

6-12-2024

# Implicit Biases and Attitudes on Decision Making Among Child Protection Workers

Demetria Turnage  
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# Walden University

College of Allied Health

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Demetria Turnage

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Walden University  
2024

Abstract

Implicit Biases and Attitudes on Decision Making Among Child Protection Workers

by

Demetria Turnage

MA, Capella, 2014

BS, Metropolitan State, 2010

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Clinical Psychology

Walden University

May 2025

## Abstract

Racial disproportionality remains a historical issue in child welfare systems. It was important for this research to focus on characteristics, professional qualifications, and racial attitudes of those in child welfare decision-making roles to examine how they contributed to racism. To address the gap in the literature, the relationship between years of experience, race/ethnicity, risk of harm, advocacy, racial attitudes, and decision-making among child protection were examined to develop a greater understanding of the ongoing issues and development of reforming the child welfare decision-making process to capture racism among child protection workers. Increasing equality in the child welfare system will benefit African Americans and the child welfare. The theoretical foundation for this research study were critical race and structural discrimination theories. The research questions examined the relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers, the relationship between race/ethnicity and racial attitudes, and if racist attitudes as expressed on the Racial Attitude Survey predicted racial bias in case decision-making. A quantitative, ex-post-facto design was used; an independent samples t-test compared racial attitudes assessed on the Racial Attitude Survey between White and non-White caseworkers. There were significant positive correlations between race/ethnicity and racial attitudes. White child protection workers showed favorable attitudes toward families perceived to be of their own race. Similar results existed for non-White child protection workers. Findings may be used to develop standard procedures and trainings for clinicians and administrators to better serve their clients and employees.

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## Dedication

This dissertation is dedicated to the memory of my beloved grandparents, David P. Russell and Louella C. Nicholson. Your love, wisdom, and strength continue to inspire me every day. Though you are no longer here, your spirit lives on in my heart. This dissertation is a testament to the influence and values instilled in me and the belief I had in myself that led me down this path. I am thankful for the both of you.

## Acknowledgments

I would like to give a big thank you to those that encouraged, supported and helped me be successful in my journey. My daughter, Alexis Turnage, thank you for your patience. I have been in school your entire life. You were helpful, encouraging, supportive, and the best listener. My beloved parents, Leon and Jacqueline Fergerson, for your unwavering support, love, beliefs, and encouragement throughout. D'Andre Fergerson and Leon Fergerson Jr, my brothers, who always believed in me. Margaret Newell, my aunt, who always had encouraging words. My cousin, Jamie Daniels, who was always available when I needed to talk; always willing to help and provide encouragement. My best friend, Tracy Williams, who was helpful and encouraging through it all. To all my family and friends, I thank you for your support and I am eternally grateful for your positive thoughts and encouragement. The journey was challenging but being surrounded by family and friends made it worthwhile as this was not an easy task.

To my committee, thank you for helping me get through it.

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## Chapter 1: Introduction to the Study

Children and families of color in child welfare systems are overrepresented compared to White youth and families (Johnson et al., 2007). Issues in child welfare systems consist of disparities in out-of-home placements and reunification rates (Boyd, 2014). The persistent increase in inequalities and disproportionality raise questions about racial inequities in child welfare systems that remain unclear (Dettlaff & Rycraft, 2010). According to Boyd (2014), patterns of disparities and disproportionality are no longer the focus as are explanations of why they occur.

Racial disproportionality is associated with disproportionate need, racial bias in child welfare decision-making, and interactions between family risk and child welfare practices (Chibnall et al., 2003; Johnson-Motoyama et al., 2018). Research participation involving child protection workers in day-to-day decision-making in child welfare systems is limited (Center for the Study of Social Policy, 2011). The inclusion of these critical decision-makers can provide important information that many are seeking. Why is racial disproportionality present?

Key decision-makers remain an untapped source in understanding racial overrepresentation in child welfare systems (Dettlaff & Rycraft, 2010; Miller et al., 2012). Child welfare system decision-makers may provide the voice needed to understand their role in the ongoing issues. Examination of racial disproportionality and attitudes may identify factors that increase the risks of involvement in child welfare systems and unfavorable decision outcomes for children and families of color (Altman, 2008; Marshall & Haight, 2014).

## **Background of the Study**

The Child Welfare System is a group of services and people whose duties are to protect children's best interests and promote their well-being. The due diligence of the system is to ensure safety, achieve permanency and strengthen families (Child Welfare Information Gateway, 2020). Families vary in their needs, and it is critical to meet them where they are. The child welfare system offers a variety of programs, and service delivery is essential to everyone involved in child welfare systems. Child protection workers' role in decision-making plays an integral part in case substantiation. Understanding the factors that influence case substantiation and decision-making in child welfare systems is needed. These decisions determine the fate of children and families of color in child welfare. Child protection workers' racial attitudes or biases, experience, race/ethnicity, perception of risk of harm, and advocacy play a role in decision-making. Subjectivity and objectivity in the decision-making process depend on the discretion given to decision-makers and the child welfare system (Skivenes & Tonheim, 2016).

The child welfare system is not without issues, and these issues date back over 40 years based on data trends, statistics, and previous research (Dettlaff & Rycraft, 2010; Marshall & Haight, 2014). According to Boyd (2014), over the past 3 decades, the extent of racial and ethnic disproportionality and disparities in child welfare systems has been a complex social problem. There are notable differences in decision points, reporting, investigations, case substantiation, out-of-home placements, reunifications, services, and resources.

Critical race theory (CRT) and structural discrimination theory imply that racism manifests in decision-makers or systems that determine outcomes for disadvantaged groups. Children and families of color are powerless among the privileged. Race is a primary determinant that accounts for differences in the decision-making process. CRT is appropriate to address racial disproportionality and disparities (Hayes-Greene & Love, 2018). This theory explains how society functions, perpetuating racial bias and disparities. Structural discrimination theory supports White privilege, thus creating disproportionality in systems, a phenomenon referred to as known as structural racism (Hayes-Greene & Love, 2018). Providing services or support to various cultures requires more than universal assumptions. Differences in beliefs, values, and attitudes vary among cultures (Gallardo et al., 2009). Cultural differences contribute to how group members function, receive or respond to services and support. It is necessary to recognize group members' differences in functionality and the factors that influence racial attitudes and biases among child protection workers.

To acknowledge cultures does not constitute an understanding of who people of color are and the latter is critical to determining what is and what is not appropriate for families in child welfare. To make an informed decision about the best interest of children and families, an objective approach can minimize the risk of bias and favoritism toward specific populations in the decision-making process. Subjectivity can lead to biased decision-making protocols against certain racial groups in child welfare systems. When child protection workers have the freedom and discretion to substantiate cases, there is an increased risk of subjectivity in the decision-making process. An example of



subjectivity occurs when decisions are made without all the pertinent information and quickly substantiating a case without probable cause.

Cultural deficits and lack of diversity create challenges in child welfare systems that impact the ability to make informed decisions. Lack of knowledge, skillset, or experience jeopardize informed decision-making. Understanding the importance of multiculturalism in a diverse society with an array of cultures is a necessary skill in child welfare systems. Working in the field with a restricted or closed mind is challenging. Multicultural competence involves developing skills, self-awareness, knowledge, and understanding of unique personal and situational variables (Bernal et al., 2009).

Lack of cultural understanding can lead to misinterpretation, which results in unfair treatment or poor decisions. Culture and context are influential in decision-making. Case processing and decision-making in child welfare systems are important considerations (Chavis & Hill, 2009). Examining the decision-making process from a personal, structural, and systemic standpoint is essential to acquiring in-depth insight. How do child protection workers contribute to the adversities of children and families of color in child welfare systems?

### **Problem Statement**

Decision-making among child protection workers is vital to the protection and well-being of children. Research participation involving child protection workers involved in day-to-day decision-making is limited, and disparities and disproportionality among African Americans continue to increase in child welfare systems. Research has focused on factors that predispose African Americans to child welfare engagement.

Factors such as the intersection of poverty and race increase risk; however, these factors are only a part of the problem and do not account for the consistent increases (Center for the Study of Social Policy, 2011). Looking at the characteristics, qualifications, and racial attitudes of those in child welfare decision-making roles to examine how they contribute to racism is needed. The gap in the literature is that the relationship between years of experience, race/ethnicity, risk of harm, advocacy, racial attitudes, and decision-making among child protection workers is unknown. Implicit biases and racial attitudes of child protection workers affect decisions that can perpetuate disproportionality and disparities. Child protection workers may in fact be a risk factor for families of color.

### **Purpose**

Years of experience, race/ethnicity, risk of harm, advocacy, and racial attitudes are independent variables, and decision-making is the dependent variable.

### **Research Questions and Hypotheses**

RQ1: What is the relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers?

$H_01$ : There is no relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers.

$H_11$ : There is a relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers.

RQ2: Is there a relationship between race/ethnicity and racial attitudes?

$H_{02}$ : There is no relationship between race/ethnicity and racial attitudes.

$H_{12}$ : There is a relationship between race/ethnicity and racial attitudes.

RQ3: How does racist attitudes as expressed on the RAS predict racial bias in case decision-making?

$H_{03}$ : Racist attitudes do not predict racial bias in case decision-making as expressed on the RAS.

$H_{13}$ : Racist attitudes as expressed on the RAS predict racial bias in case decision-making.

### **Nature of the Study**

A quantitative, ex-post-facto design was appropriate to determine the effects of years of experience, race/ethnicity, risk of harm, racial attitudes, and advocacy in decision-making. The design assessed the stimulus effect on decision-making and examined interactions between years of experience, race/ethnicity, risk of harm, racial attitudes, advocacy of families in child welfare systems, and the quantitative dimensions of decision-making outcomes.

### **Definition of Terms**

Case substantiation: a reported incident such as child abuse or neglect that happened according to the guidelines established by state and county law.

Decision-making: the outcome of factors (i.e., case, decision-maker, organizational, and external) that guide child protection workers in deciding to substantiate a claim and make appropriate recommendations for children and families.

Disparities: a comparison of the ratios of one race or ethnic group in an event to the representation of another race or ethnic group with the same experience.

Disproportionality: a population out of proportion compared to a reference population.

Reference population: the overall population, is understood as an unconditional ratio. The conditional ratio is understood when the reference population refers to the people who experience a specific child welfare decision point (Boyd, 2014).

### **Assumptions**

I assumed the population of child welfare workers in Minnesota who participated in this study represented a population similar to the overall population in the United States. In addition, I assumed that participants who chose to participate in the study would truthfully disclose demographic information and honestly answer selected nominal and categorical questions. I assumed the differences in the answers to the case scenarios were motivated by demographic variables.

### **Scope, Delimitations, and Limitations**

The scope of this study included inner-city, suburban, and rural child protection workers in various counties in Minnesota, which could pose a problem of generalizability due to the population outside of Minnesota. The use of cases may be a challenge and might not capture the essence of the intended purpose of the proposed study or the targeted research population. Selection of a diverse population within the child welfare system and sample size may be a barrier.

Non-probability samples are limited to generalization because they do not genuinely represent a population. I could not make valid inferences about the larger group of child welfare workers. Data analysis errors such as coding the questionnaires may be a challenge and need to be fair and accurately represent participant selections and be free of bias. Another limitation may be participants' dishonesty in answering questionnaires due to assumptions about the purpose of the research.

### **Significance of Study**

The significance of the study lies within the nature of disproportionality and disparities in child welfare systems. This study examined the relationship between years of experience, race/ethnicity, risk of harm, racial attitudes, advocacy of child protection workers, and decision-making effects. This study will add to the body of literature by examining those in decision-making roles, characteristics, qualifications, and racial attitudes that impact decision-making and is a subtler way to capture racism among child protection workers. Adverse actions in decision-making can perpetuate disparities and disproportionality of children and families of color in child welfare systems.

### **Implications for Social Change**

Child welfare system reform is critical due to the challenges families of color face when involved in child welfare systems. Discretionary reasons can put families of color at risk of investigation, even when they are less likely to maltreat their children when compared to White families (Brubaker, 2015). Understanding inequalities in policies and practices in child welfare is important to address why families of color experience significant adversarial outcomes in child welfare systems and can help to initiate change

in decision-making and decrease racism toward disadvantaged groups (McDaniel, 2020).

Achieving equality for families of color is detrimental to closing the gap of racial inequality.

### **Summary**

In this chapter, I discussed factors that influence the decision-making process among child protection workers. Awareness of characteristics that child protection workers possess will bring attention to the ongoing historical issue of racism, disproportionality, and disparities. Decision-makers determine the fate of families within a system designed to help some and disadvantage others due to unfair practices.

Racial disparities and disproportionality need further attention. Systemic and racial bias are known factors that contribute to differences and disproportionality. White people are the privileged majority and are known to establish the foundation in systems and society. The lack of opportunities for people of color creates inequalities and adversity. The expectations and norms set forth by systems based on the majority population are not always attainable, increasing the risk of failure.

Families of color are at risk of racism, intentionally or unintentionally. Systems are plagued by biases and attitudes that influence decision-making. Applying CRT and structural discrimination theory to explain the biases and attitudes of child protection workers in child welfare systems will give some light on decision-making processes and outcomes. The decision-making process lacks uniformity which can be ambiguous, and families of color are more likely to be referred and experience adverse outcomes in the

decision-making process. The current literature is reviewed in Chapter 2, and Chapter 3 will lay out the research methodology.

## Chapter 2: Literature Review

Chapter 2 discusses academic literature on racial attitudes and decision-making among child protection workers that can perpetuate disparities and disproportionality of children and families of color in child welfare systems. Overrepresentation of children and families of color in child welfare systems continues to be a cause of concern, and the root of the problem remains unanswered. Factors that contribute to racial disparities are not fully understood. Statistics and literature continue to support the ongoing historical differences. Individual, family, community, agency, and systemic risk factors increase disproportionality. Examination of individual, family, community, agency, and systemic risk factors uphold that racial bias, agency climate, communication barriers, ineffective service delivery, and workforce issues influence decision-making and increase the risk of disproportionality (Dettlaff & Rycraft, 2010). The influence of characteristics, qualifications, and racial attitudes in child welfare decision-making on racism will address the gap in the literature.

### Literature Review Strategy

Search strategies included the following databases: ERIC, SAGE, PsycArticles, PsycInfo, and ProQuest. In addition, these database searches, internet searches on Google (<http://www.google.com>), Google Scholar (<http://scholar.google.com>), and an examination of relevant books and peer-reviewed articles offered additional information. Some of the following keywords and subject terms used during the database search included *critical race theory*, *structural discrimination theory*, *white fragility*, *racism*, *disparities*, *disproportionality*, *child welfare systems*, *implicit and explicit biases*,



*decision-making, White privilege, racial discrimination, systemic racism, structural racism, and racial inequalities.*

### **Theoretical Foundation**

Structural discrimination theory and CRT are the lenses used to view the research problem, methodology, and information to understand disparities and disproportionality of children and families of color in child welfare systems. CRT provides a framework of analysis grounded in critical theory that examines structures that maintain racial inequities (Kolivosky et al., 2014). The originators of CRT include several American legal scholars, Derrick Bell, Kimberlé Crenshaw, Cheryl Harris, Richard Delgado, Patricia J. Williams. Alan Freeman, Charles R. Lawrence III, and Mari Matsuda (Armstrong & Tyson, 2022).

CRT originated in the 1970s and was premised on seven major tenants: “permanence of racism, the critique of universalism, interest convergence, the notion of whiteness as property, intersectionality, the use of counter-story telling and social justice” (p. 40). This theory argues that racism is not solely an individual action, prejudice, or bias embedded in systems and policies. The lack of equity in child welfare systems for children and families of color is problematic and questions equity standards. CRT explains racism’s impact on inequity and primacy in child welfare services (Gourdine, 2019).

Structural discrimination theory refers to race or gender-neutral policies (Pincus, 1996). Racism within policies on a structural level is intentional and negatively affects minorities. Dettlaff and Boyd (2020) acknowledge “that racism is not merely a personal

ideology based on racial prejudice, but a system that involves institutional policies and practices, cultural messages, and individual actions and beliefs” (p. 258).

The history of the child welfare system is in line with other formal structures in the United States designed by White people to maintain white supremacy (Dettlaff & Boyd, 2020). Historically, racism lies within child welfare system structures and policies that are unjust to people of color (p. 262). Dettlaff and Boyd (2020) informed that the role of child welfare policies and their implementation continue to disproportionately impact Black children. Structural discrimination theory will address the direct role of racism in creating and perpetuating risks for families of color.

### **Overview**

Racial disproportionality and the causes have some degree of variance. Parental, community, organizational, and systemic factors cause disproportionality (Dettlaff & Rycraft, 2010). Decision-making, cultural insensitivity, child protection staff, and policies vary (Gourdine, 2019). Racial bias, agency climate, and communication barriers can interfere with effective service delivery. The lack of uniformity in the decision-making process and racial and systemic biases on an individual and organizational level contribute to overrepresentation (Dettlaff & Rycraft, 2010).

The risk of disproportionality increases for children and families of color as the odds are against them. Children of color in Minnesota had higher rates of contact with child protection and are more likely to be reported for alleged abuse and neglect. The children are more likely to be removed from their homes when compared to their White counterparts (Minnesota Department of Human Services, 2010). Minnesota Department

of Human Services (2010) indicated that child welfare agencies recognized this historical issue and focused on finding solutions.

The general assessment and decision-making model applies to child protection workers (Font & Maguire-Jack, 2015). Child protection workers have a personal threshold for meeting requirements and weighing the evidence that influences their judgment to guide them in substantiating cases. Thresholds are flexible based on different influences such as organizational or decision-maker factors. The decision-making ecology (DME) framework makes up three components independent of one another that plays a part in the decision-making process. The three components of the DME are factors that influence decisions, decision-making, and outcomes (Font & Maguire-Jack, 2015).

