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DIFFERENT YEAR, DIFFERENT JURISDICTION, BUT THE SAME FINDINGS: REFORMING ISN'T ENOUGH

Kristin Weber & Bill Bettencourt*

For the last fifteen years, the Center for the Study of Social Policy (“CSSP”) partnered with local agencies to use an Institutional Analysis (“IA”), a method that identifies how local child welfare institutions are not working for families. We have particularly focused on the experiences of Black families. Through a comprehensive and varied qualitative data analyses, each IA strives to make the invisible and detrimental workings of systems more visible, that is, each IA reveals specific institutional features that contribute to poor outcomes for Black families. Findings from IAs have identified problematic policies, practices, protocols, resource distribution, and other features at the local, regional, state, and federal levels. From the twenty IAs conducted to date, we have substantial evidence of the insidious, pervasive, and mutating structural and institutional racism ingrained in child welfare systems. While the IAs have unique findings in each jurisdiction, there are also common findings, including: lack of meaningful and reasonable efforts to keep families together; policies that undermine existing networks of Black families; lack of due process and poor advocacy for Black families; inaccessible, inappropriate, and ineffective resources offered to families; coercive and punitive interventions; hyper surveillance of Black families; workforce fear of Black families, particularly Black fathers; and ineffective mechanisms of accountability that result in blaming families for the failures of workers, providers, and larger societal ills (lack of housing, lack of livable wages, etc.). This Piece presents evidence compiled over the years which leads us to conclude that reforms within the current system will only go so far and that radical investment in community supports and anti-poverty efforts are necessary.

* Kristen Weber wrote this Piece while a Senior Fellow at the Center for the Study of Social Policy; she is now a Senior Director of Child Welfare at the National Center for Youth Law. Bill Bettencourt is a Senior Advisor to the upEND movement housed at the University of Houston Graduate College of Social Work. We thank Dr. Ellen Pence with whom we adapted the IA to examine the child welfare system and conducted many IAs. Although she died in 2012, her work and thinking continues to influence us. We also thank Sarah Morrison, a close colleague and thought partner on the IA and the use of more equitable research methodologies. Sarah provided a thorough review and insightful comments on this Piece. This Piece represents the viewpoint of the authors and does not reflect the view point of any institutional entity.

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I. INTRODUCTION

Black parents described a fragmented and unsupportive child welfare system response. They described a response that didn't recognize their bonds to their children nor attend to their trauma, grief, and loss of being separated from their children. Parents missed major milestones in their children's lives as they described missing their child's first solid feeding, first Christmas, first time their child crawled, first day of school, and first tooth being lost. Black parents described frustrations with minimal visits with their children and that their very young children did not recognize them or feel comfortable with them at visits or after reunification. Parents described a lack of meaningful resources like childcare and housing and demands that were onerous such as prolonged drug testing or finding a job with a livable wage and "appropriate" working hours. Further, many of the supports available to parents when they have their child with them are lost when children enter placement, such as Medicaid, housing, and childcare. Finally, there are different concepts of what is a service and what is a helpful service. For example, child welfare workers and court personnel described urine analyses (UAs) as a "service" or "treatment," but it is neither.¹

Child welfare leaders, foundations, advocates and others have frequently asked us to examine different child welfare systems for problematic policies and practices.² This type of request assumes that if those two features are corrected and the child welfare workforce retrained, racial inequities can be eliminated. We are also frequently asked for "best" or "promising" or "evidence-based" practices that will eliminate racial disparities. The underlying and unstated assumption in this type of request is that it is possible to correct for racial disparities if only these public systems had the correct tools or policies or trainings. That is, the assumption is the child welfare system can be reformed within their current structures without the big shifts required to remedy the underlying

¹ Institutional Analysis Report, 2020. This institutional analysis was conducted in a county in a Midwest state and examined low and slow reunification rates for Black families. The analysis has yet to be publicly released as workgroups are using findings to develop new interventions and determine how to report all efforts publicly. Throughout this Piece, we identify the region or state of each jurisdiction and the year of the Institutional Analysis, but not all have been published. The full list of reports is listed in the attached Appendix. Throughout this Piece we work to keep the anonymity of the specific county, while relaying the diversity of places at the end; see App. at A; see also *Institutional Analysis: Unearthing Institutional Racism and Other Biases*, CTR. FOR THE STUDY OF SOC. POLY, <https://cssp.org/our-work/project/institutional-analysis/#featured-resources> [perma.cc/M5K2-YGT4] (last visited Feb. 3, 2022) [hereinafter *IA: Unearthing Institutional Racism*], for the IA reports that are publicly available.

² For the purposes of this Piece, we use the term "child welfare system," as that was the term used in the course of the Institutional Analyses we conducted. This term includes the child protection agency, courts, and community providers. However, the term "child welfare system" is deeply problematic in that it misrepresents the actual experience of children and families involved in these systems. Because of the experiences of surveillance, monitoring, punishment, and removal, we assert a more accurate term is the family policing system.

impact of systemic racism on these institutions and families themselves. Ultimately, from our many years of examining different child welfare systems, we conclude that reforming is not enough. Despite earnest efforts, we observe modest improvements at best, and fleeting reforms, or retrenchment at worst.

At the Center for the Study of Social Policy (“CSSP”), we use an Institutional Analysis (“IA”) to understand the everyday experiences of a group of people and how the child welfare system is designed (or not designed) to meet their needs and support them in healing and thriving. Findings from IAs have been used to spur communities and child welfare leaders to corrective actions for stronger policies and practices. This methodology helps jurisdictions gain an in-depth knowledge of systemic causes of inequities and identifies improvements. The IA review team collaborates with older youth, parents and caregivers, and community members to advise the process and interpret findings. We primarily have used IAs to understand the experiences of Black children, youth, and families and more recently Latinx youth and youth who identify as LGBTQ+. Findings from past IAs have documented policies, practices, and other ways in which the child welfare system undermined healing and sustaining connections to family for children and youth; created incredible hurdles to learning and building social connections to peers and caring adults; infantilized youth in some circumstances and placed incredible adult responsibilities on youth in others; and harshly punished youth when they make mistakes typical of their age (e.g., broken curfew, experimentation with drugs or alcohol, physical altercations with other youth). Other findings point to larger community inequities—such as unsafe housing options; inadequate transportation infrastructure; intense levels of surveillance of Black and Latinx youth and treating them prematurely as adults; lack of coordination among or complete absence of accessible services and supports focused on youth, particularly Black and Latinx youth and LGBTQ+ youth.³

This Piece describes our common findings to date, with a specific focus on experiences of Black families. Years of qualitative research show that family experiences have not changed substantially despite efforts at innovation. We continue to see the same media reporting of extreme instances of neglect, abuse, and child deaths both in cases known and unknown to the state. We have yet to find a jurisdiction that has been able to sustain meaningful improvements in quality of life and outcomes for children, youth, and families. We have reached the conclusion from these findings that reform efforts do not address the core reasons for inequities and perpetuates a system that is harming Black children and youth, families, and communities. We must embrace a vision of abolition where we imagine new and meaningful ways of support for children and families, so that children are safer, and families receive support and healing.

