Improving Outcomes for African-American Males in the Child Welfare System: Meeting Summary

"It is easier to build strong children than to repair broken men."

—Frederick Douglass

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September 2013

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3154_09/13

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Introduction

On January 14–15, 2013, the Technical Assistance Partnership for Child and Family Mental Health (TA Partnership) at American Institutes for Research and the Center for the Study of Social Policy (CSSP) convened 55 practitioners, researchers, family members, and foster youth to focus on improving outcomes for African-American males in the child welfare system. Children who enter the child welfare system, particularly African-American males, are more likely to have mental health and other emotional challenges, as well as other problems including

"We want this meeting to produce guidance we can share in the field and make sure all kids—especially kids of color—receive the most beneficial services and supports."

—Dr. Gary Blau, Chief; Child, Adolescent, and Family Branch; Substance Abuse and Mental Health Services Administration

but not limited to low academic achievement, delinquency, alcohol abuse, and drug abuse. Moreover, they are more likely to be arrested for violent and criminal behavior as juveniles and adults. In addition, the economic consequences associated with the child welfare system are important to recognize. Significant direct costs result from maintaining a child welfare system to respond to allegations of abuse and neglect, as well as to provide out-of-home placements for youth who can no longer remain with their parents or legal caregivers. The indirect costs go beyond placing children in the system and continue to mount after they have aged out. Some of these costs include the loss of productivity due to unemployment, underemployment, homelessness, and overuse of the health care system. The aforementioned negative outcomes are just some of the reasons this meeting was so important.

The meeting, titled "Improving Outcomes for African-American Males in the Child Welfare System: Identifying Effective Program and Services," was supported by the Substance Abuse and Mental Health Administration's (SAMHSA's) Child, Adolescent, and Family Branch and the U.S. Department of Health and Human Services' Administration on Children, Youth, and Families (HHS-ACYF). As a follow-up to the September 2011 meeting, "Improving Outcomes for African-American Males in the Child Welfare System: The Importance of Effective Strategies and Interventions to Promote Social and Emotional Health," the January meeting was designed to achieve the following objectives:

- Identify effective system practices, programs, and/or interventions that improve outcomes for African-American males in child welfare.

- Identify current service gaps in the field.

- Identify opportunities to support the development or expansion of effective and/or promising practices.

- Identify protective factors that support the well-being of African-American youth and families.

Dr. Gary Blau, Chief of the Child, Adolescent, and Family Branch, SAMHSA, and Bryan Samuels, Commissioner, ACYF, opened the meeting by reiterating the obligation of each agency to improve outcomes for African-American males in the child welfare system. Dr. Blau

emphasized SAMHSA's commitment to the Systems of Care model and the need to strengthen mental health services for children, youth, and young adults. A system of care is defined as a spectrum of effective, culturally competent, community-based services and supports that builds meaningful partnerships with families and youth. Dr. Blau highlighted SAMHSA's Strategic Initiatives, and in particular, the trauma and justice initiative. He spoke of SAMHSA's dedication to understanding trauma and its effects, the importance of developing trauma-informed care models, and the delivery of services that are culturally and linguistically competent. Opening remarks by Commissioner Samuels emphasized the need for systems change that is focused on family systems and that integrates safety, permanency, and well-being. Prior to becoming ACYF

"At the end of the day, all boys grow up and go out into the world and either make positive contributions or negative contributions. There is a real opportunity for African-American boys to make a greater contribution to society going forward, but if we are going to get there, we have to get this right."

