



Newsletter of the Family Focused Treatment Association





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# Igniting Embers — Not to Burn the Way...But to Light the Path: Addressing Racial Inequity and Cultural Responsiveness at Work –by Shahrukh Chishty

I wake up, dress for work, and go into the office, saying a cheerful "good morning" to all those around me. Who, though, really are these people looking back at me? Who is behind those peering eyes... beyond their pleasant smiles... and underneath the color of their beautiful skin?

Again and again, we wake to news of innocent African American lives brutally destroyed, burning the hope of true freedom. The ashes of this destruction continue to thicken with each death, spreading unending desolation, awakening a new realization, the new reality of our bleak world.

In the workplace, talking about topics like this may not be as easy as speaking to my children about racial inequities. It is very easy to awkwardly avoid the conversation, walking past one another as we have our surfacelevel chitchats. No matter what one's race or background, not addressing societal inequities, especially when working in a social services and mental health organization, may be one of the



most damaging responses for the teams that are tasked to do heartwrenching work every single day. These are initiatives that should not spring up solely based on the current events that make popular hashtags, social media storylines, or the nightly news. Instead this should be a work that goes backward and deep, digging into the past, searching for the ember that was never put out but instead continues to burn on and on, engulfing decades of history that could have been written differently.

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# EDITOR'S COLUMN

## — by Ryan Dowis A MINUTE OR A MOVEMENT? THAT'S UP TO US.

George Floyd's tragic killing occurred less than a week before I began my first day as the new Executive Director of FFTA, and, rightfully, I was presented immediately with many thoughts and questions from our dedicated Board of Directors and from members. Many of these questions were the same as those already running through my mind: "What is FFTA going to say? Is *saying something* enough?" The question of whether this would be another fleeting minute in the history of race issues or, instead, become a movement whereby real change could happen was quickly answered. As I reached out during those first few days, I learned that our members see this event as generating a movement and that FFTA has unique obligations and opportunities to step up and lead. As I listened to our members, I learned four things:

- 1. Your resiliency as agencies, leaders, and service providers in handling and adapting to multiple once-in-a-lifetime crises is unmatched by any sector.
- 2. It is important to you that FFTA lead by **Speaking Up strongly**.
- 3. It is important to you that FFTA lead by **Taking Action**.
- 4. It is important to you that FFTA lead by **Inspiring Hope** in others through sharing the remarkable work of our members.

#### We Have Work to Do = We Have Work to Do

At the core of our work and our mission is children—of course, we aim to do our absolute best to ensure that all children and families have before them all opportunities to live safe and healthy lives. However, a quick and routine glance at our health, mental health, and child welfare systems tells us that our families of color are disproportionately overrepresented and, in these systems, experience negative outcomes at significantly higher rates than their White counterparts. It is because of those disparities and the disproportionality that we must do something different from what we've been doing.

#### Some Introspection Is Helpful

As a White male in America with great privilege, it's impossible for me to truly understand the experiences that families of color face each day. I'm the first to admit, now, that lack of real lived experience and my own privilege leave me, at

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#### Igniting Embers — Not to Burn the Way... But to Light the Path: Addressing Racial Inequity and Cultural Responsiveness at Work | continued from pg. 1

At the dawn of the COVID-19 crisis, I started a new job at the Sacramento Children's Home. Though dealing with the health crisis was challenging enough, trying to ensure that our team members, clients, and families were kept safe, I was further shocked to learn about the impact that the brutal killing of George Floyd would have on our team of almost 260 members.

Our CEO took the lead and decided that something more had to be done. Saying and doing nothing wasn't an option. We have a diverse group of

staff who were expected to function "normally" in helping heal our most vulnerable and suppressed members of society while dealing with their own feelings of anger, frustration, and sadness. We took the following steps to start our support to our team:

• Spoke to the agency leadership team about the importance of what happened:

-Why it was absolute-

ly necessary to talk about the ongoing plight of the African American community

-What our personal feelings were about this event -The need to acknowledge the agency's own shortcomings in having more equitable practice and to make a commitment to do better

• Communicated a timely public message: -Sent a memo to all staff acknowledging the brutality of not only Mr. Floyd's killing but also all that has continued to happen

–Posted social media messages regarding the incident along with a commitment to continue to work toward racial justice within the scope of the agency's practice

-Discussed this topic as an ongoing agenda item at collaborative meetings within the community

• Organized a series of listening sessions entitled "We must do more"

Saying and doing nothing wasn't an option.

# EDITOR'S COLUMN

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times, inelegant and clumsy as I try to learn, understand, and grow. I'm guilty of being one of those social workers who thought it was good enough to just treat all fairly and try to not see color. As many of us recognize now, the problem was never that we saw color; rather, it's what too many of us do, and what many before us did, when we see color. That's a long way of saying that we must recognize our own bias and be okay with being a bit clumsy as long as we do better.

We must be clear-eyed, okay with being vulnerable, and prepared to be at least a bit uncomfortable in our learning and understanding so that we can better lead. It's during our most uncomfortable times that we have the best chance for growth and change, so let us not miss this time and opportunity. Remember, our lack of comfort pales in comparison to the historical trauma, racism, and lack of opportunities experienced by our Black brothers and sisters.

