Center for Advanced Studies in Child Welfare
School of Social Work
University of Minnesota

CW360°

a comprehensive look at a prevalent child welfare issue

Safety | Permanency | Well-Being

Culturally Responsive Child Welfare Practice
Winter 2015

From the Editors

The intersection of culture and child welfare practice has been considered and conceptualized in a number of ways, from cultural competence and institutional racism to disparity and disproportionality. Most often the discussion around culture is framed as a struggle or challenge for our field to address; we believe it is critical that the field move beyond this to examine how culture can be used to make a difference in our work with *all* families. Within the field of child welfare we use the term *cultural responsiveness* to reflect the idea that child welfare professionals need to identify and nurture the unique cultural strengths, beliefs, and practices of each family with whom we work and integrate that knowledge into the intervention approaches we employ. We believe that through culturally responsive practice, we will see true change in disparity and disproportionality. It is in this vein that CASCW staff developed the current issue.

This issue is primarily focused on culturally responsive practice with American Indian and African American families, although not exclusively. In Minnesota, where *CW*360° is produced, these communities have consistently been involved in child welfare at disproportionate rates. These rates have persisted, virtually unchanged, for a number of years, reflecting professionals' struggles to consistently meet the needs of African American and American Indian children and families within a cultural context. To address these challenges, we partnered with the Center for Regional and Tribal Child Welfare (CRTCW) at the University of Minnesota–Duluth to develop this publication. Together, we hope that this publication succeeds in moving us beyond rhetoric and into meaningful dialogue about solutions that will aid in turning the tide of racial disparity and disproportionality.

Each issue of *CW*360° is divided into three sections: overview, practice, and perspectives. The overview section explores cultural responsiveness and concepts related to culturally informed practice. This issue features an expanded practice section focusing on innovative, community developed practices. The perspectives section presents articles from child welfare stakeholders on practice implementation and the personal impact of addressing culture in our work.

Throughout this publication there are tools and information that will help you apply the concepts presented here to your own work settings. **Please refer to the discussion guide to help start discussions at your agency.** We have removed the reference section from the printed editions of *CW*360° to make space for additional content. You can find the integrated bibliography here: http://z.umn.edu/2015cw360

We invite readers to join CASCW staff and CW360° contributors Lisa Merkel-Holguin and Annette Semanchin Jones for our full-day conference on culturally responsive child welfare practice on April 28, 2015. For more information, visit http://z.umn.edu/culturecw.

Traci LaLiberte, PhD
Executive Director,
Center for Advanced Studies in Child Welfare
Executive Editor, *CW*360°

Tracy Crudo, MSW
Director of Outreach,
Center for Advanced Studies in Child Welfare
Managing Editor, *CW*360°

Heidi Ombisa Skallet, MSW, LISW
Outreach Coordinator,
Center for Advanced Studies in Child Welfare
Managing Editor, *CW*360°

From the Center for Regional and Tribal Child Welfare Studies

The Center for Regional and Tribal Child Welfare Studies is pleased to partner with CASCW on this edition of *CW*360°. Being able to understand and effectively respond to the needs of individuals, families, and communities in which we work cuts across all levels of practice. Many thanks to the authors who have provided us with unique insights into why culturally responsive practice is important and wonderful examples of effective cross cultural practice.

Housed within the Department of Social Work at the University of Minnesota Duluth, our mission is to advance the well-being of children by strengthening families and communities through social work education, research, and outreach in the region, with a special emphasis on working in partnership with American Indian tribes. Our programs prepare undergraduate and graduate social work students to become effective child welfare practitioners, particularly in working with American Indian families. The Center strives to serve as a resource for tribes located in Minnesota, county agencies, and non-profits to improve American Indian child welfare practice. Our Center and CASCW have had a long-standing relationship (since 1997) through our IV-E Scholars programs. The Center for Regional and Tribal Child Welfare Studies was founded in 2005, recognizing the importance of working with tribes in Minnesota. In 2014, we were awarded a National Child Welfare Workforce Initiative grant to partner with St. Louis County and regional tribes to address the high disportionality of American Indian children in the child welfare system in Minnesota through systems change and workforce development. We hope you enjoy this issue of CW360° and find the articles practical as we all go about the work of serving children and families.

Priscilla A. Day, MSW, Ed.D.
Department Chair, Social Work and Director, Center for Regional and Tribal Child Welfare Studies
University of Minnesota Duluth

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Overview

Racial Disproportionality and Disparities in the Child Welfare System

Alan J. Dettlaff, PhD

The overrepresentation of children of color in the child welfare system has been observed for more than 40 years, yet persists as a national concern. Commonly referred to as *disproportionality*, this phenomenon has most significantly affected African American children, with data from 2012 indicating that African American children represented 25.7% of children in foster care, although they represented only 14% of children in the general population (Wood & Summers, 2014). Disproportionality has also been observed among Native American/Alaska Native children at the national level, with data indicating that Native American/Alaska Native children represent 2.1% of children in foster care, although they represent only 0.9% of children in the general population (Wood & Summers, 2014). And although Latino children have historically been slightly underrepresented in foster care at the national level, there is growing awareness of differences in representation at the state level. In 2012, Latino children were overrepresented in six states, with the greatest overrepresentation occurring in Maine, where they were represented in foster care at a rate of six times their proportion in the general population (Wood & Summers, 2014). The persistent presence of disproportionality has led to important questions regarding the fairness of child welfare policies and practices and whether those policies and practices unfairly disadvantage children of color.

Defining and Identifying Disproportionality and Disparities

The initial use of the term *disproportionality* as applied to the child welfare system was intended to raise awareness of the need to better understand why children of different races were represented in child welfare at different rates. As awareness of this phenomenon grew, the concept of *racial disparity* began to emerge as another useful indicator in identifying and understanding racial differences in the child welfare system. Although these terms are sometimes used interchangeably, they measure racial differences in distinct ways. Understanding these differences and what these concepts mean for child welfare systems is an important component in developing an appropriate response to address them.

Disproportionality

The term *disproportionality* refers to the state of being out of proportion. In the context of the child welfare system, disproportionality describes a condition that exists when the proportion of one group in the child welfare population (i.e., children in foster care) is proportionately larger (overrepresented) than the proportion of the same group in the general child population. As indicated previously, African American children represent 25.7% of children in foster care, although they represent only 14% of children in the general population, for a *disproportionality ratio* of 1.8. This represents a decrease in disproportionality since 2000 when African American children represented 38% of children in foster care and 16% of the child population, a ratio of 2.5 (Summers, Wood, & Russell, 2012).

The persistent presence of disproportionality has led to important questions regarding the fairness of child welfare policies and practices and whether those policies and practices unfairly disadvantage children of color.

Disparity

While disproportionality refers to the state of being out of proportion, disparity refers to a state of being unequal. In the child welfare system, disparity is typically used to describe unequal outcomes experienced by one racial/ethnic group when compared to *another* racial/ethnic group (in contrast, disproportionality compares the proportion of one racial/ethnic group in the child welfare system to the *same* racial/ethnic group in the population). Disparities can occur at every decision-making point in the child welfare system, and over the past two decades a considerable number of studies have identified disparities across these decision-making points, including the initial report of alleged maltreatment (Fluke, Yuan, Hedderson, & Curtis, 2003; Lu et al., 2004), acceptance for investigation (Gryzlak, Wells, & Johnson, 2005), substantiation of alleged maltreatment (Ards, Myers, Malkis, Sugrue, & Zhou, 2003; Dettlaff et al., 2011), placement into out-of-home care (Rivaux et al., 2008; Wulczyn & Lery, 2007), and exits from care (Hill, 2005; Lu et al., 2004). Ultimately, disparities that occur in both entries to the system and exits from the system produce disproportionality. Thus, understanding where disparities exist and why they are occurring is essential to understanding disproportionality.

Contributing Factors to Disproportionality and Disparities

Although the presence of disproportionality and disparities in the child welfare system has been well documented, of concern to the field are the explanatory factors that underlie them, as these are the issues that must be understood in order to develop appropriate responses and shape policy. An issue that has been debated in recent years is whether the observed disproportionality and disparities result from differing levels of need among children and families of color or from a form of racial bias within child welfare systems. In this context, the term "racial bias" is used to connote a phenomenon that, given equivalent levels of risk, children of color are more likely than White children to enter the child welfare system at various decision-making points, resulting in differential outcomes that negatively affect children of color.

Recent critiques of efforts to address disproportionality and disparities have suggested that poverty and differential risk are likely stronger explanatory factors than racial bias, and have suggested that attempts to reduce racial bias are misguided. These critiques have pointed to findings from the most recent National Incidence Study of Child Abuse and Neglect (NIS-4), published in 2010, which showed that rates of maltreatment for African American children were significantly higher than those for White or Hispanic children in several maltreatment categories (Sedlak, Mettenburg, et al., 2010). In supplemental analyses of these race differences, the authors concluded that these differences were the result of greater precision of the NIS-4 estimates, as well as an increased disparity in income between Black and White families since the prior version of the study in 1993 (Sedlak, McPherson, & Das, 2010). Since the publication of the NIS-4, several additional studies have also shown a relationship between poverty and maltreatment among African American families, and have found that when controlling for the effects of poverty, race is not a significant factor in observed racial differences (e.g., Drake et al., 2011; Laskey et al., 2012; Putnam-Hornstein, Needell, King, & Johnson-Motoyama, 2013).

Yet while findings from the NIS-4 and subsequent studies have supported the likelihood of differential need contributing to disproportionality and disparities, they do not completely explain away the possibility of racial bias playing a role in their existence. A recently emerging body of research has begun to examine various child welfare decision points, while controlling for family income as well as risk of maltreatment, in attempts to isolate the effects of race and its contribution to observed disparities. These studies have found that even after controlling for both poverty and risk, race remains a significant predictor of disparities at various decision-making points (Dettlaff et al., 2011; Rivaux et al., 2008). For example, Rivaux et al. examined the decision to remove a child from home in lieu of providing in-home services, controlling for poverty and risk, and found that African American children were 77% more likely to be removed and placed into foster care in lieu of receiving services in their home compared to White children.

Thus, the most recent research indicates that despite new research findings on racial differences in maltreatment and the role of poverty, racial disproportionality and disparities are complex phenomena that are likely caused by multiple factors that each warrant attention and consideration by child welfare systems. This is confirmed in the extensive review and analysis of the body of research on racial disproportionality and disparities in child welfare, conducted by the Center for the Study of Social Policy in 2011, which found four explanatory factors contributing to disproportionality and disparities based on the most current available evidence: 1) disproportionate need resulting from differential risk due to the disproportionate number of children and families of color living in poverty; 2) racial bias and discrimination, which may be present at the individual level among child welfare staff and community reporters, as well as institutional racism which may be inherent in the policies and practices of child welfare agencies; 3) child welfare system factors, including a lack of resources to adequately address the needs of children and families of color, and 4) geographical context, including neighborhood effects such as concentrated poverty on maltreatment rates, and other community contextual factors that may contribute to differential rates of maltreatment or placement outcomes (Fluke, Harden, Jenkins, & Ruehrdanz, 2011).

Efforts to address disproportionality and disparities need to address the complexity of factors that contribute to their existence, including racial bias, poverty, and disproportionate need.

Conclusion

While it can be debated which factors contribute most to racial disproportionality and disparities, a more holistic approach is to acknowledge the relative contribution of each and to support the continued exploration and understanding of these phenomena. Efforts to address disproportionality and disparities need to address the complexity of factors that contribute to their existence, including racial bias, poverty, and disproportionate need. In doing so, child welfare systems need to work collaboratively with communities affected by disproportionality and disparities to ensure that these efforts are culturally responsive. These community collaborations are necessary to facilitate broader systems changes that improve outcomes for children of color, their families, and communities.

Alan J. Dettlaff, PhD, is Associate Professor at the University of Illinois at Chicago, Jane Addams College of Social Work. He can be reached at aland@uic.edu.

A Conceptual Framework for African American Disproportionality and Disparity in Child Welfare

Reiko Boyd, MSW

This article aims to provide a brief overview of a recently proposed comprehensive conceptual framework for understanding and addressing African American disproportionality and disparities in child welfare (Boyd, 2014). The framework builds upon existing conceptual frameworks by bridging gaps between the frameworks and incorporating relevant explanatory factors that appear throughout the literature (Barth, 2005; Fluke, Harden, Jenkins, & Ruehrdanz, 2011).

This conceptual framework of African American disproportionality and disparity in the child welfare system organizes explanatory factors into five major pathways:
(a) Disproportionate Need;
(b) Human Decision-Making;
(c) Agency-System Factors;
(d) Placement Dynamics; and
(e) Policy Impact (Fig. 1).

Disproportionate Need

The disproportionate need pathway attributes disproportionality and disparities to the increased exposure of African American children to risk factors associated with child maltreatment, a higher incidence of maltreatment for them as compared to children from other backgrounds, and a resulting disproportionate need for child welfare services. This framework organizes need-based explanations into three distinct yet overlapping categories of contributing factors:
(1) poverty;
(2) parent, child, and family characteristics; and
(3) community dynamics.

Poverty is presumed to deleteriously affect African American families and result in higher exposure to risk factors associated with maltreatment, higher rates of abuse and neglect, and the increased need for child welfare services. This line of reasoning is based on conjointly considering the relationships between poverty and child maltreatment, the low socioeconomic status (SES) of most families involved in the child welfare system, and the overrepresentation of African American families among the poor (Drake, Lee, & Jonson-Reid, 2009; Drake & Jonson-Reid, 2011; Iceland, 2012; Lindsey, 2004; Paxson & Waldfogel, 2003; Sedlak, Mettenburg, et al., 2010).

Increasingly, the field is recognizing the critical distinction between poverty as an individual/family level phenomenon and structural poverty, which occurs at the neighborhood or community level. Accordingly, this conceptual framework distinguishes between each as influential factors within the disproportionate need pathway.

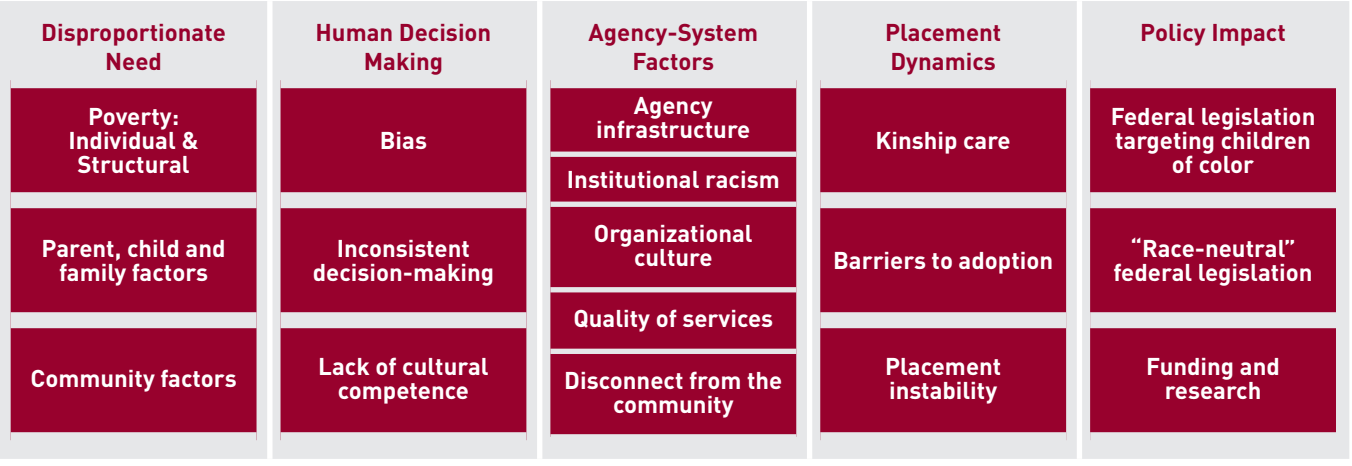
Parent, child, and family factors can be understood as conditions, actions, or attributes that may contribute to parents' increased likelihood of maltreating children under their care. Parent, child, and family factors are often associated with socioeconomic status but can affect families regardless of income. These factors are known to be related to maltreatment and include substance abuse, mental illness, parental incarceration, domestic violence, homelessness, and unemployment (Bartholet, 2009; Sedlak, Mettenburg, et al., 2010; for reviews see Hines, Lemon, Wyatt, & Merdinger, 2004; Fluke et al., 2011).

The final category within the disproportionate need pathway consists of community factors that are presumed to contribute to the number of African American children in the child welfare system. In this sense, attributes of communities, both economic and social, are thought to have adverse affects on African American families, and the elevated numbers of African Americans in the system are deemed to be a function of disproportional and disparate exposure to community-level risk factors for child maltreatment. For example, the lack of a wide range of community resources and service centers may hamper family functioning by increasing the family's hardship in meeting vital needs. Limited access to mental health services, substance abuse treatment programs, and affordable housing within the community may affect disproportionality by producing high levels of unmet need in areas where such services are scarce or unavailable (Dettlaff & Rycraft, 2008; Hines et al., 2004).

Human Decision-Making

This pathway emphasizes the role of decision-making in creating and sustaining disproportionality and disparities. In this view, the decisions made by community members, mandated reporters, and professionals involved in various stages of the child welfare system are influenced by the race/ethnicity of the parent or child. Previous frameworks emphasize racial bias of individuals as a main explanatory factor that contributes to disproportionality and disparity; however, this framework contends

Figure 1.
Conceptual Framework of African American Disproportionality and Disparity in the Child Welfare System



that bias is more accurately viewed as one aspect of decision-making that may contribute to such patterns. Notably, other aspects of human decision-making in child welfare, such as inconsistencies and lack of cultural competence, can also affect system involvement and outcomes for African American children and families. These factors are distinct from bias and should be considered in their own right because they have unique implications for efforts to address disproportionality and disparities.

Agency-System Factors

According to this pathway, characteristics of the child welfare agency and bureaucratic processes create and sustain the disproportional representation of African American children in the system. Drivers of disproportionality and disparities include agency infrastructure, institutional racism, organizational culture, limited availability of services, and the child welfare agency's disengagement from the community served (Lemon, D'Andrade, & Austin, 2005). These agency-level aspects can affect both the quality and quantity of service delivery, subsequently shaping case outcomes for African American children and families.

Placement Dynamics

The placement dynamics pathway attributes disproportionality and disparities to placement-specific contexts that impact a large proportion of African American children in out-of-home care. Placement is an important area of consideration, given that it can exert a considerable influence on a child's length of time in care, quality of experience while in foster care, and likelihood and manner of exit from the child welfare system. This pathway emphasizes dynamics inherent to kinship care, barriers to adoption, and placement instability as explanatory factors for disproportionality and disparities for African American youth in foster care.

Policy Impact

The policy impact pathway explains disproportionality in terms of the influence that pertinent policy initiatives, and lack thereof, have on significantly influencing the involvement of African American children in the child welfare system. Within this pathway, a lack of measures targeting the needs of children of color and "race-neutral" policies that differentially affect African American families are considered to contribute to the increased involvement of African American children in the child welfare system.

