The Road to Equity

The overrepresentation of children, families and communities of color in Oregon’s foster care system represents a serious social injustice and an economic emergency. It also offers an opportunity for the state to lead the charge in eliminating this persistent and complex nationwide problem.

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Executive Summary

The Mandate and its Urgency

Foster care in Oregon is used much more often and for much longer periods of time for African American and American Indian/Alaskan Native children than for white children. The overrepresentation of children, families and communities of color in Oregon’s foster care system represents both a serious social injustice and an economic emergency. But it also offers an opportunity for Oregon to lead the charge in eliminating this persistent and complex nationwide problem.

The Task Force’s Mission and Approach

Executive Order 09-02 and Oregon Senate Bill 630 established the Child Welfare Equity Task Force to study the causes and make recommendations on how to eliminate the problem of racial disproportionality in Oregon’s child welfare system to the Oregon legislature and to the Department of Human Services.

Task Force Mission: To identify and analyze the causes of disproportionality in Oregon’s foster care system, make recommendations to the legislature that will permanently and aggressively eliminate disparities in foster care for children and families of color, and set goals for the Department of Human Services, child welfare program to reduce the over-representation of children of color in foster care.

The Task Force began its objective of developing the recommendations. The work consisted of monthly meetings in Salem, committee and sub-committee gatherings and town hall-style sessions in numerous Oregon communities. Professionals who have analyzed the causes of and potential remedies for disproportionality also provided the Task Force with a number of presentations and a comprehensive review of data and completed work concerning disproportionality in child-serving systems. In addition, the Task Force spent time collecting firsthand accounts from adults and youth of color who have been adversely affected by their experiences with the Oregon child welfare system.

The specific methods/process used to produce the key findings and to develop the Task Force recommendations are detailed in the Final Report. Importantly, the Task Force believes this final report represents only the beginning, and members emphasize that if Oregon is going to achieve the ultimate goal of family stability and child safety for all children and families, the work begun here must be embraced and advanced by communities and state leaders for years to come.

Key Findings

- **Child Protective Services (CPS) Reports of Abuse or Neglect.** American Indian/Alaskan Native families were nearly two times more likely and African American families were more than twice as likely to be represented in reports to Child Protective Services (CPS) than to be present in Oregon’s general population.

- **Removal, Placement in Foster Care.** Once an abuse or neglect report was substantiated (“founded”), American Indian/Alaskan Native, Pacific Islander, and African American children were removed from their parents at a higher rate than were white children. Native American/Alaska Native children
were placed in out-of-home foster care at over five times the rate of white children. African American children were placed at four times the rate of white children, and Pacific Islander children were nearly two times more likely than white children to be placed in foster care.

- **Foster Care.** Children of color, in particular American Indian/Alaska Native children, were in foster care at higher rates than other children. About 20 percent of all children in foster care during the study period were children of color, despite the fact that children of color make up only 11 percent of Oregon’s general child population. American Indian/Alaskan Native children were more than five times more likely, and African American children two times more likely, to be represented in Oregon’s foster care population than in Oregon’s general population.

- **Length of Stay in Foster Care.** Once in foster care, many children of color stayed longer than white children. Over half of the American Indian/Alaskan Native ICWA-eligible children had been in foster care two years or more. Close to half (46.5 percent) of African American children had been in care for two years or more. A smaller percentage (38.5 percent) of white children experienced these long stays. An even smaller percentage of Hispanic children (under 25 percent) had stayed more than two years. Long-term foster care (considered the least permanent of all permanent plans) was the plan of record for more American Indian/Alaskan Native and African American children than white children.

**The Root Causes of Racial Disproportionality in Child Welfare Services**

The root causes of disproportionality are complex and have been investigated from a broad range of perspectives. Based on its review of the data and the research, the Task Force found that the disparities and overrepresentation of children of color in the child welfare system result from three primary causes:

- Structural inequalities such as policy/practice, budget deficits, staffing challenges and culturally biased decision-making *inside* the juvenile dependency system;
- External disparities such as poverty, access to health care, inadequate education and the related consequences. These risks and stressors *outside* the child welfare system, impact child safety and family stability and lead to an increased need for state intervention in various communities; and
- Lack of a diverse workforce, training and accountability for existing policies and mandates designed to improve the cultural responsiveness of the system and eliminate disparities.

The Task Force has also taken great care to better understand the role that racism -- whether interpersonal, institutional, or systemic -- plays in the overrepresentation of children of color in foster care. While the Task Force believes that most individuals today are not intentionally or overtly racist, as most of us understand that term, but it is undeniable that stereotyping and bias based on race or ethnicity continue to perpetuate negative outcomes for children and families in Oregon and across the country.

Perhaps even more importantly, the Task Force acknowledges the historical and current social impact of race on policy development and decision making. Current systems and structures often make it difficult to harness the invaluable cultural diversity within and between systems and communities, which is greatly needed to improve system functioning, service delivery and accountability. Over time, this has led communities to feel excluded from processes which ultimately impact them directly.
Why Racial Disproportionality Reduction Matters

In this report, the Task Force takes the position that there are at least two primary reasons why ending disparities in foster care must be a priority for the state and for the Oregon legislature:

- First is the unacceptable human impact to African American and Native American children who languish in the foster care system and their families; and
- Second are the financial consequences to the state and its citizens when disadvantaged children become part of a system that virtually guarantees a further decline in opportunities available to them when they exit the system.

Recommendations for Achieving Racial Disproportionality Reduction

A review of the documented research on the reduction of racial disproportionality through evidence-based approaches provided no set script or set of scientifically based policies and/or recommendations that could be adapted for our purposes in Oregon. Given the lack of field-tested recommendations and practice guidelines for addressing the internal and external conditions that sustain racial disproportionality in foster care, Task Force members spent time developing their own unique set of recommendations (See Appendix B for full set of Task Force recommendations). The goal is to achieve proportionality of foster care by relying on best practices in the following key areas: Data-based Decision Making, Policy and Practice, Workforce Development, Community Capacity Building and Culturally Specific Practices.

The recommendations in those areas are designed to make the system more equitable for all children, including families of color. Embedded within these recommendations are ideas for strengthening not just Department of Human Services (DHS) child welfare, but work across the juvenile dependency system, including the Oregon judiciary. In addition, the Task Force has a series of recommendations specific to the communities of color currently overrepresented in foster care, namely, tribal children and families, urban Indian children and families, and African American children and families (see Appendix B).

Legislative Priorities for the next 12 Months

- Require Racial Impact Statements for all statutory policy changes with implications for the child welfare service delivery systems;
- Require evidence of effectiveness and equity for all racial/ethnic groups for practice and policy developments, including consistent data collection and reporting of race/ethnicity data for the Department of Human Services.
- Require allocation of DHS contracted resources to achieve equity for children and families of color using cultural knowledge, evidence and best practices.

Detailed Short-term Planned Changes

To assure that the protections promised citizens of color are enforced, DHS will need to make internal changes and participate in external accountability processes. Internal changes include: advisory committees, updated rules/policies/procedures, evidence-based and best practices implementation, culture change for collaboration with communities of color and an appreciation for their voices in shaping policy, technical assistance, improved data collection (mandatory), avenues for culturally
specific family and child advocacy, and assistance for families in linking to support networks. External accountability processes include: family services review, creation of a community accountability board, and opportunities for families and communities to be respectfully heard.

The Task Force seeks to establish a climate of transformation which changes the view of the child welfare provider as a system of support and resource development, as opposed to an industry to be avoided.

The Task Force identifies the following priorities for DHS changes:

- **Policy**: Shift from intervention to prevention model, committed to internal system improvement and collaboration with stakeholders with the goal of reducing disproportionality;
- **Data-based Decision Making**: Establish consistent racial/ethnic impact data collection, require evidence based programs and evidence-based management, incorporate cultural knowledge in decision making and mandate that cultural data be collected;
- **Community Capacity**: Build community resources for African American and Native American/Alaskan Native families, and collaborate with established family networks and community resources;
- **DHS Workforce Development**: Enhance and transform recruitment and retention efforts for professionals of color, create an advisory committee for hiring rules and provide continuous training;
- **Legislative**: Implement a Racial Impact Policy, ensure highly skilled and competent legal representation for families, establish a coordinated system of care by linking the equity goal to the state’s evidence-based program legislation and its expertise in poverty, child abuse and neglect, and juvenile crime prevention;
- **Accountability**: Ensure accountability and enforcement protection (protection through the enforcement of laws, policies, and agreements) by creating a plan for accountability and infrastructure in order to: first, ensure that the voices of communities of color are meaningfully engaged at the state and local levels; next, update and enhance the recommendations of this Task Force with an emphasis on inclusion of a cross-systems effort to address both the inequities of access to preventive services and the overuse of intensive services like foster care placement; and finally, track progress toward safe and equitable foster care reduction goals and hold DHS and the Juvenile Dependency System accountable for change. (see Plan of Accountability and the sections on Organization and Structure of Service Coordination Options I, 2, 3, and 4).

The Task Force will provide update and progress reports to the legislature on a biennial basis.
Conclusion

Over the course of the last several months, the Task Force has worked diligently and collectively to understand the issue and make recommendations that will be effective and affordable in order to begin the work of eliminating disproportionality within our foster care system. Members have appreciated the opportunity to contribute and look forward to the Legislature’s active support in eradicating this great social and moral injustice.

Actively discussing race and institutional racism, and painstakingly examining the impact and contributions of race and racism, set the stage for realigning and transforming the way race influences policy and decision-making. It also diminishes the negative, and unintended ways race influences the culture of the child welfare system.

Members of the Task Force hope that other child-serving systems undergo similar targeted change processes to systematically neutralize the negative racial impact on decision making by embracing an appreciation and use of various forms of knowledge. This knowledge includes client, cultural, scientific, professional, and implementation sciences with the aim of achieving equity by applying a learning organization perspective.

