



Disproportionality in Illinois Child Welfare: The Need for Improved Substance Abuse Services

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Abstract

In 2007, African Americans children made up 19% of the population in Illinois yet they made up 59% of the population of children in foster care. They make up 34% of subjects of maltreatment investigations. This study examines community characteristics as determinants of the number of African American children that are in foster care and come from some of the 77 community areas in the city of Chicago. Of the hypothesized relations to the dependent variable-ward of the state-concentrated poverty as operationalized was positively related and statically significant. Other poverty indicators were not in the posited direction nor statistically significant. The level of education attainment was inversely related and statistically significant. The presence of African Americans in specific communities was positively related to foster care placement in Illinois. The adequacy of substance abuse service to the very poor population is also considered.

Keywords: Disproportionality; Foster care; Race, poverty; Educational attainment; Substance abuse services

Introduction

According to the U.S. Department of Health and Human Services (HHS) publication Child Maltreatment 2009, an estimated 3.3 million referrals of possible cases of child abuse and neglect were made to state Child Protective Services (CPS) agencies in the United States in 2009, two-thirds (61.9%) of the referrals- 2.04 million reports--were accepted by CPS for an investigation or assessment, resulting in an estimated 702,000 children found to be victims of child abuse and neglect. Research indicates that poor and racial and ethnic minority children and their families are disproportionately reported, labeled, and mandated into the child welfare system.

It has been claimed that African American children are over-represented in foster care that they enter foster care at a much higher rate than other groups of children [1,2]. In Illinois, the point of entry into foster care--the differential rates in indicated reports-is the point at which the greatest disparity exists. Once in care, children from different races/ethnicities have different living arrangements, likelihood of stability, and continuity and permanence placement other than foster care system. The foster care population increased from 15,000 children in 1987 to 51,000 children in 1997 and declined back to 16,000 children in 2007. This growth was primarily in the African American and kinship care populations. By 1996, national data showed that Illinois had the highest per-capita rate of children in foster care in the nation at 17.1 per 1,000, and the majority of the children in foster care (79%) were African American. Reforms were put in place in Illinois that resulted in a reduction of in the number of African American children entering foster care while increasing the number of African American children exiting foster care to permanent homes and caseloads decreased. By 2005 national data showed that Illinois was among the lowest per capita foster care rates at 6,000 per 1,000 and African Americans made up 63% of the population in foster care. Nevertheless, over- representation persists.

In 2007, African Americans children made up 19% of the state's population yet they made up 59% of the population of children in foster care. They made up 34% of subjects of reports to DCFS, protective services, of maltreatment. These disproportional re-presentation increases at the next stage--47% of children who enter foster care are African Americans in Illinois [3]. In addition, African Americans

children end up staying in foster care longer than their counterparts and they represent only 41% of the children exiting to permanency within three years [3].

Purpose of the Study

Research shows that in the United States, African Americans are no more likely to maltreat their children than families of other ethnic groups, yet this disproportional representation of African Americans children is prevalent in child welfare systems across the country [4,5]. According to Needell and colleagues [6] this disparity could be due to at least three factors: differences in the child welfare needs of different racial groups, discrimination by society and discriminatory practices of child welfare workers. Providing evidence that bias may explain, at least in part, this over-representation is a study of substantiated maltreatment rates for Minnesota that explored the role of geography in this instance.

The study found disparities in child maltreatment rates even after controlling for information on victims, offenders and counties. Furthermore, over-representation can be inflated depending on which level of aggregation is examined (for example state versus county). Thus, this study examines how neighborhood characteristics are related to substantiated rates of maltreatment for African Americans in the city of Chicago, Illinois. It also addresses the possibility of disproportional rates of substantiated maltreatment cases for African Americans in the city of Chicago. Research on how the neighborhood environment is related to rates of child maltreatment has been conducted over the past 30 years. These studies have found those higher rates of poverty [7-10] less social support [11], higher rates of neighborhood unemployment

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[12] and greater alcohol outlet densities, particularly bars and off-premise outlets [13,14] are associated with higher rates of child abuse and neglect. This leads to a discussion of the methodology of this study.