The involvement of child protection staff in this study was essential to understand the historical and ongoing issues of disproportionality and disparities. The narrative of racial bias or inequities toward disadvantaged groups in child welfare systems requires change. It was beneficial to involve key participants that make decisions to learn and understand their effect on disparities and outcomes within child welfare systems. Child welfare workers are agents of systematic power and possess dominance of power in decision-making roles. Standardizing the decision-making process will promote equality for all in child welfare and minimize unjust risks for disadvantaged groups involved in the system. Everyone has a right to be treated fairly by the same standards and protocol to minimize harm to children and families of color.

The purpose of child welfare services is to reduce risk and increase protective factors to ensure the well-being of children and families. A system set to protect and fairly serve children and families is the same system that can target, penalize, and set certain groups up for failure. A system designed for everyone's well-being is the same system that allows racial inequality. Changing a flawed system to promote equality in child welfare is overdue.

### **Racism**

Racism “encompasses, economic, political, social, cultural structures, actions, and beliefs that systematize and perpetuate an unequal distribution of privileges, resources, and power between white people and people of color” (DiAngelo, 2011, p. 56). White people are believed to be superior to people of color, unlike Black people who lack privilege (DiAngelo, 2011). Issues of racism are not unfamiliar and have become embedded in society as traditional and normalized to a certain degree.

Internalized and interpersonal racism is within or between individuals, and institutional and structural racism is within institutions, power systems, and society. Child welfare systems are not exempt from racial or implicit bias, either within or between individuals, systems, or institutional policies. CRT and structural discrimination theory imply that racism can manifest in decision-makers or systems that determine outcomes for disadvantaged groups. People of color are powerless in a system among the privileged, and racism occurs in many forms: internally, interpersonally, structurally, and institutionally (MST Services, 2019).

## **History of Racial Discrimination in Child Welfare**

McDaniel (2020) described the experience of African Americans from a historical standpoint. African Americans are faced with racism daily, and it is a constant reality based on historical roots. McDaniel reflected on the prevalence of the crack epidemic which was the gateway that led to more families of color being involved in the child welfare system. During this era, families of color were treated with no leniency or mercy (McDaniel, 2020). Netherland and Hansen (2016) supported McDaniel's view in that they suggest that drug use caused differences in social services treatment became more apparent.

The war on drugs was responsible for the mass incarceration of Blacks and Latinos and led to the investigation of racism, as families of color were punished either by prison, child welfare systems, or both (McDaniel, 2020). African American families have been historically limited in being considered equal or worthy of fostering children, as early as the 1800s (McDaniel, 2020). During the crack epidemic, many children entered foster care and were diverted from their families.

Children of color were placed outside of their families due to restricting African Americans from obtaining a foster care license to become foster parents to their relatives. The lack thereof prohibited African Americans from accessing the financial and social support needed to become a foster caregiver unless they had the monetary means to do so with social support. The amended Civil Rights Act in 1979 provided foster care rights to African Americans that they failed to receive (McDaniel, 2020). Why were people of color excluded from becoming foster parents when protections were in place?

According to McDaniel (2020), structural racism holds the beliefs that Black children are better off with White people. Structural racism excludes Blacks, proving structural discrimination theory restricts people of color from the same opportunities as Whites (Hayes-Greene & Love, 2018). Racism, implicit and explicit biases, is instrumental in decision-making (Ellis, 2019). Protections to grant equality did not bring equal access or benefits for families of color. The denial of access to services and support created barriers that diverted children away from their families (McDaniel, 2020).

Chase and Ullrich (2022) agreed that diverting children from their families is harmful. Children diverted from their families become disconnected from their roots, losing their true selves (Minnesota Department of Human Services, 2015). In Minnesota, the Commission on Minnesotan African Americans has a different school of thought for the needs of children of color. The organization remains focused on issues related to placement in homes of color (National Conference of State Legislatures, 2021). The growing concern of the organization is that children of color need to be connected to their race which gives them a sense of belonging. The organization believes in the best interest of children of color, and they should be placed, when possible, with families of the same race.

### **White Saviorism**

The story of Devonte Hart was instrumental in bringing awareness to the existence of white saviorism. White saviorism is a term that describes the idea that White people know best of how to help people of color and it may be present in child welfare case decision-making (Patton, 2018). White people may attempt to save unfortunate

children in foster care and are likely to engage in transracial adoptions, while supporting policies that continue to create and sustain racial inequalities and oppression for people of color (Patton, 2018).

Removing children from home starts with child welfare workers' decisions that consider the best interest of children and families involved in the system. Children of color have higher referrals for discretionary and mandatory reasons and higher removal rates than White children (Ards et al., 2012). The significant variability and ambiguity of policies and procedures in decision-making are questionable. Child protection workers' discretion in decision-making is guided by structural policies, procedures, and biases that may increase the risk of scrutiny and unfavorable outcomes without reasonable cause. Child welfare systems are influenced by factors such as White supremacy, racism, and colonialism that put people of color at risk for unfair treatment (Adjei & Minka, 2018).

Transracial adoptions give White adoptive parents superiority as they feel above racism when they adopt Black children (Patton, 2018). How can they be racist? This good deed is a sign of kindness and benevolence for White adoptive parents who save Black children. How does this influence case decision-making in child welfare systems? People of color are stereotyped regarding resources, power, or support. They are seen as less equipped to save in the way their White counterparts can because of the lack of resources.

Adjei and Minka (2018) stated that child welfare systems' use of White norms and leadership principles had influence on the development of appropriate and just standards. They further assert, the child welfare system relies on White norms to standardize child rearing practices and these standards put people of color at risk as there

are differences between White and Black norms (Adjei & Minka, 2018). CRT helps to “unpack” racism and Whiteness within child welfare systems and its impact on families of color (Adjei & Minka, 2018, p. 513). Hines (2016) suggested that being White in American society is a standard and neutral form of racial existence. Whiteness is a configuration of processes and practices that do not rely solely on skin color and operates as an advantage within a structure that is known as racial privilege (DiAngelo, 2011). White people have a hard time recognizing White privilege (Hines, 2016).

### **Racial Differences in Parenting Practices**

Research in major cities of Canada examined Black parenting practices and their understanding of effective parenting. What defines good and effective parenting practices? The question is best answered by looking at the similarities and differences of parents in the study to assess their knowledge of good parenting and effective parenting practices to gain insight into parenting practices and beliefs. Exploring variations of parenting practices and beliefs against child welfare agencies’ beliefs will help understand the discrepancies in perception (Adjei & Minka, 2018). Adjei and Minka (2018) purported that environment influences children and plays a part in what they become as adults. From a cultural standpoint, parenting practices are different, and beliefs about parenting rest on principles of White norms that invalidate parenting practices that deviate from the standard (Adjei & Minka, 2018). Black parents in Canada feel targeted by the child welfare system and the unfair parenting practices that result in overrepresentation of families of color (Adjei & Minka, 2018).



Child welfare agencies in Canada have a history of policies, parenting guidelines, and practice models believed to be “impartial and apolitical,” and this ideal contrasts with the beliefs of Black parents (Adjei & Minka, 2018, p. 512). Black parents in Toronto felt that the color of Canada's child protection rules rests on White norms and expectations. Black parents confirmed that structural discrimination exists in the child welfare legislation. Black children are at higher risk of placement in foster care when compared to White children (Adjei & Minka, 2018).

In Canada, child welfare agency practices falsely represent child protection legislation as culturally and racially universal. A hidden agenda supports a white standard of parenting that puts Black families at risk (Adjei & Minka, 2018; Hines, 2016). Expectations for parenting that is guided by White standards and normalized has consequences for Black parents (Adjei & Minka, 2018). There are differences in parenting practices that do not align with White standards (Adjei & Minka, 2018). Race, racism, and Whiteness consciously or unconsciously inform and shape how child welfare service providers view Black parenting practices (Adjei & Minka, 2018). Emerging patterns in the operations of child welfare agencies in Ontario put Black families at risk of racism gained attention (Adjei & Minka, 2018).

CRT was applied to understand the ways systemic racism affect Black children and families (Adjei & Minka, 2018). CRT for this study analyzed how racism influences and shapes Black parenting experiences in Toronto using counter-storytelling. Counter-story telling is a method of telling stories about the experiences of those who would not ordinarily have an opportunity to be heard (Adjei & Minka, 2018). In this case, people of

color had an opportunity to share their experiences in the child welfare system. CRT challenges child welfare systems' claims of racial equity and fairness (Adjei & Minka, 2018). The child welfare system supports White norms that are dominant and influential in parenting practices.

The findings suggested that unexamined systemic racism exists in child welfare agencies that encompass heightened tensions. The experiences of Black families are adversely impacted by the child welfare system, which is guided by Whiteness and the practices that question Black parenting (Adjei & Minka, 2018). The use of CRT and counter story telling helped to challenge the adversities of the child welfare system and Black families parenting practices (Adjei & Minka, 2018).

The lives of Black people are affected even when laws and policies are not based on color or race and perceived to be color blind. Black people do not have the privilege or power that White people are given which creates inequalities (Adjei & Minka, 2018). Whiteness used to set parenting standards and values for all and its impact on policies and procedures is called into question (Hines, 2016).

### **Cultural Misunderstanding and White Privilege**

Krase (2015) and Marshall and Haight (2014) found notable concerns with overreporting in child welfare systems of African American children, who are more likely than White children to be reported to child protection services (CPS). Krase proposed three hypotheses for African American children's disproportionate reporting to CPS. African American children are more likely to be abused or neglected than children of

other races. A person's race is a known risk factor for abuse, neglect, and bias which influences reports of abuse and neglect (Krase, 2015).

Education personnel play a significant role in reporting suspected child maltreatment (Krase, 2015). The study examined the suspected maltreatment reports by educational personnel in the United States and New York. The purpose of the study was to determine the impact these reports have on racial disproportionality and disparity in child welfare systems, referred to as a "troubling phenomenon" (p. 91). According to Krase (2015), educational personnel were responsible for 16% of the reports in the United States in 2011, with law enforcement personnel initiating 16.7% of reports.

The study's findings confirmed that African American children are at risk of being overrepresented in reports by educational personnel more than any other report sources. Based on the findings future research is needed as this research study was unable to account for the differences in overrepresentation by educational personnel (Krase, 2015)

Krase (2015) suggested giving attention to the impact of socioeconomic status and gender, and the intersections of these factors with race, on the decision to report.

Marshall and Haight (2014) were interested in examining the perspective of professionals who work within these systems to understand the reasons for racial disproportionality that impact African American youth who crossover from child welfare to juvenile justice.

This qualitative study was part of a more extensive ethnography with 33 African American and European American child welfare, law enforcement, and court professionals.

Individual, semi-structured, and audio recorded interviews were appropriate to understand the disproportionality of African American crossover youth among law enforcement and court professionals. Ecological systems, sociocultural/social language, and critical race theories guided data analysis. There were notable differences in the practices and communication of African American families and youth and how professionals engage and interact with the families that increase risk of disproportionality and disparities (Marshall & Haight, 2014).

Participants found that negative assumptions about African Americans are associated with language and behaviors in child welfare and juvenile justice systems that differ from the acceptable language and behaviors. These negative assumptions led to sanctioning of African Americans that was too severe for the offense (Marshall & Haight, 2014). Stressful or dangerous situations influenced the negative behaviors of professionals. Youth and families of color reacted to patterns of racial tension with a lack of trust, hostility, and resistance toward professionals. Professionals were described by parents as resistant when they were not readily willing to address issues of race relations (Marshall & Haight, 2014).

There is the potential to misunderstand African American culture. Racial disparities result from incompetence in understanding race and the differential treatment that families of color receive (Marshall & Haight, 2014). It is important to understand patterns of communication, power, and race relations in child welfare, law enforcement, and the courts, as new ways to explain disproportionality and work toward change for children and families.

### **Parental Distrust in Child Welfare Systems**

Altman (2008) researched engagement in child welfare services to understand the processes and outcomes of family engagement, parents' and workers' differences in engagement perspectives, and effective ways to engage families in services. The research consisted of a mixed-methods design, including sixteen parents who received services and nine foster care workers from a single neighborhood-based family service center, part of the New York City-based child welfare agency. Altman indicated that engagement for this study had several definitions. Engagement is "a process or a product, an intrapersonal or interpersonal effort, worker or client-driven, with both a cause of participation and its results" (p. 43).

Parents in child welfare systems usually are referred involuntarily and do not have a choice. Most enter the system because of their failures as caretakers and for unrealistic goals they are expected to meet (Altman, 2008). A client-worker relationship is critical for families to accept the services offered. Altman (2008) found that the workers' inability or unwillingness to set the stage for engagement to be remarkable. Parents wanted workers to engage and show they care, and workers wanted parents' confessions and compliance (Altman, 2008). The engagement process increases family reunification, reduces court referrals, and increases the likelihood of being offered needed services (Altman, 2008).

The findings of the study determined that worker communication is important to the engagement process and reassurance, affirmation, honesty, directness, and straightforwardness. The worker relationship, coupled with empathy, reliability, and

support, helped parents to engage in services and focus on making efforts to change.

Parents were reluctant to form relationships with workers who wanted them to take the blame before “real work” was done (Altman, 2008, p. 51). Some workers believed that “compliance is necessary for true engagement” (Altman, 2008, p. 52). Mutuality of pace is necessary to the engagement process. Parents felt that it was the workers’ responsibility to keep things moving forward in the direction of reunification and lack of action contributed to a lack of motivation for parents’ efforts to participate which could lead to failure.

### **Decision-Making**

Decision-making in CPS has many influences. There are factors related to the individual case, the agency, and child protection workers. Agency factors included policies, procedures, time and resource constraints, caseload size, and organizational culture. Personal and external factors for child welfare workers are education, background, personal experiences and attitudes, laws and attitudes, and the families’ neighborhoods (Font & Maguire-Jack, 2015). This model of decision-making makes assumptions about outcomes and the consequences to the families (case factors), child protection workers (decision-making factor), and child protection agencies (organizational factors).

Heggdalsvik et al. (2018) sought to understand variations in decision-making processes in child welfare services. Approaches to assessing children and families’ needs vary in different countries. Norway lacked knowledge about decision-making strategies that are not uncommon in European countries. The article examined decision-making

among 36 child welfare caseworkers across six different teams' participation in focus group interviews. Participants were those who investigated, assessed, and made decisions about incoming referrals. Decision theory was the theoretical framework in this study. The analysis focused on the distinction between professional discretion and standardization. Heggdalsvik et al. described the decision-making process as “complex, wicked problems and unstable factors” (p. 523). Wisdom consisted of selection, integration, and various combinations of knowledge used to make a holistic judgment.

Heggdalsvik et al. (2018) found that child welfare workers in Norway have more autonomy regarding case handling. The level of autonomy came from training and faced resistance because of its arbitrary nature. Procedures for decision-making involved a caseworker and a team leader who made reports about the shortcomings of the system (Heggdalsvik et al., 2018). This study examined whether standardization practices are better with an instrument or the use of professional discretion.

Heggdalsvik et al. (2018) believed decisions have some scrutiny because of the uncertainty in the way information is obtained and classified. Child protection workers are unique in the way they approach situations. Differences in attitude, length of experience, and form of cognitive processes play a role in decision-making (Heggdalsvik et al., 2018). The focal point of the study was to determine whether it is possible to locate differences in the assessment and decision-making processes in child welfare services with a template.

Child protection workers can be subjective in the perception of their emotions in the decision-making process. Emotions can be seen as a sign of weakness (Heggdalsvik et al.,

2018). Emotions can show strength as child protection workers attempt to objectively understand a family's situation. There is also conflict with decision-making based on emotions because they counteract the decision-making process. Do the caseworker's emotions contribute to strengthening or weakening the decision-making process and outcomes (Heggdalsvik et al., 2018)?

The findings of the research indicate that caseworkers in the discretion groups had sequences of fragmented decisions and more emotions and feelings. Caseworkers with templates expressed less emotional reactions and focused on the stages of the template. Vulnerability is undoubtedly a concern when professional discretion is involved. There is the risk that decisions are made without all the facts, lack of knowledge and caseworker emotions (Heggdalsvik et al., 2018). Being aware that children and families are unique creates challenges in establishing exact standards.

Skivenes and Tonheim (2016) found that decision-making in child protection incurs criticism due to the increased risk of bias influenced by significant differences among expert clinicians. They sought to address ways child welfare agencies can organize their decision-making processes and work tasks to increase confidence in the quality of sound decisions. This study examined child welfare workers' responses to improve the decision-making process in the workplace, professional discretion, or standardized tools.

Another approach to guide decision-making was developed by The National Council of Juvenile and Family Court Judges to prompt judges to question themselves at each decision point or hearing in child welfare proceedings. The following questions are not an exhaustive list (National Juvenile Defender Center, 2018, p. 3):



1. What assumptions were made about this family's cultural identity, gender, and background?
2. What is the understanding of the family's unique culture and circumstances?
3. How is my decision specific to this youth and this family?
4. How has the court's past contact and involvement with this family influenced (or how might it influence) my decision-making process and findings?
5. What evidence has supported every conclusion I have drawn, and how have I challenged unsupported assumptions?
6. How am I convinced that reasonable efforts (or active efforts in Indian Child Welfare Act (ICWA) cases) have been made in an individualized way to match the needs of the family?
7. Have I considered relatives as a preferred placement option if they can protect the youth and support the permanency plan?

**Racial Differences**

Roberts (2014) agreed that there is uncertainty about racial disparities. It is not clear if racial disparities are internal or external. Discriminatory practices within the system may contribute to disparities, and Lovato-Hermann et al. (2017) found that racial disparities start with child welfare service referrals. Availability of culturally appropriate services, structural disadvantages, and caseworker bias are factors attached to racial disparities based on service referrals.