—Bryan Samuels, Commissioner of the Administration on Children, Youth, and Families

Commissioner, Samuels served as head of the Illinois child welfare system and then as chief of staff for Chicago Public Schools. He stated that both the child welfare system and the educational system have historically failed to address the needs of African-American males. These two systems missed the opportunity to make a significant difference, which is a national problem that can no longer be ignored. Samuels continued by stating that family systems are as important as public systems, especially within the context of child welfare, and that too little time is spent on children and families where abuse and neglect have happened. Systems need to focus on those families and to help them heal and recover. According to Samuels, one of the best ways to promote successful healing and recovery in the child welfare system is to work at multiple levels while examining multiple factors unique to African-American families and boys. Figuring out what interventions work best for African-America families and boys can trigger conversations about how these components come together to create systems that produce solutions and better results.

Emerging Themes

The primary objective of the meeting was to stimulate group conversations through interactive panel discussions with foster parents and youth, and through presentations on effective programming and interventions by child welfare practitioners, program developers, and researchers. From these sessions, eight major areas of focus for improving outcomes for African-American males emerged:

- Incorporating the voices and experiences of African-American males and their foster parents to inform child welfare practices and policy

- Rethinking the way mental health services are presented and delivered to African-American males in child welfare

- Addressing the issues of trauma, trauma-informed care, and well-being to promote better outcomes for African-American males in child welfare.;

- Examining social structures and the ways in which institutional racism negatively impacts the shaping of policies and development of programs serving African-American males in child welfare

- Identifying programs that foster resiliency in African-American males.;

- Providing enhanced supports and training for foster parents to impact positive outcomes for African-American males in child welfare.;

- Identifying educational issues affecting African-American males and supporting their educational strengths

- Galvanizing community support to impact the well-being of youth and families

Incorporating the Voices and Experiences of African-American Males and Their Foster Parents Into Child Welfare Practices and Policy

The narratives shared by the young men and their foster parents throughout the January meeting revealed many gaps in services that result in their needs being unmet. During the panel sessions, the youth spoke passionately about the many times the system left them feeling not only hopeless but also powerless, especially in regards to treatment options and aging out supports to assist them with transitioning to independent living. Foster parents repeatedly emphasized the lack of customized trainings to provide them with the knowledge and requisite skills necessary to foster the African-American males in their care. In addition, they identified the excessive caseload of social workers and the lack of trauma-informed supports as barriers to providing effective care for African-American males in the child welfare system. Keeping these narratives at the forefront of policy and practice discussions is essential, especially while rethinking and reshaping the policies and practices guiding child welfare decisions. By learning from the experiences of African-American males and their foster parents, we can begin to understand the reforms that are necessary to aid foster youth in becoming successful adults. For example, during the reaction panels, youth suggested incorporating peer-to-peer recommendations for treatment and service providers. They also acknowledged the over-diagnosis of mental health disorders, such as attention deficit disorder (ADD), attention deficit hyperactivity disorder (ADHD), bipolar

disorder, serious emotional disturbance (SED), and conduct disorder, as well as the lack of trauma-informed care. Trauma-informed care is grounded in and directed by a thorough understanding of the neurological, biological, psychological, and social effects of trauma and violence on humans and the prevalence of these experiences in anyone who receives mental health services. Foster parent Tyrone McCrae acknowledged that he avoids any reliance on a formal mental health diagnosis such as ADHD to explain a child's behavior, as well as any attempt to place African-American boys into special education classes. He tries to build trust through patience, through understanding, and by showing genuine caring. The anger and resentment toward the system often felt by African-American males was another issue discussed and one that should be recognized if sufficient progress is to be made in addressing the needs of African-American males in the child welfare system and resulting in improved outcomes.

"I do not follow rules. I do not look at the folder [given to him by the caseworker]. The agency tells me I do too much for kids. You can never do too much."

—Tyrone McCrae. Foster Parent

System-level changes also were suggested by youth, foster parents, and practitioners. These included, but were not limited to the following:

- Hiring former foster youth as case workers because they understand the trauma and experiences of foster youth

- Inviting current foster youth to have a voice in policy and practices reform

- Encouraging innovations in the workforce

Changing the rhetoric around foster-care youth, for example, referring to the youth as one's child or son/nephew, will help remove the stigma and labeling of youth involved in child welfare. Mentoring and other programs focused on fostering positive youth-adult relationships were stressed as being vital for the success of African-American males in child welfare.