#### No Action Is Too Small... But Big, Bold Action Is Needed Too

In June as we moved to speak up strongly and take action, we released a statement of action-Our Children Are Watching... and they know **BLACK LIVES MATTER**—highlighting two unique opportunities that FFTA embraces to lead in the racial justice movement. The first obligation is to use our deep understanding of trauma to help guide our work and educate the broader community, knowing that many of today's inequities experienced by people of color are not about one person's view or the ways in which one person necessarily treats someone with a different skin color. Instead, today's injustices reflect generations of racist actions and policies that continue to have traumatic impact decades later. Second, our important work with and on behalf of children can and does inspire hope and bring together different viewpoints and voices, allowing us to often put aside distractions and rise above divisive rhetoric or "What-About-isms" to make real progress in racial justice for our children and their families. These two attributes make us uniquely capable of leading during this pivotal time in society.

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## Igniting Embers — Not to Burn the Way... But to Light the Path: Addressing Racial Inequity and Cultural Responsiveness at

**Work** | continued from pg. 2

-The sessions were conducted via TEAMS video meetings. -Three 1-hour sessions were scheduled for three consecutive weeks.

-An open invitation was extended to all agency staff. -A safe space was created by having agreements for the meetings, including a statement about having to be comfortable being uncomfortable.

Even before the first listening session took place, there were, to my surprise, a number of skeptical comments, such as this just being more talk without much action. Being new to the agency, I was very anxious about facilitating the listening sessions, especially the first one, not knowing what the outcome would be. At the time of the completion of this article, June 26 was the last scheduled listening session. What I learned by the end of the three sessions I don't think I could have ever learned in a book or experienced otherwise unless I was involved in this very sacred process. The following are just a few key items that were absolutely imperative to not

only doing our part in the work of furthering the practice of cultural responsiveness but also creating a very safe and supportive home for our team members:

• Providing standard training to all staff about cultural responsiveness in addition to more in-depth training about the systemic history of oppression,

White privilege, microaggressions, implicit bias, the impact of racial injustice on students, tangible skills training, and the like

• Creating a guide for staff to have conversations about race and equity with fellow staff members, clients, families, and communities

• Creating career path ladders to support growth opportunities, including guidance for service on boards, helping reduce systemic racism

• Screening for cultural responsiveness at initial hiring review and at interviews

• Examining agency and system protocols through a culturally responsive lens

• Incorporating signage to show that our agency is a safe place for people of all backgrounds (similar to the rainbow symbol)

• Educating our funders about the real needs of our community being served

• Partnering with other agencies serving marginalized populations

• Incorporating cultural responsiveness in benchmarks and outcomes

# EDITOR'S COLUMN

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As we thoughtfully move into action, we've created space for continued learning and conversation at our upcoming Annual Conference, in our bi-weekly webinar series on Racial Justice, and with this edition of *FOCUS*. We've launched our Wall of Hope to inspire all by sharing the amazing work of our members, and we've put together a brief resource of 10 Big and Small Things that agencies and teams can do in support of racial justice. You can read about many of these actions in practice in the articles by Karen Celedonia and Angela Edmonds and by Shahrukh Chishty here in *FOCUS*.

We know that individual-, family-, and agencylevel change is critical to this movement toward greater racial justice. However, we also know that this level of change alone is not enough and that we must force ourselves to honestly and faithfully examine policies, big and small policies at the state level; child welfare, juvenile justice, and mental health policies; and even landmark federal policies that many in our sector have embraced and supported—to truly determine whether they are racially just. Dr. Sherri Simmons-Horton's article serves as a thought-provoking primer for this analysis as we begin our work to revamp our Public Policy platform going forward.

The work before us will be hard, and we cannot do it alone. Your work, your resilience, and your focus inspire me to ensure that this movement turns unbearable pain felt by many for decades into unwavering progress toward racial justice. I'm thankful for the time, research, experience, and knowledge of our many contributors to this issue of *FOCUS* as they most certainly move us forward along the path of progress.

### Igniting Embers — Not to Burn the Way... But to Light the Path: Addressing Racial Inequity and Cultural Responsiveness at

**Work** | continued from pg. 3

• Providing guidance about how to be better allies to our African American community

• Surveying community members regularly about how well the agency is doing in being culturally responsive to their needs

• Hiring a more diverse workforce and recruiting a more diverse board

• As an agency, participating in more diverse and cultural events

• Creating a tip sheet for donors to commit to more than just dollars to help social injustice causes

• Marketing the agency as being racially equitable

In addition to gaining such insightful ideas that could only have come out of organic, real conversations during our three hours together, what also came out of these gatherings was even more humbling. At the end of each session, there seemed to be a sense of comradery, support for one another, and hope for a better future that may not have been so apparent before. African American team members shared that they had never before in their careers been given the opportunity to discuss

Our work on equity has just begun because there is so much to help heal.

how they felt about racial injustice and that they were so pleased with what we were attempting to do. White team members shared their vulnerability about being "White" and sometimes not knowing how to talk about certain topics with their African American teammates, clients, and families. I was overwhelmed by what a mere 180 minutes of time together over three weeks resulted in. Many participants stated that they wanted these listening sessions to be longer and to continue.