Font et al. (2012) examined the differences between Black and White family outcomes, using a sample of 1,461 CPS investigations in the United States. The study attempted to identify any gaps in decision outcomes and determine if the race of CPS investigators was a factor in decision-making outcomes. Font et al. (2012) identified several factors important in implicating change. Cultural competence training can help to reduce racial disproportionality in CPS. Racial differences influenced caseworker interactions and case substantiation in decision-making (Font et al., 2012).

The Blinder-Oaxaca decomposition method identified the portion of the black-white differences in outcomes attributable to differences in case characteristics known as the risk factors versus differences in the associations between these characteristics and outcomes by race and adjusted for factors: socio-demographic, case, caseworker, and geographic factors not concurrently controlled in prior research to potentially overcome some of the omitted variable biases that tainted former studies (Font et al., 2012).

The decomposition analyses provided insight into the significance of case characteristics in contrast to differential treatment of Black and White families. To what extent do decisions and assessments reflect differential treatment in CPS? The findings suggested that ratings of risk, harm to the child, and probable case substantiation for maltreatment were risk factors used by caseworkers to substantiate service referrals for children and families of color (Font et al., 2012). Gaps were identified in the outcomes for Black and White families when investigated by Black and White child protection workers (Font et al., 2012).

Mumpower and McClellan (2014) sought to understand system-level decision-making behavior in child welfare systems using signal detection theory (SDT). SDT analyzed behaviors and decisions of child protection workers. Initially, SDT was used to analyze the behaviors of a single judge and later analyze decisions made by organizations or social systems. SDT is a measure used to distinguish between signal and noise, which requires separating the detection system's accuracy from response bias (Mumpower & McClellan, 2014).

Analyzing the front-end of the child welfare services system, particularly the referral and substantiation process and the ability to detect child maltreatment led to new insights into effects associated with race and ethnicity in child welfare services. SDT confirmed that Blacks have higher rates of referrals and inaccurate higher rates of false positives from referrals with unsupported findings. Referrals substantiated for the claimed allegations, known as true positives, were also high for families of color (Mumpower & McClellan, 2014). These findings confirm that children and families of color have a significant disadvantage in child welfare systems.

Mumpower and McClellan (2014) found the incidence of referrals among Black children is 116.7 per 1,000, approximately two and half times that of the other groups. Incidence of substantiated referrals is two to three times higher for Blacks (22.6 per 1,000) than for Hispanics (9.6 per 1,000) or Whites (7.4 per 1,000); false positives are much higher for Blacks than for the other groups. For Blacks, the incidence is 94.1 per 1,000, roughly two-and-a-half times greater than for Hispanics and roughly three times greater than for Whites.

Higher case substantiation rates for African Americans based on the beliefs the reported circumstances occurred attempted to explain the variations and differences in Black and White caseworkers' propensity to substantiate cases involving children of color. Mumpower and McClellan (2014) confirmed that case referral and substantiation function differently for Blacks than other groups. There is evidence of disproportionality in terms of referrals for Blacks. The level of accuracy is lower, the rate of correct diagnoses is lower, and the rate of errors, especially false-positive errors, is higher than in other groups (Mumpower & McClellan, 2014).

Disproportionality is an issue that has yet to be understood even when explained in terms of risk factors predisposing children and families of color. Characteristics that predispose families of color are poverty, unemployment, single-parent status, substance abuse, and living in a significantly disadvantaged neighborhood (Bartholet, 2009). The characteristics are stereotypical and disproportionately associated with families of color, partly due to the impoverished socioeconomic status of Blacks.

According to Mumpower and McClellan (2014), there is a lack of agreement about the existence of disproportionality. Race and ethnicity can make for easy targets systemically in child welfare systems. Addressing the differences in family and case circumstances explains the differences in outcomes for Black and White children. This study provided evidence that children and families of color are more likely to be involved in the child welfare system due to risk factors and characteristics that make them a target.

### **Contributing Theories of Disproportionality and Overrepresentation**

The disproportionality of children and families of color in child welfare systems remains a challenging and controversial issue that continues to gain attention. African Americans are likely to be investigated, and cases substantiated, suggesting stigmas (Mumpower & McClellan, 2014). According to Thomas et al. (2022), the U.S. Department of Health and Human Services reported that in 2018, Black children made up 14% of the child population and had 21% of substantiated CPS cases. Race plays a role in decision-making, and there is uncertainty about its degree in the decision-making process (Chibnall et al., 2003).

Poverty is a significant risk factor for families of color and increases involvement in child welfare systems (Minnesota Child Welfare Disparities Report, 2010, p.10). Explanatory factors suggested by Plotnik (2000) as to why child abuse and neglect correlate with poverty are listed: (Minnesota Child Welfare Disparities Report, 2010, p.10):

1. Low income creates greater family stress and increases greater risk of maltreatment.
2. Low incomes are inadequate for basic needs-adequate housing, food, clothing, and safe childcare.
3. Factors-chemical dependence, mental illness, single parenting, or teen parenting are causes of both poverty and risk of child maltreatment.
4. Poor families are frequently under scrutiny by mandated reports for

suspected child maltreatment.

National Center for Children in Poverty reported that Minnesota had the 12th lowest child poverty rate. Despite Minnesota's low ranking, racial disparities were significant compared to their White counterparts (Children and Family Services, 2010). African American children are more than likely living below the poverty level (Minnesota Child Welfare Disparities Report, 2010). According to Thomas et al. (2022), 53% of Black children will experience CPS contact by 18 years old compared to 28% of White children according to National estimates.

Johnson-Motoyama et al. (2018) sought to understand what accounts for disproportionality and disparities. Chibnall et al. (2003) purported three theories to explain disproportionality and disparities: (1) disproportionate need among minority families; (2) racial bias in child welfare decision making; and (3) family risk and child welfare practice (p. 4). Johnson-Motoyama et al. (2018) identified (1) theory of disproportional poverty – poverty, child maltreatment risk factors, and need among overrepresented racial and ethnic groups; (2) theory of racism - racial bias or other inconsistencies in practice that potentially manufacture differences in decision making and child welfare outcomes, and (3) theory of organizational and institutional conditions - organizational and institutional conditions and features that produce or exacerbate disproportionality.

Gourdine (2019), Hayes-Greene and Love (2018), and Kolivoski et al. (2014) agreed that systemic bias does, indeed, affect the decision-making process when it comes to African American families. Christopher (2013), Clark et al. (2008), and Johnson et al.

(2007) suggested that racism and racial stereotyping influenced case processing and decision-making outcomes that perpetuate racial disproportionality and disparities. The obstacles people of color face are significant in relation to other groups.

The role of race in decision-making is inconsistent in child welfare systems. Racial privilege is prevalent in policies and across various social systems, including child welfare (Christopher, 2013). The lack of inclusion of child protection workers further perpetuates the issue. Dettlaff and Rycraft (2010) and Miller et al. (2012) raised the need to include decision-makers in research on child welfare systems. The inclusion of decision-makers is important in identifying and understanding contributing factors of disproportionality that are unknown.

Ards et al. (2012) proposed that discrimination may not be intentional, but front-end risks create disparate outcomes. Jessica Pryce is the executive research director of child welfare at Florida State University with an interest in curating child welfare research that focuses on answering legislative questions and informing social policy. Pryce supports the belief that discrimination may not be overt (Pryce, 2019). Caseworkers may be unaware of their biases and how they affect decision-making for the families they serve (MST Services, 2019).

Recognizing that behaviors and actions are sometimes unintentional, persisting disparities between the differences in experiences of White and Black families in the system indicates that racial inequality remains rampant (MST Services, 2019). Ards et al. (2012) identified that the regression models of discrimination in child welfare incorporate conventional economic methods to determine discrimination. Negative reactions or

preferences toward minorities influenced by organizational culture results in prejudices and dislikes that impact decision outcomes for minorities involved in child welfare systems. While discrimination may not be intentional, it is possible due to acting on the limited information that increase risks that lead to disparate outcomes (Ards et al., 2012). Ards et al. (2012) criticized the economic models of discrimination because of failure to provide the cause of the underlying racial risks (biases, beliefs, or perceptions) that perpetuate discrimination and disparities.

Ards et al. (2012) focused on the role of racial perceptions of child welfare workers and their contribution to racial disparities in reported or substantiated child maltreatment. The method chosen captured racial stereotypes through visual representations of those situations that meet the state definitions of maltreatment. Participants in all counties in Minnesota received vignettes of African American babies. The pictures shown to participants represented situations of a Black, White, or blank children. Pictures that “look black” are at risk of being reported by caseworkers, either as a reportable offense or by state definitions of maltreatment, in contrast to things that look white (Ards et al., 2012, p. 1480). These types of behaviors are known as racialized perceptions.

The linear and logistic fixed effects models estimated the responses to determine if the situation presented in the picture was reportable and met the state’s criteria. The independent variables were age, gender, and race, the birthplace of the respondent, education-major in social work, and intake worker employed in Hennepin County. The



findings suggest caseworkers' racialized beliefs impacted racial disproportionalities in reported and substantiated maltreatment rates (Ards et al., 2012).

Racial disproportionality is rooted in the overrepresentation of children of color in child welfare systems. Ards et al. (2012) reported that children of color were 1.6 times more likely to experience CPS and two times more likely to be removed from the home. Roberts (2014) stated Black children made up the largest group of children in out-of-home care and were four times more likely than White children to be in out-of-home placement. Black children are grossly overrepresented in the United States child welfare system. They represent only 14% of the nation's children and 26% of its out-of-home placements (Roberts, 2014).

According to data in 2018, children of color in Minnesota were 13.71% of the population, and 22.75% were in foster care (National Conference of State Legislatures, 2021). The state of Minnesota identified that children of color had higher disproportionality rates and were more likely to experience CPS (Minnesota Department of Human Services, 2010). In conclusion, these theories are relevant in explaining disparities and disproportionality. Poverty holds a great degree of accountability, and the lack of consideration for poverty is an understatement. Poverty has significance in its association with people of color and their socioeconomic status, which catapults many for lack of cause into the child welfare systems.

### **The Effects of Racism and Systemic, Implicit and Explicit Biases**

Roberts (2014) said to acknowledge racial bias in child welfare systems is to recognize a faulty system that disrupts families rather than support them. Ards et al.

(2012) focused on child welfare workers' perceptions that impact racial disproportionality through reports or substantiated child maltreatment cases.

Ards et al. (2012) found that in Minnesota, African Americans are five to six times more likely than Whites to be involved with child protective services. Three explanations to explain the issue of racial disparities in reported and substantiated child maltreatment, the correlation between poverty and maltreatment-multiple risk factors: single-parent families, high school drop-out rates, and residency in high crime areas that increase the risk of maltreatment compared to Whites. Poverty is classified as a high-risk factor and influences disparate representation. A relationship exists between poverty and maltreatment, as those from lower income backgrounds have higher rates of abuse and neglect (Ards et al., 2012).

The second explanation is that children of color are more visible and more likely to come to the attention of child protection due to the “visibility hypothesis” (Ards et al., 2012, p. 1482). The visibility hypothesis has two variants: (1) children of color are disproportionately exposed to the child welfare system because they are likely to encounter mandated reporters, and (2) children of color stand out in environments where children of color make up a small portion of the population. In the latter, children of color make up a small population, making them more recognizable than Whites, putting them at increased risk of being removed from their homes.

Krase (2015) associated visibility or exposure, labeling, and reporting biases with disproportionality. Visibility or exposure bias occurs when the “visibility” of families increases their likelihood of being reported; labeling bias means that reporters stereotype

maltreatment of certain groups, and racial bias occurs when there are similar cases, and variations of reporting among groups occur (p. 91). The third explanation for the overrepresentation of African Americans is systemic racism or unconscious discrimination. Child protection workers make their decisions, consciously or unconsciously. These decisions can contribute to racially disparate conclusions about the allegations investigated.

Race is a predictive factor of case substantiation in child welfare systems. Racialized beliefs and systemic racism influence decisions and increase the risk of disproportionate outcomes coupled with societal factors. Child welfare is guilty of inequality, and the system that judges and penalizes others should not be overlooked. Child welfare has the propensity to allow systemic racism to guide decisions. Black families are at risk of institutionalized racism at all aspects of decision-making entry points (Thomas et al., 2022).

Ellis (2019) supported the claim that biases cause harm to families of color. Poverty and biases led to an increased risk of out-of-home placements or in-home services than White children, even under the same circumstances. Statistics showed that children of color were 2.2 times more likely to be placed out of the home-based based on a report from the state of Washington (Ellis, 2019). Minnesota has a small population of Blacks, but many of them are involved in child protection. Based on Minnesota statistics, out-of-home placements are 3.6 times more likely for children of color (Minnesota Department of Human Services, 2010).

Children of color in out-of-home placements partly result from racial bias in placement decisions and a political choice that addresses child poverty rates instead of societal roots (Roberts, 2014). Inner-city neighborhoods become caught in the “system's racial geography” (Roberts, 2014, p. 426). Communities of color have high levels of child protection involvement, and removal from their homes is the standard within these communities. The characteristics of those in these impoverished environments are that people of color are poor or low-income. The impact of state disruption and supervision of African American families can increase when families live in low income or impoverished neighborhoods (Roberts, 2014).

Roberts (2014) identified a shift that does not regard the social context in which families live, or the political role that child welfare practices and policies play. Families of color have a disadvantaged political status. Looking for an answer to ongoing issues requires looking both inside and outside the system. The justification of overrepresentation is beyond the scope of out-of-home placements. Racial inequities and biases in child welfare practices need attention to rationalize racial disproportionality.

### **Biases**

Decision-making outcomes run the risk of influence from biases which is problematic in child welfare systems. Ellis (2019) concluded that biases of child protection workers create schemas in the brain that they learn and store. Schemas are lenses through which predictions are made and account for fixed preferences about groups or cultures. Ellis noted two types of biases: explicit and implicit. Implicit biases

are unconscious thoughts involving a lack of awareness, and explicit biases are conscious thoughts and awareness.

Four categories of biases are associated with experiences of families of color in the child welfare system: (1) internalized bias lies within individuals and our personal belief biases about race and racism, (2) interpersonal bias is individual interactions with others and disclosure of personal, racial beliefs and the effect on public interactions, (3) institutional bias occurs in the form of policies and discriminatory practices which are unfair and routinely produce unequal outcomes for minorities, and (4) structural bias is the cumulation effects of history, interactions, and policies designed to maintain the privileges of White people and disadvantage people of color (MST Services, 2019).

Roberts (2014) referenced a study on the intersection of race, poverty, and risk in placement decisions and concluded that racial disparities occurred because it takes greater risk of maltreatment for a White child to be placed in care when compared to the risk for a Black child (p. 428). Roberts found a lack of justification in racial disparities for out-of-home placements for families of color. Maltreatment for Blacks is viewed differently than for Whites and accounts for the higher maltreatment rates and out of home placements for families of color. People of color are at greater risk of maltreatment and the severity did not matter. There was differential treatment whereas the severity of maltreatment for Whites had to be significant and “takes greater risk” to be removed (Roberts, 2014, p. 428). Thus, the discrepancy between maltreatment and placement rates is indicative of the overrepresentation of children of color in out-of-home placement.

## **Decision Point Differences**

Johnson-Motoyama et al. (2018) declared the existence of significant differences in racial/ethnic disproportionality and disparities. These differences are present at multiple decision points in child welfare systems and at state, county, urban, and rural levels. Decision points refer to moving between status points in the child welfare system. The onset of the investigation starts the movement of the process of deciding to substantiate cases. The differences in decision points in child welfare systems needed to be examined. Focusing on workgroups and decision points utilized in reports by priority using a tiered approach (Johnson-Motoyama et al., 2018). Seven states used differential responses, alternative responses, and investigations by race in decision points (Johnson-Motoyama et al., 2018). This recognition of differences further signifies a lack of uniformity and objectivity in decision-making (Johnson-Motoyama et al., 2018).

The workgroups decided to annualize data points in decision-making, except for foster care, to provide a more stable sample for smaller counties. Discussions of the decision points led to the final determination of data views to clarify racial disproportionality and disparities (Johnson et al., 2007). There were concerns about the depth of disproportionality measurement and prioritizing decision points for racial disparities and disproportionalities (Johnson et al., 2007). Some workgroups struggled with making distinctions that centered around the interpretation of disproportionality and disparities (Johnson et al., 2007). Interpretation of decision points was difficult, since some decision points were seen as positive, or negative for child welfare outcomes. Victimization is negative, whereas achieving permanency is positive (Johnson et al.,

2007). The discrepancy led to an initial set of reports based on first-tier decision points (Johnson et al., 2007). This would make the decision point process manageable and allow for adding decision points later if needed (Johnson et al., 2007). As shown in Figure 1, Tiers 1 through 3 detailed the information.

**Figure 1**

*Prioritization of Decision Points for Racial Disparities and Disproportionality (RDD)*

*Work Group*

1st Tier	CPS Reports (referrals)
	Accepted reports (screened in referrals)
	Victim (substantiated/indicated or founded abuse neglect)
	Entered foster care
	Exiting foster care
	In foster care (point in time)
2nd Tier	State Involved (ongoing, either in-home or foster care)
	Started in-home Intact
	Began State Involvement episode (ongoing, in-home or foster care)
	Assigned for investigation
	Assigned to alternative response
	In foster care 17+ months (point-in-time)
3rd Tier	Receiving in-home intact
	Exiting in-home entering foster care
	Ended State Involvement
	Exiting foster care to permanency

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## **Improving Decision-Making**

Overrepresentation of children of color requires careful consideration, reforming policies and procedures that contribute to structural racism and biases for purposes of reducing the historical issue, increasing awareness of personal biases to be conscious of promoting change perspectives, embracing, and welcoming diversity among child-protection employees to reduce biased decision-making processes and outcomes.

Families of color should not be overgeneralized or compared to White culture, for which the norms are based.