Rethinking the Way Mental Health Services Are Presented and Delivered to African-American Males in Child Welfare

It was abundantly clear that the youth and foster parents at the meeting were very dissatisfied with the practice and delivery of mental health services provided to African-American males in child welfare, particularly the over-diagnosis of mental health disorders such as ADHD, oppositional-defiance disorder, and conduct disorder, three of the most common diagnoses for African-American males within the child welfare system. Foster parents spoke of feeling overwhelmed by the multiple diagnoses documented in the files of their foster children. They were deliberate in pointing out the need to identify more effective ways to address the requirements of foster youth that move beyond the mere labeling of a diagnosis toward an approach that meets the youth where they are. Furthermore, the youth and foster parents questioned the validity of the diagnoses. More often than not, they believe a diagnosis is a way to avoid having to address the systemic, institutional causes of the underlying issues that manifest themselves through the behavior, which is the symptom not the cause. An overarching concern

> *"I feel that the youth, as well as me, are in a lose-lose situation with the state. If we do not want to go to therapy, then you have to take medication and get a psych evaluation. You are telling us, not asking us. Where does our opinion come in?"*

—Laquindrick Wiley, Youth

shared by meeting participants was the lack of a culturally competent mental health workforce that mirrors the child welfare population. Youth experiences shared at the meeting revealed that, all too often, mental health workers rely on their perceptions of African-American males and spend little time building relationships and trust. Youth at the meeting also felt that providers placed more emphasis on managing medication than on listening to and empathizing with their experiences. In addition, they reported the lack of opportunities afforded to them for involvement and input into the development of their treatment plans.

The research presented at the meeting revealed that African-American men are less likely to seek out mental health treatment, and when they do, they are more likely to end treatment early. This is partially due to the negative perception African-American men have of mental health and treatment, as well as the stigma attached to mental health concerns within the African-American community. In addition, those who have sought treatment have had negative experiences with mental health providers. This stigma is further concretized by the existence of social constructs related to race and gender for African-American males that stipulate that mental health concerns should be kept a secret. For example, Sixto Cancel shared that he was taught never to discuss anything that was going on within the household; he was trained to lie about what was really happening in his foster home. Often this is due to the fear that the African-American community has of the mental health system. Many African Americans believe that talking with someone will not be helpful or that revealing certain information could get their parents or caregivers incarcerated. In addition, research conducted by Dr. Michael Lindsey, Center for School Mental Health at the University of Maryland, found that many African-American males were "anti-mental-health treatment" because they felt that seeking treatment is a sign of weakness. They tended to seek care within social networks or from peers or others who had similar experiences. To overcome these cultural barriers, providers need to understand the importance of developing culturally competent approaches to address mental health needs and the importance of family and community networks for African-American males. When these connections are established (trust), it is easier for these youth to be referred to and accept the mental health assistance needed.

Addressing the Issues of Trauma, Trauma-Informed Care, and Well-Being to Promote Better Outcomes for African-American Males in Child Welfare

Unaddressed trauma can have a devastating impact on youth, especially African-American males in child welfare. The misdiagnosis and over-diagnosis of African-American children in the child welfare system is largely due to the failure to address the trauma that they have suffered. According to an Adverse Childhood Experiences (ACE) study, children who experience trauma **can** have a much shorter life, and everyone who touches the lives of these youth should look at the work through the lens of trauma. Often, this trauma reveals itself through anger and resentment and can lead to the misdiagnosis of a mental health disorder such as conduct disorder or oppositional-defiance disorder, according to Brendan Hargett of the Guilford County (North

Carolina) Department of Social Services. This is why trauma-informed assessment is extremely important and should be one of the first assessments conducted on youth in care. Throughout the meeting, foster parents conveyed that the lack of trauma-informed assessments for youth and families often results in a missed opportunity to adequately identify the trajectory of issues that youth experience and, therefore, how these experiences introduce system involvement and placement in foster care. The use of these assessments would result in earlier, more effective mental health interventions, thereby impacting the effects of trauma on the front end. Recognizing and comprehending this trauma would aid clinicians in understanding the root causes of the emotions the youth often display (anger, resentment, pain) and avoid the misdiagnosis of mental health disorders.