The Task Force does not argue that children of color should not be placed into foster care when necessary to keep children safe. The conclusion the group reached is that children of color, to a greater extent than white children, are placed into foster care when, with the right supports, those children could instead be safely cared for by their own families and communities.

Through a long and challenging, yet rich and unforgettable fact finding experience, the Task Force has come to the conclusion that whatever the root causes of racial disproportionality are (e.g. individual and family risk factors, community risk factors, community and systemic factors as well as cultural and racial influences), it is a practice that must be discontinued in Oregon.
Introduction
The overrepresentation of children, families and communities of color in Oregon’s foster care system presents both an opportunity and challenge for Oregon’s Department of Human Services (DHS). As an opportunity, the careful study of the overuse of foster care placement for children and families of color involves investigating the origins, causes, correlates, consequences and implications of this practice for historically oppressed groups. The organized study and reduction in the overuse of foster care for families of color, is a national dilemma, and an elusive social welfare theme that tops the list as the foremost nationwide child welfare problem.

In Oregon, the persistence of racial disproportionality and its negative consequences is of paramount concern to the judiciary, the executive, and the legislative branches of government. As we illustrate throughout this report, overrepresentation of foster care placements among children and families of color is a quandary of great proportion. It is a terribly burdensome experience for its child and family service beneficiaries, the communities of color and Sovereign Nations it directly impacts, their corresponding child and family service professionals and service providers, and the taxpayers of Oregon.

As a far-reaching problem with exorbitant costs, extraordinary and devastating effects, racial disproportionality, justifiably, is a time sensitive, noteworthy, and formidable, multi-dimensional issue. Given its intricate nature, it is gaining currency as a research priority across the social sciences, the legal profession and the biomedical industry.

The elimination of racial disproportionality and the achievement of its alternative (the proportionate and equitable use of foster care placements) and the improvement in the child and family service delivery system is undeniably a priority for state policy directors and lawmakers. As a broad based and compelling challenge, it requires immediate attention by the legislature, priority status by Governor Kitzhaber, as well as swift, deliberate, and decisive executive sanction and administrative action.

Despite the complexities that comprise racial disproportionality reduction, the Task Force on Disproportionality in Child Welfare urges the readers of this extensive report to avoid relegating the urgency of this child welfare imperative to the bottom of the heap of competing state priorities. It is our sincere hope that the energy galvanized through reading about the enormity of the problem of foster care overuse and racial disproportionality of child welfare service systems for Native Americans, African Americans, and other economically and socially marginalized groups, results in the strategic elimination of this complex issue.

To do so effectively will require the executive, legislative and administrative leadership of Oregon to adopt former State Senator Margaret Carter’s perspective on leadership as guiding behaviors: “transparency, trust, clarity of vision and purpose” as they form a critical lens. Establishing such a critical lens involves the use of data as key evidence for making decisions while simultaneously problem solving and learning. In this context, the data used in forming the critical lens is comprised of knowledge of the science of behavior change, knowledge of the unique people and the particular situation involved as well as a thorough understanding of the service systems experiences of Native Americans, African Americans, and other historically oppressed groups.
To date, research on single child welfare agency approaches (i.e., internally centered) to eliminating racial disproportionality has not shown that the approach achieved the expected aims. Also, there is no science that illuminates the notion that a transformed, internally centered child welfare system approach alone can adequately eliminate racial disproportionality. Until recently, the research on disproportionality reduction in child welfare does not address the lack of attention to external system racial disparities and the essential participation of cross-system stakeholders. Unfortunately, this means that the accompanying adverse structural, cumulative, and clinical effects of racial disparities that accompany the experience of disproportionality among children and families of color go undetected, without proper attention and intervention.

Established by Executive Order and legislative action, this Task Force incorporated the abovementioned critical lenses as a foundation for launching its strategic study and planning for system improvements and equitably reducing foster care use for children and families of color.

**Executive Order and Legislative Mandate**

On January 5, 2009, Governor Ted Kulongoski stated that “too many children of color, particularly Native American and African American children, are in foster care. The time has come for us to move beyond good intentions to intentional action so we can ensure that children with the same needs are treated equitably, no matter the color of their skin.”

Executive Order 09-02 and Senate Bill 630, sponsored by Senator Margaret Carter during the 75th Oregon Legislative Assembly, established the Task Force on Disproportionality in Child Welfare (now called the Child Welfare Equity Task Force or Task Force). At issue is the fact that there are too many African American and Native American children in Oregon’s foster care system relative to the percentage these minorities represent within the general population. The legislation charged the Task Force to set specific goals to reduce the overrepresentation of African American and Native American children in foster care, and to make recommendations that would improve the foster care system overall for other children of color whom are not currently overrepresented, but who are growing in numbers in Oregon.

The Child Welfare Equity Task Force mandate is “To identify and analyze the causes of disproportionality in Oregon’s foster care system, make recommendations to the legislature that will permanently and aggressively eliminate disparities in foster care for children and families of color, and set goals for the Department of Human Services, child welfare program to reduce the over-representation of children of color in foster care.

It was recognized that given history and the highly complex nature of foster care, any recommendations to eliminate disproportionality in foster care must be effective, practical, affordable, sustainable, and have the support of the Native and African American communities. To meet these objectives, the twenty-one members of the Task Force were appointed based on their ability to offer expertise and experience to the study of the problem and the recommendations that would follow.

The Task Force was comprised of elected officials, members of the legal system, educators, community activists, representatives of the African and Native American communities, foster parents, members of child advocacy groups, law enforcement officials, the directors of the Department of Human Services, Children, Adults and Families Division, the Oregon Commission on Children and Families, Casey
Family Programs, and a highly experienced scholar and consultant, Dr. Harold Briggs, who has assisted other states in addressing disproportionality.

The Task Force began its objective of developing the recommendations. The work consisted of monthly meetings in Salem, committee and sub-committee gatherings and town hall-style sessions in numerous Oregon communities. Professionals who have analyzed the causes of and potential remedies also provided the Task Force with a number of presentations and a comprehensive review of data and completed work concerning disproportionality in child-serving systems. In addition, the Task Force spent time collecting firsthand accounts from adults and youth of color who have been adversely affected by their experiences with the Oregon child welfare system.

It is through this process by which the Task Force began its objective of developing the recommendations in this report. Importantly, the Task Force believes this work represents only the beginning and emphasizes that if Oregon is going to achieve the ultimate goal of family stability and child safety for all children and families, the work begun here must be embraced, advanced and enhanced by communities and state leaders for years to come.

The specific methods/processes used to develop these recommendations are detailed in the subsequent sections. The process stemmed from the Task Force’s mandate and incorporated the steps and functions of evidence-based practice, evidence based management, and model development research. Evidence-based practice involves the transparent use of best available knowledge, client participation, professional expertise in selecting and implementing effective services. Evidence-based management involves resolving administrative and service delivery issues that circumvent service effectiveness. Model development research involves the use of research methods, problem solving, and intervention development as a toolkit for resolving social problems.

The Task Force commissioned an outside expert to support development of its recommendations and focus on the creation of a research-driven implementation strategy. The sections that follow represent the work of that expert to advise on best practice strategies. To put it another way, sections 1 through 3 of this report represent the "what" and the following sections, sections 4 and 5, represent the "how."

Aligning the objectives of the Task Force to both science and culture was a prerequisite because of the negative racial impact that permeates the experience of disproportionality among historically oppressed groups. Such an alignment sets the stage for the formulation of culturally centered and scientifically based alternatives to achieve the equitable use of foster care among the previously mentioned historically oppressed groups.

Given this context, this report is organized around the Task Force’s mandate and the key five functions which comprise the steps of evidence-based practice, evidence-based management, and model development research:

(1a.) Assessment of perspectives on disproportionality reduction through cultural knowledge via forums with cultural groups; (1b.) specific organizational assessment through decision point analysis; (1c.) assessment of the origins, causes, correlates, and consequences of racial disproportionality, and careful analysis of it as a service system problem for children and families of color;
(2), Additional perspectives and relevant cultural knowledge on disproportionality and proportionality from cultural specific groups;
(3) Recommendations;
(4) Model development, operational plan, and practice principles; and
(5) Plan for accountability and infrastructure.

1a) Assessment through forums with Sovereign Nations, urban and rural native, and inner city Communities of Color

To achieve understanding from historically oppressed groups directly impacted by the persistence of racial disproportionality in foster care placement, the Task Force held and attended meetings with tribal groups and indigenous community groups representing urban and rural communities. From these meetings the Task Force gained insight, cultural knowledge and community participation in better understanding and addressing the root causes of racial disproportionality in foster care services.

Specifically, the root causes of racial disproportionality are complex and have been investigated from a broad range of perspectives. Based on its review of the data and the research, the Task Force has found that the disparities and over-representation of children of color in the child welfare system result from three primary causes:

- Structural inequalities (in policy/practice), budget deficits, staffing challenges, and culturally biased decision-making inside the juvenile dependency system;

- External disparities (poverty, health care, education), related consequences, risks and stressors outside the child welfare system, impacting child safety and family stability and leading to an increased need for state intervention in various communities; and

- Lack of a diverse workforce, training and accountability for existing policies and mandates designed to improve the cultural responsiveness of the system and eliminate disparities.

By engaging in many courageous and direct conversations, the Task Force learned a number of important lessons and reasons for establishing a plan to eliminate racial disproportionality in foster care services. The Task Force has also taken great care to better understand the role that racism — whether interpersonal, institutional, or systemic — plays in the overrepresentation of children of color in foster care.

While the Task Force agrees that most individuals today are not intentionally or overtly racist in the way that term historically has been defined, it is undeniable that stereotyping and bias based on race or ethnicity continue to perpetuate negative outcomes for children and families in Oregon and across the country. Such undeniable evidence has been provided by both Roberts (2010) and Briggs and McBeath (in press) to substantiate our understanding and perspective on the root causes of racial disproportionality in child welfare services for children and families of color.