³ The IA is conducted at the invitation of or with the consent of a jurisdiction. To date, we have not conducted the IA in Indian country nor with an explicit focus on Native youth. However, we know that Native youth experience the highest rates of disproportionality in the child welfare system and experience disparate, if not worse, outcomes in permanency and well-being.

II. FINDING, ADAPTING, AND USING THE IA

A. Searching for the Right Methodology.

In the early 2000s, child welfare systems did not regularly or methodically collect data by race and ethnicity (with many jurisdictions even to this day unable to report accurately the race and ethnicity of a child).⁴ In response to the growing anecdotal awareness of the disproportionate numbers of Black children and families impacted by child welfare intervention and inequities in their experiences and outcomes, CSSP sought ways to make a difference. As part of the Alliance for Racial Equity in Child Welfare, CSSP provided technical assistance to child welfare systems across the country and worked with many jurisdictions to collect quantitative data—to get a baseline count of Black children and families impacted by child welfare involvement and determine rates of disproportionality.⁵ CSSP also wanted to understand qualitative data—to understand how Black children, youth, and families experienced the placements and services of the child welfare system and what might be the causes of the inequities they experienced. In looking for a suitable qualitative methodology, CSSP staff encountered Dr. Ellen Pence of Praxis International, Inc. Dr. Pence studied institutional ethnography under Dr. Dorothy Smith of the University of Toronto and applied Dr. Smith's theoretical work in the field of domestic violence producing what Dr. Pence called the Safety and Accountability Audit, a tool that documented the experiences of survivors of domestic violence and analyzed how institutions directed workers to support survivors and hold those using violence accountable.⁶ Under Dr. Pence, CSSP staff learned the Audit's methodology, and later worked with Dr. Pence to adapt the Safety and Accountability Audit to examine and document the experiences of Black families involved with the child welfare system and how the child welfare system directed workers to intervene and support Black families. Child welfare system leaders and partners balked at the use of the term “audit” and, with CSSP and Dr. Pence, identified a more palatable and banal descriptor, the Institutional Analysis.

Now, some fifteen years later, CSSP has conducted twenty Institutional Analyses of both child welfare and juvenile justice systems across the United States and produced both public and client-only reports.⁷

⁴ See ALI JAWETZ ET AL., OUR IDENTITIES, OURSELVES: AN ANTI-RACIST REVIEW ON COLLECTING ACCURATE DATA ON RACE AND ETHNICITY 10-11 (2021) (calling for child protection systems to prioritize self-identification and self-reporting).

⁵ See Dennette Derezotes et al., *Evaluating Multisystemic Efforts to Impact Disproportionality Through Key Decision Points*, 87 CHILD WELFARE 241, 248-53 (2008) (working in four communities, CSSP developed a Racial Equity Scorecard for measuring disproportionality at key decision points in the child welfare system).

⁶ See Ellen Pence & Martha McMahon, *Working from Inside and Outside Institutions: How Safety Audits Can Help Courts' Decision Making Around Domestic Violence and Child Maltreatment*, 54 JUV. & FAM. CT. J. 133 (2003) (provides a detailed overview of the Safety and Accountability Audit, describes how it has been used in the field, and discusses how the courts can incorporate safety audit findings into decision-making around domestic violence and child maltreatment)

⁷ See IA: *Unearthing Institutional Racism*, *supra* note 1. Because much of the data we rely on is based on client-specific reports, we do not specify the name and county of the report but rather list all studies relied on in the Appendix.

B. The Methodology

The IA is designed to understand how features of institutions shape the help that families receive from workers and organizations. This methodology makes the invisible ways that systems operate visible and identifies practical strategies that can be employed to improve how systems function to help families. The methodology moves beyond a focus on individual staff performance and rejects the notion that solutions lie solely on improved policies or training to improve practice. Rather, the IA identifies systemic changes—big and small—that the child welfare system and its partners can make. The IA examines specific organizational features such as mission statements; job descriptions; mechanisms of accountability; hiring and promotion practices; ways that information is gathered about people and how that information is used and shared among system actors; concepts and theories that underlie policies and practices; forms and tools used; resources and supports for workers; and professional development opportunities for the workforce.⁸

We ground the IA in the viewpoint of family members—children, parents, and other primary caregivers. The data collection and analysis used in the IA reveals the experience of individuals as they encounter institutions and provides an understanding of how the institutions are currently organizing the workforce to act in certain ways. The IA identifies how the child welfare system contributes to or exacerbates positive or negative outcomes for family members. The focus of the IA is on the policies and practices implemented by institutions and the consequences for families, not on the behaviors of individuals such as judges, police, or social workers. With this focus, the IA process can also reveal how efforts at reform impact experiences of children, youth, and families and identify reasons why well-meaning changes result in little, if any, positive change in the actual experiences of families. The IA identifies the organizational and systemic challenges impacting this lack of change and produces recommendations for improvement.

The IA is not about confirming preexisting theories but relies on ethnographic methods to understand how the child welfare system functions and shapes the thinking and actions of frontline workers. Reviewers interview key child welfare leaders and community partners early in an IA to describe the larger context in which the child welfare system functions. IA reviewers map the decision points in a case and the policies and practices that govern each decision point. This map helps determine whom to interview, what processes to observe, what case files to review, and what forms to analyze. The IA reviewers interview frontline workers and other informants and assume a learning role, asking structured, open-ended questions that inform the reviewer as if they would have to do their job tomorrow. Reviewers with no child welfare knowledge are highly valued in this type of data collection as they frequently are

⁸ See generally Kristen Weber & Sarah Morrison, *The Institutional Analysis: A Tool for Diagnosing Structural Contributors to Racial Disproportionality and Disparity in Child Welfare*, 11 CHILD MALTREATMENT: CONTEMP. ISSUES IN RSCH. & POL'Y 375 (2021) (provides an overview and an in-depth description of the IA framework, methodology, general findings and application).

better at asking for clarifications and do not make assumptions about case processes. Review teams collectively debrief emerging themes from the variety of data collected, code data, verify information with child welfare leadership and community members, and rely on multiple data sources to determine a finding.⁹ The IA ultimately provides insight and findings based on the combination of interviews, focus groups, observations, policy and protocol reviews, and case record reviews.

Like other qualitative methodologies, the IA has limitations. For instance, the IA does not examine the entire operations of the child welfare system, focuses a select number of cases and families, and may not have the opportunity to observe more recent reform efforts that have not had time to take hold in a child welfare system.

C. Using the IA in Different Jurisdictions

We have led IAs that examine various aspects of child welfare practice. We have looked at both state and county administered child welfare systems. We have examined large counties, like Los Angeles, and smaller counties, like Cedar Rapids, Iowa. We have looked at systems that have significant funding support, such as Santa Clara County, California and others that receive the minimal county dollars required as a match for federal funds, such as Fresno County, California. We have also examined jurisdictions identified as “model” child welfare systems, such as Allegheny County, Pennsylvania. In some jurisdictions, CSSP and trained partners conducted the data collection, analysis, and reporting. In other jurisdictions, we trained local community and child welfare stakeholder teams on the IA methodology, and they assisted with data collection. All the systems in which we have worked were grappling with varying rates of racial and ethnic disproportionality and disparities, regardless if that was the focus of inquiry.