Our work on equity has just begun because there is so much to help heal. Given all this valuable knowledge, our task is to honor the time we spent together and ensure that this is not just the hot topic and breaking news discussed in our agency, but something that becomes part of everything we do. Our agency is now tasked with ensuring that all the wonderful ideas and thoughts make it to an agency-wide action plan that will eventually be led by the soon-to-be-formed Culturally Responsive Workgroup. My hope is that the work toward racial equity will

Ryan Dowis is the Executive Director of the Family Focused Treatment Association. Learn more about our newly appointed Executive Director. (www.ffta.org/page/MeetOurExecutiveDirector)

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become imperative to our survival and a natural, everyday part of our lives—like the very air we breathe, hoping that someday that air will be absent the ashes of those innocent lives lost.

Recently, my eighth-grader was tasked to write an essay about racial inequality. She wrote the following:

Society is a complicated mess filled to the brim with expected stereotypes and unbelievable prejudice. Even though that unfortunate fact is real, it does not mean that this world does not have room for improvement. From race to appearance to gender, some people see those aspects of a person as a way to judge them. In order to better society, members need to teach those individuals the fair [and equitable] way of seeing things.

She gets it... at least for now. Will her thoughts deform as she grows up in the current toxic world, and will her clear

vision of justice eventually change because her lens will be clouded by the soot around her? How can I prevent this? Well... it starts by talking about equity, over and over and over again, never letting the current climate be the norm for her. Never letting our current situation be the baseline for the world she lives in. Never letting her be okay with learning about the statistics that continue to grow in the most grotesque of ways. I must do my part, continuing to talk about equity with my children, my teammates, and my community. Even more important, I will listen so I can be one who does not ignorantly turn the other way, ignoring the destructive burning of innocent lives. Instead, I will consciously join others in becoming an ember to light the path toward a better world for us all.

Shahrukh Chishty is the Director of Child and Family Programs at Sacramento Children's Home. She is also a proud member of the FFTA Board. She can be reached at shahrukh.chishty@kidshome.org





—by Karen L. Celedonia, MPH, and Angela Edmonds, LCSW

As the Black Lives Matter movement has swept across the United States, many agencies are taking a critical look at whether the work they are doing supports racial equality. From the mission, vision, and values of the company to the work that you do with clients, and even how you support your staff, you should consider taking a pause to do a culture check to understand not only whether we are doing what we say we are going to do but also whether our data show it. In this day and age, most agencies are looking at outcomes and data, but disaggregating your data can give you valuable information about whether your outcomes show any general issues or areas to focus on that you might not otherwise have been aware of. Once this process is embedded in your system, you can put any needed strategies in place and let them do the work!

#### Why Take a Deep Dive Into Your Data?

It may sound as though you are adding an extra layer to your workday, but exploring data may help you find ways to work smarter, not harder or longer (that is what we all want, right?). There are lots of reasons you may want to disaggregate your data: maybe you want to show your support of Black Lives Matter, maybe you have seen a trend you are concerned about, or maybe you just love data. Regardless of the reason, there are many benefits to disaggregating data, a few of which are listed here. Finding Hidden Trends. Disaggregating data can be helpful in identifying trends that are not obvious on the surface. Pulling out specific data can reveal things that the larger data set may mask. You can use this information to shape the way you train your staff or help the clients in your program.

**Program Development.** Information pulled from disaggregation may help you see what is missing from your current programs. Outcomes are powerful tools when you are in the development stage of a new program or service line. Such information may be used to support grant applications or back up a proposal to your executive team or board of directors.

**Program Effectiveness and Equity**. Is everyone in your program getting the same results? Are there discrepancies related to race or ethnicity, gender, sexual preference, and so on? Disaggregating data will either confirm or negate program perceptions.

#### I Want to Disaggregate My Data. Where Do I Start?

Before diving into your data, think about who should be involved in the process of disaggregating your data. Internally, program leadership, direct care workers, quality continued on pg. 7



## Addressing Disproportionality in Child Welfare With Data: Diving Into Disaggregating Data | continued from pg. 6

improvement staff, human resources staff, and other support staff can provide valuable insight into the conceptualization of the project. Also assess whether you have the internal resources necessary to carry out the project. If you don't have staff members who are proficient in data analysis, do you need to hire a consultant? Eliciting feedback from external stakeholders like funders and community members may be useful as well. Once you have developed a plan for what you want to discover from disaggregating your data, you're ready to get to work!

#### What Data Do I Analyze?

Typical outcomes measured in the child welfare field include living environment at discharge from services and overall functioning as measured by a standardized assessment, so these might be good starting points. Research studies have discovered racial disproportionality in out-ofhome placements and family reunification (Lu et al., 2004). You could, therefore, pick which data to analyze based on what the literature has found. But there may be other outcomes your agency collects that you're interested in exam-

ining through a disaggregated lens. Determining which data to analyze can be something you discuss with your project team. For example, executive leadership may be interested in looking at certain outcomes in a disaggregated fashion. Or maybe your funders are particularly keen on looking at an outcome that you might not have otherwise thought to include. Ultimately, which data you choose to conduct disaggregated analyses on is up to you.