In addition, this pathway emphasizes that disproportionality and disparity continue to abound due to the absence of policy ensuring

funding to address these issues. Namely, deficient funding for state and county efforts to implement interventions and for technical support may curtail progress on disproportionality by hindering agencies' ability to monitor and collect data according to race/ethnicity (Hill, 2008; United States Government Accountability Office, 2007).

Overall, this framework highlights the likelihood that each pathway accounts for disproportionality and disparities to some extent and demonstrates that it is unlikely that any one intervention can fully address disproportionality. Instead, effective approaches may need to be as robust as the forces that contribute to current levels of disproportionality and disparities in the child welfare system.

The framework summarized in this article demonstrates that comprehensive approaches to understanding and explaining disparate outcomes in the child welfare context can guard against conceptualizations that are too narrow, which can lead to insufficient, overly simplistic interventions in the field.

Conclusion

The framework summarized in this article demonstrates that comprehensive approaches to understanding and explaining disparate outcomes in the child welfare context can guard against conceptualizations that are too narrow, which can lead to insufficient, overly simplistic interventions in the field. Such an approach can also guard against inaction related to the false conclusion that disparities in the child welfare system are immutable and that all causes—and solutions—fall beyond the system's purview.

Reiko Boyd, MSW, is a doctoral candidate at University of California, Berkeley. Reiko can be reached at reikoboyd@berkeley.edu.

Understanding Tribal Sovereignty in Child Welfare In Supporting Culturally Responsive Practices

Gina Jackson, MSW (Western Shoshone)

In working with Native American children and families in child welfare it is critical to have a solid understanding of tribal sovereignty in order to be effective and to support culturally appropriate practices. Tribes understand the needs of their children and families best. By exercising their sovereignty in child welfare, more tribes are developing best practices to meet the needs in their own communities.

Post-colonial theory gives insights into the struggles of colonized peoples to recover from the effects of colonization (Tamburro, 2014). As social workers grounded in theory and best practices, utilizing post-colonial theory can be helpful in understanding and supporting tribal sovereignty in child welfare while also bringing an awareness of the impact and effects of colonization that tribal people have experienced. The result is the development of less oppressive ways of child welfare practice. Seeking the perspectives of Indigenous, non-Western people and their worldviews can help transform the field of social work by co-creating more effective services.

What is Tribal Sovereignty and Why is it Important in Child Welfare?

Sovereignty is the right, responsibility, and authority to self-govern. Tribes have inherent sovereignty. This sovereignty was acknowledged upon European contact and in the United States Constitution, and has been used as a basis for government-to-government relationships and treaties. Tribal sovereignty has been limited over time by special treaties and laws by judgment of Congress and the Supreme Court (Cohen, 1944). As nations within nations, tribes have a unique political status that gives tribal members rights as citizens of the country, the states, and the tribes. The key to understanding this is that due to tribal sovereignty, tribal membership is a political status; it is not based on race. There is also a federal trust responsibility that is based on treaties for land cessation to protect tribal sovereignty and rights of self-governance and provide basic social, medical, and educational services for tribal members.

> *"At the heart of sovereignty is taking care of our children." J. Wesaw, Family Welfare Commissioner, Pokagon Band of Potawatomi Indians*

Understanding tribal sovereignty allows individuals to see tribal leaders in the same way they would the leader of any other country. Such an understanding encourages respect and support for tribal leaders and tribes' vision for their children and their nations, while providing a greater appreciation for tribes' efforts to care for their own children.

Eastern Band of Cherokee Indians

The Eastern Band of Cherokee Indians is taking the responsibility of child protection of their Tribe's children from the county and

Many tribes are exercising their sovereignty and turning inward to design their child welfare systems based on their own values, needs, and culture. . . In many cases there have been lessons learned from tragedy, and tribes have resolved to do things in a more culturally appropriate way.

Self-governance and Tribal Child Welfare Innovation Through Collaboration

Many tribes are exercising their sovereignty and turning inward to design their child welfare systems based on their own values, needs, and culture. They are no longer looking to model their systems after the states. In many cases there have been lessons learned from tragedy, and tribes have resolved to do things in a more culturally appropriate way. What follows are two examples of tribes leading the way in child welfare innovation.

building and designing a system that reflects their own needs and values. They have an approach that one organization, agency, or program cannot make a significant impact on a large community without the partnership and accountability of many other agencies. They are building an integrated child welfare system in which multiple, co-located agencies serve the same population with specialized services in a team approach, sharing data and a structure for accountability and monitoring. Families experience one team and one restorative approach to services with a focus

The Indian Child Welfare Act

In the Indian Child Welfare Act (ICWA) of 1978, Congress declared, *"it is the policy of this Nation to protect the best interests of Indian children and to promote the stability and security of Indian tribes and families by the establishment of minimum Federal standards for the removal of Indian children from their families and the placement of such children in foster or adoptive homes which will reflect the unique values of Indian culture, and by providing for assistance to Indian tribes in the operation of child and family service programs"* (Pub. L. 95-608, § 3, Nov. 8, 1978, 92 Stat. 3069).

Passage of the ICWA was an intervention based on congressional findings of abusive child welfare practices leading to the extreme disproportionate removal of Native American children by state child welfare agencies and placing and adopting children into non-tribal families. The child welfare field at the time was full of people with good intentions who were doing the best they could with the current understanding of that era. Over the past few decades, research has shown that there is an adverse effect and multigenerational trauma resulting from colonization and assimilation policies, including the history of forced child removal through Indian Boarding Schools; deemed historical trauma, this adverse effect can have lasting impacts on children and families today (Brave Heart, 1998).

"It is amazing that we have survived. We have such resilience and strength in our families and culture." Sandy White Hawk, Sicangu Lakota (Rosebud Sioux Tribe), a commissioner on the Maine Wabanaki-State Child Welfare Truth & Reconciliation Commission

The vision that Congress put into federal law 35 years ago to transform child welfare for Native American children is a vision that has not been fully realized. The data shows that while there have been vast improvements overall, there is clearly disproportionality for Native American children in foster care today (see Dettlaff in this issue).

on achieving a healthy family system. Courts are supported in making informed decisions that impact Tribal children and families.

Salt River Pima-Maricopa Indian Community

Salt River Pima-Maricopa Indian Community Family Advocacy Center provides a secure and healing environment for the investigation of cases involving child abuse and neglect by utilizing a collaborative, multi-disciplinary team to reduce further harm to children and other vulnerable victims, while honoring the cultural values and traditions of the Salt River Pima-Maricopa Indian Community. Through meaningful collaboration, the Tribe worked to close system gaps, bringing a higher level of safety to the community's most vulnerable members—its children. The child welfare agency and Tribal police now conduct Child Protective Services investigations together and engage in collaborative decision-making through their multi-disciplinary team on all child protection cases. They focused on working together by co-locating their agencies, building strong relationships and trust, and cross training. They made a commitment to hiring competent staff, requiring collaboration, and refusing to accept barriers. They have hosted other tribes and provided peer-to-peer support.

Tribal-State-Federal Collaboration

Many tribes and states are working together to problem-solve and strategize around Indian child welfare to strengthen tribal capacity and to strengthen state court ICWA compliance. Michigan is a newly formed example. They have revived their Tribal-State-Federal Judicial Forum to improve working relationships and communication around child welfare issues. One priority is to ensure court systems are meeting the needs of Native children and families in a culturally appropriate way. Michigan Supreme Court Justice Michael Cavanagh and Pokagon Band of Potawatomi Tribal Court Chief Judge Michael Petoskey have championed the focus on tribal children and families in the forum. The Michigan Court Improvement Project has been a valuable resource in the collaborative work, which includes the recent passage of the Michigan Indian Family Preservation Act (2013), development of the ICWA Court Resource Guide (2012), and sharing of examples of child welfare best practices and innovation. (See Fort in this issue for a description of the court monitoring program.)

"The measure of our success will be reflected in strong relationships, linking our peoples, learning from the lessons of the past and leading our children to a better future." Justice Cavanagh

Gina Jackson, MSW, works to improve outcomes for abused and neglected children and their families through implementing and sustaining systems change and best practices in state and tribal courts and child welfare agencies, while being mindful of cultural differences and equity as a standard. She can be reached at ginajackson1969@netscape.net.

Cultural Competence: Is it Still Important? How Culturally Competent Social Workers Could Transform Child Welfare

Anna R. McPhatter, PhD, LCSW, & Dana Burdnell Wilson, MSW, LCSW

As child welfare professionals approach cultural competence as a challenge and a goal, the approach must be rooted in the value that the services provided to children and families must be acceptable to their culture and support the integrity and strength of their culture (McPhatter, 1997). This is a tenet that has been largely accepted in the professional community. The Council on Social Work Education (CSWE) Accreditation Standards requires schools of social work to provide students with curricula that prepares them to serve a diverse population and encourages global learning and understanding for culturally competent social workers (CSWE, 2008). The National Association of Social Workers (NASW) Code of Ethics requires that social workers understand the importance and function of culture on members of society; that they be informed about the culture of the people they serve and demonstrate sensitivity and respect for cultural differences; and that they understand the nature of oppression with respect to race, ethnicity, gender, sexual orientation, age, religion and disability, among others (NASW, 2008). Yet, there is a gap between these respectable intentions and the reality of the rather slow progress in the cultural competence arena.

As Dr. Alan Dettlaff discussed earlier in this publication, the disproportionate number of children and youth of color in the child welfare system has been a challenge that social work professionals have pondered for nearly three decades. It is clearly essential that child welfare professionals have the knowledge and skill to approach dire situations with individuals and families of diverse backgrounds, without resorting to an avoidance of the acknowledgement of cultural differences. The Multiethnic Placement Act (MEPA) of 1994, amended in 1996 with the inter-ethnic provisions, prohibits the consideration of race in placement decisions; however, race, culture, ethnicity, and language of origin are still significant considerations in child welfare services (Banigo & Wilson, 2013). For example, it is commonplace for African American parents to teach their sons how to behave when approached by police officers due to the frequency with which these interactions lead to tragic outcomes, but foster parents from different cultural backgrounds than their African American foster children may not be as attuned to this type of practice and may not realize the importance of addressing it. The goal of non-discrimination does not preclude the acknowledgement and importance of cultural differences, and child welfare workers and organizations will be enhanced by actively pursuing more education about respecting cultural differences.

McPhatter (1997) proposed a Cultural Competence Attainment Model that includes the following components:

- Enlightened Consciousness—Restructuring one's world view to include acceptance of other cultures and beliefs to be as valuable and acceptable as one's own.
- Grounded Knowledge Base— Adapting formal education to reject the Eurocentric bias that is the foundation of our learned history, mythology, values, and science, toward incorporating a comprehensive range of information from diverse communities, disciplines, religions, social institutions, family structures and communities; includes analysis of theoretical constructs with an emphasis on strength-based and resilience concepts.
- Cumulative Skill Proficiency—Engaging in a skill development process that builds proficiency through focused reflection and evaluation in addition to knowledge; ability to intervene at the individual, family, organizational, community, and policy levels to achieve not only needed resources and services, but social justice and system change.

This model continues to be relevant as we approach today's cultural competence challenges. Social work attracts practitioners who most often have altruistic intentions, selfless spirits, and the motivation to make a difference. Good intentions, however, must not stand in the way of an honest self-appraisal and the willingness to embark on a sustained journey of continued development toward cultural competence. The increasingly diverse children, families, groups, and communities we serve deserve nothing less.

Cultural competence may be viewed from a client-centered or an organizational perspective. McPhatter (1997) stated: "Achieving cultural competence is a dynamic protracted and developmental change process that requires genuine commitment on the part of chief executive staff, mid-level managers, direct service workers and support staff … the organization is actively pursuing identifiable and measurable outcomes …" The goals for a culturally competent organization include a diverse workforce, a well-developed strategic plan for achieving cultural competence, partnership with diverse communities, a structure for facilitating professional cultural competence goal attainment, cultural competence performance goals in employee evaluations, and provision of knowledge and training toward a continuous journey that enhances the organization (McPhatter, 1997).

Cultural competence undoubtedly remains an important aspect of child welfare competence. There is no aspect of child welfare that would not have the relevance and effectiveness of the service enhanced with a greater level of cultural competence: decision-making at the time of conducting a family assessment, planning to engage family preservation and support services rather than separating a child from his or her parent, deciding whether to place a child transracially in a foster or adoptive home, planning for independence with an older youth, family group decision-making, engaging a community group to address a neighborhood need, participating in neighborhood organization activities, fund-raising, public relations, program development, legislative and policy development, advocacy, and executive leadership. Although not an exhaustive list, it is illustrative of the breadth of significance that cultural competence has in child welfare.

One social worker that is self-aware, applying critical thinking skills, and continually progressing toward cultural competence could make a positive impact on the child welfare system. An entire workforce of direct service workers, managers, directors, executives, community organizers, social work educators, researchers, policy makers, legislative analysts, and the myriad of social work professionals engaging in this journey would be able to transform the child welfare system and, indeed, make a difference toward achieving social justice.

Anna R. McPhatter, PhD, LCSW, is Dean of the Morgan State University School of Social Work. Dr. McPhatter may be reached at Anna.McPhatter@Morgan.edu.

Dana Burdnell Wilson, PhD Candidate, MSW, LCSW, is Director of Student Affairs and Admissions at the Morgan State University School of Social Work. Ms. Wilson may be reached Dana.Wilson@Morgan.edu.

Evidence-Based Practice: Implications for Communities of Color and Child Welfare

Jennifer Rountree, PhD, & Caitlin Donald, MSW

Public and private funding agencies are increasingly requiring the use of evidence-based interventions. There are benefits to using these interventions such as the ability to compare outcomes across populations. However, the movement toward requiring the use of evidence-based interventions has unintended negative consequences. The first is that what is determined to be evidence-based at present is not inclusive of all types of evidence. The second is that most interventions that have been deemed evidence-based have not been tested in ways that are inclusive of all populations, as most evidence-based interventions have been developed and evaluated with majority populations (Cross et al., 2011; Friesen et al., 2010).

The promotion of evidence-based practices (EBPs) can also be disadvantageous, particularly to communities of color. The process of deeming evidence "good" or "best" is conducted through a Western paradigm that leaves many communities absent from, or underrepresented within, the literature (Cross et al., 2011; Sahota & Kastelic, 2012; Sue & Zane, 2006). This creates a hierarchy of evidence in which different research methods are ranked according to the perceived rigor of the research design. The assumption is that not all evidence is created equal, which can disregard certain types of evidence or ways of knowing within communities (Mantzoukas, 2008; Tribal Evaluation Workgroup, 2013). EBP has been most often linked to randomized controlled trials, which fall within a positivistic Western paradigm, functioning under the notion of objectivity and prioritizing the control of contextual variables in order to expose objective facts. Although there is no universal hierarchy of evidence, randomized controlled trials are most often considered to be the most rigorous of all types of evidence within the hierarchy. However, randomized controlled trials overlook many types of knowledge that can inform and positively impact communities (Cross et al., 2011; Mantzoukas, 2008). In light of the structural challenges that often negatively impact the health of communities of color, EBP may even "exacerbate and deepen existing inequities if they are implemented without sufficient attention to factors that may differ between specific communities" (Martinez, Callejas, & Hernandez, 2010).

The imposition of EBP to the exclusion of culturally based, culturally informed, and/or culturally responsive practices flies in the face of widely held beliefs about the importance of cultural competency in health and human services fields. In the broader context, this movement leads directly to the elimination of culturally based programs, which funders may no longer support and service agencies may no longer be able to afford to provide. Yet some of these culturally based programs have been in existence for decades and—through trial and error, replication, and adaptation—have, over time, shown sufficient evidence of effectiveness to be deemed "best practices." The Western notion of linear cause and effect often ignores the lived experiences of many underrepresented communities, including American Indian/Alaska Native (AI/AN) communities. Holding the methodologies rooted in a Western paradigm in higher esteem ultimately impacts support for culturally based interventions, exacerbating the disparities faced by AI/AN communities in the United States (Echo-Hawk, 2011; Gowen, Bandurraga, Jivanjee, Cross, & Friesen, 2012; Gray, Coates, Yellow Bird, & Hetherington, 2013; Hughes, Seidman, & Williams, 1993; Lucero, 2011; Tribal Evaluation Workgroup, 2013).

The imposition of EBP to the exclusion of culturally based, culturally informed, and/or culturally responsive practices flies in the face of widely held beliefs about the importance of cultural competency in health and human services fields.

In order to positively impact underrepresented communities, evidence of effectiveness must begin to account for factors such as cultural context, program maturity, sustainability, and maximizing the return on investment for all stakeholders involved in the research process (Gray et al., 2013; Lucero, 2011; Tribal Evaluation Workgroup, 2013). In 2011, the Children's Bureau sought to find a way to account for the factors overlooked in the approaches to research and evaluation seen as more legitimate by Western researchers (Tribal Evaluation Workgroup, 2013). Due to a lack of evidence of effectiveness within child welfare, the Children's Bureau recognized the need to build evidence and incorporate research into existing child welfare practice. Among other outcomes, they developed a framework for evaluation of existing child welfare interventions that incorporated an identification of several values to help stakeholders develop the evaluation process, including interpreting findings in a way that incorporates cultural and contextual factors; addresses community-specific histories, belief systems, protocols, and program needs; and engages community members in a community-based participatory process in the development, administration, interpretation, and dissemination of evaluation results (Tribal Evaluation Workgroup, 2013). Through the flexibility of this framework, space is created to understand the effectiveness of interventions that bridge scientific rigor and the complexity of human experiences.

Practice-based evidence may be defined as knowledge derived from systematic observation of community, culturally based practices, and the outcomes they produce. PBE draws "upon cultural knowledge and traditions for treatments and are respectfully responsive to the local definitions of wellness and dysfunction" (Isaacs, Huang, Hernandez, & Echo-Hawk, 2005, p. 16). PBE argues that interventions are only as effective as the extent to which they reflect the needs, values, and cultural context of the communities for whom they are developed. NICWA's PBE project, in partnership with the Native American Youth and Family Center (NAYA) and Portland State University, in Portland, Oregon, began more than 10 years ago with the development of an assessment tool that uses culturally-defined indicators of success to evaluate the effectiveness of social services for Native youth—in ways that are meaningful to the AI/AN community within NAYA (see Gowen et al., 2012; Cross et al., 2011; and Friesen et al., 2010, for more on this project).

Jennifer Rountree, PhD, is Research Manager at the National Indian Child Welfare Association. She can be reached at jen@nicwa.org.

Caitlin Donald, MSW, is a Research Associate at the National Indian Child Welfare Association. She can be reached at caitlin.donald@gmail.com.