We frame our focus of inquiry by asking *how* something comes about to better focus on systemic explanations. We work with community members, as well as system leaders, to determine the focus of inquiry with questions that are meaningful and accessible to communities. Examples of past inquiries include:¹⁰

- How does it come about that, after substantiation of child neglect, Black children are more likely to be removed from their homes?
- How does it come about that Black families experience slow and low reunification rates? (*the most frequent IA inquiry*)
- How are Black children who are separated from their families supported in their need for stability and nurturance?
- In cases of domestic violence, how is the (survivor) parent and child bond supported by intervening systems? How is the person using violence held accountable and the survivors helped to be safer?

⁹ *Id.* at 387–388.

¹⁰ See *IA: Unearthing Institutional Racism*, *supra* note 1.

- How does it come about that Black youth spend longer periods of time in out-of-home care than their White peers? How is their well-being supported while in care?
- How are LGBTQ+ and gender expansive youth supported and affirmed by child welfare interventions?
- How are undocumented Latinx families supported by child welfare interventions?

Despite the variety of questions examined, the different child welfare jurisdictions from which data were collected, and the different configurations of the IA review teams, we documented overwhelmingly consistent experiences of families involved with child welfare systems and consistent challenges in the system's response to families. While there are indeed examples of children, youth, and families who do describe getting help, on a systemic level, we overwhelmingly documented families reporting stressful and defeating experiences shaped by oppression, coercion, lack of meaningful help, lack of empathy, and lack of support for trauma and healing.

III. THE COMMON THEMES ACROSS DIFFERENT JURISDICTIONS FROM 2005–2020

IAs identify unique findings in each jurisdiction. These unique findings usually are about the array of contracted services available and accessible for a community; the role and functionality of private agencies; state or local interpretations of policy; the presence and priority of local initiatives; local practices around removals (using the police or not); and local language used to talk about children, youth, and families. While we have noted some local variation, we find consistency in family experiences and in system capacity across jurisdictions and across time.

These findings point to the larger structural flaws of how the child welfare systems have evolved over time with a variety of legislative efforts, mandates, and funding changes. These change efforts and modifications are building on a system rooted in our problematic racist history and so our public systems' limitations continue today. We discuss these unwavering findings below.

A. Racism Exists and Shapes the Child Welfare System.

It is well documented that racial disproportionality and racial disparities exist in child welfare systems across the country. Nationally, Black, and Native children are overrepresented in the child welfare system. Most recent federal data show that of the 423,997 in foster care in 2019, 2% of these children and youth were American Indian/Alaska Native and 23% were Black as compared to one percent and 14%, respectively, of the general population.¹¹ In addition, there are racial disparities in experiences and outcomes.¹² We work with child welfare leaders and communities to

¹¹ CHILD. BUREAU, U.S. DEP'T OF HEALTH & HUM. SERVS., AFCARS REPORT 1 (2020), <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport27.pdf> [perma.cc/43PL-ZTVF].

¹² See Alan J. Dettlaff & Reiko Boyd, *Racial Disproportionality and Disparities in The Child Welfare System: Why Do They Exist and What Can Be Done to Address Them?*,

understand the problematic history of child welfare intervention and the societal contributors to these data.¹³ The majority of IAs we led focused on Black families, but even in the IAs that have not exclusively focused on Black families, we consistently documented implicit and explicit bias, discrimination, and the detrimental impact of “race-neutral” policies and practices on Black families.

We consistently found that pervasive and troubling concepts of Black families existed among the child welfare workforce and other service providers and that these concepts shaped interactions with families, placement decisions, and case plans. We documented examples of how unchecked, negative stereotypes of Black families impacted policy and practices. For example, multiple IAs found through case files reviews and interviews that workers described Black fathers as uninterested in their children, not to be trusted, angry, and unable to parent—or Black fathers were completely invisible to workers and in their documentation. Yet evidence in case records reviews and interviews with Black fathers revealed their efforts to locate their children, to adapt their voices and physical presence to appear nonthreatening to case workers, and to participate in case plans even though the services offered were not helpful. Below are examples of what we repeatedly found and while, in many cases, they are from an individual worker, they ultimately indict the system as a whole. Specifically, the lack of meaningful and robust accountability mechanisms allows for workers to act in idiosyncratic ways that harm Black families.

- In two different IAs, Black fathers were told the only way they could prove they were earnestly interested in reunification, and not seeking reunification to benefit financially from their child’s public assistance, was by using their own money to purchase a car seat for their children.¹⁴ In one of these cases, the foster parent was instructed not to provide the father with her extra car seat.¹⁵
- A probation officer did not work to connect Black fathers to parenting classes because he felt they are not interested in raising their kids—“it’s cultural.”¹⁶ A caseworker, whose job was to support reunification with the whole family, expressed hesitation in engaging fathers stating “[the] number one thing about African American fathers—fathers are not around.”¹⁷
- Case files lack details about Black fathers. The contact information and names are consistently not listed on facesheets [facesheets in this jurisdiction listed all relevant parties to the child welfare case

ANNALS AMERICAN ACAD. OF POL. AND SOC. SCI. 253, 254 (2021), for a summary of research on racial disproportionality and disparities in the child welfare system.

¹³ The current child welfare system is built on a long history of separating children from their parents, with deep roots in anti-Blackness, anti-Indigeneity, and forced assimilation. The forced separation of children from parents has roots in slavery, Indian Boarding schools, and Orphan trains and that ideology of separation as an acceptable form of intervention continues today in the design of child welfare systems.

¹⁴ See App. at B; App. at C.

¹⁵ See App. at B; App. at C.

¹⁶ See App. at D.

¹⁷ See App. at A.

including mother, father, relatives, attorneys, caseworkers, judges]. A father interviewed states “you guys did not come looking for me.”¹⁸

- Extra bailiffs were routinely called into court hearings when Black fathers were present.¹⁹
- One administrator noted that “dads who are Black and coming out of prison, my workers weren’t sure about visiting them. I am not sure what the reluctance is about, maybe not having knowledge or experience to work with dads, or their own bias.”²⁰

The IAs also found other dangerous and pervasive concepts of Black families included viewing mothers as pathological and Black children and youth as not attached to their parents or siblings, as “psychotic,” and in need of better opportunities away from their families and communities. Labels of “hostile,” “aggressive,” and “noncompliant” were attached to Black parents with insufficient or no evidence. Moreover, as one IA found, “the system’s policies and practices do not direct workers to contextualize parental behavior, specifically their expressions of anger at the removal of their children.”²¹ We also found in each jurisdiction, a number of frontline workers, child welfare administrators, and community providers act on an unchecked belief that Black families and communities were not capable of caring for their children. While these concepts and beliefs are troubling, they could be minimized with stronger mechanisms of accountability to families and communities, yet we found minimal to no existence of such mechanisms.

