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COMMISSION BRIEFING:

MULTIETHNIC PLACEMENT ACT, MINORITIES IN FOSTER CARE AND ADOPTION

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FRIDAY

SEPTEMBER 21, 2007

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WASHINGTON, D.C.

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The Meeting convened in Room 540 at 624 Ninth Street, N.W., Washington, D.C. at 10:00 a.m., Abigail Thernstrom, Vice Chairman, presiding.

PRESENT:

ABIGAIL THERNSTROM, VICE CHAIRMAN JENNIFER C. BRACERAS, COMMISSIONER (via telephone) GAIL L. HERIOT, COMMISSIONER PETER N. KIRSANOW, COMMISSIONER (via telephone) ARLAN D. MELENDEZ, COMMISSIONER ASHLEY L. TAYLOR, JR., COMMISSIONER

KENNETH L. MARCUS, Staff Director

STAFF PRESENT: MANUEL ALBA DAVID BLACKWOOD, General Counsel MARGARET BUTLER TERESA BROOKS CHRISTOPHER BYRNES, Attorney Advisor to the OSD and Acting Deputy General Counsel, OGC PAMELA A. DUNSTON, Chief, ASCD LATRICE FOSHEE MONICA KIBLER EMMA MONROIG, Solicitor/Parliamentarian KARA SILVERSTEIN AUDREY WRIGHT MICHELE YORKMAN

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COMMISSIONER ASSISTANTS PRESENT:

LISA NEUDER RICHARD SCHMECHEL KIMBERLY SCHULD

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Introductory Remarks	5
Panel 1: Enacting and Enforcing MEPA and Assessment of Minority Children in Foster Care Commissioner Joan E. Ohl, Administration on Children, Youth and Families, U.S. Department of Health and Human Services	8
Office's Education Workforce and Income Security	leam
Panel 2: The Best Interest of Children and the F of Race	Role
 J. Toni Oliver, Co-Chair Family Preservation Focus Group, National Association of Bl Social Workers Joseph Kroll, Executive Director, North American Council on Adoptable Children Dr. Rita Simon, School of Public Affairs, Washington College of Law, American University 	46 55 ty
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Panel 3: Has MEPA Achieved Its Goal? Thomas Atwood, President and Chief Executive Officer National Council for Adoption 1 Dr. Ruth McRoy, Evan B. Donaldson Adoption Institut	е
Dr. Elizabeth Bartholet, Professor of Law and Director of Child Advocacy Program, Harvard	09
Law School 1 Linda Spears, Acting Senior Vice President of Child Welfare League of America 1	

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P-R-O-C-E-E-D-I-N-G-S
10:00 a.m.
VICE CHAIR THERNSTROM: So we turn to the
briefing on Multiethnic Placement? Okay. On behalf
of the Commission of Civil Rights, I welcome everybody
to this briefing on the Multiethnic Placement Act,
Minorities in Foster Care and Adoption.
At this briefing three expert panels will
discuss a number of issues concerning trends in racial
foster care and adoption including whether the

discuss a number of issue 9 ng trends in racial 10 foster and adoption including whether the care Multiethnic Placement Act of 1994 has been successful, 11 12 how well the U.S. Department of Health and Human Services enforces that Act and whether transracial 13 foster care and adoptions serve the best interests of 14children. 15

MEPA was developed out of concern that 16 17 many children languished in foster care as prospective 18 parents of a different racial group were not provided 19 the opportunity to adopt them. MEPA's broad goal is to abolish racial discrimination for both children and 20 21 prospective parents in child welfare. As amended, the statute prohibits states and other entities involved 22 23 in foster care or adoption placements that receive federal financial assistance from delaying or denying 24 25 a child's foster care or adoptive placement on the

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basis of the child's or the perspective parent's race, color or national origin. It also requires states to diligently recruit foster and adoptive parents who reflect the racial and ethnic diversity of the children in the state needing foster and adoptive homes in order for the state's child welfare programs to remain eligible for federal assistance.

8 Critics of MEPA argue that only families 9 of the same race can provide minority children with 10 support they require to be able to combat the 11 discrimination, develop role models to confront 12 negative stereotypes. They further contend that little effort is made to recruit for African American 13 adoptive families. 14

Proponents counter that if only parents of 15 the same race as a child are allowed to adopt minority 16 children, the adoption will take too long. They also 17 posit that children in transracial adoption do as well 18 19 as other children on standard measures of self-esteem, educational achievement 20 cognitive development and among other criteria. 21

In addition, although much of the debate was centered on adoption, we will also consider the effect of MEPA on children in foster care.

The record will be open until October 22,

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2007. Public comments may be mailed to the U.S.
Commission on Civil Rights, Office of Civil Rights
Evaluation, Room 740, 624 9th Street, Northwest,
Washington, D.C. 20425. And we welcome those
comments.
So, this morning we're pleased to welcome
three panels of experts that will address this topic.
PANEL 1
VICE CHAIR THERNSTROM: Panel 1. We will
hear from distinguished Government officials. They
will discuss the enforcement of MEPA, the issue of
minority children in foster care. Participants are
Joan E. Ohl. And I hope I've pronounced your name
correctly. Commissioner of the Administration on
Children, Youth and Families at the U.S. Department of
Health and Human Services and Kay Brown, the Acting
Director of Education Workforce and Income Security
team at the Government Accountability Office.
Commissioner Joan E. Ohl, U.S. Department
of Health and Human Services. Prior to joining the
Bush Administration, Commissioner Ohl was West
Virginia's Secretary of Health and Human Services from
1997 to 2001. In addition she held a number of
positions in higher education, among these were Vice
President of the Independent College Fund of New
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1 Jersey and the Association of Independent Colleges and
2 Universities in New Jersey.
3 She has a master of education degree from
4 the University of Buffalo, New York.
5 Kay Brown, from the Government Accounting
6 Office, has more than 20 years of experience at GAO.
7 She is currently Acting Director in GAO's Education

8 Workforce and Income Security Team where she's 9 responsible for leading its work related to child 10 welfare, child support, domestic nutrition assistance 11 and other income security programs.

Previously in her role as Assistant Director, Ms. Brown managed projects that focused on improving government performance in the area of program integrity, customer service, human capital and process reengineering and privacy issues.

In addition, she has led teams evaluating foreign food assistance, refugee aid and disaster assistance. She has received numerous awards during her career at GAO, including two honor awards for meritorious service and several others for outstanding achievement, leadership and teamwork.

Prior to her work at GAO, Ms. Brown worked for a county welfare program where she first provided case work services and then managed a countywide child

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1	development program.
2	Ms. Brown has an MPA from the University
3	of Pittsburgh's Graduate School of Public and
4	International Affairs.
5	I welcome you on behalf of the Commission.
6	First, please come up.
7	(Panelists sworn)
8	VICE CHAIR THERNSTROM: I will call you in
9	the order you have been given for the record.
10	Commissioner Ohl, you speak for ten minutes. Please
11	proceed.
12	COMMISSIONER OHL: Thank you very much.
13	I've been invited here this morning in
14	order to provide the Administration's perspective on
15	the Multiethnic Placement Act, and more generally to
16	the extent to which race should be a factor in both
17	foster care and adoption placement decisions.
18	Specifically, the Commission has expressed
19	interest in the Administration's view on:
20	Whether the enactment of MEPA has removed
21	barriers to permanency facing children involved in the
22	child protective system;
23	Whether transracial adoption serves the
24	children's best interest or has negative consequences
25	for minority children, families and communities;
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9 How effectively our Department, the U.S. 1 2 Department of Health and Human Services, is enforcing 3 MEPA; The impact that HHS' enforcement of MEPA 4 5 has on the efforts of perspective foster care and 6 adoptive parents to adopt or to provide foster care for minority children, and; 7 8 Whether the enactment of MEPA has reduced 9 the amount of time that minority children spend in foster care or wait to be adopted. 10 I'm glad to be here this morning. It's my 11 12 hope that this briefing is going to lead to better understanding of the appropriateness of transracial 13 adoption and whether the purpose for which MEPA was 14 enacted is being achieved. 15 The Multiethnic Placement Act was signed 16 by President Clinton in 1994 as a part 17 of the 18 Improving America's Schools Program. 19 MEPA was enacted after a lot of debate about transracial adoption and same race placement 20 policies. At the heart of the debate is the need to 21 promote the best interest of children by ensuring that 22 23 they have permanent, safe, stable and loving homes suited to their individual needs. However, placement 24 25 delays and denials based upon illegal discrimination **NEAL R. GROSS**

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increased the risk that a growing number of children, and especially minority children, in the child protective system would never find a permanent home.

MEPA was broadly intended to remove and eliminate discrimination in child welfare both for the benefit of the children who need permanent homes and for the purpose of perspective parents who wish to provide permanent homes for children.

9 In 1996 MEPA was amended by the provisions of the "Removal of Barriers to Interethnic Adoption" 10 included 11 provisions in the Small Business Job 12 Protection Act of 1996. The IEP amendments were supposed to remove what members of Congress felt was 13 potentially misleading language in the original 14 15 provisions of MEPA and to further clarify that discrimination against children in need of suitable 16 homes or perspective adoption placements is illegal. 17

18 In addition, IEP strengthens the 19 compliance and the enforcement procedures including the withholding of federal funds and the rights of 20 individuals to bring an action in federal court 21 against the state or any entity which is alleged to 22 have violated MEPA. 23

Congress took a very significant step in passing MEPA and the amendments in order to bring our

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nation's child welfare policies in line with a body of established civil rights law. The law makes clear that race, color and national origin should not and may not preclude or delay any child from being placed into a loving and permanent home.

The debate about transracial adoption and 6 7 same race placement policies spurred MEPA. However, 8 to date there is no federal definition of transracial 9 adoption. Within the Bureau of Child, Youth and Data 10 Families, the Children's Bureau, the and Technology Division defines transracial adoption as 11 12 adoptions where the adoptive parents differ in at least one racial or ethnic characteristic from the 13 adopted child. Keeping in mind that definition the 14 15 research, most of which had been conducted by my panelists today 16 colleagues and here show that 17 transracial adoptees of color are no more likely to engage in negative social behaviors than white in-18 19 racial adoptees; are no more likely to engage in 20 criminal activity or drug use. And studies show that have transracial adoptees exhibited academic 21 competence, which is a clear sign of positive well-22 importantly transracial 23 being. And more adoptees experience speedier adopts than in-racial adoptees of 24 25 the whole reducing the time that color on those

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children are allowed to languish -- a term now synonymous with foster care -- in care without the benefit of a permanent family.

Using the AFCARS data, which is a data system that we collect, for example between 1996 and 2003 the average wait in time for an African American child was 17.7 months while the average waiting time for children of other races was 15 months.

With respect to the Multiethnic Placement 9 Act, this Administration can and should be credited 10 with taking decisive action on the enforcement front. 11 12 As a representative of ACF -- one of the two MEPA enforcement agencies and of course within HHS both 13 ACF, the Administration on Children and Families and 14 OCR, the Office of Civil Rights, work on this jointly. 15 I'm proud to say that we have moved beyond simply 16 providing interpretative guidance to taking action. 17 Action in the form of decisions which have found 18 19 states in violation of the law, and we have imposed 20 financial penalties mandated by MEPA for such 21 violations.

The first enforcement decision involved Hamilton County, Ohio in 2003. After a 42 year investigation the Office of Civil Rights issued a letter of findings concluding that Hamilton County in

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Ohio had violated MEPA as well as Title VI of the 1964 Civil Rights Act and ACF issued a penalty letter imposing a \$1.8 million penalty.

4 The letters of finding confirmed that under MEPA the child welfare workers cannot routinely 5 6 consider race, color or national origin in foster care 7 or adoption placement processes. OCR explained that, 8 other things, prohibits routine amonq MEPA 9 consideration of race, color or national origin in foster care, in adoption placement decisions, routine 10 considerations of race in the context of transracial 11 12 placement and applying different or more rigorous scrutiny to considerations of transracial placement as 13 compared to same race placements. 14

The second enforcement decision involved South Carolina in 2005. Here OCR issued a letter of findings explaining that North Carolina's Department of Social Services had violated both MEPA and Title VI and ACF issued a penalty letter imposing a penalty of \$107,481.07.

The letters of finding emphasized that 21 appropriate constitutional 22 strict scrutiny is an standard of review and that the law 23 forbids any routine consideration of race, 24 color or national 25 origin allowing its consideration on rare occasions,

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and even then to the degree that it can be demonstrated to be absolutely necessary.

Since the enactment of MEPA the two HHS 3 4 agencies, OCR and ACF, have taken additional steps to 5 ensure that the delays or denials in the placement of 6 children for adoption or foster care due to race, 7 color or national origin are eliminated. In addition 8 to these cases where the letters of findings, penalty 9 letters and other corresponding corrective action 10 plans have been issued, there are ongoing efforts in place to ensure effective MEPA compliance. 11

12 OCR has conducted over 130 investigations 13 of race, color or national origin discrimination in 14 child welfare practice and is engaged in compliance 15 efforts in numerous cases resulting in agreements by 16 several state agencies to modify their practices.

And ACF through policy statements and technical assistance has reinforced its commitment to rigorous enforcement of MEPA.

All tolled in terms of technical assistance 20 through National 21 our Resource Centers, the Administration on Children, Youth and Families has 22 engaged states in MEPA related compliance efforts and 23 trainings on nearly 50 different occasions since 1999. 24 25 The ability to foster or adopt a child

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without race, color or national origin discrimination warrants and receives our uninterrupted attention. Towards this end we are continuing to develop common protocols that will assist states in their efforts to implement policies and procedures that ensure nondiscriminatory practices in making foster care and adoption placement decisions. We similarly respond to states and other inquiries about MEPA on a regular basis.

The enforcement action and penalties taken 10 by MEPA enforcement agencies of the U.S. Department of 11 12 Health and Human Services ups the ante in the way that agency directors and agency workers are not likely to 13 disregard. The mandatory penalties for MEPA violations 14are steep and they cut into federal funds upon which 15 states depend on in order to operate their child 16 17 welfare system.

MEPA action against Hamilton 18 Α recent 19 County, Ohio and South Carolina in combination with other broad nationwide technical assistance efforts 20 certainty increased state's knowledge 21 have and awareness of what is and what is not accepted legal 22 practice. 23

The Commission has also inquired about whether MEPA has been effective in reducing the amount

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of time children spend in foster care. Let me address 2 that. The MEPA legislation was enacted in part to 3 prevent children from languishing in out-of-home care where foster or adoptive parents of the same race were 5 found. So when we look at whether the enactment of 6 MEPA has reduced the amount of time minority children 7 spend in foster care or wait to be adopted, it is 8 important to keep in mind the law's broader intended focus, which to eliminate was and remove discrimination in child welfare. 10

11 The Adoption and Foster Care Reporting 12 System, we call that AFCARS. Everybody has their little acronyms. Collects case information on all 13 children in foster care for whom child welfare 14 15 agencies have the responsibility for placement. In order to conclude that MEPA is the primary reason that 16 there may or may not have been a decline in time to 17 discharge and/or adoption for minority children, we 18 19 have to look at the impact of MEPA and what it might look like. I talked earlier about the definition that 20 we utilize. 21

22 Our data shows that the percentage of African American non-Hispanic children who are adopted 23 by at least one parent who differed from them in at 24 25 one characteristic or ethnic characteristic least

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1	increased between fiscal year 2000 and 2005 from 24 to
2	31 percent. It decreased for Hispanic children from
3	72 to 63. And decreased for white non-Hispanic
4	children from 11 percent to 8 percent.
5	Also, the amount of time to discharge in
6	foster care for African American children has declined
7	from 4 months from fiscal year 2000 to fiscal 2005, by
8	2 months for Hispanic children and not declined at all
9	for white non-Hispanic children.
10	The average time to adoption has declined
11	for 8 months for African American children, 7 months
12	for Hispanic children and 6 months for white non-
13	Hispanic children.
14	In effect, we cannot say that all of these
15	declines are solely a result of MEPA given that the
16	direction and the percentage change of transracial
17	adoption are different for African American and
18	Hispanic, that the trends are different for both
19	African American, Hispanic and white non-Hispanic
20	children. But it's likely that MEPA was one of the
21	causal factors in what we see as an encouraging
22	outcome.
23	One of the things we'd also have to take a
24	look at is the independent effects of the Adoption and
25	Safe Families Act, ASFA, in terms of the declines in
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I want to indicate that clearly MEPA has had an extraordinary positive and important impact on foster care and adoption experiences of individual children in families. But that number of children is not large enough to produce a trend that is on a national database such as the AFCARS' data.

8 I also want to say, and I know my time --9 VICE CHAIR THERNSTROM: Your time has 10 expired, yes.

COMMISSIONER OHL: -- has expired. 11 I also 12 want to indicate that as a part of looking at these outcomes, we do an extensive child and family service 13 review across the country in all states and D.C. and 14 Puerto Rico. And we look at MEPA. 15 We look at what states are doing in terms of the diligent recruitment 16 17 of foster parents and adoptive parents.

And so thank you for your time. I stand ready to answer questions. Obviously, my submitted statement had more data and information in it.

Thank you very much.

VICE CHAIR THERNSTROM: We are going to hold questions until after we hear Ms. Brown. And then we will have an opportunity with questioning both of you before we go on to the next panel.

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Ms. Brown?

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2 MS. BROWN: Good morning. I'm pleased to be here today to discuss our recent report on African 3 Americans in foster care. As you may know, according to HHS data children of all races are equally likely to suffer from abuse and neglect. However, African 6 American children across the nation were more than 8 twice as likely to enter foster care compared with white children in 2004.

also 10 State data show of patterns disproportionate representation in foster care 11 for 12 Native American children and in certain locations for Hispanic and Asian subgroups. However, our report 13 focuses on African American children. 14

Concerned about why these children are 15 over represented in foster care, the Chairman of the 16 House Committee on Ways and Means asked GAO to study 17 three things. 18

19 First: The major factors that influence the proportion of African American children entering 20 21 and remaining in foster care compared to children of other races and ethnicities. 22

23 Second: The extent that states and localities have implemented strategies that appear 24 25 promising in addressing this issue, and;

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The ways in which key federal Third: 2 child welfare policies may have influenced this issue. Our report is based on the results of a 4 nationwide web-based survey of state child welfare 5 administrators in 50 states and the District of 6 Columbia, as well as site visits to five states, 7 analyses of state reported data and interviews with 8 cognizant federal agency officials, researchers and 9 issue area experts.

First, it is important to understand the 10 factors that cause African American children to enter 11 12 foster care in higher proportions than other children. child welfare directors and researchers 13 State complex set of interrelated factors 14 reported а beginning with a higher rate of poverty among African 15 American families. While children of all races live 16 17 degree, nationally African in poverty to some Americans are nearly four times more likely than 18 19 others to live in poverty.

Studies have 20 shown that under these circumstances families have difficulty gaining access 21 to social services, counseling and appropriate housing 22 can help families stay together. 23 that However, research suggests that these factors do not fully 24 25 account for the differing rates of entry into foster

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care. State child welfare directors we surveyed also responded that bias or cultural misunderstanding and distrust between child welfare decision makers and the families they serve also contribute to the disproportionate removal of children from their homes.

Once African American children are removed 6 from their homes, HHS data show that they remain in 7 8 foster care about 9 months longer than white children. 9 State officials attributed these longer lengths of 10 stay to similar factors, such as challenges parents 11 have in qaining access to subsidized housing, 12 substance abuse treatment and other services that may be needed before children can be reunified with their 13 families. 14

For children who cannot be reunified with their families, state officials reported difficulties in finding appropriate permanent homes. In part, because of the challenges in recruiting adoptive parents who are willing to adopt older youth or youth with special needs.

In addition, African American families are more likely than white families to rely on relatives to provide foster care. Although this type of foster care placement known as kinship care can be less traumatic for children, it is also associated with

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longer lengths of stay in care.