#### How Do I Analyze the Data?

When testing the waters of disaggregating your data, there's no need for fancy, complex analyses. In fact, doing simple analyses first is an excellent way to get to know your data, identify possible trends, and then if you want, explore these trends further with more complex analyses. A simple comparison of percentages can be very informative. For example, extract a sample of youth discharged during a certain time frame (e.g., a fiscal year). Calculate the overall percentage of youth who remained in the home at discharge. Then disaggregate the data by your chosen variables (e.g., race/ethnicity, gender, age, sexual orientation), and calculate percentages for the variables. Compare your disaggregated percentages to the overall percentage to see whether there is any disparity in outcomes. If you'd like to get a little fancier, consider calculating a risk ratio: Risk ratios add rigor to your analysis beyond simple percentages but don't require an advanced degree in statistics to compute. Risk ratios indicate the likelihood of experiencing a negative outcome compared to a certain group (also known as a reference group) or groups of people. A risk ratio of 1 represents the ideal scenario of precise proportionality. A risk ratio above 1 indicates overrepresentation, with a risk ratio of 1.5 being concerning, and a risk ratio above 2 indicating significant disproportionality (Gibb & Skiba, 2008). An example of how to calculate a risk ratio is shown in Figure 1 below.

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# Example Risk Ratio: Outcomes by Race

- 315 youth discharged from your program: (n = 200 are white, n= 115 are black, biracial, Hispanic, other)
  - You wouldn't necessarily group by these races: you would want to look at individual racial groups compared to all youth who discharged. Race was grouped in this way just to give an example of how the formula could be applied to common child welfare outcomes.
- Of these youth, 84 youth did not go home, 41 of these youth were not white

# # youth of color who didn't go home/# youth of color discharged

(# youth who didn't go home - # youth of color who didn't go home)/ (total # of youth discharged - total # of youth of color discharged)

41/115 = .36 (84-41)/(315-115) = .22 .36/.22 € 1.7

Youth of color are 1.7 times more likely to not go home after they leave the program compared to white youth

Formula adapted from: https://research.steinhardt.mvu.edu/site/metrobloe/2017/04/04/are-mv-students-st-risk-measurine-disciplinary: disproportionality/

Figure 1

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## Addressing Disproportionality in Child Welfare With Data: Diving Into Disaggregating Data | continued from pg. 7

#### Who Do I Share the Results With?

Once you have your results, determine whom you'd like to share them with. A good starting point is to present your results to program leadership. If you have a routine quality improvement meeting, include your disaggregated results in the meeting. Doing so will facilitate rich discussion about the trends you see in your data, which, it is hoped, will lead to action steps to address any disproportionality your results have revealed. You may also want to share your results with the individuals your agency serves or with the larger community. If your disaggregated analyses reveal disparities in outcomes, the conversations that may arise from sharing these results may be uncomfortable, but they are necessary in order to grow and develop as service providers. If you conducted more complex analyses and the results fill a gap in the research literature on child welfare and disproportionality, consider presenting your results at a conference or writing a manuscript for publication in a peer-reviewed journal.

#### How Do I Put the Results Into Practice?

Data are powerful tools that can be used to enact much-needed change. Your results can be leveraged to institute an array of improvements in practice and policy that will help counter disproportionality in youth and family outcomes.

With your results in hand, you need to make a few determinations:

Do you need to make any changes at all? Does your data show a gap in service	е
delivery or hidden trends?	

Do you have buy-in from the agency and staff? Can you make a case using the data for what you want to do?

Do you need to make a change to your Mission/Vision/Values/Program Statement? This may not be as easy as it sounds on the surface. Use your data to work with the executives/board of directors/owners on the changes which need to be made.

Do you need funding? Is your plan billable to Medicaid? Are there grant or local monies available? Do you have money in your budget which could be reallocated? Is it something you can do at no monetary cost?

Do you have the expertise in-house for what you want to accomplish? Do you need to hire a consultant? Are you able to utilize current staff to create a committee to implement needed changes or additions?

Do you have a system to constantly look at this data and make it a part of your ongoing practice? Do you have the ability to track changes over time?

Figure 2: Things to Consider

References and Resources

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Thing to Consider for Putting Results into Practice data can be an important tool for identifying many issues in an agency. We are living in a data-driven world, and the more you can utilize your data to make important changes, the better equipped you will be to ensure that all youth and families are receiving similar outcomes regardless of race, gender, sexual orientation, and the like. All people are created equal, but not all people have the same life experiences, and taking the plunge into disaggregating data will assist you in ensuring that all youth and families receive equal services and treatment.

As you can see, disaggregating

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The recent murder of George Floyd has sparked a national conversation about anti-Black racism within law enforcement and other systems, and the

> child welfare system is no exception. Racism is a common experience for Black children in the United States, causing psychological stress brought on by constant exposure to race-related adversities and discrimination (Parris et al., 2020). This racial trauma can undermine the healthy development and well-being of Black children (Carter, 2007). For Black children in the child welfare system, racial trauma is compounded by experiences of separation from parents,

siblings, and their culture. Events such as these have historical context for Black children, who did not have the benefit of protection and support at the onset of child welfare legislation (Ward, 2012). To protect Black children from the lasting impact of racial trauma, professionals and caregivers working in the child welfare system need to amplify conversations to address dismantling systemic racism for children in foster care.

#### The State of Black Children in Child Welfare in Texas

In 2005 the Texas Department of Family and Protective Services (DFPS) was directed to focus attention on existing race disparities in the child welfare system. Although DFPS has consistently analyzed system data related to enforcement, policies, and procedures, race disparities, particularly for Black



*—by Sherri Y. Simmons-Horton, PhD, LMSW* 

children, persist.