In nearly all jurisdictions we examined, workers received training related to cultural bias and/or cultural humility. We found that training alone is not enough as some workers still lacked awareness of racial inequities in their institutions or did not view racial inequities as problematic. Some workers proudly proclaimed, “I don’t see race” or “I am color blind.” Implications of this colorblindness meant that workers could not appreciate the strengths of Black families, understand family connections, and how Black families care for one another. This colorblindness also pushed workers to value foster parents with resources over Black families of origin with limited or no resources:

Child welfare workers and legal professionals expressed that the removal of African American children from their families and their placement with white and more affluent suburban families was “an understandable bias” because of the increased opportunities provided for arts, sports, and access to higher quality educational experiences. This colorblindness resulted in workers negatively interpreting the interaction of Black parents spending time during supervised visits doing their children’s hair, rather than

¹⁸ *Id.*

¹⁹ *See App. at D.*

²⁰ *See App. at E.*

²¹ *See App. at C.*

viewing this as a time of bonding and also efforts of a parent to keep their child safe and accepted at school.²²

While workers recognized the hardships of poverty on families, most workers could not talk about the intersection of poverty and systemic racism that impacted families' ability to have jobs, affordable and healthy housing, and quality schools. Yet in nearly every jurisdiction, Black families or the communities where they live have code names like "the West side", "the Crescent", or "Urban Immigrants" to name a few.²³ And in some instances, families from these communities "are assumed to all experience problems associated with poverty and drug addiction".²⁴ This phenomenon was observed in a California IA:

Many families living in [California neighborhood] face significant challenges as a result of larger disinvestment in their community—many struggle to find adequate housing and jobs, healthy and affordable food, safe and academically challenging schools, and clean, secure parks and neighborhoods. In addition to the larger infrastructure issues faced by many in [the neighborhood], interviewees reported that [this neighborhood] has poor services, particularly prevention services. The overwhelming needs in [this neighborhood] and, in particular the community served by the [local] office, leaves advocates to regularly ask, "[w]hy wouldn't you want to put [the] best services and highest level of resources in the poorest community?"²⁵

Although we saw a range of efforts at training with the purpose of remedying these different forms of racism, no system was in place to assess if the training resulted in improved skill, and the minimal follow up coaching to apply what was taught was insufficient. In addition, we observed weak systems of accountability, resistance among the workforce, and resistance among national researchers and practitioners. Weak accountability and limited work with communities to understand both the history of race and racism and how communities function allows racism to bleed throughout the system, impacting all other identities of children and parents who are stigmatized and marginalized by policies, practices, and those in power. The result is that many Black families fear the child welfare system because the system is known for "white people taking black children."²⁶

B. Fundamentally, Families Are Not Getting the Support They Need From the Child Welfare System.

Families who come to the attention of the child welfare system largely receive similar case plans with mandated timelines to meet requirements. When children are removed from their families, these plans

²² See App. at B.

²³ See App. at F; App. at B; App. at C.

²⁴ See App. at B.

²⁵ CTR. FOR THE STUDY OF SOC. POL'Y, *Child Welfare Practice: Creating a Successful Climate for Change 7* (2012), https://cssp.org/wp-content/uploads/2021/02/Child-Welfare-Practice_Creating-a-Successful-Climate-for-Change.pdf [perma.cc/N9RS-BVCZ].

²⁶ See App. at E.

are legally required. Jurisdictions create plans in several different ways, sometimes involving family members through a family group conferencing model and sometimes through an individual discussion with a worker. Case plans largely result in the same sets of “services”: supervised visitation, drug testing and treatment, individual therapy for parents and children, family therapy with older children, anger management, and parenting classes. Parents are also usually required to obtain on their own a legal job, safe and appropriate housing, and childcare. Yet, affordable, healthy housing options and affordable, high-quality childcare are difficult to find. Many parents also struggle to obtain legal work that pays a livable wage. Parents who are employed struggle to keep their jobs because of the “services” that they are required to complete conflict with work hours. As one father noted: “They [child welfare system] don’t care about if you have a job.”²⁷ In the IAs, we documented parents asking for concrete help—money, housing, food. Parents also talked about needing help, not necessarily from the child welfare system, but from more informal support sources, like church connections, new/different friends, or by making amends to their extended family. Unfortunately, the help they are asking for is not what child welfare system is set up to deliver. The child welfare system fundamentally is not designed by policy and practice to ensure families have what they need to survive and heal. Accountability for how the child welfare system functions and the outcomes it produces focus on ensuring timelines are met, case plans are made, and other more process-based requirements, not on guaranteeing families quickly have stable, healthy, and safe housing, access to quality childcare, or receive meaningful, affordable, and culturally appropriate support.

1. Communities act on an assumption that child welfare agencies can get families help.

For example, in multiple jurisdictions, parents needed help managing their child’s mental health and aggressive and dangerous behaviors. In many instances, Black parents were not aware of, nor connected to, prevention or early intervention services. Black parents felt their best option was to call the police for help in managing their child. The police in turn either removed the child themselves or called the child protection agency to remove and place the child. Unfortunately, rather than be helpful, we found that such removals compounded issues, making the road to reunification much more complicated. In some cases, children and youth with complex mental or behavioral health needs spent long periods of time in highly specialized and expensive congregate care settings. These settings were far away from family and visits with family were predicated on the “good” behavior of the youth. In other cases reviewed, there was evidence that the parents and youth were connected and cared for one another but needed support to stay together and work through issues related to sexual orientation or gender identity and expression.²⁸ However, these families did not receive adequate support, and most did not stay intact.

²⁷ *Id.*

²⁸ *See* App. at G.

Hospital and school social workers, who are mandated reporters but also trained to provide support to families, state that they make reports to the child welfare system to “just check on children” or because they believe the child welfare system has the services and support that families need, like help with buying a bed or a washing machine.²⁹ Yet case record reviews and interviews with parents show that while some families do get this concrete help, others do not. The consequence is that “help” comes with fear of children being removed, and excessive case plan requirements add a burden that negatively impacts parents’ ability to function day to day.

2. Family relationships are undermined rather than supported.

When child welfare investigators determine a child must be removed from their home, they replace one or two parents for another one or two caregivers. This way of viewing families undermines any communal support that many Black families rely upon. For example, in a 2010 California county IA, a Black mother with significant mental health challenges lived near multiple family members. These family members had a system of intervening and helping the mother get mental health support, like ensuring she worked with providers to adjust her medication when needed. Different relatives provided different forms of support including helping the children get to various activities, providing after school childcare, and providing extended respite when the mother needed it. This was their practice for many years. However, in one incident where the mother’s mental health caused her behaviors to become erratic, the police intervened before the family could. The police contacted child welfare and the responding caseworker removed the children. The child protection system dictated to the worker through policies and protocols to place the children with one of the relatives and required background checks and permission for overnights at all other relatives’ homes. This unduly burdened the relative caregiver and undermined a working family system as not all relatives could pass the criminal background check.³⁰

Many youths are a part of extended families where members have criminal histories. These convictions can range from misdemeanor property crimes to violent offenses and may be recent or from the distant past. The review found little guidance to workers on how to assess these histories in the context of a child’s need for safety and relationship. Most youth were interested in having relationships with these family members, but these policies act to control contact rather than assist in developing safe, caring relationships. The IAs found that requiring criminal background checks and clearing family members were blanket requirements, with no nuance to assess for the age of the child, the bond of their relationship with the relative, or circumstances such as being able to attend family gatherings, funerals, or graduations. The IAs documented many examples of youth leaving their foster home placements without permission to visit their family members.

