

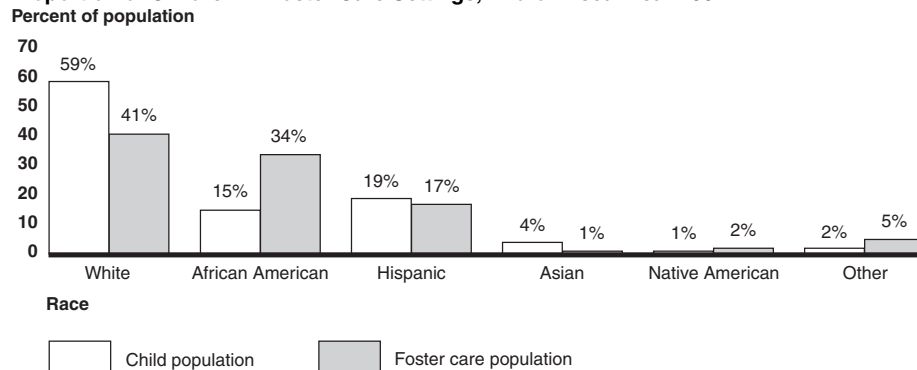
[Excerpt from *African American Children in Foster Care: Additional HHS Assistance Needed to Help States Reduce the Proportion in Care* (GAO-07-816)]

July 11, 2007

The Honorable Charles B. Rangel
 Chairman
 Committee on Ways and Means
 House of Representatives

Children of all races are equally as likely to suffer from abuse and neglect, according to the Department of Health and Human Services' (HHS) National Incidence Study of Child Abuse and Neglect (NIS); however, HHS data show that a significantly greater proportion of African American children enter and remain in foster care than children of other races and ethnicities. African-American children across the nation were more than twice as likely to enter foster care compared with White children in 2004, and African American children remained in foster care about 9 months longer. On the last day of fiscal year 2004, African American children totaled 162,911—or 34 percent—of the 482,541 children in foster care, according to HHS data—about twice their proportions in the general child population. Although there is great variability among and within the states, data from nearly all states show some disproportionate representation of African American children in foster care. State data also show patterns of disproportionate representation in foster care for Native American children and, in certain localities, Hispanics and Asian subgroups are also disproportionately represented to some extent.¹

Proportion of Children in Foster Care Settings, End of Fiscal Year 2004



Source: GAO analysis of AFCARS and Census data.

¹Racial disproportionality refers to the extent that children of a certain race or ethnic group are over- or underrepresented in foster care relative to their proportion in the population. (See app. II for disproportionality rates for African American, White, Hispanic, Asian, and Native American children by state in fiscal year 2004.)

About 60 percent of children who enter foster care do so through reports of child abuse or neglect provided to a state’s child welfare system.² Child welfare staff screen and investigate reports of child maltreatment, and make decisions about whether a child can remain safely at home, with or without family support services, or must be immediately removed and placed in foster care. The decision to place a child in foster care is subsequently presented before a judge who evaluates the evidence for removal from home and either corroborates or overturns the decision. After entering a child in foster care, child welfare staff develop case plans that are approved by the courts outlining steps parents must take before a child can return home or, for children the courts decide cannot safely be returned home, establishing other permanency goals for them, such as adoption or legal guardianship. States have the primary responsibility for establishing the legal and administrative structures and programs of their child welfare services; however, federal legislation and regulations establish a framework within which states make their programmatic and fiscal decisions. The Department of Health and Human Services (HHS) is the principal federal agency that provides federal oversight of states’ child welfare systems. HHS administers about \$8 billion in funds each year that are dedicated to support states’ child welfare systems. HHS also administers social services block grant programs, such as Temporary Assistance for Needy Families (TANF), and states generally spend about \$12 billion of these funds to provide direct social services. States use these block grant funds to benefit various populations, including child welfare families.

Concerned about why African American children are overrepresented in foster care, you asked us to analyze:

- (1) The major factors that have been identified as influencing the proportion of African American children entering and remaining in foster care compared to children of other races and ethnicities;
- (2) The extent that states and localities have implemented strategies that appear promising in addressing African American representation in foster care; and
- (3) The ways in which key federal child welfare policies³ may have influenced African American representation in foster care.