As of 2018, DFPS reported that Black children represent 11% of the state's child population yet constitute 21% of children entering foster care (Texas Department of Family and Protective Services [DFPS], n.d.). Additionally, Black children are more likely than White children to be reported as victims of child abuse, investigated, and removed (DFPS, n.d.). Although these trends remained consistent for nearly a decade, the numbers have been rising steadily since 2013. For larger counties such as Harris, Dallas, and Bexar, there is a slightly higher rate of racial disproportionality for Black children in child maltreatment reports and investigations.

Recent numbers indicate that more than 3,600 Black children were legally removed in the most recent fiscal year (Texas Adoption Resource Exchange

[TARE], n.d.). Once Black children legally enter the child welfare system, the likelihood of relational permanency (reunification, relative placement, adoption) decreases. Further, as Black children move deeper into the child welfare system, the race disparities are heightened (TARE, n.d.). For example, Black children experience more placement moves, are more often placed in congregate settings (i.e., shelters, residential treatment centers), and are more likely to age out of the system. These events translate to poorer outcomes for Black children, including homelessness and later involvement in the criminal justice system.

# SOLUTIONS TO ADDRESSING THE ANTI-BLACK RACISM IN THE CHILD WELFARE SYSTEM | continued from pg. 11

#### Causes of Racial Disparities for Black Children in the Child Welfare System

Why are Black children placed in foster care at higher rates than other children? Factors contributing to systemic racial bias in the child welfare system are multifaceted and are connected to other systems in which racial disproportionality exists. Research has pointed to individual and familial pathologies of Black children and parents (Dettlaff & Rycraft, 2010). Poverty within Black communities also has been named as a cause (Dettlaff & Rycraft, 2010). Although these issues are contributing factors, they do not fully explain race disparities that occur at every decision point within the child welfare system. Assessments and decision-making practices can be heavily influenced by stereotypes of Black inferiority and family dysfunction that are deeply embedded in society.

#### Pervasive Systemic Bias: The Presence of Racism Throughout the Child Welfare System

Racial disproportionality persists across the child welfare system. The mission of the child welfare system is to provide protection to children and youth but does not always result in assisting parents in taking care of their children. Instead, Black families are often punished for their parenting failures through threats of removal and punitive functions. Because Black parents endure the plight of poverty and institutionalized racism at higher rates than White parents, professionals in the child welfare system often take a punitive approach to service provision.

Practices within the child welfare system often place full responsibility of care for their children on Black parents, without consideration for economic and social barriers these families experience. Dettlaff and Rycraft (2010) conducted interviews with child welfare professionals, including those in the legal community, and found that court decisions involving Black children reflect cultural bias. Child protection court legal proceedings can reflect those of criminal trials. Further, caseworkers disclosed tendencies to make value-based decisions about child welfare cases instead of factoring Black family culture and strengths into the assessment process. It is through the lens of these findings that those working with children should approach their practice with Black children with increased compassion and an understanding of race bias and its impact on the life trajectory of these young people.

#### Policies Addressing Race Disparities in Child Welfare

Federal policies to address racial bias drive the ways in which agencies and professionals implement child welfare practice. Although these policies seemingly have positive intentions, the outcomes have not always favored a reduction in disproportionality for Black children.

# The Multiethnic Placement Act (MEPA) of 1994

In response to the disproportionate numbers of Black children in foster care and waiting for adoption, the Multiethnic Placement Act (MEPA) was enacted in 1994. The legislation challenged same-race foster and adoptive placements as the sole option for children in care. The primary concern was that transracial placements were blocked based on the race or ethnicity of prospective families. The controversial passing and implementation of MEPA prohibits the use of a child's or prospective parent's race, color, or national origin to "deny or delay" placement. The act also requires states to make "diligent efforts" to increase the number of diverse foster and adoptive families by targeting Black and other minority families for recruitment. The act provides for financial continued on pg. 12



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# SOLUTIONS TO ADDRESSING THE ANTI-BLACK RACISM IN THE CHILD WELFARE SYSTEM | continued from pg. 11

sanctions to be placed on states if foster or adoptive placements are denied or delayed because of race or if diligent efforts to recruit minority families are not pursued.

Black children, like all children, already struggle with their adoptive identity. An added challenge for Black children is adjustment to their racial identity in transracial homes (McRoy, 1994). This is not to assume that non-Black caregivers are unable to provide love and care to Black children. However, navigating identity in a racialized society is a factor that caregivers adopting transracially need to consider in their parenting role for Black children.

#### The Adoption and Safe Families Act (ASFA) of 1997

Enacted in 1997, the Adoption and Safe Families Act (ASFA) set out to reduce the time that children languish in foster care and reduce multiple out-ofhome placements. Specifically, ASFA (a) allows a child's caseworker to explore family reunification and other permanency options simultaneously, (b) requires child protection courts to aggressively pursue termination of parental rights within 12 to 22 months if reunification efforts are unsuccessful. (c) mandates states to document efforts to locate adoptive and relative homes, and (d) gives preference to relatives over nonrelative caregivers (White, 2006). Under the guise of "best interest," ASFA, despite its efforts to increase relative placements, is arguably a federal mandate to destroy the Black family. Its push to terminate

parental rights banishes the parentchild relationship and prioritizes adoption over reunification. In practice, because family reunification efforts are deemed too expensive, adoption is a priority under ASFA (White, 2006).