Perhaps even more importantly, the Task Force also acknowledges the historical and current social impact of race on policy development and decision making. Current systems and structures often make it difficult to harness the invaluable cultural diversity within and between systems and communities, which is greatly needed to improve system functioning, service delivery and accountability. Over time, this has led to communities feeling excluded from processes, which ultimately impact them directly.
The Task Force takes the position that there are at least two primary reasons why ending disparities in foster care must be a priority for the State and for the Legislature:

- The unacceptable human impact to African American and Native American children who languish in the foster care system and their families; and
- The financial consequences to the state and its citizens when disadvantaged children become part of a system that will virtually guarantee a further decline in opportunities available to them when they exit the system.

The Human Impact

While the cost of foster care from a financial perspective is undeniable, those most involved with and affected by foster care made clear to the Task Force that the system exacts a daily price on their lives.

Below are excerpts from stories the Task Force heard that provide a glimpse into the human costs imposed by a child protection system that relies so heavily on foster care:

**The cost of voices lost:**
Ms. Turner called DHS to assist the family in deciding how best to help her 13-year-old granddaughter, who gave birth to a little girl. She thought DHS would connect her family to the right services to keep the baby healthy and support her teenage granddaughter. She had no idea what would soon follow. When DHS came to help, they determined there were no “fit and willing” relatives in the family to care for the child, due to past legal challenges. As a result, DHS determined that it was best for the child to be placed in foster care to ensure safety. This decision devastated Ms. Turner and the entire family. They felt they were being blamed and punished for the entire situation, especially when they were denied adequate visitation with the baby. Ms. Turner believed that if her family had the right culturally responsive support from DHS, they could care for her granddaughter and great-granddaughter in a way that is safe, empowering and keeps the family together. She believes they could have been part of the solution and “not just feel like the blame”. Currently, Ms. Turner and her family continue to try and navigate the legal system while they advocate for the right support for their family.

**The cost of instability and losing a sense of cultural identity:**
At 14 years old, Leah was disconnected from her Tribe when she entered foster care due to neglect. After a number of failed placements and a move to a group home, Leah began feeling lost, rejected and angry. These feelings led Leah to act out in self-destructive ways - drinking and making unsafe relationship choices. After feeling hopeless, Leah reached out to her Tribal caseworker. Through a series of difficult, yet valuable family meetings where the family drove the process, she became engaged in her case planning. Her worker was able to connect her to her Tribal culture and access supportive resources, specifically counseling and academic support. Soon she was back on track, placed in a relative placement and successfully graduated from high school. Leah continues to be involved with her Tribe as she transitions to adulthood.

In this final report to the legislature, the Task Force makes recommendations that are sensitive to Oregon’s budgetary realities, but the Task Force is certain that safely and equitably reducing the use of foster care in Oregon – specifically, eliminating the over-representation of African American and Native American children in the system – will have a positive impact in reducing costs to taxpayers and in reducing the human toll on our communities.
The Financial Impact

All communities want the best for their children. All of Oregon is best served when its youngest citizens are raised in environments that promote and nourish healthy, well balanced, educated, and socially responsible children. Unfortunately, children who grow up in foster care often do less well as children and adults than children raised by one or both of their parents or by a relative.

A study of Washington and Oregon foster care alumni showed that children leaving foster care are more likely to be unemployed, poor, without health insurance and at risk of homelessness than the general population. In a more recent study about foster care alumni from the Midwest, compared to the general population, foster care alumni were over three times more likely not to have a high school diploma or GED, half as likely to have completed any college, and one-fifth as likely to have a college degree.

A brief look into the fiscal impact of those outcomes illustrates that:

• In 2010, it cost the State of Oregon approximately $26,000 per child per year for foster care. A 5% reduction in foster care would save Oregon taxpayers approximately $7 million in state and federal resources.

• The United States would save between $7.9 and $10.8 billion annually by improving educational attainment among all low-income recipients of Temporary Assistance to Needy Families, Supplemental Nutrition Assistance Program (SNAP, formerly food stamps) and housing assistance.

• In Oregon, a study has found that on average, working-age high school dropouts earn $10,000 less each year than those who graduate from high school. That same study estimates that approximately $173 million in tax revenue is lost each year because of high school dropouts’ decreased earnings.

• People experiencing homelessness are more likely to access the most costly health services. According to a report in the New England Journal of Medicine, homeless people spent an average of four days longer per hospital visit than comparable non-homeless people. This extra cost, approximately $2,414 per hospitalization, is attributable to homelessness.

• The average cost to serve a young person in an Oregon juvenile correctional facility for a year is $79,935 or $219 per day. The average cost per prison inmate in Oregon per year (2009) is $30,828.

1b.) Specific organizational biases assessment through Decision Point Analysis

In 2009, the Task Force commissioned Portland State University School of Social Work to conduct a “Decision Point Analysis” using statewide child welfare data to look at disproportionality and disparity at key decision points in child welfare including: Reports to CPS; Screening; Disposition; Removal; Foster Care Placement; Foster Care Stay; Plan and Exit. The most significant results of the analysis are shown below:

Child Protective Services (CPS) – Reports of Abuse or Neglect. American Indian/Alaskan Native families were nearly 2 times more likely and African American families were nearly 2.5 times more likely to be represented among reports to (CPS) compare to their proportion in Oregon’s general population.

Removal – Placement in Foster Care. Once an abuse or neglect report was substantiated (“founded”), American Indian/Alaskan Native, Pacific Islander, and African American children were removed from their parents at a higher rate than were White (non-Hispanic) children. Native American/Alaska Native children were placed in out of home foster care at over 5.5 times the rate of white children, African
American children at 4 times the rate of white children, and Pacific Islander children were nearly 2 times more likely than White children to be placed in foster care.

**Foster Care.** Children of color, in particular American Indian/Alaska Native children, were in foster care at higher rates than other children. At least 19.7% of all children in foster care during the study period were children of color, despite the fact that children of color make up only 10.7% of Oregon’s general child population. American Indian/Alaskan Native children were nearly 5.5 times more likely, and African American children 2 times more likely, to be represented in Oregon’s foster care population than to be represented in Oregon’s general population.

### FFY 2010 Race Comparison: Children in Oregon to Child Abuse/Neglect Victims

<table>
<thead>
<tr>
<th>Race</th>
<th>% of Oregon’s children*</th>
<th>% of Victims of child abuse/neglect</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>2.5%</td>
<td>5.8%</td>
</tr>
<tr>
<td>Asian</td>
<td>3.8%</td>
<td>1.2%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>68.0%</td>
<td>59.8%</td>
</tr>
<tr>
<td>Hispanic (any race)</td>
<td>19.8%</td>
<td>15.3%</td>
</tr>
<tr>
<td>Native American</td>
<td>1.3%</td>
<td>3.5%</td>
</tr>
<tr>
<td>Pacific Islander</td>
<td>0.3%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Two or more race groups</td>
<td>4.3%</td>
<td>na</td>
</tr>
<tr>
<td>Unknown/Not Recorded</td>
<td>na</td>
<td>13.9%</td>
</tr>
</tbody>
</table>

*2009 estimates of population under 18, U.S. Census Bureau

### FFY 2010 Race Comparison: Oregon Children to Children Served in Foster Care

<table>
<thead>
<tr>
<th>Race</th>
<th>% of Oregon’s children*</th>
<th>% of children served in foster care</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>2.5%</td>
<td>8.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>3.8%</td>
<td>1.0%</td>
</tr>
<tr>
<td>Caucasian</td>
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<td>64.4%</td>
</tr>
<tr>
<td>Hispanic (any race)</td>
<td>19.8%</td>
<td>13.7%</td>
</tr>
<tr>
<td>Native American</td>
<td>1.3%</td>
<td>6.9%</td>
</tr>
<tr>
<td>Pacific Islander</td>
<td>0.3%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Two or more race groups</td>
<td>4.3%</td>
<td>na</td>
</tr>
<tr>
<td>Unknown/Not Recorded</td>
<td>na</td>
<td>5.1%</td>
</tr>
</tbody>
</table>

*2009 estimates of population under 18, U.S. Census Bureau

**Length of Stay in Foster Care.** Not only are children of color placed in foster care at higher rates than white children, but, once in foster care, they stay longer. Over half of the American Indian/Alaskan Native ICWA-eligible children had been in foster care two years or more. Close to half (46.5%) of
African American children had been in care 2 years or more. A smaller percentage (38.5%) of white children experienced these long stays. An even smaller percentage of Hispanic children (under 25%) had stayed more than 2 years. Long-term foster care (considered the least permanent of all permanent plans) was the plan of record for more American Indian/Alaskan Native and African American children than White American children.

**1c. Assessment and careful analysis of the problem of racial disproportionality in child welfare**

The Task Force used a number of key questions to help them (a) understand root causes and correlates of racial disproportionality and (b) develop its road to equity in halting the overuse of foster care for disproportionate numbers of Native American and African American children and families. The Task Force posed additional questions of fundamental interests and concern, which included the following:

1. Did the Oregon data resemble Northwestern University Law Professor Dorothy Roberts’ (Kirkland and Ellis Professor of Law) depiction of a racial geography as portrayed with effects of institutional racism in child welfare services concentrated in tribal reservations and communities for African Americans and other historically oppressed groups?

2. Has avoidance of the discussion of race in child welfare and other systems contributed to the problem of disproportionality?

3. Given what we now know, what will it take to address our current approach to achieving child safety and family stability among historically oppressed communities?

To answer the questions above and identify and carefully analyze the causes of racial disproportionality in Oregon, the Task Force adopted the Oregon Commission on Children and Families study of the origins, causes, correlates, and consequences of racial disproportionality of children and families of color in child welfare services to highlight its understanding.