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2 In terms of our second objective on state our survey 3 actions, most states in reported 4 implementing some strategies that experts have 5 identified as promising for reducing African American representation in foster care. While researchers and 6 officials stress that no single strategy would fully 7 8 address the issue, strategies that specifically 9 addressed the causes I mentioned above included those 10 designed to increase access to support services; reduce bias through efforts such as staff training and 11 12 use of formal risk assessment tools and increase the availability of permanent homes including searching 13 for fathers and paternal kin. 14

Turning to our third objective on federal policies, states reported that they considered some federal policies helpful in decreasing disproportionality while they viewed other federal policies as having the opposite effect.

Linking back to the factors contributing to disproportionality, about half of the child welfare directors we surveyed reported that their ability to use federal social services block grants such as TANF, the Temporary Assistance for Needy Families grant, was helpful. These grants, when used for preventive

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services and family supports, can be particularly relevant for African American and other families living in poverty.

States also considered federal policies 4 5 promote adoption as helpful. One federal that 6 adoption policy considered beneficial is the requirement under MEPA to diligently recruit minority 7 8 adoptive families. In our survey 22 states reported 9 that this requirement contributes to a decrease in the proportion of African American children in care. 10 However, it should be noted that state officials said 11 12 challenge to recruit a racially it was а and ethnically diverse pool foster 13 of and adoptive parents. And HHS has reported that more than half of 14 states are not meeting the federal performance goals 15 for this recruitment. 16

17 State officials noted the shortage of willing, appropriate, and qualified parents to adopt 18 19 African American children and particularly older children. Researchers cited a lack of resources among 20 state and local agencies and a lack of federal 21 guidance to implement new recruiting and training 22 23 Perhaps because of these challenges nine initiatives. survey reported that 24 states in our the policy 25 requiring diligent recruitment had no effect on the

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proportion of African American children in care and 15 states reported that they were unable to tell.

Another federal adoption policy states considered helpful in reducing disproportionality was the provision that provides subsidies to parents who adopt a child with special needs. In this case special needs is a state defined term for children having characteristics that the states believe make adoption more difficult, such as being of older age, having a disability or being a member of a minority group.

In 2003 through 2005 HHS data showed that 11 12 states designated more than 80 percent of adoptions as special needs adoptions, thus enabling families to 13 federal financial subsidies receive for these 14 15 adoptions. However, despite these subsidies over the five years African American children 16 last have consistently experienced lower rates of adoption than 17 children of other races and ethnicites. 18

19 Conversely, states reported being constrained by the lack of federal subsidies for legal 20 guardianship. Legal guardianship is formally 21 recognized under federal law as a permanent placement 22 option and is available for relatives who want to 23 children without necessarily 24 permanently care for 25 adopting is considered them. As such, it а

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1 particularly important way to help African American 2 children exit foster care. In fact, subsidizing guardianships has demonstrated its value in providing 3 permanent families for children and in reducing the 4 5 number of African American children in foster care. 6 It may also be cost effective based on the experiences of the states that implemented this strategy in using 7 8 federal waivers. Because of these factors, it may be 9 appropriate to reconsider the current distinctions 10 that provide subsidies for adoption but not 11 quardianship.

12 Not all federal adoption policies were considered helpful by states. For example, the MEPA 13 provision encouraging race neutral adoptions 14 was reported by state child welfare directors to have less 15 than other policies in reducing African 16 effect 17 American representation in foster care. Although 15 states reported that this provision would help reduce 18 19 disproportionality, 18 states reported that this provision had no effect, and an additional 12 states 20 reported that they were unable to tell. 21

An HHS study reported in 2004 that implementation was hindered by confusion about what the law allowed or prohibited. And state officials in states we visited recently said that ongoing confusion

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and disagreement continued to hinder implementation.

In conclusion, I would emphasize that issues surrounding the disproportionate representation of African American children in foster care are pervasive, continuing and complex. They appear at each decision point in the child welfare process. They effect nearly all states in this nation to varying degrees.

reduce African American 9 In efforts to 10 representation in foster care, state and local child welfare officials face numerous challenges. Despite 11 12 the steps that HHS has taken to disseminate information about these strategies, states report that 13 they need further information and technical assistance 14to strengthen their current efforts. 15

This concludes my statement. Thank you.

VICE CHAIR THERNSTROM: Well, thank you very much for both of you. And it is time for Commissioners to ask questions. And let me take the prerogative of the Chair to start out.

As I'm leafing through the information you provided, I do see some helpful charts giving us some data. But I don't see some numbers that interest me; that is precisely or not precisely, roughly how many children broken down into various racial and ethnic

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1	groups are put up for adoption on average annually or
2	who have been up in recent years for adoption?
3	COMMISSIONER OHL: Currently there are
4	approximately 500,000 children in the foster care
5	system in this country. And 115,000 of those children
6	in a given year are, in effect, ready to be adopted.
7	VICE CHAIR THERNSTROM: But I want the
8	racial and ethnic breakdown.
9	COMMISSIONER OHL: I don't know whether
10	one of my colleague I don't have that in front of
11	me. I'll see whether one of my colleagues has that
12	with me or not.
13	VICE CHAIR THERNSTROM: Ms. Brown, do you?
14	MS. BROWN: No. We have the chart that
15	shows the adoption rates for all children broken down
16	by different ethnicites, but that doesn't answer your
17	question about the numbers of children available for
18	adoption.
19	VICE CHAIR THERNSTROM: Yes. I mean, I
20	want to know who is available for adoption broken down
21	by race and ethnicity. And then I want to know in
22	terms of parental interest what the number of parents,
23	and again broken down by race and ethnicity.
24	COMMISSIONER OHL: This is an '04 number.
25	I gave you 115,000 children who are waiting and ready
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1	to be adopted. Of that, 38,000 would be Black non-
2	Hispanic, 2 percent Alaska Native
3	VICE CHAIR THERNSTROM: The 38,000
4	represents what percent?
5	COMMISSIONER OHL: 38,000 is 38
6	percent.
7	VICE CHAIR THERNSTROM: 38 percent.
8	COMMISSIONER OHL: Percent. Two percent
9	VICE CHAIR THERNSTROM: Are African
10	American?
11	COMMISSIONER OHL: Are African American.
12	14 percent Hispanic, 38 percent white non-Hispanic.
13	VICE CHAIR THERNSTROM: What was that
14	number again?
15	COMMISSIONER OHL: 38 percent white non-
16	Hispanic.
17	VICE CHAIR THERNSTROM: Okay. So Black
18	and white basically the same percentage?
19	COMMISSIONER OHL: The same percentage.
20	Hispanic 14 percent. That's 7690. Unknown, unable to
21	determine, 3 percent. Two or more non-Hispanic 4
22	percent. And American Indian/Alaska Native 2 percent.
23	VICE CHAIR THERNSTROM: So we've got
24	negligible Asian American children in there, I assume,
25	in those numbers?
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1	COMMISSIONER OHL: Yes.
2	VICE CHAIR THERNSTROM: Okay. You've got
3	38 percent of these children are Black, 38 percent
4	white.
5	COMMISSIONER OHL: 14 percent Hispanic.
6	VICE CHAIR THERNSTROM: Yes. What year was
7	this for?
8	COMMISSIONER OHL: This was 2004.
9	VICE CHAIR THERNSTROM: 2004.
10	COMMISSIONER OHL: And we would just
11	coming out with 2005 numbers now.
12	VICE CHAIR THERNSTROM: And if we look at
13	the parental pool, what percentage of the parents are
14	white, what percentage of the parents are black? In
15	other words, the potential adoptive homes here?
16	COMMISSIONER OHL: That would be data
17	which is state data. I'm just looking to see. Are we
18	carrying any data like that with us? Yes, we don't
19	collect that. That data would be in effect data which
20	would be collected on a state level.
21	VICE CHAIR THERNSTROM: Oh, on a state
22	level? But can we assume that if we've got 38 percent
23	of the children that are available for adoption Black,
24	we do not have 38 equivalent percentage of families
25	who are African American? You probably have many more
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families eager for adoption, a disproportionately high number that are white? Would that be correct?

3 COMMISSIONER OHL: I can't tell you that 4 definitively because I don't have that data in front 5 of me. What I can tell you, and what I was getting 6 ready to tell you in the testimony was we look at this when we do the child and family service reviews. We 7 8 look at the recruitment and the availability that 9 states have of foster and adoptive homes. And this is something that is an outcome based child and family 10 service review that we're now doing the second round. 11 12 And where there are difficulties, and for instance I was talking with Commissioner Melendez earlier today 13 because I've been doing a lot of work in Nevada, where 14we work in states where there are a number of American 15 Indian children. We look carefully in the same way: 16 17 Are there sufficient adoptive placements that meet the needs of children and reflect the diversity of the 18 19 children who are both in foster care and ready to adopted. 20

So, I can't give you specific numbers because they'd be on a state level, but I can tell you how we look at them when we do the child and family service reviews.

VICE CHAIR THERNSTROM: Yes. And then,

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1 Ms. Brown, I have one quick question or comment for 2 You mentioned in terms of a high number you. of 3 African American children. You mentioned the factor of 4 high poverty among African Americans. But, of course, 5 there is a very closely related fact, and that is the high number of families headed by a single mother in 6 the African American community, which surely has much 7 8 to do with the number of Black children available for 9 Family structure has got to be part of this adoption. 10 picture? 11 MS. BROWN: Yes. VICE CHAIR THERNSTROM: And it also has to 12 on the availability of adoptive impact 13 have an Because, obviously, young single mothers are 14 parents? 15 not going to be looking for another child to adopt. MS. BROWN: The data that we have does 16 17 indicate that children in single parent families are more likely to be at risk of harm. 18 VICE CHAIR THERNSTROM: Well, and then we 19 look at the percentage of African American children 20 born to single parent households. And, of course, it's 21 very, very high. 22 23 MS. BROWN: Yes. VICE CHAIR THERNSTROM: So, I mean I think 24 25 that's an important part of that picture. **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. (202) 234-4433 WASHINGTON, D.C. 20005-3701 (202) 234-4433

32 COMMISSIONER OHL: Can I say one other 1 2 thing based upon your asking me about particular data? 3 VICE CHAIR THERNSTROM: Yes. 4 COMMISSIONER OHL: I think you indicated 5 introduction that I in my used to be а state 6 secretary. 7 VICE CHAIR THERNSTROM: Right. COMMISSIONER OHL: And so I needed -- on 8 9 much that level looking effective very on at 10 strategies that would reach out in order to recruit 11 the adoptive and foster care parent, we worked faith 12 extensively with and community-based organizations. We worked with the One Church, One 13 Child Initiative. In effect, really trying to be sure 14 that we had a diversity of potential placements both 15 foster care and adoption. And it does take diligent 16 recruit efforts in order to do that. And that's what 17 we then hold states accountable for doing. 18 VICE CHAIR THERNSTROM: 19 And my point is simply given kind of the demographic facts on the 20 ground and most notably the high percentage of single 21 parent households in the African American community, 22 23 there's a ceiling, the degree to which you can recruit Black families as adoptive parents, or that single 24 25 fact makes it much more difficult.

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33 Other people must have questions. 1 2 COMMISSIONER MELENDEZ: Yes. Commissioner Melendez here. 3 really 4 Т think those statistics are 5 important because it really would tell us whether or not we're recruiting minority parents to be available. 6 Because otherwise if we don't have a handle on that, 7 8 basically those disproportionate statistics will grow 9 even more wide. So I was just wondering what are we recruit minorities 10 actually doing to to become available for adoption? 11 12 COMMISSIONER OHL: We have done, as Ι mentioned earlier, extensive trainings 13 across the country with states in terms of how it is that they 14 15 would go about recruiting. have a national AdoptUSKids 16 We also And it includes both training and technical 17 program. assistance. It includes a website which on the website 18 19 is for people who have gone through home studies that are cleared for both foster care and adoption. 20 They 21 have an opportunity then to see children, profiles on children. And through that website in the last -- we 22 23 launched that about 32 years ago. Through that website we have now removed the names of 8500 children 24 25 who were on that website. And we expect to hit 10,000

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relatively soon.

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So this is something about which we do a huge amount of training and technical assistance.

4 You may well have seen a number of public 5 service announcements that we have done campaigns in tandem with the Ad Council. And as a matter of fact, 6 we did an initial campaign with the Ad Council, and 7 8 then we did what we called a repositioning of the campaign. 9 Because we were really targeting trying to recruit adoptive families for older children, older 10 And that campaign just recently got a 11 than 9. 12 national award.

So we are working as comprehensively as we can with states and both from an outreach standpoint, a training and technical assistance standpoint. And in order to generate more adoptive and foster care placement.

18 COMMISSIONER MELENDEZ: It sounds like19 we're doing some broad education.

COMMISSIONER OHL: Yes.

21 COMMISSIONER MELENDEZ: But what is the 22 minimal training and education you think families 23 adopting transracial children should have? I mean, 24 every state probably has some flexibility to do it 25 differently even though on a national level we're

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doing some educational things like you're talking about. But I think instruction to people within each state, what do you think we need to do more to --

4 COMMISSIONER OHL: But I think one of the 5 things that we're currently working with the Office of 6 Civil Rights on is putting together a PowerPoint 7 presentation which is targeted exactly at the 8 community level. That's the state and the community 9 And I think that, obviously, states set their level. We in effect work with 10 own training requirements. them in terms of overall kinds of things. We provide 11 12 them technical assistance. But they have funding, for instance that comes from Title IV B. You're talking 13 about supportive families, family preservation. 14 That 15 money goes to the states and then they use those funds in ways in order to work with families both in the 16 17 preparation for and the support of families after adoptions are made. 18

19 That's not a large funding stream. And 20 I'm more than happy to talk about funding at some 21 point in time, if somebody would like to talk about 22 that. But how that is done is done at the state 23 level.

I indicated that we're about ready. We're working right now and we hope within the next quarter

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1	or so to have this webcast training, which we think is
2	going to be very helpful for states and communities.
3	VICE CHAIR THERNSTROM: Yes. But so now
4	you have a video that you send?
5	COMMISSIONER OHL: No, no, no. We're
6	going to it's in effect we'll be available. When
7	you do a webcast, it can be done immediately in a
8	large nationwide way. But then it's available to
9	anybody anytime. It can be viewed. And this is the
10	great thing in terms of the internet with trainings
11	that can be done. But you can access it, you as
12	either a state or community level or an agency could
13	be able to access 24 hours a day, 7 days a week, 365
14	days a year.
15	VICE CHAIR THERNSTROM: I'm sorry,
16	Commission Melendez. And I'll give it right back to
17	you. I'm just following up on your question here.
18	But at the moment suppose I'm a
19	prospective parent. Is there something like a video I
20	could look at
21	COMMISSIONER OHL: Absolutely.
22	VICE CHAIR THERNSTROM: on the whole
23	question?
24	COMMISSIONER OHL: There's a lot of
25	material on AdoptUSKids site. We have lots of other
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37 1 materials, Q&As, a variety of things that are 2 available. Also, individual requests come to us and 3 4 we respond to them all. 5 VICE CHAIR THERNSTROM: All right. But this webinar of COMMISSIONER OHL: 6 things is new and different and it will be out within 7 8 a few months. 9 COMMISSIONER MELENDEZ: Okay. Just one 10 more question. Whatever we do at the local level within each state, do you think that we're going to be 11 12 able to measure how effective we are over a period of time as to how well we did in recruiting minority 13 potential parents? 14 15 COMMISSIONER OHL: We look at it annually in terms of plans that states submit to us as part of 16 17 their IV B funding. We are looking at it extensively in the child and family service reviews. And just so 18 19 that you understand, when we do those reviews we pull records, we look extensively at cases and everybody 20 involved in that case. We want to look at child 21 welfare practice on the ground. That's what's got to 22 change in this country. You've got to change the 23 child welfare system. You've got change child welfare 24 25 practices systemically across this country. And it's **NEAL R. GROSS**

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got to be done between that system working in coordination and collaboration with the court system. And that's what the child and family service review is about. And we're in round number two. We are completing the 14th state this year in round number two.

7 There have been program improvement plans 8 in every state, the District of Columbia and Puerto 9 Rico. There is change happening in child welfare 10 across this country. It may not be as quick as some 11 people might wish and we might wish, but systemic 12 reform takes a long time to undertake.

Along the way, I again indicate as I would like, if anybody would like to talk about, I would like to talk about the financing system. Because those two things go tandem, they go hand-in-hand.

VICE CHAIR THERNSTROM: Well, the record is open. And if you would like to add some more. The problem is we've got three panels this morning and so I'm reluctant to get into a big discussion. But I would very much like to have your statement on what you see as the funding problems.

COMMISSIONER OHL: Yes, we have it. And I think this refers directly to one of the points that the GAO made in their study. And that has to do with

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39 1 the issue of subsidized guardianship. And we have done that under a waiver. And we have done it in a number 2 3 of states in waivers. And some of the results -- Kay 4 is absolutely correct. Some of the results have been 5 really, really good. But subsidized guardianship it's in effect not under -- it's currently not the way the 6 7 IV E program is set up. And so we have had a financing option that we have put out, which in effect would 8 9 give states much more flexibility with the use of 10 their funding, which gets to some of the in community, 11 in home up front more preventive kinds of things. And we think that that needs to happen. 12 VICE CHAIR THERNSTROM: Well, please feel 13 free to supplement the materials you have already sent 14 15 in. I'll be happy to do COMMISSIONER OHL: 16 17 that. VICE CHAIR THERNSTROM: Have other people 18 got questions before we move on to the second panel? 19 COMMISSIONER TAYLOR: A couple of very 20 pointed questions. I'm trying to acknowledge our time 21 limitation here this morning. 22 I noticed during the breakdown that the 23 Asian cohort is negligible as you mentioned. What is 24 25 going on in the Asian communities such that those **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W.

