, I uncovered three levels of power that were conceptualized as a pyramid. The top two levels contained those with the most power in the child welfare system, and both of these levels had a foundation level of a plane of privilege. The bottom level included the culturally different parents and children who held the least amount of power in the relationship. I also presented French and Raven's (1959) typology of power as a way of discussing the various forms of power identified by the participants. This conceptualization of power and the participant narratives offer many significant findings relevant to the engagement process with culturally different families and the overrepresentation of children of color in the child welfare system.

Notably, several of the participants commented on the involuntary status of child welfare clients and the manner in which this caused them to think differently about their jobs. The field of social work defines an *involuntary client* as "one who is compelled to

partake in the services of a social worker or other professional” (Barker, 2003, p. 228). These clients often are legally mandated to participate in services to avoid further consequences such as fines, incarceration, or loss of their children. According to Rooney (2009), involuntary clients are pressured to accept help from professionals, and it is their illegal or harmful behaviors that are targeted for change. They are also more likely to be members of oppressed groups. This holds true for the child welfare system, where most of the families are poor and of color and the majority of caseworkers are White (McRoy, 2004). In this manner, the caseworker–parent relationship represents opposite sides of the social justice coin: that of privilege and oppression, or that of dominance and subordination. Dominant groups hold the power and authority and set the parameters in which the subordinate groups operate (Tatum, 2010). Some of the participants recognized this interface and mentioned that it made them uncomfortable. Additionally, the caseworkers believed that, at times, it made their engagement with the families more difficult.

Related to this finding is the fact that the child welfare system brings together several interlocking forms of oppression; yet, this mostly went unnoticed by the participants. Although they recognized their own power and privilege and the oppression their DCS parents felt from the child welfare system, they failed to put these concepts together and think about them in a structural and systemic way. As explained in Chapter One, interlocking oppressions are forms of injustice such as racism, classism, and sexism that, when combined, have a cumulative effect on people. Thus, Hardimen, Jackson, and Griffen (2010) assert that it is impossible to have a unitary or universal experience of any one manifestation of oppression. According to Collins (1993), recognizing how these

interlocking oppressions shape different peoples' experiences of the world is the first step toward lessening its hold on society and institutions. The previous two findings suggest that more open and honest discussions about the role of power and the workings of oppression are needed in both social work and child welfare. In particular, social workers and child welfare workers must stop thinking about oppression as individual acts of harm caused by one entity or group of people and see it for what it truly is: a complex and pervasive system that takes many forms, operates on multiple levels, often hides and, thus, accepted as normal, and, in effect, produces widespread social and economic inequalities that hurt us all.

Another interesting finding from this theme was how the participants chose to deal with the power and privilege they held in relation to their DCS parents. Nearly all of them spoke about using an authoritative, as opposed to authoritarian, approach and trying to minimize the legitimate authority they held. They asked more questions, avoided giving directives, and tried to match the parents in their communication style in order to appear less threatening. Unfortunately, there is scant research on the role of power between caseworkers and parents in the child welfare literature, and in the manual, *Child Protective Services: A Guide for Caseworkers* (DePanfilis & Salus, 2003), the word power is not even mentioned. Instead, caseworkers are encouraged to use their authority "positively" and "effectively" (DePanfilis & Salus, 2003, p. 20), but there is little elaboration as to what this means. Nevertheless, three fairly recent studies do shed some light on this topic. Dumbrill's (2003) research found parents involved with the child welfare system perceived their caseworkers' interventions as more helpful when they exercised "power with," as opposed to "power over," them (Dumbrill, 2003, p. 113). The

results of De Boer and Coady's (2007) study were similar in that child welfare parents favored a caseworker's soft, mindful, and judicious use of power. Finally, in Bundy-Fazioli, Briar-Lawson, and Hardimen's (2009) study, both the parents and the caseworkers expressed a preference for a negotiated and reciprocal power. These studies appear to support the participants' efforts to minimize their power in the DCS parents' eyes.

The last finding for this theme relates to the ways the child welfare parents tried to resist and push back against the caseworkers' authority in order to regain some power and control over their situations. These uncooperative parents were described as using manipulative behaviors such as withholding information or providing misinformation, avoiding contact, refusing to comply with requests, and trying to intimidate the caseworker through threats and anger. These behaviors frustrated the participants, made them uncomfortable, and placed them in situations where they had to establish firmer limits and exercise even more authority. According to Rooney (2009), the uncooperative behaviors of these parents are best understood as reactance, or a normal response to limits on personal freedoms. He notes reactive behaviors are common in child welfare because services are mandated and parents commonly feel they have lost all power and control. Mirick (2012) adds that clients of color are at a higher risk of exhibiting reactance behaviors and of being labeled as noncompliant because of their experiences of racism and oppression. Thus, people from different cultures understand and respond to power differently based on prior life experiences. A thorough understanding of reactance and why it occurs could help child welfare workers better understand and engage with their culturally different parents.

**Theme 3: Acceptance of a culture of poverty.** In the third theme, acceptance of a culture of poverty, I learned that most of the participants tended to support the culture of poverty theory. In Chapter Four, I explained the origins of this theory, what it postulated, and the reasons for its controversy. Without question, the issue of poverty was pervasive throughout the participant interviews and, as such, this theme provides several important findings.

One of the most powerful findings of this study is that the majority of participants identified poverty, as opposed to race, as the most significant difference between themselves and their culturally different families. Although the connection between poverty and race is well-established, this finding was still surprising, given that the third theory of overrepresentation specifically focuses on cultural insensitivity and bias towards African Americans, or racism, as the reason why so many children of color are overrepresented in the child welfare system. Additionally, since race is such a visible characteristic of difference, and all of the participants in the study were White, I fully expected race and ethnicity to be at the forefront of the caseworkers' minds. Yet, since poverty is a pervasive issue that cuts across racial lines, and is identified consistently in the literature as the primary risk factor for why families enter the child welfare system in the first place (Pelton, 1989; Roberts, 2002b), this finding does make sense.