Decisions should not be made based on race or socioeconomic status, leading to inequality and disproportionality. People of color deserve to be treated equally and not from a historical, structural, or organizational standpoint in which racism exists. Roberts (2014) proposed that child protective services are comprised of hidden agendas often against families and children of color in child welfare systems. Social and political factors are motives for those that experienced services and unfair treatment. Racial bias is present in child welfare, but it is unclear as to how it affects decision-making. (Lee et al., 2015).

White children are less likely than children of color to be at risk of child protection supervision. Roberts (2002) concluded that child welfare systems and institutions penalize families of color by way of monitoring, regulating, and punishing them. Furthermore, the system deals more readily with low-income families (Roberts, 2014). Nevertheless, the system “hides reasons” that families experience adversities and hardships, which subject them to scrutiny in parenting (p. 428). The solution to the problem is addressed therapeutically rather than as a social concern in need of change (Roberts, 2014).

Statistics show that children of color in Minnesota have higher risk of child protection involvement which is significant when compared to the nation (Ards et al., 2012). Families of color are predisposed to the system for nothing more than



discretionary reasons. These findings confirm the rationale of many who believe that child welfare systems fail children and families of color.

### **Proposed Changes in Child Welfare Systems**

Poverty and institution discrimination are risks that perpetuate systemic flaws designed to hurt minority families rather than help them. African Americans receive less support, which defeats the purpose of the original intent of child welfare systems. Race and systemic biases have called into question the intent and purpose of CPS, practices, and policies. The restoration of families is essential for health and welfare and to reduce targeting families punitively.

Roberts (2014) suggested examining child welfare systems internally and externally to help bring awareness to racial inequities and biases that give rise to racial and systemic biases. The system's injustices are just as problematic as the biases of child protection workers; therefore, it is not realistic to separate societal and systemic reasons for racial disproportionality (Roberts, 2014). In a qualitative study of Michigan's Child Welfare System, social workers negatively characterized or labeled African American families and youth. There were beliefs that African American children were better off outside of their race and their community (Roberts, 2014). Policymakers, service providers, and choices made by the Department of Human Services recognized the lack of regard for destroying families and the harm caused.

Bartholet (2009) and Font et al. (2012) found that systemic bias played a role in the overrepresentation of children of color in child welfare systems which influenced poor decision-making. The disproportionate characteristics of "black parents" increased

the risk of adverse findings for child welfare services (Bartholet, 2009, p. 877). Bartholet (2009) found that Blacks are associated with adverse risk factors (poverty, single-parent households and drug abuse) when compared to Whites. These factors increased the risk of child maltreatment for families of color. Bartholet suggested that anti-racism training is a necessary intervention to raise awareness of the racial discriminative ways in which the system operates. Bartholet described "blacks as victims" in an "ongoing racial and economic injustice," who have challenging positions as the disadvantaged group (p. 877). The need for change in the treatment of children and families of color within child welfare is overdue. Changes will improve awareness of present-day functioning within the system to reduce discriminatory racial ways.

The Racial Disproportionality Movement claimed that "black children" are at risk of victimization by abuse and neglect (Bartholet, 2009, p. 871). This perceived risk is a central issue in the overrepresentation of children of color in foster care and does not suffice for the level of maltreatment. Racial disproportionality is recognized as a "hot issue" in child welfare (Bartholet, 2009, p. 873). The call of action proposed by the movement was to change laws and bring awareness to address the disproportionate representation of children and families of color in child welfare (Bartholet, 2009). This call of action led to mandates to fund states to track, analyze, report, and take corrective action.

Miller et al. (2012) described the position of the Alliance for Racial Equity in Child Welfare provides leadership and support to improve outcomes for children and families of color in child welfare systems. Miller et al., Ellis (2019), and Font et al.

(2012) found patterns of disparities in both experiences and outcomes for families of color. The findings indicate that racial equity is needed to stabilize a tainted system. The promotion of racial equity in child welfare is essential in improving strategies. Font et al. informed that studies have shown that risk assessments are not necessarily racially biased but are subject to two types of misuse (p. 2191). Misuse occurs in two ways: functional relationship or risk assessment Font et al., 2012).

Weng and Gray (2020) evaluated qualitative microaggressions in the workplace of 30 social workers of color. The study focused on staff interactions with clients to understand policies, practices, and beliefs. Racial microaggressions can be problematic and persist in agencies that create discomfort for people of color. Weng and Gray defined racial aggression as “unconscious and automatic gestures, tones, looks, or exchanges, often invisible, that cause emotional and psychological injuries to people of color” (Weng & Gray, 2020, p. 68).

Weng and Gray (2020) reported that racism manifest in three ways: subtle microaggressions, overt or violent (p. 68).

- 1) Microassaults are deliberate and nonverbal attacks.
- 2) Microinsults are subtle insensitivities.
- 3) Microinvalidation is communications that negate or invalidate experiences.

Racial microaggressions ignore and dismiss cultures, backgrounds and experiences, stereotypical behavior, subtle behaviors, and actions that affect people of color (Weng & Gray, 2020). Reducing or eliminating microaggression requires

addressing cultural differences, colorblindness, and biases, creating safe, supportive, and inclusive environments. It is imperative to confront racial microaggressions and change the focus from blaming to recognizing the impact of microaggressions and working toward resolutions.

Child protection workers' unconscious biases influence decision-making. Personal biases impact decision-making outcomes for families of color, and the persistent disparity between Black and White families real and concerning (MST Services, 2019). Patterns of inequities in child welfare systems call for action in reduce racial disparities and disproportionality to improve the experiences of minority families (Child Welfare Information Gateway 2021). According to National Juvenile Defender Center (2018), there is a possible correlation between disparities and service strategy due to the lack of culturally relevant policies, procedures, practices, and decision-making.

### **Summary**

Conclusions from a wide body of research indicate that racial disparities and disproportionality in child welfare systems are issues that exist and need further attention. Systemic and racial bias continue to be factors that contribute to disparities and disproportionality. Race is a risk factor that plays a role in decision-making, contributing to inequalities (Center for the Study of Social Policy, 2011). The decision-making process is ambiguous, and families of color are more likely to experience adverse outcomes in the decision-making process. Child welfare reform is critical due to the challenges families of color experience when involved in child welfare systems. Discretionary reasons can put families of color at risk for child welfare investigation,

even when they are less likely to mistreat their children when compared to White families (Brubaker, 2015). The trajectory of the culture which created the policies and practices in child welfare continues (McDaniel, 2020). Achieving equality for families of color is beneficial to closing the gap between racial inequality and disparities.

Minnesota is one of several states that recognize African Americans, who represent a small percentage of the state's population and are overrepresented in child welfare systems. Developing a task force to focus on the issues and provide recommendations to address racial equality in the state's child welfare policies increases awareness. There is a critical need to reform the system and advance policy implications to achieve equality and reduce racial inequities.

Racial equity is fundamental to improving the following: child welfare, role and racism, and the influence on children and families of color. Strategies are needed to address reduction efforts and data gathering of the experiences of children and families of color involved with child welfare systems. Understanding why families of color experience adversarial outcomes in child welfare systems can help initiate change. Five primary factors: correlation between poverty and maltreatment, visibility or exposure bias, limited access to services, geographic restrictions, and child welfare professionals' personal biases are relevant in this ongoing historical issue (National Conference of State Legislatures, 2021). Personal biases can impact child protection workers' actions or decisions that jeopardize case processing and decision-making (Johnson-Motoyama et al., 2018; National Conference of State Legislatures, 2021). Child protection workers' voices provide firsthand their knowledge of the strengths and weaknesses in the system that

affect the decision-making process. Child protection workers' input is essential, and their direct connection can be valuable. Therefore, asking those with direct involvement in the decision-making process to participate is appropriate. Skivenes and Tonheim (2016) stated, child protection workers' voices are appropriate, "only the wearer knows where the shoe pinches" (p. 107). Decision-making in child welfare systems is subject to scrutiny, and child protection workers are "imperfect decision-makers" (p. 108).

Examination of the independent and dependent variables: years of experience, advocacy, race and ethnicity, risk of harm, racial attitudes, decision-making, and descriptive variables: education level, age, and gender, that address the participants' demographics are important for this study. Understanding the stimulus effect on decision-making and examining interactions between years of experience, race and ethnicity, risk of harm, racial attitudes, advocacy, and the quantitative dimensions of decision-making outcomes will add to the literature. Examination of the interactions of the independent and dependent variables is a subtle way to capture racism among child protection workers. Chapter 3 will discuss the research method and design using the independent and dependent variables to understand their effects on decision-making among child welfare workers.

## Chapter 3: Research Method

### **Introduction**

This study examined the relationship between years of experience, race/ethnicity, risk of harm, advocacy, racial attitudes, and decision-making among child protection workers in Minnesota. There are a few descriptive variables: education level, age, and gender, that addressed the participants' demographics. The development of questions, data analysis, data exploration, and data interpretation are essential aspects of the proposed research (Ahmad et al., 2019). This study employed a quantitative research method to examine the relationships between the independent and dependent variables.

### **Research Method and Design**

A quantitative method was most appropriate after considering other research methods. Ex-post-facto design is better suited for determining the effects of years of experience, race/ethnicity, risk of harm, and advocacy in decision-making. This design assessed the stimulus effect on decision-making, examined possible interactions between years of experience, ethnicity, risk of harm and advocacy of families in child welfare systems, and the quantitative dimensions of decision-making outcomes.

According to Ahmad et al. (2019), quantitative research is widely used in the social sciences. Quantitative research focuses on numeric data, which is either intrinsic or imposed, looking for information in terms of numbers or using a scale to determine a value. Quantitative methodology refers to “strategies, techniques, and assumptions used to study psychological, social and economic processes by exploring numeric patterns” (p.

2828). The purpose of quantitative research is to provide an explanation, prediction, or control phenomena objectively using structured collection and analysis of numerical data.

Qualitative research is a naturalistic inquiry seeking an understanding of social phenomena within their natural setting. It provides insights and understanding by focusing on the why rather than what. It is more subjective than objective and relies on direct experiences rather than logical or statistical measures (Ahmad et al., 2019). This type of research is acceptable when developing a theory or when literary resources are scarce to explore and discover ideas for ongoing purposes (Ahmad et al., 2019). A qualitative method was not appropriate for this study because of the interest in evaluating numerical data rather than the individual subjective experience.

Ex-post-facto design was appropriate to compare existing groups, specifically Black, White, and other race caseworkers' racial attitudes. According to Guiffre (1997), Ex-post-facto stands for after the fact and is more common in nonexperimental research. Ex-post-facto designs are not without weaknesses. Guiffre identified five frequent threats to internal validity (history, selection, maturation, testing, and mortality), with history and selection being the most common in this type of design.

Internal validity is a significant weakness in ex-post-facto designs, and history is a major risk. Internal validity is considered weak in ex-post-facto designs because it will never be possible to clearly define time and events to determine causality (Guiffre, 1997). History is a risk due to the changes that may occur due to time. Over the years, changes in child protection have occurred related to decision-making. Those involved in initiating changes in decision-making may not be the same as those involved now, which could



impact decision-making in other ways. Child protection workers may be of a different caliber now than they were before, and the issue of disparities continues to evolve. There is less control for threats to internal validity in ex-post-facto design, and it is vital to prepare appropriately. Overcoming weakness in internal validity requires the research to be designed and interpreted with caution (Guiffre, 1997).

There are advantages of an ex-post-facto design. This type of design allows for analyzing existing data if needed, protecting participants from any exposure or dangers associated with participation in a study. Other benefits include the ability to make correlational assessments and convenience sampling. Convenience sampling is appropriate for selecting participants and allows for the selection of readily available participants (Waterfield, 2018). Sample selection is the researcher's choice. Convenience sampling is a form of nonprobability sampling, which is distinct from probability sampling or quota sampling. A specific population is needed; child welfare workers in several counties, urban and rural Minnesota, who are easily accessible and readily available, were used.

Convenience sampling has both advantages and disadvantages. An exhaustive list of the study population is not needed, unlike random sampling. Travel cost and time are clear logistical and resource benefits (Waterfield, 2018). Sampling error and under coverage run the risk of bias with this type of sampling. Sampling error means that the sample represents sample characteristics that differ from the population of interest (Waterfield, 2018). Under coverage occurs when there is the exclusion of specific individuals by the sampling methods (Waterfield, 2018).

Sampling bias presents challenges about making inferences about the population are weaker and, conclusions drawn may be limited. However, making it representative of the population is beneficial. Empirical representativeness is important for the current study to minimize difficulties at the analysis stage.

According to Waterfield (2018), the shortcomings of convenience sampling are mitigated by the following steps: A detailed description of the demographics and characteristics of the sample for comparison purposes allows readers to evaluate the study for representativeness. Gain participation of all intended participants to avoid response bias or self-selection doesn't compromise representativeness. Participants are relevant to the study and not based on mere convenience.

### **Research Questions and Hypotheses**

RQ1: What is the relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers?

$H_01$ : There is no relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers.

$H_11$ : There is a relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers.

RQ2: Is there a relationship between race/ethnicity and racial attitudes?

$H_02$ : There is no relationship between race/ethnicity and racial

attitudes.

$H_{12}$ : There is a relationship between race/ethnicity and racial attitudes.

RQ3: How does racist attitudes as expressed on the RAS predict racial bias in case decision-making?

$H_{03}$ : Racist attitudes do not predict racial bias in case decision-making as expressed on the RAS.

$H_{13}$ : Racist attitudes as expressed on the RAS predict racial bias in case decision-making.

### **Setting and Sample**

Survey Monkey is a popular survey among educational institutions, companies, and individuals. It is an excellent tool for performing graduate research, formal and informal. Survey Monkey is a convenient way to reach many and can be done with ease online (Lurie, 2019). The study was conducted using Survey Monkey and customizing the study.

The participants were county workers from rural and urban areas in Minnesota who work as child protection investigators, case aides, supervisors, and anyone involved in case processing and decision-making in child welfare cases. Participants were Black, White, and other individuals that represented a sample of the state of Minnesota's child protection workers' overall ethnic population. The age of the participants naturally represented those in the child protection system. The selection of the participants occurred via convenience sampling through the availability of child protection

departments\' cooperation and providing research study information to employees as a group invitation to participate in the study. Participation in the survey was voluntary.

The sample size was determined using a general approach. Multinomial logistic regression is for predicting or probability of a category membership on a dependent variable when multiple independent variables are either dichotomous or continuous (Starkweather & Moske, 2011). Multinomial logistic regression allows for two or more categories of the dependent or outcome variables, using maximum likelihood estimation to evaluate the probability of categorical membership (Starkweather & Moske, 2011).

According to Starkweather and Moske (2011), there should be at least 10 cases per independent variable for each independent or predictor variable in multinomial logistic regression. There were four independent variables: years of experience, advocacy, ethnicity, and risk of harm. The minimum number of participants needed was 40. The goal was to obtain 100 participants to be sure to find if significant differences existed. Convenience sampling was appropriate for selecting participants and data collection.

### **Demographics**

Child protection workers (White, African American, other) received two case scenarios. The cases depicted an African American and White family presented randomly to participants. Case A and Case C was a White and Black family and a single mother, and Case B and Case D was a Black family and a widowed father, which allowed each worker to have both cases to make decisions about each family. The cases provided were from existing case scenarios of White and Black families, as shown in Appendix A,

Appendix B, Appendix C and Appendix D. Information from the cases was used to develop multiple-choice responses, as shown in Appendix F, that addressed the independent and dependent variables: years of experience, advocacy, risk of harm, race/ethnicity, racial attitudes, and decision-making. There were a few descriptive variables: education level, age, and gender, that addressed the participants' demographics.

### **Case Scenario Questionnaire**

The first question asked about the participants' age, descriptive, and key demographic variables to collect and analyze. This variable was frequent in survey data due to a broader set of demographic variables such as race, ethnicity, and gender. This variable would help identify the sample's representativeness, describe participants, and provide valuable information to aid analysis. Age was significant in understanding changes in behavior, beliefs, attitudes, and lifestyles that coincide with age or the direct relationship between age and decision-making. Age was a moderator variable if the relationship changed between the independent or dependent variable depending on the respondent's age.

The following two questions asked about the descriptive variables, education level, and gender. Education level and gender may influence how child protection workers approach decision-making. It was another way to describe the participants' various levels of education and identify gender, which can provide information in the analysis process and determine representativeness.

Race was a predictor variable and was essential in the research. This study examined relationships of the race of families of color and their significance on child protection workers' decision-making and racial equity. The race variable aligned the study's statistical analyses of race's conceptualization and operationalization. This variable can help identify incidents of racism, bias, and racial inequality in the decision-making process in child welfare systems at the hands of the decision-makers that perpetuate disparities and disproportionality.

The next set of questions in the questionnaire addressed advocacy, harm, and decision-making relevant to the case scenarios presented to the participants. Advocacy was an independent variable that provided information regarding the participants' likelihood to engage with their families to promote positive social change. Altman et al. (2008) performed a study to understand the engagement of child welfare workers and parents in neighborhood-based child welfare services. What does it take for a family to buy in or engage in services? Altman et al. recognized that developing working relationships and agency conditions to promote such a capacity is challenging. Furthermore, worker and agency behaviors are critical in the client-worker relationship for families to buy into services.

The risk of harm was another independent variable, and participants decided the risk of harm based on the case scenarios. It is vital to identify the harm in child welfare and its impact on case processing and decision-making. For research purposes, it is vital to understand differences in risk of harm for families based on race/ethnicity. Are differences in decision-making influenced by race?

Lastly, decision-making was the dependent variable. Child protection workers made decisions to determine the outcome of the family. This question provided information as to the fate of the family in terms of case processing. For analysis purposes, this information will contribute to the purpose of the study, identify any gaps in decision outcomes, and inform if differences exist in decision-making based on race.