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1	numbers are negligible?
2	COMMISSIONER OHL: I think that probably
3	has a lot to do with how families take care of one
4	another. I think the same is, you know, in effect work
5	with where there might be issues with families,
6	families step in in order to help. And often times
7	those children then don't come to the attention of
8	COMMISSIONER TAYLOR: Let me ask the
9	question a different way. It seems to me to be the
10	other side of the coin you all have clearly examine;
11	that is what's going on in the African American
12	family.
13	COMMISSIONER OHL: Yes.
14	COMMISSIONER TAYLOR: So I'm wondering
15	what is going on in the Asian community that is not
16	going on in the African American community
17	specifically. To me it just something's going on.
18	COMMISSIONER OHL: Yes.
19	MS. BROWN: I don't have the data to
20	answer that question.
21	COMMISSIONER TAYLOR: Okay.
22	MS. BROWN: The focus of our study was
23	African American children.
24	VICE CHAIR THERNSTROM: Well, wait a
25	minute. You do know the answer to that. The answer is
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1	a much higher percentage of intact families.
2	COMMISSIONER OHL: Right. Absolutely.
3	COMMISSIONER TAYLOR: It just seems to me
4	the question that's most obvious.
5	VICE CHAIR THERNSTROM: Right. Yes.
6	COMMISSIONER TAYLOR: I'm not an expert in
7	the area.
8	VICE CHAIR THERNSTROM: That's what
9	Commissioner Taylor is getting at. And the answer is
10	clear.
11	COMMISSIONER OHL: Yes.
12	COMMISSIONER TAYLOR: Let me ask another
13	question. Special needs now includes minority
14	children? The definition of special needs. How long
15	has that been the case?
16	VICE CHAIR THERNSTROM: Now wait a minute.
17	No, that's not correct, is it? That by definition if
18	you're
19	COMMISSIONER TAYLOR: Yes.
20	VICE CHAIR THERNSTROM: a minority
21	child
22	COMMISSIONER TAYLOR: Right. How long has
23	that been the case?
24	MS. BROWN: Well, states have the ability
25	to determine which factors make it difficult
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1	VICE CHAIR THERNSTROM: I see. Okay.
2	MS. BROWN: for children to be adopted.
3	VICE CHAIR THERNSTROM: Oh, I see. I'm
4	sorry. Yes. Okay.
5	COMMISSIONER OHL: All I can tell you is
6	when I was a state secretary ten years ago
7	COMMISSIONER TAYLOR: That was the case?
8	COMMISSIONER OHL: it was the case.
9	COMMISSIONER TAYLOR: Okay.
10	COMMISSIONER OHL: It was the case. Also
11	sibling groups. It depends upon and the way defined it
12	sibling groups, older children.
13	COMMISSIONER TAYLOR: And so states are
14	permitted to deem a child to be of special needs if
15	they fall into any minority classification, is that
16	true? Any minority classification? Okay.
17	MS. BROWN: Based on their views of what
18	would make adoption difficult for that group.
19	VICE CHAIR THERNSTROM: But if you go back
20	to the Asian question, certainly adoption of Asian
21	kids is not difficult, I would assume, or doesn't pose
22	the same difficulties?
23	COMMISSIONER TAYLOR: Thank you.
24	Anybody else got any questions? Anybody
25	on teleconference got any questions? Or not
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1	teleconference, coming in by phone.
2	Well, with that then I want to thank you
3	very much.
4	COMMISSIONER OHL: You're very welcome.
5	VICE CHAIR THERNSTROM: And, again, please
6	feel free to throw into the record anything else you
7	would like to add to your statements this morning.
8	And this is very informative, very helpful. And we do
9	appreciate your taking the time to do this.
10	PANEL 2
11	VICE CHAIR THERNSTROM: So the topic of
12	the second panel is The Best Interest of Children and
13	the Role of Race. The panel consists of:
14	Joseph Kroll, Executive Director of the
15	North American Council on Adoptable Children;
16	Dr. Rita Simon, university professor in
17	School of Public Affairs at Washington College of Law
18	at American University;
19	And our third speaker will be J. Toni
20	Oliver, Co-Chair Family Preservation Focus Group of
21	the National Association of Black Social Workers.
22	But we are actually, I had forgotten, we
23	are actually changing the order here so that J. Toni
24	Oliver goes first. This is at the request of those of
25	the panelists. J. Toni Oliver goes first, Joseph
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1	Kroll goes second and Dr. Rita Simon goes last, but
2	not least.
3	COMMISSIONER BRACERAS: Excuse me.
4	VICE CHAIR THERNSTROM: Yes.
5	COMMISSIONER BRACERAS: I just wanted to
6	let you all know that at some point I'm going to have
7	to hop off the phone, but then I will be calling back
8	in to listen to the remainder of testimony. So if
9	there are beeps or interruptions, I apologize. But I
10	will be off for a little while and then coming back
11	into listen.
12	VICE CHAIR THERNSTROM: Good. We welcome
13	your presence whenever you can provide it.
14	COMMISSIONER BRACERAS: Thank you.
15	VICE CHAIR THERNSTROM: So, J. Toni
16	Oliver, who is President and CEO of Roots,
17	Incorporated, the first adoptive agency in Georgia to
18	focus solely on improving adoption opportunities for
19	African American children. And in addition, Ms. Oliver
20	is President of J.T. Oliver & Associates, a child
21	welfare training and consultation firm based in
22	Atlanta, Georgia.
23	Currently Roots serves more than a 100
24	families per month who are actively engaged in the
25	adoption process and has placed nearly 400 children
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with permanent adoptive families.

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In 1999 Ms. Oliver was program manager for adoptions with the Child and Family Services Agency in D.C. She served as Director of Consultation and Training Services for the Child Welfare Institute in Atlanta and was Associate Director for Training and Consultation for the National Adoption Center in Philadelphia, Pennsylvania.

9 She holds a master's degree in social work10 from Temple University.

Joseph Kroll, Executive Director of the North American Council on Adoptable Children. Mr. Kroll directs an acclaimed nonprofit that serves thousands of adoptive parents each year, strives to improve the child welfare system for foster children and the families who care for them.

His work includes talking with individual families about how to obtain post-adoption support training and parent group leaders, and other foster and adoptive parents. And testifying before Congress and speaking at the White House to achieve needed system reforms to better serve vulnerable children and families.

Rita J. Simon is a sociologist who earned her doctorate at the University of Chicago in 1956.

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46 Before coming to American University in 1983 to serve as Dean of the School of Justice, she was a member of the faculty at the University of Illinois, at the Hebrew University in Jerusalem, and the University of Chicago.

She is currently what's called 6 а 7 university professor in the School of Public Affairs 8 the Washington College of American in Law at 9 University.

38 10 She has authored books including Dr. Simon 11 several examining transracial adoption. 12 says "The bottom line on all the studies that have been done is that transracial adoption serves the 13 children's best interests." 14

Her books include Adoption, Race and
Identity and The Case for Transracial Adoption.

So, I welcome all three panelists. And Icall on J. Toni Oliver to start us off.

MS. OLIVER: Good morning.

What I'd like to do this morning is to show how racial disparities in all level of child welfare decision making create a problem that MEPA addresses by ignoring these problems. My intent is to make a case that shows how MEPA does not remove barriers to permanency facing children involved in the

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foster care system. In fact, MEPA ignores or even worse, accepts racial disparities on the front end of the child welfare services and jumps to the back end and chooses to focus on one of the resulting outcomes. And has in no way eliminated discrimination in child welfare.

In recognition of disproportionality in 7 child welfare service, a redeeming feature of MEPA is 8 9 the inclusion of a requirement to recruit prospective foster and adoptive parents reflective of the ethnic 10 and racial communities of the children in foster care. 11 12 However, enforcement decisions on this requirement ignored since the inception 13 have been of this legislation. 14

And what I'd like to do now is to give an 15 historical perspective of how racial disparities have 16 17 created and maintained key problems in service delivery that MEPA does not address together with a 18 19 review of the literature cited in Dorothy Robert's book, Shattered Bonds. 20

The foster care population has doubled in the last two decades from 262,000 in 1982 to 586,000 in 1999. Growth in the 1980s was concentrated in cities with sizeable Black populations. It is important to note that Black families are more likely

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than any other ethnic group to have their children taken from them and placed into foster care.

In 1986 Black children who made up 15 percent of the nation's population of children under 18, made up 25 percent of those entering foster care and 35 percent of those remaining in foster care at the end of the year.

According to the U.S. Department of Health 8 9 Human Services' AFCARS report Black children and represented 42 percent of all the children in foster 10 care at the end of October 2000, even though they 11 12 represented only 17 percent of the nation's youth. Latino and Asian children are under represented. 13 Latino children make up 15 percent of the foster care 14 15 population but outnumber Black children in the nation's population. 16

In 1995 California reported that 5 percent of all Black children were in foster care compared to less than one percent Latino. Asian Pacific Islander children represent only one percent of the nation's foster care system.

In large states such as California, Illinois, New York and Texas the proportion of Black children ranges from three times to more ten times that of white children. And the foster care system in

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these cities is almost exclusively Black.

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2 For example, Black children represent more than 75 percent of the Illinois foster care system, 95 3 4 percent in Chicago, over 70 percent in San Francisco. 5 At the end of 1997 in New York City of the 42,000 children in foster care, only 1300 or 3 percent were 6 Black and Latino children make up 73 percent 7 white. 8 and 24 percent respectively of New York City's foster 9 care population. And Central Harlem, one in three Black children are placed into foster care while the 10 odds for white children is one out of 385. 11 White 12 children make up 30 percent of New York's general population, but only 3 percent of its foster care 13 population. 14

15 Over representation is greater in areas where Black families are fewer in number. Researchers 16 call this the "visibility hypothesis." A comparison 17 of foster care in Census data in California reveal 18 19 that where Blacks constitute 15 percent of the Census, 20 they are placed at a rate three times greater than their Census proportion. Where they constitute less 21 than 2 percent of the Census, their placement rate is 22 15 times greater. 23

In 1997, a U.S. Department of Health andHuman Services' national study reported that minority

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1	children, in particular African American offsprings,
2	are more likely to be in foster care placement than
3	receive in-home services when they have the same
4	problems and characteristics as white children.
5	To the Commission's question does
6	transracial adoption serve the best interest or does
7	it have negative consequences for minority children,
8	families and communities. My response is that the
9	child welfare system as a whole has negative
10	consequences on this population.
11	In order to address the effect of child
12	welfare policies on African American families it is
13	critical understand how race influences child welfare
14	decision making in general.
15	The child welfare system is designed to
16	detect and address neglect and abuse in poor families,
17	and African American families are disproportionately
18	poor. With rare exception children in foster care
19	come from poor families.
20	Dorothy Roberts cites study after study
21	that shows poverty, not maltreatment, is the single
22	most important predictor of placement in foster care,
23	and the amount of time spent there. These studies
24	show that poor children are more likely to be reported
25	to child protective services, more likely to have the

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51 1 reports substantiated, more likely to be removed from their home, and more likely to remain in substitute 2 care for long periods of time. 3 4 In 1996 a study shows that the level of 5 poverty also matters. In this study Census figures in state protective services data showed that hiqh 6 7 zip codes have three times poverty as many 8 substantiated physical abuse cases compared to medium 9 poverty zip codes. A 1992 study revealed that children whose 10 families received welfare are at the greatest risk for 11 12 involvement with the child welfare system, especially for neglect. 13 The over representation of poor children 14 is felt to be due more to greater monitoring of poor 15 families, public hospitals as opposed to private 16 17 doctors, police cruising neighborhoods, public building, home inspectors and a higher incident of 18 19 reporting rather than higher incident of abuse. According to one researcher middle class families have 20 leeway for irresponsibility that poverty does not 21 Poor people have very little margin for 22 afford. irresponsibility or mismanagement of either time or 23 24 money. 25 A Los Angeles child welfare administrator

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1 conceded before a congressional subcommittee that 2 about half of the children in his system were removed 3 from their home because of poverty. African American 4 families are three times as likely as white families 5 In fact, the percentage of African to be poor. 6 American families whoever lived in poverty while 7 growing up is about the same percentage of white 8 children who never did. Poverty alone subjects African 9 Americans to a form of intensive inspection that few 10 parents must endure.

rationale 11 The argument and for over 12 representation of African American children in foster care includes explaining poverty as stress that brings 13 abuse and neqlect in larger 14 about proportions. 15 However, if poverty were to explain the racial disparity of African American and Latino communities 16 who have the same percentage of households who earn 17 less than \$15,000, the income level most highly 18 19 associated with maltreatment, should show similar involvement. The data, however, suggests otherwise. 20

A study in San Diego where 30 percent of African American and 28 percent Latino children live below the poverty line, Latinos were placed identical to their population, however African Americans were placed at a rate six times their Census proportion.

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Inadequate housing is cited by several studies as the reason Black children come into foster care and why they are not reunited with their parents. In an article written in 2000 indicate a parental income is a better predictor of the removal from the home than is the severity of the alleged child maltreatment or the parent's psychological makeup.

8 The U.S. Department of Health and Human 9 Services' 1997 National Study found that Black 10 children in foster care are more likely to come from families who have housing problems. 11 The same study 12 discovered that among families with housing problems, white families are offered housing services at almost 13 twice the rate as Black families; 43 percent versus 25 14 15 percent. Black families are more likely offered parenting skills services which do not compare with 16 the concrete benefits of housing services offered more 17 often to white families. 18

19 According to the latest National Incidence Study of Child Abuse and Neglect Black parents are no 20 more likely than others to mistreat their children, 21 and the rates of maltreatment are the same for single 22 parent and two parent families when income is held 23 24 constant. While this report found that strong 25 connection between income and child maltreatment,

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poverty alone breeds inspection into the families greater than any other factor. The National Incidence Study findings suggest that different race ethnicities receive differential attention somewhere during the process of referral, investigation and service allocation. And that the differential representation of minorities in the child welfare population does not derive from inherent difference in the rates at which they are abused or neglected.

Racial bias in reporting child abuse is 10 documented by research that provides strong evidence 11 12 that Black children are more likely to be identified as abused than white children with similar injuries. 13 Racial bias in reporting of drug use shows that drug 14 15 testing occurs almost exclusively in public hospitals that serve poor communities. Private physicians who 16 17 treat affluent women to refrain from drug testing.

Further controlling for other variables, black women are far more likely to be reported for prenatal substance abuse and to have their newborns placed in foster care.

Racial discrimination is not just poverty, and not just poverty plays an independent role in decisions about drug affected infants. In 1991 a study in the New England Journal of Medicine found

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55 1 little difference between drug use along either racial 2 or economic lines, yet African American women were ten 3 times more likely than their white counterparts to be 4 reported to government authorities. 5 In 1993 a study of women whose newborns tested positive for cocaine found African American 6 7 women were 72.9 more likely than white and twice as 8 likely as Latino women to have their babies removed by 9 child protective services. If I could give one closing comment. 10 Ι know that the time --11 VICE CHAIR THERNSTROM: Sure. One closing 12 comment. 13 OLIVER: By promoting adoption so 14 MS. myopically, MEPA legislation punishes poor families 15 and disproportionally African American families by 16 taking their children with too little energy being 17 focused on the injustice of the foster care system 18 19 that stems from too many children being removed from their homes, not too few adopts. 20 VICE CHAIR THERNSTROM: And we are moving 21 on to Joseph Kroll at this point. 22 Thank you, Madam Chair. 23 MR. KROLL: I noticed I have typo on the first thing. 24 25 I thought the Chairman was going to be the Mr. so, **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. WASHINGTON, D.C. 20005-3701

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1	Madam, now I'll get that correct.
2	VICE CHAIR THERNSTROM: Well, it usually
3	is a Mr.
4	MR. KROLL: I looked at the list and I
5	guessed wrong.
6	I want to make one thing real clear here,
7	and I want to share a picture. I'm not sure if this
8	for the record. This is a picture from my daughter's
9	wedding three weeks ago. Mei-Lin Chang Hee Yung
10	married Nak Yoon Yung. I'll show it to the back of the
11	room as well.
12	I would prefer
13	VICE CHAIR THERNSTROM: Congratulations,
14	by the way.
15	MR. KROLL: I would prefer to be showing
16	the whole slide show of the wedding, but I will not do
17	that.
18	I show that picture to make it very clear
19	that in my world in my family we have incredibly
20	successful over attached transracial adoption of a
21	young women. And I'm going to share
22	VICE CHAIR THERNSTROM: What was over
23	attached mean?
24	MR. KROLL: Over attached, she's 31 and
25	she pretty much calls home a couple of times a week,
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both before being married, after being married.

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VICE CHAIR THERNSTROM: I think that's lovely.

MR. KROLL: Yes. And I don't talk about 4 5 over attached too much in my field because there's too 6 many under attached children. But I want to say that because I have been in the field for 30 some years. 7 8 And our organization has evolved dramatically. We 9 evolved from an organization that primarily was adoptive families; 10 transracial white adults and children of color. And in 1991 we published a study 11 Barriers To Same Race Placement. We became identified 12 at that time as an opponent of transracial adoption, 13 and nothing could be farther from the truth. 14

believe in social justice 15 We just in relationship to children in the child welfare system. 16 And to that end we work on two things primarily. 17 One is to see that children and families of color have an 18 19 opportunity to be matched in their communities, which is one of the goals of the MEPA IEAP legislation, but 20 the goal that is widely ignored. And the second one 21 is that we absolutely believe that families who adopt 22 transracially need to have adequate training so that 23 they can parent their children appropriately. 24

I have seen in too many cases when

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children who look just like my daughter, when they get to the age of 20/21 and do an identity search and 2 identify back with their culture of origin, either are 3 4 rejected by their families or a rejection occurs. And 5 what we really believe in is that we need to prepare the families so that they can give the children all 6 7 the options so that when they make their identity 8 choices, which are their identity choices, that we support those identity choices.

know I can't go through my entire 10 Ι testimony in ten minutes. I'm well aware of that. But 11 12 I do want to highlight a few things.

I was involved in the discussions around 13 the passage of MEPA, and actually met three times with 1415 Senator Metzenbaum. Direct meetings with Senator I think it's the elected official I had 16 Metzenbaum. the most meetings with over time. And one of the 17 things that occurred during that whole process was an 18 19 understanding of his anger over the case in Ohio where the child was moved from the white family to the black 20 family and died. And I understood that. But I didn't 21 think we should enact legislation based on one case. 22

legislation it 23 As the evolved was interesting that I think Senator Metzenbaum acquired 24 25 an understanding of the other side, which was families

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1 of color really are systematically denied access to 2 children in their communities. And that had we documented, particularly in the private sector, where 3 4 the vast number of children, 50 percent of the Black 5 and two-thirds of Latino children, were adopted by families transracially. That Black families couldn't 6 7 even get in the door. That still goes on today, that 8 in the private sector vast majorities of the children 9 are adopted transracially. I'm talking about the 10 younger, the infants.

What's interesting in the Congressional 11 12 Record, which is the only place that you'll see any discussion of MEPA, from October 5, 1994, Senator 13 Metzenbaum made the comment "Let me make my position 14If there is a white family and a Black family 15 clear. that want to adopt a Black child and they're equal in 16 all respects, then the Black family ought to have 17 preference." Doing the equal in all respects is 18 19 always difficult, but clearly at that time Senator Metzenbaum said for the record that we ought to be 20 able to look at race. 21

The second thing that was in the record from the co-sponsors of the bill was acknowledging the importance of the second half of MEPA, which focused on increasing the pool of appropriate and available

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60 1 perspective families for the children from their 2 communities. So those two things were talked about in 3 4 the Congressional Record. 5 The amendments to MEPA passed in 1996, and 6 you didn't swear us in, but to the best of my 7 knowledge--8 VICE CHAIR THERNSTROM: My --9 MR. KROLL: -- there was no discussion, 10 public discussion in any hearing. There was one comment made on the floor during the block grant 11 12 debate in March of 1995 by then Representative Bunning that MEPA wasn't working, even though the regulations 13 hadn't been approved. And so IEAP amendment occurred 14 under what I call the cover of darkness. And we all 15 know that congressional legislation, many times things 16 17 are slipped in that never get discussed and you don't know about it and you don't know that you voted for it 18 19 until three weeks after the bill is published and someone is reading it. That's what happened with 20 those amendments. 21 There were discussions in the community, 22 there were no discussions or 23 but any record in And I think that's important as I look at 24 Congress. 25 some of the questions that you had asked me. **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W.

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And the question that I wanted to turn to 1 2 was question 2 on page 5 of my testimony. In 2005 the 3 Hague regulations from the State Department were 4 promulgated. And these were regulations. And those 5 regulations say that perspective adoptive parents are 6 as fully prepared as possible for the adoption of a 7 particular child, and those who train parents focus on the child's cultural, racial, religious, ethnic and 8 9 linguistic background. That's in the State Department regulations related to implementation of international 10 11 adoptions.

12 In 2003 in an information memorandum from Wade Horn just the opposite I think was said. 13 State child welfare agencies must ensure that they do not 1415 take action that deters families from pursuing foster care or adoption across lines of race, color 16 or 17 national origin whether subtle or direct efforts 18 cannot be tolerated.

19 The chilling effect that that has on the field 20 is to don't talk about its say race, implications in parenting. Don't talk about racism. 21 Pretend racism doesn't exist. Be color blind. 22

At the beginning of my testimony I make an illusion to nooses hung from a tree. Six weeks ago not many people knew about that. This morning

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everybody knows that that occurred because of the demonstration yesterday in Louisiana. But racism is alive and well. And if we do not prepare families for what their children will face, we are not serving those children and we are not serving those families.

And it's belief that the U.S. 6 my 7 of Health and Services is Department Human 8 interpreting the law, and it doesn't say it in the 9 law, is that we have to be color blind in our training of families. And that is a complete disservice and it 10 11 is naive.