Another compelling finding is that, after identifying poverty as the main cultural difference, most of the participants expressed an acceptance of the culture of poverty theory without question and seemed unaware of its ramifications. Indeed, only one caseworker mentioned the structural components of poverty, and none of them referred to poverty as a form of oppression that is connected closely to race and gender. In addition,

many of the participants used binary logic to categorize their DCS families' poverty as either intrinsic or extrinsic. This indicated whether they believed poverty was a choice and, if so, where to assign blame. This way of thinking is a holdover from the English Poor Law tradition discussed in Chapter Two that categorized the poor as either worthy or unworthy of assistance. Although this finding was disheartening, it was not surprising given the prevalence of dichotomous thinking in regards to complex social issues. The finding is disheartening because it demonstrates that society's thinking about the poor has not progressed much in over 400 years.

Related to the culture of poverty theory was the caseworkers' belief in the myth of meritocracy: that all Americans have equal opportunities in life and that if the child welfare parents just worked hard enough they could raise themselves out of their impoverished conditions (McNamee & Miller, 2004). This discovery is consistent with what has been found in educational research with teachers (Bomer et al., 2008; Gorski, 2008; Smiley & Helfenbein, 2011) and is closely tied to the cultural deficit model that stems from the "negative beliefs and assumptions regarding the ability, aspirations, and work ethic of systematically marginalized peoples" (Irizarry, n.d, para. 2). Thus, although the participants of this study primarily retained a strengths perspective in their work, they tended to slip into deficit thinking when they attributed a family's poverty to extrinsic or cultural causes. This is worrisome because it could cause child welfare caseworkers to establish unrealistic expectations for their culturally different parents or to view them in a harsher, more negative light.

One other interesting finding of this study was how the participants coped with contradictory information and beliefs about poverty. In line with the culture of poverty



theory, many of the participants described their child welfare families' impoverishment as generational or as a cultural trait passed down to them from their parents and grandparents who also lived that way. This description suggests the caseworkers believed their families' unfortunate financial situations were fixed and unlikely to change. At the same time, many of the participants also professed that the parents' situations could change, if they just worked hard enough and applied themselves. Yet, in a few of the interviews, the participants described their parents as working very hard but still living in poverty. Underlying all of this is the assumption in child welfare that parents want to and can change their problematic behaviors, many of which are often attributed to poverty and neglect. These contradictory beliefs seemed to create cognitive dissonance in the caseworkers that, for the most part, was ignored. According to Barker (2003), ignoring or eliminating dissonant cognitions is a common way people try to resolve incompatible beliefs. Although this is understandable given the complex problem of poverty and its lack of viable solutions, this way of resolving dissonant beliefs is not ideal for social workers in child welfare who are charged with helping the poor. The primary concern is that caseworkers' conflicting thoughts about DCS parents living in poverty could inadvertently harm their engagement with families. While there are likely many possible reasons why the participants of this study ignored their dissonant beliefs about poverty, the most likely explanations include these: (a) The caseworkers are underprepared to deal with the complex and overwhelming challenge of poverty; (b) The caseworkers feel burned-out and exhausted on their jobs; and (c) The caseworkers fail to think critically about the information they receive from popular media about the poor.

**Theme 4: Adapting communication.** In the fourth and final theme, adapting communication, I discovered that the participants continually were adapting the ways they communicated with their culturally different families to maintain their engagement. In my analysis of this theme, I provided a basic definition of the word communication and noted that it contained two parts. These two parts included (a) what is being said, or the content; and (b) how it was said, or the way information was exchanged and structured. This theme offers useful findings given that research on communication in child welfare is limited and has tended to focus on the evaluation of communication skills, as opposed to studying actual communication between professionals and their clients (Hall & Slembrouck, 2009).

The first finding is that the participants constantly attended to and managed both parts of their communication with their culturally different parents; this included paying attention to the content, exchange, and structure of information. This focus on both aspects of communication is reasonable given the many hats that child welfare workers wear and the various types of people with whom they interact. In regards to the content of communications, the participants discussed: using a similar or common language, ensuring words had comparable meanings, speaking to the parents in concrete and direct terms, remaining strengths-focused and positive, and using sensitive language so as not to offend or anger the parents. In regards to the exchange and structure of communications, participants discussed the need for frequent, open, honest, and respectful conversations that matched the parents' conversational style using a casual and curious attitude, paying close attention to verbal and nonverbal body language, and finally, setting limits and boundaries on how and when communications with parents took place. Despite the lack

of research on communication within child welfare, the literature on family engagement is supportive of these features of the participants' communication. For example, in a study of engagement between child welfare workers and parents, two of the themes the author identified match the features of communication listed above (Altman, 2008). The themes in Altman's (2008) study were honest, straightforward communication and hopefulness. Here, hopefulness is understood as corresponding to remaining strengths-focused and being positive. It also has been suggested that discussions between caseworkers and parents should be concrete, direct, and wisely framed, and should ensure that meanings of messages between the caseworkers and the parents are congruent (Altman, 2005). This, too, is consistent with the features previously mentioned. Finally, DePanfilis and Salus (2003) suggest it is important to pay attention to verbal and nonverbal cues during caseworker–family communications. Thus, all of the features of communication identified by the participants are consistent with what is found in the engagement literature and appear to be helpful in communicating and engaging with culturally different families.

The second finding for this theme relates to the second part of the communication definition—participants sometimes had difficulty setting limits and boundaries on communications when the child welfare parents were hostile or challenging. In fact, they only appeared able to do so with encouragement and support from coworkers and supervisors. Participants commented this was difficult for them to do because they did not want to be perceived as mean, rude, or unprofessional. This finding has relevance for both social work and child welfare because setting limits on client behavior and establishing boundaries in communication are critical caseworker skills that seem

particularly important to working with involuntary clients. Although these skills would appear to fall under the broader topic of professional boundaries, they are not mentioned in the NASW *Code of Ethics* (2008). In fact, the term *professional boundaries* is only alluded to in the *Code's* first ethical standard, Social Workers' Ethical Responsibilities to Clients, in regards to conflicts of interest and inappropriate physical and sexual contact. As a document primarily concerned with establishing professional guidelines and protecting the public, the *Code* does not address responsibilities that social workers have to themselves. Yet, in a separate document, entitled "Setting and Maintaining Professional Boundaries," the NASW's Social Work Career Center (2011) espouses professional boundaries in general are "critical to an effective, sustainable, career in social work" (para. 1) and can help social workers cope with work-related stressors. The fact that some participants of this study had a hard time setting limits and boundaries with their parents in relation to themselves, without feelings of guilt or unprofessionalism, suggests more detailed education is needed on this topic. In particular, the Crisis Prevention Institute (2009) states, "Setting limits is one of the most powerful tools that professionals have to promote positive behavior change in their clients" (p. 2) and that the purpose is to teach and not to punish. Furthermore, caseworkers who model and enforce self-care behaviors with culturally different parents may motivate them to set their own appropriate limits and boundaries in communication with others.