The logic model demonstrates the significant interrelationship between institutional racism, child welfare services and African American communities and other communities of color. It illustrated what Roberts characterizes as a racial geography of child welfare services for children and families of color. This model synthesizes the national scientific evidence of the origins, causes, correlates, and consequences of racial disproportionality in child welfare reported by child welfare and evidence based practice researchers such as Wells, Merritt, Briggs and others in professional and scientific publications such as *Child Welfare* and in the November (2009) issue of *Children and Youth Services Review* (Wells and Briggs, 2009).

Support for the Task Force’s understanding of racial disproportionality also comes from Briggs and McBeath (2010; in press) Roberts (2010), Roberts (in Briggs and McBeath) and others. This conceptualization is consistent with Oregon research evidence in 1b, above, which outlines a 2009 study by Portland State University’s School of Social Work Center for Child Improvement on the role of racial and cultural biases at key decision points that contribute to the persistence of foster care placement for Native Americans and African Americans in Oregon’s foster care system.

In combination, these provide compelling evidence that foster care overuse for historically oppressed groups is a result of cultural biases and racial inequalities that contribute to sustaining racial over- and
underrepresentation. Together, they support assumptions about the similarities between Oregon and the rest of the nation’s experiences of racial disproportionality for children and families of color.

2) The Perspective of Impacted Cultures

Oregon Tribal Perspectives

Chief among the myriad of factors that limit success of programs and policies dedicated to the reduction of disparities among American Indians is the lack of authentic partnerships between them as legitimized Sovereign Nations and the United States government. In addition there are a host of chronic and present day negative experiences with main culture institutions and the lack of solutions that reflect American Indian cultural knowledge and customs and partnership (Poupart and Red Horse, 2009). These tensions can be traced back historically to the struggle by American Indians in the United States to achieve and realize the freedom, rights and privileges of Tribal Sovereignty.

Sovereignty for Indian Tribes located within the United States of America is the inherent authority of indigenous tribes to govern themselves. Today the United States of America recognizes Tribal nations as domestic dependent nations and through statues and federal court decisions has established a number of laws attempting to clarify the relationship between the Federal, State and Tribal governments.

From the Tribal perspective, tribal peoples have lived in what is now the United States for thousands of years, since time immemorial. Throughout this history tribes have expressed their rights as sovereigns to govern themselves. In fact, the United States has acknowledged the independent existence of tribal governments since the eighteenth century. The Northwest Ordinance, passed in 1787, states:

“The utmost good faith shall always be observed towards the Indians; their lands and property shall never be taken from them without their consent; and, in their property, rights, and liberty, they shall never be invaded or disturbed, unless in just and lawful wars authorized by Congress; but laws founded in justice and humanity, shall from time to time be made for preventing wrongs being done to them, and for preserving peace and friendship with them.”

Tribal nations enjoy more sovereignty than states or local governments but are still subject to the will of congress and the federal courts that historically have put limits on Tribal sovereignty. Despite the good intentions voiced in the Northwest Ordinance, the policies of the United States for many years were to eliminate the sovereignty of Indian tribes and to move the population into mainstream American culture, religion and legal practices. Numerous acts of congress and federal court decisions worked to undermine the sovereignty, religious practices and cultural identity of American Indians.

Indian Tribes and Indian people have remained resilient and have managed to maintain their religions, Tribal governments, Tribal courts, traditional customs and practices, plus a way of life in America that is uniquely American Indian.

The American government has run in cycles of trying to undo its relationship with Indian Tribes and then in the next cycle supporting Tribal governments and Tribal sovereignty. During the first half of the twentieth century, the States sat quietly and let the Tribal and federal government’s relationship dominate the conversation. This has changed over the last fifty years, with changes in federal policy and federal court decisions.
In Oregon this has had a marked effect on the state relationship with the nine federally recognized Tribes of Oregon (Burns Paiute Tribe; Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians; Confederated Tribes of Grand Ronde; Confederated Tribes of Siletz; Confederated Tribes of Warm Springs; Confederated Tribes of Umatilla Indian Reservation; Coquille Indian Tribe; Cow Creek Band of Umpqua Indians; and Klamath Tribes).

As the Tribes and the State of Oregon had more interaction, The Tribes of Oregon, through the Legislative Commission on Indian Services and the Governor, instituted Executive Order 96-30 which called for a positive working relationship between the State of Oregon’s state institutions under the Executive Department and the Tribes of Oregon.

In 2001, Senate Bill 770 was passed into law (ORS 182.162-168) which requires all State agencies to report on their efforts to work with Tribes. The shift of communication and funding from the Federal Government to a “pass through” of federal funds through State governments has made Tribal/State communication even more important.

The Tribes of Oregon and the State of Oregon have put a great deal of energy forth to strengthen the relationship between them. This is, and will continue to be, a work in progress.

One important promise and agreement made between Sovereign Nations and the United States government is the Indian Child Welfare Act (ICWA). The United States Federal government passed the Indian Child Welfare Act of 1978 to ensure active efforts are made so that Indian children are protected from unnecessary removal. It also means that remedial and rehabilitative services are provided to the family to prevent the removal of the child(ren) “except to prevent imminent damage or harm to the child and to reunify an Indian child with his or her parent or Indian custodian.”

From an American Indian perspective, ICWA requires a higher standard of service to native children that exceeds the threshold of a remedial or a minimal service standard. The Task Force supports the Oregon Tribes request that DHS implement the Indian Child Welfare Act and ensure its full compliance and enforcement by following it as law, both in letter and in spirit. Under the proviso that DHS engages in “active efforts” to prevent the removal of children from their homes, the Oregon Tribes prefer that Native children and families, involved in the child welfare system, receive a full gamut and array of intensive services that are culturally appropriate and enables the rehabilitation of the family.

The urgency and need for authentic partnerships with American Indians to use their knowledge paradigms to establish effective programs and policies that dismantle the parade of disparities experienced by American Indian children and families is at a critical juncture (Poupart and Red Horse, 2009). Bigfoot, Crofoot, Cross, Fox, Hicks, Jones, Limb, Red Horse, Simmons, and Trope (n.d.) put it best: "Without the necessary expertise of American Indian/Alaska Native professionals, tribal governments, and others in the community who are invested in the protection of American Indian/Alaskan Native children, we will continue to see large numbers of children being removed from their homes and placed outside of their families and tribal communities, continuing a decades long pattern of ignoring the needs of American Indian/Alaska Native children and the responses we know are needed to ensure a better future. Enhancing tribal capacity serves not only children and families but also other entities that have a role in providing services to this population. When culturally appropriate services are available, we see improved outcomes for American Indian/Alaska Native children and families, which is a victory for all those involved."
To that end, Cross, Friesen, Jivanjee, Gowan, Bandurraga, Mathew, and Maher (2011) recommend and successfully used practice based evidence to document the effectiveness of services and programs designed and delivered by urban and rural non-tribal American Indians.

**Urban/Rural non-tribal Indian Perspectives**

A number of American Indian/Alaska Native children who enter Oregon’s child welfare system are officially determined not to be tribal members or eligible for tribal membership. These children are not subject to the requirement of the Indian Child Welfare Act. However, the Indian Child Welfare and Working with Native Families Manual ensures these children’s “Cultural Heritage Protection.” It states:

“… In instances where the ICWA does not apply, but the child is biologically an Indian or considered an Indian by the Indian community, the agency shall ensure the child’s culture of origin is maintained and respect the child’s right to participate in the culture of origin in case planning.”

The Task Force recognizes the importance of cultural heritage protection to eliminate the threats of racial disproportionality for Urban and Rural Non-ICWA American Indian/Alaska Native children and families. Abiding by it has to include real communication between providers of services and these particular communities of color about what it actually means to ensure the child’s culture of origin is maintained and respect the child’s right to participate in the culture of origin.

A detailed list of recommendations by providers of urban and rural services to American Indian/Alaska Native to use in planning the reduction in racial disproportionality for urban and rural American Indians and Native Americans are provided in Appendix B.

**African American Perspectives**

At the 2010 Council on Social Work Annual meeting in Portland, Oregon, researchers Briggs and Wheeler characterized the experience of racial disproportionality for Native Americans and African Americans as a function of the lack of sovereignty, civil rights, and enforcement of agreements and policies, such as the Indian Child Welfare Act. Lack of enforcement means lack of protection, and this lack of enforcement protection, and the resulting racial overrepresentation in child welfare and racial underrepresentation in primary health and mental health systems, exemplifies and reinforces the properties of a system driven by structural racism and white privilege.

This dynamic characterizes the onset, rise, and persistence of Native American and African American overrepresentation experiences in high-end systems, such as juvenile justice and child welfare programs. It explains the reasons for the racial groups’ negative and underrepresented experiences within the developmental and low-end systems, such as educational, primary health and mental health care service systems. Consequently, racial disproportionality and racial disparities experiences, and their resulting cumulative risks, are not subject to regulatory, judicial, or legislative scrutiny and penalties that deter institutional inequalities and cultural insensitivities.

To emphasize the gravity and harmful cumulative disadvantages and negative implications of racial disproportionality for Native and African Americans, the researchers further contend that “today, the profession (social work), its leaders and the client systems we serve are still facing complex social
systems that consistently relegate certain groups to marginalized positions and disproportionate burdens of health, social and economic inequities.”

This particular perspective echoes the sentiments and experiences shared with the Task force by groups representing African Americans, urban, rural, and tribal Native Americans. These same views are consistent with the findings reported in The State of African American Oregon and the Communities of Color study of the experiences of racially diverse groups in Multnomah County, Oregon.

There exists no organized advocacy for addressing disproportionality, such as a uniform process of who is informing partners regarding disparities. This continues and supports silos where, while disparate issues are discussed, no common solutions are found.

DHS should address real issues, such as why there are not enough culturally specific homes for African-American children. Alternatively, around Human Resources hiring practices, DHS should look at why students graduating have difficulty being hired, and whether Affirmative Action being applied equally during interview panels.

