



## KHATIB WAHEED

## Close-up

*Khatib Waheed is a senior fellow at the Center for the Study of Social Policy (CSSP) in Washington, D.C. He joined the staff to head up the organization's new initiative to raise national awareness and concern about the overrepresentation of children of color in foster care and the inequitable treatment and outcomes that many of these children and their families experience. A leader in helping communities recognize the impact that structural racism has on children and families of color, he is working with the Annie E. Casey Foundation, Casey Family Programs, Casey Family Services, the Jim Casey Youth Opportunities Initiative and the Marguerite Casey Foundation to address racial and ethnic disproportionality and disparity in child welfare.*

**Voice:** *In plain terms, what is disproportionality?*

**WAHEED:** There are a couple ways that people are describing disproportionality. The most widely-used definition is to say that it's manifested by either an over- or under-representation of minority children in the foster care system when compared with the total numbers of these children in the population. It also refers to a situation where particular racial and ethnic groups, for example, African Americans, are represented in the system at a higher or lower rate compared with other racial and ethnic groups, such as Caucasians. I tend to think that both of these perspectives are strong and important to consider.

The issue is inequitable services provided to minority children: a disparity in treatment, experiences and services and even outcomes. It isn't just about numbers. It's about the quality of life for vulnerable children and families. Disproportionality calls our attention to larger issues associated with disparity.

**VOICE:** *So, in textbook terms, disproportionality is a mathematical formula comparing the entirety of a community with its counterpart in the child welfare system. What's the human equation?*

**WAHEED:** My interpretation of that question has to do with the individual and social costs associated with children, regardless of their color, entering the child welfare system unfairly. They often will experience multiple placements or enter adulthood without support and connections to a caring adult. One analysis done by Prevent Child Abuse America in 2001 talked about the immediate costs related to hospitalization (chronic and mental healthcare) and the long-term costs, such as special education, juvenile delinquency and loss of productivity. This analysis estimates that the nation loses roughly \$258 million a day and \$94 billion annually by inappropriately placing children in foster care.

**VOICE:** *Those numbers are staggering. What are the roots of disproportionality?*

**WAHEED:** In my mind, it is clearly not about finger pointing or blame. The root causes of disproportionality are very complex and interconnected. One way of explaining it might be to look at four signif-

icant factors that then break down into additional factors.

The first factor is external, which includes poverty and structural racism. It's not just poverty in terms of individual or family poverty, but it's poverty concentrated in racially segregated neighborhoods. What does that do in terms of limiting access to opportunity structures, such as decent housing, education and employment? Structural racism involves the policies, practices and racial stereotypes in public systems that tend to create, or even perpetuate, this disadvantage for children.

Social disorganization and safety are a second factor. By social disorganization, I'm thinking of the level of volunteerism in the community. Do the people in the community consider doing something extra to build the capacity to handle things in legal and appropriate ways? Social disorganization also speaks to the way or extent to which residents take responsibility for addressing crime and the level to which informal and formal support systems work together to meet the needs of children and families.



The third factor is internal, involving racial or cultural bias toward children of color on the part of mandated reporters and child welfare workers. There also are the challenges of retaining experienced staff and mitigating the tension of high stress, low salaries and a competitive job market in child welfare.

Last, but equally important, are those family-level factors that include inadequate parenting skills, poor conflict-management skills, drug use and other criminal enterprises.

*VOICE: How does community safety translate to the safety of a child within the home?*

*WAHEED:* In the community, an individual armed with the right filters can identify where there is cause for concern or risk about child maltreatment. For example, what should community residents do if they see school-age children unsupervised at certain hours? What is the range of possibilities explaining why children may be seen consistently at home rather than in school? The community's capacity to recognize that children are in places they should not be is important. The deeper part is that someone cares enough about the people down the street to notice, to do something about it. It doesn't mean that one's assumptions about these children are correct. It does mean that the community should have a capacity to recognize and channel its concerns appropriately.

*VOICE: If a racial group is overrepresented, such as African Americans, what are the implications for a black child in that system?*

*WAHEED:* The impact on the child's development and that family is severe. We can think about the loss of children and how it demoralizes a family; how it disrupts families and community networks; and how it reinforces existing stereotypes. For African Americans, toddlers with accidental injuries are five times more likely to be evaluated for abuse and three times more likely to be

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reported to child protective services. Caseworkers are more likely to substantiate allegations of neglect against African American and Latino families. The only variable that could explain the discrepancy is race.