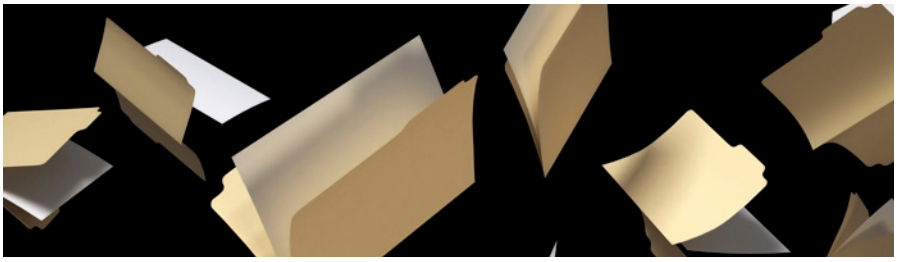
Culturally Responsive Data Collection With Children and Families

Erin Geary, MSW

Indicators, outcomes, assessments, screenings, and those dreaded time studies. Child welfare data can be a complicated maze to navigate, sometimes without a clear goal, for programs, service providers, and families. This has been especially true for communities of color who often cite experiences in which either too much data were collected or not nearly enough. What we know and how we improve as a field is fundamentally linked to the amount and quality of information we have. Thanks to important legislation, funding, and the hard work of local programs, we now know more about how to provide services that cost less, work better, and serve our profession's goal of promoting the safety, permanency, and well-being of children. Despite these important gains, child welfare systems still serve disproportionately higher numbers of families of color and know less about how to meet the varied and complex needs of these families.

What we collect, how we collect it, and what we do with data matters. Examining these fundamental processes can help the field move toward a vision in which communities of color are actively engaged in efforts to collect high quality, meaningful data that improve local programs, promote understanding of the unique needs and strengths of these communities, and ultimately help improve the lives of children and families.

In order to impact children and families in meaningful, positive ways, public and tribal child welfare systems must understand the needs and strengths of the families they serve. This means that child welfare workers are increasingly called upon to ensure that a thorough screening and assessment process takes place. Child welfare agencies can ensure that this process serves the needs of communities of color by asking a few questions.



Programs are, at times, in the position of needing to choose the most useful measure knowing that it has not been adequately tested within communities of color. Engaging community stakeholders in a conversation about measurement tools can help ensure programs are asking the right questions in the right way. Some potential questions to ask of community partners include: Are there questions or language used that might trigger negative responses within certain communities? Which measures or questions might not be relevant in particular settings? Could cultural beliefs or practices be misinterpreted as problematic through the measure? Are cultural strengths captured in the measure? These and other questions can ensure that communities of color are actively engaged in determining what data are collected. It can also help service providers ensure that children and families are not improperly diagnosed or assessed because of racial, ethnic, or cultural factors.

> Clear, open communication about data collection is critical to ensuring that families of color do not feel powerless during this challenging time.

Have data collection measures been used and validated with communities of color?

As an organization looking to assess children and families, it can be helpful to ensure that instruments have been used within communities of color and that those tools yield relevant results across diverse clients.

Are staff members trained to appropriately communicate with families about the data collection and respond to the new information?

Ensuring that staff members are properly trained to administer data collection is important but often not enough. Clear, open communication about data collection is critical to ensuring that families of color do not feel powerless during this challenging time. Programs can make sure that staff are adequately trained to provide families with rationale for collecting data, actively engage families in interpretation of any assessment results, and seek out input on ways to respond to any needs identified. Data are useful when the information can improve services. This means that programs need to be prepared with appropriate resources and referral sources to actively respond to the new information.

Does data collection help identify both needs and strengths?

Although the terms are often used interchangeably, screening and assessment are two different processes. Screenings are tools for determining if a particular problem exists. Positive screenings may lead to a thorough assessment. It is within this assessment that child welfare agencies have the opportunity to highlight a family's or individual's strengths as well as their needs. For families in general, and especially for families of color, assessments can be an intimidating and potentially shame-filled process. Agencies can benefit from utilizing instruments that highlight strengths that can be actively built on during case planning.

Does the data collection provide new and needed information?

Many communities of color have felt over-analyzed with little improvement to show for it. This means that if a decision is made to collect new information from a family it should come after careful consideration. Asking "Do we have this information somewhere else (through an agreement with a partner agency or in a response on another form, for example)?" and "How will we use this information?" is a useful check to ensure that data collection does not unnecessarily take valuable time or feel invasive.

Child welfare agencies have the opportunity to collect data that can improve services to better meet needs and build on strengths of families of color, effectively make the case for increased funding, and strengthen program processes and relevance. This can happen through engagement of communities of color, proper training in data collection, and following up with needed services for families.

Erin Geary, MSW, is Research Associate at James Bell Associates. Mr. Geary can be reached at geary@jbassoc.com.

Historical and Multigenerational Trauma and Child Welfare

Heidi Ombisa Skallet, MSW, LISW

Before continuing on to the Practice section of this publication, there is one final concept to highlight—the impact of mass traumas inflicted on people of color across generations, which continue to affect individuals, families, and communities of color today. In the process of providing child protective and other services to families from communities with collective memories of mass traumatic events, practitioners should be aware that a family's response might be influenced by that collective memory. This article provides a brief overview of terminology and concepts associated with mass generational trauma, as well as resources for practitioners working with families whose communities have experienced mass generational trauma.

Historical and Intergenerational Trauma

Historical trauma has been defined as "cumulative emotional and psychological wounding across generations, including the lifespan, which emanates from massive group trauma" (Brave Heart, Chase, Elkins, & Altschul, 2011), or put plainly, "multigenerational trauma experienced by a specific cultural group" (Policy Research Associates, Inc., n.d.). A main source of mass historical trauma for the American Indian community were federal policies and actions that focused on removal and assimilation—often espoused by government leaders as a benefit to American Indian communities. Forced relocation of tribes not only resulted in loss of land, livelihoods, and land-based spiritual connections, but also the deaths of millions of American Indian people (The Library of Congress, 2014; Duran, Duran, & Brave Heart, 1998). For nearly 100 years, the federal government operated boarding schools for American Indian children as a method of assimilation: American Indian families were required to send their children to these schools, where they were barred from speaking indigenous languages, wearing indigenous clothing, and engaging in indigenous spiritual and cultural practices (Tyack, 1999, pp. 76-77; Native American Public Telecommunications, 2006). Brave Heart (1998) considers mass unresolved grief over generations to be the primary cause of psychosocial and health problems, particularly somatization, depression, substance abuse, and suicide, that have persisted among the Lakota for generations (see also Evans-Campbell, 2008).

Cultural Trauma and Post Traumatic Slave Syndrome

In 2004, Alexander and his colleagues defined *cultural trauma* as a response by "members of a collectivity [who] feel they have been subjected to a horrendous event that leaves indelible marks upon their group consciousness, marking their memories forever and changing their future identity in fundamental and irrevocable ways" (Alexander, 2004, p. 1). Eyerman (2001) applies the concept of cultural trauma to African American communities, with the collective trauma experienced by the collective group being slavery. In 2005, DeGruy introduced the term post traumatic slave syndrome (PTSS) to describe "a condition that exists when a population has experienced multigenerational trauma resulting from centuries of slavery and continues to experience oppression and institutionalized racism today [including] a belief (real or imagined) that the benefits of the society in which they live are not accessible to them" (DeGruy Leary, 2005, p. 125). In addition to slavery, other federal and state policies and actions have contributed to multigenerational trauma, including forced labor, medical experimentation, and Jim Crow laws (DeGruy Leary, 2005; Eyerman, 2001; Blackmon, 2009). Such multigenerational trauma has impacted African American families, particularly concerning family and relationship dynamics and development of self (DeGruy Leary, 2005).

Practice Resources

The concepts of historical trauma, cultural trauma, and post traumatic slave syndrome were developed and researched in order to more fully understand and recognize the impact of mass traumatic events on individuals, families, and communities of color, particularly concerning parenting skills and practices and views and interactions with government systems (Gump, 2010; DeGruy Leary, 2005). As a result, ways to promote reconciliation among communities of color can then be developed (Brave Heart, 2000; DeGruy Leary, 2005).

There are a number of resources that provide specific practice recommendations for those working with American Indian and African American communities highlighted below. Full references can be found in the integrated bibliography at the back of this publication.

Brave Heart (2000): Dr. Maria Yellow Horse Brave Heart conducted a qualitative study on Lakota unresolved trauma. This article provides key recommendations for social workers working with Lakota children and families based on this study.

DeGruy Leary (2005): While Dr. Joy DeGruy Leary's book on PTSS as a whole is an important resource for understanding multigenerational trauma among African American families, the last chapter focuses specifically on healing considerations, strategies, and recommendations. DeGruy Leary's website, http://joydegruy.com/, also includes more information on PTSS.

Takini Network (n.d.): Dr. Maria Yellow Horse Brave Heart's website, www.historicaltrauma.com, provides an overview of the concept of historical trauma, including causes and outcomes, as well as references and interventions for healing.

Weaver & Brave Heart (2008): Drs. Hilary Weaver and Brave Heart review two studies and develop practice implications for working with children and youth on cultural identity and historical unresolved grief.

Stamm, Stamm, Hudnall, & Higson-Smith (2003): "Considering a theory of cultural trauma and loss," available from www.centerfortraditionalmedicine.org, provides a model of cultural trauma and revitalization, as well as potential interventions at the individual, small group, community, and societal levels.

Jones (2014): This YouTube video features Sam Simmons, LADC, who talks about African American historical and intergenerational trauma and ways to address trauma in the community.

Schindler (2013): This five-part YouTube video series, Stories of Healing the Soul Wound, was developed as part of the healing process in the Navajo Nation and includes personal testimonies, memories, and reflections.

Heidi Ombisa Skallet, MSW, LISW, is Outreach Coordinator at Center for Advanced Studies in Child Welfare. She can be reached at skal0044@umn.edu.

Tribal Child Welfare Financing: A Critical Component of Culturally Responsive Practice

Anita Fineday, JD, MPA, & Tanya Dumas, JD

At first blush, tribal child welfare financing may seem unrelated to culturally responsive practice. But when considering how governments commonly use funding streams, tax incentives, and other finance-related policies to influence behavior, the methods by which a child welfare system is funded become very important to maintaining tribal sovereignty and tradition.

One of the primary sources for child welfare funding across the country is the Social Security Act, which authorizes states to receive federal funds to run child welfare systems, including child protection services and foster care. Contained within the Act are Title IV-B and Title IV-E, both of which are dedicated sources of child welfare funding (DeVooght & Cooper, 2012).

Before 2009, tribes running their own child welfare systems would rely on funding from the Bureau of Indian Affairs (BIA), grants, or self-funded tribal enterprise. Only with the recent implementation of the Fostering Connections Act (PL 110-351) have tribes had the option to receive federal IV-E funds directly or through a "pass-through" agreement with a state. So far, the U.S. Department of Health and Human Services (HHS) has approved four tribes and one tribal consortium for direct IV-E funding, and approximately 100 tribes have pass-through agreements with states. This funding has enabled tribes to pay for the costs of their children placed into care and pay for staff training and administrative costs.

Blazing a trail in the area of tribal child welfare financing is the Port Gamble S'Klallam Tribe. Located on Washington state's Kitsap Peninsula in the Puget Sound region, with about 1,300 enrolled members, Port Gamble has been running its own child welfare system since the mid-1980s. In the past, Port Gamble children in need of foster care were usually placed in state-licensed homes, outside the tribal community.

In 1998, the tribe began to receive direct TANF (Temporary Assistance for Needy Families) funds. TANF is an important resource, as its flexibility allows for financial benefits in a variety of situations, including those aimed at reducing child maltreatment. Obtaining TANF had two important impacts on Port Gamble's culturally relevant practice. First, the tribe was able to coordinate payments and services through its Indian Child Welfare office, which improved efficiency and helped families receive support more quickly. Second, a few years after taking over TANF administration, Port Gamble's tribal court created a policy around the definition of family. The court's culturally-aligned definition resulted in the tribe being able to make larger TANF payments to children and sibling groups placed in care which, in turn, improved the possibility of placing more children with tribal members and relatives (Smith, 2014). Both of these effects have increased the tribal community's capacity to care for its children and families.

With greater flexibility in the use of Title IV-E funds, the tribe will be able to address the specialized needs of the tribal community as well as contribute to national knowledge about effective service interventions for Native American youth and families.

However, federal TANF limitations and caseload increases necessitated further action. In 2002, the tribe expanded operations into a Title IV-D (child support) program. IV-D programs may seek reimbursement from parents for out-of-home placement costs and can assist with determinations regarding paternity, which can aid in searching for family members. The ideal situation is for tribes to operate IV-D, IV-E, and TANF so that the maximum collaboration and integration can occur. By administering its own child support, the tribe is able to honor and incorporate S'Klallam traditions of collaborative problem solving.

The tribe continued to work toward a fully independent tribal child welfare system by developing its own licensing standards based on S'Klallam values and creating a tribal council-approved child welfare practice manual that reflected S'Klallam traditions. In 2008, the tribe began drafting its IV-E application. Throughout the approval process, the tribe ensured that the wording of the IV-E plan was culturally appropriate (Smith, 2014).

In 2012, Port Gamble reached an agreement with HHS and became the first tribal nation to directly operate its own Title IV-E program. The funds have enabled the tribe to build upon their existing programs by adding staff time and increasing tribal capacity to care for children without separating them from their families, tribe, and culture.

Now, 100% of Port Gamble children who are in the child welfare system are served by the tribe's programs. This has resulted in greater stability for children and an ongoing connection to their parents and cultural roots (Lemay, 2012) .

In 2014, Port Gamble submitted the first tribal application for a waiver from IV-E requirements. While the tribe's current funding supports its comprehensive child welfare program, a waiver will allow the tribe to use IV-E dollars to implement alternative services and supports that promote the safety, permanency, and well-being of children in the tribal child welfare system.

Port Gamble's waiver proposes to achieve three goals: increase recruitment and improve retention of qualified foster homes, shorten lengths of stay coupled with safe reunification, and healthy transitions for youth exiting care. The tribe will approach its work toward these goals in ways informed by and infused with the S'Klallam culture—by providing culturally relevant parenting skills education, implementing a kinship support program, developing safety plans that incorporate extended tribal family input, and supporting transitioning youth, all while remaining mindful of historical trauma and its current impacts. With greater flexibility in the use of Title IV-E funds, the tribe will be able to address the specialized needs of the tribal community as well as contribute to national knowledge about effective service interventions for Native American youth and families.

The experience of the Port Gamble tribe illustrates how important access to adequate, flexible funding streams is in order for a tribe to develop and administer a child welfare system that incorporates cultural practices, is responsive to tradition and to the children and families that it serves, and encourages community engagement to produce the best results for children.

Anita Fineday, JD, MPA, is Managing Director of Indian Child Welfare at Casey Family Programs. She can be reached at afineday@casey.org.

Tanya Dumas, JD, is Project Manager of Indian Child Welfare at Casey Family Programs. She can be reached at tdumas@casey.org.

Creating a Tribally Based Child Welfare Practice Model and Workforce Training Curriculum

Bree Bussey, MSW, Vicki White, & Priscilla A. Day, EdD

The Leech Lake Child Welfare Program (LLCWP), which has had a close working relationship with the Center for Regional and Tribal Child Welfare Studies (the Center) at the University of Minnesota Duluth (UMD), has undergone many changes in the last several years. In 2007, legislation was passed in Minnesota that made it possible for the Leech Lake Band to receive federal Title IV-E funding to provide foster care and adoption services for on-reservation band members. Since 2007, child welfare staff has increased from seven to nearly 60 people, and child welfare services have expanded drastically across the reservation. Services currently include child abuse and neglect prevention, family strength and solution-based services, family preservation services, and truancy prevention and intervention. Programming also includes access to tribal elders and spiritual advisors who are available to attend court hearings and conduct traditional healing and adoption ceremonies. An office is also located in Minneapolis that serves Leech Lake families in the urban area.

The Leech Lake Child Welfare Program prioritizes the development of a culturally based child welfare organization, and the Center for Regional and Tribal Child Welfare Studies has assisted with that process since 2008. The partnership began with the training of LLCWP staff through the Center's annual Summer Institute in American Indian Child Welfare and expanded by assisting staff to attain their MSW degree through the UMD Master in Social Work Program. The Center then assisted in the development of an information booklet titled, "Using the Seven Anishinaabe Teachings to Raise Healthy Leech Lake Children." The agency's mission was also articulated during this process, which is "to protect a child's sense of belonging to family and tribe by promoting family preservation through the use of the seven traditional Anishinaabe teachings and by providing services that ensure the health, safety, and welfare of Leech Lake children."

Leech Lake Child Welfare Practice Model

After the rapid growth of the Leech Lake Child Welfare Program and the challenging experience of providing a range of services to community members, it soon became clear that it was time to articulate a clear model of child welfare practice for the program. It was collectively decided that the agency would continue the work done with the Center and use the seven traditional teachings as a foundation for the development of the Leech Lake Child Welfare Practice Model, which would serve as an organizational guide for child welfare practice. This was a 2-year process involving focus groups with Leech Lake Child Welfare staff, community members, elders, and spiritual advisors.

The practice model was completed in 2013, anchoring Leech Lake child welfare agency practice in the Seven Anishinaabe Teachings: *Nibwaakaawin* (Wisdom), *Zaagi'idiwin* (Love), *Manaaji'idiwin* (Respect), *Zoongide'iwin* (Courage), *Gwayakwaadiziwin* (Honesty), *Dabasendizowin* (Humility), and *Debwewin* (Truth). The practice model also contains tribally based definitions of safety, permanency, and well-being, each of which consider the impact of historical trauma; the need for individual, family, and community healing; and the bond between relatives, kin, clan, and community.

Leech Lake Child Welfare Workforce Training Curriculum

In addition to attaining social work practice skills, Leech Lake child welfare workers must have a clear understanding of the mission, vision, and values of the agency and how that translates to direct practice with children and families. While the Department of Human Services offers an extensive foundation training for Minnesota county child welfare workers through the Minnesota Child Welfare Training System (MCWTS), throughout this process it became clear that developing a tribally specific workforce training was critically important. Support was provided by the Otto Bremer Foundation to create an extensive child welfare workforce training that not only includes content available in the MCWTS Child Welfare Foundation Training such as child welfare law, intake and family assessment, family preservation, and other topics, but also specific training regarding American Indian child welfare practice. The role of a tribal worker in court proceedings is also included, as tribal child welfare workers need to understand and navigate the court system with their clients. The training curriculum also includes content that is specific to Leech Lake Nation, such as historical information, cultural and spiritual teachings, historical trauma and its impact on families, and input from community members.

The curriculum is currently in its final stages of development. Once completed it will replace the required MCWTS Child Welfare Foundation Training for Leech Lake staff and will be implemented by the Leech Lake training coordinator through a combination of in-person and online training modules. Leech Lake's comprehensive staff training program will be used as a model for developing child welfare training programs for other tribal communities, and many of the materials produced will be directly applicable to other tribal child welfare programs in Minnesota and beyond.