Finally, parent-child visits do not happen frequently enough. When a child is removed, the default position is to have supervised visitation. In

²⁹ See App. at A.

³⁰ See App. at F.

many jurisdictions, visitation happens in a center office of the department during business hours, impacting work and school schedules. Visits are time-limited, slots are hard to secure, and visits are canceled if a parent is late. In one jurisdiction, parents had to enter and exit the visitation center through designated door at the back of the building.³¹ Guidance from different national experts pushes for frequent, extended, homelike visits, especially for parents with young children. Yet we saw infrequent examples of following that guidance. Parents expressed grief at missing milestones in their children's lives, including a child's first tooth, first step, first day of school, Christmas holidays, and family reunions. Further, for youth that were able to be placed with kin, the system impacted family relationships by placing relative caregivers in a surveillance role and directing them to limit and monitor visits, and report back on how the children interact with parents and fare during and after visits.

Progressing from supervised to unsupervised visits largely depends on the individual worker assessment of how the parent is doing in meeting their case plan goals and the court's approval but appears inconsistent across the system. For example, in one case a mother was still under a supervised visit order, receiving two one-hour supervised visits per week, but plans were in place to return her child home imminently.³² By comparison, another mother whose infant suffered life threatening abuse was allowed to see her infant daily with oversight provided by a relative. In this case, there were no plans to return the infant home in the near future.³³

3. "Reasonable efforts" to keep families together/quickly reunify families is a legal construct that is not consistently used or meaningfully defined.

In accordance with federal law, child welfare agencies are required to make "reasonable efforts" to prevent the removal of children from their home and if they are removed, to provide services to reunify them with their families. IAs found the "reasonable efforts" standard to be questionably implemented, with Black families frequently left to fend for themselves to get their children back.

Parents described receiving a resource packet of approved services but then struggling to access and pay for these services.³⁴ As one social worker described, "it is a waiting game for parents"—as the affordable

³¹ See App. at B ("In the new visitation center, the entrance for the custodial family (foster parents and/or residential agency staff) and children has a comfortable waiting room with artwork, books, toys, a computer terminal and a fireplace, while the birth parents are asked to enter through an unwelcoming and sterile entrance on the opposite side of the building. The waiting room for the birth parents has a TV monitor hanging from the ceiling and rows of chairs for waiting. Parents are escorted upstairs by a visitation center staff member, where they prepare for their supervised visit with their children. This reportedly occurs because of the location of a pediatric clinic in the same building, and concerns about having all of the various parents and caregivers entering through the same space. The rationale for this policy and practice, however, is not fully understood, and appears to have a negative impact on the experiences of birth parents involved with the department, as well as professionals familiar with the practice").

³² *Id.*

³³ *Id.*

³⁴ CTR. FOR THE STUDY OF SOC. POL'Y, *supra* note 25, at 6.

services often have a waitlist.³⁵ The role of [the social worker] in helping families connect to services and follow up with services is unclear. In some instances, [social workers] advocated for parents to access particular substance abuse or housing programs. In other instances, no one supported the parent in finding accessible and appropriate services. A court officer expressed that “[m]any social workers think their responsibility is just to give the referrals to the family, that this is a reasonable effort. Social Workers are responsible for the follow-up too. A lot of social workers don’t think this is part of their job”.³⁶ The failure of a parent to access services is viewed as the parent’s individual failure rather than a larger failure of the child welfare system and its partners to ensure that services are available, accessible, and affordable.

In a Great Lakes IA from 2009, a similar phenomenon was observed:

Some judicial officers assume that holding the TDM [team decision making] meeting is evidence that *reasonable efforts* were made to prevent the removal of children. Judicial officers described reading the TDM meeting reports to ensure that efforts were made. However, TDM meetings in and of themselves do not necessarily constitute reasonable efforts. This is a misinterpretation of policy and practice. In fact, many parents chose not to attend TDM meetings because they were uncertain of the purpose of the meeting and intentions of the CPS workers³⁷

While many courts used checklists to determine whether reasonable efforts were made, judicial officers frequently reported that they worried the child welfare system could be financially penalized by the federal government if they made a finding of no reasonable efforts.³⁸

4. Consistent, quality legal representation is not available to parents.

Each IA found that attorneys who represent parents or children have very high caseloads, and in some jurisdictions, as high as 300 cases per attorney. Parents and youth consistently reported quick interactions with their attorneys, and many reported not knowing the name of their attorneys.

- Parents are routinely told to plead and accept case plans as the quickest way to get children back home and end system involvement. “Lawyers who represent children have extraordinarily high caseloads and frankly admit that they must triage cases. Cases where youth had behavioral problems and were not faring well in school got more attention than youth who seemed to be doing well in their current living situation.”³⁹

³⁵ See App. at H.

³⁶ *Id.*

³⁷ See App. at I.

³⁸ See App. at E; App. at I.

³⁹ See App. at F.

- Families and children are represented in Family Court by organizations that willingly serve indigent clients. However, these organizations are often staffed by the most inexperienced attorneys and have frequent turnover as attorneys move on to different opportunities after gaining experience in Family Court. Too often, it appears that attorneys for children and parents are perceived to be interchangeable, and consistent and skilled representation is not valued.⁴⁰
 - “In speaking with Judges, it was clear that they are aware of the limited interactions attorneys have with their clients, but they feel that due to limited resources (i.e., attorneys are paid so poorly and had high case loads), that there is little if anything they can do to hold attorneys accountable to quality representation of parents and youth coming into the system. A focus group with youth . . . (some of whom had a history of child welfare involvement) revealed that most did not know the name or contact information of their guardians ad litem.”⁴¹
5. Parents experience interventions as coercive and feel a lack of clarity about when their case will be closed.

Each IA spends considerable time interviewing parents. The IA reviews then examine how policies and practices shape the interactions of workers with parents and the overall experience of parents. While many workers described wanting to help families, they also recognized the constraints of the system and the punitive nature of the interventions offered. For example, it was the practice in one jurisdiction to file termination of parental rights (“TPR”) petitions to “motivate” parents even though workers were still planning family reunification.⁴²

Other interventions, which were originally designed to engage families in planning and/or decisions about their lives, were implemented in ways that did not honor family networks and perpetuated the system’s control and power over the family. Specifically, we found family group conferencing or team decision making meetings to be more like pre-trial conferences, with the focus of the meetings on fact-finding and negotiation of placement, rather than engaging families, identifying strengths and needs, and collaborating on case planning decisions.⁴³

Finally, the end of a case is not clear to parents. According to providers, caseworkers and other records, a Black mother’s children were safely in her care for an entire year, yet service providers continued to conduct unannounced safety checks three to four times a week. As the mother’s attorney indicated, it is nearly impossible for clients to “prove they are not doing something”.⁴⁴

As we have detailed, there are many reasons that families are not getting the help they need. We listed the prominent ones above, but there

⁴⁰ See App. at B.

⁴¹ See App. at I.

⁴² See App. at J.

⁴³ See App. at C; App. at A.