### **Racial Attitude Survey**

The Racial Attitude Survey (RAS), shown in Appendix E, is an instrument that assesses racial attitudes. Tom Rundquist, the author of the RAS, permitted the use of the instrument. Each participant will complete a RAS. The RAS is a self-report instrument composed of 75 items (Rundquist, 2008). Sixty-two items consist of adjectives, and participants are informed to indicate the degree they believe a racial group has the quality presented for each adjective, using a 5-point scale. There are various sections of the RAS. Section 1 – Background Questions, Section 2 – Physical – physical traits of the chosen race, Section 3 – Ego Strength contains six sub-sections: Dominance, Control, Anxiety, Ethics, General Social, and On the Job, Section 4 – Social Distance - How accepting would you be having a person of the chosen race in part of your everyday life? Section 5 -Casual Contact - How accepting would you be encountering a person of the chosen race in these situations? This instrument provided information about the correlation between child protection workers' racial attitudes and race/ethnicity in decision-making and whether racial attitudes predict decision-making in child welfare systems.

Appropriate steps were taken to account for possible effects of history, mortality/attrition, maturation, and repeated testing was addressed by performing the

procedure promptly and keeping data collection to a minimum. Additionally, survey administration by Survey Monkey addressed variation in instrumentation and expectation bias. Selection bias was limited as participants received the survey in no particular order, and they independently completed the survey within the timeframe. Cases were provided randomly to participants, for which they made decisions that helped reduce social desirability and reactivity. Limited information minimized participant-pool selection. These precautions allowed for focus on the effects of years of experience, ethnicity, advocacy, and risk of harm on decision-making in child welfare systems.

### **Data Collection**

The same procedure took place for all data collected from formR for data input. Participants received two cases, the RAS and the demographic and decision-making questionnaire. The survey and decision-making questionnaire were multiple choice. The participants were provided with a generated link to complete the survey and questionnaire. The degree of control is in a setting with computer access and began when participants started the survey to preserve the procedure's integrity. Once participants consented and completed the survey and questionnaire, they exited from their computers.

### **Data Analysis**

The dependent variable (decision-making) was nominal and categorical. Independent variables are years of experience, ethnicity, advocacy, risk of harm, and racial attitudes.



Descriptive variables are age and level of education. The appropriate statistical test was a Spearman's rank order correlation as each item on the scale represented an increasingly harsh decision (Laerd Statistics, 2018).

1. Close file: no further investigation is needed.
2. Provide referrals to the community service provider.
3. Provide intensive family services.
4. Informal placement with a family support system.
5. Formal placement that gives the county temporary or full custody.

SPSS software performed the statistical analyses. An independent samples t-test compared racial attitudes assessed on the RAS between White and non-White child protection workers.

Correlation analyses looked at how racial attitudes predicted case decision-making. Simple regression is a statistical method that studies relationships between two variables, independent and dependent (Kumari & Yadav, 2018). It explains the correlation between two variables. Racial attitudes is an independent variable and decision-making is the dependent variable, where  $x$  is the value of the independent variable and  $y$  is the value of the dependent variable.

### **Participant's Rights**

It was important to protect participants' rights throughout the procedure. IRB approval was obtained before data analysis using a letter provided by Momentum (see Appendix G). There was no identification of participants, and demographic information was limited to gender, age in years, level of education, and ethnicity.

The ability to filter and compare allowed the focus to shift to specific subsets of the meaningful data for the analysis (Survey Monkey, n.d.). The author of the RAS, Tom Rundquist, suggested obtaining results in one of two ways, receiving help with the results or using NCS sheets or a master copy of the answers. The author recommended having an assistant for the online graphs and using Cindy Lewis's thesis, "A Study of The Impact of Racial Attitude on The Perception of Advertising," which is available on the online test-taking site for comparison (Lewis, 1997). I was the only one with access to the data.

The data collection tool was harmless. All information was presented professionally, which was not offensive, and all information is equivalent to differences in case scenarios. If participants thought otherwise, they could discontinue participation in the research.

### **Limitations, Challenges, and Barriers**

The use of the case scenarios may be a challenge if they do not capture the essence of the intended purpose of the proposed study or if the child protection workers choose not to participate. Potential barriers would be obtaining a diverse population and sample size within the child welfare system. Non-probability samples are limited concerning generalization because they do not represent a population; therefore, we cannot make valid inferences about the larger group. Data analysis errors such as coding the questionnaires may be a challenge and need to be fair, free of bias, and accurately represent participant selections. Another limitation may be participants' dishonesty in answering questionnaires due to assumptions about the purpose of the research.

### **Summary**

This chapter aimed to outline the research method to answer the research questions, discussion about the procedure, study participants, data collection and analysis, and research instruments outlined the specifics of conducting the research and the participants. The theoretical foundations adequately addressed disproportionality, disparities, and racism in child welfare systems and child welfare workers role in decision-making. Research participants chosen were relevant to the study. The information obtained from the questionnaires and RAS will explain the theories of critical race and structural discrimination and the contributions to racism that perpetuate the ongoing issues of disproportionality and disparities for people of color in child welfare systems. These theories implied that racism manifests in decision-makers or systems that determined outcomes for disadvantaged groups. Chapter 4 provides the results from the study and demonstrates the methodology in Chapter 3 was followed.

## Chapter 4: Results

### Introduction

In this chapter, I discuss this study's purpose, research questions, characteristics of variables and results of the analyses. The purpose of this quantitative study ex post facto design was to examine the relationship between characteristics (years of experience, race/ethnicity), risk of harm, advocacy, racial attitudes, and decision-making among child protection workers in Minnesota.

The child welfare system was established to protect children from child abuse and neglect. The primary goals of the system consist of well-being, permanency, and safety of children and families. These goals are achieved through services provided that aim to help families care for their children as expected by state, federal and county laws, and policies. Families at risk of instability or safety concerns are provided with services to ensure safety for their children, such as finding permanency with kin or adoptive families.

Child protection workers have many responsibilities. Among these, perhaps the most important responsibility is making decisions regarding recommendations for cases. These decisions can range from taking no action to recommending a child's removal from the home. Decision-making can be difficult for child protection workers who must make decisions that affect the outcomes for children and families. Child protection workers are expected to use their professional judgement to make decisions in the best interest of children and families.

The system unfortunately lacks standardization in decision-making processes and the perception of what constitute a child's safety can vary among workers. Child protection workers subjective discretion in the decision-making process run the risk of opinions, biases and stereotypes influencing their decisions. There is a great body of research that indicates racial inequality in child welfare decisions exist (Adjei et al., 2018; Cenat et al., 2020).

The factors that are known to increase risk of referral and substantiation are not limited to the intersection of poverty and race, which are only part of the problem. Disproportionality and disparities within the child welfare system are influenced by racial bias and discrimination, child welfare system factors, geographic context, policies, and systemic issues. The relationship between years of experience, race/ethnicity, risk of harm, advocacy, racial attitudes, and decision-making among child protection workers is unknown. Child protection workers who work in a broken system experience many challenges. Biases and racist attitudes increase risk of unstable decision-making in a system already broken and poorly understood (Cenat et al., 2020). It is difficult to know the negative impact of child protection workers contribution to the ongoing issues of racial inequality when little is known about the way their personal attributes affect their decisions. It is difficult to positively impact families and children given ongoing historical disparities.

The theories that explain racism and the relevance to child protection workers in decision-making roles and within policies embedded in the child welfare system are structural discrimination theory and CRT. These theories suggests that racism manifests in decision-makers or systems that determine outcomes for disadvantaged groups.

### **Data Collection**

The data collection process gathered information from the RAS and a questionnaire (decision-making and demographic questionnaire). These instruments were appropriate to learn about child protection worker biases and attitudes. Information was collected using formr framework (Arslan et al., 2020) rather than Survey Monkey. Formr is an open source, freely available survey framework with similar capabilities of commercial software. It was cost efficient to go with formr to collect the data needed. Participants were provided with a generated link (<https://dtsurvey.formr.org>) to complete the survey and questionnaire. One hundred participants were needed and after more than a year of inviting participants, 92 participants were obtained. Minnesota child protection workers participated anonymously. Participants received two cases, the RAS and the demographic and decision-making questionnaire, once they consented to the survey. The survey and decision-making questionnaire were multiple choice.

The research sought to understand attitudes of child protection workers toward certain races. The instrument, RAS, focused on the racist attitudes of child protection workers toward the White and Black race to determine if there was any influence on decision-making. There was a total of 28 questions that focused on the following areas: physical, ego strength, control, anxiety, ethics, and general social. Each question had five choices for participants to choose from. The choices were strongly disagree, disagree, neither agree or disagree, agree or strongly disagree.

The demographic and characteristics questionnaire gathered information on each participant to gain an understanding of the relationship between years of experience,

ethnicity, risk of harm, advocacy, and decision-making among child protection workers.

The characteristics questionnaire asked participants their age, gender, education level (bachelor, master, doctorate, or no degree), years of experience, race, and ethnicity.

The case questionnaire was designed to collect information about the participants and their decision-making choices based on the cases provided. Participants were asked three questions to decide advocacy, risk of harm, and placement across two different cases. After reading each case, participants rated advocacy, risk of harm, and placement. Advocacy choices addressed how likely the worker would be to advocate for the family with five options (unlikely, less likely, somewhat likely, likely, and very likely). The risk of harm measure had four choices (neglect, physical, emotional, verbal – select all that apply). Placement had five choices in order of increasing severity (close, referrals, intensive family services, informal placement, and formal placement).

## **Results**

The primary aim of this research examined the characteristics, professional qualifications, and racist attitudes of those in child welfare decision-making roles and how they perpetuate racism, racial disproportionality, and disparities in child welfare. Advocacy, risk of harm, racial attitudes and placement decisions were examined to determine how they correlated with characteristics and professional qualifications.

### **Characteristics of Respondents**

Table 1 provides an overview of respondent characteristics. The average age of participants was 42.91 with 14.86 years of experience in the field. Over half the participants had a master's degree (51.7%), bachelor's degree (41.6%), doctorate degree

(5.6%), and no degree (1.1%). There were 92 total participants, 23 men (25%) and 69 (75%) women. Over half of the participants were White (54.3%), African American/Black (25%), Hispanic/Latinos (9.8%), Asian (5.4%), Native/Indigenous (4.3%), and multiracial (1.1%).



**Table 1***Characteristics of Participants*

	<i>M</i>	<i>SD</i>
Age	42.91	10.81
Years of experience	14.86	9.37
	<i>n</i>	%
Education		
Bachelor's	37	41.6
Master's	46	51.7
Doctorate	5	5.6
No Degree	1	1.1
Gender		
Male	23	25.0
Female	69	75.0
Ethnicity		
African American/Black	23	25.0
Asian	5	5.4
Hispanic/Latino	9	9.8
Native/Indigenous	4	4.3
Multiracial	1	1.1
White	50	54.3

*Note.* Total  $N = 92$ .  $N$  for some analyses differ due to missing data.

**Reliability**

For the RAS, ratings for White ( $\alpha = .95$ ) and Black ( $\alpha = .94$ ), both demonstrated good reliability.

## **Research Questions**

### **Research Question 1**

The first research question assessed the relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers. The independent variables were years of experience and ethnicity, and dependent variables were risk of harm, advocacy, and decision-making. As the dependent variables were ordinal or nominal, a series of Spearman's correlations addressed the research question. Table 2 shows correlations between years of experience and ethnicity (coded as White vs. Non-White) across the dependent variables.

Table 2 examined relationships in each of the cases. Case A (Group 1) and Case C (Group 2) involved Julie, the mother of Tyler and Jade. Julie is a single mother raising her children and left them home unattended while she worked extra shifts at night because of financial issues. She is a nurse. Tyler's father, Julie's ex-husband, has been involved all his life and paid consistently until he was laid off. Jade's father was never involved, nor supported his child. A report was made after Jade became sick, and Tyler went to the next-door neighbor who called child protection. In Case A, the children attended predominately White schools. In Case C, the children attended predominantly African American Schools.

Cases B (Group 1) and Case D (Group 2) involved Andrew, a widowed father raising two teenagers with maternal support. In Case B, the teenagers attended a predominately African American school. In Case D, they attended a predominantly White school. After Andrew's wife died, his mood became worse. The grandmother made a

child protection report after noticing bruises on her grandchildren. She witnessed Andrew yelling at the kids but never physical abuse. Andrew is the chief financial officer of a bank and works all the time. Before his wife had to retire on disability, she was a social worker.

There were relatively few significant correlations found when the relationship of the characteristics of Minnesota child protection workers (RQ1) were examined. There were correlations between child protection workers experience level, risk of harm and decision- making when fathers were Black, rather than White. The greater the experience of the child protection worker, the more likely the perception of neglect, rather than emotional, physical, or verbal harm and more extreme decisions would be perceived, such as informal and formal placement when fathers were Black (Group 1, Case B). White child protection workers perceived that in both father groups (Groups 1 and 2), White and Black fathers were perceived to be physical, rather than verbal, emotional or neglectful). Child protection characteristics had no correlation in either of the mother groups (Case A and C).

There were 48 different correlations presented. With a Type I error (alpha) rate of .05, by chance I would expect two to three false positives. This suggests the present findings are not particularly strong. To explain this in more detail, with a Type I error rate of .05 (also known as a .05 alpha error rate), one would expect roughly 1 of 20 relationships to show false positive results (i.e., falsely claim there is a significant correlation). The small number of significant results in the present study is more consistent with this error rate than the presence of legitimately significant relationships.

**Table 2***Correlations of Dependent Variables with Experience and Ethnicity*

Dependent variables	Experience	Ethnicity
<b>Group1, Case A</b>		
Advocacy	.02	-.03
Risk of neglect	-.01	-.04
Risk of physical harm	.25	.00
Risk of emotional harm	.17	-.03
Risk of verbal harm	n/a	n/a
Decision	.11	-.17
<b>Group1, Case B</b>		
Advocacy	-.18	-.23
Risk of neglect	.27*	.06
Risk of physical harm	-.03	.29*
Risk of emotional harm	.15	-.07
Risk of verbal harm	.11	.24
Decision	.40**	.22
<b>Group2, Case C</b>		
Advocacy	.07	-.09
Risk of neglect	.07	.12
Risk of physical harm	-.14	-.05
Risk of emotional harm	.09	-.14
Risk of verbal harm	-.03	-.03
Decision	-.02	-.43
<b>Group2, Case D</b>		
Advocacy	.00	-.09
Risk of neglect	-.05	-.14
Risk of physical harm	.12	.34*
Risk of emotional harm	-.03	-.19
Risk of verbal harm	-.08	.06
Decision	-.05	-.17

*Note.* For all dependent variables, higher scores indicate greater endorsement (e.g., more likely to experience harm, harsher decisions). \*  $p < .05$ , \*\*  $p < .01$ , \*\*\*  $p < .001$ .

## Research Question 2

The second research question addressed if a relationship between race/ethnicity and racial attitudes existed. To address this relationship, two independent sample t-tests examined the attitudes of White and Black child protection workers using the RAS scores

as the dependent variables and race/ethnicity (White vs. Non-White) as the independent variable.

Table 3 shows that White child protection workers had more favorable attitudes toward Whites (89.98) than did non-White child protection workers (79.68). Similarly, non-White child protection workers (86.57) had more favorable attitudes toward non-Whites than did White child protection workers (76.08).

**Table 3**

*Comparisons of White and Non-White Participant's RAS Scores*

Variable	White		Non-White		<i>t</i>	<i>df</i>	<i>p</i>	<i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>				
RAS_White	89.98	10.93	79.68	12.36	4.17	87	<.001	0.89
RAS_Black	76.08	11.65	86.57	13.62	3.96	89	<.001	0.83

### **Research Question 3**

The third research question asked whether racist attitudes as expressed on the RAS predict racial bias in case decision-making. The independent variables were RAS- White and RAS- Black. The dependent variables were risk of harm, advocacy, and decision-making. As the dependent variables were ordinal or nominal and the IVs were continuous, a series of Spearman's correlations addressed the research question. Table 4 shows correlations between RAS scores across the dependent variables in each condition.

The RAS examined the attitudes of child protection workers toward Black and White groups. In Group 1A, participants in this group with higher preferences for Whites related to more perceptions of a risk of neglect. White child protection workers attitude

toward White mothers were seen as more neglectful and less physical, emotional, and verbal but also less extreme placement decisions (e.g., referral for services vs. formal placement).

In Group 1B, White child protection participants with preferences for Black fathers related to less perception to advocate for them but perceived them to be more neglectful, rather than physical, verbal, or emotional harm compared to White mothers, whom White child protection workers were likely to advocate for even when perceived as more neglectful which could suggest gender bias. In Group 2C, White child protection participants in this group did not perceive any significant relationships for Black mothers compared to White mothers or Black and White fathers. In Group 2D, White participants with higher preferences for White fathers, RAS scores indicated that White child protection workers attitude toward White fathers related to greater risk of verbal harm and less risk of physical, emotional and neglect.

I now turn to RAS scores of Black child protection worker participants. Participants in this group with preferences for White mothers were unrelated to decisions in Group A of White mothers. In Group B, participants with higher preferences for Black fathers were related to greater perception to advocate for them. Participants perceived reduced risks of verbal harm and less harsh decisions, more referrals versus less removals from home. Participants in Group C with higher preferences for Black mothers related to reduced perceptions of neglect. In Group D, participants with higher preferences for Black fathers perceived fathers to be less emotional and verbally harmful and placement decisions were less harsh, more referrals versus formal placement.