Results in Brief

A higher rate of poverty and challenges in accessing support services, as well as racial bias and difficulties in finding appropriate permanent homes, were identified in our review as the main factors influencing the proportion of African American children in foster care. Thirty-three states in our survey cited high rates of poverty among African Americans as a factor influencing children’s entry into foster care. Nationally, African Americans are nearly four times more likely than others to live in poverty. Studies have shown that families living in poverty have difficulty accessing needed services that can help support families and keep children who may be vulnerable to abuse and neglect safely at home. However, research suggests that poverty does not fully account for differing rates of entry into foster care. State child welfare directors we surveyed also responded that bias or cultural misunderstanding and distrust between child

²Children also enter foster care for other reasons, such as their parents’ illness, death, or disability or because of the children’s delinquent behavior and truancy.

³We are using the term “policy” to include federal laws, regulations, and informal agency guidance.

welfare decision makers and the families they serve also contribute to the removal of children from their homes. Once African American children are removed from their homes, their lengths of stay in foster care average 9 months longer than those of White children. The challenges in accessing services, such as substance abuse treatment and subsidized housing, also contributed to longer lengths of stay for children whose goal is to reunify with their families. For children who cannot be reunified with their families, state officials reported difficulties in finding them appropriate permanent homes, in part because of the challenges in recruiting adoptive parents, especially for youth who are older or have special needs. An additional factor is that African Americans are more likely to rely on relatives to provide foster care. Although this type of foster care placement, known as kinship care, can be less traumatic for children and reduce the number of placements and chance of their re-entry into foster care, it is also associated with longer lengths of stay.

Most states in our survey reported implementing some strategies that experts have identified as promising for African American children and noted several factors they considered fundamental to any attempt to address racial disproportionality. Researchers and officials stressed that no single strategy would fully address the issue, but that strategies to increase access to support services, reduce bias, and increase the availability of permanent homes all hold some promise for reducing disproportionality. For example, 38 states reported collaborating with neighborhood-based organizations to expand the availability of support services. Most states sought to reduce bias by including the family in making key decisions and by recruiting and training staff with the skills to work with people of all ethnicities. To move children more quickly from foster care to permanent homes, more than half of states performed a diligent search for relatives of children in foster care who might be willing to provide permanent homes, recruited African American adoptive families, and offered subsidies to guardians who were not willing to adopt, as is currently allowed for adoptive families. However, fewer states reported focusing attention on disproportionality itself by, for example, enacting state legislation or establishing councils on racial disproportionality. Although research on the effectiveness of strategies has been limited, public and private officials in the forefront of research and implementation said that the ability to analyze data, work across social service agencies, and sustain leadership was fundamental to any attempt to address racial disproportionality. HHS has taken steps to help states in their efforts to address disproportionality through outreach and technical assistance. However, state child welfare directors generally reported in our survey that additional support in analyzing data on disproportionality and disseminating strategies is needed. Child welfare officials in states considered to be at the forefront of addressing disproportionality told us they relied on technical assistance in analyzing data from universities and funds from a private foundation to help them devise strategies to address disproportionality.

According to our survey results, federal policies that provide for family support services and promote adoption were generally considered helpful in reducing the proportion of African Americans in foster care, but policies that limit the use of foster care funding for family support services and legal guardianship were reported to have a negative effect. Half of the state child welfare directors we surveyed reported that federal block grants used to provide services to families, such as substance abuse treatment, contribute to reducing the proportion of African American children in foster care. However, even more child welfare directors in our survey reported that policies governing the use of funds specifically intended for children in foster care increase the proportion of African American children in foster care. More specifically, many state child welfare directors expressed concerns about the cap on funds for preventive services and the lack of flexibility to use funds meant for foster care and adoption for other purposes, including services to families at-risk of having their children removed, such as parenting classes.