A suggestion would be to have DHS hire outside consultants that are culturally appropriate that both DHS and the community support. In addition, there needs to be recognition on an agency level that historical bias exists in order to ultimately lead to not only internal changes, but with Child Welfare staff attitudes shifting as they begin operating under a different paradigm. This change in operations would bring DHS from an internally focused process to an external process that builds and supports relationships within the African American community as it recognizes that undoing racism will not get us closer to deconstructing the system on its own, but rather be the building blocks for cohesion both within the African American community and with its relationships to systems is key to a strong foundation.

The community will need to identify experts within the community to help with “change”, identify those from community to serve as consultants to system and address the community’s current inability to come and stay together.

Lastly, funding needs to be proportionate to the children served. Instituting a system of funding spread across several counties and systems for culturally specific needs, involving the community in development of programs/services as opposed to continuing with white dominant organizations (State/County) decide where funding goes and who gets it. Clearly, a new approach to working with communities needs to be developed.

3) Task Force Priorities and Recommendations

Recommendations for achieving racial disproportionality reduction

A review of the documented research on the reduction of racial disproportionality through evidence-based approaches provided no set script of scientifically based policies and/or recommendations that could be adapted for our purposes in Oregon.

Given the lack of field tested recommendations and practice guidelines for addressing the internal and external conditions that sustain racial disproportionality in foster care, Task Force members spent time developing their own unique set of recommendations to achieve equity in foster care, relying on best
practices in the following key areas: Data-based Decision-Making, Policy and Practice, Workforce Development, and Community Capacity Building and Culturally Specific practices (See Appendix B for full set of Task Force recommendations).

The Task Force’s recommendations in those areas are designed to make the dependency system more equitable for all children and families of color. Embedded within the recommendations are ideas for strengthening not only DHS child welfare, but the entire juvenile dependency system, including the Oregon judiciary.

In addition, the Task Force has a series of recommendations specific to communities of color currently overrepresented in foster care, namely Tribal children and families, urban Indian children and families, and African American children and families.

The Task Force prioritized the following strategies and recommendations to move Oregon toward the safe and equitable reduction of children in foster care by 2015:

**Policy**

1) The Task Force recognizes that Oregon is currently facing difficult policy choices in relation to the state's budget deficit. This crisis is an opportunity to continue the effort to transform child welfare from a child rescue system of supports to a preventive and family preservation-based system that leverages community-based resources that are culturally specific to support families. Development and implementation of a Differential Response Model of intervention for families where abuse or neglect of child(ren) has occurred would begin that transformation.

2) The efforts of the Oregon Judicial Department and the Juvenile Court Improvement Program to implement the "bench card" to encourage unbiased decision making should continue to be supported. This effort should be expanded upon with respect to ICWA.

3) DHS needs adequate internal resources focusing on equity and accountability. Those financial and human resources should support broad-based community inclusion in the accountability and advisory processes.

4) A statewide DHS advisory committee, inclusive of community partners, should develop measures of progress and accountability for changes in policy, rule and practice designed to eliminate disparities and create a more equitable child welfare system. This includes review of policies relating recruitment, retention and professional development and training for DHS staff.

5) The statewide Wraparound Initiative, a system of care approach to serving children and families, should continue to be implemented statewide. In the next two years, it will be critical that Tribes and communities that have implemented or have started implementing that model continue to be supported.

**Data-Based Decision Making**

1) The new child welfare information system, OR-Kids, is critical to the agency improving its data collection and reporting race and ethnicity, implementation of evidence-based practices, metrics and accountability.
2) DHS should establish and train all workers around a protocol to ensure that race/ethnicity data is collected in a standard way.

3) DHS should review its performance measures and private contracts to ensure that race/equity indicators are tracked and measured. Accountability for performance should include implementation of evidence-based practices and the evidence of tangible progress toward equitable outcomes for all children and families the child welfare system serves.

4) DHS should work with the Tribes to create a process to report regularly on "no reasonable efforts" findings as a critical step for accountability of ICWA compliance.

**Community Capacity**

1) The state and local communities should work to identify resources to create "Community Resource Centers" focused on serving culturally diverse populations, particularly the African American, Native American and Hispanic populations. The purpose of these organizations would be to support families in becoming better educated about the child welfare system and equip them to better advocate for themselves and for their families.

2) The state and local communities should support the creation of local, culturally-diverse community advisory groups committed to developing relationships with the agency and partnering with local branches (and, where possible, other child and family-serving agencies and systems) in support of families.

**Workforce Development**

1) DHS should prioritize efforts to recruit, retain and promote a more diverse workforce. Assessment on individual and team levels should be focused on intercultural development, followed by professional development plans that workers and managers are held accountable for.

2) DHS child welfare workers, supervisors and other leaders should be required to have ongoing training (beyond the initial CORE training) focusing on implicit bias and structural racism, family engagement and inclusion, and team decision making. Partners in child welfare work with families (the Tribes, Courts, CASAs, CRB volunteers, attorneys, foster parents) as well as community partner organizations should be included in these training efforts.

3) DHS needs training to ensure that cultural knowledge is included and reflected in its decision making and policy making processes.

While these recommendations focus primarily on DHS and the child welfare system, the Task Force recognizes that in order to sustainably achieve disparity reduction, work beyond DHS and the child welfare system is critical. The ultimate measure of success by 2015 -- in addition to having achieved its goals around foster care reduction happening equitably for all children -- would be that Oregon has a child welfare system that all families view as a place of support and resource development, as opposed to a system to avoid.
4) Model Development, Operational Plan, and Practice Principles

The multi-level change process designed to achieve disproportionality reduction is based in model development research with three distinct levels (a) the strategic, (b) the operational, and (c) the tactical (which is presented later in Section 5 plan of accountability).

It begins with a number of important steps: 1) assessing what we know about the internal system and cross-system causes, correlates, and consequences of racial disproportionality and racial disparities; (2) evaluating how we perpetuate it internally through cultural and racial biases; (3) investigating the inadequate use of cross-system child and family service systems providers, and cultural and community and indigenous resources; and (4) recognizing the failure to discontinue excessive foster care placement overuse and to develop community alternatives to foster care placement across systems.

The Task Force realizes that methods for achieving proportionate use of foster care include a host of structural, community and programmatic areas. These areas are addressed through a plan of multilevel systemic interventions which delineates solutions to achieve proportionality or racial disproportionality reduction.

**Strategic framework**

The strategic framework of the multi-level model includes participation by business and industry and housing as well the judiciary, juvenile justice, primary health, mental health, and community policy leaders representing a cabinet of cross-system or inter-service system representatives administering disproportionality reduction efforts initially in child welfare and adapted and retested with juvenile justice.

The child welfare director is the lead person, providing direction to the Governor’s Office and state agency staff with competencies on equity and racial impact in child welfare services. Through the shared governance structure, the lead agency is responsible for management oversight and sustainability of the multi-level practice approach to disproportionality reduction. Lessons learned from pilot demonstrations, model adaptation, re-application and learning while problem solving will be subsequently used in education, health, and mental health areas.

For historically oppressed groups, such as Native American and African Americans, the decision to use foster care placement carries with it a host of inequalities that are influenced by race and cultural biases. To achieve equity, it involves using comprehensive interventions that fuse cultural knowledge and best practices that reduce the internal and external inequalities that sustain racial disproportionality.

To achieve the equitable and safe reduction of foster care placement the Task Force realizes that the outside and external service systems which contribute to the achievement of DHS’s goal of child safety and family stability will need to be addressed in the overall broad-based multi-level racial disproportionality reduction prescription. Achieving proportionality through a system of community prevention alternatives, including an emphasis on external stakeholders, is typically driven by practice principles consistent with systems of care.

The Task Force established the following practice principles as guides for pursuing proportionality through systems and cross-systems transformation and implementation of its recommendations:
Operational framework

The Task Force operational framework for disproportionality reduction is adapted from the Casey Family Programs approach to disproportionality reduction. The Task Force organized its recommendations (Appendix B) for achieving proportionality and racial disproportionality reduction with five key operational functions:

• Policy/Practice
• Workforce Developmental
• Community Capacity
• Cultural Specific
• Data-based Decision Making

Practice Principles: Implementation Guides and Driving Force of Disproportionality Reduction Efforts

The following practice principles are identified for the safe reduction of disproportionality in the child welfare system. They are adapted from the children mental health system of care principles, best practice principles for infusing culture and science.

Child-focused, Child Safety, Family Strength and Togetherness

Above all, child safety, permanency and well-being are paramount to our recommendations. We also believe all families have inherent strengths and, given the right supports, can remain together to provide quality care for their children.

Shared Leadership Roles and Responsibility (Governance)

Components include:

• relationship based
• transparency
• culture of learning
• team building
• collaboration
• pooled resources
• ongoing resource development

Community Capacity (Community as a Stakeholder)

We cannot accomplish equity without establishing community partnership and collaboration, as well as developing capacity for families to care for children within their unique community and cultural dynamics.

Equity, Anti-Racism and Anti-Bias

Explicitly identifying and mitigating the impact of historical, institutional and structural racism upon service delivery, as well as implicit bias and stereotyping.

Sustainable, Evidence-based and Culturally Centered Policies, Practice and Service Delivery Infrastructures

A “flexible” child welfare system that fits the needs of the community it serves
Cross-systems, Multi-level Performance Management Strategies

Racial disproportionality and disparities exist across systems (i.e. courts, education, juvenile justice, physical and mental health care, etc.) and at multiple levels (i.e. state and federal administration; county and local service delivery); therefore, interventions must address this complex reality.

5) Plan for Accountability and Infrastructure (with emphasis on enforcement protection)

As a way of ensuring accountability and enforcement protection – that is, the protection through the enforcement of laws, policies, and agreements -- the Task Force received consultation and technical assistance by Dr. Harold Briggs in the creation of the following four-option plan for accountability and infrastructure to: a) track progress toward safe and equitable foster care reduction goals and hold DHS and the Juvenile Dependency System accountable for change; b) ensure that the voices of communities of color are meaningfully engaged at the state and local levels; and c) update and enhance the recommendations of this Task Force, with an emphasis on inclusion of a cross-systems effort to address both the inequities of access to preventive services and the over-use of intensive services like foster care placement.