⁴⁴ See App. at B.

are more. Ultimately, this simple statement from a 2009 IA in a Michigan county remains true: “this Review found little evidence of monitoring for the *quality* and the *cultural relevance* of the services provided”.⁴⁵

C. The Child Welfare System is Designed in Ways that Cannot Adequately and Consistently Help Families, Particularly Black Families.

1. Child welfare caseloads are persistently much higher than experts in the field recommend.

The child welfare field recommends that caseloads are manageable for workers in order to ensure ethical and best practices and reduce worker burnout and turnover (although there is not uniform agreement on caseloads or workloads for workers).⁴⁶ Special units and other targeted efforts periodically and temporarily reduce caseloads and workloads, but these efforts are usually time limited interventions only. Most recently, in the 2020 Midwest county IA, one worker said she had thirty-five cases, “which is just insane . . . there were supposed to be at 20. . . Like you just can’t. And so, I think things slipped through the cracks because-I mean, that’s a lot to put on one person.”⁴⁷ Another worker stated “Like right now, I have 65 cases, 65 families, and so it’s difficult to contact all of them once a month. And I think it’s difficult for [parents] to kind of know who I am too.”⁴⁸ High caseloads impede workers ability to investigate cases, work thoughtfully and collaborate with the family.

Further, workers report stress from the workload of child welfare. The workload involves managing the data collected from families and providers, keeping up with client visits, completing case plans and assessments, and writing court reports. Of these tasks, workers consistently noted concerns with documentation in computer systems. In almost every IA, they reported needing to record information several times and in multiple places and completing multiple assessments as part of opening and closing cases. Many of these tools are supposed to help workers in making decisions, like Structured Decision Making tools, yet workers reported limited utility of these assessments in informing their decision making. In other words, workers viewed the tools as busy-work, but not helpful in guiding their decision making.

2. Child welfare is a compliance-based system.

Caseworkers, providers, parents, and youths are judged by their compliance with tasks and case plans. For workers, compliance with processes and practices comes out of a fear of liability, with the question “what if something bad happens to a child” running through their mind. Workers report no time and no reward for good clinical work with families, let alone meeting the minimal compliance requirements. In order to assess

⁴⁵ See App. at I.

⁴⁶ See generally *Caseload & Workload*, CHILD WELFARE LEAGUE OF AM., <https://www.cwla.org/our-work/practice-excellence-center/workforce-2/caseload-workload/> [perma.cc/E4EQ-CHUK] (last visited June 30, 2022); see also NAT’L ASS’N OF SOCIAL WORK, NASW STANDARDS FOR SOCIAL WORK PRACTICE IN CHILD WELFARE (2013), https://www.socialworkers.org/LinkClick.aspx?fileticket=_FIu_UDcEac%3D&portalid=0 [perma.cc/7HJ3-FVX9].

⁴⁷ See App. at A.

⁴⁸ *Id.*

for compliance, families must constantly produce documentation and report in on their progress towards case goals with visits.

3. The child welfare system has inadequate mechanisms of accountability to families and communities.

As noted earlier, the child welfare system has weak mechanisms of accountability to the people the system is supposed to serve and the communities where they live.⁴⁹ The types of accountability we did find were to governmental processes, like filling out case plans and filing court reports. Families reported they did not get the help they need, or the services offered were inadequate or a mismatch. Families and community advocates did not have available to them clear and consistent ways to hold child welfare agencies and contracted providers accountable for *quality* the interventions and services received. Additional examples include:

- “Poor oversight of intake practices, problematic use of their risk assessment tool, and misuse of [TDM] meetings are institutional features that result in African American children being more likely to be removed from their homes. Further, the widespread misapplication and misinterpretation of legislation/policy and the lack of a clearly articulated and functional case practice model compound negative outcomes for African American families.”⁵⁰
- “There are few mechanisms for obtaining and using family/youth feedback on the timeliness, relevance or quality of services. Challenges in enrolling in services or false starts as parents search for programs that best suit their needs can delay reunification with their children . . . many times these services are difficult to access or have a long waiting list. [Social workers] discussed feeling blamed for this, but ultimately the responsibility falls on the parents to enroll in the service and no other party is formally accountable for barriers encountered by families. Court reports and other documentation does not consistently describe these types of barriers.”⁵¹

“Focus group participants report that judges review the identified educational supports that are supposed to be provided to children and youth, but that the judges and leadership do not hold the department or providers accountable to ensure that these educational supports are received.”⁵²

4. Broader laws and policies do not facilitate workers in engaging families for extended periods of time and in supportive ways.

Workers’ actions are influenced by a fear of liability, perceived financial cost, and a focus on rescuing children instead of supporting the healing and integrity of families. Just two of the many examples are:

- Timelines are unrealistic in terms of human needs—e.g., the Adoptions and Safe Families Act limits how long reunification

⁴⁹ See *supra* Part III.A.

⁵⁰ See App. at B.

⁵¹ CTR. FOR THE STUDY OF SOC. POL’Y, *supra* note 25, at 19–20.

⁵² See App. at H.

services can be supported by the state and the timelines pressure workers and families to move faster than what may be appropriate to support adequate mental health or substance use interventions.⁵³

- Funding streams incentivize removal and adoption over supporting children in their home or facilitating a longer reunification process. It is important to note however that these IAs occurred before the implementation of the Family First Prevention Services Act of 2018 (“FFPSA”), which shifts some of the financial incentives.⁵⁴

IV. REFORM IS NOT ENOUGH

The racist history of separating Black children from parents still shapes today’s child welfare system.⁵⁵ The IAs documented the systemic racism that allows for separations to occur and the harm to Black children and parents. The IAs also documented how Black families experience immense environmental and economic stressors that persist because of how structural racism shapes policy and funding choices. Child welfare system interventions do not account for nor alleviate these stressors. After 15 years of this work, we doubt that it is even possible to reform the child welfare system and join in calls for the abolition of the child welfare system.⁵⁶ By abolition, we mean both dismantling the current child welfare system and, importantly, imagining and creating new, deep investments in families and communities and community support that promotes healing and thriving.

The IAs have shown that the child welfare system is not able to consistently help and ensure good outcomes for all families despite years of

⁵³ Adoption and Safe Families Act of 1997, Pub. L. No. 105-89, 111 Stat. 2115 (codified as amended in scattered sections of 42 U.S.C.).

⁵⁴ Family First Prevention Services Act of 2018, Pub. L. No. 115–123. In 2018, the FFPSA was signed into law as part of the Bipartisan Budget Act (H.R.1892). FFPSA supports keeping children in their homes when safe and possible by allowing states to claim federal Title IV-E reimbursement for prevention programs and services. FFPSA is an effort at child welfare financing reform. FFPSA supports services and program including mental health and substance abuse prevention and treatment services and in-home parenting skill based programs that include parenting skills training, education, and counseling. *Keeping Families Together: Family First Prevention Services Act (FFPSA) Aligns Financing with Child Wellbeing*, CTR. FOR THE STUDY OF SOC. POL’Y, <https://cssp.org/about-us/connect/press-room/keeping-families-together-family-first-prevention-services-act-ffpsa-aligns-financing-with-child-wellbeing/> [perma.cc/VFZ3-QZ9K] (last visited Feb. 28, 2022).