Bree Bussey, MSW, is Community Programs Coordinator at the Center for Regional and Tribal Child Welfare Studies, University of Minnesota Duluth. She can be reached at bussey@d.umn.edu.

Vicki White is Training Coordinator at Leech Lake Child Welfare Program. She can be reached at Vicki.White@llojibwe.org.

Priscilla A. Day, EdD, is Department Chair and Director of Center for Regional and Tribal Child Welfare Studies, University of Minnesota Duluth. Dr. Day can be reached at pday@d.umn.edu.

Strengthening the Child Welfare Workforce

Gary R. Anderson & Cheryl Williams-Hecksel

In 2008, the U.S. Children's Bureau initially funded the National Child Welfare Workforce Institute (NCWWI) to focus on the crucial role of workforce development to advance the competency of child welfare professionals and the overall child welfare system. The Child Welfare Traineeship program targeted the recruitment, selection, and preparation of social work students with a commitment to work in child welfare. With an overrepresentation of children and families of color in the child welfare system and the need to effectively serve a range of communities, cultural competence and humility were among the central themes for the Child Welfare Traineeship programs.

With an overrepresentation of children and families of color in the child welfare system and the need to effectively serve a range of communities, cultural competence and humility were among the central themes for the Child Welfare Traineeship programs.

The NCWWI awarded sub-grants to 12 traineeship programs in a variety of social work educational settings to educate and train BSW and MSW students to work in traditional child welfare settings (see NCWWI website for a full list). In addition to providing a child welfare specialization and stipends for students, each program engaged in activities and innovations to improve the student learning experience.

Lessons Learned

Recruitment. Recruitment efforts were enhanced by establishing (or deepening) strong relationships with constituencies of color. For example, one university regularly joined its American Indian community in celebrations and commemorations of tribal events and history. Targeted recruitment included partnerships with social work programs in colleges particularly serving minority students. Recruitment efforts were also supported by diverse faculty members and alumni who were connected to their communities. The key to successful recruitment was respectful and useful relationships between school leaders and community leaders and ongoing involvement in diverse communities.

Selection. Key community leaders (spiritual leaders, tribal elders) and family members were engaged in the recruitment and the selection process. One school had a community panel working alongside the faculty in selecting trainees. Another school included family members in the selection and orientation process as their support for the student was recognized and appreciated by the school.

Support. Trainees were assigned "navigators" in addition to field liaisons and advisors to assist and support the student throughout their traineeship experience. Minority mentors from the work world (and sometimes traineeship alumni) and special seminars on themes such as disproportionality and the Indian Child Welfare Act were provided to enhance education and to support the transition and leadership preparation of minority students. Special graduation and honor ceremonies open to the broader community to recognize trainees' accomplishments were incorporated into some programs.

Curriculum. Through formal advisory boards crafted for this program or through less formal review, community members were engaged in designing or revising academic courses. New courses that were developed included ones with a focus on Spanish speaking and Spanish culture, American Indian communities and families, work with African American families, and integrating diverse content into courses on leadership and supervision. A full description of courses developed or deepened is on the NCWWI website (ncwwi.org).

Field Placement. Students and community leaders viewed field placements on the reservation or in one's diverse community as essential for supporting student development and retention in child welfare. One university used a rotation model to familiarize their trainees with services delivered in a public agency, private agency, and policy work at a federal regional office.

Challenges

Particularly in rural areas, it was difficult to locate MSW-level supervision for field placements. Given the crucial nature of an internship in one's native community, some creativity and collaboration was needed to support such supervision. Distances between one's academic program, home, and field placement also posed a challenge with regard to expense and time.

Tribal trainees reported challenges with being first-generation students, adapting to different learning environments, financial needs, family obligations, transportation, and managing school and full-time employment.

Learning that negative impressions and unfounded critical statements could undermine a student's preparation, there was the need to educate faculty members in general about child welfare and about diverse communities so that the whole academic environment provided encouragement for trainees.

In a number of communities, there was a need to recognize historic mistrust, which contributed to caution in engaging with the university.

Outcomes

With regard to recruiting and selecting minority students, in the first three years more than 50% of trainees were students of color, with a total of 48% over five years and an over 90% retention rate. From Fall 2009 through Spring 2013, 310 trainees graduated (52% MSWs).

With regard to student outcomes, there were four questions embedded in an overall stipend student inventory. Students were asked to rate their ability to practice with cultural sensitivity and competence in addition to assessing a working knowledge about the impact of race, ethnicity, and culture on individual and family functioning, institutional racism as reflected in the child welfare system, and LGBT issues in child welfare. Significant total competency score gains from baseline to annual review were reported for all students, with BSW students reporting higher gains over time. Traineeship graduates positively noted a sense of agency inclusivity after graduation. Students rated their overall program satisfaction, instructors, and field education highly.

Lessons learned from these first five years have informed the next five years of NCWWI, with 13 sub-grants and the traineeship program reframed and renamed University Partnership programs to reflect the importance of the relationship between the social work program and the child welfare agency.

For more information, please visit the NCWWI website at http://www.ncwwi.org or download the program legacy reports at http://z.umn.edu/ncwwitraineeshipssummary.

Gary R. Anderson is Professor and Traineeship Director at Michigan State University. Dr. Anderson can be reached at Gary.Anderson@ssc.msu.edu.

Cheryl Williams-Hecksel is Senior Clinical Instructor at Michigan State University. She can be reached at will1534@msu.edu.

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Dabinoochiwag (For the Children): A University, Tribal, and County Partnership A National Child Welfare Workforce Institute Initiative

Priscilla Day, MSW, EdD

St. Louis County Public Health and Human Services (SLCPHHS), the public human services agency of the geographically largest county in Minnesota, and the Center for Regional and Tribal Child Welfare Studies (the Center), housed in the Department of Social Work at the University of Minnesota–Duluth (UMD), were among 11 recipients of a National Child Welfare Workforce Institute grant that will address the following focus areas:

University Partnership Activities: Workforce Development

This project brings together educational and human service organizations and proposes a multi-faceted way to address workforce development and retention, disparities in out-of-home placement, and ways to strengthen relationships across county/tribal child welfare systems. The goal of our partnership is to create a model of American Indian child welfare service provision within SLCPHHS that is family, community, and tribally guided and will improve organizational effectiveness in working with American Indian children and families. Through a variety of grant activities, including guidance from regional tribal child welfare organizations, project goals will lead to increased competence and longevity of SLCPHHS staff working with American Indian families; strengthened relationships and coordination between county and tribal child welfare workers; fewer American Indian children in out-of-home placement, for a shorter time, and more often placed with relatives; and American Indian children having safety, permanency, and well-being within the context of connection with family, community, and tribe.

ICWA Scholars Program

Twenty-two scholars will receive their MSW in 5 cohorts over the next 5 years. Students will receive an $18,000 stipend to earn their MSW with a focus on American Indian child welfare. Field placements will occur in a county and/or tribal setting; students will also participate in leadership development, professional workforce training, and direct work with tribal child welfare programs. The ICWA Scholars Program will develop qualified leaders in American Indian child welfare practice through expanding existing experiential and academic learning activities in a supportive, optimal learning environment. UMD operates from a belief that American Indian social workers are in the best position to provide culturally relevant child welfare services to American Indians. As a result of this conviction, and as part of the mission of the program, UMD has worked to recruit American Indian students, primarily through targeted recruitment efforts at tribal social work agencies, at American Indian events, and in tribal media, and will strengthen these efforts through this project. For more information about the ICWA Scholars Program at UMD, please visit: http://www.d.umn.edu/sw/cw/proscholars.html

University Child Welfare Curriculum Development

The Department of Social Work at UMD will develop and deliver child welfare curricula with specialized content on trauma informed and evidence-based practice in child welfare, focusing particularly on American Indian child welfare. A new course, Evidence-Based Practice in American Indian Child Welfare, will be created and required of all trainees. Our current Trauma Informed Practice for Children and Adolescents course, which will also be required of all trainees, will be enhanced with culturally relevant content. Curriculum will be developed that will provide trainees and other students with an understanding of the particular issues of trauma in the American Indian community, how this impacts child welfare, and strategies to address these issues. This information will be made available to county and tribal social workers through online resources and training opportunities.

Priscilla Day, MSW, EdD, is Department Chair and Director at Center for Regional and Tribal Child Welfare Studies, University of Minnesota–Duluth. Dr. Day can be reached at pday@d.umn.edu.

Differential Response: A Racial Equity Analysis

Annette Semanchin Jones, PhD

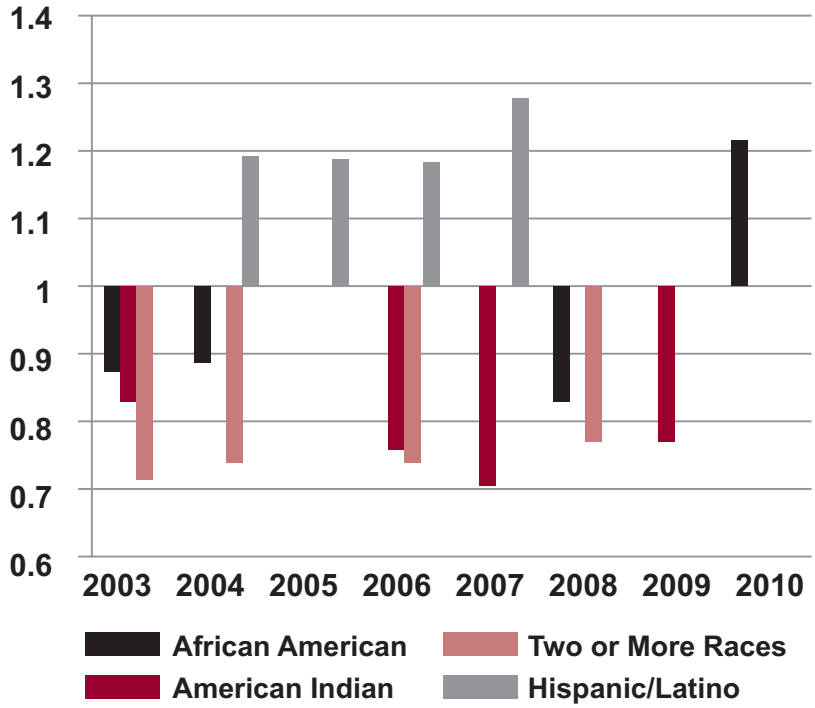
Differential response (DR) refers to a set of policies that establishes at least two distinct pathways for families that have an accepted report of child maltreatment, including: (1) an investigation pathway for higher risk cases; and (2) the assessment response pathway for low- to moderate-risk families. Over half the states in the United States are now using this approach in order to better engage families, to allow for flexibility, and to be more culturally responsive (Kaplan & Merkel-Holguin, 2008).

Several evaluations have indicated that DR increases family engagement and improves family and worker satisfaction (National Quality Improvement Center on Differential Response in Child Protective Services, 2011). Most evaluations of DR have found that children in DR do not experience increased risk of harm, and two randomized control studies found that children in the DR pathway had reduced rates of re-reporting compared to children in the traditional investigation pathway (Huebner, Durbin, & Brock, 2009; Siegel & Loman, 2006; Loman, Filonow, & Siegel, 2010; Siegel, Loman, Cline, Shannon, & Sapokaite, 2008; Virginia Department of Social Services, 2006). A randomized control study in Illinois found mixed results in that some families assigned to DR were more likely to experience a re-report, particularly those families who began DR services and then withdrew from services (Fuller, Nieto, & Zhang, 2013). Families that completed DR services were not more likely than the investigation group to be re-reported in this study.

Racial Equity

Despite research showing some evidence of positive outcomes of DR, many questions remain unanswered, particularly around racial equity. One recent study examined the impact of DR on racial equity and child safety outcomes, focusing on over-represented groups (primarily African American and American Indian families) in Minnesota's child welfare system (Semanchin Jones 2014a, 2014b). Minnesota has been a leader in the implementation of DR, beginning in 1999 with a pilot study and then later codified into statute in 2005 as the preferred response for cases of child maltreatment. Minnesota's DR approach includes two pathways: Family Assessment (FA) Response and Family Investigation (FI) Response.

Figure 1. Odds Ratio of Pathway Assignment to FA for Children of Color Compared to White Children



Research Study: Methods and Findings

The study that is summarized in this article used state administrative child welfare data to examine whether there were racial disparities in the following decision points: (1) pathway assignment to FA or FI; (2) switching pathway assignment; (3) decision to remove child in FA compared to FI; and (4) re-reporting within 12 months of case closing (for more information on this study, including methodology, see Semanchin Jones 2014a; 2014b). The study sample included all screened in cases to child protective services in Minnesota from 2003 through 2010 (N=122,095).

The overall findings of the effect of race on pathway assignment were mixed. African American children were less likely to be assigned to FA 3 of the 8 years of the study timeframe and more likely 1 of the years, while American Indian and Multiracial children were less likely to be assigned to FA compared to White children for 4 of the 8 years (Figure 1). However, it is interesting to note that for all four groups, a child's race or ethnicity was not a significant predictor of pathway assignment for half of the years in the study time frame. Hispanic children were more likely to be assigned to FA compared to non-Hispanic children for 4 of the 8 years.

Results indicated that race was a predictor of pathway switch only for African American and Multiracial children in the earlier years of the study timeframe, but from 2007 to 2010, results of the data analysis indicated no significant differences by race or ethnicity for cases that were switched from FA to FI. This was at the same time that the overall numbers of cases of pathway switch also drastically declined, from 15.8% in 2004 to only 2.7% of all cases experiencing a pathway switch in 2010.

African American, American Indian, and Multiracial children were more likely than White children to experience a re-report of child maltreatment and an out-of-home placement in both pathways for *some* (but not all) years of the study time frame. African

Using a racial equity lens can help ensure equitable implementation and can provide data to better understand the impact of policies on communities of color and historically over-represented communities.

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Practice

Family Group Decision Making as a Culturally Responsive Child Welfare Practice

Lisa Merkel-Holguin, MSW

The formal mechanisms that permeate child welfare decision-making often privilege the knowledge and expertise of human service professionals while minimizing that of extended family systems. The policies, procedures, and structures of child welfare systems tend to show preference for professionally driven rather than family-driven decision making (Morris & Connolly, 2012). But since the 1990s, family group decision making (FGDM) has increasingly been implemented by formal child welfare and community-based agencies to reverse these system-driven approaches to privilege family voice and experience in decision making.

Informally, for generations, families have demonstrated their ability and willingness to make decisions when their children's well-being has been compromised. Formally however, the policy origins of FGDM can be linked to New Zealand's Children, Young Persons, and their Families Act of 1989. This law acknowledged the limits of Westernized decision-making processes in child welfare systems that have traditionally undermined cultural identities and family structures and resulted in institutionally racist policies, historical trauma, and disproportionate placement of indigenous children in what New Zealand calls "stranger care." In place of traditional decision-making mechanisms, the family group conference (FGC) model was instituted.

The values underpinning FGDM as a practice and FGC as a model reflect the critical importance of leveraging the family groups' specific cultural contexts in decision making. Through FGDM, various notions undergird implementation, including: reclaiming customary decision-making processes that reflect cultural norms; viewing children as a collective, community responsibility; leveraging family's cultural knowledge to safeguard their children; creating a platform for active participation that promotes self-empowerment and ownership in decisions; and promoting inclusivity versus exclusivity.

The reasons identified for implementing FGC are plentiful and variable by community. They include the desire to: (1) reduce disparate outcomes for families of color; (2) democratize decision making; (3) prioritize human rights of self-determination and meaningful participation; (4) increase kinship care; (5) access and manage family resources; (6) decrease the use of congregate or group care; and (7) create lifelong connections for young people in foster care. In looking at the rationales, it is evident that some are pragmatic for meeting the goals of child welfare systems, while others are more philosophical and rights-focused. This may in fact lead to inherent tensions in FGDM implementation, particularly when the plans developed by families don't achieve these system goals.

FGDM, given its indigenous roots and its simple but nuanced structure, can align with the traditions and norms of various cultural groups.

FGDM as a Culturally Competent Practice

FGDM, given its indigenous roots and its simple but nuanced structure, can align with the traditions and norms of various cultural groups. While there is a growing number of "family meeting" models in the United States and elsewhere, the core elements of FGDM include: (a) a coordinator who has time and resources to prepare the family group; (b) private family time that allows the family group to plan and take ownership; (c) a child welfare agency that gives preference to the family plan over any other; and (d) resources and formal mechanisms to follow up on the agreed plans (Kempe Center, 2013; Morris & Connolly, 2012).

Various researchers who have studied, practitioners who have delivered, and family members who have experienced FGDM have noted a number of strategies that, when incorporated into the FGDM process, can bolster the cultural responsiveness of the practice (Drywater-Whitekiller, 2014; Marcynyszyn et. al, 2012; O'Shaughnessy, Collins, & Fatimilehin, 2010; Waites, Macgowan, Pennell, Carlton-LaNey, & Weil, 2004). These include:

- Employing a coordinator who represents or understands the cultural context of the family group, who has the time to widen the family circle for decision making, and who remains constantly aware of his or her own biases and assumptions. The Coordinator uses his or her skills to create an FGC that resembles the family group's traditions and promotes the leadership of the family members.
- Allowing the family group to define their family, while recognizing that children belong to their family and kinship network.
- Setting a location for the FGC that protects the privacy of family and creates a comfortable, positive environment. This typically means holding the FGC in the family home or community, rather than the child welfare agency.
- Positioning elders in culturally appropriate ways, which may include elders facilitating the FGC, inviting participants, and teaching the coordinator about different cultural norms.
- Creating flexible processes that don't restrict the amount of time the conference takes. For some cultural groups, meeting over a number of days, deliberating into the evening, and having enough time between referral and conference may align with their notions that critical decisions about children should not be rushed.
- Sharing and preparing of food that reflects their cultural traditions.
- Maintaining a simple conference format so that the family group hears the concerns of the child welfare agency but is not required to share privately held information about their family with service providers that is not necessary for assessment or case planning.
- Avoiding over-facilitation of meetings, which elevates the role of the coordinator. For example, a highly structured agenda with facilitators that record emerging themes using many flip chart pages may also represent a re-colonization process, and not fit with cultural norms.

The values underpinning FGDM as a practice reflect the importance of leveraging family-specific cultural contexts in decision making. Through FGDM, families can reclaim customary decision-making processes that reflect cultural norms; view children as a collective, community responsibility; and leverage the family's cultural knowledge to safeguard their children.

Lisa Merkel-Holguin, MSW, is Assistant Research Professor in the Department of Pediatrics, Kempe Center for the Prevention and Treatment of Child Abuse & Neglect, at the University of Colorado School of Medicine. She can be reached via email at Lisa.Merkel-Holguin@childrenscolorado.org.