Organization and Structure of Service Coordination Options

This plan includes four options for service coordination across child and family service systems which possess advantages and limitations. Three aspects of accountability, child and family advocacy and support, training and advice, consultation, and technical assistance, regulatory monitoring and compliance tracking exist if they are specifically written into formal agreements: Types of accountability to emphasize are: (a) child and family accountability, (b) formal accountability, (c) verbal/social contract accountability.

Option I. Interagency Team, Ad Hoc

The advantages of Option I include the following:

- Productive working relationships and well-defined communications are facilitated among agency representatives and between the family and the service system.
- Plans of service developed by multiple agencies are more likely to be comprehensive than plans developed by single agencies.
- Accountability is low without a formal service plan.
- Continuity is higher than other single agency service coordination options because many service providers work together on behalf of the child and his or her family and service coordination efforts do not end when any single service is terminated.

The limitations of Option 1 include the following:

- The use of a “lead case manager role” is usually integrated into other assigned responsibilities.
- AD HOC Team members are subject to the agendas of their own agencies.
- Staff or agency changes may impair the continuity of service coordination.
- Usually, formal authority does not exist; enforcement of agreements is based on goodwill.
- AD HOC meetings are time intensive.
- The AD HOC option is not feasible with a large number of clients and many complex cases.
Option. Interagency Team, Standing Coordinating Committee

The advantages of Option 2 include the following:
- Coordinating Team accountability is enhanced when there are formal agreements and the focus is on the organization, system and cross-system.
- Coordinating Team has a responsibility for making decisions about budget, expenditures and resource allocation.
- Coordinating Team may collect information and perspectives on community needs that can lead to system or policy changes.

The limitations of Option 2 include the following:
- The focus is often not on the child and his or her family but on system needs.
- The Coordinating Team may not have enforcement responsibility for the service plan.

Option 3. Semi-autonomous Service Coordination Unit

The advantages of Option 3 include the following:
- Service coordination is seen as a central (and perhaps billable) service.
- Competing priorities felt by individual service coordinators from their own agencies may be reduced by formal agreement.
- Formal authority is often derived from an interagency agreement that creates an entity.
- Accountability is enhanced because participating agencies buy into the need for a service plan and agree to monitor the service plan.
- The consortium committee is available to settle disputes.
- Continuity is enhanced compared to single agency options.

The limitations of Option 3 include the following:
- The existence of a service coordination unit depends on resources from participating agencies.
- Authority is “borrowed.”
- The service coordination function is subject to political pressures.
- Funding of the service coordination unit is likely to be of lesser priority than primary services of participating agencies.

Option 4. Autonomous Service Coordination Agency

The advantages of Option 4 include the following:
- Service coordination is seen as a central (and billable) service.
- The existence of this agency reflects the commitment of the funding agency to service coordination.
- Accountability, enforcement protection, authority, and continuity are enhanced.

The limitations of Option 4 include the following:
- The service coordination agency is subject to funding cuts.
- It is an additional layer of bureaucracy.
**Envisioning Implementation and Next Steps**

As DHS pursues change, it is hoped that other child-serving systems will undergo similar targeted change processes. The aim of such changes would be to systematically neutralize the negative racial impact of decision making by embracing an appreciation and use of various forms of knowledge. This fund of knowledge includes client, cultural, scientific, professional, and implementation sciences with the aim of achieving the equitable and safe reduction in foster care by applying learning organization and pilot experimentation project perspectives (McBeath and Briggs, 2009).

Based on its theory of the situation, the Task Force believes that the state of Oregon would be better served if all its child serving institutions linked its goal of achieving equitable and safe reduction in foster care to its evidence-based program legislation (allowing them to also use evidence based management, evidence-based practice, and practice-based evidence along with cultural knowledge) and its expertise and knowledge of poverty, child abuse, neglect and juvenile crime prevention.

This knowledge can aid in establishing systems of care that emphasize racial impact and achieve child safety and family stability through transforming relationships between the communities it serves and the child welfare provider and other system players. Such a comprehensive multi-level approach also includes the reduction in foster care overuse through mechanisms involving community capacity building and continuous workforce development, with emphasis on child/system/cross-system accountability features and key enforcement activities, regulations, and protections.

The Task Force does not argue that children of color should not be placed into foster care when necessary to keep children safe. What the statistics support is that children of color, to a greater extent than white children, are placed into foster care when, with the right supports, they could be safely cared for by their own families and communities.

Foster care use in Oregon is declining, but unfortunately not at the same rate for children of color as for white children. This inequity must be addressed.

What is also true is that implementing lasting change and equitable results for children and families of color in the child welfare system will require a commitment to equity across all child and family-serving systems and communities, not just in foster care and the dependency system.

Work that continues from here must address the foundational, cross-systems interactions that contribute to family instability and to children being unsafe. Most critically, communities of color that have historically been excluded from these conversations must be meaningfully involved as assets to this positive change.

**Tactical framework and Tool Kit**

To effectively achieve these ends, the Task Force was advised that its critical next step should involve the use of technical assistance to actualize its use of an organic approach to realigning and transforming cross-system activities. As illustrated below, an organic approach that lends itself to model development is preferable to a more rigid and less permeable linear approach.
A rigid and highly structured framework undermines the reality of group dynamics, and it interferes with the fusion of cultural knowledge, use of best available evidence, community voice participation, and cross-systems collaboration.

To achieve system transformation and alignment with the strategic approach described above in model development, the Task Force urges that cross-system planners consider the following tactical framework as guides for planning cross-system alignment and transformation:

**Cross-system forums.** Who should be at the table to discuss a public health approach to cross-system community public health multi-level approach to eliminating threats to child safety and family stability and overuse of foster care for children and families of color?

**Cross-system engagement.** How do we engage all key system players in a learning organization approach to decreasing foster care overuse and threats to child and family safety and stability through improving child and family serving service systems as opposed to a bashing and finger pointing discourse or singular industry approach?

**Cross-system assessment.** Where are we and what type of evidence-based approach do we need to achieve disproportionality reduction in your jurisdiction and collectively?

**Cross-system mobilization.** What resources do you currently have in place and what do you need to accomplish the task of disproportionality reduction within an interdisciplinary framework?

**Cross-system initial transformation.** What are you willing to do differently to achieve transformation and alignment of the inter-service system approach to disproportionality reduction?

**Cross-system sustainability.** What resources, policies, and practice approaches are you willing to share and develop to sustain the reduction in the overuse of foster care through community-based cultural specific providers?

**Toolkit for facilitating the inter service system design, development, and implementation**

The Task Force recommends that county, local jurisdictions, and indigenous communities and Sovereign Nations establish a learning organization cultural context for designing its abovementioned inter-service system tactical methodology so that it can achieve proportionality in foster care.

**The Tactical Framework** involves the use of an assessment questionnaire to guide the design, development, and implementation of intra- and cross-service system policy, coordinating council and behavior change/case management functions across state, county and local learning community auspices. Cross-service system structure includes interdependent state agency collaborating council, county coordinating committees, and local cultural specific learning communities.

**Interdependent State Coordinating Collaborating Council.** The chief function of the council is to set policy; administrative rules, eligibility criteria, and administrative sanction of inter service system policies.
**County Coordinating Collaborating Committees.** The primary purpose is care and case coordination within and between county agencies. The unit of attention is how the systems players are implementing their part of the joint service system agreements. This committee seeks to ensure coordinating agreements and sharing of resources in the care of populations at risk of disproportionality and disparities.

**Local Learning Communities.** Culturally specific community-based service providers of education, health, habilitation, economic, and rehabilitation services.

**Moving Forward and Getting Started Toolkit**

Our approach involves four key areas: (a) **strategic**, (b) **operational**, and (c) **tactical** levels which are supported by (d) **seven core competencies** incorporating the practice principles developed by the Task Force, as well as the key intra- and cross-system coordinating mechanisms that activate the functions of previously mentioned options for accountability.

The seven core competencies represents the fusion of (1) honoring and respecting culture, and avoiding cultural and racial bias decision making (2) accountable performance management, through science (3) eliminating structural racism, (4) propensity and pursuit of racial equity, (5) continuity of uninterrupted service and eligibility across systems, (6) autonomy vs. collaboration to achieve innovation, flexibility, and creative services, and (7) re-aligning formal authority to pursue proportionality and overall child and family service effectiveness. These dimensions operate similarly to the chief components of a well functioning automobile.

The practice principles, key coordinating mechanisms and seven core competencies are measurable indicators. They add value to a performance measurement database system that aids agency management and community service providers in the decision making, monitoring, and evaluation aspects of an intervention based performance management system. Similar systems have been used with success in achieving the equitable and safe reduction in foster care and the overall reduction in disproportionate representation of children and families of color through foster parent adoptions.

Taken together, the **strategic, operational, tactical, and seven core competencies** function like a distributor, alternator, generator and starter in a car. To fully operate as expected, these essential components require the assistance and support of a well-charged power source (legislature), the fuel (executive and administration) and the inspection and review function, which represents the check, and balance mechanisms. The inspection and review function occurs at three levels: (a) the judiciary, (b) the external accreditation authorities, and the (c) state regulatory which includes an internal DHS program and licensure annual self assessment and a three year external cross-system state review by an independent state entity doing a program and licensure enforcement review.

Achieving our proposed approach will involve the use of training and technical assistance. The basis of this training should include, at a minimum, ongoing education and skill development in the seven core competencies, which incorporate the practice principles and strategic approach to reduction of disproportionate representation of children and families of color in child welfare service systems.
Conclusion

Over the course of the last several months, the Task Force has worked diligently and collectively to understand the issue and make recommendations that will be effective and affordable in order to begin the work of eliminating disproportionality within our foster care system. Members have appreciated the opportunity to contribute and look forward to the Legislature’s active support in eradicating this great social and moral injustice.