12 In question number 3 related to enforcement, Commissioner Ohl testified that there had 13 been, I believe, 130 -- I think that's the number I've 14 heard --15 investigations. All 130 of those investigations relate to the delay or deny portion of 16 None of those investigations relate to the 17 MEPA. recruitment portion of MEPA. 18

When you look at the recruitment portion of MEPA and the fact that nearly half of the states on the child welfare service reviews don't get a passing mark, why haven't we had enforcement? And if you look at the regulations and the *Child Welfare Policy Manual*, there are no means to enforce that portion of law. We only enforce the delay or deny section. And I

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think that that is a big mistake. That we need to be looking at the recruitment of the families like the second part of MEPA said we were supposed to do.

One of things that I wanted to share with the Committee were some statistics that were generated, and I will submit this for the record as well, but these are kind of like color copies so I only made a few of them. This is a chart from a report that was distributed in 2004 at a meeting of the Child Welfare League Adoption Committee.

And what's important about this chart, it 11 12 dramatically tells us which children are being adopted transracially. That what is orange or brown, 13 I'm color blind, the line there if you're to do the math 14 on the total for the children under five, about two-15 thirds of the transracial adoptions in 2002 were if 16 children under five. 17

18 If you look at the line, the darker line, 19 which is blackish, relative adoptions are more 20 consistent and relatives are the folks who tend to 21 adopt the older children.

So if we were arguing that MEPA would cause the adoption of children across age groups through the vehicle of transracial adoption, it hasn't occurred. And I think this is a very important chart.

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The final point I want to make is NACAC 1 2 has a series of recommendations, which I'm not going to be able to read because the lights already yellow. 3 There they're detailed. But it focuses first on the 4 5 child's best interest on keeping the child as close to 6 their family as possible, to their community as 7 possible, to people who can meet their needs as 8 possible. And I believe that the last thing we should 9 be talking about is the delay or deny provisions. That we should be looking for community resources that 10 serve the best interest of the child. 11

12 And of the things that Ι have one perceived over time is that we have created a law and 13 we use the Civil Rights Law of 1962 to support the 14 case for the access of folks like myself who are of 15 Polish and scent, to have access to all the children 16 17 in the system so that the Civil Rights Act is being used to enable white families to access all children, 18 19 but it is not looking at the best interests of minority children. And Ι think that until 20 we acknowledge that the Civil Rights Act is being used 21 more to protect the interests of white adults than it 22 is of minority children, that we're missing the point. 23 And if the Act really does do that, then maybe we 24 25 need to re-review the Civil Rights Act of 1964 because

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65 1 the best interests of minority children need to be considered first. 2 3 Thank you very much. 4 VICE CHAIR THERNSTROM: You know, 5 Professor Simon, before we proceed with you I should have all of you swear and affirm that the information 6 you have provided and will provide is true 7 and 8 accurate to the best of your knowledge and belief. 9 (Panelists sworn) VICE CHAIR THERNSTROM: 10 Okay. Professor Simon, you're up. 11 12 PROFESSOR SIMON: All right. Thank you. It's a pleasure to be here this morning. 13 And my remarks this morning are based on the research 14 15 that I've done on various aspects of transracial adoption for almost 40 years. 16 I should also add that Senator Metzenbaum 17 had asked me to come and testify before the passage of 18 19 MEPA on my research. And he felt that the research was strong enough that it would help gain passage of the 20 Act. 21 The studies that I'm talking about include 22 following 204 families in the midwest over a 20 year 23 period and interviewing the parents, the 24 adopted 25 children and the birth children from the time the **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. WASHINGTON, D.C. 20005-3701

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children were 3 or 4 years old until they were adults. Altogether we interviewed 366 children, 199 adopted and 67 birth children.

The backgrounds of the children were that two-thirds, 65 percent of the children who were adopted were Black children. I had 11 percent Native American children, 5 percent Korean children, 5 percent Mexican children and 14 percent white children who had been adopted in these families.

10And a book that summarizes that research11is Adoption, Race, and Identity: From Infancy To12Young Adulthood.

Another study that I've done involved 13 conducting in depth interviews with 24 adult male and 14 15 female transracial adoptees. My co-author on that book and others, is Rhonda Roorda, who is herself a 16 transracial adoptee. And that's In Their Own Voices. 17 Columbia University Press put that out a little while 18 19 ago.

We followed that study up with one which we interviewed 16 of the parents of these adopted transracial adoptees, and Rhonda and I did that. And this one just came out *In Their Parent's Voices* literally came out two days ago.

And right now Rhonda and I are doing a

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	67
1	study in which we're interviewing the white siblings
2	in those families. And we're saying "What was it like
3	to have a Black brother or a Black sister?"
4	The major question we were asking is in
5	terms of race on the sibling things.
6	I've also studied Asian and Hispanic
7	adoptees, and that's Intercountry Adoptees Tell Their
8	Stories. And that was done with Heather Ahn-Redding,
9	who was my research assistant, who herself had been
10	adopted from Korean when she was very young.
11	And right now in press I have a book with
12	a young Native American Hernandez. We interviewed
13	Native Americans who had been adopted before the
14	passage of the Indian Child Welfare Act was passed.
15	The results of all of the studies, with
16	one exception, show that transracial adoption serve
17	the children's best interest.
18	The one exception, it's not a complete
19	exception, is the interviews that we did with the
20	Native Americans. There we did find that some of the
21	Native American adults said our parents adopted us
22	because they considered Native American savages and
23	they wanted to make human beings out of us. And some
24	of them said our parents adopted us because they
25	wanted to make good Christians out of us.

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Let me briefly describe what I did in the 1 20 year study. Beginning in 1970 we followed 213 2 families in Illinois, Missouri, Wisconsin, Minnesota 3 4 and Michigan from the time the children, both the 5 birth and the adopted, were three or four years old 6 until they were adults. We obtained the names of 7 these families from The Open Door Society. And every 8 family that we contacted that met our criteria of the 9 of the children and forth agreed aqe SO to Two did not because there were recent 10 participate. 11 deaths in the family. It had nothing to do with their 12 unwillingness because of experiences concerning adoption. 13

What we did was interview these families 14 different occasions. 15 on four And Ι trained the interviewers. I had African American interviewers and 16 I had white interviewers, and I had a couple of Asian 17 interviewers going to the families. Two interviewers 18 19 went to each family because we spoke to the children separately and privately from our interviews with the 20 The parents could not be around when the 21 parents. children were being interviewed. 22

And what we did the first time was give the children the famous doll test, the Kenneth Clark doll test where you had a Black doll and a white doll.

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And in this case we also had what I thought was an Asian looking doll. And we gave them the standard questions which doll is prettier, which doll is smarter, which doll would you like to have as your friend, et cetera, and which doll looks like you.

I should tell you that our study, and I've published this separately in articles, was the first one in which the children did not pick the white doll as the prettier one or the smarter one, or the one they'd like to have as their friends. But when you asked the children which doll looked like you, they correctly identified the doll that looked like them.

We also gave them other productive tests 13 to say put together this family from puzzle pieces. 1415 And you could see that they understood. They put together white parents and for those who had siblings, 16 17 they put together a white sister and then they put themselves in. And if they were Black, they put in 18 19 the Black puzzle piece and so forth. So these children even at a very young age understood who they 20 were, what their family was composed of and so forth. 21

interviews with 22 In terms of the the 23 parents, we asked them the demographics, age, occupation, religious ethnic background, what they did 24 25 for a living and why; why they wanted to adopt the

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child of a different race. Okay. Most of these families at the time could not have either a birth child or a second birth child and they very much wanted children, which was the reason most often given.

Okay. We then spoke to the parents only 6 the second time when the children were preadolescent, 7 8 they were about 9 and 10 years old. And everything 9 seemed to go well except about a third of the parents 10 said there's some problems among our adopted children. They steal from their siblings or from us. They're not 11 12 generally involved in delinquent activities, but they're stealing within the families. 13

went and talked 14 And so Ι to some 15 clinicians about that. And they said that is quite common among adoptive children. They're testing to see 16 will you love them, will you keep them even if they do 17 things that are not right. 18

By the time we came back and the children were adolescents, all that had disappeared. There was no more of that. And we interviewed separately the children again and separately the parents. And what we found among the children, yes, there was some drinking problems, there was some drug problems, but there was no difference between the adopted children

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1	and the birth children on these problems.
2	We also gave the children the famous Self-
3	Esteem Scale and the Family Integration Scale. These
4	are scales that had been used and tested. And it was
5	to see how integrated the adopted children felt in
6	their family. So, for example: I enjoy family life,
7	do you strongly agree or disagree; people in our
8	family trust one another; most families are happier
9	than ours; I'm treated in the same way as my brother
10	and sister.
11	And we looked at the scores on those tests
12	between the transracially adopted, the white adopted
13	and the birth children and found no difference.
14	We also looked at the Self-Esteem scores
15	on the different kinds of children, and again found no
16	difference.
17	By the time we interviewed the parents to
18	see what the parent's view was on what their children
19	were doing, and it's very interesting. The parents
20	knew very much about their children's lives. They
21	knew, for example, that when Johnny who was adopted
22	and Black went to pick up what he thought was going to
23	be his date that evening and the date was a young
24	white girl in the community, and the father came to
25	the door and said "Who are you?" And he said "I'm

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here to pick Mary up. We have a date." And he said "Oh, no, you don't," threw him out. That the parents knew that that had happened, and very often they would then contact the girl's parents. Or if there had been trouble in school, the parents knew about it and would talk to the teachers. So there's a great deal of openness in those families. And we knew that because interviewed the children the we and parents independently and separately.

The fourth time we met with them, most of the children were already adults. Some were off at college. Some were living in the same community but were working and so forth. And, again, we found that there was a great deal of contact with the families.

15 And amonq the transracially adopted children in terms of their racial identity, were they 16 it and comfortable with their racial 17 aware of identity, they laughed at it and was scornful of what 18 19 the position of the National Association of Black Social Workers' characterization of them had been. 20

Oh, dear. All right. I'll try --

VICE CHAIR THERNSTROM: Yes, it's an ohdear time.

24 PROFESSOR SIMON: The National Association 25 of Black Social Workers had often referred to them as

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Oreos, black on the outside but white on the inside. As young adults the Black adoptees stressed their comfort with their Black identity, their awareness that while they may speak, dress and have different tastes, say, in music than innercity Blacks, but the Black experience is a varied one in this society and they're no less Black as far as they were concerned then our children of the ghetto.

9 And when we asked the parents about their 10 feelings about having adopted across racial lines, 11 over 90 percent said that they were very happy that 12 they had done it. We had one or two experiences in which the children were adopted when 13 they were somewhat older, and they had been abused in foster 14 15 care and that there were problems. And some in which they were physically, there was sickness, which the 16 social workers hadn't told them about that. 17

All participants believed 18 the that 19 transracial adoption served them well. All of them felt connected to their adopted parents and all of 20 them had strong recommendations that agencies 21 and 22 perspective parents recognize the importance of 23 learning about their children's racial history and culture, and making that history and culture part of 24 25 their child's life and their family life. Love is not

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1	enough. The parents who adopted across racial lines
2	had to change their lifestyle: Move into more
3	integrated neighborhoods, be sure their children were
4	going to integrated schools; some joined Black
5	churches; had friends who were African American, and
6	so on.
7	Thank you.
8	VICE CHAIR THERNSTROM: Well, thank you
9	very much to all three of you. You were wonderful to
10	have here.
11	Let me start the questioning. A couple of
12	questions both Tony Oliver and Mr. Kroll.
13	First, Ms. Oliver, you stressed that
14	poverty alone subjects Black children to heightened
15	scrutiny.
16	MS. OLIVER: Yes.
17	VICE CHAIR THERNSTROM: Now I'm going back
18	to my question for the previous panel. It does not
19	seem to me that you can separate family structure from
20	poverty. After all, a lot of that poverty is
21	explained by the fact that the family structure
22	consists of one single parent, single earner or no
23	earner and a very young parent. And so what you're
24	really seeing here when you're seeing poverty is
25	you're seeing a family structure picture. And that
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with Latinos poverty is less associated with that family structure. You've got a much higher incidence of intact families, although very low earners. They're often recent immigrants with no skills that would earn them a middle class living.

I mean, I'm bothered by your separating 7 out poverty per se when you say the children are subject to heightened scrutiny. Because you've got, it seems to me, a more complicated explanatory picture here or potentially explanatory picture here.

There have been a number of 11 MS. OLIVER: 12 organizations and groups and researchers who have taken a look at this because of the complexity of that 13 issue. And what they continue to raise is that racial 14 disparities at every level of child welfare decision 15 making are creating disproportionality. And that when 16 you control for income, when you control for family 17 composition, when you control for maltreatment, abuse 18 19 and neglect, what stands alone is that the outcomes for African American children are much more negative 20 in the experience in the child welfare system than any 21 other ethnic group. 22

And so, you know, poverty continues in the 23 research to stand alone. And the types of things that 24 25 we typically considered earlier, definitely in my

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career in child welfare that would in some ways explains the disproportionality, are just being struck down.

4 VICE CHAIR THERNSTROM: Yes. And, Mr. 5 Kroll, referred you to parenting children 6 "appropriately." I'd like to hear from you how 7 precisely you'd like race and racism to be talked 8 about? What is the precise message you would like 9 delivered? And you went out of your way or I wouldn't put this on a personal level to describe your own 10 11 family. What was the message that you thought that 12 was extremely important that you delivered to your Asian-American daughter? 13

MR. KROLL: Actually, I have heard her words right here in front of me, which I'll also add to the record.

17 VICE CHAIR THERNSTROM: That would be very18 nice.

19 MR. KROLL: But to summarize, we had the opportunity in Minnesota from her very early age to 20 21 provide her with access to her community through the support groups, but also we were one of those lucky 22 23 neighborhood families that in our her day care 24 provider was a Korean woman. So that she had 25 language, smells, food; that kind of interaction. We

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When she got to be a teenager she basically rejected being Asian. Pretty much ignored that. She was captain of the gymnastics team, and she was a jock. And she hung with the athletes.

When she went to an all white almost 9 college it hit her in the face, and she had to deal 10 11 with it. And the way we helped her is that we always 12 were acknowledging the issue of race. We supported her so that as she struggled with that identity, we 13 were always there for her, whereas some of her friends 14 15 when they struggle for their identity, the family viewed that as a rejection of whiteness, for lack of a 16 17 and weren't accepting of better term, that I'm Korean, I'm a Korean woman, I'm going to understand 18 19 what that is.

And I think that every child makes that decision for themselves. What I'm saying is that families have to be prepared to help their child and support their child and give them all the options.

VICE CHAIR THERNSTROM: All right. But
 let's switch from the Asian picture to the African

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1	American picture.
2	MR. KROLL: Okay.
3	VICE CHAIR THERNSTROM: Because, after
4	all, Asians are, you know, half of all Asians today
5	are marrying non-Asians. And you've got, you know, a
6	tremendous amount of, for lack of a better word,
7	assimilation. But let's switch it to African American
8	families.
9	MR. KROLL: Sure.
10	VICE CHAIR THERNSTROM: What exactly is
11	the message you would like delivered about race in
12	America and racism in America, which were the two
13	terms you used
14	MR. KROLL: Yes.
15	VICE CHAIR THERNSTROM:to a Black child
16	in a white family.
17	MR. KROLL: Yes. A white family has to be
18	able to prepare their child to deal with racism, to
19	deal with being identified as a Black person. If I
20	were raised in an African American
21	VICE CHAIR THERNSTROM: Put some meat on
22	that bone. Exactly what is the message about America?
23	MR. KROLL: Exactly? Sixteen year old
24	Black male has got to be prepared to be stopped by a
25	policeman and know how to react so that he is not
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1	physically harmed.
2	VICE CHAIR THERNSTROM: Okay. Fair
3	enough. But what is the message about what it means
4	to be Black in 2007 in America?
5	MR. KROLL: Okay. You're making it real
6	tough, because I'm obviously not Black. But I'm
7	talking about it.
8	VICE CHAIR THERNSTROM: Yes, but you said
9	a lot about this.
10	MR. KROLL: Yes.
11	VICE CHAIR THERNSTROM: You've thought a
12	lot about what the messages are. I mean, these are
13	messages about American culture and the whole fabric
14	of American society.
15	MR. KROLL: Yes. And you asked
16	Commissioner Ohl about no, Mr. Melendez is. And,
17	you know, we have training material on this which I'll
18	leave for the Commission staff that was done under the
19	auspices of the U.S. Department of Health and Human
20	Services. And what we try to get people to think
21	about are the facts that we know that children will
22	face discrimination, racism and to be prepared to have
23	those conversations. Knowing that I never faced that,
24	and so that maybe I have an African American dad who
25	is a mentor to my African American son because he's
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walked those shoes that I'll never walk and I'll never fully understand.

And I think that a lot of the families 4 that Dr. Simon was talking about, because they're from 5 The Open Door Society, had that kind of training and 6 so that they were better prepared to help their children deal with those issues. But you have to be 7 8 aware that those issues exist and not ignore them.

that's my concern, 9 is that we're And 10 saying ignore them. And that we really need to help the families deal with them. 11

VICE CHAIRN THERNSTROM: I think Professor 12 Simon has some --13

PROFESSOR SIMON: I just want to add one 14 15 thing. What's it like to be Black in the United My son-in-law is Black. He was a famous 16 States. 17 football player at the University of Michigan. When he was dating my daughter he would spend a lot of time 18 19 around Washington University in St. Louis where my daughter lived in an all-white neighborhood. 20

Every time he came to visit her and was 21 walking on the street, a big Black guy during the day 22 he was stopped by the police and said "What are you 23 And said 24 doing here?" he "I'm visiting my 25 girlfriend." And the police would say "There are no

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81 1 Blacks in this neighborhood." "My girlfriend is 2 white." "Prove it." And he'd have to go to Judith's house. 3 4 And I used to say to Ed "What's it like to 5 have that happen to you all the time?" And Ed's reaction was "You get used to it." 6 7 VICE CHAIR THERNSTROM: Sure. But there --8 and I accept that, absolutely, of course. 9 PROFESSOR SIMON: I'm not sure I accept 10 it. VICE CHAIR THERNSTROM: Well, I mean I 11 12 accept it as reality --PROFESSOR SIMON: Yes. 13 VICE CHAIR THERNSTROM: -- that that is -14 15 - you know, this is not in his head. This was his experience and obviously it was 16 unique not а 17 experience. 18 But my question was really broader than 19 preparing children to be stopped in a completely 20 arbitrary way to be stopped by police. I mean, it is complicated how you describe -- it wouldn't have been 21 complicated in 1964, but it is complicated today. 22 How you describe the status of African Americans, what 23 they're like to experience, how to think about race in 24 25 the society, you know it's an altered America. And I **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W.

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82 1 think these message from, you know I'm just speaking 2 for myself here, are extremely important exactly how 3 they're stated and what kind of nuisance form they're 4 stated. That's an open and shut case. 5 Let me tell you, there are a lot of police 6 out there who are likely to look at a large Black guy 7 in the middle of the day in the "wrong neighborhood." 8 I mean, you know, that's an easy one. 9 OLIVER: It happens for African MS. 10 American women as well. 11 VICE CHAIR THERNSTROM: And it happens for African American women as well. 12 MS. OLIVER: Yes. 13 VICE CHAIR THERNSTROM: I'm sure. 14 15 MS. OLIVER: And I think --VICE CHAIR THERNSTROM: But beyond that it 16 17 gets, it seems to me, more complicated. There's some 18 easy --MS. OLIVER: It's not as complicated for 19 me, and perhaps because I've had an African American 20 experience. 21 22 VICE CHAIR THERNSTROM: Right. Well, 23 qood. I'd like to hear you. MS. OLIVER: So I would say one of the 24 25 issues in how do you describe it is to imagine a life **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. (202) 234-4433 WASHINGTON, D.C. 20005-3701 (202) 234-4433

experience where for the majority of your waking hours you are aware that it is not unlikely that today you will encounter an experience where someone assumes just because of how you look that you've done something wrong. And you're scrutinized differently.