Minnesota Indian Women's Resource Center: Life Skills Parenting Program and the Positive Indian Parenting Curriculum Teaches Parents Traditional Ways of Raising Healthy Children

Angela Dalbec

Many of the families that come into our program have had numerous losses throughout their lives. They lack healthy connections to their community as well as strong support systems. More and more families want to connect to their culture in a more positive way. They want to learn more about traditions and how to use them in their lives. Most Native American cultures have seven traditional values: love, respect, courage, honesty, wisdom, humility, and truth. The Life Skills Parenting Program helps teach families to rely on these basic core values and bring their family back into balance.

Our Model

A majority of the cases we see are referred by a local child protection agency, although families have the option to self refer as well. The Life Skills Parenting Program is divided into three phases with a time frame of 6 months. The first phase is a crisis management phase. Clients work closely with staff on stabilizing their lives and working to resolve any crisis they have. Staff help clients with tasks such as obtaining housing, getting past utility bills paid, creating a schedule, and setting medical appointments. Clients develop their own goals, and staff support clients in achieving these goals.

In the second phase, clients start working on parenting skills and developing healthier families. Clients attend a weekly parenting group as well as meet weekly with staff to continue working on goals. Staff members work with clients in their homes to help them develop healthier relationships with family members and provide support in creating an environment of discipline (teaching) rather than punishment. Once clients complete the 10-week parenting group and have been meeting with staff regularly, they move to the third phase.

Phase three was originally developed to provide clients with support after they have been reunified with their children. This phase is mainly for continued support while they adjust to changes in parenting and healthier families. Staff members continue to meet with clients, but a majority of the work is supporting the family.

With the Life Skills Parenting Program, we encourage families to connect with their culture. A majority of the case management that is provided is directed at providing education and resources. Our parenting group

focuses on teaching parents traditional ways of raising children by utilizing the Positive Indian Parenting curriculum. This curriculum focuses on topics from talking skills to storytelling to harmony in childrearing. We teach parents how to integrate these traditional parenting techniques within our modern lifestyles. Parents can use the value of storytelling while disciplining their children for not doing chores. Parents learn about the importance of nonverbal communication in our culture and how to recognize the nonverbal cues their children are giving them. We teach the value of harmony and how to create harmony within our homes and personal lives.

> The Life Skills Parenting Program helps teach families to rely on these basic core values and bring their family back into balance.

Tools

A common teaching tool in Native American culture is the medicine wheel. Divided into four sections, the medicine wheel can be used in many areas of life. One way the Life Skills Parenting Program uses the medicine wheel is to teach self-care. There are four areas in our lives—physical, mental, emotional, and spiritual—that we need to take care of. Ideally we should be doing something in each of these areas on a regular basis. Staff members work with clients on ways to increase their focus on each area in their lives.

We teach families how to smudge and use the four medicines. Families are given a shell and sage upon completion of the program as a way to honor their success and give them the resources they need to continue to use our traditions in their homes.

Families are taught how to use talking circles to discuss issues that arise within a family. Parents often get into the habit of demanding children to obey rules. The talking circle offers the time and space for each family member to discuss an issue in a non-confrontational manner.

A common problem for any parent is discipline. When your child disobeys a rule, how do you respond in a way that will be most effective? Teaching families the traditional ways we disciplined children helps give them the tools they need to teach their children right from wrong. Native American culture is largely non-confrontational and this was seen in the ways we parented. Children know the rules and the consequences. When parents provide the structure for following rules, it helps to eliminate the arguments. For example, when a teen comes home late and the family rule is to then come home early for the next week, the teen already knows the consequence for their behavior and there isn't room for arguments.

Success

Many of the families that enter our program are looking for ways to reconnect to their culture in some way. The Life Skills Parenting Program offers a safe place for parents to ask questions and work on goals. It provides that connection to their history and simple ways to bring those traditional beliefs into their homes. The Life Skills Parenting Program recognizes the tragedies a family has experienced and helps them heal so that future generations can be better and healthier and stronger.

Angela Dalbec, who has a Master's degree in marriage and family therapy, is a Life Skills Parenting Mentor at Minnesota Indian Women's Resource Center. Angela can be reached at angela.dalbec@hennepin.us.

An Evidence-Informed Practice Model for Urban Indian Child Welfare Services

Nancy M. Lucero, PhD, LCSW

For 14 years the Denver Indian Family Resource Center (DIFRC) has provided comprehensive urban Indian Child Welfare services. The agency utilizes a documented and formalized practice model that is built upon a foundation of trauma-informed direct services to children and families and collaborative partnerships with child protective services (CPS) departments, tribes, and community-based providers.

exposures. DIFRC also strives to create an agency environment where Native clients feel physically, emotionally, and culturally safe.

An individualized service plan is developed for each family from a thorough assessment of the needs and capacities of all family members. The plan is implemented through a series of strategic and structured interventions intended to simultaneously address multiple family stressors and build upon inherent family strengths. Completion of mental health, substance abuse, and/or domestic violence assessments are often at the center of work in the first weeks of service provision, and are followed by efforts dedicated to:

- identifying and accessing resources and treatment services
- increasing family members' motivation to address challenges
- interfacing with CPS and tribal caseworkers and other service providers
- addressing Indian Child Welfare Act (ICWA) compliance aspects and children's tribal enrollment

The agency's trauma-informed approach begins with service providers' awareness of three aspects of trauma that impact Native clients: historical group traumatic events (such as forced relocations and boarding school attendance), intergenerational transmission of trauma, and individual contemporary trauma exposures.

DIFRC's practice model is comprised of a set of services that have been shown by practice-informed evidence to lead to successful outcomes for children and families. These services also reflect best practices in Indian Child Welfare, including:

- early identification of children and families involved (or at-risk of involvement) with CPS
- collaboration with CPS and tribes
- trauma screening at the caseworker level, and, when indicated, more in-depth assessment and treatment by a behavioral health provider
- substance abuse and mental health assessment and treatment
- community and home-based services using a culturally responsive approach
- emphasis on strengthening family kinship networks
- maintaining children's cultural connections through kinship placements when out-of-home care is needed

Intensive, family-focused, and trauma-informed case management comprises the foundation of direct services within DIFRC's practice model and addresses multiple and persistent challenges faced by many Native families. The agency's trauma-informed approach begins with service providers' awareness of three aspects of trauma that impact Native clients: historical group traumatic events (such as forced relocations and boarding school attendance), intergenerational transmission of trauma, and individual contemporary trauma

System-level interventions in the practice model are essential to supporting the direct services provided to children and families. These interventions seek to improve CPS systems' interactions with Native families and to develop a culturally responsive, community-based service delivery system within which families can address issues that have brought them into contact with CPS. System-level interventions with CPS include:

- developing departmental protocols for early identification of Native children and referral to DIFRC
- improving awareness and responsiveness to the needs and issues of Native children, families, and communities
- training workers on culturally responsive practice and the ICWA
- engaging with state-wide partners to address Native issues in child welfare system change initiatives

Evaluation Highlights

- In the first three years of model implementation (2003-2005), the overall percentage of children placed with relative caregivers increased from 20% to 43%. During this period, out-of-home, non-kinship placements of Native children decreased by 76.8% in Denver County, the Colorado CPS department with the largest number of cases involving Native families.
- From 2003-2005, among families with substance abuse and child welfare involvement, there were no re-referrals to CPS, whereas the rate of re-referrals for Native families in Colorado in the years 1995-2000 was 17.5%.
- From 2000-2007, 70% of children involved in family preservation or family reunification services at DIFRC remained home, returned home, or were placed in a kinship home. By 2012, this figure had increased to 91%. This is considerably higher than the national rate of 54% for reunification and similar permanency outcomes for Native families.
- Non-relative and non-Indian adoptions are seldom seen. For example, during the period 2000-2007, only five children out of 404 children served were involved in non-relative and non-Indian adoptions.
- DIFRC families show significant positive change in the areas of environment and caregiver capabilities, and positive trends in the areas of family safety and child well-being, as measured by the North Carolina Family Assessment Scale (NCFAS)-American Indian version.

Early Identification of Native Children

The identification of American Indian children entering CPS systems is an essential first step in effective urban Indian Child Welfare work. When a family's Indian status is not ascertained until well into the case, many important opportunities to implement culturally responsive services have passed. Extended family members can be contacted early in the case process, and parents can receive referrals for culturally appropriate assessments and to services beginning with

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Addressing the Trauma-Related Needs of Latino Children and Families Involved in the Child Welfare System

Lisa Conradi, PsyD

The number of Latino/Hispanic children in the child welfare system has steadily increased over the past two decades. National data estimates indicate that the percentage of Latino/Hispanic children confirmed as victims of maltreatment has more than doubled from 10.0% in 1995 to 20.8% in 2008 (United States Department of Health and Human Services [U.S. DHHS], 2010). Similarly, the rates of Latino/Hispanic children in foster care have more than doubled from 8% in 1990 to 20% in 2008 (U.S. DHHS, 2010). It is well documented that Latino children involved in foster care experience disproportionately negative outcomes of well-being when compared to their White counterparts (Church, Gross, & Baldwin, 2005).

It is important to consider specific life experiences for Latino/Hispanic children and families involved in child welfare when assessing for traumatic stress with this population and account for the cultural implications of these experiences.

Along with the life experiences consistent with abuse/neglect and involvement with child welfare and out-of home care, there are other life experiences of a traumatic nature for Latino/Hispanic children and families. For example, there has been increased focus recently on the issue of unaccompanied minors. According to a recent report by the Center for Gender and Refugee Studies and Kids in Need of Defense (2014), more than 52,000 unaccompanied children were caught trying to cross the southern U.S. border in the first five months of 2014. Further, there is a risk that undocumented immigrant parents of native-born children may be deported through immigration enforcement. The Department of Homeland Security Office of the Inspector General (2009) estimated that over 108,000 parents of U.S.-citizen children were removed from the United States between 1997 and 2007.

Many of these children will present to the child welfare system with complex needs and issues to be addressed. Therefore, it is vitally important that Latino/Hispanic children in the child welfare system receive interventions that are trauma-informed.

The primary goal of child welfare is to achieve a permanent, safe, and stable family connection that enhances well-being. The mitigation of traumatic stress and other mental health concerns is best addressed, and interventions are more likely to be effective, in the context of permanency planning and with family members and/or other significant adults whom the youth see as meaningful in their lives. Given the unique experiences of Latino/Hispanic children in the child welfare system, it is important to address the specific needs of this population. The following are concrete recommendations from the field on improving child welfare practice for Latino/Hispanic families (The Workgroup on Adapting Latino Services, 2008):

Expand the definition of trauma for Latino/Hispanic families and children involved in child welfare. It is important to consider specific life experiences for Latino/Hispanic children and families involved in child welfare when assessing for traumatic stress with this population and account for the cultural implications of these experiences (Cohen, 2007). These experiences include not only the trauma associated with out-of-home placement, but also trauma that may have been experienced as part of the migration process for newly immigrated youth.

Focus on addressing not only physical safety, but psychological safety as well. Some of the most impactful interventions made by child welfare workers are not sweeping system changes, but rather, small behaviors designed to improve the psychological safety of the child and family they are serving. This includes asking the child what would help him or her feel safer, adequately preparing the child for key transitions, and allowing the child to have some control over his or her environment.

Increase training of child welfare staff. Train child welfare staff on trauma-informed child welfare interventions as well as on the specific issues and needs of Latino/Hispanic children and families involved in child welfare with consideration of socio-cultural, ethnic, linguistic, and other contextual variables (e.g., immigration) that may compound the presence of trauma. The revised version of the "Child Welfare Trauma Training Toolkit" (Child Welfare Collaborative Group, National Child Traumatic Stress Network, & The California Social Work Education Center,

2013) includes a module focused on culture and trauma that discusses these issues.

Support community and ethnic-based organizations. Given that most Latino/Hispanic youth and families impacted by the child welfare system will likely receive services by community and ethnic-based organizations, consider expanding the role of these groups to build capacity and have the adequate infrastructure and resources to deliver and adapt evidence-based practices in their contexts. This may include providing training to these agencies on Latino/Hispanic children in child welfare and the impact of trauma.

Increase social marketing efforts to recruit bilingual and bicultural families as resource parents. A critical component of effective child welfare practice is the need to ensure that there is enough capacity of resource families that can provide cultural and linguistic continuity and support Latino/Hispanic foster youth's ethnic identity.

Provide educational and skill building opportunities for resource families. These would include kinship caregivers to better address and manage the mental health needs of youth in their care, including the impact of trauma. An example is the resource titled, "Caring for Children who have Experienced Trauma: A Workshop for Resource Parents" (Grillo, Lott, & Foster Care Subcommittee of the Child Welfare Committee, National Child Traumatic Stress Network, 2010).

Lisa Conradi, PsyD, is the ACYF and SAMHSA Projects Co-Director at the Chadwick Center for Children and Families, Rady Children's Hospital–San Diego. Dr. Conradi can be reached at lconradi@rchsd.org.

Initiative Serves as a Culturally Responsive Community Outreach and Recruitment Model for Foster Care and Adoption with African Heritage Communities

Deborah Brown, MPA

The Rally for Foster Care and Adoption Initiative is a 1-year pilot initiative, funded by the Minnesota Department of Human Services (DHS) and facilitated by the Council on Black Minnesotans, whose goal is to address the racial disparities of African heritage children who are overrepresented in Minnesota's child welfare system. This initiative provides culturally specific targeted outreach in Twin Cities African heritage communities to recruit foster care, adoptive, and kinship parents for African heritage children involved in child welfare. While the Council on Black Minnesotans does not promote out-of-home placement of African heritage children and wants resources devoted to prevention and proactive efforts to help families stay together safely, we recognize the important role kin, foster parents, and adoptive parents have in caring for children.

Purpose and Goals

The Rally for Foster Care and Adoption Initiative is derived from the former Health Care Rallies as well as the former One Church, One Child Initiative (see Talley, 2008). Community and faith institutions are key partners in implementing numerous rally events throughout the year. The goals are to promote community awareness and action through partnerships, share experiences and resources to find permanent, loving families who can maintain cultural connections for African American children, engage the community in conversations about supporting children and families, and increase access to culturally relevant services to reduce overrepresentation of African American children in Minnesota's child welfare system.

Developing the Initiative

Community involvement and commitment is crucial to securing families who will help improve outcomes for African heritage children. Community partners, residents, foster care and adoption organizations, county agencies, and state agencies are integral allies in this initiative. In order to develop this initiative, we held information sessions to engage stakeholders. We formed an advisory committee to help support the work and make policy recommendations to DHS regarding African heritage children in out-of-home placement, specifically related to foster care. The majority of our interaction with target audiences is through African heritage churches, beauty salons, barbershops, community gatherings, and establishments such as community services organizations, all of which have significant ties with African heritage communities.

We are pursuing strategic outreach in communities where many African heritage residents live. For example, we identified community celebrations that have high numbers of African heritage participants, and volunteers did outreach at those events. We distributed surveys to gauge awareness, begin dialogue, and inform and educate people about the need for loving foster and adoptive families for African heritage children. We gave residents an opportunity to sign up for more information about foster care and adoption, and invited and encouraged them to attend future foster care and adoption rallies.

> There cannot not be a one size fits all approach to foster care and adoption services, especially when it comes to recruiting families of African heritage.

Best Practices

It is important to have staff members who are culturally aware, responsive, and reflective of the community in which they serve. The Rally for Foster Care and Adoption Initiative utilizes African heritage staff and organizations who use specific organizing strategies and outreach in the African heritage community. Understanding and acknowledging the history of people with African heritage and their overall contributions to Minnesota is a huge asset to organizations working with the African heritage community. Agencies and staff must recognize and focus on African heritage families' strengths, history, and culture. Respect, flexibility, and customer service are important. There cannot not be a one size fits all approach to foster care and adoption services, especially when it comes to recruiting families of African heritage.

It takes time and genuine people to build relationships and trust in the African heritage community. If an agency is not culturally competent, outreach will not work. Agencies must tailor messages and communications to reach the hearts and minds of the targeted audience and what they value. For example, faith, extended family, and collective achievements are important to many members of the African heritage community. Including

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The Importance of Rice Pudding

Melanie Scheetz & Gayle Flavin, LMSW

To most people, rice pudding may have no significance at all. For others, it might bring memories of a comforting breakfast in the safety of your Auntie's kitchen. But, if a rice pudding recipe is the only thing you have from your family, it may mean the world.

> *Christina and David lived in a house of chaos, with six adults in a one-bedroom apartment. Prostitution and drugs were part of their everyday lives. After they entered foster care, Christina and David lived in kinship care with a wonderful paternal Auntie. However, Auntie was raising children of her own and could not make a life-long commitment to them. Christina and David's case manager found a non-relative adoptive home for them. As she said goodbye, Auntie gave the case manager a long list of the children's likes and dislikes and included the recipe for rice pudding.*

These seemingly little things (ways of connecting with your family and your past) are often lost by children once they have entered foster care. Christina and David, both African American, were adopted by Caucasian parents who recognized the importance of maintaining connections to relatives and were able to reconnect the children to their extended family. This relationship proved to be immeasurably important to the children. Christina and David were the inspiration for the groundbreaking programs at the Foster & Adoptive Care Coalition.

The Foster & Adoptive Care Coalition has developed two programs that aim to keep children connected with their family–Extreme Recruitment® and 30 Days to Family™. The coalition's programs were developed to serve all children in foster care, but are particularly helpful for children and families of color. These programs recognize that every family has its own culture, personal dynamics, and history, and they aim to empower families. The programs are child-specific in nature, and the work to be accomplished takes into account not only the child's race and ethnicity, but also other aspects of their culture. These programs honor the strengths of the families served and recognize their ability to take care of their own children. The Coalition believes that all families deserve respect from the child welfare system.

Extreme Recruitment®

Extreme Recruitment® is a race to find permanency for the hardest-to-place children: ages 10-18, sibling groups, children of color, and youth with emotional, developmental, or behavioral concerns. African American youth are disproportionately represented in the program. In 2013, 37% of the youth served through Extreme Recruitment® were Caucasian, while 61% were African American.

Extreme Recruitment® finds permanent homes for children by creating a dynamic team that works together with urgency for 12-20 weeks of intensive recruitment efforts and permanency preparation. Because Extreme Recruitment® is a team effort, it lightens the work for the child welfare professional. Extreme Recruitment® differs from other permanency programs because it encompasses all of the following elements:

- Diligent searches to reconnect the youth with relatives or kin
- General, targeted, and child-specific recruitment
- Examination of all areas of a child's life that impact their readiness for permanency
- Efficient and effective weekly team meetings
- The skills of a private investigator

The extreme recruiter is a full-time worker who is dedicated to spearheading and expediting the recruitment activities of the team. The recruiters' efforts are supported by the skill set of the program's private investigator. Originally, we tried having social workers do the investigation work themselves, but the contact rate with relatives was a dismal 23%. Within two weeks of hiring an investigator, the contact rate skyrocketed to 80%.