Methodology

This study is designed to identify community characteristics or factors that put children at risk for being wards of the state, i.e., youth officially under the protection of state government. Chicago, Illinois, is used because it has been the beneficiary of the progress made by Illinois state government in reducing its case-loads of children in substitute care.

However, Chicago still has conditions in its inner-city communities that lead to out-of-home placements for children. I speculate that if we use the most recent data on children in substitute care we may identify a residual, hard core group, where certain risk factors prevail and prevention in regard to such risk factors may be most helpful. Most importantly, Chicago is one of many urban centers where child welfare services are frequently utilized. The city's demographics and utilization patterns are prototypical.

Additionally, Chicago has a fairly representative population of racial and ethnic groups—38.6% Black, 37.9% Whites and 19.6% Hispanics. Most importantly, Chicago has seventy-seven community-areas for which recent data are available. Data for the sample are garnered from the 77 community areas whereby each is regarded as the unit of analysis. It is the only city in the nation that does this and began doing this with the census data of 1930. This also is highly compatible with certain statistical tools—such as ordinary linear regression analysis—where sample size and variation across the unit of analysis is helpful.

Selection of Independent Variables

Child poverty

Poverty in the United States, especially child poverty, is increasingly associated with family structure. In the mid 1960s, when the War on Poverty began and Daniel P. Moynihan, then an assistant secretary in the Department of Labor, issued his report on illegitimacy and poverty within the Black community, only 35 percent of all poor children lived in female-headed families. Today, that figure stands at almost 60 percent and by some counts is even higher. The proportion of all American children who are poor has been increasing from 15 percent in 1970 to 20 percent in 1996. Most of this increase is associated with the growth of single-parent families. The arithmetic behind this conclusion is straightforward. Because child poverty is five times higher in one-parent than two-parent families, and because the proportion of all children living in one-parent families has increased dramatically, child poverty rates have increased by about five percentage points in 2000 for this reason alone. More recently, the rates are as follows (U.S. Census Bureau 2006 Poverty Report: Income, Poverty and Health Insurance Coverage in the United States:

- For children under 6 living in families with a female householder and no husband present: 54.8 percent
- For children under age 6 in married-couple: 26.1 percent
- Poverty rate for African American children: 26.1 percent

The variable used in this study is childhood poverty defined as the percent of residents under 18 in families with annual incomes below the federally defined poverty level in the 2000 census. This is done by community area for the city of Chicago [15].

Concentrated poverty

In my research I draw upon the distinguished work of the sociologist William Julius Wilson. According to Wilson [16]: “The increase in the proportion of the jobless adults in the inner-city is also related to changes in the class, racial and age composition of such neighborhoods—changes that have led to greater concentration of poverty. Concentrated poverty is positively associated with joblessness. That is, when the former appears, the latter is found as well. As stated previously, poor people today are far more likely to be unemployed or discouraged out of the labor than in previous years. In *The Truly Disadvantaged*, I argue that in addition to the effects of joblessness, inner-city neighborhoods have experienced a growing concentration of poverty for several reasons, including (1) the exodus of non-poor white and other non-black families; (2) the out migration of non-poor black families; and (3) the rise in the number of residents who have become poor while living in these areas. Additionally, research on the growth of concentrated poverty suggests another factor: the movement of poor people into a neighborhood (immigration) and one more factor should be added to the mix: change in the age structure of the community”.

The results can be seen in the statistics recording the latest escalation in inner-city rates of substance abuse, single-parent families, homicides, assaults and domestic violence. Congress enacted the new welfare law in 1996, but it is yet to be determined the consequences of that policy in terms of concentrated poverty and out-of-wedlock births. Taylor et al. [17] in their study of TANF (welfare) recipients determined that those who reached their lifetime limits were less advantaged than those whose cases were closed for increased income. They were less likely to have a high school diploma or GED, had poorer work histories, were more likely to have experienced severe domestic violence in the last past months, and more likely to report mental and physical health problems [17].