### **Limitations**

This research sought to explore the disproportionality phenomenon and the overrepresentation of children of color in the child welfare system from a qualitative

perspective, with a particular focus on engaging culturally different families. However, like all scientific research, this study had limitations and unexpected complications.

### **IPA Method**

For those unfamiliar with IPA research, perhaps the most obvious limitation of this study is that it represents but one interpretation of one researcher at one point in time. This could be perceived as problematic in regards to any assertions about the significance of the findings. However, according to Smith et al. (2009), the goal of IPA research is to “ensure that the account is a credible one, not the only credible one” (p. 23).

Additionally, the authors state that “what is important is that the interpretation was inspired by, and arose from, attending to the participant’s words, rather than being imported from the outside” (p. 90). In order to ensure my interpretations closely matched the words and meanings of the participants, I familiarized myself with the disproportionality and cultural competence literature, as well as the empirical data, specifically in regards to the U.S. child welfare system. I also reflected on my prior knowledge and experiences with the FCMs at the local child welfare department. However, had I been more closely connected to the child welfare system, my interpretations may have been different.

Another limitation of the IPA method is that data analysis is rigorous work and almost can always go deeper; there is no definitive end-point. Dahlberg et al. (2008) agree when they state that in phenomenology and hermeneutics “meanings are infinite, always expanding and extending themselves” (p. 176). For this reason, small samples are highly recommended. Thus, the larger sample size of this study ( $n = 10$ ) may have precluded me from going deeper in my analysis and interpretations. Smith et al. (2009)

suggest there are at least three levels of interpretation to IPA research but explain the third level is highly sophisticated and unlikely to be reached by some researchers.

### **Sample**

A limitation of the sample is that the participants were not as homogeneous as I initially planned. At the start of recruitment, I had intended all of the participants to be MSW degree holders working in the Indianapolis area; however, due to the lack of response, I expanded the study's inclusion criteria to include BSW degree holders and those working in urban areas outside of Indianapolis. The sample ultimately consisted of seven participants with BSW degrees and three with MSW degrees from eight counties across the state. Although this was not integrally problematic to the study, I believe it precludes me from making any claims about the relationship of their education to their understandings of culture and engaging culturally different families. Thus, after careful consideration, I cannot say with any confidence that BSW and MSW social workers think any differently from one another about culture or the experience of engaging culturally different families. Yet, based on the participant responses that their definitions and understandings of culture grew and expanded with their exposure to cultural diversity, I would expect participants with more exposure to be more perceptive and thoughtful about the concept of culture.

### **Data Collection**

There were two limitations to the data collection procedures. First, 6 of the 10 interviews were conducted in public places, such as coffee shops and restaurants, and these locations were less private and allowed for more noise than is ideal for careful interviewing. As a result, some of the participants' words ended up being inaudible on the

voice recorder and when the interviews were transcribed, some words and sentences were missing. While this was not a frequent occurrence, it happened with enough frequency that I would not conduct IPA interviews in public places again. However, these locations were selected by the participants and agreed to for their convenience.

The second limitation is that although I emailed the transcripts to the FCM participants at their preferred email addresses for them to check the accuracy of their interview statements, I did not hear back from any of them. I understood this lack of response to mean one of four things: (a) The data were perceived as accurate and the participant had no concerns; (b) The participant did not have the time or did not want to take the time to review the transcript data; (c) The participant ignored or overlooked the email; or (d) The participant no longer worked for the child welfare system (which was where their primary email originated and was received). Regardless of the reason, this could be viewed as compromising Yardley's (2000) second principle of assessing the value of good qualitative research—commitment and rigor.

## **Findings**

Lastly, the findings of this IPA study and of empirical research in general are limited in scope, and there are certain things this research cannot tell us. This is because the study is bounded by the group of social workers who were studied, and an extension only can be considered via theoretical transferability to similar situations and contexts. This places the responsibility on the reader to determine how and when this research can and should be applied. In this sense, the findings are dependent on the readers' further elucidation of them.

## **Implications**

Despite these limitations, this study has many implications for social work education, child welfare practice, and research in child welfare. In particular, the four themes identified provide the fields of social work and child welfare with information as to their strengths and needs in regards to preparing the child welfare workforce to engage with culturally different parents. The findings also point to areas of concern that, if addressed, could reduce the cultural insensitivity and bias that may be contributing to the disproportionate representation of children and families of color in the child welfare system. The implications of the study's findings are discussed by category in the following sections.

### **Implications for Social Work Education**

This study has many significant findings for social work education. First and foremost, the results overwhelmingly suggest more needs to be done to help social workers understand the connections among poverty, race, and class. This is because this research showed the following: (a) The participants of this study did not fully grasp the interconnectedness of these forms of oppression; (b) The participants primarily relied on cultural, as opposed to structural, explanations for poverty; and (c) The participants succumbed to binary and deficit thinking about the poor and often blamed them for their impoverishment. To address these issues, social work educators must take a more critical stance in their teaching methods and have direct, albeit difficult, discussions with their students about race, class, and gender. This is consistent with Daniel's (2008) suggestion for educators to move away from liberal pluralism towards a more critical approach to social work education and practice. The best way to accomplish this is through critical



pedagogy, a teaching approach rooted in critical theory that seeks to unmask power, examine dominant ideologies, and work democratically to improve social and economic conditions for oppressed groups (Brookfield, 2005). Using this approach, the goal for educators is twofold: first, to increase students' awareness about oppressive social and economic conditions; and secondly, to challenge students to actively work towards creating a more egalitarian society (Brookfield, 2005). This second goal is crucial and alludes to the fact that critical pedagogy is "grounded in an activist desire to fight oppression, injustice, and bigotry, and create a fairer, more compassionate world" (Brookfield, 2005, p. 320). Thus, the values inherent in critical pedagogy are an excellent match with the social work profession in that both are concerned with ameliorating oppressive social conditions that limit human potential and well-being. Through in-class discussions, social work educators can help their students become more sensitive to structures and processes that interfere with providing equitable services to people of color and the poor.