I was talking with a friend of mine just 6 yesterday who said that he had taken a couple of boys 7 8 from his program who happen to be African American and Hispanic into the Waldorf. He wanted to take them into 9 the Waldorf Astoria because they had never seen it. 10 And he went in the door before them. And when he got 11 12 in he realized that they weren't with him anymore. And when he turned around, he found out that they were 13 still at the outside being scrutinized to try to 14 15 figure out why are you here.

And so it's like Dr. Simon gives 16 one 17 experience for her son-in-law. Ι qive another experience for a group of boys who happened to be with 18 19 a friend of mine. I give an experience of my 20 daughters in a bookstore not necessarily in a racially isolated community, but in a place where few African 21 Americans tend to be being followed when they're 22 looking at magazines as though they were going to take 23 something. 24

I mean, these are the kinds of things that

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1	from a white experience you don't have everyday.
2	VICE CHAIR THERNSTROM: Well, I understand
3	that. But the question I mean, America has changed
4	since the mid-1960s. The question of how much color
5	matters, the answer has changed over the decades. Of
6	course it still matters, but the answer is not the
7	same in my view as it was four or five decades ago.
8	MS. OLIVER: And for me the difference is,
9	yes, there are some changes. I'm not afraid to be
10	lynched in Atlanta. But where they are not as overt,
11	covertly they are still very significant.
12	VICE CHAIR THERNSTROM: Well, let me turn
13	to other people.
14	COMMISSIONER MELENDEZ: I had a question
15	of Mr. Kroll. You had mentioned about children under
16	five years old. Do you see a significant is that
17	one of the issues is that there tends to be more one
18	through five year olds that are basically being
19	adopted by
20	MR. KROLL: Absolutely. I think that what
21	we have seen as a result of these numbers, and I've
22	not been able to get statistics since 2002, but
23	everywhere you turn you see that it's the younger
24	children, whether it's the private sector or in the
25	public sector, who are adopted transracially. And the
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data suggests that the older children are not adopted 2 transracially. And those are the children who we define as waiting. Over nine are the ones that really need families and based on this data, it's the single 5 aunties, grandmothers who are adopting the older kids. 6 The kinship care providers who move from foster care 7 to adoption. That's what that data suggests, and I 8 think that we need to look at the needs of the child in relationship whose waiting the longest. And it's not the little kids. 10

And Toni's got families waiting in her 11 12 agency that are fully studied who are ready to adopt younger African American kids today, but they don't 13 have access to those kids. And many of those children 14 15 we know are adopted by their foster family. So a kid comes into care, placed transracially in a foster 16 17 family, parental rights are terminated. The bond is I'm not going to argue that you should move 18 there. 19 those kids. But it happens at the entry into the system at the foster care level and so that the 20 significant majority of the transracial adoptions are 21 the younger children. 22

The 23 COMMISSIONER MELENDEZ: other question: Wouldn't it be bold to say that most races 24 25 if they found out that young children one through five

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were being adopted by, say, Caucasians and whether it's an Hispanic or Native Americans under Indian Child Welfare, they'd want to know well what can we do about that statistic? Because they would look at it as we're losing a lot of our children. And that's why the issue of having available minority children has to be something that is either there or make improvements on that. You know, it just seems like you can't get away from that concern.

10 know it Т was а concern to Native Americans in the Indian Child Welfare Act was that 11 12 they were losing many of their children, and they didn't really have a lot of say in it. And so that's 13 why that Act was really put in place. So I imagine 14 15 it's the same thing to any minority group.

MR. KROLL: Absolutely. And if you look at 16 the recommendations at the end, they do look an awful 17 lot like the Indian Child Welfare Act in terms of what 18 19 we think is in the best interest of the child in our organization. And we did it, and then we looked back 20 and we went oh my goodness, this looks a lot like the 21 Indian Child Welfare Act. But I think Indian Child 22 Welfare Act in terms of protecting the culture and the 23 relative connection and the family connection is the 24 25 appropriate way to go.

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COMMISSIONER MELENDEZ: It sounded like you were saying that. One of the issues that brought the MEPA issue up to the forefront was that there were delays in the whole system, that was one of the issues I heard. But isn't it not really the major issue? Isn't the major issue is that everybody should have access to these children?

8 MR. KROLL: The delay issue was what was 9 mentioned in the run up to MEPA. And there were 10 clearly delays. And there clearly were practices that 11 public agencies had that delayed placement. But the 12 reality is, and this is on a dangerous ground to go, but you had an awful lot of white adults who for the 13 first time were told that their race is a disadvantage 14 15 to them. Because you are white, you do not have access to these black children. White adults don't 16 handle that very well. And I think that was one of the 17 major factors that came into play. Families that I 18 19 talked to who were very strong supporters of MEPA, and it was about there are all these children there so we 20 want access to them, and we don't have access to them. 21 COMMISSIONER MELENDEZ: So even if we were 22

to some way make African American parents available or Native Americans, or any minority group and you didn't hold up the system, they were ready to go as a first

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1 priority and a second priority was to either go not to 2 that race of people, we'd have a problem? So it's not 3 solely just the issue of delaying the system. It has 4 to do who has access to those children. 5 MR. KROLL: And the reality is the older kids are waiting for anybody. 6 7 COMMISSIONER MELENDEZ: Right. 8 MR. KROLL: The older kids are waiting for 9 anybody. And you've got the younger kids who everybody 10 is competing for. VICE CHAIR THERNSTROM: I'd like to move 11 on to Commissioner Taylor. 12 COMMISSIONER TAYLOR: Yes. And I think two 13 brief questions. The first for Mr. Kroll and the 14 second one for Ms. Oliver. 15 Mr. Kroll, I'm trying to get my mind 16 17 around something you said and something you all just discussed. That is the purpose of the Civil Rights 18 19 laws. And that is there is a stated purpose and then the reality. And if the reality is that they are being 20 essentially used, motivated by the need to expand the 21 pool of available children for white parents. 22 Ιf that's what's really going on? 23 guess my question is your point 24 Ι of 25 shouldn't we be focused on what's in the best interest **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. (202) 234-4433 WASHINGTON, D.C. 20005-3701 (202) 234-4433

of the minority children in the system, and are you saying that expanding the pool for the white parents does not achieve that goal, does achieve the goal or misses the point?

So I understood what you're saying, but I didn't understand whether you were agreeing or disagreeing that the current motivations actually advance the interests of the minority kids. What's your thought on that?

10 MR. KROLL: Yes, I think I said that at 11 the very end. I was trying to be way too fast, so I 12 apologize for that and appreciate this opportunity.

African American children and 13 Latino children in this country who are not covered by the 14 Indian Child Welfare Act there's a lot of folks who 15 want to parent the younger children. And so the, in a 16 sense, reverse discrimination kind of provisions of 17 the Civil Rights give white families 18 Act the 19 opportunity to get into that pool when there are Black and Latino families out there, but they just don't 20 have the kind of access or maybe savvy to work the 21 22 system.

23 So I think that for the younger children, 24 it really is the adults rights that are playing out 25 here. For the older children what we haven't done is

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explore all the options for those kids. And there, I think we need to go to families wherever they may be to parent the older kids, whether they're Black families, Latino, white families. And also there are a lot of white older kids waiting, too. We need to make that very clear.

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So I think that in terms of the use of Civil Rights to deal with reverse discrimination since the Bakke case in the '70s, that that hasn't been a pattern over the last 30 years of the 1964 legislation being used to protect against reverse discrimination issues, which I think this was considered in 1994.

13 COMMISSIONER TAYLOR: One more step.
14 Stick with me, if you would?

MR. KROLL: Sure. I'll try.

16 COMMISSIONER TAYLOR: The pool of young 17 minority kids --

MR. KROLL: Yes.

19COMMISSIONER TAYLOR: -- are they better20off even given what you have said than they otherwise21would be had these measures not been taken?

MR. KROLL: Yes.

23 COMMISSIONER TAYLOR: I'm going to get a
 24 sense - 25 MR. KROLL: Children are always better off

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1	in families.
2	COMMISSIONER TAYLOR: Okay.
3	MR. KROLL: And what I'm saying from a
4	social justice standpoint is the families in the
5	communities that the kids come from have lost some
6	access to the parenting of those children.
7	COMMISSIONER TAYLOR: Expanding the pool
8	of appropriate families to adopt?
9	MR. KROLL: Because we've ignored Part 2
10	of MEPA.
11	COMMISSIONER TAYLOR: Right. Okay.
12	MR. KROLL: Really, you know, all the
13	enforcement is on the front.
14	COMMISSIONER TAYLOR: Okay.
15	MR. KROLL: Thank you for asking.
16	COMMISSIONER TAYLOR: Ms. Oliver, I'm just
17	curious as to my sense of your testimony was that
18	you think the emphasis is in the wrong place.
19	MS. OLIVER: Yes.
20	COMMISSIONER TAYLOR: Give me a sense of
21	what you think we should be emphasizing if the
22	emphasis is currently in the wrong place on the back
23	end. Because I didn't necessarily hear you
24	disagreeing with all the things that are taking place
25	in the back end. Rather, the use of resources on the
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1	back end rather
2	MS. OLIVER: Yes.
3	COMMISSIONER TAYLOR: Is that fair?
4	MS. OLIVER: That's fair. There is a
5	disagreement on the back end as far as MEPA is
6	concerned, and that is that there has been absolutely
7	no enforcement decisions made about recruitment.
8	COMMISSIONER TAYLOR: Okay. Okay. That's
9	what Mr. Kroll was saying.
10	MS. OLIVER: So that's similar to what
11	he's saying.
12	COMMISSIONER TAYLOR: Okay. Okay.
13	MS. OLIVER: Yes. However, you know one of
14	the things that has always been interesting to me is
15	that there's a quite a bit of money that's put into
16	maintaining children away from family like settings,
17	and that's just the way that the child welfare system
18	is set up. The further removed the child is from a
19	family like setting, the more money we put into that
20	service.
21	Front end services, which have to do with
22	prevention or reunification, are much more cost
23	effective and are much less traumatic to children.
24	However, we put the money on the back end. And so
25	we're not addressing the fact that there are
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93 1 discriminatory practices that are causing children to 2 come in too fast. And I really do believe that if the carrot was in a different place, that we would be able 3 to provide services within communities to be able to 4 5 help families keep their children rather than take their children, to provide the kinds of resources that 6 necessary when 7 look at these artificial are we 8 measures about the fact that children are coming in 9 more so for neglect than abuse. And the neglect looks 10 exactly poverty. Then we bring these children into a system 11 with strangers and we give the strangers support that 12 was not available to their birth families. 13 And the likelihood that they would ever 14 get back because the families are left out there on 15 their own with little to no resources to be able to 16 17 improve themselves and to prove themselves to agencies that they're good enough to get their children back, 18 19 they fail. COMMISSIONER TAYLOR: Would you agree with 20 the kinship care support as being a step in the right 21 direction? 22 23 MS. OLIVER: Very much so. COMMISSIONER TAYLOR: And that type of 24 25 support? **NEAL R. GROSS**

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1	MS. OLIVER: Very much so.
2	COMMISSIONER TAYLOR: Okay.
3	MS. OLIVER: Because the other thing that
4	we're seeing in kinship care is there's far less abuse
5	in kinship families than there is in foster care.
6	So there are a number of things that we're
7	ignoring that are available to us in terms of the
8	research and the alternatives or different approaches
9	to the same population and providing services to them
10	in a way that is much more focused on sustaining and
11	maintaining families.
12	COMMISSIONER TAYLOR: I'm sorry. May I
13	have one more question?
14	Is it true that the kinship care approach
15	is used more frequently in the African American
16	community than it is other communities?
17	MS. OLIVER: I don't know in terms of
18	statistically. I do know that as far as most
19	jurisdictions are concerned they're looking at ways to
20	provide more kinship care services.
21	Now interestingly what happens is that the
22	kinship families become second class citizens in some
23	way. And that is that the services that are available
24	to them are still less than they are to strangers.
25	VICE CHAIR THERNSTROM: Unless there are
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people who have urgent questions still, I would like to move on to the third panel. And then thank these panels.

COMMISSIONER KIRSANOW: One short question.

6 VICE CHAIR THERNSTROM: Yes, sure. Sure. COMMISSIONER KIRSANOW: There's been some 7 8 discussion about teaching Black adoptees what it's 9 like to be Black and the notion that Black transracial adoptees may not be adequately prepared by white 10 parents for what it's like to be black in America is 11 12 maybe a failure of acculturation. Are any panel members aware of any evidence or any measurable or 13 tangible detriments that may be caused this, that is 14 in terms of their ability to thrive? In terms of a 15 differential in GPA, high school graduation, college 16 graduation, income, marriageability, anything of that 17 18 nature?

19 VICE CHAIR THERNSTROM: Professor Simon20 wants to speak to that.

21 PROFESSOR SIMON: In my study when we 22 interviewed the adult transracial adoptees, they were 23 on their own Black, they felt that they could live in 24 both communities. They could live in the Black 25 community, they could live in the white community.

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96 1 Many of them were in college or had received 2 university degrees. They felt very comfortable with 3 their Black identity and with their acceptance and 4 participation in both the Black and white community. 5 VICE CHAIR THERNSTROM: I'm curious, by the way, it's just really more of a remark than a 6 7 question, because I do want to end the panel. Of why you used the doll experience which has been 8 SO 9 discredited, as I understand it. 10 PROFESSOR SIMON: But it was used in Brown 11 vs. the Board of Education. VICE CHAIR THERNSTROM: 12 Yes. PROFESSOR SIMON: But I used this, you 13 have to remember, this was 1970 when I used it. 14 15 VICE CHAIR THERNSTROM: Okay. Because it has been so discredited. 16 PROFESSOR SIMON: Of course. 1970. Yes. 17 VICE CHAIR Anyway, 18 THERNSTROM: Commissioner Kirsanow, did that --19 COMMISSIONER KIRSANOW: Yes. That's the 20 answer I was looking for. 21 VICE CHAIR THERNSTROM: 22 And does anybody else before we close this panel? And I will remember 23 to swear in the next one. 24 25 But in the meantime, thank you very, very **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. (202) 234-4433 WASHINGTON, D.C. 20005-3701 (202) 234-4433

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1	much. This is a wonderful panel, once again. And all
2	three of you have made your contributions. And I,
3	again, invite you to supplement I mean now that
4	you've heard our questions, to supplement anything
5	that you have to say in response to what you have
6	heard here so that we enrich this conversation.
7	MR. KROLL: Thank you for the opportunity.
8	PROFESSOR SIMON: Excuse me. Some of us
9	would love a cup of coffee. Could we have a five
10	minute break, do you think.
11	VICE CHAIR THERNSTROM: Sure. I don't know
12	where in five minutes you can get a cup of coffee.
13	PROFESSOR SIMON: Across the street.
14	VICE CHAIR THERNSTROM: Across the street.
15	Yes.
16	PROFESSOR SIMON: Is that okay?
17	VICE CHAIR THERNSTROM: Sure. That's
18	going to be a longer than five minutes. But we'll
19	start in five minutes.
20	PROFESSOR SIMON: All right. Thank you.
21	COMMISSIONER KIRSANOW: Commissioner
22	Thernstrom?
23	VICE CHAIR THERNSTROM: Yes.
24	COMMISSIONER KIRSANOW: I may have to jump
25	off for about 20 minutes.
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1	VICE CHAIR THERNSTROM: Okay. We would
2	like to have you back if you can come back.
3	(Whereupon, at 12:01 p.m. a recess until
4	12:13 p.m.)
5	VICE CHAIR THERNSTROM: Folks, our five
6	minutes are long up, which always happens if we take a
7	break. But I think the break was welcome to everybody.
8	PANEL 3
9	VICE CHAIR THERNSTROM: The third
10	panel we've got arrayed in front of me, will address
11	whether the Multiethnic Placement Act of 1995 has
12	achieved its goal.
13	The panel consists of: Thomas Atwood,
14	President and Chief Executive Officer of the National
15	Council for Adoption; Dr. Ruth McRoy of the Evan B.
16	Donaldson Adoption Institute; Dr. Elizabeth
17	Bartholet, Professor of Law and Director of Child
18	Advocacy Program at the Harvard Law School, and; Linda
19	Spears, Acting Senior Vice President of Child Welfare
20	League of America.
21	Before I forget, before I even introduce
22	you.
23	(Panelists sworn)
24	VICE CHAIR THERNSTROM: For the court
25	record I head an "I do" from all four.
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Thomas Atwood serves as President and Chief Executive Officer of the National Council for Adoption, NCFA, an adoption research, education and advocacy nonprofit organization whose mission is to promote the well-being of children, birth parents and adoptive families by advocating for the positive option of adoption.

8 Mr. Atwood served for four years as 9 Executive Director of NCFA's Infant Adoption Awareness 10 Training Program. He leads NCFA's ongoing efforts to 11 ensure sound ethical adoption policies and practice.

12 He is Executive Editor of Adoption NCFA's comprehensive reference 13 FactBook IV, on adoption policy and practice. 14

15 Mr. Atwood has directed national research 16 education and advocacy nonprofits for 20 years such as 17 Director of Coalition Relations and Executive Editor 18 of *Policy Review* at the Heritage Foundation.

He was Vice President of Policy andPrograms for the Family Research Council.

21 He is founding President of the Board of 22 Directors of the National Safe Haven Alliance.

He has a master's in public policy and a master's in business administration from Regent University.

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Dr. Ruth McRoy is Ruby Lee Piester Centennial Professor Emerita and a Research Professor at the University of Texas at Austin. She has served as the Director of the Center for Social Work Research, Director of the Diversity Institute and Associate Dean for Research in the U.T. School of Social Work.

8 As part of the Collaboration to Adopt 9 UsKids, she is currently conducting research on 10 barriers to adoption and factors associated with 11 successful special needs adoption.

She has written eight books child 12 on welfare and adoption issues. She is a senior fellow 13 and a board member of the Evan P. Donaldson Adoption 14 15 Institute, a board member of the North American Council on Adoptable Children, and a member of the 16 Child Welfare League of America's National Advisory 17 Committee on Adoption. 18

Dr. Elizabeth Bartholet, Harvard Law, is the Morris Wasserstein Public Interest Professor of Law and Faculty Director of the Child Advocacy Program at the Harvard Law School. She teaches civil rights and family law, specializing in child welfare adoption and reproductive technology.

Before joining Harvard she was engaged in

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101 1 civil rights and public interest work with the NAAC 2 Legal Defense Fund. She was the founder and Director of the 3 4 Legal Action Center, a nonprofit organization in New 5 York City. And Linda Spears is the Acting Vice 6 President of the Child Welfare League of America. 7 Ms. 8 Spears has worked at both the practice and senior 9 management levels in child welfare agencies for 24 10 years. Before joining CWLA in 1992 she served as 11 12 the Director of Field Support with the Massachusetts Department of Social Services where 13 she oversaw agency-wide services in foster care and out-of-home 14 15 placement, family preservation, child protection, domestic violence, housing, permanency placing and 16 adoption and India child welfare. 17 I will call on you in the order you have 18 19 been given for the record. So, Mr. Atwood, you are starting out for ten minutes. 20 And thank you all very much for appearing 21 It's an incredibly interesting and important 22 today. topic, obviously. 23 MR. ATWOOD: My name is Thomas Atwood. And 24 25 serve as President and CEO of the National as I **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W.