**Table 4***Correlations of Dependent Variables With RAS Scores*

Dependent variables	RAS White	RAS Black
Group1, Case A		
Advocacy	-.07	.09
Risk of neglect	.27*	-.20
Risk of physical harm	-.10	-.07
Risk of emotional harm	-.09	.07
Risk of verbal harm	n/a	n/a
Decision	-.31*	.26
Group1, Case B		
Advocacy	-.30*	.45**
Risk of neglect	.33*	-.21
Risk of physical harm	.32*	-.26
Risk of emotional harm	.03	-.24
Risk of verbal harm	.21	-.31*
Decision	.22	-.33*
Group2, Case C		
Advocacy	.00	.11
Risk of neglect	.02	-.35*
Risk of physical harm	.26	.15
Risk of emotional harm	-.24	.17
Risk of verbal harm	.12	.25
Decision	-.08	-.12
Group2, Case D		
Advocacy	-.13	-.01
Risk of neglect	.48**	-.29
Risk of physical harm	.30	-.06
Risk of emotional harm	.06	-.35*
Risk of verbal harm	.34*	-.35*
Decision	.12	-.33*

*Note.* For all dependent variables, higher scores indicate greater endorsement (e.g., more likely to experience harm, harsher decisions). \*  $p < .05$ , \*\*  $p < .01$ , \*\*\*  $p < .001$ .

## **Findings**

### **Hypothesis 1**

The first hypothesis focused on the relationships between ethnicity, experience, and perceptions of risk and decision-making. This hypothesis received little support as there were only a few correlations between years of experience and ethnicity (coded as White vs. Non-White) across the dependent variables. Specifically, there were very few null hypotheses that could be rejected. There is no relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers. There was correlation between experience of child protection workers, perception of neglect and more extreme decisions in Group 1, Case B - Black father. White child protection workers related to greater perceptions of a risk of physical harm in both father groups (Group 1, Case B-Black father and Group 2, Case D-White father), no matter the race. However, Table 2 shows that there were relatively few significant correlations.

### **Hypothesis 2**

Hypothesis 2 asked whether there was a relationship between ethnicity and racial attitudes. This research hypothesis was supported as there is a relationship between race/ethnicity and racial attitudes. Results indicated a significant positive correlation between ethnicity and racial attitudes. White child protection workers expressed more favorable attitudes toward Whites and non-White child protection workers expressed more favorable attitudes toward Blacks.



### **Hypothesis 3**

Hypothesis 3 asked whether racial attitudes related to risk perceptions and decision making. Results show correlations between less favorable racial attitudes and decision-making. For example, in Case B, the father was Black, and in Case D, the father was White; Minnesota child protection workers, regardless of race, had less favorable attitudes toward African Americans, and that related to greater perceptions of harm and harsher placement decisions such as formal placement.

### **Summary**

In Chapter 4, I discussed this study's purpose, research questions and hypotheses, characteristics of variables, and results of the analyses. The research questions were broken down into three hypotheses that were evaluated using a survey and questionnaire to determine if child protection workers perpetuate racism within the child welfare system.

There were a few relationships between characteristics (years of experience and ethnicity) and decision-making. Child protection workers' experience correlated more with greater perceptions of neglect and decisions were harsher when the children were in the care of their Black father (Group 1, Case B) who was widowed with two teenagers. White child protection workers perceived a greater risk of physical harm in both Group 1, Case B and Group 2, Case D where the children were in the care of their fathers (Black and White).

There were also significant positive correlations between race/ethnicity and racial attitudes. White child protection workers showed favorable attitudes toward families

perceived to be of their own race. Similar results existed for non-White child protection workers. In general, more favorable racial attitudes toward Whites related to greater perception of risk when the children were in the care of their fathers. However, more favorable racial attitudes toward African Americans related to lower risk perceptions when evaluating cases where the children were in the care of their fathers.

This quantitative study, ex-post-facto design, found that relationships exist between biases and racial attitudes in decision-making among child protection workers. In Chapter 5, I present the findings, and implications of this research. Furthermore, I will review limitations and delimitations of this study. Recommendations for implementing changes to training and practice for child protection workers will be offered. I will talk about the perception of fathers who were seen as more harmful and run risk of receiving harsher placement decisions-informal and formal placement, no matter their race. The findings of the perception of fathers should be researched further to gain insight into gender differences in the child welfare system and gender bias among child protection workers.

Personal experiences of African American child protection workers in the workplace, the impact of COVID and its effects on child protection workers functioning capacity and identifying the barriers to service delivery in child welfare systems after COVID will provide knowledge of additional risks in child welfare system that perpetuate racism and decision-making. Also, I will discuss possible directions for future research and implications for child welfare practice.

## Chapter 5: Discussion, Conclusions, and Recommendations

Overrepresentation of families and children of color in child welfare systems is an ongoing issue. There are many risk factors that predispose people of color to child welfare. There is no standardization of practices mandated by the field which increases risk of disparities. Racism is a primary factor in child welfare that influence system policies, institutions, and individuals. Biases, racist attitudes, and lack of standardization in decision-making put disadvantaged groups at risk of unequal treatment. There is a large body of research that support the finding that racist attitudes and biases are present in the child welfare system. Furthermore, this causes inequality in the system (Adjei et al., 2018; Ahmad et al., 2019; Altmann, 2008; Ards et al., 2012; Armstrong et al., 2022; Bartholet, 2009; Bernal et al., 2009; Boyd, 2014; Brubaker, 2015; Center for the Study of Social Policy, 2011). Chase et al., 2022; Chavis et al., 2009; Chibnal et al., 2003; Child Welfare Information Gateway, 2021; Child Welfare Information Gateway, 2022; Christopher, 2013; Clark et al., 2008; Detlaff et al., 2010; Detlaff et al., 2020; Ellis, 2019; Font et al., 2012; Gallardo et al., 2009; Gourdine, 2019; Hayes-Greene, 2018; Heggdalsvik et al., 2018; Johnson et al., 2007; Johnson-Motoyama et al., 2018; Krase, 2015; Lee et al., 2015; Lewis, 1997; Lovato-Hermann et al., 2017; Marshall et al., 2014; McDaniel, 2020; Miller et al., 2012; MST Services, 2019; Mumpower et al., 2014; National Conference of State Legislatures, 2021; National Juvenile Defender Center, 2019; Netherland et al., 2016; Patton, 2018; Pincus, 1997; Pryce, 2019; Roberts, 2002; Roberts, 2014; Skivenes et al., 2016; Thomas et al., 2022; Weng, 2020). Although there is a plethora of literature on child protection practices, there is minimal research to

understand the decision-making process and the impact of those in decision-making roles contribution to inequalities in the child welfare system.

The purpose of this quantitative, ex-post-facto design was to examine the relationship between years of experience, race/ethnicity, risk of harm, advocacy, racial attitudes, and decision-making among Minnesota child protection workers. Additionally, the work seeks to assess factors related to decision-making to determine if racial attitudes of child protection workers perpetuate disproportionality and disparities.

This chapter includes a discussion of the interpretation of findings, implications, recommendations, and conclusion focused on the following:

R1: What is the relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers?

R2: Is there a relationship between race/ethnicity and racial attitudes?

R3: How do racist attitudes as expressed on the RAS predict racial bias in case decision-making?

CRT and structural discrimination theory note that racism exists in decision-makers or systems that determine outcomes for disadvantaged groups. The research supports that these theories help explain racism in child welfare systems and the overrepresentation of minorities (Gourdine, 2019; Hayes-Greene & Love, 2018; Kolivosky et al., 2018; Maguire-Jack et al., 2020; MST, 2019; Norishood et al., 2023; Pincus, 1996; Pryce, 2019). Race is a primary determinant that accounts for disparities in the decision-making process in child welfare systems (Maguire-Jacket et al., 2020; Norishood et al., 2023). Structural discrimination theory notes that systems support white

privilege, thus creating disproportionality (Hayes-Greene & Love, 2018; Pincus, 1996; Pryce, 2019). These theories explain how society functions and the perpetuation of racial bias and disparities.

### **Interpretation of the Findings**

Bias and racism present in several different ways. Families of color run the risk of adversity and inequality within child welfare systems. Racism in child welfare systems can be internal, interpersonal, structural, and institutional (Boyd, 2015; Chibnal et al., 2003; Dettlaff & Boyd, 2020, Dettlaff & Rycraft, 2010; MST Services, 2019; Norishood et al., 2023). Racism is a cause of concern and continues to be widely researched to understand disproportionality and disparities in systems and among those in decision-making roles in child welfare.

The present study examined the relationship between years of experience, ethnicity, risk of harm, advocacy, and decision-making among child protection workers was not supported as the characteristics of child protection workers largely did not affect evaluations. There were few statistically significant relationships between years of experience and ethnicity (coded as White vs. Non-White) across the dependent variables. There were, however, some significant correlations between experience, perception of neglect and more extreme decisions (removal from home) in Group 1, Case B (Black father – African American school). White ethnicity of workers related to greater perceptions of a risk of physical harm in both Group 1, Case B (Black father – African American school), and Group 2, Case D (White father – White school). However, Table 2 shows that there were relatively few significant correlations.

Cases A (Group 1) and Case C (Group 2) involved Julie, the mother of Tyler and Jade. This case did not show any correlations between characteristics. Julie was a single mother who left her minor children (10, 2) home alone while she worked. While Julie was at work her youngest child became sick. Her oldest child sought the help of the next-door neighbor who tried to reach the mother for two hours before reporting the situation to child protection. The neighbor did treat the sick child who had a fever with Ibuprofen found in her daycare bag.

In Case A (Group 1), Tyler and Jade attended Paul and Sheila Wellstone Academy, a predominately White school and New Horizons Daycare (predominantly White), and in Case C (group 2), the school was Lucy Laney (predominantly African American) and Kindercare (predominantly African American), who primarily serve people of color.

In Cases B and D, the family is African American. Andy and Joy are raised by their single father, and their mother is deceased. Their maternal grandmother is involved and expressed concerns about the father's behaviors which led to child protection involvement. In Case B, the school is North High School and is predominately African American and Case D, Robbinsdale High School is not predominately African American.

Correlations were found between child protection workers' characteristics (years of experience and ethnicity) across the dependent variables in Group 1, Case B (Andrew, Andy, and Joy). The greater the experience of the child protection worker, the greater the perception of risk of harm. In the case of Andrew, Andy, and Joy (Group 1, Case B) and child protection workers of White ethnicity related to perception of greater risk of

physical harm in both groups involving the father (Group 1, Case B and Group 2, Case D).

The literature supports that bias and discrimination of child protection workers influence decision-making (Chibnal et al., 2003; Font et al., 2012; Johnson-Motoyama et al. 2018; MST Services, 2019). A multitude of factors, such as case characteristics, child protection worker characteristics, organizational and external factors, underlying risk, racial differences, racial composition, rurality, proportion of children living in poverty, percent of single-headed households and state laws are factored into decision-making in child protection (Maguire-Jack et al., 2020, p. 3). Decision-making is a multi-level process that should include child protection workers, managers, and external community members. Child protection workers characteristics and their effects on the decision-making process should be considered (Heggdalsvik et al., 2018). Biases and stereotyping influence case processing and decision-making (Christopher, 2013; Clark et al., 2008; & Johnson et al., 2007).

There were significant correlations between child protection workers ethnicity and racial attitudes. White and non-White child protection workers showed racial preferences toward their own race. Racial preferences increase the risk of racial decision-making. Racism perpetuates disproportionality and disparities in child welfare systems is well supported in the literature. Black families and children are continuously overrepresented in the child welfare system. They are disproportionately represented across stages of involvement within the system (referral to closing case, as biases can occur at any stage of the decision-making process. Sociodemographic and racial

discrimination associated with referrals, investigations and caregivers contribute to disparities (Ards et al., 2012; Dettlaff & Boyd, 2020; Dettlaff & Rycraft, 2010; DiAngelo, 2011; Ellis, 2009; Font et al., 2012; Gourdine, 2019; Hayes-Greene & Love, 2018; Heggdalsvik et al., 2018; Kolivoski et al., 2014; Norishood et al., 2023; Roberts et al., 2014; Thomas et al., 2022). Racism in child welfare systems lies within those in decision-making roles as there is the propensity to make decisions based on racial preferences (Heggdalsvik et al., 2018). CRT suggests that racism can manifest in decision-making that determines outcomes for disadvantaged groups and inequity in child welfare services (Armstrong et al., 2022; Gourdine, 2019; Hayes-Greene & Love, 2018; Kolivosky et al., 2018; MST Services, 2019).

In the present work, racist attitudes are related to harsher decision-making when there are racial preferences. White favoring attitudes correlated more with risk of harm decisions (neglect, physical, emotional, and verbal) rather than advocating for families when the mother was White (Case A) and in both cases of the fathers, no matter the race (Case B and Case D). Unfavorable attitudes toward blacks correlated more with advocating for families rather than risk of harm decisions. White mothers were seen as more neglectful and child protection workers were less inclined to advocate for families compared to racial preferences for Blacks. More favorable racial attitudes toward blacks correlated with greater advocacy for families, reduced perception of risk of harm and less harsh decisions (referrals versus out of home placement). There is substantial literature that supports the relationship of racist attitudes and racial bias in decision-making (Adjei & Minka, 2018; Altmann, 2008; Ards et al., 2012; Bartholet, 2009; Bernal et al., 2009;



Boyd, 2014; Brubaker, 2015; Chase et al., 2022; Chibnal et al., 2003; Child Welfare Information Gateway, 2021; Child Welfare Information Gateway, 2022; Clark et al., 2008; Detlaff et al., 2010; Detlaff et al., 2020; Ellis, 2019; Font et al., 2012; Gourdine, 2019; Heggdalsvik et al., 2018; Johnson et al., 2007; Johnson-Motoyama et al., 2018; Krase, 2015; Lovato-Hermann et al., 2017; Marshall et al., 2014; Miller et al., 2012; MST Services, 2019; Mumpower et al., 2014; National Conference of State Legislatures, 2021; National Juvenile Defender Center, 2019; Roberts, 2002; Roberts, 2014; Skivenes et al., 2016; Thomas et al., 2022; Weng, 2020). There are notable differences in beliefs, values, and attitudes that vary among cultures (Gallardo et al., 2009).

Child protection workers are members of a race and have beliefs, values, and attitudes that influence their cultural attitudes and guide them in decision-making. There are notable differences in beliefs, values, and attitudes that among cultures (Gallardo et al., 2009). These factors influence racial attitudes and biases among child protection workers. CRT and structural discrimination theory explain racism in child welfare (Armstrong et al., 2022; Hayes-Greene et al., 2018; Kolivosky et al., 2014; McDaniel, 2020; Pincus, 1996; Pryce, 2019). Racism within policies on a structural level is intentional and negatively affects minorities. Racism involves institutional policies and practices, cultural messages, and individual actions and beliefs (Detlaff & Boyd, 2020; Thomas et al., 2022). Historically, racial disproportionality and disparities are influenced by racial bias and discriminative child welfare system practices, geographical context, structural racism, policies, and legislation.

The history of child protection in America is divided into three areas (Myers, 2008). The first era – 1875, before organized child protection.; Second era - 1875 to 1962, the creation and growth of organized child protection through nongovernmental child protection societies and the third, modern era began in 1962, government sponsored child protective services. In 1962 - The publication of “The Battered-Child Syndrome” and amendments to the Social Security Act were significant during this era and was instrumental in the passing of laws that required doctors to report suspected child abuse (Myers, 2008, p. 455). In 1963 – The first four child abuse reporting laws were made.

Organized child protection developed in 1874 after the rescue of Mary Ellen Wilson (Myers, 2008). Mary Ellen Wilson was a 9-year-old child who lived with her guardians in a part of New York, Hell’s Kitchen who was frequently beaten and neglected. A religious missionary (Etta Wheeler) learned of unfortunate circumstances and intervened. Etta was not able to get any help from the police or agencies that help children, and this was the era before the existence of Child Protection. She went to Henry Bergh, who was the influential founder of the American Society for the Prevention of Cruelty to Animals. Bergh sought assistance from his attorney, Elbridge Gerry, to find a legal way to rescue Mary. Mr. Gerry utilized a variant of the writ of habeas corpus to remove Mary Ellen from her guardians (Myers, 2008).

In 1875 - The world’s first organization devoted to child protection was developed-The New York Society for the Prevention of Cruelty to Children (NYSPCC). In 1967 - all states had reporting laws, 1980 – over 1 million cases reported, 1990 – over 2 million reports and in 2000 - around 3 million reports (Myers, 2008, p. 456).

Throughout its history, racism has been embedded in child welfare systems' policies and structures to first exclude and perpetuate oppression against families of color (Dettlaff & Boyd, 2020). Dettlaff and Boyd (2020) noted that child welfare policies and their implementation continue to disproportionately impact children of color. Structural Discrimination Theory addresses the direct role of racism in creating and perpetuating risks for families of color.

### **Implications**

The findings of this work and previous research indicate that the child welfare system should be restructured for the betterment of disadvantaged groups who face unwarranted substantiation into an unstable system (Chibnal et al., 2003). The system does not represent the foundation for which it was designed. It was built under the Adoption and Child Welfare Act of 1980, designed to promote safety, permanency, and well-being for all. The goal of child welfare is to make decisions about preserving families and providing safe environments for children free of racial preferences, attitudes, or biases.

Child protection workers are expected to make decisions in the best interest of children and families. Biases, judgments, or stereotypes should not shape their opinions and guide decisions. All people have biases, external or internal that can impact perceptions about certain groups of people and how they are treated. Biases can be harmful when it comes to making decisions for others based on beliefs, attitudes, and assumptions.

In Minnesota, the child welfare system is comprised of predominately White child protection workers than non-White workers. The two biggest counties in Minnesota, Hennepin and Ramsey, are recognized as problematic (Ards et al., 2012; Johnson et al., 2007). In both counties, Black children have more cases substantiated, out of home placements and parental rights permanently terminated when compared to White children (Child Welfare Information Gateway, 2020 & Child Welfare Information Gateway, 2021). Families of color do not have the opportunity to receive culturally specific workers because of the lack of availability of non-White workers in the system compared to the majority (White) workers. This imbalance increases the risk of experiencing bias or inequality.