The goal of Extreme Recruitment® is to improve long-term outcomes of youth in foster care by connecting youth to supportive adults. It is accomplished in two ways: 1) reconnecting youth with safe relatives; and 2) matching youth with permanent resources for adoption or guardianship. In 2013, 71.9% of the youth served were matched with a permanency resource. While the number of identified relatives remains fairly constant, not all relatives will be options for permanency for these youth. Priority is always given to safe and appropriate relatives of the child over non-relatives. When children are matched with non-relatives, their recruiter makes every possible effort to ensure that the child will remain in contact with family by helping to cultivate a relationship between the new caregiver and biological relatives of the child.

Years spent in foster care strips children of their identity. Extreme Recruitment® gives it back.

These programs recognize that every family has its own culture, personal dynamics, and history, and they aim to empower families.

30 Days to Family™

Three years after the launch of Extreme Recruitment®, 30 Days to Family™ was created. 30 Days to Family™ is an intense and short-term intervention to diligently search for a child's relatives and kin to identify placement options and supports. 30 Days to Family™ specialists identify an average of 150 relatives for each case. Within this large network, appropriate placements and supports are identified. Every effort is made to search for relatives who will keep siblings together, maintain children in their school of origin, and preserve the child's relationships with friends and supportive adults.

In 2013, 67% of children were placed in kinship care homes within 30 days of the child entering state custody. Best of all, during the life of the program, 89% of children served remained stable in their placements one year later. As in Extreme Recruitment®, African American children constitute the majority (66.6% in 2013) of those served by the program.

Here is the story of one of the more than 200 children served by 30 Days to Family™.

As soon as his mother was arrested, 4-year-old Lamont came into foster care. A 30 Days to Family™ specialist started Lamont's case with only four known relatives. Within five days, his family tree had grown to 99. Although two family members said that they would like to help Lamont, neither of them could provide a home for him. By the 14th day, the family tree included 210 relatives, but still, no one could take him in. Finally, on the 29th day, with 277 relatives located, came the big break! A 30 Days to Family™ specialist located Lamont's paternal grandmother, who eight weeks before had relocated to the St. Louis area. She did not know that she had a grandson. Although heartbroken that she did not know about Lamont before, she was ecstatic to provide a home for him, saying, "Of course I want my grandbaby! I will love him and take care of him just as if I've known of him since the day he was born!" Now, Lamont is thriving, surrounded by his grandmother, aunts, and uncles who are taking wonderful care of him.

It should be a basic human right to know who your relatives are and to understand where you came from. Whether it comes from rice pudding, a lullaby, or a family prayer, everyone needs that sense of belonging to hold on to. While child protection services have the best of intentions (to keep kids safe), safety should not have to come at the price of losing your sense of identity. Children can have both, and it is our responsibility to provide it.

Melanie Scheetz is Executive Director of the Foster & Adoptive Care Coalition. She can be reached at melanieschEetz@foster-adopt.org.

Gayle Flavin, LMSW, is Director of Program Implementation at the Foster & Adoptive Care Coalition. She can be reached at gayleflavin@foster-adopt.org.

Kinship Care: A Culturally Responsive Intervention for African American Children

Ramona W. Denby, PhD

The number of children who experience removal from their parents remains high in the United States. Some children may need to be removed from their parents to provide them with protection, but a myriad of negative effects and unintended consequences can ensue from that removal. Consequently, practitioners should consider the most effective and culturally responsive approaches to lessen the effects of the removal and to promote the child's well-being. One such practice is kinship care.

Kinship Care As a Protective Factor and Culturally Responsive Practice

Culturally responsive practices must be at the forefront of service delivery to African American children and families who are involved in the child welfare system. Cultural responsiveness can occur through adaptation of existing services or approaches to fit the needs of client groups, or it can be accomplished by establishing new services or provisions tailored specifically to the needs of a particular group. Although the implementation of new models may be the recommended course of action in many child welfare jurisdictions, "given the reality of under-resourced child welfare systems, there is a need to advance approaches that are both practical and viable and do not place unrealistic financial burdens on systems that are already overburdened" (Denby & Curtis, 2013, p. 7). Kinship care is a culturally responsive practice that is not only viable and statutorily indicated by the Social Security Act 42 U.S.C. § 671(a) (19), it also promotes several identified protective factors and thus can increase children's overall well-being.

Theoretical constructs associated with individual, relational, and community-level protective factors have been identified as critical for children who are involved in child welfare (Development Services Group, 2013). Many of the identified protective factors are organic to the practice of kinship care or can be easily cultivated and supported so that they become more prominent in such placements.

Individual-level protective factors and kinship care. At the individual level, one of the most critical protective factors that can be achieved through the use of kinship care is a positive sense of self. Children and youth who possess a positive self-image and who have a sense of purpose, optimism, and self-efficacy are better equipped to mitigate the effect of adverse experiences. Research has demonstrated that children who reside in kinship care placements have fewer behavioral problems (Rubin et al., 2008), which may be associated with improved levels of self-esteem (Strozier, McGrew, Krisman, & Smith, 2005).

Relationship-level protective factors and kinship care. Relational skills—the ability to sustain meaningful and significant relationships with others, including caring adults—are predictive of positive outcomes for children who are engaged with the child welfare system. Kinship care placements afford children the chance to reside among extended family members, providing essential lifelong connections. Schwartz (2010) found that kinship placement affords African American adolescents relational gains and restoration of losses. Through kinship placements, African American children are able to maintain a sense of belongingness and "fit," vitally important in mitigating the traumatic impact of maltreatment and subsequent removal. It is important that African American children see positive, loving, and nurturing representations of themselves. Kinship care enables important biological ties and can assist children with loss and grief issues, which can go unrecognized in the context of child welfare service delivery.

Through kinship placements, African American children are able to maintain a sense of belongingness and "fit," vitally important in mitigating the traumatic impact of maltreatment and subsequent removal.

Community-level protective factors and kinship care. A stable living situation can provide not only a physical sense of belongingness but also a psychological one. Children placed in kinship care experience fewer placement disruptions (Winokur, Crawford, Longobardi, & Valentine, 2008). Likewise, a positive community life offers normality and can help to solidify a cultural and ethnic identification for African American children. African American adolescents in kinship care may have more favorable and positive ethnic identity perspectives than their counterparts who reside in non-kinship care homes (Schwartz, 2007).

Caregiver Support

The literature provides differing perspectives regarding the effectiveness and benefits of kinship care, but there tends to be agreement concerning the need to implement more effective ways of supporting caregivers so they can have a positive effect on child well-being outcomes. Caregivers should be supported to ensure they possess the necessary resources to adequately provide care. For example, economic opportunity (a community-level protective factor) is critical to equipping caregivers with the necessary interventions and resources to address children's needs, which can be significant given their background experiences that may have included inadequate financial provisions. Economic resources enable caregivers to provide the community-level protective factor of a healthy community and living environment. Resources that enable caregivers to be most responsive to children's needs can include: guardianship or non-needy caretaker stipends, access to early childhood education and pre-school services, and academic support services that can fund tutoring and other educational enhancements.

Additionally, resources that promote parenting competencies are critical for caregivers. Such needed resources can include peer support, respite care, and access to education and information. Research has demonstrated that kinship caregiver support approaches that involve peer-to-peer support are culturally responsive and effective in increasing caregiver competencies (Denby, 2011). When caregivers are paired with other caregivers, trusting relationships ensue and have been shown to increase child safety given a caregiver's willingness to confide in another caregiver concerns that he or she might have about the caregiving role. Finally, mental and emotional support that addresses not only the child's needs but also the caregiver's needs is another recommended course of action.

*(**Note:** For a more complete review of kinship caregiver support approaches, see Denby, 2011.)*

Ramona W. Denby, PhD, is Professor at the School of Social Work, University of Nevada–Las Vegas, and Senior Resident Scholar at The Lincy Institute. Dr. Denby can be reached at ramona.denby@unlv.edu.

Practice

The Importance of Culture From a Foster Youth Perspective

Lucina Kayee, interviewed by Heidi Ombisa Skallet, MSW, LISW

I came to the U.S. from war-torn Liberia hoping for a new beginning and a fairy-tale ending. Due to political involvement, my mother couldn't come to the U.S., so I came with my stepdad. About a year and a half later, at age 8, I ended up in foster care due to domestic and child abuse. I initially was returned home; my family took that to mean that everything they'd done to me was actually okay.

By age 12 I'd been in and out of a residential shelter about 15 times, with stays lasting anywhere from 2 days to 8 months. I continued to see my stepdad 5 days a week. My first foster placement had been based on the assumption that all Africans should stay together, regardless of religious background. Because the African community in my city was small, my foster parents knew my stepdad, liked him, and often had him over. My second foster family was African American, but one of the older kids smoked in the basement and my tribe is very against smoking.

At age 12 I was in a treatment center for girls, where my therapist actively supported my efforts to incorporate culture into the program and where I developed an interest in advocacy. At my annual review hearing I asked the judge for the right to have a say in where I lived and to end my stepdad's visitation; he consented to both. Five months later I moved in with a foster parent of my choice—Kathy, a white woman. Four months later my stepdad tried to kill his girlfriend. Against my birth mom's wishes, I did a victim impact statement. Between that and moving in with Kathy, my birth mom cut me off.

Kathy tried her hardest, but she was an Italian who'd grown up in small town Minnesota. I ate tripe, but she fed tripe to her dogs. My transition to school was also hard: my relatively wealthy schoolmates saw me as abnormal, with different clothing, an accent that grew worse when I was angry, an inability to read at grade level, and issues with my jaw due to having been poisoned in Liberia.

Kathy told the county and my judge that the school was having trouble addressing my cultural needs. My two biggest concerns were my education and my culture, and without addressing both I'd fall through the cracks. The school asked me to help with an after-school program for African students. I was no longer alone at the school; I had found my cultural group. I had even grown up with some of the students. My elders might have cut me off, but the kids didn't care.

After being expelled due to behavioral issues, I ended up enrolling and graduating from an online school. I'm now pursuing a degree in political science and social justice at Hamline University.

I always hear social workers say that the county is not the family of young people in foster care. But actually, they are. Our system is our family until we create our own definition of family. Until we figure that out, you—the county—are our family. When I was young, I just wanted people to know I was a Liberian and that I wanted my African food. By the time I got to junior high, I knew what family was and what culture was to me. I had built my own awareness of culture.

> By the time I got to junior high, I knew what family was and what culture was to me. I had built my own awareness of culture.

I wouldn't change being in foster care, or anything that happened to me. If I changed just one thing, I probably wouldn't have what I have right now. I wouldn't change being a child soldier—it gives me a different look at youth in the system. I wouldn't change being at the residential shelter so many times because I know now how institutions are run. I wouldn't have my green card if I hadn't been in foster care. I wouldn't have my foster mom, Kathy, whom I call Mom, a constant in my life.

Lucina Kayee is a foster alumna and current student at Hamline University. She can be reached at lkayee01@hamline.edu.

Recommendations for Social Workers to be Culturally Responsive

- Intervene early with intensive, culturally responsive in-home services. Even if it doesn't help keep families together, it can help kids' emotional well-being.
- Don't misinterpret actual abuse for a cultural way of doing things—in every culture there's a difference between hitting and abusing.
- Give foster youth the power to choose where to eat, what activities to do, and where they want to live.
- Do backgrounds on a young person's ancestral history. Betsy, my social worker, watched Liberian movies and talked to me about the Liberian women's rights movement.
- Understand a youth's individual needs. I came here as a political refugee, but I could still be deported. Betsy recognized my need for legal status and helped me get my green card.
- Don't assume that just because a young person is African that they must stay in an African home. Africa is a continent, not a country, with many cultures and religions.
- Think about possible outcomes of staying within one's community, if it might help or harm a child. Also consider whether the foster placement's location has cultural connections—neither the residential treatment center nor Kathy's home had African restaurants nearby, and African food was important to me.
- Don't pick up foster youth from school in a police car in front of everybody. Choose a discreet location.

Customary Adoption at White Earth Nation

Anita Fineday, JD, MPA

The White Earth tribal nation, located in northwest Minnesota, is an impoverished area of the state. The tribe has some of the highest rates of poverty and lowest rates of high school graduation in the state. White Earth has had large numbers of tribal children placed in foster care throughout the state of Minnesota and beyond. When I arrived at the White Earth tribal court as chief judge in 1997, the only code that existed covered hunting and fishing offenses. I had represented tribes, parents, and children in a lot of child protection cases. I was convinced the tribe should be the decision maker regarding the best interest of its children.

The tribe had no staff attorneys, and one part-time court administrator who also sold the tribal license plates. With more than 25,000 tribal members at that time, it was certain that tribal members were in need of a forum to resolve their disputes in a culturally appropriate manner.

By this time, I had been practicing law in state courts for almost a decade. I had some ideas about what was working for tribes and what was not, which were similar to the vision held by the White Earth child welfare leadership at the time, regarding decision

Two Mommies to Love Us

Lucy

Almost two years ago, I received a phone call from my cousin. She had just delivered a baby boy prematurely and was returning to prison and leaving her baby behind. She asked if I would visit her baby while he was in the hospital so he would not have to be alone. I did not hesitate—of course I would visit her baby for her. That evening I went to the NICU ward and held my little cousin for the first time. He was so little, but so perfect! I didn't know it at the time but he stole my heart.

Fast forward to today and I am the proud mother "auntie" to not only the little boy who stole my heart, but also his energetic big sister. The whole process was so natural and right for my family. Working with White Earth was encouraging for me because all social workers involved genuinely cared for me and for the kids. We also shared a common culture and history. I never felt uncomfortable when they visited or when I needed to share sensitive information. The whole process from start to finish was not stressful; it was a very natural process, and White Earth staff only affirmed my decision.

Now that I am officially the mother of two beautiful children, I feel a sense of peace for not only myself but also my daughter, son, and cousin. I consider these two little people our children. We will each have different roles, and I don't know what the future holds, but today I feel confident it is going to be good. They will grow up with two mommies who share the same grandparents, aunts, uncles, cousins, culture, and family history. Customary adoption has been a gift not only to me but also to my whole family and tribe.

making about the large numbers of White Earth children in foster care. We set about writing a civil procedure code and a child protection code.

Before we could really start developing a court system, we knew that it was crucial to have advice from the elders on the reservation. We were told very clearly that what we envisioned doing was badly needed on the reservation. Many of the elders had lost family members through the state foster care and adoption system. They were adamant that the White Earth tribal court could not simply operate as a replica of the state court system. They were especially adamant on the topic of terminating parental rights. They said the court would not be accepted by the community if we practiced termination of parental rights as the state did.

The elders voiced two clear and seemingly conflicting messages. They described the history of child rearing practices on the reservation as one that included the custom of taking other people's children in. We were told, "It has always been our way to take children in, whether they're family members, tribal members, or children from other tribes." One of the elders told us that there was no word for orphan in the Ojibwe language. The other message that we heard repeatedly from elders was that we (White Earth Nation) did not believe in terminating parental rights. They said, "Parents should always be able to have their children returned to their care when they are ready."

So we set about writing a child welfare code that encompassed these messages from our elders. We created something called a "suspension of parental rights." We had never heard this terminology before but we thought it best fit the concept we were trying to create—the idea that parental rights were only temporarily removed. We also tried to describe in writing the concept of customary adoption. We worried about how we could accurately describe in writing a custom with

which we were not that familiar. We were concerned that we were not cultural experts regarding our tribe. We were afraid we would get it wrong.

We started transferring child welfare cases into White Earth tribal court by the dozens. We struggled to keep up with the growth in caseloads within the court system and in the child welfare system. Both operated on bare bones budgets with little to no support staff. For the first 13 years of the operation of the court I personally drafted and typed every order issued by the court.

Today the court has completed more than 300 customary adoptions. They always include a contact agreement for the biological parent(s) that covers a broad spectrum of options. The contact agreement may include face-to-face visits with parents on one end of the continuum. On the other end a parent might only receive an annual school picture and a Christmas letter. The facts of the case, the willingness of the adoptive parents, and the desires of the child are all factored in when deciding what kind of contact will be allowed.

White Earth's customary adoption ceremonies are culturally appropriate for tribal members. They might include a spiritual leader to provide guidance, a drum group to sing songs of blessing and celebration, gifts for the child and family, or feast and star quilts in which to wrap the new family, which is a traditional symbol of new families being created by marriage or customary adoption.

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Anita Fineday, JD, MPA, is Managing Director of Indian Child Welfare at Casey Family Programs. She can be reached at afineday@casey.org.

Extended Family Increased Through Customary Adoption

Gloria

The beginning of our relationship with Sheldon started when he was four months old. A friend of mine asked if we could help out the family by taking Sheldon home on weekends. I said we would, and that was the beginning of our journey to adoption.

As the years passed, we were able to see and care for Sheldon quite often. When Sheldon was 7 years old, his mother was unable to care for him, and he was placed in the child welfare system. Because we already had a relationship with him and his mother, we were asked by White Earth Indian Child Welfare if we would consider applying for a foster care license and having him placed in our home in order to work toward reunification with his mother. We were more than willing to do that.

After about a year of unsuccessful attempts to reunify Sheldon with his mother, we were asked to adopt Sheldon. We worked with the White Earth Adoption Program and filed a customary adoption petition with the White Earth Tribal Court to begin the process of adopting Sheldon. Our experience with the customary adoption process was positive and encouraging. The customary adoption ceremony was a day we will never forget. The star quilts and gifts we were showered with on that day mean so much to us as a new family. Sheldon is now a part of our family and his siblings, grandmother, and other family members, who he sees on a regular basis, are an extension of our family as well.

Love Is Not Enough

Rachel Banks Kupcho, MPA, LGSW

I am an American Indian adult adoptee who was adopted as an infant in 1977, just a year before the Indian Child Welfare Act (ICWA) was passed. Until 2011, I only knew my wonderfully loving non-Indian adoptive family. I have, since then, been reunified with my Indian mother and family. This is what I can now say from my own experience: you cannot give someone their culture, but you can take it away. I was voluntarily placed for adoption; my Indian mother was 19 years old when I was born and felt she was too young and ill-equipped to raise a baby. With tears in her eyes, she shared with me that leaving the hospital without me was the hardest day of her life. Although I was placed on a voluntary basis, I still grew up without my culture. A generation before me, my mother was removed from her mother. As a single woman, her mother (my grandmother) was not deemed fit to raise her girls. My grandmother was, quite simply, coerced into relinquishing her rights to her three daughters with the promise that she would be able to raise her three sons. My grandmother did not want to risk losing all of her children so she agreed to a "voluntary" termination of parental rights, yet there was nothing voluntary about it. As a result, my mom and two aunties were raised outside of the family, community, and the culture.