Actively discussing race and institutional racism, and painstakingly examining the impact and contributions of race and racism, set the stage for realigning and transforming the way race influences policy and decision-making. It also diminishes the negative, and unintended ways race influences the culture of the child welfare system.

Members of the Task Force hope that other child-serving systems undergo similar targeted change processes to systematically neutralize the negative racial impact on decision making by embracing an appreciation and use of various forms of knowledge. This knowledge includes client, cultural, scientific, professional, and implementation sciences with the aim of achieving equity by applying a learning organization perspective.

The Task Force does not argue that children of color should not be placed into foster care when necessary to keep children safe. The conclusion the group reached is that children of color, to a greater extent than white children, are placed into foster care when, with the right supports, those children could instead be safely cared for by their own families and communities.

Through a long and challenging, yet rich and unforgettable fact finding experience, the Task Force has come to the conclusion that whatever the root causes of racial disproportionality are (e.g. individual and family risk factors, community risk factors, community and systemic factors as well as cultural and racial influences), it is a practice that must be discontinued in Oregon.
Appendix A. Definitions

Disparity: Unfair or unequal treatment of one racial or ethnic group as compared to another racial or ethnic group resulting in disparate outcomes (e.g., placement decisions, access to services, exit types, exit outcomes).

Disproportionality: When a particular racial or ethnic group is represented at a rate or percentage higher or lower than their representation in the general population.

Overrepresentation: When a particular racial/ethnic group of children are represented in foster care at a higher percentage than they’re represented in the general child population.

Equity: The quality of being fair or impartial; fairness; impartiality; something that is fair and just.
Appendix B. Child Welfare Equity Taskforce Recommendations

To actualize a transformed child welfare system driven by the abovementioned practice principles requires the completion of the following recommendations developed by the Child Welfare Equity Task Force:

**Workforce Development**
1. Establish and maintain working relationships and partnerships with culturally centered community organizations and academic institutions to ensure continuous service delivery improvement.
2. Enhance and maintain recruitment, hiring and retention practices across programs to achieve a diverse workforce at all levels, by setting benchmarks and management accountability and forming interview committees that include representatives from and of the community representing social justice interests and Tribal Nations.
3. Develop, implement and sustain culturally responsive training curricula, in collaboration with communities of color, for child welfare staff and partners, which can be integrated to improve overall child welfare and system-wide training.

**Policy and Practice**
4. Institutionalize racial equity requirement and binding policies for child and family-serving government agencies and their affiliates through racial and economic impact analyses, adequate race/ethnicity data collection, and equitable funding decisions to support community capacity and infrastructure.
5. Increase multi-level, cross-systems accountability with communities by restructuring service delivery system to actively involve communities of color as “stakeholders” and collaboratively developing “incentives and disincentives” for effective service delivery.
6. Shift paradigm from primarily an “intervention” model to “prevention” model by developing and sustaining culturally responsive and community-based systems of family supports and preservation.
7. Integrate internal system practice improvements in collaboration with communities of color, including:
   1. Developing (or enhancing) an objective risk assessment tool to include cultural context.
   2. Enhancing existing foster and relative placement support, as well as family navigation services.
   3. Expanding racially and culturally diverse pool of relative and non-relative foster and adoptive resources.
   4. Facilitating more frequent and meaningful parental and relative visitation.
8. Improve judicial processes through cross-systems collaborative education/training, data collection and dissemination to local courts, and dependency improvement efforts (i.e. judicial bench card). Expand access to legal representation for children and families in juvenile court.

**Data-Based Decision Making**
9. Set targets/benchmarks for achieving goals with the local community.
10. Improve overall system effectiveness, efficiency, and accountability by developing a cross-system of method data collection and sharing, performance tracking, evaluation and reporting.
11. Develop comprehensive data analysis and research-informed decision-making process.
Community Capacity Building

12. Build trust and confidence with and between communities of color and the economically disadvantaged by establishing a sustainable vehicle to engage and collaborate with various communities of color.

13. Develop and sustain cross-system, collaborative culturally-centered technical assistance/training for all community partners to strengthen knowledge base, infrastructure and improve service delivery in various communities (i.e. annual system-wide DMC conference; mandatory reporting training, etc).

14. Increase development of an array of affordable, centrally located, sustainable, community based Mental Health and Addictions treatment services for families, integrated with school systems, child welfare and other helping services.

Culturally Specific

Recommendations for Cultural Specific Practice with Urban and Rural AI/AN Practice:

1. Case planning for children that are not ICWA eligible must be built on cultural values, including culturally driven practices and serve to connect children with their cultural identities.

2. DHS should develop a protocol/procedural structure for ensuring Cultural Heritage Protection for all AI/AN children. This procedure should be developed, implemented and evaluated by DHS child welfare staff and AI/AN community partners.

3. DHS staff should be trained in the Cultural Heritage Protection procedures that are developed. DHS Supervisors should provide ongoing coaching and tracking of case work staff adherence to the procedure and honoring the intentions of Cultural Heritage Protection.

4. DHS staff evaluation should include:
   a. Compliance with Cultural Heritage Protection
   b. An external review conducted by AI/AN partners that are capable of reviewing staff bias, and staff awareness of how s/he articulates information about and to clients.

Training:

1. Cultural Competency training provided to DHS staff should include information about Urban Indian families. This training should cover:
   a. Historical/Generational trauma
   b. Boarding Schools
   c. Community concerns related to domestic violence and alcohol/drug use

2. DHS should partner with AI/AN community leaders to provide training for mandatory reporters on what warrants DHS involvement. This training should include information about child abuse prevention programs in community agencies.

3. All DHS staff should be trained in effective community engagement, with special regard to engagement of AI/AN families. This community engagement should lead to:
   a. AI/AN community having equal power in system wide decision-making.
   b. Representation of AI/AN community who have been involved with the child welfare system on planning committees.
   c. More family advocates from within the AI/AN community.
   d. More AI/AN foster and adoptive homes.

Staffing

1. There should be active and ever increasing recruitment and retention of AI/AN staff until the staff reflects the families being served.
Recommendations for Sovereign Nations

Oregon has nine federally recognized, sovereign tribes under federal and state statutes. The federal Indian Child Welfare Act (ICWA) of 1978 requires that active efforts be made so that Indian children are protected from unnecessary removal. It also requires that remedial and rehabilitative services are provided to the family to prevent the removal of the child(ren), except to prevent imminent damage or harm to the child and to reunify an Indian child with his or her parent or Indian custodian. To strengthen the state's efforts to comply with ICWA and enhance support for Tribal child welfare programs, Oregon Tribes recommend the following:

Tribal Engagement

- Tribal role in DHS staffing and staff development
  - DHS should utilize tribal representatives as a resource in key staffing decisions.
  - Involve Tribes in interviews and selection of ICWA Liaisons.
  - Involve Tribes in staff training.
- Develop and expand the State-wide ICWA Unit.

Legislative

- Enact State ICWA legislation
  - The Oregon Legislature will enact State ICWA legislation which adopts in full the Federal Indian Child Welfare Act as Oregon State law.

Policy

- Government to Government agreements
  - All Oregon State agencies will honor current government to government agreements (comply and honor) as embodied in SB 770 in all dealings with Oregon Tribes.
  - DHS will affirm and acknowledge in written policy that ICWA is law and must be complied with (honor/collaborate with tribes). Note: This is separate from its actions to accommodate cultural competency and/or diversity.
  - DHS will collaborate with Tribes to develop and implement a government to government grievance process for Tribes with regard to ICWA compliance including a process for reporting non-compliance to the Office of the Director.
  - Develop an internal compliance plan with Tribes and NRC consultant.
- Comprehensive policy review
  - DHS will conduct an annual comprehensive compliance review of current policy and procedures pertaining to AI/AN children and child welfare as identified and approved by the ICWA Advisory Committee.
  - DHS will develop and adopt a comprehensive plan for 100% internal compliance with existing policy and establish metrics for measuring and reporting the progress toward achieving the goals of the plan.

Accountability/Quality Control

- DHS accountability and compliance
  - DHS will develop and implement a robust quality control capacity that is integrated across all aspects of the agency to monitor and report to the ICWA Advisory Committee on compliance with internal policies, external policies, laws and mandates, as well as on ICWA outcomes.
  - Report key compliance metrics to Tribes quarterly such as no-active efforts findings by office.
  - Develop, fund and implement a regional Tribal review process for regular and periodic review of
ICWA cases for compliance.
- CFSR tool should be adopted into policy.
- Annually conduct a statewide review of ICWA cases using CFSR ICWA tool.
- DHS will develop a process to document ICWA compliance and hold management accountable by creating and implementing incentives and disincentives for lack of compliance.
- DHS should ensure that any elements its federal Program Improvement Plan (PIP) that related to Tribes and/or disproportionality be reported to the Tribes on a quarterly basis as part of its quality control process.
- Measureable outcomes are developed with Tribes and tied to PIP and reported quarterly.

**Practice**

- **Active Efforts**
  - DHS will adhere to active efforts (i.e. expert witness, Tribal preference, etc.) to prevent removal and provide rehabilitation services expanding the existing document (Guiding Principles for Active Efforts) to provide guidance for up front work.
  - DHS will adopt a service system which is prevention based to prevent unnecessary removal.
  - DHS will move to a prevention model.
  - DHS will designate prevention caseworkers that are recruited and endorsed from Tribal Communities.
  - DHS will identify funding resources for prevention efforts (i.e. 20% adoption resources tagged for prevention).

- **Prevention and Rehabilitation Services**
  - DHS will expand and increase the use of prevention and rehabilitation, (cultural appropriate and Family-driven) where children can remain safely in their own homes, either voluntarily or with court monitoring.
  - DHS will fund and use Tribal and Urban Indian In-home Services as the preferred providers for Indian children.
  - DHS will use cultural appropriate and family driven approaches with Indian families to build family supports and prevent unnecessary removals.