The findings of this work found that Black child protection workers had more positive views of fathers than White child protection workers. The attitudes of Black child protection workers were favorable when children were in the care of their fathers versus the non-favorable attitudes of White child protection worker views of children in the care of their fathers. Black child protection workers were willing to advocate for fathers whereas White child protections workers were not and perceived fathers to be at greater risk for physical harm (Black and White).

These findings may suggest that Black child protection workers are more tolerant of fathers stepping up as opposed to being intolerant and viewing them as more physical. There is a difference between workers and their perception of fathers compared to the views of White mothers whom they preferred to advocate for even when they were seen as more neglectful.

Change is needed to stop racial inequality that leads to decisions that perpetuate racism. Decision-making in child welfare needs further attention to address these inequalities in decision-making points. Standardizing decision-making using a multilevel decision-making approval process will help to align decision-making. Strengthening decision-making processes is a responsibility for everyone involved in child welfare systems. Administrators establish systems and set policies and perform quality reviews; managers and supervisors are responsible for implementing and supporting policies and programs, and frontline workers (child protection workers) make decisions at the individual and family level.

Child protection workers, supervisors, and managers make decisions that affect outcomes for children and families. The inconsistencies in the processes and practices in child welfare are ongoing, which suggest that decisions are not consistent among workers and run risk of differences in counties and jurisdictions that increase disparities. Implementing standards that are well established, standardized, and consistent, can guide decisions that will protect children and families from biases.

Decision-making is not without complexity. The environments from which child protection workers operate can make decision-making difficult and with uncertainty. It is difficult to assess and make decisions when time constraints, lack of information, availability of resources and services for families are present. Child protection workers decision-making can be further complicated by family factors and the expectation of accountability.

Contradictions in beliefs and attitudes of child protection workers can lead to subjective and imperfect decision-making. The child welfare system is a fast-paced system and there is a sense of urgency to act on reports made. Frontline workers are making decisions, with or without sufficient information; guided by system policies, personal attitudes, and beliefs. These factors increase the likelihood of errors. Decision-making strategies lack uniformity and are influenced by subjectivity leading to arbitrary outcomes.

A multi-level approval process consists of dedicated teams (internal staff and external community members) in which consensus is made at each decision-making level (screening, pathway determination, safety, substantiation, intervention, permanency, and case closure) to ensure that all decisions are made without bias. From screening to case closure, there should be less subjectivity from child protection workers. To make equitable and informed decisions an outside diversified agency should review substantiated cases for review and final approval. Decisions should be made using multiple methods to learn about families and gain knowledge to make informed decisions guided by diverse dedicated teams.

Formalized operational structures using an anti-racist approach will address inequities in child welfare policies and practices. These changes will improve consistency and create more equitable outcomes for families of color. Restructuring the pertinent information completed on forms, such as, masking race upon initial reporting can minimize stereotyping, judgments, biases, and opinions at onset. Establishing diverse teams consisting of internal staff and external community members is needed. These

dedicated teams can monitor cases through the decision-making points to act as a check and balance, and a tier approval process.

Initial reporting should focus on the situation rather than the race of the family. Child protection workers should be held to a standard of equitable expectations. There should be regular reviews of workers' decisions to identify biases that need to be addressed with additional training. A training model to help child protection workers examine and address personal racial biases. Mitigating individual racism is important.

Collaborative efforts at the state, local and federal level can increase efforts to mandate and standardize policies and practices. Increasing diversity, training, and hiring culturally appropriate workers to diversify the workplace may help to build trust with families of color who desire to be supported and treated fairly. New staff should be trained with a focus on anti-racism and racial equity.

### **Limitations and Delimitations**

This research had limitations in obtaining participants. COVID created many barriers to accessibility of child protection workers which made it difficult to get participants. Many child protection workers were working from home and the invitation to participate was not as visual as expected. The increase in referrals in child welfare services during COVID increased caseloads, workplace pressure, decrease in staff (retired or left the department), lack of time as expectations surmounted in a system that was overworked and short staffed. Many workers were less concerned about participating in a survey during this time.

The research subject was uncomfortable to those in the child welfare system despite the survey being anonymous. The subject itself could have been perceived as judgmental since I was seeking to understand information that questioned the characteristics and decisions of child protection workers. The information this research was seeking to understand created uncertainty among workers who was conflicted in participating which might have contributed to the lack of interest in participating.

This research did not capture the specific county of the participants. If the question was county specific, sociocultural factors could have been examined for differences. Sociocultural factors can potentially influence decision-making.

In this research there were more women participants (75%) than men (25%). The inability to determine the differences in decision-making of males and females could have examined preferences of gender and gender bias that influence decision-making.

Delimitations of the research was specific participants and geographic location. The study was limited to child protection workers in the state of Minnesota.

### **Recommendations for Future Research**

This study adds to the body of literature of the ongoing disparities and disproportionality in child welfare systems. Perceptions of fathers (White or Black) as more harmful and deserving of harsher decisions need to be better understood and researched further. A qualitative study to learn about fathers' perception of their experiences in the child welfare system to gain insight into gender differences will be helpful in determining gender bias within the system among child protection workers.



A qualitative study to understand African American child protection workers' personal experiences in the workplace and the presence of workplace racism would add knowledge regarding racism and decision-making influenced by workplace experiences.

Child protection workers are overworked as the caseloads increased since 2020. The impact of COVID on child protection workers mental health and functioning capacity in decision-making roles is unknown. Future research should provide insight into challenges faced by workers and how that presents in the workplace.

Identifying the barriers in child welfare systems after COVID will provide insight into service delivery, changes in addressing referrals in a timely manner, staff turnover during COVID, increase in caseloads, child protection worker burnout and changes to policies and procedures.

### **Conclusion**

Racial disproportionalities and disparities in child welfare systems is a persistent issue in the United States. In this study, participants were exclusively from Minnesota. Child protection workers in Minnesota make up a small percentage in comparison to workers throughout the country. The findings did support issues of racial attitudes that related to child protection workers' decision-making. It seems that biases and racism is a cycle that lives within an unhealthy system. Unfortunately, unhealthy thoughts and beliefs belonging to those in decision-making roles further complicates the issues.

Policies and practices must be reformed to reduce the impact of racism within the institution and improve the factors that put families of color at risk. The system needs to be redefined to hold child protection workers accountable for biased decision-making.

People of color deserve equality and the current system is built on racial inequality inside and out. New policies should be introduced, and trainings developed to address worker biases, holding workers accountable for making changes within themselves to provide sound decision-making independent of race.

A process that is fair will strengthen the purpose of the child welfare system which was designed to ensure the best interest of children. The facts of the case should be the only focus and not race. The decision-making process must take into consideration a multitude of factors. Case or family and child characteristics should not be the only focus. It is important to recognize child protection workers and contextual factors to understand decision-making and decision-making errors.

A standardized system that requires multilevel and uniform decision-making processes is important to ensuring each decision point is approved collaboratively by internal staff and external members of the community. Rebuilding the institution and laying the groundwork for antiracist casework practices and strategies will transform a system and its workers therefore reducing disparities.

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### Appendix A: Case A

Case #1: Tyler and Jade  
Mother: Julie, age 30

Father: Charles, age 30

Children:

Tyler, age 10 – Attends Paul and Sheila Wellstone Academy

Jade, age 2, Attends New Horizon Day Care

#### **Presenting Situation**

Neighbor, Mrs. Smith, contacted child protection at 9:30 PM to report Tyler and Jade alone at home. Tyler was apparently responsible for watching Jade while his mother, Julie, was at work. Jade became ill. Tyler was unsure as to what to do and walked next door to Mrs. Smith for help. Mrs. Smith attempted unsuccessfully for two hours to contact Julie with numbers Tyler provided. Mrs. Smith was concerned because Jade was running fever and vomiting. Mrs. Smith decided to contact child protection for assistance.

On-Call Worker, after consulting her supervisor, went to the home and spoke with Mrs. Smith and Tyler. Tyler reported he "thought" his mother would be home around 11:00 PM. She was working at the hospital as a nurse. Worker found that Ms. Smith had given Jade a dose of ibuprofen that she found in Jade's daycare bag. Jade's fever was down, and she was playing quietly. Worker observed the home which was strewn with toys and clothes. There were dirty dishes in the sink. In speaking with Tyler, worker found that, recently, he was having to watch Jade after school for Julie to work.

Mrs. Smith indicated willingness to wait for Julie and the On-Call Worker also decided to remain to talk with Julie. At, 11:15 PM, Julie arrived home. The On-Call

Worker explained the situation. Julie, angry at first, listened when Mrs. Smith explained that Jade was sick, and Tyler was scared and unsure. Julie, alarmed that Jade was ill, responded appropriately to the children. She thanked Mrs. Smith for her concern and expressed embarrassment regarding not being available for her children. She stated she could not keep her cell phone on at work and was moved to a different floor for her second shift due to short staffing. Julie stated she was having money problems and covering extra shifts at the hospital for additional income.

The On-Call Worker explained that she did not observe any immediate safety issues at this time. However, she was concerned about Julie having the children at home unattended. The On-Call Worker explained another worker would be in touch the next day to follow-up. Julie stated she did not have to work the next day and would be available. Mrs. Smith agreed to assist Julie with Tyler if Jade needed medical attention through the night.

### **Current Situation**

Investigative Worker goes to interview Julie, Tyler, and Mrs. Smith the day after the on-call report is initiated.

### **Background Summary**

Julie was born into an upper middle-class family in a small city in Alabama. Julie describes her childhood as normal and uneventful. Her parents were married at a young age. Her father worked his way up to partner in a large local construction company. Her mother worked her way through nursing school and after working for a few years decided

to stay home with Julie and her younger brother. Her parents remain married and live close to Julie.

Julie was successful in school and described herself as popular and in many extra-curricular activities. In her senior year in high school, she met her future husband, Charles. She describes their meeting as "love at first sight". Charles was a star quarterback at their high school and was also academically successful. Julie and Charles began secretly dating and their relationship progressed quickly. Charles' family knew of the relationship and though having reservations did not voice strong opposition. Julie hid their relationship from her parents for fear they would not approve of him because he was a star athlete.

After high school, Charles received a football scholarship to a small in-state university close by and Julie decided to follow him there. She continued to hide their relationship from her family while she pursued nursing school. In her sophomore year, Julie discovered she was pregnant with Tyler. Julie and Charles, while apprehensive regarding an unplanned pregnancy, had no reservations regarding getting married and having the child. Julie, however, realized she could no longer hide her relationship with Charles from her family and did not want to. Julie and Charles went together to talk with her parents. Julie's parents were extremely angry and hurt. They demanded Julie break-up with Charles and have an abortion, or they would cut off all support to her. Julie chose to stay with Charles and have the child. Julie's parents stopped paying her tuition and housing.



Julie and Charles were able to secure student housing and began using the local health department for her prenatal care. By securing part-time employment, Julie and Charles were able to continue college. Julie's graduation was postponed due to Tyler's birth, however, she eventually completed her nursing degree. Charles reluctantly decided after Tyler's birth that he needed to work full-time. He gave up his scholarship and began working at a local manufacturing company.

Through years of struggling financially with little family support, Charles and Julie were unable to hold their marriage together. They divorced when Tyler was five-years-old. Charles was active in Tyler's life and provided monetary and emotional support to Julie after the divorce. A few years after the divorce Julie had a brief relationship with another man that resulted in Jade's birth. Jade has never met her father, and Julie does not know his whereabouts. Charles was very hurt by Julie's relationship and while maintaining visitation with Tyler has distanced himself from Julie. Also, Charles was recently laid off from his job and is unable to make regular child support payments for Tyler. Julie is working extra shifts at the hospital to keep up with bills. She has daycare for Jade, and Tyler is in school. She uses her dinner break between shifts to pick up Tyler at school, pick up Jade at daycare, and settle them at home before returning to work a second shift. She typically works two to three extra shifts per week.

Julie expresses regret for relying on Tyler for the care of Jade but sees no alternative. She describes Tyler as mature, responsible child who is "no trouble" and is able to take care of himself. She expresses confidence that he can also care for Jade. She describes Jade as a rambunctious two-year-old who loves her big brother. Julie

mentioned several times how much Tyler loves his sister and wants to take care of her. She also mentions that he helps care for Jade when Julie catches up on sleep or is "feeling down". Julie is very concerned about her financial situation but expresses that Charles is doing the best he can, and she is reluctant to talk with him about her struggles after "everything that happened with Jade's dad". She also states she has no one else to turn to for help.

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[https://socialwork.ua.edu/wp-content/uploads/2019/05/Tyler-and-Jade\\_accessible.pdf](https://socialwork.ua.edu/wp-content/uploads/2019/05/Tyler-and-Jade_accessible.pdf)

## Appendix B: Case B

Case #2:        Andy and Joy  
Father:        Andrew Allen, age 45  
  
Mother:        Dora Allen, Deceased  
  
Children:       Andy Allen, age 17 – Attends North High School  
                    Joy Allen, age 14 – Attends North High School

**Presenting Situation**

Maternal grandmother, Mrs. Dees, called child protection on a Friday at 5:00 p.m. to request an investigation of her son-in-law's home. Mrs. Dees believes her granddaughter and grandson are being abused by their father. Grandson, Andy, is 17 and grand-daughter, Joy, is 14. Their mother (her daughter) is deceased.

Mrs. Dees reported her grandchildren spend one weekend a month in her home. They are currently with her, and she saw bruises on Joy's arms and legs. She is also concerned that Andy has bruises; however, he is wearing a long-sleeved shirt and pants and will not allow her to look. Joy and Andy will not discuss what caused the bruises. Andy said his father did get upset with him and with Joy but would not say anything further.

Mrs. Dees did not want to send the children back home on Sunday afternoon. She said her son-in-law had developed a serious temper, and she is afraid he has begun to abuse the children. She said since her daughter died earlier this year, Andrew has become increasingly angry and verbally abusive toward the children even in her presence. She has not seen him hit the children, but she has heard him yelling at them.

After discussing the call with the supervisor, the on-call worker made a visit to Mrs. Dees' home. She met with Mrs. Dees, Andy and Joy. Joy was crying and refused to speak. Andy would only say his father's temper has gotten worse since Dora's death.

The worker observed several marks on Joy's arms and legs: two round shaped marks about 1 ½ inch in diameter on either side of her left upper arm and three marks on the back of her right calf, each about two inches in length and ½ inch in width. The worker said "You have several bruises, Joy. Can you tell me how you got them?" Joy cried harder and did not respond. The worker said, "Sometimes I talk with teenagers who are unsure about whether to talk to me.

They want their family to get help, but they don't want anyone to get in trouble." Joy continued to bow her head and cry. Andy said "Look, just please stop asking questions; we can handle it and you're just going to make things worse." The worker explained that she and other social workers have been able to help other families before. She explained that she knew the children's mother had passed and expressed condolences. She said, "Sometimes when families are grieving, people need extra help. Maybe that is so for your family?" The children did not comment. Mrs. Dees tried to get her grandchildren to discuss their home life, but they continued to remain silent. Andy refused to show the worker his arms or legs.

The on-call worker spoke with her supervisor and concluded the children needed to stay with Mrs. Dees until the father could be interviewed. The on-call worker instructed Mrs. Dees to contact her immediately if Andrew called or came to pick up the children. Mrs. Dees stated she does not hear from Andrew when she has the children, and

he does not respond when she calls. Mrs. Dees made a point to tell the worker she wants the children to be with their father but only if the children are treated well and remain safe.

After leaving Mrs. Dees, the on-call worker tried calling the father at his home but received no answer. The on-call worker called Andrew's cell phone number provided by Mrs. Dees. There was no answer, and the worker left multiple messages on the voice mail. The worker continued to attempt contact with Andrew over the weekend.

### **Current Situation**

On Sunday morning, the on-call worker received a frantic call from Andrew who wanted to know why the worker was calling and asking if Andy and Joy were safe. The worker explained the children were safe and with Mrs. Dees. The worker further explained that a report was made alleging abuse of Andy and Joy. She stated that she had seen the children and need to talk with him about them. Andrew became angry and stated he could not "handle the children" since his wife's death. He stated they were "ungrateful" and could just stay with his mother-in-law "forever". The worker explained that someone needed to speak with Andrew as soon as possible. Andrew stated we would be available after work on Monday and did not want the children at home. The worker asked if Mrs. Dees agreed, could the children stay there? Andrew agreed stating, "She can have them." The worker told Andrew someone would be in touch with him Monday afternoon. The worker contacted Mrs. Dees, and she agreed to keep the children as long as necessary.

### **Background Summary**

Andrew grew up in a middle-class home with both his parents and two older brothers. His father was a funeral home director and his mother taught school. Andrew was a good student but preferred the band to athletics. His father and brothers were great athletes and often teased Andrew about his lack of athletic skills. His mother was his greatest supporter and encouraged his music interest.

Andrew worked his way through college and received a lot of help from his mother but minimal support from his father. After college he returned home with a degree in Business Administration but refused to go into the funeral home business with his father and brothers. He got a job at a local bank as a teller and has worked his way up to chief loan officer.

Andrew's deceased wife, Dora, was an only child whose father worked on a train. He died in a train accident when she was four years old. She was raised in a middle-class home by her schoolteacher mother who never remarried. Dora was an excellent student in high school and college. She majored in social work and worked as a social worker until her health caused her to retire on disability.

Andrew and Dora started dating in the 10<sup>th</sup> grade and became inseparable. They were both in the band, had a large group of friends and were both very outgoing and charismatic. Andrew felt he could tell Dora his inner feelings and thoughts. After high school, they went to the same college and had a very lavish wedding a year after they graduated. Andy was born two years later. Joy was born just after Andy's third birthday.