Growing up, I knew that I was American Indian and yet I had no idea what it meant to *be* Indian. I struggled with identity, and as a result I carried a tremendous amount of self-doubt and shame. It was in working in Indian Country that I began to learn about my culture. My journey home really began in 2002, when I participated in a Wiping of the Tears ceremony for the first time. I finally felt as though I belonged and was recognized to be one of theirs. My heart and my spirit had long yearned for that. I was now on the road to healing. What was most memorable about that day was that my parents were standing outside of the circle supporting me as I went through the ceremony. It all culminated in my mind and I was finally able to articulate that this was exactly what my parents could not give me all these years. They provided me with all the love, support, and advantage they could, but they could not give me my culture.

Growing up, I knew that I was American Indian and yet I had no idea what it meant to *be* Indian.

From 2006 to 2009, I served as the ICWA Court Monitor through the Minneapolis American Indian Center. My most vivid memory, in monitoring child welfare hearings for compliance with state and federal law for Indian children in out of home placement, was of a mother and father who were "voluntarily" terminating their parental rights. At one point during the hearing, the mother, overwrought with emotion, stood up, sobbing, and it appeared that she might become combative. The deputies immediately encircled her and were ready to physically restrain her if need be. The father put his hand out to her and said something in Lakota; she immediately sat down and stifled her tears. My heart absolutely broke. She fought until the bitter end to keep her children, yet was defeated. I share this story because I feel it illustrates that not much has changed for Indian families. Parents are still losing their children, these children are losing their culture, and tribes are losing their future.

There are many schools of thought as to what constitutes good child welfare practice. In addition to the main tenets of safety and permanency, we need to consider culture to be of equal importance. With culture comes a host of family, stories, and traditions. When a child is placed outside of the home, it is not just taking that child away from the parent(s), but from an entire extended family, community, and a way of life. It is critical for children's healthy development to know who they are and from where they come. I did not fully understand the virtue and benefit of that until I was 34 years old. It was in a conversation with one of my Indian aunties who said to me, "Rachel, we always knew you would come home." My heart has been filled in ways I could not have imagined, and I have a much stronger sense of self. Now I can proudly say that I am Rachel Banks Kupcho from the Leech Lake Band of Ojibwe. I am the daughter of Jeanne Winslow and the granddaughter of Audrey Banks. I am also the daughter of Keith and Lisa Kupcho, whose unconditional love and support has only furthered my healing in my amazing journey home.

Rachel Banks Kupcho, MPA, LGSW, is a Dispositional Advisor in the Office of the Public Defender–Second Judicial District. Rachel can be reached at rachelbankskupcho@gmail.com.

Truth, Healing, & Reconciliation in Indian Child Welfare

Sandy White Hawk

The First Nations Repatriation Institute (FNRI) provides technical assistance, education, research, and advocacy on the process of Truth, Healing, and Reconciliation for the healing and return home of First Nations people impacted by foster care and adoption. The Institute promotes Truth, Healing, and Reconciliation as a way to address historical trauma and disenfranchised grief caused by removal of Indigenous children to foster care and adoption. In 2012 FNRI received 501(c) 3 status. FNRI is the first of its kind to address issues from the Adoption Era—the time before the Indian Child Welfare Act was passed in 1978.

FNRI evolved from a grassroots effort that began in 2000, to bring awareness and healing to Indian communities impacted by adoption and foster care. I wanted to develop a format to share the impact of adoption and began framing it in Truth and Reconciliation.

In 2003, while in Fort Thompson, South Dakota, an elder instructed me, "Don't talk about Truth and Reconciliation without including healing. If you do not leave time for healing, there will be no reconciliation." The Forums were born, and in 2004, I organized the first Truth Healing Reconciliation (THR) Community Forum.

During this Forum, adult adoptees told their stories to social workers, mental health professionals, adoption workers, and community members. A Guardian ad Litem inspired me to continue and develop the THR model when she reflected, "This will forever change how I advocate for Native children." She heard the pain of separation from culture and how that pain is not always connected to an abusive home, that being transracially adopted created its own unique set of lifelong, painful, confusing issues that Western clinical approaches often cannot address.

We used our traditional Lakota sacred songs and healing ceremony, which provided a therapeutic and spiritual healing of the intergenerational disenfranchised grief and trauma expressed.

At this first Forum there was an expressed need for adoptees to meet regularly. Now the Adoptee Potluck Talking Circle has met in Minneapolis monthly for 10 years. This social and spiritual time is therapeutic, a time to engage with other adoptees and birth relatives. We do not criticize or degrade our loving adoptive parents, but we do talk about the emotionally isolating experience of being transracially adopted.

In 2007, we provided a THR Forum for foster youth. A participant shared her experience of the Forum:

She heard the pain of separation from culture and how that pain is not always connected to an abusive home, that being transracially adopted created its own unique set of lifelong, painful, confusing issues that Western clinical approaches often cannot address.

"Two small brothers told their stories of being taken from their families and who were still in placement. Their story of abusive foster homes and what they went through was painful to hear. A white lady social worker broke down. She cried so hard her shoulders shook. She apologized to the boys although she had not worked with them. She apologized for not understanding and not listening and just following the policies of her organization. I cried when one of the little boys got up, went to her, put his hand on her shoulder, and said, 'It's ok, it isn't your fault,' and he allowed her to hug him. The strength of spirit that little one possessed amazed me. He was so small in physical form but mighty and pure in spiritual form."

The social worker represented the social workers who did not listen and who made decisions about that young man without discussing anything with him. In her expressed remorse the young man was heard. He saw her tremble with sadness and had compassion for her. They nurtured each other's pain.

In that moment the social worker experienced the revelation of what seemingly routine decisions have on foster youth. In that moment the young man who likely believed no one cared about his life became a teacher and a healing agent: In that moment he had a purpose, his life had a meaning.

All those years he was not heard. Not one social worker made sure his one simple request, to talk to his mother on his birthday, was acknowledged. At this moment he taught the social worker that of all the things that had been done to his body, not speaking to his mother on his birthday was the most painful. Maybe his social worker thought, "That parent doesn't care anyway. She's missed his visits." But it doesn't matter what we think. It matters what children need. It doesn't matter if a parent is hard to find or workers are overwhelmed with a huge caseload—it's the nature of the job, an incredibly hard job.

I have learned that grief and loss of adoption and foster care impacts everyone it touches, including workers.

The FNRI Model is simple:

- **Truth:** A process of sharing
- **Healing:** Encouraging; listening; traditional songs and ceremonies
- **Reconciliation:** A time to establish new relationships; evaluate; reflect for change

Reconciliation begins with the individual—it is a process, not an event. The elder from Fort Thompson was right. "If you don't leave time for healing there will be no Reconciliation." In that moment with the young man and social worker, healing took place. Reconciliation can now begin.

Sandy White Hawk is Director of First Nations Repatriation Institute. Sandy can be reached at sandywhitehawk@gmail.com.

Shannon's Story: The Importance of Resiliency, Support, and Cultural Identity

Shannon Geshick & Paula Okorafor, MALP, interviewed by Heidi Ombisa Skallet, MSW, LISW

Shannon Geshick, a Native American (Anishinaabe) mother of 4 kids, and Paula Okorafor, a White licensed psychologist, met about 15 years ago when Shannon was a young mother with three kids under age 6 and Paula was working in a local county child protection unit. Shannon became involved with child protection, and all three children were placed with relatives out of Shannon's home.

This was not Shannon's first involvement with child protection. She'd been in and out of foster care as a young child—her birth family had multigenerational parenting issues directly linked to the historical trauma of her community. Eventually she was adopted (around age 14) by a White family, along with her two younger siblings. Of her adoptive family, Shannon says, "I never felt like I could measure up or talk to them about problems or questions I had." Though her social worker had emphasized to her adoptive family the importance of maintaining a cultural connection for Shannon and her siblings, Shannon remembers her adoptive parents taking her to drum and dance only a couple of times. Each time she says it was "super awkward" and that she "felt like an outsider." She felt that her adoptive parents were not equipped to raise a Native child. She regularly heard slurs, even from her White family, including "backwards Indian."

Later, when Shannon became involved with child protection as a parent, she would reflect on her experiences as a child in foster care. "I always said my kids will never be in foster care, and here it happened. It took a chunk out of my self-esteem." With Paula's help and support, however, Shannon was able to reunify with her three children. Paula says Shannon's determination, resiliency, and love for her children helped Shannon reunify; Shannon says it was Paula's support and confidence in Shannon.

Cultural identity is important. Paula was the first person to support Shannon in honoring her identity. But it wasn't an overt aspect of Shannon's case plan. "Paula didn't come in saying, 'Hey, you're Native, let's do Native things.' She respected my cultural identity. There was a time when I had been with only White people and White culture. My cultural identity was really important because this is what people see when they look at me. I wanted to be proud. Paula knew my background; she understood the societal ills in my community. She acknowledged me as a Native person. Growing up, I heard so much horrible, stereotypical stuff. I love being Native—I wouldn't change it for the world—but it comes with a lot of hardships too. Just being Native is political."

Paula says that her focus was not on Shannon's cultural connection, but rather on Shannon's identity development, which included her culture. "My practice principle is to start with respect. You need to have a certain level of respect for the people you're working with. Start at being respectful, embracing the person with where they're at, what they have, what's important to them, and then build on that. It's important to understand where someone is coming from. Identity is a core concept to every single person, but for kids who are ripped from their moorings, it's even more important to acknowledge and understand it, and understand what they need to connect with their identity and culture. They need to be accepted for who they are."

Now, as a parent leader, one of Shannon's most passionate topics is prevention and mentoring. "If people knew how to parent, I think most would be better parents. I wish there was more concentration on prevention before the catastrophe happens. Kids experience trauma when they're separated from their parents. That was a huge traumatic piece of my and my kids' lives. My kids told me that they woke up and there were flashlights shining in their eyes—they were terrified. There needs to be something that happens before that moment, to prevent that moment."

Both Shannon and Paula encourage worker awareness and training of historical and intergenerational trauma, and of the impact of adversity in general, for effective work with parents. Paula emphasizes that

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The Color of Hope

Shrounda Selivanoff & Alise Hegle

I was an African-American woman in my mid-30s, married with two children, living in a neighborhood high in drug use and poverty. I thought I could control my drug use. Instead, I found myself in an ever-evolving, 8-year addiction. During that time, my husband and I divorced, and my sons moved in with family and friends. When I gave birth to my third child, child protective services took my daughter from me.

At first, my addiction numbed me and led me to ignore whatever services the system offered. For a year, I missed appointments and had only sporadic interactions with the department, the foster family, and my daughter.

But I also believe the system was not sincere in wanting to help me. In a permanency meeting I attended, her foster mother asked: "How could you return the child to someone like her?" I found out later that the social worker told the foster family that I had little hope of reunification. I felt those judgments, and they incubated into self-doubt and self-loathing. I felt like a statistic moving through the system rather than a person making human connections.

Luckily, I did have the support of my family, lawyer, counselors, employers, and friends. Each one allowed me to see a different picture of me and a different possibility for my life. It took me another year and four months to reunify with my daughter.

Alise's Story

I first became involved with the child welfare system as a 25-year-old White woman. My life then was comprised of poor choices, low self-worth, and inadequate coping mechanisms including drug use. When I gave birth to my daughter, she was immediately placed in foster care, partly due to the 7-year prison sentence I was facing for committing property crimes to fuel my addiction. My judge decided I would never have committed those crimes if it weren't for my addiction, and I went to treatment instead of prison through Drug Offenders Sentencing Alternatives.

Still, during the first 11 months, I received no visits with my daughter. My caseworker said in court that it was unlikely I was ever going to change and the best outcome would be to allow my daughter to be adopted. When I heard that, I was terrified—and my belief that I was worthless penetrated to the core of my being.

Fortunately, I, too, had support—from my mother, my attorney, and the social worker in my attorney's office. It was their uplifting messages that allowed me to believe I could be the parent and advocate I've become. Once I began having visits with my daughter, I was able to reunify with her in just four months.

The Color of Hope and Trust

For both of us, it was the power of people inside and outside the system who truly believed in us that allowed us to see ourselves as more than drug-addicted bad mothers. What the research suggests, however, and what we've seen as parent advocates, is that race plays a role in whether parents and children find the support that allows them to succeed.

When I (Shrounda) look at our policymakers, I often feel that the problems of my community are an eyesore they'd rather not see. But I also know that with effort, it is possible to decrease the number of children of color in foster care. I am a member of the Washington State Racial Disproportionality Advisory Committee, which was established by the legislature in 2007 after Black social workers in King County, Washington, worked on their own time to gather data to demonstrate that children of color were overrepresented in foster care. The committee developed a tool for agencies to consider the impact their policies might have on people of color.

Using this tool, the Children's Administration found that criminal background checks were a barrier to placing many children of color with family, even when past convictions were decades old. Subsequently, the state legislature significantly reduced the list of crimes barring people from having a child placed in their care. We hope this essential work to address bias and barriers continues—here in Washington State and across the country.

Removing Barriers, Building Power

When I (Shrounda) would visit my daughter in my agency's visiting room, seeing so many Black families like mine added to the shame I already felt. Visits are supposed to be an opportunity to bond with your child. But when I visited my daughter, I felt segregated, discriminated against, and inadequate.

Recently, I (Alise) was mentoring an African-American parent who said, "My social worker can't stand me because I'm Black." The parent had witnessed the social worker being nice to a White family, but consistently dismissive to her. Neither the parent nor I knew whether the difference in attitude was because of race. But the parent's perception of racism added to the tension that existed between them.

I know how powerless and hopeless many families feel because their children are placed with strangers. When you add to this the pain of discrimination, both real and perceived, those feelings can become almost unbearable. The child welfare system should empower people who are already disempowered, not disempower them further. My daughter is at home with her mommy. It pains me to think that might have been less likely to happen if I weren't White.

I know how powerless and hopeless many families feel because their children are placed with strangers. When you add to this the pain of discrimination, both real and perceived, those feelings can become almost unbearable.

Alise Hegle is a Contracted Social Service Worker at the Washington State Office of Public Defense and Parent Engagement Coordinator for Catalyst for Kids, a division of the Children's Home Society of Washington. Shrounda Selivanoff is Family Case Manager at Evergreen Manor Inpatient Treatment and a member of the Washington State Racial Disproportionality Advisory Committee. Shrounda and Alise can be reached via Rise director Nora McCarthy at nora@risemagazine.org.

Experiential Learning in Child Welfare Education

Elizabeth Snyder, MSW, LISW

The Center for Advanced Studies in Child Welfare administers a Title IV-E Child Welfare Education and Training Program at the University of Minnesota School of Social Work, which provides financial support, professional development opportunities, and career development and support to Master's level social work students interested in pursuing a career in public or tribal child welfare. As part of this training and education program, we have constructed experiential curriculum for our Title IV-E Child Welfare Program (IV-E) students.

Experiential learning is an opportunity for interactive learning outside of school walls. This is accomplished through learning new concepts and their application to child welfare social work practice. For us, the purpose of expanding content into an experiential learning format was to help students understand disparity and disproportionality concepts from a different view. Through personal narrative, place-based historical teaching, visits to community agencies serving specific communities, and targeted discussion, it is our hope that students begin to understand concepts in a way that can shape their future child welfare practice.

Experiential Learning Days

With the belief that education and training of the workforce can have an influence on reducing disparity and disproportionality, experiential learning has become a requirement for all first-year MSW IV-E students, both full program and advanced standing. Our Experiential Learning Day in the Native American Community (ELNA) has been held every year for the last five years. We are in the process of developing an Experiential Learning Day in the African American Community (ELAA), which will be piloted in the fall and spring of the 2015-2016 academic year. Thus far we have focused our development of experiential learning within the American Indian and African American communities, as these two communities are significantly overrepresented in Minnesota's child welfare system and experience high rates of disparity at key decision points.

Both ELNA and ELAA are co-created between university faculty, IV-E program staff, and community members. The delivery of content is done primarily by community members, with guided discussion, sharing of concepts, and introduction of relevant theory done by faculty and IV-E program staff. This is intentional and essential. Having key members of communities (such as community elders, storytellers, and program staff) present content gives ownership of the content to the community, allowing the community to direct the learning process and dictate what is important and essential for social work students to know and understand.

ELNA is a two-day event with the first day typically in October and the second in February. The first day includes bus travel to historical and sacred sites and current service settings, with guided tours, small group discussions, and time for personal reflection. We discuss the impact of historical trauma, connections between concepts, historical experience, racial disparity, and American Indian child welfare, and how all of this affects child welfare practice. The second day is held at a local social service agency, Ain Dah Yung Center in Saint Paul, and focuses on policy, practice, historical context, and addressing disparity. ELAA will also be a two-day event featuring storytelling, sites of historical importance within the Twin Cities, and visits to local social service agencies.

The importance behind leaving the classroom is that students have the opportunity to experience public places from a different perspective. Things that may seem innocuous or even a source of pride may elicit a different response in others. For example, during ELNA all students ride a bus together. We ride down main thoroughfares within our metropolitan city and county. We ask students to consider the names of the streets on which we are driving and the county in which we are located. Who are these people? Why have we named roads, counties, and landmarks after these people? How might different communities experience this?

Lessons Learned

Over the course of the last five years we have a learned a number of important lessons. We have moved from a single day to a multiple day format. In its first year, ELNA was a full 8-hour day packed with emotionally charged content, and students reported feeling overwhelmed. Breaking the day into two days allows students to absorb more of the content—as more time is devoted to application and processing of the day—without experiencing emotional fatigue. More time also allows space for students to reflect and apply the subject matter of the day.

Anecdotal evidence suggests that students find meaning in ELNA. Learning concepts such as historical trauma and micro-aggressions through an experiential format has allowed students to more deeply understand the experiences of American Indian families within child welfare. We anticipate that ELAA will also receive a similar response next year. In addition to benefits for students, it has been our experience that the development and implementation of experiential learning has served to strengthen relationships with faculty and community partners as well.

Experiential learning has helped our IV-E students expand their worldview and consider child welfare practice with a critical lens around the experience of marginalized communities. Experiential learning is a pedagogical approach that can be easily adopted by other child welfare programs and adapted for other communities. The benefits associated with this approach are significant.

Elizabeth Snyder, MSW, LISW, is Director of Professional Education at the Center for Advanced Studies in Child Welfare, School of Social Work, University of Minnesota. She can be reached at snyde276@umn.edu.

Changing Systems Through Observation: Courtroom Monitoring of Indian Child Welfare Act Cases

Kathryn Fort, JD

More than any other area of law, family law cases are stories. Family law cases become personal quickly. While that happens, however, the cases also become routine, and the stories seem to be the same. Parents cannot take care of their children. There are substance abuse problems and mental health problems. Lawyers, judges, guardians ad litem, and social workers see each other frequently in the course of a day, a week, a month. The repetitive nature means the only parties who are new to the courtroom, who have no idea how to interpret what is happening around them, are the parents—the subject of the proceeding. For American Indian families, this process is entwined with the history of abusive state and federal family law policies specifically directed at American Indian families, including the Indian Child Welfare Act of 1978 (ICWA) (Atwood, 2010). In so many ways, ICWA is the codification of those stories.