- **Assessments**
  - DHS should strictly adhere to existing policy and procedure and require collaboration with Tribes on investigations and assessments.
  - DHS will continue to evaluate the tools used to ensure there is not cultural basis included.

- **Legal**
  - DHS will ensure adequate legal representation for children.
  - DHS will collaborate with the courts and the ICWA Advisory Committee to develop a check list of questions to ask at ICWA hearings.
  - DHS will maintain a trained pool of expert witnesses endorsed by Tribal communities to ensure the capacity to meet ICWA requirements in all hearings.

- **Child Centered Focus**
  - DHS should write, interpret and consistently apply policy that is child centered in collaboration with Tribes to ensure that the child’s experience of the system enhances their sense of safety, permanency and well being as follows:
    - Connection of Indian children to Tribal communities, culture and other appropriate activities
    - Allowing and ensuring youth are allowed to participate in decision making and will be heard always
- Caseworker relationships are consistent and stable
- Children receive services needed
- Face to face contact/quality contacts
- Use family members/Tribal community to supervise visits
- System to allow children to deal with the trauma of removal, developing healthy coping skills/peer groups settings
- Allow supervised visits outside of DHS offices
- Allow visits with other family members per DHS policy

• Recruitment/Retention of Native Foster/Resource Families
  - DHS will collaborate with Tribes and Indian Organizations to develop and implement an adequate pool of ICWA compliant resources for children.
  - Reduce the number of Native kids placed in non-Native homes
  - Recruit, train and retain Native foster parents.
  - Develop a specialized workgroup to review each stage of native foster home recruitment strategy and certification process
  - Recruit in places where adults participate and care for children
  - Train DHS staff of exceptions to the exclusion list to enable more foster homes get certified
  - Define (not just DHS!) quality of relationships and ability to respond to the needs of the child as having precedence
  - Have specific staff for certification and training for native foster parents and enable staff to also focus on retention of Native foster parents
  - DHS should expand its capacity to ensure support of Indian families and their resources
  - Acknowledge Tribes as part of support system
  - Specialized training for foster/guardian/adoptive parents when children enter adolescence
  - Provide child/respite care
  - Go beyond asking if relative can be a placement resource and engage family in developing lifelong connections with child, e.g., transport to counseling, take to pow-wows, on-going activities with them, etc.

• Training
  - DHS, in consultation with the Tribes, will provide training to DHS/Tribal staff, lawyers, judges, and community partners.

**Recommendations for Culturally Specific Child Welfare Practice with African Americans**

While the African American community does not have the benefit of ICWA, there is a need for systems to understand that best practices in one community might not be best practice in our community, and that African American communities need a concrete guide for others on how to best meet our needs. Acknowledging the need to involve people from the community – that understand our communities is crucial in creating community based organizations. In addition, the recognition of new structures is an integral part of the solution.

This community offers the following suggestions:

**Practice**

• Case planning for children of color must be built on cultural values, including culturally driven practices, and serve to connect children with their cultural identities.
• DHS will expand and increase the use of prevention and rehabilitation (culturally appropriate and family driven) where children can remain safely in their own homes either voluntarily or with court monitoring.
• DHS should strictly adhere to existing policy and procedure on investigations and assessments and ensure that policy/procedure tools are not culturally biased.
• DHS should develop a protocol/procedural structure for ensuring Cultural Heritage Protection for all children of color.
• Procedure should be developed, implemented and evaluated by DHS staff and Communities of Color.
• DHS staff should be trained in effective community engagement, with special regard to Communities of color which should lead to:
  o DHS acquiring more family advocates from within communities of color
  o Increase in number of CASA’s reflecting communities of color
  o Increase in recruitment and retention of communities of color foster/resource families
  o Involvement of the Faith Community seen as intricate in preserving community
    ▪ Faith community must be the educators
    ▪ Faith community should be proactive not reactive
  o Community is empowered seen as
    ▪ Sustainability within the community (Prevention)
    ▪ Specific programs and opportunities for African American youth identified
    ▪ Decreased number of African American children entering foster care
    ▪ Increased number of African American children remaining with their families
  o Shift in opportunities structure
    ▪ Outcome: Living life to be a positive, contributing citizen
      • Give people back their crown and allows them to own their strength
  o More men/fathers supporting each other and uplifting each other
  o Transformation
    ▪ Nontraditional Plan
    ▪ Policy Making
    ▪ Planning
    ▪ Implementation
    ▪ Quality Assurance
    ▪ Ongoing Evaluation

**Accountability/Quality control**

• DHS Accountability and compliance
  o DHS will develop and implement robust quality control capacity that is integrated across all aspects of the agency to monitor and report to communities of color on compliance with internal policies, external laws, policies and mandates as they pertain to children in care.
  o Report key compliance metrics to communities of color advocacy committee bi-annually
  o CFSR tool should be adopted into policy
  o DHS should ensure that any elements of its Federal Program Improvement Plan (PIP) related to disproportionality and/or Tribes be reported to Communities of Color on a quarterly basis as a part of its quality control process
  o Inclusive hiring practices within institutions and systems
Future Outlook (3 – 10 yrs)

Advocacy
- Leadership
  - Allow for those leaders who work within the community to contact DHS and engage in open dialogue with and about our families

Child Welfare
- Best Practice paradigm shift
- System having an attitude of acknowledging strengths in African American homes
- Identify specific programs and opportunities for African American youth
- Decreased number of African American children entering foster care
- Increased number of African American children remaining with their families
- Collaboration with corporations

Community
- Accountability to and from the community
  - Mutual accountability and responsibility
  - Partnership with department and community
  - A commitment together
- Faith Community is intricate in preserving community
  - Faith community must be the educators
  - Faith community should be proactive not reactive
- Community is empowered
  - Sustainability within the community (*Prevention*)
- Need has to shift to an opportunities structure
  - Outcome: Living life to be a positive, contributing citizen
  - Give people back their crown
    - Owning their strength
  - More men/fathers supporting each other and uplifting each other
- Sense of community regardless of where folks live
- Transformation
  - Nontraditional Plan
  - Policy Making
  - Planning
  - Implementation
  - Quality Assurance
  - Ongoing Evaluation

Human Resources
- Inclusive hiring practices within institutions and systems

How might we get there?

Advocacy
- Establish Structure
  - Legislative Action
  - Administrative Rules
  - Similar to Tribes (Gov-to-Gov)
- Involvement in the legislative process on regular basis
  - Educate ourselves
  - Sustainable model
- Visibility
- Leadership
  - Unity
  - Showing Up
  - We need followers as well as leaders
- Address with government system the reduction of silos
- Recommendations for task force to legislative committees must include input from this meeting

**Child welfare**
- DHS internal commitment and action
- Build Trust
- Multi-System Approach
  - Invoke the court system

**Community**
- Need to address our own injuries
  - Mental, emotional and relational
  - Deal with our pathology
  - Healing
- Multi-generational implementation approach
  - Intergenerational conversation and secession plan
- Education and awareness through Faith community
- Transform system and community
  - Outline strategic approach
  - Create a relational system that can relate to the communities
- Community Engagement and Mobilization
  - See It
  - Hear It
  - Change It

**Education**
- Scholarships to African American social work students specific to needs within communities
- Allow for real cases to be presented to school of social work
  - Increase culturally appropriate methods

**Funding**
- Evidence based practice
- RFP’s
  - Consulting
  - Training

**Human Resources**
- Improve human resources
  - African Americans “ruled out” before having opportunity
  - When hiring – work through office of affirmative action and equal opportunity

**Next Steps**
**Continue community leadership conversations**
- Be Unified
- Create the “dream team”
- Identify who is absent? Who else needs to be included?
• Establish quarterly meetings
• Designate “dream team” to address immediate opportunities and challenges
  o Develop list based on focus areas (six critical factors)

Utilize Portland African American Community Leadership Forum
• African American specific advocacy groups/NGOs
• Paid Staff

Build voice of community
• Let people tell us what to do
• Assess
• Involve client representation from child welfare and decision-making
  o Youth Voice
  o Parent/Family Voice
  o Engage Fathers
• Build dialogue around community healing
• Staff Support
  o Interns
  o Utilize internal staff to inform community
• Development of outside consultant
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Third, we recognize the tireless efforts and dedication to the mission by the Task Force membership (their names and affiliations appear on the cover page). Since our humble beginnings as a diverse group of people with diverging expressions, experiences, and worldviews we have evolved to an active team and organized entity.

It is important to mention the challenges to our evolution and ultimate achievement of our shared mission, which included unavoidable transparent discussions that tested the authenticity and value base of collaboration. These particular issues called into question our sense of flexibility, challenged our sense of urgency, and impacted how we proceeded in representing our priorities and plans to transform our very existence and relevance as leaders of child and family service delivery systems. Our vision is to provide a viable and dynamic system of support to children and families as opposed to a system of threats and punishment.

These challenges are among the principal reasons why the Task Force has continued to pursue the use of innovative research and cultural specific knowledge as drivers of its efforts to eliminate disproportionality in child welfare services for Native Americans, African Americans, and other economically, socially at risk and marginalized groups of children and families. We have pursued our charge through a culture of learning which included people representing the legislature, judiciary, Sovereign Nations, Communities of Color, university researchers, human service professionals, service providers, foster parents, youth, adults and family, as well as alumni of the Oregon Child Welfare system.

The Task Force is in debt to these groups and their representatives for their incredible contribution of evidence, experiences, insights and ideas on methods to transform the way DHS conducts business, especially, its policies and practices that convey harmful consequences for historically oppressed groups.

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Moving forward we will continue to draw upon their capable leadership and example as we engage in problem solving and use of research in providing culturally centered care to all of Oregon’s children and families. Task Force members are thankful for the research by Professors Keva M. Miller, Katherine Cahn and William Feyerherm -- as well as the model development, theories, evidence and research of our consultant and the primary writer of this report, Dr. Harold E. Briggs, all from the School of Social
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