Dora was diagnosed with advanced ovarian cancer two years ago. Andrew became increasingly angry and withdrawn as Dora's illness progressed. He made sure she

had excellent health care and spent a lot of time at her bedside. He resented Mrs. Dees' overprotective attitude toward Dora and felt Mrs. Dees did not trust him to take good care of Dora. Andrew reluctantly allowed Mrs. Dees to assist with his wife's care because he knew how close they had always been. Even after their marriage, Mrs. Dees and Dora did their grocery shopping together and participated in many church activities together.

Dora had been the primary disciplinarian and did not believe in physical punishment. She spent a lot of time with her children, attending their many activities. Andy was a natural athlete like his grandfather and uncles. Joy took piano lessons and dance. Both children sang in the church choir. The children attended church with their mother. Andrew continued to belong to the church he grew up in but seldom attended.

Andrew admits when Dora died his anger and withdrawn behavior grew worse. He says he lost the one person who was "always on his side". He says the children talk back to him and do not obey. He does not feel he knows them because he has spent so much time working. He further feels they do not appreciate him or understand how much he misses their mother.

Andrew admits both his mother and Mrs. Dees have been trying to talk to him about the children's needs but he just cannot seem to think about them right now. He states his work is the only thing he can manage at this point. He states, "It is all I can do to maintain my performance at work. I need Andy and Joy to just do what I say and not talk back."

competencies/ [https://socialwork.ua.edu/wp-content/uploads/2019/05/Andy-and-Joy\\_accessible.pdf](https://socialwork.ua.edu/wp-content/uploads/2019/05/Andy-and-Joy_accessible.pdf)



## Appendix C: Case C

Case #1: Tyler and Jade  
Mother: Julie, age 30  
  
Father: Charles, age 30  
  
Children: Tyler, age 10 – Attends Lucy Laney  
  
Jade, age 2, Attends Kindercare

**Presenting Situation**

Neighbor, Mrs. Smith, contacted child protection at 9:30 PM to report Tyler and Jade alone at home. Tyler was apparently responsible for watching Jade while his mother, Julie, was at work. Jade became ill. Tyler was unsure as to what to do and walked next door to Mrs. Smith for help. Mrs. Smith attempted unsuccessfully for two hours to contact Julie with numbers Tyler provided. Mrs. Smith was concerned because Jade was running fever and vomiting. Mrs. Smith decided to contact child protection for assistance.

On-Call Worker, after consulting her supervisor, went to the home and spoke with Mrs. Smith and Tyler. Tyler reported he "thought" his mother would be home around 11:00 PM. She was working at the hospital as a nurse. Worker found that Ms. Smith had given Jade a dose of ibuprofen that she found in Jade's daycare bag. Jade's fever was down, and she was playing quietly. Worker observed the home which was strewn with toys and clothes. There were dirty dishes in the sink. In speaking with Tyler, worker found that, recently, he was having to watch Jade after school for Julie to work.

Mrs. Smith indicated willingness to wait for Julie and the On-Call Worker also decided to remain to talk with Julie. At, 11:15 PM, Julie arrived home. The On-Call

Worker explained the situation. Julie, angry at first, listened when Mrs. Smith explained that Jade was sick, and Tyler was scared and unsure. Julie, alarmed that Jade was ill, responded appropriately to the children. She thanked Mrs. Smith for her concern and expressed embarrassment regarding not being available for her children. She stated she could not keep her cell phone on at work and was moved to a different floor for her second shift due to short staffing. Julie stated she was having money problems and covering extra shifts at the hospital for additional income.

The On-Call Worker explained that she did not observe any immediate safety issues at this time. However, she was concerned about Julie having the children at home unattended. The On-Call Worker explained another worker would be in touch the next day to follow-up. Julie stated she did not have to work the next day and would be available. Mrs. Smith agreed to assist Julie with Tyler if Jade needed medical attention through the night.

### **Current Situation**

Investigative Worker goes to interview Julie, Tyler, and Mrs. Smith the day after the on-call report is initiated.

### **Background Summary**

Julie was born into an upper middle-class family in a small city in Alabama. Julie describes her childhood as normal and uneventful. Her parents were married at a young age. Her father worked his way up to partner in a large local construction company. Her mother worked her way through nursing school and after working for a few years decided

to stay home with Julie and her younger brother. Her parents remain married and live close to Julie.

Julie was successful in school and described herself as popular and in many extra-curricular activities. In her senior year in high school, she met her future husband, Charles. She describes their meeting as "love at first sight". Charles was a star quarterback at their high school and was also academically successful. Julie and Charles began secretly dating and their relationship progressed quickly. Charles' family knew of the relationship and though having reservations did not voice strong opposition. Julie hid their relationship from her parents for fear they would not approve of him because he was a star athlete.

After high school, Charles received a football scholarship to a small in-state university close by and Julie decided to follow him there. She continued to hide their relationship from her family while she pursued nursing school. In her sophomore year, Julie discovered she was pregnant with Tyler. Julie and Charles, while apprehensive regarding an unplanned pregnancy, had no reservations regarding getting married and having the child. Julie, however, realized she could no longer hide her relationship with Charles from her family and did not want to. Julie and Charles went together to talk with her parents. Julie's parents were extremely angry and hurt. They demanded Julie break-up with Charles and have an abortion, or they would cut off all support to her. Julie chose to stay with Charles and have the child. Julie's parents stopped paying her tuition and housing.

Julie and Charles were able to secure student housing and began using the local health department for her prenatal care. By securing part-time employment, Julie and Charles were able to continue college. Julie's graduation was postponed due to Tyler's birth, however, she eventually completed her nursing degree. Charles reluctantly decided after Tyler's birth that he needed to work full-time. He gave up his scholarship and began working at a local manufacturing company.

Through years of struggling financially with little family support, Charles and Julie were unable to hold their marriage together. They divorced when Tyler was five-years-old. Charles was active in Tyler's life and provided monetary and emotional support to Julie after the divorce. A few years after the divorce Julie had a brief relationship with another man that resulted in Jade's birth. Jade has never met her father, and Julie does not know his whereabouts. Charles was very hurt by Julie's relationship and while maintaining visitation with Tyler has distanced himself from Julie. Also, Charles was recently laid off from his job and is unable to make regular child support payments for Tyler. Julie is working extra shifts at the hospital to keep up with bills. She has daycare for Jade, and Tyler is in school. She uses her dinner break between shifts to pick up Tyler at school, pick up Jade at daycare, and settle them at home before returning to work a second shift. She typically works two to three extra shifts per week.

Julie expresses regret for relying on Tyler for the care of Jade but sees no alternative. She describes Tyler as mature, responsible child who is "no trouble" and is able to take care of himself. She expresses confidence that he can also care for Jade. She describes Jade as a rambunctious two-year-old who loves her big brother. Julie

mentioned several times how much Tyler loves his sister and wants to take care of her. She also mentions that he helps care for Jade when Julie catches up on sleep or is "feeling down". Julie is very concerned about her financial situation but expresses that Charles is doing the best he can, and she is reluctant to talk with him about her struggles after "everything that happened with Jade's dad". She also states she has no one else to turn to for help.

### Appendix D: Case D

Case #2:        Andy and Joy

Father:        Andrew Allen, age 45

Mother:        Dora Allen, Deceased

Children:       Andy Allen, age 17 – Attends Robbinsdale Cooper High School

                    Joy Allen, age 14 – Attends Robbinsdale Cooper High School

#### **Presenting Situation**

Maternal grandmother, Mrs. Dees, called child protection on a Friday at 5:00 p.m. to request an investigation of her son-in-law's home. Mrs. Dees believes her granddaughter and grandson are being abused by their father. Grandson, Andy, is 17 and grand-daughter, Joy, is 14. Their mother (her daughter) is deceased.

Mrs. Dees reported her grandchildren spend one weekend a month in her home. They are currently with her, and she saw bruises on Joy's arms and legs. She is also concerned that Andy has bruises; however, he is wearing a long-sleeved shirt and pants and will not allow her to look. Joy and Andy will not discuss what caused the bruises. Andy said his father did get upset with him and with Joy but would not say anything further.

Mrs. Dees did not want to send the children back home on Sunday afternoon. She said her son-in-law had developed a serious temper, and she is afraid he has begun to abuse the children. She said since her daughter died earlier this year, Andrew has become increasingly angry and verbally abusive toward the children even in her presence. She has not seen him hit the children, but she has heard him yelling at them.

After discussing the call with the supervisor, the on-call worker made a visit to Mrs. Dees' home. She met with Mrs. Dees, Andy and Joy. Joy was crying and refused to speak. Andy would only say his father's temper has gotten worse since Dora's death.

The worker observed several marks on Joy's arms and legs: two round shaped marks about 1 ½ inch in diameter on either side of her left upper arm and three marks on the back of her right calf, each about two inches in length and ½ inch in width. The worker said "You have several bruises, Joy. Can you tell me how you got them?" Joy cried harder and did not respond. The worker said, "Sometimes I talk with teenagers who are unsure about whether to talk to me.

They want their family to get help, but they don't want anyone to get in trouble." Joy continued to bow her head and cry. Andy said "Look, just please stop asking questions; we can handle it and you're just going to make things worse." The worker explained that she and other social workers have been able to help other families before. She explained that she knew the children's mother had passed and expressed condolences. She said, "Sometimes when families are grieving, people need extra help. Maybe that is so for your family?" The children did not comment. Mrs. Dees tried to get her grandchildren to discuss their home life, but they continued to remain silent. Andy refused to show the worker his arms or legs.

The on-call worker spoke with her supervisor and concluded the children needed to stay with Mrs. Dees until the father could be interviewed. The on-call worker instructed Mrs. Dees to contact her immediately if Andrew called or came to pick up the children. Mrs. Dees stated she does not hear from Andrew when she has the children, and

he does not respond when she calls. Mrs. Dees made a point to tell the worker she wants the children to be with their father but only if the children are treated well and remain safe.

After leaving Mrs. Dees, the on-call worker tried calling the father at his home but received no answer. The on-call worker called Andrew's cell phone number provided by Mrs. Dees. There was no answer, and the worker left multiple messages on the voice mail. The worker continued to attempt contact with Andrew over the weekend.

### **Current Situation**

On Sunday morning, the on-call worker received a frantic call from Andrew, who wanted to know why the worker was calling and asking if Andy and Joy were safe. The worker explained the children were safe and with Mrs. Dees. The worker further explained that a report was made alleging abuse of Andy and Joy. She stated that she had seen the children and need to talk with him about them. Andrew became angry and stated he could not "handle the children" since his wife's death. He stated they were "ungrateful" and could just stay with his mother-in-law "forever". The worker explained that someone needed to speak with Andrew as soon as possible. Andrew stated we would be available after work on Monday and did not want the children at home. The worker asked if Mrs. Dees agreed, could the children stay there? Andrew agreed stating, "She can have them." The worker told Andrew someone would be in touch with him Monday afternoon. The worker contacted Mrs. Dees, and she agreed to keep the children as long as necessary.

### **Background Summary**



Andrew grew up in a middle-class home with both his parents and two older brothers. His father was a funeral home director and his mother taught school. Andrew was a good student but preferred the band to athletics. His father and brothers were great athletes and often teased Andrew about his lack of athletic skills. His mother was his greatest supporter and encouraged his music interest.

Andrew worked his way through college and received a lot of help from his mother but minimal support from his father. After college he returned home with a degree in Business Administration but refused to go into the funeral home business with his father and brothers. He got a job at a local bank as a teller and has worked his way up to chief loan officer.

Andrew's deceased wife, Dora, was an only child whose father worked on a train. He died in a train accident when she was four years old. She was raised in a middle-class home by her schoolteacher mother who never remarried. Dora was an excellent student in high school and college. She majored in social work and worked as a social worker until her health caused her to retire on disability.

Andrew and Dora started dating in the 10<sup>th</sup> grade and became inseparable. They were both in the band, had a large group of friends and were both very outgoing and charismatic. Andrew felt he could tell Dora his inner feelings and thoughts. After high school, they went to the same college and had a very lavish wedding a year after they graduated. Andy was born two years later. Joy was born just after Andy's third birthday.

Dora was diagnosed with advanced ovarian cancer two years ago. Andrew became increasingly angry and withdrawn as Dora's illness progressed. He made sure she

had excellent health care and spent a lot of time at her bedside. He resented Mrs. Dees' overprotective attitude toward Dora and felt Mrs. Dees did not trust him to take good care of Dora. Andrew reluctantly allowed Mrs. Dees to assist with his wife's care because he knew how close they had always been. Even after their marriage, Mrs. Dees and Dora did their grocery shopping together and participated in many church activities together.

Dora had been the primary disciplinarian and did not believe in physical punishment. She spent a lot of time with her children, attending their many activities. Andy was a natural athlete like his grandfather and uncles. Joy took piano lessons and dance. Both children sang in the church choir. The children attended church with their mother. Andrew continued to belong to the church he grew up in but seldom attended.

Andrew admits when Dora died his anger and withdrawn behavior grew worse. He says he lost the one person who was "always on his side". He says the children talk back to him and do not obey. He does not feel he knows them because he has spent so much time working. He further feels they do not appreciate him or understand how much he misses their mother.

Andrew admits both his mother and Mrs. Dees have been trying to talk to him about the children's needs but he just cannot seem to think about them right now. He states his work is the only thing he can manage at this point. He states, "It is all I can do to maintain my performance at work. I need Andy and Joy to just do what I say and not talk back."

## Appendix E: Survey

**Instruments:** Racial Attitude Survey

Permission given from author to use – Tom Rundquist

## Racial Attitude Survey

**Physical**

(B) Clean

(W) Clean

(B) Dirty

(W) Dirty

(B) Slow-moving

(W) Slow-moving

(B) Sickly

(W) Sickly

(B) Strong

(W) Strong

(B) Weak

(W) Weak

(B) Superior

(W) Superior

(B) Inferior

(W) Inferior

(B) Dull

(W) Dull

**Ego Strength**

Dominance

(B) Dependent

(W) Dependent

(B) Confident

(W) Confident

(B) Contented

(W) Contented

(B) Leader

(W) Leader

(B) Restrained

(W) Restrained

(B) Tenderminded

(W) Tenderminded

(B) Mature

(W) Mature

**Control**

(B) Self-Disciplined

(W) Self-Disciplined

(B) Compliant

(W) Compliant

(B) Adaptable

(W) Adaptable

(B) Organized

(W) Organized

(B) Chaotic

(W) Chaotic

### **Anxiety**

(B) Depressed

(W) Depressed

(B) Accepting

(W) Accepting

(B) Pessimistic

(W) Pessimistic

### **Ethics**

(B) Moral

(W) Moral

(B) Traditional

(W) Traditional

### **General Social**

(B) Aloof

(W) Aloof

(B) Happy-go-lucky

(W) Happy-go-lucky B=Black

W=White

- 1) Strongly Disagree
- 2) Disagree
- 3) Neither Agree or Disagree
- 4) Agree
- 5) Strongly Disagree

## Appendix F: Case Questionnaire

## Demographics

Age: \_\_

Level of Education: (select all that apply)

\_\_\_\_\_ Bachelor's Degree

\_\_\_\_\_ Master's Degree

\_\_\_\_\_ Doctorate Degree

\_\_\_\_\_ No Degree

Years of Experience: \_

Gender: Male\_ Female \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

**Case Questionnaire – Case A, B, C, D**

1. How likely is it to engage with the families to promote positive social change?

**Advocacy**

1. Unlikely
2. Less likely
3. Somewhat likely
4. Likely
5. Very likely

2. Choose risk of harm:

**Harm**

1. \_\_\_\_neglect
2. \_\_\_\_physical
3. \_\_\_\_emotional
4. \_\_\_\_verbal

Based on the **information** presented, what placement decision would you propose?

**Decision-making**

5. Close file, no further investigation is needed.
6. Provide referrals to community service provider.
7. Provide intensive family services.
8. Informal placement with a family support system
9. Formal placement that gives the county temporary or full custody



## Appendix G: Permission to Conduct Research



Momentive Inc.

[www.momentive.ai](http://www.momentive.ai)

For questions, visit our Help Center, [help.surveymonkey.com](http://help.surveymonkey.com) Re: Permission to Conduct Research Using SurveyMonkey

To Whom It May Concern:

This letter is being produced in response to a request by a student at your institution who wishes to conduct a survey using SurveyMonkey in order to support their research. The student has indicated that they require a letter from Momentive granting them permission to do this. Please accept this letter as evidence of such permission.

Students are permitted to conduct research via the SurveyMonkey platform provided that they abide by our Terms of Use at <https://www.surveymonkey.com/mp/legal/terms-of-use/>.

Our SurveyMonkey product/tool is a self-serve survey platform on which our users can, by themselves, create, deploy and analyze surveys through an online interface. We have users in many different industries who use surveys for many different purposes.

One of our most common use cases is students and other types of researchers using our online tools to conduct academic research.

If you have any questions about this letter, please contact us through our Help Center at [help.surveymonkey.com](https://help.surveymonkey.com). Sincerely,  
Momentive Inc.

## Appendix H: Author Permission

From: [REDACTED] <[REDACTED]>  
> Sent: Wednesday, August 4, 2021 9:49 AM  
> To: [REDACTED] <[REDACTED]. [REDACTED]>  
> Subject: Re: Permission to use instrument in research - Dissertation  
> Okay by me.  
> On 2021-08-02 21:45, [REDACTED] wrote:  
>Hello,  
>I hope all is well! I am a student-doctoral candidate at  
>Walden.  
>I am reaching out to ask permission to use your instrument - Racial  
>Attitudes Survey, for the purpose of administering to child  
>protection workers to better understand [Implicit Biases and Attitudes on  
>Decision Making Among Child Protection Workers], due to racial  
>disparities and overrepresentation of African American children and  
>> families in child welfare systems.  
> I thank you in advance for considering my request.  
> [REDACTED]  
>Walden University