Closely connected to critical pedagogy is social work students' learning to think critically, not just in their social justice classes, but across the curriculum and in their day-to-day lives. Although whether critical thinking skills are transferrable to new situations and contexts is a contested issue (Lai, 2011), some scholars believe this is certainly possible when students are given the opportunity to practice these skills in multiple contexts (Kennedy, Fisher, & Ennis, 1991) and when instruction emphasizes true learning activities that represent problems encountered in everyday life (McPeck, 1990). It is worth mentioning that critical thinking skills are strongly emphasized in the

IUSSW programs from which all of the study participants were graduates; yet, the findings of this study suggest these skills are not transferring to all social dilemmas.

This study's findings also suggest additional efforts need to be made to prepare social work students for more active roles in shaping social policies that directly impact the poor and people of color. With the income gap between the rich and the poor widening and the stagnation of employee wages, the need for social workers to become involved in developing social policy is great. This recommendation is supported by many professional social work documents including Standard 2.1.8 of CSWE's (2008) *Education, Policy and Accreditation Standards*, Standard 6.04 of the *Code of Ethics* (NASW, 2008), Standard 6 of the NASW's *Standards for Cultural Competence* (2001), and Standard 4 of the NASW's *Standards for Social Work Practice in Child Welfare* (2013)—all of which strongly encourage social workers to engage in policy practice to advance the social and economic well-being of vulnerable populations and to ensure the effective delivery of social services. Yet, in spite of this mandate, Karger and Stoesz (2001) note social workers have played a relatively minor role in devising policies over the past few decades because they lack the practical education needed to impact policy decisions. It is essential for students to understand why social policies matter because they “determine the distribution of and access to vital societal resources and to numerous opportunities that determine life chances and quality of life” (Wilder, 2004, p. v). Saleeby and Scanlon (2005) also assert some social workers are reluctant to engage in political activities because they are deemed risky and unprofessional. This is unfortunate because, as a profession, social workers are uniquely trained and positioned to evaluate how

various social policies overlap and impact those they are trying to help. In order to engage social work students in policy practice, these two hindrances must be addressed.

Finally, the findings of the study demonstrate that social work educators are doing many things right in preparing their students. For example, nearly all of the participants attributed their evolved understandings of culture, in large part, to their social work classes and educations in the field. Participants also embodied the strengths perspective, were highly empathetic to their families and their situations, and were very good communicators generally. In fact, communication skills and strategies were used frequently to build connection and trust, show respect, and lower the defensiveness of the parents. Finally, the participants were cognizant of many of the power issues and expressed their desire to create more egalitarian relationships with their child welfare parents.

### **Implications for Child Welfare Practice**

In regards to child welfare practice, the study's findings suggest the child welfare system should continue its move away from an authoritarian approach and the formal use of power, and instead, incorporate more opportunities for parent collaboration and the sharing or negotiation of power. This would impact positively the engagement process with culturally different DCS families because the parents would be more involved and invested in the plan for change. Although new approaches such as family group conferencing and differential response have been helpful in this regard, these efforts are just a beginning. Further research is needed to identify more specific strategies for lessening the power that caseworkers and the child welfare system as a whole exercise over parents.

Another finding from the study related to power is that most of the participants described being uncomfortable with their positions of authority, the power they held in relation to their parents, and not knowing how to use their power effectively when they were challenged by parents. These issues beg the following questions: Is the role of professional power being sufficiently discussed within child welfare? Also, is professional power addressed in child welfare training? Based on the omission of the word “power” from the caseworker training manual (DePanfilis & Salus, 2003), and the NASW’s *Standards of Social Work Practice in Child Welfare* (2013), the answer to these questions is probably no. Perhaps this is why Bundy-Fazioli et al. (2009) suggested that, within child welfare, professional power is the neglected proverbial elephant in the room. Open and candid discussions are sorely needed about this important topic and would likely help vulnerable children and families in the child welfare system. Notably, the participants of this study found their child welfare supervisors helpful in managing their professional use of power with parents. These supervisors provided the caseworkers with the professional support they needed to set healthy limits and boundaries with difficult parents and also reminded them to attend to their own well-being.

One other finding that cannot be overlooked is that many of the participants held culturally insensitive and dissonant cognitive beliefs about parents living in poverty. This makes ongoing cultural competence training an imperative. This recommendation is consistent with Standard 8 of the NASW *Standards for Cultural Competence* (2001) that states, “Social workers should advocate for and participate in educational and training programs that help advance cultural competence within the profession” (p. 5). It is also consistent with Standards 2–5 that encourage social workers to develop self-awareness,

cross-cultural knowledge, and cross-cultural skills to provide ethnic-sensitive services to diverse clients (NASW, 2001). Research indicates cultural competence training in the human services, including child welfare, is spotty at best. This was certainly true for the participants of this study who, for the most part, could not recall the training or found it extraneous. A recent survey of human services workers in Indiana, which included child welfare workers, revealed only 64% of the workers received cultural competence training, with 32% receiving no cultural competence training at all (McGuire & Pfahler, 2009). Additionally, of these respondents, most (54%) received only 1–2 hours of initial training, with only 12% receiving supplementary training after the required initial training. This paltry effort to provide cultural competence training to child welfare and other human services staff is alarmingly insufficient. According to Diaz (2005):

The effectiveness of social workers seeking to facilitate relevant social work interactions among groups, between groups, between individuals and communities, and between individuals and social systems and structures requires constant self-evaluation and active efforts to keep their professional knowledge and skills current. (p. 4)

As indicated in this study, culture is a developing concept that changes and grows as more information is absorbed. Consequently, both child welfare leaders and caseworkers have professional obligations to ensure that they complete consistent cultural competence training. This action would help to ensure the continued development of cultural competence in both the agency and the worker and could even provide a forum for child welfare workers to discuss openly cultural issues and concerns that impact their work with DCS families.