Given the material from William Julius Wilson, I identify two independent variables—poverty 1 and poverty 2. Poverty 1 is the percent of residents by community area in Chicago of families with incomes below the federally defined poverty level in 2000 census. Poverty 2 is the percent of families living at below twice the poverty level by community area in 2000 [15].

Race/Ethnicity

Robert Sampson, sociologist at the University of Chicago, who studies neighborhood clusters in Chicago (The Project on Human Development in Chicago neighborhoods), argues that racial segregation has had an even more devastating impact on the health of Chicago neighborhoods than previously known. Predominantly Black neighborhoods are much more likely to be surrounded by economically disadvantaged neighborhoods than are predominantly White neighborhoods. Whether rich or poor, however, predominantly White neighborhoods are much more than Black neighborhoods to reap the radiating benefit of proximity to neighborhoods with a high degree of informal social control. This variable is included because Wilson identifies various factors that lead to concentrated poverty. It was not just de-

Industrialization of Chicago (and the surrounding area) and not just persistent patterns of racial segregation, but also depopulation of the inner-city, that is associated with concentrated poverty [18]. The variable Race is the percent of the population that is African American by community area in 2000 [15].

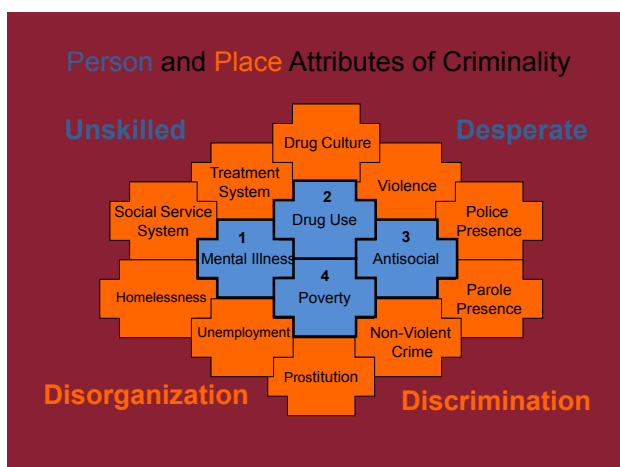
Education

I rely on social disorganization theory, which states that neighborhoods are socially disorganized when they lack a structure to help maintain social controls that allow communities to realize commonly held values [19]. In other words, neighborhood residents who share common goals for the neighborhood may be more likely to work together to reach those goals. However, if there is disagreement among neighbors about acceptable standards for behavior or if residents are unable to prevent individuals from acting in unacceptable ways, social disorganization may result.

In this study, social disorganization is measured by the variable education attainment. Within the social disorganization framework the lack of education impedes the process of collective efficacy, which is, in turn, related to rates of social problems in neighborhoods [20]. Collective efficacy is defined as the ability of a neighborhood to realize common values and provide social control over behavior [20]. For the variables education one represents the number of African Americans with less than 9 years of education, another variable for high graduate, and a variable for college graduates by community area in the city of Chicago.

Crime index

There is another aspect to the theory of social disorganization which had its basis in the inter sectionality of various factors as indicated in the chart below (Flow Chart).



Draine: Social Disadvantage

- Poverty moderates the relationship between serious mental illness and social problems (such as criminal involvement)
- Maybe people with mental illness experience social problems more because they live in an environment that is endemic to these problems
- Mentally ill persons are also typically members of other groups with high risk of being arrested
- Perhaps we should view the overlap between Criminality and Mental illness as an unsurprising phenomenon (Draine,Salzer,Culhane, &Hadley,2002)

To measure this aspect of the social disorganization framework several variables are taken from the City of Chicago Police Department Crime Index (Figure 1). Those variables are murder, criminal sexual assault, robbery, aggravated assault, aggravated battery, burglary and theft by community area. Once again, the diametric assumption to the preceding perspective is that communities are stronger and more resilient than the individual families. Even where families are dysfunctional and off balance, communities can offset stress and support the stabilization of individual families even in neighborhoods where drugs, despair and violence exist.