> *"I asked, 'Can you handle what I am about to give you: 20 years of foster care?' I do not need a pity party. I need to figure things out. Help me process things and think."*
>
> **—Sixto Cancel, Youth**

According to Dr. Edward Morris, Director of Agape Psychological Consortium in Greensboro, North Carolina, and a colleague of Mr. Hargett, much needs to be done to increase the cultural competence and effectiveness of psychologists and other mental health providers who work with African-American males and their families. The way clinicians assess the mental health of children and families of color needs to be challenged. Rarely do mental health assessments for this population mention race or socioeconomic factors, but we know that these two issues have a significant impact on the lives of individuals of color. In addition, Dr. Morris pointed out that the courts also must be more aggressive in questioning clinicians about the connections between cognitive function impaired by trauma and the behavior of children in the child welfare system.

Every session at the meeting provided researchers, practitioners, youth, and foster parents a forum to discuss possible solutions to this underlying issue. Making training (at all levels) on trauma and its affects readily available to the child welfare workforce will increase their capacity to understand and address issues related to trauma. Training also would enable practitioners to make the necessary linkages between trauma and behavior, thus avoiding the misdiagnosis of a mental health disorder. In other words, becoming a trauma-informed system gives clinicians and other mental health providers the opportunity to address the underlying causes of the behavior rather than just assigning a diagnosis such as oppositional-defiance disorder and ADHD.

The promotion of positive psychosocial functioning and the use of protective and cultural factors should be present in trainings developed around addressing trauma. Dr. Carl Bell's presentation made a distinct connection between the promotion of these factors and the effective treatment of trauma. Using protective factors as a framework can bolster social connections as well as the social and emotional competence of youth, thus building resilience. He pointed to decades of research that illustrates the importance of social, cultural, and family protective factors for African-American males; he also stated, however, that these factors often are overlooked. Understanding the significance of culture as a protective factor is essential to treating trauma in African-American males. Cultural perspective aids in the cultivation of resilience in these youth and in advancing the culturally competent education of the workforce and movement toward a protective-factor approach to care. In addition, understanding the community and the social

context in which youth live is necessary to address the daily traumas to which they have been exposed. Communities often generate their own protective mechanisms, such as a distrust of the police or outsiders, which practitioners and researchers need to fully comprehend in order to push the system toward a trauma-informed model.

"There has to be individual accountability, but where we fall short is that we were not turning the mirror inward and doing the analysis of system response, and using that to help us examine how we respond to various communities and populations."

—Joyce James, Director, Center for Elimination of Disproportionality and Disparities

During this session, the issue of funding was discussed as well. Dr. Morris advocated for mental health grant funding to be redirected to culturally competent trauma-informed practice at the community level. Too often state and federal mental health grants are disbursed to large universities that are disconnected from "those in the trenches" who can provide legitimate data to inform policy and practice. The redirection of these public-sector grant funds will result in substantial payoffs in terms of developing more efficient, competent, and informed mental health care for vulnerable children and families—those who need the most assistance.