⁵⁵ See Elisa Minoff, *Entangled Roots: The Role of Race in Policies that Separate Families*, CTR. FOR THE STUDY OF SOC. POL’Y 3–4 (2018), <https://cssp.org/wp-content/uploads/2018/11/CSSP-Entangled-Roots.pdf> [perma.cc/U4T7-KU7Q] (stating that “[r]acism has always played a central role in the publicly funded systems that separate families”); Dettlaff & Boyd, *supra* note 12, at 255 (explaining that the overrepresentation of Black children in the child welfare system is concerning because “the act of forced separation of children from their parents is a source of significant and lifelong trauma, regardless of how long the separation lasts”).

⁵⁶ Many parent activists and scholars are applying an abolitionist lens to their work, calling for an end to all carceral systems, including the child welfare system, and are demanding community approaches to promoting child and family well-being. These individuals and organizations include Joyce McMillian of JMacForFamilies, We Be Imagining, Black Lives Matter-Los Angeles, Reimagine Child Safety, #RepealASFA campaign, upEND movement, Professor Dorothy Roberts, Derecka Purnell, the Juvenile Law Center to name a few.

efforts and significant financial investment. The child welfare system has improved individual experiences and provided some opportunities for youth and families—like assisting with access to health and mental health care, supporting college and job opportunities, providing mentorship to youth, helping with time-limited affordable housing, training workers to be more engaging and welcoming and affirming of the diversity of families involved in these systems. Yet our IAs show that writ large even “model” child welfare systems continue to separate children from their families, place children in congregate care settings, grapple with child maltreatment in foster care, and fail to ensure permanency for all children.⁵⁷

The child welfare system remains subjected to political whims. Child welfare leadership often changes with each election cycle, critical incident, or class action lawsuit. We observed in IAs how leadership change can shift priorities, destabilize community partnerships, and prevent follow through on strategic plans and new initiatives. The child welfare workforce continues to be unstable, in large part because of high caseloads and workloads. Child welfare budgets are dependent on state and local government negotiations and experience the unpredictability of economic downturns, budget cuts, and hiring freezes. Politicians and conservative advocates have used the child welfare system as a testing ground for policies that discriminate against LGBTQ+ youth and families. Political decisions have supported larger agencies in receiving government contracts and disadvantaged smaller grassroots, community-based helpers. Political decisions have also allowed for expensive institutional care settings to operate long past when research demonstrated its harmful effects on children.⁵⁸ Reform efforts navigate this larger political context, sometimes proving to be successful in changing harmful practices and policies and sometimes not. Overall, we do not see reform efforts sustaining, even in instances where class action litigation ensured new investments, additional staff, and substantial training and technical assistance.⁵⁹

⁵⁷ See App. at G; App. at F.

⁵⁸ See *What Are the Outcomes for Youth Placed in Congregate Care Settings?*, CASEY FAM. PROGRAMS (Feb. 5, 2018), [https://www.casey.org/group-placement-impacts/\[perma.cc/U7XU-AE8E\]](https://www.casey.org/group-placement-impacts/[perma.cc/U7XU-AE8E]), for an explanation of research from the past decade showing the use of congregate care as more expensive and producing poorer outcomes. See also *Residential Treatment: What the Research Tells Us*, NAT. COAL. CHILD PROT. REFORM (Apr. 18, 2011), https://drive.google.com/file/d/0B291mw_hLAJsSUNaOWR1dTk2SFU/view?resourcekey=0-XY1PXX40Yi8ju3iCTbcmUA [perma.cc/Z27T-J8XH] (summarizing the harm of residential treatment and suggesting better alternatives).

⁵⁹ See *Angela R. v. Clinton*, 999 F.2d 320, 326 (8th Cir. 1993) (upholding the agreement between parties that Arkansas’ enactment of a bill diverting more funds to its child welfare systems as a “suitable basis for settling this action”); *but see, e.g.*, Paul Kelly, Ark. Advoc. for Child. and Fams., *The Arkansas Child Welfare System: More than a Decade of Change - Yet Many Things Remain the Same* 2–3 (2005), <https://www.aradvocates.org/wp-content/uploads/KC-AACF-ARChildWelfareSystem-2005-web.pdf> [perma.cc/FD3M-5TRB] (highlighting that in 2005, the Department of Children and Family Services reported mixed progress “[a]t best” in Arkansas’ child welfare systems); see generally John Kelly, *Little Rock, in a Child Welfare Crisis, Becomes First Test for Family Integrity & Justice Works*, IMPRINT (Nov. 23, 2021), <https://imprintnews.org/youth-services-insider/littlerock-child-welfare-crisis-first-test-milner-kelly/60606> [perma.cc/T7FP-KZ3T] (reporting that in 2021 the entire frontline workforce turned over in Little Rock, Arkansas).

Fundamentally, there are problematic, dominant ideologies that underlie the child welfare system. These ideologies promote ideas that separating children from their families is acceptable and relatively harmless, that children are better off with families with more resources and in “better” communities, and that parents bear the shame of intervention and the burden to change. By focusing so intensely on individual family dynamics, the child welfare system masks the larger historically racist societal failures. This problematic ideology is pervasive, and reforms have failed to counter this ideology. Rather, reforms have largely focused on improving programmatic interventions (parenting classes, anger management, therapy, intensive case management, substance use treatment, etc.) but have not provide families with money and other concrete help they need to alleviate the incredible stressors of poverty. Reforms do not account for the “weathering”⁶⁰ families experience. Reform efforts to date only allow for limited family and youth “voice” and only as it relates to programs, not to shifting resources into the hands of families and communities. Robust prevention services and basic concrete supports are still not consistently available to families.

As we noted earlier, the child welfare system is not accountable to communities or families for the removal of children, their safety, or the type and quality of help families receive. Federal, state, and local governments provide funding to child welfare and as part of that funding have different reporting or oversight requirements that focus on complying with policies and practices, not with outcomes for families. The child welfare system is not broken, but rather needs to be broken.⁶¹

Child welfare reform has not and cannot end child maltreatment. The data and experiences from past IAs, combined with other experiences with child welfare reforms, demonstrate that anti-Blackness pervades the child welfare system. Child welfare structures including policies, protocols, financing, training, and research have reinforced anti-Blackness and negatively impacted families. The child welfare system cannot solve the core reasons why children, families and communities experience mental health, substance abuse, and other challenges. The system only intervenes in a limited way, uses coercive interventions, and provides limited resources.

Thus, we conclude that reforming child welfare will not be enough. Ultimately, families will be safer and thrive when we fundamentally imagine the ways in which society supports children, families, and

⁶⁰ Ana Sandoiu, ‘Weathering’: What are the Health Effects of Stress and Discrimination?, MED. NEWS TODAY (Feb. 26, 2021), <https://www.medicalnewstoday.com/articles/weathering-what-are-the-health-effects-of-stress-and-discrimination#How-the-weathering-concept-came-about> [perma.cc/DJ4M-KTDU] (defining weathering as “[r]epeated exposure to socioeconomic adversity, political marginalization, racism, and perpetual discrimination”); see also Gene Demby, *The Code Switch Podcast: Making the Case that Discrimination is Bad For Your Health*, NPR (Jan. 14, 2018, 7:00 AM), <https://www.npr.org/sections/codeswitch/2018/01/14/577664626/making-the-case-that-discrimination-is-bad-for-your-health> [perma.cc/4XTQ-LHSU] (interviewing Arline Geronimus, who originally coined the term “weathering” and discussing the myriad health effects).