Wards of the state

This variable functions as the dependent variable. The numbers of children under the protection of the Department of Children and Family Services, State of Illinois Children are identified by residence in the city of Chicago at the time of the initial investigation and by community area (some77). The source of the data is the Illinois Department of Children and Family Services, Division of Quality Assurance., The Cook County LANS Disproportionality Data, 2008.

Multiple regression analysis is used as the statistical technique. The form of the equation is as follows:

$$\text{Wards (of the state government)} = \text{Childhood poverty} + \text{Race (\% Black)} + \text{Concentrated poverty (pov2)} + \text{Poverty (pov1)} + < 9\text{th Grade} + \text{H.S. Grad.} + \text{College} + \text{theft} + \text{robbery} + \text{burglary} + \text{agg. battery} + \text{agg. assault} + \text{crim. Sex. assault} + \text{murder}$$

After conducting regression of the independent variable in the relation to dependent variable the equation is

as follows:

$$\text{Wards} = -28.28 - 1.602 + 0.5749 \text{ Race} + 3.004 \text{ Concentrated poverty} - 1.758 \text{ Poverty} + .05069 > 9\text{thGrade} - 0.062146 \text{ H.S. Grade} - 0.02981 \text{ College} + 0.011298 \text{ theft} + 0.0969 \text{ robbery} + 0.13156 \text{ burglary} + 0.1281 \text{ agg. Battery} - 0.7610 \text{ agg. assault} - 1.61 \text{ crim. sex. assault} - 0.453 \text{ murder}$$

R Square=70.3% R square (adj.)=63.6% F=10.49 ratio at p=.0000 (Table 1).

Discussion and Analysis

Using the city of Chicago as a basis for this study, the results reveal many children who are currently wards of the state in Illinois are in such status due to certain risk factors. The chief factor is the effect of extreme poverty while controlling for the African American population. Race, as a demographic variable is pertinent, at least statistically significant. Surprisingly, for both childhood poverty and poverty-an increase in those variables was not positively associated with children being wards of the state.

The extreme level of poverty indicator does have the anticipated effect. It is statistically significant, but the other poverty variables are inversely related to the dependent variable. The plausible explanation seems to be that teenage pregnancies are wide spread in the Black community and is not a phenomenon confined to the one social class. Peer culture influence, unstable family structure at all socio-economic levels, destigmatization of early age pregnancy or even the media and elements of pop culture may have had an impact [18]. Being poor and African American does not usually result in being a client of children's protective services (at least in statistically significant terms).

But for the very poor the story is different. The once booming economy before the great recession starting in 2008 helped stabilize

Predictor	Coefficient	t value	P value
Constant	- 8.28	-1.69	0.096
Pov.2 (2000)	3.004	2.98	0.005*
Pov.1 (2000)	-1.758	-0.87	0.388
Child Pov.(2000)	-1.602	-1.41	0.164
Theft	0.011298	1.48	0.145
Robbery	0.969	0.93	0.335
Burglary	0.13156	2.93	0.005*
Agg. Battery	0.1281	0.77	0.446
Agg. Assault	-0.7610	-2.47	0.016*
Crn. Sexual Ass.	-1.3051	-1.61	0.113
Murder	-0.453	-0.31	0.0756
> 9 Years	0.05069	4.66	0.0000**
H.S. Grad.	-0.062146	-2.06	0.044*
College	-0.02981	-2.74	0.008*
%Black	0.5749	2.56	0.013*

*statistically significant at 0.05 level **statistically significant at 0.01 level
Table 1: Regression Analysis.

some of the impoverished communities of Chicago. However, Social services were not available to the very poor due to a lack of adequate funding from state, city and not for profit agencies which ostensibly were meant to help curb child abuse from the stand point of neglect cases (Figure 1).