Although ASFA refers to child welfare policies broadly, there remains a disproportionate impact on Black children, given the disparate entry and exit rates of Black children. With practice and policy deeply rooted in stereotypes of Black family destruction, Black parents stand little chance of regaining custody of their children once those children enter foster care. Although the goal of the child welfare system remains family reunification, ASFA provides fiscal incentives to place Black children in adoptive homes, thus promoting adoption as the more viable option.

#### Fostering Connections to Success and Increasing Adoptions Act of 2008

Unanimously passed in 2008, the Fostering Connections to Success and Increasing Adoptions Act made farreaching changes to the child welfare system, including (a) allowance of relative/kinship financial assistance, (b) a requirement to ensure that foster placements do not unduly disrupt a foster child's education, and (c) requirement of reasonable efforts to maintain siblings together in foster placements.

Black culture has long reflected the maxim "it takes a village to raise a child," and the Fostering Connections

legislation is a step in the right direction toward reducing disproportionality. Since the implementation of the Fostering Connections program in Texas, relative and kinship placements of Black children have steadily risen. There also has been an increase in relative families becoming licensed as foster parents to receive needed assistance to meet the needs of children in relative caregiver homes. Still, childplacing agencies contracted to license foster and adoptive homes need to shift to a culture of acceptance of relative families and release negative stereotypes of families, particularly Black families.

#### Strategies for Change

New directions within the child welfare system continue to reform policies and practices that have plagued the lives of abused and neglected children. It takes everyone involved in the lives of these children to advocate for positive change. Systemic racial bias and disparities that infringe on the lives of Black children and families must be a priority. The following are some strategies for change:

To protect Black children from the detrimental effects of racial and historical trauma, those working with these children must initiate conversations about race and racism early in the children's lives. Early exposure to the realities of race in society provides Black children with tools to navigate eventual experiences of racism.

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#### POSITIVE RACIAL IDENTITY DEVELOPMENT IN BLACK FOSTER CHILDREN IS CRITICAL TO THEIR WELL-BEING.

EARLY EXPOSURE TO THE REALITIES OF RACE IN SOCIETY PROVIDES BLACK CHILDREN WITH TOOLS TO NAVIGATE EVENTUAL EXPERIENCES OF RACISM.

# SOLUTIONS TO ADDRESSING THE ANTI-BLACK RACISM IN THE CHILD WELFARE SYSTEM

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Positive racial identity development in Black foster children is critical to their well-being. Caregivers must seize opportunities to provide children with activities highlighting positive cultural enrichment.

Decision makers in child welfare should engage in discussions regarding placement type, family visitation, and normalcy for Black youth through the lens of understanding the effects of systemic race bias.

Provision of ongoing anti-racism training at all levels within the child welfare system should be embedded in required professional development.

Given the success of kinship and relative placements for Black children, child-placing agencies need to continue a shift to a culture that embraces Black families as viable resources for children. Relative and kinship families need to be viewed from a strengths perspective, not as a safety liability.

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# How to Talk to Children About Race and Social Justice

-by Rachel Willis

B efore you can tackle the "how" when it comes to talking to your children about race and social justice, you have to start by answering a foundational question: "why?" Why does race matter, and why is it important to discuss issues of social justice with your children? Why does it matter, given that slavery ended more than 150 years ago and the Civil Rights Act became law more than 50 years ago? After all, the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, religion, sex, or national origin, requires equal access to public places and employment, and enforces desegregation of schools and the right to vote (Civil Rights Act, 1964). However, the details of the before, after, and in-

between of these victories matter. Establishing a common language, knowledge, and understanding are first steps that must be taken before considering the "how."

We all know that slavery in the United States began with the development of the first colonies, consisted of the trading and enslavement of approximately 7 million Africans, and formally lasted for more than three hundred years (History.com Editors, 2009a). In 1865 the Thirteenth Amendment to the United States Constitution outlined in its very first section that "neither slavery nor involuntary servitude, except as a punish-

ment for crime whereof the party shall have been duly convicted, shall exist within the United States, or any place subject to their jurisdiction," thus formally outlawing the imposition of forced labor on free individuals (History.com Editors, 2009b). Following the enactment of the Thirteenth Amendment, a series of laws were put into place targeting the newly freed African American population for the purpose of revoking their freedom through incarceration and thereby re-enslaving them through involuntary servitude. Vagrancy laws, also known as Black Codes or Black Laws, were a series of laws that turned petty crimes such as loitering into misdemeanors punishable by jail time. Additionally, these laws specifically prohibited African Americans from gathering in large groups, worshiping together, preaching, or being jobless, among other things.

Talking to your children about race and social injustice also may put you in a place of vulnerability, and it may be uncomfortable. **That is okay.** 

By imprisoning African Americans for these "crimes," lawmakers were able to legally exploit the loophole of involuntary servitude left open by the Thirteenth Amendment. These rules stayed on the books in many states well into the mid-1900s when, in many cases, these laws were quickly replaced by Jim Crow Laws. Jim Crow Laws made it illegal for people of different races to mingle. This restriction led to the now-infamous images of separate drinking fountains and segregated buses, restaurants, schools, and medical facilities (Jim Crow Museum of Racist Memorabilia, n.d.). Subjected to the institutionalized practices of enslavement, segregation, and marginalization, African Americans were restricted from being free and

were unable to benefit from the basic human rights afforded to free White individuals.