⁶¹ See Alan J. Dettlaff et al., *It Is Not a Broken System; It Is a System that Needs to Be Broken: The Upend Movement to Abolish the Child Welfare System*, 14 J. PUB. CHILD WELFARE 500 (2020).

communities. In June 2020, the University of Houston Graduate College of Social Work and the Center for the Study of Social Policy launched the upEND Movement, a collaborative network aimed at creating a society in which the forcible separation of children from their families is no longer an acceptable solution. This involves simultaneously dismantling the racist policies and structures that produce harm and replacing these with resources and supports designed by families and communities that promote the safety and well-being of children in their homes. It is not about simply ending the child welfare system; it is about creating the conditions in society where the need for the child welfare system is obsolete. This movement builds on work done by parent leaders and advocates and is grounded in abolition theory. We advocate for human-centered, anti-carceral responses to mental health, substance use, and domestic violence through supportive services that strengthen families and maintain children with their parents.

Abolition theory and practice is new in the child welfare space and the field is learning about what this means, managing fears that children will be left unsafe and unprotected, and struggling to imagine new practices and social relationships. Although abolition is new to child welfare, it is not a new theory or practice. In his 1935 study *Black Reconstruction in America*, W. E. B. Du Bois called for “abolition democracy” meaning that a racially just society will require the creation of new institutions, practices, and social relationships.⁶² His vision was not realized, and racial injustices continued including in the child welfare system. In our paper, *How We EndUP*, we detail ideas of what supporting families and communities can look like.⁶³ Abolition is a vision of hope and optimism. Abolitionists envision a world where children are safer and live in homes and communities where they will thrive:

Abolition seeks solutions for issues for which the state has no solutions, because the current system maintains and upholds ideologies and constructs that ensure harm will continue. We seek to build a society where children, families, and communities self-determine what well-being and safety mean for them and are supported with the resources to do so because they are no longer oppressed by a system that destroys their ties to families and communities.⁶⁴

Anti-racist, anti-carceral responses to ensuring children are safe and families can thrive will require the creation of new practices and social relationships, similar to what Du Bois calls for.

⁶²See Columbia Center for Contemporary Critical Thought, *Abolition Democracy*, YOUTUBE (Oct. 15, 2020), <https://www.youtube.com/watch?v=L42CUzHYS-4&t=10s> [perma.cc/HUT3-7TJN], for an analysis of W. E. B. Du Bois’ “abolition democracy”.

⁶³ See generally Alan Dettlaff et al., *How We endUP: A Future Without Family Policing*, UPEND (2021), <https://upendmovement.org/wp-content/uploads/2021/06/How-We-endUP-6.18.21.pdf> [perma.cc/9GM9-GP3V].

⁶⁴ *Id.* at 5.

V. CONCLUSION

Racial inequities in child welfare and the harms that result have been documented for nearly sixty years. Despite decades of reform efforts, these inequities persist. We see headlines weekly about incidents and problems in county and state systems. Lawsuits continue to be filed to address harms that have been done by the system. Reunification rates remain low. Poor outcomes for youth including homelessness, early pregnancy, criminal justice involvement, and being sexually exploited or trafficked continue. Too many young people still exit the system with no permanency.

We intend to continue using the IA to uncover and document the structures of the child welfare system, the language used to describe families, and the impact on families. We also will use the IA to explore how communities are able to care for their children and families. However, the IA findings and recommendations should be used for reforms that work toward the abolition of child welfare, not its expansion given what we know about the harm of the system. upEND is just one of many abolition efforts that ask us to shift how we think about solving the challenges that families face. The work of organizers, advocates, and parents to render the need for the child welfare system obsolete and keep families safer must be explored and supported. We seek to end the surveillance and separation of Black, Native, LGBTQ+ and increasingly Latinx children from their families. We believe that collectively we can build healing communities where residents intervene and provide support. Massive investment in communities which have historically been disinvested in will facilitate both power and resources for Black families and communities to imagine and establish a community system of care where children, youth, and families seek and receive the care they need.

APPENDIX: INSTITUTIONAL ANALYSES REFERENCED

(In order of appearance)

Our overall point in this piece is to emphasize that it is less important where the data comes from, and more important what the data says. By including this information at the end, we are trying to show how universal the findings are without indicting any single jurisdiction. The child welfare system is an institution that affects the lives of children nationwide.

- A- Kristen Weber & Sarah Morrison, Wyandotte County Institutional Analysis (Feb. 5, 2021) (unpublished report) (on file with the Center for the Study of Social Policy and Kristen Weber).
- B- Oronde A. Miller et. al., Monroe County, New York: Institutional Analysis Report Draft (Apr. 24, 2012) (unpublished report) (on file with the Center for the Study of Social Policy).
- C- Martha Raimon et. al., Linn County, Iowa: Institutional Analysis Report (Aug. 19, 2011) (unpublished report) (on file with the Center for the Study of Social Policy and Kristen Weber)
- D- Praxis Int'l, St. Louis County Greenbook Institutional Analysis (undated) (unpublished report).
- E- Kristen Weber, Understanding Families' Experiences of Domestic Violence and Child Welfare Services: The Waukegan Institutional Analysis Report for the Quality Improvement Center for Domestic Violence in Child Welfare (Oct. 23, 2018) (unpublished report) (on file with the Center for the Study of Social Policy and author).
- F- KRISTEN WEBER ET. AL., POSITIVE OUTCOMES FOR ALL: USING AN INSTITUTIONAL ANALYSIS TO IDENTIFY AND ADDRESS AFRICAN AMERICAN CHILDREN'S LOW REUNIFICATION RATES AND LONG-TERM STAYS IN FRESNO COUNTY'S FOSTER CARE SYSTEM (2010), <https://praxisinternational.org/wp-content/uploads/2015/10/FresnoCountyInstitutionalAnalysis.pdf> [perma.cc/9L6X-3U6G].
- G- Kristen Weber & Bill Bettencourt, Allegheny County Institutional Analysis: Report of Findings (July 2014) (unpublished report) (on file with Center for the Study of Social Policy and Kristen Weber).
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- I- PRAXIS INT'L & CTR. FOR THE STUDY OF SOC. POL'Y, RACE EQUITY REVIEW: FINDINGS FROM A QUALITATIVE ANALYSIS OF RACIAL DISPROPORTIONALITY AND DISPARITY FOR AFRICAN AMERICAN CHILDREN AND FAMILIES IN MICHIGAN'S CHILD WELFARE SYSTEM 38 (2009), <https://praxisinternational.org/wp-content/uploads/2015/12/MichiganReportJan09.pdf> [perma.cc/X85A-EQFH].
- J- Praxis Int'l, Institutional Analysis in the Quad City Region of Iowa and Illinois (undated) (unpublished).