Chicago

Poverty Rate: 0-10% Basic Needs 1.23abc Mental Health/Substance Abuse 1.36abc Employment Services 1.16abc

Poverty Rate: 11-20% Basic Needs 0.78a Mental Health /Substance Abuse 0.79a Employment Services 0.88a

Poverty Rate: 21-40% Basic Needs 0.79b Mental Health/ Substance 0.60b Employment Services

0.84b

Poverty Rate: +40% Basic Needs 0.84c Mental Health/Substance 0.63c Employment Services

0.85c

The index indicates census tract composite scores whereby 1.30 and .85 represent above or below relative to 1 the mean level of services. The letters a, b and c represent the level statistical significance of 10% and below with c being the lowest.

At the state level, changing the criteria for reporting suspected abuse to the state may have had something to do with it. For example, a parent abandoning a child to the care of another family member once constituted possible abuse and drove up the numbers. Now kinship care is not necessarily considered abusive.

However, this researcher is inclined to believe that less biased reporting procedures as it relates to the poor and the various treatment program targeted to parents including grandparents providing care towards have had an impact. However, for those whom I regard as members of a permanent underclass the bias is still an issue. The lack of at least a high school diploma (which is directly correlated and statistically significant) and behavior/life styles associated with homelessness. That and other patterns of family disruption. contribute to foster care placement.

About 55% of the cities surveyed by the U.S. Conference of Mayor report that families may have to break up in order to be sheltered. Families send their children to stay with relatives to avoid shelter life One fifth of homeless children are separated from their immediate family at some point. Mother with a childhood history of foster care placement is more likely to become homeless, and they tend to become homeless at an earlier age and then those who do not have a foster care history. At least 30% of children in foster care could return home if their parents had access to housing.

At this juncture, we consider disproportionality in the Illinois child welfare system. Disproportionality refers to the difference in the percentage of children of a certain racial or ethnic group in the state, county or city compared to the percentage of children in the same group in the child welfare system at the state, county or city level. For example, in the state of Illinois (fiscal year2007) the percentage of children in the general population is as follows: Whites-63%; African Americans-19%; and Hispanics-23% The percentage of children in substitute care respective to their ethnic population is as follows; Whites-33%; African Americans-59%; and Hispanics-6% The disproportionality ratio is as follows; Whites-0.52; African Americans-3.16 ; and Hispanics-0.26 This means that African Americans are 6.3 times more likely than Whites children to be in care and Hispanics are 0.5 times less likely than Whites to be in care.

The Jane Addams College of Social Work at the University of Illinois at Chicago conducted focus groups from the perspectives of multi community stakeholders. Stakeholders included child welfare professionals, administrators, and court personnel. Law enforcement personnel, birth parents, foster/adoptive parents, community service providers and youth currently and formerly in care. The following factors contributing to disproportionality were identified as a result of the focus groups: environmental challenges /barriers; family/cultural breakdown; cultural bias among professional reporter of cases; cultural bias in decision-making (protective services, IDCFS); cultural bias in decision-making (Courts); differing views concerning physical discipline; and lack of diverse culturally competent service (Illinois Department of Children and Family Services, 2008).

At this time community dialogues are being held to engage key stakeholders in an ‘Action Team” process to address institutional and

structural barriers to permanency and disparate well-being outcomes. Conversations regarding permanency, disproportionality and disparity were co-linked with conversations of racial equity or the lack thereof, for people of color, particularly, African Americans. It is important that

all the participants have a shared definition and common language concerning disproportion, disparity and equity [21].