Without detailing other acts of deliberate disenfranchisement of the African American population such as redlining, it is important to recognize the relevance of these acts of injustice and their far-reaching implications for African Americans. According to a study published by the U.S. Department of Justice in 2004, African American juveniles between the ages of 10 and 17 represented 15% of the population, yet disproportionately represented 26% of arrested youth and 46% of incarcerated or detained juveniles (Hsia et al., 2004). This

overrepresentation of African Americans in detention centers is a lasting consequence of the complexities of our history.

Now that we have a baseline understanding of the "why," we can start working on the "how." Because children learn how to interact with the world around them at an early age, they are easily influenced by their environment. Within the first few months of life, infants learn that a certain behavior, such as crying, will elicit a certain response from their environment or caregiver (Allen & Kelly, 2015). This means that children are impressionable and learn from others around them. Children are also learning how to interpret and understand differences. As parents or caregivers, we have an opportunity to use our knowledge and comprehension of our environment—which includes the weight of the complex history

# How to Talk to Children About Race and Social Justice

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of our country and the realities of the African American population at large—to engage in conversations with our children and others around us to begin to shift the narrative.

The recent events of protest and social unrest are not new; they are just the most current manifestations of the institutionalized marginalization of minorities. This context is critical to approaching conversations with your children about race and social justice. By using this knowledge to establish a framework, you will be able to approach the topics of race and social justice with empathy. Empathy is an important component of this process because it is necessary to change attitudes and build trust in relationships (Irimia, 2010). Although being empathetic can put you in a place of vulnerability, it is a powerful antidote when cultivated by courage, compassion, and connection, as noted by Brené Brown, a renowned author and speaker (Safigan, 2012).

Talking to your children about race and social injustice also

may put you in a place of vulnerability, and it may be uncomfortable. That is okay. Although no parent wants to appear as if she does not have all the answers, race and social justice are complex topics and cannot be solved in one conversation. The most important thing is that you start the conversation with your children. The reality is that children are talking about race regardless of whether their parents are talking to them about it (Hagerman, 2018). This means that you have the challenge of navigating through multiple layers as you lean into this issue with your children. Addressing this situation will take significant emotional fortitude. Ground yourself and start from a place of empathy and knowledge.

Next, you will need to take an active approach. This means moving from being inclusive to being actively anti-racist. According to Derald Wing Sue, the author of Race Talk, "becoming antiracist means taking personal action to end external racism that exists systemically and in the action of others" (Sue, 2016; italics in original). As a parent, you can actively engage in these activities by intentionally reading books with your children that explain the history of America and that include more of the history of African Americans than just slavery and the civil rights movement. It includes talking through situations of privilege, teaching your children about how people with more melanin in their skin have been treated historically, and doing it all with a judgment-free level of empathy.

> Remember, there is no magic solution or one-size-fits-all to talking with your children about any subject—especially a subject as complex as race and social justice. Imparting knowledge, elevating conversations about injustice, and setting better examples are steps on a journey that will last a lifetime.

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—By Joan Blakey, PhD and Maurya Glaude, PhD, MSW, LCSW

The majority of mothers entering the child protection system have histories of interpersonal trauma (Blakey & Hatcher, 2013; Chemtob et al., 2011; Schofield et al., 2011). Nearly 75% of these mothers have experienced complex trauma (e.g., three or more traumatic events; Chemtob et al., 2011; Greeson et al., 2011); yet, when mothers enter the child protection system, rarely are they asked about their trauma histories or are their trauma histories taken into consideration in determining the presenting problems (Blakey & Hatcher, 2013; Harris & Fallot, 2001). Research has shown that "practitioners who do not attend to survivors' past, and the relationship it plays in the present, undermine their ability to deal with the underlying trauma and the present day challenges that brought them to [seek services] in the first place" (Knight, 2019, p. 25). Because the child protection system does not universally screen for trauma histories (Blakey & Hatcher, 2013), and because mothers may believe that

any revelation of trauma may be used against them, best practices would be to create a trauma-informed system of care for all clients (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014).

A trauma-informed approach has four components, known as the four Rs: (a) Realization, (b) Recognize, (c) Respond, and (d) Resist Retraumitization (SAMHSA, 2014).

#### Realization

The first component of a trauma-informed approach is realization. Practitioners realize what trauma is and that the majority of clients who interface with the child protection, social service, criminal justice, health, behavioral health, and mental health sectors have a high prevalence of trauma (Elliott et al., 2005; Levenson, 2017; SAMHSA, 2014). Mothers who become involved with child protection have a high prevalence of early childhood maltreatment and experience multiple traumas throughout their life course (Blakey & Glaude, in press). Studies have found that 57% of mothers involved with child protection report physical abuse; 52%, childhood sexual abuse; 22%, assault by a stranger; 28%, rape; 25%, sex trafficking; 80%, prostitution; 85%, intimate partner violence; and 49%, generalized violence and other types of trauma. Eighty-seven percent of mothers who become involved with child protection have experienced two or more traumatic events, and 55% have experienced five or more traumatic events (Chemtob et al., 2011; Greeson et al., 2011).