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Council for Adoption, NCFA. Founded in 1980 NCFA is an adoption research education and advocacy organization. NCFA has advanced adoption and child welfare policies that promote the adoption of children out of foster care, present adoption as a positive option for women with unplanned pregnancies, reduce obstacles to transracial and inter-count adoption and make adoption more affordable for families.

9 On behalf of NCFA I thank you for this 10 opportunity to present at your briefing on the 11 Multiethnic Placement Act.

12 Today an increasing number of American families are multiracial by adoption. According to 13 the 2000 Census approximately one out of every six 14 adopted children in America has a parent of another 15 Transracial adoption is a healthy, positive 16 race. for children. Studies 17 of transracially outcome adopted children reveal outcomes consistent with those 18 19 of children adopted by parents of the same race.

In addition to Professor Simon's excellent work, a 2004 study in the *Journal of Orthopsychiatry* concluded that transracial adoption does not harm the adjustment, family bonding or normative development of children.

Growing Up Adopted, a massive Search

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Institute survey of 715 adoptive families found that transracially adopted youth are no more at risk in terms of identity, attachment and mental health than are there counterparts in same race families.

5 Yes, transracial adoption is good for 6 children. But adoption professionals agree that it 7 can present additional changes to an adoptive family. 8 These challenges arise from a surrounding culture 9 that finds transracial adoption curious and that still 10 contains strains of racism.

The decision to adopt transracially should 11 12 not be made on the basis of reactions from others. But it is important for parents to anticipate how 13 their family, neighbors, associates and strangers in 14 15 the mall or at the park may react. Because it may be easy to see that the child is not genetically related 16 17 to her parents, there may be intrusive questions or even racist comments that would not be raised in a 18 19 same race adoption.

20 Adoption professionals also generally agree that transracial adoptive parents should help 21 children feel comfortable in their racial 22 their identity and teach them about their cultural heritage. 23 It is difficult to assess how much MEPA 24 25 itself affected transracial has by placements.

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1 However, we do know that since 1997 when the Adoption 2 and Safe Families Act and MEPA's Interethnic Adoption Provisions went into effect that adoptions out of 3 4 foster care have increased from 31,000 a year to more 5 than 50,000 and have remained at more than 50,000 per 6 year for six years straight. Because HHS does not 7 count transracial adoptions, it may be impossible to 8 prove conclusively that MEPA and IEAP contributed to 9 those increases, but it can be reasonably inferred. However, African American children continue to 10 be disproportionately represented in foster care. 11

12 For fear of violating MEPA due to misinterpretations of MEPA and the HHS Guidelines, 13 states are abandoning good social work practices. A 1415 common misinterpretation is the idea that state agencies can run afoul with MEPA from only discussing 16 17 the issue of race with prospective parents, because a wrong word could be interpreted as discrimination. 18 19 But to say that race should not delay or deny a child's placement does not mean that the challenges 20 that can be posed by transracial adoption may not be 21 It does not mean that parents should not 22 discussed. 23 be asked to assess themselves regarding their 24 suitability for transracial adoption. а Any 25 indiscriminately regulation that prohibits parent

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1	education and self-assessment is based on a
2	misinterpretation of MEPA.
3	MEPA serves the best interest of children
4	in several ways. My written testimony has more detail
5	on this point, but here are several.
6	First, MEPA reduces obstacles to
7	transracial adoptive and foster placements for
8	children in need of families. There are many children
9	who need families, including a disproportionate number
10	of minority children. And the record of transracial
11	placement is very successful.
12	It comes down to the basic principle that
13	racial differences between prospective parent and
14	child should not prevent or delay children from having
15	families.
16	Second, MEPA Part B prohibits
17	consideration of race when such consideration would
18	delay or deny a child's placement. A plain reading of
19	this language makes it clear that parental self-
20	assessments and agency education of parents are
21	allowed under MEPA.
22	It is further clarified in HHS' questions
23	and answers on MEPA which state: "Agencies are not
24	prohibited from discussing with prospective adoptive
25	and foster parents their feelings, capacities and
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preferences regarding caring for a child of a particular race or ethnicity." HHS is quite clear on this point.

Third, MEPA Part A allows children access 4 5 to transracial placements in their best interest by restricting racial discrimination against prospective 6 7 This part, although it refers to the parents. 8 prospective parents, this part, too, is actually a 9 child-focused principle. By not allowing agencies to deny any individual the opportunity to foster or adopt 10 Part 11 based on race, Α protects children from 12 arbitrarily imposed same race placements when it would be in their best interests to remain with different 13 race placements with whom they had already bonded. 14 15 Thus, as directed by HHS "An agency may not rely on generalizations about the needs of children of a 16 17 particular race or ethnicity, or on generalizations about the abilities of prospective parents from one 18 19 race or ethnicity to care for a child of another race or ethnicity." 20

HHS further "Because placement 21 states decisions are based on the needs of the child no one 22 right 23 is guaranteed the to foster or adopt а particular child." 24

Fourth, MEPA allows, according to HHS, for

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107 1 exceptions in "circumstances where the child has a 2 specific and demonstrable need for а same race 3 placement." The most common example is the case of an older child who would prefer an in-racial placement. 4 5 Finally, MEPA requires states to provide 6 for the diligent recruitment of racially diverse 7 Fulfilling this requirement would result in parents. 8 increased same race placements. 9 Overall, HHS's MEPA guidelines are fairly 10 clear and helpful. However, as noted in more detail in my written statement, some of its guidance could be 11 12 clearer. Another problem with HHS's MEPA execution 13 is that the Department has apparently not done enough 14 15 to enforce state's requirement to conduct diligent of racially and ethnically diverse 16 recruitment 17 parents. Even though more than 20 percent of children in foster care are waiting to be adopted, a mere 1.3 18 19 percent of all federal child welfare dollars available are spent on adoptive and foster care recruitment and 20 training. 21 Some child welfare advocates assert that 22 "all equal" 23 things being between prospective placements case workers in agencies should choose in-24 25 racial placement over transracial placement. This is **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W.

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Furthermore, any language that could be drafted to provide for this discretion would create a giant loophole that would render placement decisions vulnerable to subjective and ideological considerations of race.

10 In conclusion and in summary, the problems with the treatment of race in placement decision 11 12 making today do not lie primarily with MEPA, nor do they lie mainly with HHS enforcement. They lie mainly 13 with state agencies workers' 14 and case 15 misinterpretations of MEPA and of HHS ' MEPA MEPA allows for 16 quidelines. common sense ethnicity 17 consideration of in race and making placement decisions, including prospective 18 parent 19 education and self-assessment regarding transracial placement, and recruitment of prospective parents from 20 America's diverse racial and ethnic communities. 21 Ιt 22 does not allow, however, agencies to use generalizations regarding race and ethnicity in making 23 individual placement decisions, nor should it. 24

HHS should make greater efforts to clarify

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1	these issues and states should reform their policies
2	and guidelines to follow the actual meaning of MEPA
3	rather than the mistaken notion that MEPA prohibits
4	any discussion or consideration of race.
5	Thank you.
6	VICE CHAIR THERNSTROM: I'm impressed with
7	the level of consensus among panelists on certain key
8	issues this morning. I think it's very interesting.
9	All right. Dr. Ruth McRoy.
10	DR. McROY: Good morning.
11	VICE CHAIR THERNSTROM: Good morning.
12	Thank you for coming.
13	DR. McROY: Thank you for this
14	opportunity.
15	In thinking about the impact of MEPA/IEPA,
16	it is important to note that these policies were based
17	on the following four primary assumptions:
18	1) There are large numbers of white
19	families seeking to adopt minority children in foster
20	care;
21	2) There's an insufficient number of
22	African American families able or interested in
23	adopting;
24	3) A large number of minority children
25	will not achieve permanency unless race matching
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policies are prohibited and transracial adoptions are promoted broadly.

4) Children fair just as well or better when they are adopted transracially. The issue we must address is whether or not these assumptions are true and what, if any, impact has MEPA had on the adoption of African American children in the child welfare system.

9 MEPA-IEP has created a different status for African American children who are adopted from the 10 11 foster care system with regard to 12 racial/ethnic/cultural identity-a status that diverges significantly from that recognized in law for American 13 Indian/Alaskan Native children, children 14 adopted 15 internationally and children who are adopted through private adoption agencies that do not receive federal 16 17 funds. MEPA-IEP prohibits an agency receiving federal funding from considering race and ethnicity in the 18 19 foster or adoptive placement of a child except, as has been interpreted by DHHS, when a compelling government 20 interest is at stake. The Indian Child Welfare Act of 21 1978 places strong value on racial/ethnic heritage by 22 giving statutory preference to the placement of Native 23 American children with members of their own tribes or 24 25 other Indian tribes. Similarly, the Hague convention

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5 Next, it is also important to look more 6 closely at the children who are in foster care. We 7 began earlier talking a little bit about the data, but 8 we need to drill down and more carefully look at what 9 do these children look like and what have their 10 experiences been.

According to the federal AFCARS data for fiscal year 2005 there were 513,000 children in foster care who are an average of 10 years old. 32 percent of these children or 166,482 were African American.

Also in 2005 114,000 children were awaiting adoption and 36 percent or 40,840 of these children were African American.

18 The children who have been awaiting 19 adoption were an average of 5 years old when they were removed from their parents. They have been in care an 20 average of 27 months since parental rights were 21 terminated. These children are now an average of 8.6 22 23 years of age. The recent 2007 GAO report on disproportionality noted that, "according to Health 24 25 and Human Services' adoption data over the last five

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years, African American children as well as Native American children have consistently experienced lower rates of adoption than children of other races and ethnicities."

5 It is also important to examine the reasons these children are in care in the first place. 6 The majority of children enter care because 7 of 8 parental neglect. Some have experienced abuse, either 9 physical sexual abuse, some of these have or 10 experienced prenatal exposure to drug and alcohol. All of these are factors that have to be considered in 11 looking at who are the children and what are the 12 family resources for these children. 13

We also know that although there have been small increases in transracial placements of African American children there are thousands who still need permanency.

We also know that many of the children that have been placed are the younger children, and this has been mentioned earlier today.

It's important to recognize that the children that are most in need of placement are older, have been waiting in care for some time and we need to be identifying who is currently adopting those children.

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Penny Maza of the Children's Bureau has indicated that in the year 2000, older African American children were more than three times as likely to be adopted by a single female than were older white She found that half of the adoptive mothers children. of African American children adopted from foster care are 50 years of age or older. Many of those have been kinship adoptions. We need to look at all the data in terms of who is adopting, not just the young children but the older children as well.

It's important also to note that if more 11 12 services were being provided in the front end, many of these African American children would not enter care 13 and remain in care for such long periods of time. 14We know that although the incidence of child abuse and 15 neglect does not vary significantly by race or ethnic 16 groups, African American children are represented in 17 the system at a rate 2.26 times greater than the 18 19 proportion they comprise in the U.S. population.

20 also know from the GAO We recent American disproportionality report African 21 that children are more likely to be removed from their 22 families. They're less likely to be adopted once their 23 parental rights have been terminated. 24

There are a number of interrelated factors

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that have been identified that may influence these disproportionate outcomes for African American children. According to that recent GAO report such factors include: African Americans high rates of poverty; difficulty in accessing support services to provide a safe environment and prevent removal; and racial bias and cultural misunderstandings among child welfare decision making.

9 That GAO report also attributed longer lengths of stay for African American children to the 10 lack of appropriate adoptive homes for 11 following: 12 children; the greater likelihood of using kinship care, and; parent's lack of access 13 to supportive needed for reunification. The 14 services report recommended that if states could offer these services 15 to birth families, many child removals could be 16 prevented and more birth families could be preserved. 17

The study also noted that since 18 the 19 majority of federal funding through Title IV E is for foster care maintenance payments, states do not have 20 the flexibility to use these funds for support of 21 prevention services for birth families. 22 Moreover, it's important that we recognize that when African 23 American children in foster care cannot be safely 24 25 reunified with their parents or with extended family

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members, they need the security, stability and love of adoptive families.

To ensure that African American children in foster care are placed in a timely way with adoptive families who can meet their needs, including their racial and ethnic needs, we recommend the following:

8 1) We need to look specifically at what 9 is good ethical adoption practice. That calls for consideration of issues of race and ethnicity. Policy 10 and law should be consistent with established best 11 12 adoption practice and explicitly state that the racial ethnic identity needs of children should be addressed 13 throughout the adoption process and after the 14 15 adoption. Federal and state laws should state that factor that be taken 16 race is one can into 17 consideration in matching prospective adoptive families and children in care. Laws should be in 18 19 accord with practice that calls for consideration of whether specific families are able to meet all the 20 needs of a child, including race ethnic identity 21 22 issues.

2) All foster and adoptive families
should receive some level of training in parenting
children of culturally diverse backgrounds. When

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families adopt transracially or transculturally, they should receive additional training and other support services to ensure that they are prepared to meet their children's racial ethnic, cultural and linguistic needs.

We need to recognize that the child's 3) 6 7 best interest should always be paramount in decisions 8 regarding children's foster adoption care and 9 By focusing the Title and placements. on VI protections for prospective adoptive parents, DHHS has 10 placed too little emphasis on the best interest of the 11 12 child.

There is broad practice and legal support 13 for assessments of prospective families to ensure the 14 safety and well-being of children. Just as 15 these assessments take into account the family's ability to 16 17 children's physical, emotional, social meet and developmental needs, they must take into account the 18 19 family's ability to meet children's racial and ethnic identity needs as well. must be able 20 We to prepare those families. 21

4) In addition, we need to address the barriers to in-racial placements. We know from a number of studies that African American agencies have been successful in recruiting and placing African

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American children in foster care and adoptive placements. But many state agencies do not contract with them, or only call them for help in placing the oldest children and those who are the most difficult to place for adoption.

Casey Family Programs, reporting on a 6 recruitment project involving 22 public child welfare 7 8 agencies, found that history of negative а interactions between communities of color and child 9 welfare agencies contributed to a lack of success in 10 adoptive families of 11 finding color. As the 12 participating public child welfare agencies developed and implemented new strategies, including developing 13 partnerships with faith-based organizations within the 14 African American community, they were able to achieve 15 significant increases in the number of African 16 American families adopting. 17

18 We also recommend that agencies follow the 19 MEPA requirement to do diligent recruitment of more families reflect 20 that the ethnic, racial and linguistic diversity of the children served. We need 21 requirement through financial 22 to support that resources and be sure that it is fully enforced. 23

We also recognize as Hill studied and reported in 2004 that African American controlled

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organizations have success in finding African American families and NACAC recently released a report of 24 such agencies located throughout the United States that can help states become compliant with the MEPA recruitment requirement.

We need to also recruit in-racial foster families. So many of the families adopting today, in fact 60 percent of adoptions from foster care are by foster families.

We need to provide funding for subsidized guardianships because we recognize that relatives are a significant resource for the placement of older African American children.

And finally, it's an important point to note that we have a problem so much bigger than the issue of transracial adoptions. We're talking about 113,000 children in the nation's system that need permanence. We need to identify the strategies to enable all of these children to have a permanent family.

VICE CHAIR THERNSTROM: Thank you very
 much. And I turn to Professor Bartholet.

PROFESSOR BARTHOLET: Thank you. I'm
Elizabeth Bartholet, and I am on the faculty at
Harvard Law School. And for the last two decades plus

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that work that I founded Harvard Law School's Child Advocacy Program and the commitment of that program is to try to advance children's interests. I see myself as a children's advocate, among other things.

I have focused a tremendous amount of my 7 8 time energy in the last two decades also and 9 specifically on transracial adoption and international adoption. And I am one of those, actually rather few 10 11 I would say, who were fighting on the side to 12 encourage the passage of the Multiethnic Placement Act. And I'm pretty familiar with the others who were 13 on that side. 14

And I want to say that my very strong impression of the motivation for those of us fighting for passage of MEPA was concern about the interests of Black kids. And it's concern that arises out of what I'll call a numbers mismatch, which I think Vice Chair Thernstrom was trying to get at in some questions way earlier today.

The basic dilemma, or part of it, is that the number of minority race kids in the child welfare system is grossly disproportionate to their number in the population. If you look at prospective adopters,

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they are overwhelmingly a white group, not entirely but overwhelmingly because those are the people who are more in a position of privilege and thus able to step forward to parent additional kids. It's not what you do if you're desperately poor often.

There's been so much talk here and I will 6 7 disagree with many people who have sort of chimed in 8 about how we have to do more on recruitment. Part of 9 what's amazing is actually that African Americans are 10 adopting at essentially the same rate as whites are, which is a sign of the level of successful recruitment 11 12 and, Ι believe, differential standards favoring minority race applicants that we've had for decades. 13 And we've had it because, particularly in the era of 1415 same race matching what happened is the system which wanted to same race match ran out of Black parents for 16 the Black kids, thought it couldn't place those kids 17 with whites and so started saying, you know, let's 18 19 forget about it having to be a couple, let's start recruiting from welfare rolls, et cetera. So I think 20 we've been doing differential and very aggressive 21 recruitment of black prospective adopters for a long 22 time. Could we do more? Yes. But should that be the 23 primary thrust? I do not believe it should be. 24 Ι 25 think the primary thrust in terms of what HHS should

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be doing is just right. I would just like to see it be a little more aggressive.

I also want to comment on Metzenbaum and the difference between the '94 and the '96 Act. Many of the people who have spoken today critically of MEPA are basically saying at least let's go back to MEPA '94. And Joe Kroll acted as if the '96 version of MEPA was just kind of an accident and it all happened behind closed doors.

I actually think MEPA happened because the 10 11 doors were opened for a change. And Congress when it 12 sat down and had it put before them do we want to discrimination in 13 continue race the context of adoption said 14 had to say no, and it quite 15 overwhelmingly.

But Metzenbaum, with whom I also had many, 16 17 many talks over the years, we talked for a long time before passage of the '94 Act. And I tried to argue to 18 19 him, along with some others, that the '94 Act wouldn't work, couldn't work because it allowed race to be used 20 as a factor in placement. And the fact is -- and 21 22 everything Ι say is, you know, documented in and probably boring 23 infinitely greater length in various articles and books that I've cited to you --24 25 but the fact is for two decades prior to the passage

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child welfare agencies you can use race a little, but you just can't use it systematically. It will be unconstitutional if you use it in a categorical way. And under that rule in 50 states of the nation child welfare agencies used race systematically.

7 То great degree the '96 Act а is а 8 practical Act that says we have to say race cannot be 9 a factor because that is the only rule that will work. 10 And that, to a great degree, is what our nation has chosen to do throughout the civil rights realm. 11 12 Because we have believed that if you let race be used a little, it will take over. And that is what happened 13 in the child welfare area pre-MEPA. 14

15 Now I believe that MEPA is a tremendously important law and a very important part of the civil 16 17 rights panoply of laws in this country. And my personal history here also includes my time as a 18 19 Harvard Law School student deeply involved in the civil rights movement in the South. 20

So I believe this for two reasons. First, 21 it knocks down barriers to the placement of Black kids 22 and it expedites the placement of Black kids. Now can 23 we prove definitively how much faster Black kids are 24 25 being placed today because of MEPA? It's very

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complicated to try to prove that. But we used to have barriers, we used to have child agency officials throughout the country saying I will hold these kids for six months, for 12 months, there were laws, there were regulations on paper and there were even more powerful unwritten policies saying we will hold kids for six months, 12 months, and often their entire childhood rather than place them across racial lines.

9 You can't tell me that that kind of barrier isn't likely, highly likely to have a negative 10 impact on the placement of Black kids when the 11 12 overwhelming number of homes are in white families. Ι went to great length to try to document the barrier 13 and the degree to which it caused Black kids to be 14 15 held in foster care throughout their childhood in my Penn Law Review article. 16

The second reason I think this law is 17 tremendously important is that it sends the message 18 19 that the state cannot/should not say to people we as a state prefer same race families. Same race matching 20 policies were direct descendants of white supremacy 21 And I think that is not the 22 and Black separatism. path our country has chosen to take for very good 23 And I see MEPA as directly in line with the 24 reasons. 25 interracial marriage case Loving v. Virginia.