Among policies that affect states' ability to find permanent homes for children, states generally reported that adoption policies have been helpful, such as the requirement to recruit minority adoptive parents and providing subsidies to families adopting children that states have identified as having special needs. However, states still face challenges in recruiting sufficient numbers of willing and qualified adoptive families for African American children. In addition, state and local officials also reported wanting federal support for legal guardianship. States responding to our survey considered the federal policy recognizing legal guardianship as helpful in enabling children to exit foster care, but policies limiting the use of federal funds to pay subsidies to guardians, similar to those provided to adoptive parents, as a barrier. States were less definitive about the impact of federal policies that impose time frames on permanency decisions. These time frames may shorten the time children remain in care but may also impede states' ability to reunify children with their parents.

Our draft report recommended that HHS pursue specific measures to allow adoption assistance payments to be used for subsidizing legal guardianship. In commenting on the draft report, HHS disagreed, stating that the administration had already proposed an alternative funding approach, known as the Child Welfare Program Option. Under this proposal, states could choose to remain under the current foster care funding structure or instead receive a flexible capped grant that they could use for a wide range of child welfare services and supports, including subsidizing guardianships. The current adoption assistance program would remain the same under this proposed option. However, although HHS has presented this broad restructuring of child welfare funding in its budget proposals each year since 2004, no legislation has been offered to date to authorize it. Moreover, if enacted, it is unknown how many states would choose a capped grant that would allow greater program flexibility instead of the current title IV-E foster care entitlement funding. Therefore, in light of these factors, we have deleted our recommendation to HHS and are instead suggesting that Congress consider amending current law to allow subsidies for legal guardianships, as is currently allowed for adoption. Current evidence indicates that allowing such subsidies could help states increase the number of permanent homes available for African American and other children in foster care. We are also making a recommendation that the Secretary of the HHS provide states with additional technical assistance and tools to develop strategies to address disproportionality. In its comments, HHS noted that our recommendation was consistent with its efforts to provide technical assistance to states for addressing disproportionality, but the department did not address the specific actions we recommended. We continue to believe that it is important for HHS to take these actions to help states address this complex issue.

Methodology

To address these three objectives, we used multiple methodologies, including administering a state survey; conducting site visits; interviewing researchers and federal agency officials; conducting a literature review; and analyzing federal legislation and policies. Although we focused on African American children in this report, we also noted points of similarity or difference with children of other races and ethnicities as appropriate.⁴ Specifically, we conducted a nationwide Web-based survey of state child welfare administrators in 50 states and the District of Columbia between November 2006 and January 2007 and received responses from 48 states.

⁴Native Americans are also overrepresented nationally, but some are affected by different child welfare laws and oversight authority than African Americans, making comparisons challenging.

In developing the survey, we relied upon a literature review to identify issues, such as factors that contribute to disproportionality, as well as interviews with child welfare researchers and others. To obtain a more in-depth understanding of issues, we conducted site visits to California, Illinois, Minnesota, New York, and North Carolina, where we interviewed state and local child welfare officials, juvenile court judges, and others involved in the child welfare systems. In addition we conducted telephone interviews with Texas state and local child welfare officials, service providers, and a judge. When viewed as a group, the states we visited reflected diversity in their rates of African American representation in foster care, strategies and initiatives used to address this disproportionality, program administration (state administered and county administered), and geographic location. In addition, the states we selected collectively covered nearly one-third of children in foster care across the nation. To extend our understanding, we interviewed child welfare researchers identified through our literature review and through recommendations from child welfare officials and stakeholders for their knowledge on issues of racial disproportionality in foster care. We also interviewed HHS officials responsible for foster care programs and related data, as well as federal officials at the Justice Department, Office of Juvenile Justice and Delinquency Prevention (OJJDP), which is required by law to address racial disproportionality in the juvenile justice systems. In addition, we conducted an extensive literature review of research on racial disproportionality in foster care and strategies used by states and others to address this issue. In reporting our findings, we drew upon research publications our methodologists considered generally reliable and methodologically sound. We analyzed federal child welfare legislation and policies relevant to foster care that our literature review and interviews had indicated might have an impact on racial disproportionality. Finally, we also analyzed HHS data on foster care and adoptive children that state child welfare agencies submit biannually to the agency under its foster care and adoption reporting system. We also confirmed the reliability of these data for our purposes. We conducted our work between June 2006 and June 2007 in accordance with generally accepted government auditing standards.