In his work, Cross (2001) suggests cultural competence be viewed as a goal for which all social service professionals and agencies should strive. He describes a culturally competent system of care, such as child welfare, as one that

“acknowledges—at all levels—the importance of culture, the assessment of cross-cultural relations, vigilance towards the dynamics that result from cultural differences, the expansion of cultural knowledge and the adaptation of services to meet culturally unique needs” (para. 1). The author also posits a cultural competence continuum that ranges from cultural destructiveness, the most negative end of the continuum, to cultural proficiency, the most positive end of the continuum, with four points in between. This continuum provides a useful framework for viewing the results of this study. Specifically, the findings suggest the caseworkers are at the midpoint of Cross’ cultural competence continuum, or the cultural blindness stage, demonstrated by (a) some caseworkers’ beliefs that color or culture makes no difference and that we are all the same, (b) provided services that encourage assimilation and blame the victims for their problems, (c) a view of members of minority communities from a cultural deficit perspective which asserts that problems are the result of inadequate cultural resources, and finally (d) caseworker dismissiveness of ongoing cultural competence assessment and training. These participant beliefs and activities may indicate that the agency as a whole is at the cultural blindness stage. Certainly, more attention to cultural competence would positively benefit caseworkers, child welfare agencies, and the culturally different DCS families they serve.

### **Implications for Research in Child Welfare**

This study has several implications for child welfare research that could improve caseworker engagement with culturally different families and impact the disproportionality phenomenon. First, the concept of culture is central to both the social work and the child welfare professions and should be examined more closely. Since the

participants of this study described culture as complex and difficult to understand, further scrutiny of the identified dimensions could bring about much needed clarity as to what culture is, what it is not, and how this definition affects work with families. In addition, the idea of cultures clashing, mixing, and transforming—what I have termed cultural collisions—was an interesting finding that deserves further scrutiny. As described by the study participants, cultural collisions occurred as ethnically different DCS families assimilated into Western culture or when DCS workers' values conflicted with those of their DCS families. A review of the scholarly literature reveals this term has never been used in these contexts before.

Secondly, the themes of power and poverty loomed large in this study and demand attention in order to create a more equitable child welfare system that is responsive to the needs of children and families of all cultures. Future research should differentiate power-sharing versus power-negotiating strategies and determine how to incorporate these into the engagement process with culturally different families. This would further support the child welfare systems' move away from using an authoritarian approach by giving parents more input and control over how they navigate solving the problems that led to the CPS report. In regards to poverty, child welfare workers' dissonant beliefs seem ripe for investigation. How do these contradictory, and sometimes biased, beliefs impact the helping process? Or, what does it mean for the child welfare system when the conditions of poverty, sometimes perceived as cultural structural, are so resistant to change, and yet, the child welfare system is predicated on this very belief?

Another area of research that could positively impact child welfare with culturally diverse populations is the close examination of communication between caseworkers and

child welfare parents. Surely, communication is at the very foundation of all helping relationships, but there is little empirical research on this topic. Are some communication strategies more helpful than others in working with involuntary clients? The findings of this study suggest the answer is yes.

### **Chapter Summary**

In summary, the findings of this research prove the concept of culture to be highly complex and unclear in its meaning. In the first research question, the participant narratives point to the term having at least three dimensions that contribute to its complexity. These dimensions include the narrow-to-broad dimension, the intrinsic–extrinsic dimension, and the dynamic dimension. The last two dimensions are more problematic because both dimensions deal with cultural change. Participant narratives indicate poverty to be the most significant cultural difference between child welfare workers and child welfare parents. In the second research question, the participant narratives revealed four themes of engaging with culturally different parents including: (a) striving to understand and connect, (b) managing power, (c) accepting a culture of poverty, and (d) adapting communication. These themes frequently overlapped during the engagement process. In sum, the participant narratives and themes suggest the presence of cultural insensitivity and bias towards parents living in poverty and a need for more attention to the processes of power and oppression. These findings have implications for social work practice as they point toward strengths and areas of improvement in social work education. These findings also have implications for child welfare practice for equalizing power and improving cultural competence training. Finally, these findings have implications for child welfare research as they suggest



further examination of the concept of culture, beliefs about poverty, differentiating types of power, and caseworker communication strategies.

## APPENDIX A: STUDY FLYER

**Are you a IV-E Student working for DCS as a Family Case Manager?  
If so, I may want to talk to you!**

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### **Dissertation Research Study**

**Who:** My name is Janell Horton and I am a doctoral student in social work at IUPUI. I am doing my dissertation research on understanding the cultural experiences of social workers employed with the Department of Child Services.

**What:** I am interviewing family case managers (FCMs) about their experiences engaging with families who are culturally different from themselves. Participation requires one face-to-face interview, lasting about 60 minutes, and one brief follow-up phone call. I will take steps to protect your confidentiality. To be interviewed for this study you must meet the following criteria:

- 1) Be White and female
- 2) Enrolled in the IUSSW BSW or MSW IV-E Program
- 3) Working for DCS as a FCM
- 4) Able to recall a time when you had to engage with a family who was culturally different from you

**When:** The interview will take place at the School of Social Work or another location that is convenient for you.

**Why:** To help others understand the complex work you do with diverse families.

If you are interested in learning more or think you might be interested in being interviewed, please contact me at \_\_\_\_\_@iupui.edu or 317-\_\_\_\_\_.  
Thank you for your interest,

Janell Horton, LCSW

APPENDIX B: INSTITUTIONAL REVIEW BOARD STUDY INFORMATION  
SHEET

**Exploring the Cultural Experience of Family Case Managers**

You are invited to participate in a research study of the cultural experiences of family case managers. You were selected as a possible subject because you are enrolled in the Title IV-E Training Partnership Program between the IU School of Social Work and the Department of Child Services in Indiana. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

The study is being conducted by Janell Horton, LCSW, a doctoral student in the School of Social Work at Indiana University–Purdue University Indianapolis. The study is her dissertation research for the Ph.D. in Social Work.