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I want to say a couple of things about why 1 2 I think this briefing is important. Because I think we have to ensure that this law is being appropriately 3 4 enforced. And for the first six or eight years after 5 MEPA passed I was running around the country saying 6 "Congress just passed a law designed to radically change the practices of child welfare agencies in 50 7 8 states and there's no noise. Nothing appears to be happening." 9 And I think HHS was deeply delinguent 10 during the early years.

11 I'm very excited about and think you 12 should be very pleased with what HHS has done So I think that the two decisions and 13 recently. opinions that HHS came down with in the Ohio case and 14 15 the South Carolina case are extraordinarily important, partly because they say what MEPA '96 says and its 16 say perfectly clearly, which is 17 regulations race cannot be a factor and no special screening can be 18 19 done of prospective transracial adoptive parents. MEPA and its regulations say that. But the enemies of 20 MEPA have been running around the country seeding as 21 much confusion as they could and claiming that MEPA 22 allows for some systematic use of race and for special 23 screening of transracial adoptive parents. 24

And what these two HHS decisions say

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extraordinarily clearly is that is not the case. And I think that's extraordinarily important, unlike many of the people who have spoken today who think that we should change those rules and basically go back to MEPA '94.

I'd like to deal with some of the questions that have come up about why that's a good rule and why I think it's actually good social work practice.

I do want to make one distinction, and 10 some others have made it. There's a huge difference 11 12 between screening based on special questions about which church are you going to go to, what neighborhood 13 will you live in, what art will you have on your wall 1415 and who will be your friends. That's the racial sensitivity screening that was outlawed, for example, 16 in the Ohio case that HHS decided. And that 17 is outlawed clearly by MEPA, and that should be outlawed 18 19 for the reason I think Vice Chair Thernstrom may have been alluding to, without putting words in your mouth, 20 so I'll put them in mine. I think it's deeply wrong 21 for the state through the mouth of a social worker to 22 say we know how black kids should be raised and here's 23 the orthodoxy, and we want to know if you're going to 24 25 Because if you aren't, you won't get toe the line.

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the kid. That is very different from saying we want to provide education -- It has nothing to do with a pass/fail test, but we would like to sensitize you.

4 Ι think it's great to sensitize the 5 Nobody I know, and certainly not I on the parents. 6 pro-MEPA side, believes we should be assuming a race-7 blind world. I think that would be silly. It's a 8 world in which race is tremendously important. Of 9 transracial adoptive parents should course be 10 conscious of a whole lot of things, but having the 11 state impose an orthodoxy by saying you won't pass the 12 test unless you move, unless you promise you're going to this Black church, that is wrong. If you look at 13 the record of the Ohio case, just the opinion which is 1415 extraordinarily detailed and very impressive, what you see is that racial sensitivity screening was used, 16 first of all, to hold disabled, seriously disabled 17 foster care kids in foster care because the social 18 19 worker didn't want to give that kid to the willing, eager, waiting white parent. And so that kid waited 20 another six or eight months, or year or two for a 21 placement. And they waited because the answers to how 22 are you going to raise your kid in an appropriate 23 racial way were thought to be wrong by the social 24 25 worker.

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So, in conclusion, these are wonderful 2 decisions. \$1.8 million is a signal that should go out loud and clear. 3

I think HHS could be doing more. I have 4 5 the two HHS decisions on my website, because they are 6 so hard to find. And I have been told by somebody at HHS "Well, we don't want to shame states." I think 7 states need to be shamed. 8 I think we to need 9 publicize these decisions. I think states need to know that violating this law is a serious violation of 10 a civil rights law. 11

12 And finally, there's been lot of а allusion today, this will be my final point, to how 13 things are different in the world of international 14Things are different there. And I think 15 adoption. that the spirit that embodies MEPA is the right 16 I think the U.S. should be a leader in the 17 spirit. world in saying we're not going to allow kids to be 18 19 held because we conceive kids as belonging to a racial group that has a right to hold on to them. 20 So I think 21 we should be proud of MEPA.

I will point out to the Commission that 22 some of the regulations the U.S. Government has just 23 issued under the Hague Convention are 24 in direct 25 violation of MEPA. They require that kids be held for

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two months before they can leave this country to go to other countries for adoption, which is a form of matching on the basis of national origin that is forbidden by MEPA. And I would love this Commission to look into that.

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And although I know it's not in your 6 7 jurisdiction, I would love it if you could send out 8 signals to the world of international adoption where 9 millions of kids are being held in orphanages in preference to being placed in international adoption. 10 11 Because many people think in connection with 12 international adoption as they used to think with respect to racial matching inside the U.S. that ethnic 13 and racial communities should be thought of as owning 14 their children. 15

Thank you.

VICE CHAIR THERNSTROM: Thank you very much. And you do have my implicit messages correct.

19And again, last but not least, Linda20Spears.

MS. SPEARS: Thank you, Madam Chair.
It's a pleasure to be here this afternoon.
I am Linda Spears, and I am the Senior Vice President
of Child Welfare League of America. We are an 86 year
old organization and our focus is the development of

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best practice and best practice guidelines and their application and implementation around the country in all areas of child welfare.

We have been looking at this issue and a variety of others in an effort to sort through and sort out what is in the best interest of kids and what helps them move forward. And there is, in my view, much to learn and much we have already learned in this nation.

I will say that the good news is, is that I am last which means I don't get to repeat everything that everyone else has said. But I will highlight some points and make some of the points that I want to do additionally. And, hopefully, leave a little time for questions for the entire panel.

I believe that the Commission asked us to 16 really pay attention to the implementation and the 17 impact of the implementation of MEPA on families. I 18 19 think you've heard several references to the GAO think that provides with 20 report, and Ι us a substantial framework for looking at how this question 21 really has played out, some of the data out of the 22 federal system of AFCARS, et cetera helps us. 23

I think it's important to understand that the number of kids and the nature of the kids in our

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1 system have changed over the years, and that that does 2 have a direct impact on what are the strategies we use 3 to fund permanency for children in this country. Since the 1970s the number of Caucasian 4 5 kids has dropped sharply in the U.S. 6 agencies continue to provide services for 7 children, this group now constitutes a small part of 8 the population of children in need of 9 planning and services. I think we know that, but I want to remind us of that. 10 By contrast, the number of children in the 11 12 nation's out-of-home care system who need adoption has grown tremendously, as we have already heard. I think 13 that there is a result, a range of social conditions 14 15 and policy changes that are impacting this increase and the increase in the quality and the nature of the 16 needs of those kids. 17 Children have been typically exposed to a 18 19 range of challenging needs, in addition to the fact that they are special needs by virtue of being hard to 20 place. Prenatal exposure to drugs and alcohol have 21 been referred to already. Medical fragility has been 22 referred to already. History of physical and sexual 23 abuse, being members of large sibling groups and 24 25 having other complicated needs which make it difficult

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for them to be placed without regard to which race the children are from. These kids have been typically difficult for us to find placements for in the child welfare system around the country.

5 I think it's really critically important 6 for us to talk about this issue of disproportionality in out-of-home care and in the child welfare system. 7 8 You heard a little bit already or quite a bit already 9 about the percentage of kids who are in the foster 10 care system and the disproportionality there. I'd actually like to talk about the front door a little 11 12 bit so we better understand where these kids come into the system and some of the impacts that are happening 13 Because I think that until we actually begin 14there. 15 to pay attention to the disproportionate entry of kids into the system, we will not effectively solve this 16 17 problem.

The kids of color who are coming into the system are coming in in many, many communities as a result of disproportionate reporting, as has already been mentioned.

I've done quite a bit of work, and this is not in my testimony although the essence of it is in my testimony. I've done quite a bit of work in communities to help them to analyze where they're

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getting kids from and whether or not those children are disproportionately represented across the systems. And then to talk to those reporters about what they are reporting and why.

5 And what I can tell you is that the degree to which there is disproportionality is substantial at 6 the reporter level, before children are investigated 7 8 and substantiated for abuse and neglect, prior to the 9 decision of placement. There is clearly evidence that those kids, that disproportionate decisions continue 10 to be made across services. But even before the front 11 door happens those kids are being identified, and this 12 goes to an earlier point about surveillance more 13 readily in the community. 14

15 Is that а result of racism in the community? Perhaps some. But in my interviews with 16 17 both service providers who are Black and who are white, I found an interesting thing that I could not 18 19 have documented before. And that really was confusion, not racism, incompetence around race and 20 cultural needs of children. And 21 an inability to understand how to access services for children and 22 families of color in the community before placement is 23 needed, before abuse and neglect happens. 24

When you looked across systems, we looked

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1 at education, I looked at child welfare and looked at 2 juvenile justice. And the train of disproportionality, 3 as we all know, increases from one place to another 4 starting when children are very, very young. That 5 there's disproportionate reporting of children's zero 6 to five, that in communities where there is poverty 7 they are 50 times more likely, ten times more likely 8 to be reported for abuse and neglect as other children 9 who are comparably placed. And those kids prior to child welfare 10 the entering system were disproportionately likely to have been identified for 11 12 special indication services.

If you interview those early identifiers 13 of children or who are risk, they will tell you they 1415 did not know where to go or how to access the family services and supports. They will tell you that they 16 did not have services for those children in 17 the community to meet their needs. They will tell you 18 19 that they did not feel comfortable, and this is where racial competence and comfort come in. They did not 20 feel comfortable or competent to engage the family 21 effectively in helping the family sort through its 22 service and support needs. 23

This says to me that it is very complicated picture for us to really unpack this

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question of what is it that children need and how do we solve the problem.

All of that to say I think that what we 3 4 know about transracial adoption is that it can serve 5 children extraordinarily well. That no child should Our standards at the Child Welfare League of 6 wait. America really call for the placements to be in the 7 8 best interests of children. And that agencies can and 9 should honor the birth parents' request for a same race placement if it's appropriate and if it's in the 10 best interest of the child. 11

12 I do think that there is a significant question about the difference between screening for 13 race, matching for race and understanding race and 14 culture as a factor and need and a skill area for 15 competence for children and families. And that often 16 our conversation equates all of those 17 things as coequal, and they are not coequal. 18 We can be 19 competent around our interactions for children and 20 family as regards with race without doing racial matching and without doing racial 21 screening as prohibited by the law. And that it's critically 22 23 important for us to look at ways that we pay attention to all of those things. 24

I think for me and for the Child Welfare

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1 League the question of compliance with MEPA and state 2 compliance with MEPA with a very, very complex picture. We truly believe that the answer to meeting 3 the best interest of children of color in the child 4 5 welfare system is to address the disproportionate children of color 6 impact of and to address the 7 comprehensive needs of kids coming into the child 8 welfare system. And that requires us, first and 9 pay attention to prevention, foremost, to early 10 intervention services and support service. And that as long as we allow ourselves to be diverted from 11 12 attention to the things that will solve this problem best, we will be on the wrong page and the wrong 13 argument. Not that there are not valid and legitimate 14 15 questions for us to understand about transracial adoption. We really must continue to do the research 16 and to understand what this service is about and how 17 18 it serves or does not serve kids.

I think that we also need to understand the treatment needs of children who are in the child welfare system, and to understand what it is and how it is those treatment needs are met for kids. There is in the Third National Incident Study, and I'm very interested in the fourth when it comes out. There was a lot of evidence that there's disproportionate access

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to service for kids by race, both over service and under service for children in the child welfare system and approaching the child welfare system. The kids didn't have the same access to the range of services that they needed to meet their treatment needs. That has to be addressed.

7 You walk into the average child welfare 8 agency in this country and they will tell you I can't 9 qet mental health services, I can't get housing services, I can't get basic services for the children 10 I serve. This is a barrier for those kids to be 11 12 placed, both return home to their families to be placed in-racially in their communities if they are in 13 foster or adoptive parents, or with their kin, with 1415 grandparents and grandmothers. Each and every day those families are suffering from resource needs. 16

I think that the third area that I would 17 talk about is also not just prevention, not just 18 19 placement, but research and skill building. And I've already talked about skill building. The importance of 20 research and beginning to build a knowledge base about 21 what the outcomes for children are across the service 22 areas is critical for us, and for us to pay attention 23 to the needs of children based in race and outcome is 24 25 really important.

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1	And I will say several folks have said
2	that prevention is critically important and that the
3	funding needs to be restructured in this child welfare
4	system in order to address that. I would say my final
5	point is the structure of this versus the needs to be
6	restructured in order to pay attention to more up
7	front services to solve this problem. And we may
8	all disagree about how that gets restructured, but I
9	think we would agree that it needs to be restructured.
10	And I'll leave it at that.
11	VICE CHAIR THERNSTROM: Once again, thank
12	you so much.
13	And once again, I'm not going to hold
14	people. Let me just ask one question and make one
15	comment.
16	I think Elizabeth Bartholet has it was
17	a sentence in her sentence that I thought was
18	incredibly important to hear and it has implications
19	beyond the topic we're addressing today. She said "If
20	you let race to be used a little, it will take over."
21	And that's a sentence that resonates very much with me
22	and as I said, has broader implications.
23	I am, and I guess I'll address this to
24	Professor Bartholet, what is your view of the
25	assertion made by a number of witnesses today that
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1 there is discriminatory reporting that accounts for the disproportionately high number of African American 2 children that are adoption eligible? 3 So, I mean 4 you've got Black children in this children matched to 5 the Black population about 12 to 13 percent. I don't 6 know what the population of children is, it's going to 7 be higher than that because of larger family size. But 8 in any case, if we've got up to 40 percent of the 9 children who are adoption eligible being African 10 American children, you have got а very 11 disproportionate number here. To what degree in your 12 view, because you didn't mention it but many other people did, are we talking here about discriminatory 13 reporting? 14

15 And then I have a very kind of dump question to ask of anybody who wants to answer it. 16 Where are the older children who -- I mean, where are 17 they living? What is done with the older children who 18 19 are so difficult to place and is there any discussion of well run boarding schools for such children? Ι 20 mean, what are our options here and what are our 21 better options that we don't discuss, or perhaps we 22 I don't know. This is a topic that I don't know 23 do. as much about as I might. 24

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So, anyway, two questions on the table.

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PROFESSOR BARTHOLET: I would like to 1 2 actually just as a preliminary matter just say very briefly on the race a little, which you didn't exactly 3 4 ask me about but you commented, I don't want to be 5 misunderstood. Because I actually am somebody who believes in some context including benign affirmative 6 action that race can and should be used in that 7 8 context. And since I am not a race-lined advocate, my 9 argument is that keeping kids in foster care and denying placement is not a form of affirmative action. 10 You know, even if one agrees in affirmative action--11 VICE CHAIR THERNSTROM: Right. 12 PROFESSOR BARTHOLET: -- one could be 13 against this. 14 15 VICE CHAIR THERNSTROM: Right. But you were making a statement and this was a binary decision 16 17 _ _ PROFESSOR BARTHOLET: Right. Right. I just 18 19 know that some people who say that often take the next 20 step --VICE CHAIR THERNSTROM: Right. Right. 21 PROFESSOR BARTHOLET: -- and say it should 22 never ever be used. 23 VICE CHAIR THERNSTROM: Right. 24 25 PROFESSOR BARTHOLET: And I just wanted to **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. (202) 234-4433 WASHINGTON, D.C. 20005-3701 (202) 234-4433

140 1 clarify that that's not where I'm coming from. 2 VICE CHAIR THERNSTROM: Right. Fair 3 enough. 4 PROFESSOR BARTHOLET: So disparate entry, 5 I'm very glad you asked me that. Disparate into the 6 foster care system and what do we do about that, and 7 how do we understand it as a phenomenon. A lot of 8 people have said it's complex to understand, and I 9 agree with that. I'm not ready to say it translates 10 as Dorothy Roberts' work would say, and some have 11 quoted that. That just because there's 12 disproportionate entry equals current discrimination. You know, I believe it demonstrate that as 13 a society we've had historic discrimination. And I 1415 don't believe, you know, Black parents are no more genetically likely to do abuse and neglect than white 16 parents. So there's historic discrimination that has 17 resulted in situation where Blacks 18 а 19 disproportionately are at the bottom of society, and that means in unemployment and substance abuse and 20 whole set of problems that feed into the likelihood of 21 abuse and neglect. 22 I think I'm not persuaded, although I 23 can't deny the possibility, that there's some current 24 25 actual what you might call discrimination that helps

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explains, but I'm ont persuaded that's it. I think 2 overwhelming abuse and neglect is a poverty related problem. Now it's only poverty related. Most poor people don't abuse and neglect kids, don't lose their So it's that if you grow up poor and you never kids. had a chance in life, the likelihood is going to be 6 greater that you're also doing drugs. 90 70 to percent of the kids in foster care have parents who 8 are seriously involved in substance abuse.

So I think it's a historic poverty and 10 injustice and discrimination problem. But in terms of 11 12 today I believe almost all the kids, white and Black who are removed from their parents and come into the 13 foster care system, are there as a result of serious 14 abuse and neglect. I think in fairness to the kids we 15 should be removing more kids. 16

Now I also believe in prevention. I would 17 simultaneously do more solve the rich white divide, 18 19 and I would early prevention. In my Nobody's Children book I argue for early home visitation. Get to the 20 mothers when they're first pregnant and provide a lot 21 of support services. But --22

23 VICE CHAIR THERNSTROM: Do you know anybody who does that well? 24

PROFESSOR BARTHOLET: Yes. David Olds has

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1 brilliant, I think, both а model and research 2 demonstrating that his model of early home visitation 3 both reduces abuse and neglect, reduces second and 4 third pregnancies, gets people more likely more likely 5 and to educate mothers into education and employment, 6 which again reduced the likelihood of abuse and 7 neglect. And actually his home visitation model when 8 directed at relatively poor populations, his research shows it's cost effective within five years because of 9 the savings in welfare costs. 10

11 Now the rest of the home visitation 12 research, nobody can come up with research like David 13 Olds that proves it works. So that either means his 14 research is better or his model is better, or both.

15 VICE CHAIR THERNSTROM: And is this model 16 very expensive?

It's cost effective 17 PROFESSOR BARTHOLET: in 18 five years. So it's expensive. He uses 19 paraprofessionals. But within five years -- he's now trying to take this to scales throughout the country 20 by going to the public entities, states and saying if 21 you adopt this, you will save money within five years 22 because I can show you it works. It will get people 23 into employment, off of welfare. 24 And this isn't even 25 taking in account the reduction in abuse, neglect,

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juvenile justice, adult criminal system, long term costs. This is within five years basically welfare cost savings.

So, yes. I mean, I've written up his research in *Nobody's Children*, although there's more recent. That books came out a handful of years ago.

So I believe in early prevention. I believe also in the way early, just clean up our society and make it more just.

I'm a real skeptic, though, about saying I 10 think what Linda Spears and some others have been 11 12 alluding to, that we should just do more family That if you look at the family 13 preservation now. preservation research, meaning the late stage, we have 14 15 certain families we're about to or we might consider removing the kids because they've been seriously 16 17 abused and neglected, but shall we keep them at home because we can provide services. If you look at even 18 19 the model programs doing that type of -- and even the intensive family preservation research, 20 there's a social worker on your door step sort of 24/7, the 21 research doesn't show it works. The research shows 22 that the kids continue to be abused and neglected at 23 home at essentially the same rates they were before 24 25 these services were poured in.