Another example is when a newborn tests positive for prenatal cocaine exposure. An infant is 72 percent more likely to be removed from the mother if she is African American, according to a 1993 report published in the *American Journal of Public Health*. Court-appointed advocates spend less time with African American children

than with other children. The number of hours per month spent on a child are 2.67 and 4.3 respectively. These are discrepancies that clearly play out by race.

*VOICE: In that same system, what are the implications for a white child?*

*WAHEED:* Geographic isolation and poverty in rural areas contributes to an overall lack of access to needed services and disadvantages for many Caucasian children, I believe. Compounding the problem is a silence in many rural communities that leaves me to suspect that a lot of abuse and neglect go unreported. Many of these abuses go undetected until the children and youth in these rural communities either run away or end up in the juvenile justice system.

The overrepresentation of minorities is no better than the underrepresentation of Caucasian children. They both raise serious concerns about how the system works, where we place our values, and the roles between public and private sector systems.

*VOICE: Does the higher representation of minorities in the child welfare system reflect a perception that minority parents represent a greater threat for abusing or neglecting their children?*

*WAHEED:* The National Incidence Studies (NIS) is one of the few national surveys to provide an answer to that question, at least for African Americans. The surveys indicate that the highest rates of maltreatment were among families with low incomes, one parent, parents not in the labor force and large numbers of children. The assumption was, and still is, that since African Americans have higher levels of risk than Caucasians, it would be suspected that there would be

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higher rates of abuse and neglect, yet there was no significant evidence substantiating this in the NIS data.

*VOICE: Disproportionality has received more attention in recent years than it did in the past. Why do you think that is?*

*WAHEED:* The proportion of children of color in the child welfare system has been escalating since the end of World War II. Between 1945 and 1961, the numbers nearly doubled, from 14 percent to almost 27 percent. In the 1970s, black administrators of child welfare began raising their voices in concern about how certain practices and policies ultimately would lead to disproportionality. By the 1980s, not only did the total number of children in foster care increase, but also the number of African Americans, in particular, doubled. For many, it has been a consistent cause for concern.

I think that in the last five to seven years, there has been an increase in our comfort to talk about race and racism within institutions. Prior to that, we had to use words like culture to segue into a deeper conversation about race. In other words, our emotional quotient (EQ) is beginning to rise and catch up with our intellectual quotient about these issues.

*VOICE: You are part of a collaborative trying to achieve racial and ethnic equity for children and families. Is the group headed in the right direction to tackle this issue?*

*WAHEED:* You are referring to the Casey-CSSP Alliance on Racial Equity. I think we're definitely headed in the right direction. We've been meeting for nearly a year,

coming together initially to learn about each other's work on addressing disproportionality and disparity, and determining how we can work together to respond to these issues jointly. With the leadership within these foundations and organizations coming to the table already concerned about these issues, we were able to commit

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to the development of a business plan that would support the operation of a national campaign. We met in September 2004 to review the plan, and a compelling response from one of our key players was that the plan was both too comprehensive and yet not comprehensive enough. These words about our capacity as an alliance and the broader need for jurisdictions to address the complex needs and issues of vulnerable children and families have led us to revise the plan to identify possible opportunities for action in 2005.

*VOICE: What are the collaborative's goals?*

*WAHEED:* We hope to improve outcomes for children and families of color within targeted areas by significantly reducing racial

and ethnic disproportionality by 2015. I think it is a tremendous step in the right direction. It takes a lot for foundations and organizations even to get their arms around this issue, let alone allocate funding to address it and identify specific outcome measurements.

*VOICE: What can be done nationally?*

*WAHEED:* We can look at increasing awareness among lawmakers. I think we can look to the federal level to create accountability mechanisms, mandating that states compile, analyze and report disparity and their progress toward equity. We also should look at shifting funding and examining how it impacts practice. In my opinion, there is an imbalance between the Child Welfare Act and the Adoption and Safe Families Act, which currently places a greater emphasis on placement and adoption than on reunification and support.

*VOICE: What should we be doing on the local and grassroots level?*

*WAHEED:* There is this whole notion about public will. I think we need to develop a sharp communications message so we can mobilize our stakeholders and others. Second, we need to see that parents and youth of color are engaged in any efforts to reform child welfare and practice. In general, we need to strengthen the capacity of the child welfare workforce. We also should develop a sustained commitment to evaluate practices and policies. We can celebrate successes and eliminate or table efforts that aren't working. Data-driven decisions are important and should be made at the local level.