**STUDY PURPOSE**

The purpose of this study is to (1) explore how family case managers define and understand the term culture and (2) how family case managers build a positive working relationship with families who are culturally different from themselves.

**PROCEDURES FOR THE STUDY:**

If you agree to be in the study, you will do the following things:

1. Take part in one 60–90 minute interview with the researcher. You will be asked to respond to open-ended interview questions about your experience of working with a family who was culturally different from you. The interview will be audio-recorded.
2. A few weeks later, you will be provided with a copy of the written transcript of your interview and invited to confirm its accuracy and clarify any confusing statements.
3. When the study's final results are available, you will be invited to receive a copy of them.

**CONFIDENTIALITY**

Efforts will be made to keep your personal information confidential. We cannot guarantee absolute confidentiality. Your personal information may be disclosed if required by law. Your identity will be held in confidence in reports in which the study may be published. The audio-recordings of your interview will not be shared with anyone else at anytime, and will be stored in a private, locked office on the researcher's password protected personal computer. They will be transcribed into a word processing document within a few weeks of the interview and destroyed immediately upon completion of the project (no later than December 1, 2012). False participant names will be used in all transcriptions and written reports of the research project. Computerized transcriptions

will be stored on an encrypted, secure, password-protected server and on the researcher's password-protected personal computer.

Organizations that may inspect and/or copy your research records for quality assurance and data analysis include groups such as the study investigator and his/her research associates, the Indiana University Institutional Review Board or its designees, and (as allowed by law) state or federal agencies, specifically the Office for Human Research Protections (OHRP), who may need to access your research records.

## **PAYMENT**

You will not receive payment for taking part in this study.

## **CONTACTS FOR QUESTIONS OR PROBLEMS**

For questions about the study, contact the researcher Janell Horton, LCSW at 317- or Dr. Lisa McGuire, Ph.D. at 317- .

For questions about your rights as a research participant or to discuss problems, complaints or concerns about a research study, or to obtain information, or offer input, contact the IU Human Subjects Office at (317) 278-3458 or (800) 696-2949.

## **VOLUNTARY NATURE OF STUDY**

Taking part in this study is voluntary. You may choose not to take part or may leave the study at any time. Leaving the study will not result in any penalty or loss of benefits to which you are entitled. Your decision whether or not to participate in this study will not affect your current or future relations with the University.

## APPENDIX C: DEMOGRAPHIC DATA SHEET FOR FCM STUDY

Interview # \_\_\_\_\_

1. Pseudonym (self-selected):
2. Age:
3. Are you employed as an FCM now? (please circle)  

YesNo

  - a. If not now, what year(s) were you employed as an FCM?
4. In what county were you employed as an FCM?
5. What are you in your IV-E program?
6. Contact info for follow-up?

## APPENDIX D: INTERVIEW SCHEDULE

**Investigator:** I am interested in learning about you and your experiences as a FCM employed with DCS. All of your responses will be kept confidential and there is no right or wrong answers. To begin, could you just tell me a little about yourself?

### *Warm-up Questions:*

1. Where are you from?
2. Where did you attend undergraduate and for what degree?
3. When did you first become interested in social work?
4. How long have you worked for DCS?
5. Have you had other social service jobs? Where?

### *Study Questions:*

1. In your work as a FCM, how do you define culture?

*Possible prompts:* What does culture mean? What does it include? How it is expressed?

2. Where does your definition come from?

*Possible prompts:* experience, colleagues, family, friends, education, or training?

3. Can you tell me about a time when you had difficulty engaging with a family that was culturally different from yourself?

*Possible prompts:* How would you describe the cultural difference? What happened? What did you say or do? What did you do next? Can you tell me more about that?

4. How did being culturally different from the family impact your ability to engage with them?

*Possible prompts:* Did it affect your ability to use your engagement skills (empathy, trust, respect, and professionalism)? How did you cope with the difference?

5. When did you first think about the family's culture being different from your own?

*Possible prompts:* When you first received and read the case file, before you met them for the first time, or after you had met them?

6. During your initial meeting with the family, what were you thinking about in regards to their culture?

*Possible prompts:* What thoughts, feelings, memories, words, or pictures ran through your mind?

7. How, if at all, did your view of the family's culture change as you worked with them?

*Possible prompts:* When did it change? What caused the change?

8. What do you think this family thought about you and your culture?

*Possible prompts:* Did they ever say or do anything to indicate their thoughts or feelings?

## APPENDIX E: TRANSCRIPTIONIST CONFIDENTIALITY AGREEMENT

I, \_\_\_\_\_, transcriptionist, agree to maintain full confidentiality in regards to any and all digital audio recordings and documentation received from Janell Horton related to her doctoral study on Exploring the Cultural Experiences of Family Case Managers. Furthermore, I agree:

1. To hold in strictest confidence the identification of any individual that may be inadvertently revealed during the transcription of digitally recorded interviews, or in any associated documents;
2. To not make copies of any digital recordings or computerized files of the transcribed interview texts;
3. To store all study-related digital recordings and materials in a safe, secure location as long as they are in my possession;
4. To not discuss participation in this study with other IUSSW students or faculty as this could compromise participants confidentiality;
5. To delete all electronic files containing study-related documents from my computer hard drive.

I am aware that I can be held legally liable for any breach of this confidentiality agreement, and for any harm incurred by individuals if I disclose identifiable information contained in the digital audio recordings and/or files to which I will have access.