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144 So Т don't think if you wait until 1 2 families fall into very serious dysfunction, which is 3 I think what's happened with most of the kids we're 4 now removing, I think it's significantly too late. And 5 that what we should be doing, what Congress' Adoption 6 and Safe Families Act pushes in the direction of, 7 which is a fairly short window of time; 12 months to 8 get the act together, 15 out of the prior 22 months 9 child welfare agencies are mandated to move to termination unless the kid's in kinship care. 10 So I think we should do more up front 11 12 early, early to do prevention. But then I think most of those kids who are coming in are abused and 13 neglected kids. And isn't it an issue of current 14 15 racial discrimination that's bringing them in. It's abuse and neglect. And that in my view it would 16 discrimination against these kids if we said let's 17 just keep them at home. 18 19 VICE CHAIR THERNSTROM: I know Linda Spears, who has something to say. 20 And my other 21 question where are the older children. PROFESSOR BARTHOLET: And what should we 22 do with them? 23 VICE CHAIR THERNSTROM: And what should we 24 25 do them? **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. WASHINGTON, D.C. 20005-3701

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1	PROFESSOR BARTHOLET: Yes.
2	VICE CHAIR THERNSTROM: And is there such
3	a thing, I mean this is pure ignorance on my part.
4	PROFESSOR BARTHOLET: Yes.
5	VICE CHAIR THERNSTROM: But is there such
6	a thing like boarding schools that are well run?
7	PROFESSOR BARTHOLET: Yes. There are a
8	number of people today who are saying that we have so
9	many older so damaged, hard to place, some of them may
10	not even really be able to function in a family
11	because they're damaged that we ought to be doing more
12	in the way of institutions. And, of course, this
13	country does have institutions already, including
14	institutions with infants in them.
15	VICE CHAIR THERNSTROM: Well run?
16	PROFESSOR BARTHOLET: You know, I just had
17	Chuck Nelson, a brilliant Harvard medical person who
18	does early brain development who said what I think
19	most good experts have said for years, that there is
20	not an institution that works well for kids. Now, is
21	it what we have to do if we have failed so horribly
22	that we have kids who are so damaged that they can't
23	function in families? It may well be the best thing
24	for some of these kids. But my answer would be for the
25	future we ought to take ASFA seriously, Adoption and
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Safe Families Act. We ought to be moving sooner to get kids out of abuse and neglect households into foster care. We ought to be saying to the families we'll put you priority access into substance abuse treatment programs, but if you're not off drugs in a year, you lose the kid. We move those kids on faster. You wouldn't have this problem of the older damaged kids. And I think if you wait until kids are 15 and they've been through multiple damaging experience,

you know, yes there are miracles. But most of those kids are going to have a really tough time, no matter what you do with them.

VICE CHAIR THERNSTROM: Yes.

Linda?

SPEARS: My point actually MS. Yes. 16 17 wasn't about family preservation services at all. My point was that in fact many of the families that are 18 19 identified at that front door and do get into the child welfare system, that if you count back several 20 service point attempts at access over the course of a 21 child's lifetime, that by the time they've gotten to 22 the child welfare you may in fact have sustainable 23 abuse and neglect and real serious harm. 24 But that if 25 you look back and interview informers and reporters

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1	when they first identified a need for service to the
2	family, that need often went unmet or undermet.
3	To me the thing we really need to look at
4	is from that point all the way forward to the front
5	door and through it.
6	VICE CHAIR THERNSTROM: Yes.
7	DR. McROY: In addition to the lack of
8	resources and support services for many of these
9	families, one of the reasons that poverty is linked to
10	this is the fact that impoverished birth families
11	don't have the access to the same kind of legal
12	representation more well to do families may have which
13	can get them out of this situation and keep their
14	children from being removed. If they had more
15	resources, in many cases they would not be in this
16	situation, number one. One of the most successful
17	prevention programs is family group conferencing
18	that's happening on the front end in which families
19	are brought together as part of the team along with
20	social workers to identify strategies to keep the
21	children from going into the system into the first
22	place. An example of that is Point of Engagement, a
23	model in Compton, California which has significantly
24	reduced the numbers of children that are coming in.
25	If a lot more is done on the front end,
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particularly identifying family members as resources, these children would not end up coming into the system and then moving from place to place.

4 I interviewed a young person just a couple of weeks ago who has been in 38 different foster 5 placements. So when you start thinking about what 6 7 happens within our system, sometimes it can be even 8 more abusive than the original family ever could be, 9 number one. As I mentioned earlier, the majority of 10 the children are coming in because of neglect, 11 parental neglect. And if resources were available, such as treatment, support services, child care, and 12 jobs, this would not be the problem. 13

You asked where are the older children. Some of them are in group care. Some of them are in foster care. Some are in residential.

Twenty to 25,000 children age out of the system each year. Those children still wish they had families.

VICE CHAIR THERNSTROM: Yes.

DR. McROY: If we could do more on the front end to try to prevent kids from coming in and then more rapidly connect them with families, using all the strategies, implementing the requirement of MEPA to recruit families, and then to encourage

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agencies to reach out to those programs that have been extremely successful, and in fact have waiting lists, of minority families wanting and waiting to adopt. We need to also continue to examine what happens to children who come into the system and to examine what we do to prevent children from ever making that entry into our troubled child welfare system.

8 VICE CHAIR THERNSTROM: And how are the 9 families identified who you've described as working 10 together to prevent children ever entering the system? 11 DR. MCROY: That's in the areas that have 12 family group conferencing to decision making; that's 13 the program, that's the intervention that offered at 14 the very beginning?

15 VICE CHAIR THERNSTROM: Yes. It was16 Compton, California, was it?

Well the Point 17 DR. McROY: Yes. of Engagement is the one that's referred to in Compton, 18 19 California in which the moment there's a call, say from a hospital about a child who may have been 20 prenatally exposed to drug or alcohol, a team goes 21 22 out. VICE CHAIR THERNSTROM: 23 I see.

DR. McROY: And then they meet with the family and begin to identify resources within the

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family or within the community. Often that child never enters the system.

VICE CHAIR THERNSTROM: I see. Okay. That's good.

5 PROFESSOR BARTHOLET: Two comments. One 6 on the neglect. Because there are a lot of people who say oh the majority of the cases are neglect. By 7 8 definition that shows over intervention and we're 9 removing kids for poverty. The majority of the cases 10 are neglect, but my contention is that overwhelming the neglect category is a serious neglect category. 11 12 That this is not, you know, dirty houses and social workers with white gloves. Overwhelmingly this is 13 serious substance abuse and kids who are not being 14 raised. And I believe. Now that is a contended fact. 15 But I don't want you all to just accept without 16 realizing it's highly contended that neglect means 17 they shouldn't be removed. 18

19 Kids die from -- kids in the neglect 20 category die as a result of neglect at a higher rate 21 than kids in the abused category, just as one little 22 factoid.

The other comment I want to quickly make is family group conferencing, the idea that well we should accept that it's working because it might

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1 reduce the number of kids removed from their families, 2 family preservation people are constantly saying let's 3 make the criterion for success do the kids stay in the 4 family. Well that in my view isn't success if the 5 kids continue to be abused and neglected. Intents of Family Preservation Services research, that's the 6 7 claim they tried to make in the beginning; look how 8 successful we are, we're keeping the kids in the familv. 9 The research showed the kids were continuing 10 to be abused and neglected at the same rate. So I don't--- you know, of course it makes 11 12 sense to talk to family members. But to say that we

know it's working because now we just turn it over to 13 the family to decide what happens. I mean, you know, 1415 abuse and neglect tends to be an extended family problem. And it's always true -- and that's why I'm 16 17 also a little skeptical about kinship care. Of course you'd want the grandmother to raise the kid if the 18 19 grandmother was the great grandmother. But very often the grandmother produced the kid who was abused and 20 neglected, who abused and neglected the grandkid. 21

VICE CHAIR THERNSTROM: Right. Right.Other questions, not about this.

24 PROFESSOR BARTHOLET: We go on all 25 afternoon. But we won't.

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152 DR. McROY: I thought we should just 1 2 clarify that we were not all in agreement. 3 PROFESSOR BARTHOLET: There was an 4 agreement, but there wasn't --5 VICE CHAIR THERNSTROM: Let me amend that 6 statement. There is more agreement than I expected. 7 I'll amend it to that. 8 Yes, Mr. Atwood and then Commissioner 9 Taylor. I'd just like to comment on 10 MR. ATWOOD: everything that everybody just said -- just kidding. 11 12 Not much to add except one thing I will highlight for you. That the emphasis on restructuring 13 the foster care financing system for purposes 14 of 15 providing better for early intervention services, that is a common agreement. I'm not sure that it's 16 17 something that you were expecting or needed to hear on the Commission on Civil Rights, but it is --18 19 VICE CHAIR THERNSTROM: No, it's important. 20 MR. ATWOOD: It is something that we are 21 all pushing very hard for in the adoption and child 22 welfare community. 23 This pertains to the front door to this 24 25 comment, I want to pick up something that my good **NEAL R. GROSS** COURT REPORTERS AND TRANSCRIBERS 1323 RHODE ISLAND AVE., N.W. (202) 234-4433 WASHINGTON, D.C. 20005-3701 (202) 234-4433

1 friend and colleague Joe Kroll said about community. 2 And I thought that I want to agree with part of it and 3 I want to maybe distinguish myself a little bit on 4 another part of it. But the part that I agree with is that in determining the best placement at the front 5 door for a child, community is a great question to 6 7 I mean, trying to find a placement within the ask. 8 community, it's familiar to the child. So that is 9 clearly a factor that should be highly considered in 10 making the placement.

Professor Bartholet just pointed out the fact that it can sometimes be, you know, throughout the family that this problem is, so you need to be careful when you make that placement within the community or within the family that you're not leaving the child vulnerable to further abuse.

But the other point I wanted to make is 17 that considering community in your placement is not 18 19 considering race. Those are two different things. Ι mean, the community may have a preponderance of a 20 certain race within it or it may not. So what we're 21 talking about when we're saying consider a community 22 placement, we're saying consider a placement that is 23 within a familiar place. We're talking about physical 24 25 place there really. We're not talking about race.

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1	VICE CHAIR THERNSTROM: Fair enough.
2	Commissioner Taylor?
3	COMMISSIONER TAYLOR: A quick question. I
4	wonder, everybody's talked around this issue, but I
5	always come to these Commission meetings starting from
6	the point, that is active discrimination, is it
7	present. And on the disproportionate entry question
8	I've heard I think cultural ignorance, I think I have
9	heard historical discrimination which I put parent
10	inactive close paren. I put poverty related.
11	My question is do we have a consensus as
12	to the cause and effect between this disproportionate
13	entry and active discrimination? And I ask that
14	question because of the answer is no we don't have a
15	consensus on that point, that goes to what I have
16	already prepared for this meeting with respect to the
17	view in the African American community about what
18	social workers are doing, breaking up Black families,
19	et cetera.
20	So my question is to the experts do you
21	all see this disproportionate issue as being linked to
22	active discrimination?
23	MS. SPEARS: I can tell you I don't
24	believe it's that simple. That I believe that all of
25	the above exists. That there may be active
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discrimination. There may be ignorance and inability. There may be institutional and long term and cultural legacies that we're dealing with. In my view all of the above exists at some level. And the degree to which any one of them exists, I'm not sure we know the answer to.

DR. McROY: A lot of times we are making 7 decisions about bringing children into the system 8 9 based upon stereotypes of families. And it's those stereotypes that lead a worker, for example, to bring 10 in one child and not another child; stereotypes, 11 12 generalizations about families, especially low income families of color. And that has been identified as a 13 major issue. This is something that's happening and 1415 has been, of course, addressed by the GAO very recently looking at the interaction of 16 different 17 factors that lead to the disproportionate entry of children into the system; and then once they're in the 18 19 the disparities that occur in terms of system, likelihood of reunification with their families and 20 likelihood of adoption. 21

22 COMMISSIONER TAYLOR: And what's 23 interesting to me on that point, though, is going back 24 to what Ms. Spears said on the post-entry interview 25 when you interview the Black social worker and the

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1 white social worker, I thought I heard you say and 2 I've heard this before, that you didn't see а 3 difference on those questions. You couldn't track a trend line so when the white social worker walked in 4 5 you saw that cultural incompetence. So what I'm 6 wondering what explains it? If it's cultural 7 incompetence and you can't directly relate it to a 8 Black social worker and a white social worker, they 9 end up with the same trend lines, what does that say? 10 If it really --

To many people there's a 11 MS. SPEARS: 12 stereotypes of Black or white. Whether they're Black or white. That a lot of workers, for example, if you 13 look at physical discipline for example. 14 You will 15 find in many communities workers extremely challenged to understand how to make decisions about the use of 16 physical discipline in communities of color. They are 17 extremely challenged by it, both Black and white. And 18 19 some of that is about Black, about the interaction of Black of race in class, some of that is a training 20 issue. But workers will both in the same system use 21 the same stereotype to make opposing decisions. That a 22 Black worker or a white worker will screen a case in 23 this physical discipline because the person is Black 24 and/or the child is Black or vice versa. 25 That they'll

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1	excuse the behavior because their perception that it's
2	acceptable in the community.
3	So to me it's a very complicated question
4	that there are not easy answers to.
5	PROFESSOR BARTHOLET: And I'd agree with
6	that. But I just want to take a stab at the question.
7	I mean, I believe that conscious and
8	unconscious racism exists throughout our society. So I
9	can't say but not in this area.
10	DR. McROY: That's exactly right.
11	PROFESSOR BARTHOLET: I mean, you know,
12	it's going to exist in this area like it exists in
13	other areas.
14	Now in this area, though, I would say two
15	things. You know, I think it's small compared to the
16	larger phenomenon. I think it's a small explanatory
17	factor, likely to be nobody can say how much it is,
18	but I think it's likely to be small.
19	Secondly, I think it may looked at from
20	the child's point of view be an example of pro-Black
21	child discrimination. I think we're under
22	intervening. so, you know, if people tell me that in
23	some drug situations we're more tolerate of the white
24	substance abusing parent and we're not testing, which
25	is true, we're not testing in the wealthier hospitals.
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So maybe we're disproportionately Okay. 6 7 likely to intervene at birth with respect to those 8 kids. Now that is pro-Black child to me 9 discrimination because those kids to take a drug effected child at birth and send that child home with 10 a drug abusing parent is a prescription for disaster 11 12 for the child.

So, you know, I think this notion of 13 discrimination, the way most people are using it, is a 14 15 completely parent oriented concept. Where the notion that if we do disproportionately intervene, this is 16 hurting Black parents. Well, if we think abuse and 17 neglect is actually going on, you know it may be that 18 19 we're not protecting white kids as much as we ought to 20 be.

DR. McROY: One thing that's important is 21 that this issue of disparities is not unique to child 22 The same kind of issue comes up in terms of 23 welfare. 24 the criminal justice system, it comes up in health 25 it mental health. The Surgeon care, comes up

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General's report that specifically looked at disparities in mental health included the provision of case scenarios to physicians all over the country, the same case description, the only thing different was the race of the client. And this, along with many other studies, have proven that often we make decisions based descriptor, upon а often that descriptor being the race of the client.

9 other issue has to do with under The 10 utilization. You mentioned earlier you were asking about Asian community and why there's Asian under 11 12 representation. And that, too, has been raised as an issue in terms of the stereotypes sometimes that is 13 leading one group to come in disproportionately and 14 15 one group not to come in at the same level. So that's another issue. 16

This is something that is happening in many different systems. It has to do with cultural competence. Some states are requiring workers to take a course called Undoing Racism to begin to address the historical and negative perceptions and stereotypes that have led to different outcomes in this case in the child welfare system.

VICE CHAIR THERNSTROM: We need to wrap uphere unless other people have urgent questions.

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COMMISSIONER MELENDEZ: I just have one final question for anyone. How can race and ethnicity be talked about perspective families for adoption? And then secondly, are there examples you know where a state social service provider is both complying with MEPA and doing a great job with educating family about the race and ethnicity issues?

8 PROFESSOR BARTHOLET: Oh how? I mean, I 9 think legally it can be talked about under MEPA if you 10 really separate screening for purposes of past/fail as a parent, you know, and even for purposes of which 11 12 child you'll get. If you make it a pure education that has no sanction for the prospective parent, you 13 could talk about race. 14

I think also agencies have to do it in a way that isn't specifically separating out transracial parents. So if you separate transracial parents out and give them extra education, they have to go through what other people don't, I think that's illegal under MEPA.

So, yes, agencies are now pushed to kind of put everybody together for this racial training rather than separate the transracial parents out. And I actually think that's good. You know, if we think people need this kind of racial education, why do we

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think only the transracial parents need it? Why not have everybody have it.

And I also think you'd get much more interesting varied answers from the prospective Black parents than you would from the social workers as to what's the right racial way to raise your child.

7 So, you know, that's what people are 8 complaining about that's going on now. It's not like 9 the HHS, I don't believe, is telling anybody they They're telling them you can't just 10 can't do this. separate out the transracial parents and say you've 11 12 got to go through this special thing, you have to do it for all the prospective parents. So, yes, it can 13 be done but in that context. 14

MR. ATWOOD: The parent education should be taught for anyone adopting out of foster care and generally is taught. There are additional challenges that children in foster care can present to adoptive parents. And so they need to be advised regarding those.

The way I would summarize the types of 21 22 discussions that can occur between agencies and prospective adoptive parents on the subject of race 23 24 would be summed up in two concepts. One is parent 25 additional education, which is regarding the

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challenges that can present themselves in the case of transracial adoptions. And the other is parent selfassessment. Asking questions of the parents that they are expected to consider themselves as to whether they are suited for a transracial placement. And both of those things are covered explicitly in the HHS comments on what parents can do.

8 I'll read, if I might, two examples. One, 9 "Prospective parents should be offered HHS says 10 typically through training provided by an agency information sufficient to confirm or broaden their 11 12 understanding of what types of children they might most appropriately provide a home for." 13

And then another one is "Agencies are not 14 15 prohibited from discussing with prospective adoptive their feelings, 16 and foster parents capacities, 17 regarding caring child of preferences for а а particular race or ethnicity." 18 They're not supposed 19 to steer the parents with this. They're not supposed to screen parents with this. It needs to be an 20 educational activity. 21

DR. McROY: And many agencies are reluctant to offer that for fear that they will be in violation of the law, just as they often are not complying with the legislation which requires agencies

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1 to recruit families that reflect the diversity of 2 children in care for fear that they will be seen as So therefore, they 3 taking race into consideration. 4 opt just not to do it. But think for a minute about 5 the significance of considering race. Let's say an 8 6 year old African American child who comes from an 7 African American birth family, then is placed in four 8 or five ethnically different foster homes. Now the 9 child is soon to be placed in a White adoptive family, Will that child have any adjustment issues related to 10 11 race of family? Might that family have some concerns 12 about how to address the child's issues of racial identity, as well as loss from moving from one place 13 to another to another. Should the family be prepared 14for that? Should the child as well? 15

We talk about family preparation, but what 16 Should the child be prepared for 17 about the child? going into a family that is totally different from any 18 19 environment that he's been in before? The answer I would think is yes. Of course. How could we not 20 prepare that child and that family so that that 21 placement is successful? 22

MS. SPEARS: And I would just want to add one really quick thing, and that is that in that context I think it's important for us to remember that

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1 skill required to take care of the children in the 2 child welfare system is not shallow, it's deep in all areas. And that these kids needs -- they need the 3 4 baseline training. Every family needs baseline 5 training around mental health issues, around 6 separation and loss, around cultural issues, et cetera. And the families who are dealing with 7 8 intensively needy kids in need the any area 9 specialized and additional skills to support that child's needs. And that's, I think, the way we should 10 drive the way we look at this. 11 12 VICE CHAIR THERNSTROM: Well, I'm going to arbitrarily -- I mean, we could talk about this 13 It is really is an utterly fascinating 14 forever. 15 topic. I'm so glad we held this briefing today. I 16

16 want to thank everybody in the room who participated 17 in it. And the conversation will not be at an end, 18 obviously.

So, again, many many thanks. And we'llbring this to a close.

(Whereupon, at 1:36 p.m. the briefing was adjourned.)

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