#### Recognize

Practitioners, organizations, and systems of care must recognize the myriad ways in which trauma can manifest behaviorally, psychologically, emotionally, socially, and relationally (SAMHSA, 2014). In a study by Blakey and Glaude (in press),

## "I Want to Help Children": Why Trauma-Informed Practice Is an **Essential Part of Any Service Delivery**

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mothers who have complex histories of trauma and become involved with the child protection system reacted to their involvement in four primary ways: (a) anger, hostility, and combativeness; (b) withdrawal, disappearance (never resurfaced), or intermittent disappearance and reengagement; (c)superficial compliance, disbelief of the validity of charges: and (d) immobilization due to grief and fear.

Anger, hostility, and combativeness. In Blakey and Glaude's study, the most common response used by African American mothers with histories of complex trauma to manage involvement with child protection consisted of anger, hostility and combativeness, which was primarily directed toward their caseworkers, treatment counselors, and parenting workers. Mothers were angry that caseworkers were telling them what to do. Sometimes the mothers' anger led to being kicked out of programs. Other times, mothers could not identify what made them respond in anger, but the anger happened quickly and often without notice.

Withdrawal, disappearance, or intermittent disappearance and reengagement. Withdrawal, disappearance, or intermittent disappearance and reengagement are other examples of how mothers with histories of complex trauma managed their involvement within the child welfare system (Blakey & Glaude, in press). In Blakey and Glaude's study, mothers discussed withdrawal and disappearance in different ways. Mothers tended to withdraw or disappear when they felt their caseworkers did not acknowledge their progress and seemed to be more interested in moving toward terminating their parental rights. This belief made

mothers who were doing well relapse because they felt that all their hard work did not matter. Mothers also withdrew and disappeared when caseworkers started bringing up issues in treatment that were difficult for them to face. These mothers' primary coping mechanism was to withdraw and disappear. This primary coping mechanism virtually guaranteed that these mothers' parental rights would be terminated.

Superficial compliance, disbelief of the validity of the charges. In Blakey and Glaude's study (in press), mothers who superficially complied were physically present in treatment but often refused to discuss factors related to their drug use. Instead they used denial, laughter, and minimization to avoid dealing with their complex histories of trauma and the wavs in which this history could be related to their drug use. These mothers remained stuck in denial about their substance misuse and trauma, instead swearing that they were great mothers and that there was no reason for their involvement with child protection.

Immobilization due to grief and fear. Mothers in Blakev and Glaude's study (in press) were immobilized by fear that was related to the possibility of losing custody of their children. This grief and fear at times were so debilitating that they affected the mothers' ability to participate in services intended to help them regain custody of their children. In some instances, mothers were able to use their fear to regain custody of their children. In most instances, mothers had not lost custody of any of their children and were afraid that if they did not move past their fear and grief, they would lose custody of their children.

#### Respond

In this component, practitioners view clients' behavior, presentation, and interactions through this traumainformed lens and use that knowledge to respond to clients in ways that convey compassion and empathy (Levenson, 2017; SAMHSA, 2014). On the surface, mothers' primary responses to their involvement with child protection looked like anger and combativeness, withdrawing and disappearing, superficial compliance, or immobilizing grief and fear, however, using a trauma-informed lens, we could argue that these primary reactions closely resemble fight, flight, freeze, and fright trauma responses, especially given the extensive preexisting histories of trauma that mothers brought with them into the system (Blakey & Glaude, in press).

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Historically, health and human services systems have encountered large numbers of mothers who have complex histories of trauma

Historically, health and human services systems have encountered large numbers of mothers who have complex histories of trauma (Harris & Fallot, 2001). Although many child welfare systems are willing to acknowledge and address the impact of trauma on children and youth, there seems to be less willingness to acknowledge and respond to parents' histories of trauma (DeCandia et al., 2014; Donisch et al., 2016). Some practitioners tend to believe that acknowledging parents' trauma and how it may have led to child maltreatment condones the abuse and neglect. Rather, knowing about past and current experiences of trauma can lead to a more holistic and integrated case plan that allows services to be delivered in a way that can facilitate healing and recovery rather than retraumatization (Elliott et al., 2005; Harris & Fallot, 2001). Trauma-informed systems of care are vital to trauma survivors' ability to fully participate in and benefit from services (Elliott et al., 2005).

#### **Resist Retraumatization**

Finally, this component of a trauma-informed response recognizes that sounds, smells, behaviors, words, and gestures can trigger mothers' experiences of trauma. Studies have found that involvement with the child protection system can be traumatizing for parents regardless of preexisting histories of trauma. Although we can never guarantee that our systems of care and interactions with clients will not retraumatize clients, we must remain committed to exploring the ways our policies, procedures, and practices can inadvertently retraumatize people and limit or interfere with healing and recovery (SAMHSA, 2014). Practitioners must be cognizant of the possibility of retraumatizing clients. Only then is it possible to be intentional about protecting against it (Elliott et al., 2005). Effective trauma-informed services are not designed to treat symptoms or syndromes related to significant sexual, physical, or emotional abuse; effective services are those in which staff are aware of, sensitive to, and committed to doing no further harm to survivors (Jennings, 2004).

In the child welfare, mental health, and substance abuse treatment systems, trauma survivors make up the majority of clients (Blakey & Hatcher, 2013; Chemtob et al., 2011; Schofield et al., 2011). We cannot care about children without also caring about the families in which they live. If we want to help children, then we must help their parents, because when given a choice, the majority of children in the child welfare system would rather remain with their parents. Creating trauma-informed systems of care is a promising way to help both children and their families (Elliott et al., 2005; Harris & Fallot, 2001; SAMHSA, 2014).

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