Transcriber's name (printed) \_\_\_\_\_

Transcriber's signature \_\_\_\_\_

Date \_\_\_\_\_



## APPENDIX F: VISUAL SYNOPSIS OF FINDINGS

### Research Question 1: Defining and Understanding Culture

- Usual characteristics: race, socioeconomic status (SES), gender, religion, family upbringing, place of birth, etc...
- Unusual characteristics: parenting, parent intentions, personal motivations
- Learning from family, social work classes, and life experience
- 3 Dimensions:
  - Narrow to broad: micro, macro, mezzo
  - Intrinsic–extrinsic: intrinsic cannot change, extrinsic can change
    - Poverty is both
  - Dynamic: definition changes with growth and experience
    - Cultural collisions occur

### Research Question 2: Meaning of Cultural Differences for Engagement

#### 4 Themes:

1. Striving to Understand and Connect
  - 3 strategies:
    - i. Listening to and understanding parent perspective, developing empathy
    - ii. Clear, honest, direct communication
    - iii. Strengths perspective
  - Strategies maintained throughout life of case, all necessary
  - Empathy came easy
2. Managing Power
  - Pyramid or hierarchy of power in child welfare + privilege
  - 5 forms: legitimate, coercive, referent, expert, reward
  - Involuntary vs. voluntary status complicated relationships
    - Interlocking oppressions ignored (racism, sexism, classism)
    - Interplay of race and power noticed at times
  - Need to minimize authoritarian, formal, legitimate power and privilege
    - Made caseworkers uncomfortable and parents more reactive
    - Barrier to trust and engagement
    - Parents found ways to undermine authority and power
  - People from different cultures experience power differently

### 3. Acceptance of Culture of Poverty

- Poverty #1 difference
- Culture of poverty theory
  - Myth of meritocracy, worthy vs. unworthy, generational, victim blaming
  - Resourcefulness admired
  - Some poor are content living in poverty
  - Structural components ignored, for most part
- Cognitive dissonance around beliefs about poverty

### 4. Adapting Communication

- 2 parts to definition
  - Knowledge and content of message
    - Words, phrases, meanings different or misinterpreted
    - People from different cultures communicate differently
    - Simplify information, use sensitive, common language
  - Exchange and structure of message
    - Frequent communication essential
    - Problems setting limits and using professional boundaries when parents angry. Felt guilty and unprofessional.
      - Support from supervisors helpful

## APPENDIX G: COMPLETE LIST OF IDIOMATIC PHRASES

Idiomatic Phrase	Interpreted Meaning	Applicable Theme(s)
Butter her up	To gain favor through praise and flattery	Power, Communication
Walking on eggshells	To tread lightly around a sensitive topic, try not to offend	Power, Communication
Finding a common thread	Something two people or groups have in common, a connection	Communication, Understanding
Getting down to their level	Lowering oneself to another's position	Power, Communication
Never let them see you sweat	Not letting others see fear or stress as they may take advantage	Power, Communication
Ducks in a row	Having things in order	Power, Communication
Not going to throw myself to the wolves	Not knowingly putting yourself in a bad situation	Power
You made this bed, now you can lay in it	A person must accept suffering as a consequence of one's actions	Power
On the same playing field	A situation that is fair to all and has equal opportunity	Power, communication
Being in their corner	Having support or help	Power
Playing it pretty tight	To hold information closely	Power, Communication
They have a bad taste in their mouths	A feeling of disappointment or frustration as to cause nausea, or something morally despicable	Understanding
In one ear and out the other	Heard but not remembered, or heard but person not paying attention	Communication
Getting them on board	Getting someone to agree	Power
Barely scraping by	Having only enough money for essentials, being close to failure	Poverty, Understanding
If I were in their shoes	Empathizing with a situation or similar circumstances	Understanding
Sugarcoating	To make it more appealing	Communication
Having no taste for	Not liking someone or something	Understanding

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## CURRICULUM VITAE

**Janell M. Horton**

### **EDUCATION**

Ph.D. (Social Work. Higher Ed Minor), Indiana University, Indianapolis, IN (Aug, 2013)

M.S.W. (Interpersonal Practice), University of Michigan, Ann Arbor, MI (Dec, 1995)

B.A. (Psychology), Loyola Marymount University, Los Angeles, CA (May, 1993)

A.A. (General), Marymount University, Palos Verdes, CA (May, 1991)

### **ACADEMIC APPOINTMENTS**

*Graduate Field Instructor*, Indiana University School of Social Work, Indianapolis, IN.  
Provide clinical training and supervision to MSW interns. (Fall 2011–Summer 2012)

*Adjunct Faculty*, Indiana University School of Social Work, Indianapolis, IN.  
Taught undergraduate and graduate social work courses. (August 2009–June 2011)

*Research Assistant*, Indiana University School of Social Work, Indianapolis, IN.  
(1) Conducted qualitative interviews, fidelity reviews, and developed a survey tool for the evaluation of the Department of Child Services practice model grant.  
(2) Participated in the start-up and implementation of American Humane's National Quality Improvement Center's non-resident fathers and the child welfare system grant. Principal Investigator, Gail Folaron, Ph.D. (May 2008–May 2009)

*Research Assistant*. Indiana University School of Social Work, Indianapolis, IN.  
Developed the MSW alumni survey as part of the MSW program evaluation model for the IU School of Social Work. Principal Investigator, David Westhuis, Ph.D. (August 2007–May 2008)

### **CLINICAL EXPERIENCE**

*Clinical Therapist*, Greenhouse and Associates LLC, Indianapolis, IN.  
Provide assessments, evidence-based interventions, and therapeutic support services to disabled adults and seniors in long-term care and assisted living facilities. (June 2012–Present) (FT, 40 hrs/wk)

*Family Therapist & MSW Supervisor*, Promising Futures, Noblesville, IN.

Provided therapeutic support services, supervision of interns, advocacy in schools and the legal system, and evidence-based interventions in multiple family and youth oriented programs. (June 2011–June 2012) (PT, 25 hrs/wk)

*Medical Social Worker*, Clarian Health/Indiana University Hospital, Indianapolis, IN.

Provided psychosocial assessments, counseling, advocacy, education, and coordinated hospital referrals and discharges for acutely ill inpatients and outpatients. (May 2003–August 2008) (FT, 40hrs/wk)

*Multisystemic Therapist*, Catholic Charities, Batavia, NY.

Provided in-home, intensive, court-ordered evidenced based therapy and interventions for behaviorally disordered youth ages 7–17. Coordinated services and advocated for the parent and child with probation, mental health, and family court. (June 2001–April 2003) (FT, 35 hrs/wk)

*Medical Social Worker*, Strong Hospital/University of Rochester, Rochester, NY.

Provided education, comprehensive risk screens, crisis counseling, psychosocial services and coordinated hospital referrals and discharge planning for acutely ill patients. (February 2000–February 2001) (FT, 40 hrs/wk)

*Medical Social Worker GS-11*, Long Beach Veteran's Hospital, Long Beach, CA.