Examining Social Structures and the Ways in Which Institutional Racism Negatively Impacts the Shaping of Policies and Development of Programs Serving African-American Males in Child Welfare

Meeting attendees learned that disparities within child welfare and other child- and family-serving systems are well documented. Furthermore, African-American children are twice as likely to have poor outcomes across these systems. Institutional racism and cultural biases underlie much of the disparity that exists within these systems; therefore, making the case to support the development of a culturally competent workforce becomes clear. State agency leaders, staff, and policymakers all must be willing to examine their own biases and how those biases impact decision making. Trainings on implicit bias and anti-racism policies and practices are crucial in creating a system that can examine its work and structures from a well-informed perspective. These trainings are essential in examining the process of socialization, implicit bias and its impact on the decision-making process, and, consequently, the promulgation of disparities and disproportionality. The emphasis should be on conducting an analysis of how systems respond to various communities and populations, especially those of color. More importantly, systems should ensure that, as much as possible, the workforce reflects the cultural and linguistic composition of the community that it serves.

Although a culturally competent workforce is critical, reducing disconnects between the youth and the workforce is also important. During the panels, youth felt this disconnect negatively impacted their experiences throughout the system. In addition, the high caseload of many social workers led to little if any interactions with foster parents and often allowed biases and misperceptions to guide the decision making of caseworkers. This disconnect is due, in part, to a lack of understanding of the community and social constructs the youth face, giving each case

little cultural and/or community/social context. Without the appropriate context, the caseworker may not be able to help the youth grapple with the anger, resentment, and other negative feelings, as well as the dual stigmas of race and foster care, while creating an environment in which they can experience psychosocial growth.

Implementing change will require commitment from stakeholders across all levels of the system and input from key researchers in the field. During the meeting, groundbreaking programs and models were presented by leading researchers and practitioners. Joyce James, Director of the Center for Elimination of Disproportionality and Disparities, shared the Texas model for addressing racial and ethnic disparities within child welfare. To ensure that the system is working to reimagine the way child welfare decisions are made, the Texas model combines the following elements:

- Data-driven strategies to build institutional capacity

- A culturally competent workforce

- Community engagement that includes the voices of families, youth, and community leaders

- Cross-system collaboration

- Anti-racism training

Buttressing this model is a willingness among state agency leaders, staff, and policymakers to examine their own biases and how they impact their decision making. Ms. James reported that "African-American males are twice as likely to have bad outcomes in every system." Instead of designing programs to fix broken people, we need a new lens. Programs are needed that will impact the issues that African-American males face, and individual and systemic accountability is of the utmost importance. James went on to say that we fall short by not turning the mirror inward and conducting an analysis of the system's response to various communities and populations.

Overall, participants in the meeting felt that a much more aggressive and demanding conversation on race, racism, and poverty in child welfare is crucial for reform. The young African-American men at the meeting made it clear that they considered race to be an additional barrier within the system. According to Ms. James, building the personal and institutional capacity necessary to address institutional racism is fundamental to shaping policy in a way that will benefit African-American males in the foster care system. When Texas leaders decided to conduct a self-examination of what they were doing, it revealed the implicit bias that resulted from what they had been trained to think about certain populations. It was not intentional racism; rather, it was the result of how all people have been socialized, causing decisions to be made across racial lines. The work in Texas can be considered an exemplar because it has led to engaging in

> *"What would you say to Trayvon [Martin] before he went out? When you get on a plane you prepare, yet we do not do that with racial matters."*
>
> **—Dr. Howard Stevenson, Associate Professor, Applied Psychology and Human Development Division of the Graduate School, University of Pennsylvania**

difficult but necessary conversations about race. Courageous conversations about race must take place in order to improve the system and outcomes for African-American males.

Identifying Programs That Foster Resiliency in African-American Males

Dr. Regenia Hicks opened this segment of the meeting by offering participants this definition of resiliency: the ability to quickly recover from change and illness, and to adjust to whatever challenges we are faced with. She added, "One of my favorite definitions of resiliency is the ability to give a punch and take a punch." Dr. Howard Stevenson and Dr. Carl Bell gave their perspectives, based on research, regarding African-American males and their response to and ability to recover from traumatic experiences in their lives. Both acknowledged how devastating racism is in the lives of African-American boys and young men who are in or who have recently exited from the child welfare system, making it difficult for them to move toward success.