In many state systems, practitioners are simply unable to treat family law cases as individual cases due to staffing and funding issues. Practitioners make assumptions about the parents and what's best for children based on previous cases or their own beliefs. ICWA was designed to force the system to treat Indian family law cases differently, individually. However, the nature of the law puts it at odds with the current systemic courtroom routines. This causes resentment about the law and, in turn, the families who receive its protections.

One project has been designed to increase ICWA compliance through collaborative change to the systems. QUICWA, a project by the Minneapolis American Indian Center, consists of a group of interested stakeholders who have created a checklist to measure what happens in each individual hearing where the court must apply ICWA. In Michigan, the Michigan State University College of Law has observed ICWA hearings in three counties, using law students as observers. Though family law is driven by narrative, collecting data is vital to identify patterns surrounding fairness and due process in the individual stories. Having outsiders in the courtroom can be disturbing and sometimes uncomfortable to the regular practitioners. But if both the practitioners and observers are willing to work in good faith, their perspectives can bring needed attention and change to difficult cases.

Gaining court cooperation for an observation project can be either fairly easy or incredibly difficult. Without the court's cooperation, however, there is no way to share the data to help with quality improvement. Even then, determining how to best share that data also raises a number of questions. For perhaps obvious reasons, most judges and referees usually feel the need to defend their decisions rather than take the data at face value. Emphasizing that no one is perfect all of the time, or that the goal is improved change over time helps in the delivery of data. On the other hand, some state actors prefer the observer's presence, understanding the information they gather is inherently valuable.

The goals of an observation project are multifaceted. Most of the stakeholders are particularly interested in collecting some form of data on ICWA compliance in state court. Having an outside observer present provides a counter-weight to the familiarity of the state court actors. The observer notices issues that are otherwise overlooked as routine. The observer notices when the case goes off the record, what happens on the record versus off the record, or when a courtroom does not have enough chairs for all of the interested parties. An observer has the unique ability to understand the difficulty of when a party, usually the parent, doesn't know or understand who all the participants are in the room. While the observers eventually learn the system, their initial confusion provides a small window into what the non-practitioners feel when entering the courtroom. The very act of setting up an observation process leads to positive change as observers make the state actors aware of their own routine motions and their potential impact on the non-practitioners involved.

Once the program is set up, training and scheduling student observers to go to court takes a fair amount of administrative work. Observers must be notified of the hearings, be able to work out their availability to attend hearings, and be trained on court processes and procedures. The observers—future lawyers—gain experience and learn how abuse and neglect cases work through the system. Observers have had to figure out how to politely not answer questions from referees such as, "How am I doing?" or "Is this how you would like me to do this?" They see what it means to become familiar with pain, and then what happens when someone becomes numb to it. If they plan on practicing in the area, they have made invaluable contacts and are well ahead of their colleagues when they graduate.

The QUICWA observation process will not, on its own, force compliance with ICWA. It is, however, a valuable tool to add to education, training, and additional data driven projects. More than 30 years after its passage, ICWA continues to confound courts. The law is not difficult, but compliance with the law requires state and county systems to see American Indian families individually, and to dedicate the time and resources to them. Our systems must do better by way of our children.

Compliance with the law requires state and county systems to see American Indian families individually, and to dedicate the time and resources to them.

Kathryn E. Fort, JD, is Staff Attorney for the Indigenous Law and Policy Center at Michigan State University College of Law. She can be reached at fort@law.msu.edu.

A longer version of this article first appeared as "Observing Change: The Indian Child Welfare Act and State Courts" in the New York State Bar Association Family Law Review (Spring 2014). Excerpts used with permission from the author.

Differential Response: A Racial Equity Analysis
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American children tended to fare slightly better in the FA pathway compared to the FI pathway for odds of being placed in out-of-home placement. Multiracial children tended to fare slightly better in the FA track compared to the FI pathway for odds of being re-reported.

Implications and Conclusion

Results should be interpreted with caution, as some of the findings were significant, but the effect was small, with odds ratios very close to 1 (as an odds ratio of 1 would indicate that the odds of a particular outcome were equal for all races). However, even small effects of race are important to recognize in working toward racial equity in child welfare. Although disparities diminished for some of the decision-making points, disparities persisted throughout the study timeframe. These findings highlight the importance of using a racial equity lens when implementing new approaches in child welfare, particularly for approaches that are widely implemented such as DR. Using a racial equity lens can help ensure equitable implementation and can provide data to better understand the impact of policies on communities of color and historically over-represented communities. Child welfare agencies can also play an important role in addressing disparities at the initial reporting stage, such as joining efforts to help build capacity within communities to address risk factors such as poverty, as well as addressing potential reporting bias within the larger community that disproportionately impacts communities of color. The findings in this study also highlight the need for more research on the unique experience of Multiracial and American Indian children, two groups that are underrepresented in the current racial disparity literature.

Annette Semanchin Jones, PhD, is Assistant Professor at University at Buffalo State University of New York. She can be reached at amsemanc@buffalo.edu.

An Evidence-Informed Practice Model for Urban Indian Child Welfare Services
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case opening. DIFRC has found that early identification makes a huge impact on decreasing the number of Indian children who fall through the cracks and thus fail to benefit from the ICWA and other needed services.

Early identification begins with caseworkers and supervisors inquiring about American Indian heritage in all families coming into contact with CPS. It is best to do this during not only the initial investigation but also the assessment phase of a case. When a family indicates that a child has Native heritage, a worker must immediately follow their department's procedures for tribal notification under the ICWA. As the case moves forward, the worker should continue to talk with the family so that case plans and services can reflect the family's culture connections and incorporate services to meet cultural needs. Early identification also supports the tribal notification requirement of the ICWA, and, just as important, a worker's commitment to maintaining Native children's connections to their families, tribes, and cultures—the true heart and spirit of the Act.

Nancy M. Lucero, PhD, LCSW, is Research Associate Professor at the University of Denver, Graduate School of Social Work (GSSW) and Director of Evaluation for the Capacity Building Center for Tribes, a Children's Bureau project administered by GSSW's Butler Institute for Families. Dr. Lucero can be reached at nlucero@du.edu.

Initiative Serves as a Culturally Responsive Community Outreach and Recruitment Model for Foster Care and Adoption with African Heritage Communities
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members of the community in this effort is key; agencies must reach out to leaders and mentors within the African heritage community. Agencies must solicit the people who were already recruited to help in order to determine and build on their reasons for getting involved. They are the best individuals to recruit others.

Outcomes and Recommendations

The council will make a final evaluation as well as policy recommendations to DHS. The Rally for Foster Care and Adoption Initiative's Advisory Committee, community partners, foster care and adoptive agencies, and community stakeholders will provide input about solutions, ways to improve best practices, and ways to help African heritage children who continue to face adversities in the child welfare system. This is not just an African heritage problem; it is a problem that affects everyone. Investing more in African heritage children's safety, health, and well-being, as well as their families, will create a better quality of life for all communities, save the state money in the long term, and provide a major return on investment by helping residents contribute more toward Minnesota's economic growth, sustainability, and future.

Deborah Brown, MPA, BA Social Work, is Community Outreach Specialist for the Rally for Foster Care and Adoption Initiative, Council on Black Minnesotans. She can be reached at deborah.brown@state.mn.us.

Shannon's Story: The Importance of Resiliency, Support, and Cultural Identity
Continued from page 32

"workers need to at least have a basic understanding and acknowledgement of how that background [of adversity] has impacted the person in front of them today. One's history doesn't determine one's future, but it can certainly impact it. Look at everyone as individual and start there. Workers also need to bridge the contentious relationship in order to let the client know that they're there to help the client meet goals. Don't come in as 'I'm the worker and you're the client, and there's a gap between us.' Really, your goals should be the same."

Shannon adds, "Having somebody who listened and believed in me made a world of difference. Paula was one of the very first people in my life that told me I could do something. I got my first professional job about 6 months after my case closed. I thought, I don't have to feel bad all the time—I can do something. It was a different feeling. I have three degrees now. I never thought I'd finish even one. I just needed to know that I could do something."

Paula Okorafor, MALP, is a former Child Protection Social Worker at Hennepin County. She can be reached at paula.okorafor@yahoo.com.

Shannon Geshick is Parent Leader for Child Safety and Permanency at Minnesota Communities Caring for Children. She can be reached at shannongeshick@gmail.com.

Continued

Agency Discussion Guide

The Agency Discussion Guide is designed to help facilitate thoughtful discussions during supervision and team meetings about the information presented in this issue.

Discussion on Practice Implementation

1. This issue opens with discussions on the presence of racial disparities and disproportionality in child welfare (see Dettlaff, Boyd, Jackson, and Ombisa Skallet), while the rest of the issue focuses on culturally responsive approaches to child welfare practice as a means to improve outcomes for all children and families. What factors do you think have had the most impact on the disproportionate representation of children and families of color in child welfare? Why do you think it is important to understand possible root causes of racial disparities and disproportionality?

2. The perspectives section of this issue includes articles on the value of one's cultural identity written by adoptees, foster alumni, and child welfare workers (e.g., Kayee, Geshick & Okorafor, Banks Kupcho, and White Hawk). What was your initial reaction after reading these articles? In what ways do we support youths' cultural identity needs? How can we improve our practice in this area? What are some barriers or challenges to improving practice, and how can we overcome these?

3. All of the articles highlight the importance of being culturally responsive throughout all aspects of child welfare practice. Think about how you interact with children and families from diverse communities. What are some things you can do to be more culturally responsive? How can you support children, families, and the professionals working with them with their cultural needs? See McPhatter & Burdnell Wilson, Geary, Merkel-Holguin, Dalbec, Lucero, Conradi, Denby, Kayee, Geshick & Okorafor, and Selivanoff & Hegle.

Discussion on Agency- & System-Level Changes

1. Some of the causes of disparities and disproportionality in child welfare have been attributed to systemic issues, such as institutional bias. What are some ways that we can effect change at the agency and system levels in order to help reduce disparities and disproportionality? Consider cross-systems collaboration in your discussion. See Dettlaff, Boyd, Jackson, Ombisa Skallet, Fineday & Dumas, Lucero, Fineday,

2. The federal Indian Child Welfare Act (ICWA), as well as several state laws including Minnesota's and Michigan's Indian Family Preservation Acts, require states to provide active efforts to preserve American Indian families and work with tribes to ensure that connections are maintained. Yet the federal Multiethnic Placement Act (MEPA) of 1994 and the Interethnic Adoption Provisions (IEP) of 1996 require child welfare agencies to not deny foster or adoptive placements based on race or ethnicity of either the child or prospective foster or adoptive parent. After reading Jackson's article on tribal sovereignty, what is your understanding as to why these laws can coexist without conflict? Fort discusses ICWA compliance in the courts—what are the processes we have in our agency to ensure compliance with federal (and state, if applicable) laws related to placement of children of color? How can we be culturally responsive without violating MEPA-IEP? See Brown and Scheetz & Flavin.

3. Education and training are often used as a way to impart new best practice guidelines and policies. Bussey, White, & Day wrote about how one tribe has developed foundation-level training for their child welfare workers based on the cultural values and beliefs of their tribe. Anderson & Williams-Hecksel and Snyder wrote about training social work students on being culturally responsive prior to entering the workforce. How does your agency currently utilize training and education to promote cultural responsiveness? What are some ways in which you can ensure that culturally responsive strategies learned in training are applied in practice? If your agency does not currently require or promote culturally responsive training, what can you do to gain these skills?

Resources

This list of resources is compiled with input from CW360º authors and editors, as well as staff from both CASCW and CRTCWS

Minnesota Organizations & Resources

- *Center for Regional and Tribal Child Welfare Studies, University of Minnesota–Duluth* [Organization]—http://www.d.umn.edu/sw/cw/
- *Council on Black Minnesotans* [Organization]—http://mn.gov/cobm/?agency=CBM
- *Cultural Wellness Center* [Organization]—http://ppcwc.org/
- *The ICWA Law Center* [Organization]—http://www.icwlc.org/
- *Minnesota's Child Welfare Report 2013*, Minnesota Department of Human Services (DHS) [Report]—https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5408F-ENG
- *Directory of Minnesota Organizations Serving Diverse Populations, January 2011*, Minnesota DHS [Report]—https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4411-ENG
- *Minnesota Child Welfare Disparities Report, February 2010*, Minnesota DHS [Report]—https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6056-ENG

National Organizations & Resources

- *National Center for Cultural Competence, Georgetown University, Center for Child and Human Development* [Organization]—http://nccc.georgetown.edu/
- *National Native Children's Trauma Center, University of Montana* [Organization]—http://iers.umt.edu/National_Native_Childrens_Trauma_Center/
- *National Indian Child Welfare Association* [Organization]—http://nicwa.org
- *Attorney General's Advisory Committee on American Indian/Alaska Native Children Exposed to Violence: Ending Violence so Children Can Thrive* [Report]—http://www.justice.gov/sites/default/files/defendingchildhood/pages/attachments/2014/11/18/finalaianreport.pdf
- *Shattered Bonds: The Color of Child Welfare*, Dorothy Roberts [Book]
- *Post Traumatic Slave Syndrome: America's Legacy of Enduring Injury and Healing*, Joy DeGruy Leary [Book]
- *African American Children and Families in Child Welfare: Cultural Adaptation of Services*, Ramona W. Denby & Carla M. Curtis [Book]
- *HistoricalTrauma.com*, Maria Yellow Horse Brave Heart [Website]
- *Resources to Enhance Child Welfare Training Curricula, Bridging Refugee Youth & Children's Services* [Organization]—http://www.brycs.org/clearinghouse/Highlighted-Resources-Resources-to-Enhance-Child-Welfare-Training-Curricula.cfm
- *Indigenous People and the Social Work Profession: Defining Culturally Competent Services*, Hilary N. Weaver [Article]—https://www.socialworkers.org/diversity/ethnic/weaver.pdf
- *Cultural Competence Approaches to Evaluation in Tribal Communities*, Paulette Running Wolf, Robin Soler, Brigitte Manteuffel, Diane Sondheimer, Rolando L. Santiago, and Jill Shephard Erickson [Article]—http://files.eric.ed.gov/fulltext/ED473272.pdf
- *Developing a Culturally Restorative Approach to Aboriginal Child and Youth Development: Transitions to Adulthood*, Estelle Simard and Shannon Blight [Article]—http://www.fncfcs.com/sites/default/files/online-journal/vol6num1/Simard_Blight_pp28-55rvsd3.pdf
- *Cultural Adaptation of Evidence-Based Practices*, Hogg Foundation for Mental Health [Website]—http://www.hogg.utexas.edu/initiatives/cultural_adaptation.html
- *Exploring and Assessing Intercultural Competence*, Alvino Fantini, Center for Social Development [Report]—http://csd.wustl.edu/Publications/Documents/RP07-01.pdf

Practice Tips

- *NASW Standards for Cultural Competence in Social Work Practice*—http://www.socialworkers.org/practice/standards/NASWCulturalStandards.pdf
- *Workforce Resource 1-Page Summary #11: Cultural Competence*, National Child Welfare Workforce Institute—https://ncwwi.org/files/Cultural_Competence_1pager_11.pdf
- *A Practice Guide for Working with African American Families in the Child Welfare System*, Minnesota DHS—https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4702-ENG
- *Working with African American Adoptive, Foster and Kinship Families*, AdoptUSKids—http://adoptuskids.org/_assets/files/NRCRRFAP/resources/working-with-african-american-families.pdf
- *Finding African American Families for Foster Children: Tips for Workers & Agencies*, NACAC—http://www.nacac.org/adoptalk/findingfamilies.html
- *All Things Are Possible: No Limits Adoption Recruitment for African American Children*, Child Welfare Information Gateway—https://www.childwelfare.gov/topics/management/funding/funding-sources/federal-funding/cb-funding/cbreports/resource-center/african-american/#tab=summary
- *Working With African-American Families*, Child Welfare Information Gateway—https://www.childwelfare.gov/topics/systemwide/diverse-populations/africanamerican/
- *Working With American Indian Children and Families*, Child Welfare Information Gateway—https://www.childwelfare.gov/topics/systemwide/diverse-populations/americanindian/
- *Teaching Tolerance: A Project of the Southeran Poverty Law Center* [Website]—http://www.tolerance.org/
- *Becoming Culturally Responsive Educators: Rethinking Teacher Education Pedagogy*, National Center for Culturally Responsive Educational Systems [has relevance to child welfare]—http://www.nccrest.org/Briefs/Teacher_Ed_Brief.pdf
- *Guidelines for Providers of Psychological Services to Ethnic, Linguistic, and Culturally Diverse Populations*, American Psychological Association—http://www.apa.org/pi/oema/resources/policy/provider-guidelines.aspx

About *CW*360°

Child Welfare 360° (*CW*360°) is an annual publication that provides communities, child welfare professionals, and other human service professionals comprehensive information on the latest research, policies and practices in a key area affecting child well-being today. The publication uses a multidisciplinary approach for its robust examination of an important issue in child welfare practice and invites articles from key stakeholders, including families, caregivers, service providers, a broad array of child welfare professionals (including educators, legal professionals, medical professionals and others), and researchers. Social issues are not one dimensional and cannot be addressed from a single vantage point. We hope that reading *CW*360° enhances the delivery of child welfare services across the country while working towards safety, permanency and well-being for all children and families being served.

CASCW
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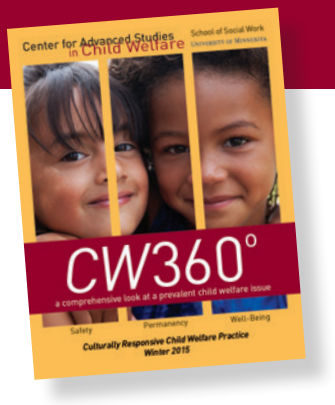

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In This Issue of *CW*360°

- An overview of racial disparities and disproportionality in child welfare, including numbers, definitions, frameworks, and potential solutions
- Ways child welfare practitioners can work toward being culturally responsive and supporting the cultural identity of children and families
- An in-depth discussion on tribal sovereignty, tribal-state agreements, and historical trauma
- Challenges and solutions in utilizing evidence-based practice and collecting data for research when working with diverse populations
- How counties, tribes, and other agencies developed practice models and strategies based on cultural traditions, values, and beliefs
- A review of nationally recognized culturally responsive practice strategies, including Family Group Decision Making and Positive Indian Parenting
- Strategies for addressing retention and turnover in the child welfare workforce through a focus on diversity and culture
- Culturally specific foster and adoptive parent recruitment methods
- Birth parent, adoptee, and foster youth perspectives on the importance of culture and the impact of bias in child welfare practice

*CW*360°

a comprehensive look at a prevalent child welfare issue

Feature Issue: Culturally Responsive Child Welfare Practice, Winter 2015

Executive Editor : Traci LaLiberte
Managing Editor : Tracy Crudo
Editor : Heidi Ombisa Skallet
Guest Co-Editor : Priscilla Day
Design : Heidi Wagner
Layout : Karen Sheahan

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