Provided psychosocial assessments, education, advocacy, counseling, discharge planning and resources to medically ill and disabled veterans regarding end-of-life issues, home care, placement, advanced directives and identification and application of state and federal benefits. Member of palliative care team and social work education planning committee. (January 1998–January 2000) (FT, 40 hrs/wk)

*Psychiatric Social Worker*, Kedren CMHC, Los Angeles, CA.

Senior therapist serving chemically dependent, severely mentally ill adults in day treatment program. Provided psychosocial assessments, evidence based therapies, and case management services. Responsible for assisting in the supervision of mental health workers and MSW interns. (January 1997–October 1997) (FT, 40 hrs/wk)

*Psychiatric Social Worker*, Psychiatric Intervention Center, Detroit, MI.

Provided psychiatric emergency services including assessments, diagnosis of outpatients, crisis counseling, authorizations for services, and completed petitions for hospitalization for court ordered adults. Served as liaison for families, police, and employers and advocated for client services. (January 1996–December 1997) (FT, 40 hrs/wk)

## **LICENSURE, CERTIFICATIONS, AND PROFESSIONAL MEMBERSHIPS:**

L.C.S.W., State of Indiana

L.C.S.W., State of Colorado

Council on Social Work Education

## **TEACHING ASSIGNMENTS**

*Indiana University School of Social Work*

### **Graduate Courses**

- S501 Professional Social Work at the Master's Level: An Immersion (3 credits), 13 students, Fall 2010. Assistant to Dr. Lisa McGuire.
- S632 Child Welfare (3 credits), 24 students, Summer 2009.
- S503 Human Behavior and the Social Environment (3 credits), 18 students, Fall 2009.
- S634 Group and Community Based Practice with Children and Families (3 credits), 19 students, Fall 2009. Assistant to Dr. Lisa Maguire.
- S501 Professional Social Work at the Master's Level: An Immersion (3 credits), 22 students, Fall 2009. Assistant to Dr. Lisa Maguire.

### **Undergraduate Courses**

- S690 Academic Writing (3 credits), 4 students, Spring 2011.
- S100 Understanding Diversity in a Pluralistic Society (3 credits), 17 students, Spring 2011.
- S400 Academic Writing (2 credits) Summer, 5 students, Summer 2011.

## **PROFESSIONAL SERVICE**

*Mentor and Advocate Volunteer* for an adult with a developmental disability. (8–12 hrs/month, June 2008–November 2011).

*Support Group Facilitator Volunteer*, Huntington's Disease Society of America, Los Angeles, CA. (4 hrs/month, January 1998–December 1998).

## **OTHER PROFESSIONAL ACTIVITIES:**

*Dissertation Defense*, Indiana University School of Social Work, Indianapolis, IN.

*Exploring the cultural experiences of family case managers: An Interpretative Phenomenological Analysis*. (June 5, 2013)

*Guest Lecturer*, Indiana University School of Social Work, Indianapolis, IN. Dr. Jeffry Thigpen's graduate research course, S502. (November 13, 2012)

*Training Graduate*, Undoing Racism Training Program, The People's Institute for Survival and Beyond, Indianapolis, IN. (September 24–25, 2012)

*Data Analyst*, Indiana University School of Social Work, Indianapolis, IN. Analyzed transcripts utilizing hermeneutic phenomenological analysis for the qualitative dissertation study of Barb Burdge entitled *Transgenderism as a Valued Life Experience among Transgender Adults*. (January 2012–January 2013)

*Training Graduate*, Institute for Heideggerian Hermeneutical Methodologies, Indiana University School of Nursing, Indianapolis, IN. (June 19–23, 2008)

*Graduate, Preparing Future Faculty Program, Indiana University, Indianapolis, IN. (May 2008)*

*Research Assistant, Indiana University, Indianapolis, IN. Conducted interviews and completed transcriptions and analyses for two qualitative studies: one involving conflict resolution and the second involving decision making capacity in persons with cognitive impairment. Principal Investigator, Sara Horton-Deutsch, D.N.S. (Sept. 2003–April 2004)*

### **COMMUNITY SERVICE**

*Colony Manager, Indy Feral of Indianapolis, IN. (September 2005–Present). Indy Feral is a trap-neuter-release (TNR) program in the city dedicated to reducing the number of abandoned and unwanted cats.*

### **PRESENTATIONS:**

**Horton, J.** (2012, November). Exploring the cultural experiences of family case managers. *The 58th Annual Program Meeting of the Council on Social Work Education, Washington D.C.*

Folaron, G., Williamson, S. & **Horton, J.** (2009, November). “Caught” or “Taught”? Implications of mentoring and training on caseworker skill development. *The 55th Annual Program Meeting of the Council on Social Work Education, San Antonio, TX.*

Williamson, S. A., Folaron, G., & **Horton, J.** (2009, November). “But we're both White: Broadening students' understanding of cultural competence. *55th Annual Program Meeting of the Council on Social Work Education, San Antonio, TX.*

**Horton, J.** (2009, April). The epistemological influences of disproportionality in child welfare. *The 13th Annual PhD Spring Symposium, Indiana University School of Social Work, Indianapolis, IN.*

**Horton, J.** (2008, April). In the minority in protecting minorities: Indiana and hate crime legislation. *The 12th Annual PhD Spring Symposium, Indiana University School of Social Work, Indianapolis, IN.*

**Horton, J.** (1993). The effects of education on homophobic attitudes in college students. *Western Psychological Association's annual conference, Phoenix, AZ.*

### **PUBLICATIONS:**

Horton-Deutsch, S. & **Horton, J.** (2003). Mindfulness: Overcoming intractable conflict. *Archives of Psychiatric Nursing*, 17 (4), 186–193.

**Horton, J.** (2001). Sobriety island. *Life Skills Management*, 4, 23.

**Horton, J.** (1993). The effects of education on homophobic attitudes in college students. *Modern Psychological Studies*, 1 (2), 20–24.

**HONORS**

Indiana University School of Social Work: Teaching Excellence Award (TERA), April 2012

Indiana University Graduate School: Educational Enhancement Grant (\$500), April 2012