The abuse of alcohol and drugs has had a dramatic effect on foster care, particularly in the past 20 years. With increasing frequency, children are coming into care because their parents are addicted to alcohol or drugs. Perhaps the most disturbing thing, however, is the number of children in foster care whose families were torn apart by substance abuse and who were subsequently abuse alcohol or drugs themselves. Studies by the Child Welfare League of America and other organizations have found that substance abuse is a factor in at least 75% of all placements in out of home care. Eighty percent of states now report that parental abuse of alcohol or drugs is one of the two most frequently have special needs, the needs of children whose families are affected by substance abuse are substantial. A parent's thoughts and perceptions may be impaired or distorted by the use of alcohol or drugs, having a profoundly adverse effect on memory, attention, and perception. Going back to the person and place theory of criminality, factor of social disorganization are presented. It is argued that drug and alcohol dependence destabilize the communities of the City of Chicago in the U.S Again using the crime index of the Chicago Police Department Appendix A presents the entire index. Notice the crime is reported by race and gender, prostitution and narcotics and criminal offences to children are presented. In Chicago African American perpetrating these crimes at a much level. The females are most times parent to children and males are fathers in biological terms only Depression also frequently accompanies the use of cocaine and other drugs. Children in these families frequently suffer emotional and behavioral problems as a result and abusive parenting behavior that often accompanies abuse. They frequently exhibit one or more of the following:

- 1) Diminished ability to concentrate
- 2) Nihilistic or fatalistic orientation toward the future
- 3) Poor attachment behavior, or
- 4) A tendency to choose risky behavior, including the use of alcohol or other drugs latter in life.

Increasing numbers of children and youths who enter foster care because of abuse and neglect by chemically involved parents bring with them their own substance problems. The drug habits of youth of youths in foster care can seriously impede their chances of continuing their education or finding employment. It is not known how many youth in foster care become homeless once they reach the age of emancipation, but many youth involved in substance abuse do experience bouts of homelessness. Federally funded runaway and homeless shelters report 22% of homeless youths and 20% of runaway youth's abuse alcohol and other drugs, urban studies report higher rates, ranging from 70% of runaways in New York to 100% in San Francisco [22,23].

A majority of state child welfare agencies including those in Illinois are not equipped to deal with substance abuse among youths in care They currently lack the resources and/or expertise to train staff and foster parents in how to identify and treat substance abuse problems among these youths. Only 13% of states have a written policy requiring foster care parents to report a youth's substance abuse. In recent years, professionals have used a variety of prevention and treatment programs,

with mixed results. Professionals in child welfare and those who work in drug treatment know little about each other's work. In a survey of alcohol and drug therapist, for example, almost 40% expressed concern that reporting suspected

child maltreatment would harm their relationship with their patient [24].

Similarly, child welfare workers have not been educated in to understand chemical dependency and its impact on family functioning. Too often, they have not been trained to ask about or respond to substance abuse problems Therefore professional from both field should utilize a more collaborative approach. While programs differ in how they treat the chemical addiction itself, successful programs for women generally offer a wide variety of supportive services like transportation, job training and placement, primary medical care for the women and their children, education programs responding to arrested developmental need not attained, prenatal and ob/gyn services, child care, family planning, spousal and/or relationship issues, and legal assistance.

Similarly, adolescents require prevention and treatment that are comprehensive and developmentally appropriate. These include peer education and counseling, family therapy, recreational activities, mentoring, education programs and health counseling the demand for services is considerable. However, in the state of Illinois budget for 2013, the current governor is requesting trading of state dollars going to corrections (adults and youths facilities) for more funding for the Department of Children and Family Services.

Conclusion

This study examined factors that may contribute to the overrepresentation of African American children in foster care in the city of Chicago. Despite a substantive decrease in the number of children in foster care for the state of Illinois, African American children are considerably over-represented in the state's welfare system. First, community or neighborhood characteristics were considered in relation to the number African American children in foster care. Concentrated poverty while controlling for was an important determinant possibly due to societal bias associated with the lack of education and some condition of homelessness associated with extreme deprivation and second alcohol and drug abuse were addressed from the standpoint of contributing to foster care placement.

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