Dr. Howard Stevenson, Associate Professor at the University of Pennsylvania, presented his innovative intervention, Preventing Long-Term Anger and Aggression in Youth (PLAAY), which focuses on fostering racial and emotional resilience in African-American males. Based on his Racial Encounter Coping and Appraisal Theory, PLAAY teaches emotional empowerment through athletic movement in basketball, self-control in martial arts, cultural pride reinforcement through group therapy, and bonding in family interventions, all through a culturally competent lens. PLAAY addresses anger and aggression while building on resilience through peer interactions, allowing African-American males to convey the pain caused by trauma and the societal pressure they feel due to racism. PLAAY also helps those involved to learn alternative methods to problem-solve the emotional, relational, and racial challenges of urban street and schooling cultures. The program has shown remarkable results, with African-American boys demonstrating increased school attendance, homework completion rates, overall school engagement, reduced school assaults, and reduced referrals to the principal's office.

Internationally recognized expert Dr. Carl Bell pointed to decades of research that confirms the importance of social, cultural, and family protective factors for African-American children and family well-being. According to him, however, protective factors are frequently overlooked for this population. In particular, much more understanding is needed about cultural factors that protect people, and it is essential to move toward more of a protective-factor approach with regard to prevention and intervention. These protective factors are significantly responsible for building resiliency in African-American males who suffer trauma. Furthermore, research by Dr. Bell and others indicates that interventions that promote positive psychosocial functioning show high degrees of effectiveness as well. For example, the Chicago-based Aban Aya Youth Project provides African-American students in Grades 5–8 with up to 21 lessons that focus on social-competence skills that help them to manage situations that could lead to violence, provocative behavior, delinquency, drug use, and unprotected sex. For African-American boys, the results are impressive: The program helped to reduce aggressive behavior by more than 10 percent, decreased the school delinquency rate by 50 percent, and increased the use of condoms.

Work in Illinois embedding the protective-factor approach resulted in a reduction of out-of-home placements in McLean and Cook Counties, as well as statewide. Drs. Bell and Stevenson were very clear about the importance of providing the necessary school and community supports to

help African-American males overcome the challenges of trauma by exploiting the protective factors already present in their lives.

Providing Enhanced Supports and Training for Foster Parents to Impact Positive Outcomes for African-American Males in Child Welfare

Foster parents were adamant and uncompromising in their assessment of the child welfare system's failure to provide adequate, ongoing, relevant, culturally competent training and support to improve their effectiveness as parents and their ability to impact positive outcomes for African-American males in their care. The foster parents noted that while there are many training sessions, the content does not address the issues, life experiences, and underlying effects of trauma on African-American males in child welfare. Therefore, the training does not help staff and potential foster parents understand the population with which they will be working. Another shortcoming of the child welfare system that was identified was its inability to assist foster parents with preparing youth who are ready to transition out of the system into the next phase of development—that is, independent living and being able to make good life choices. All agreed that more intensive life-skills training is needed for youth between the ages of 17 and 21, and involvement with mentorship programs with Afrocentric-based business models would be beneficial.

Identifying Educational Issues Affecting African-American Males and Supporting Their Educational Strengths

The consistency with which the child welfare and educational systems fail black males was discussed in great detail. A key factor in both systems is the lack of high expectations for vulnerable youth with self-regulation and self-image challenges that frequently are the result of trauma and a shared emphasis on managing and avoiding risk, which is in direct opposition to social and emotional well-being.

According to Dr. David Osher, Vice President, American Institutes for Research, involvement in the child welfare system can significantly impact the odds of on-time high school graduation. He pointed to national studies showing that fewer than 70 percent of foster youth complete high school before they leave foster care, and slightly fewer than half of former foster youth are high school graduates. Moreover, there are other factors that exacerbate the adverse childhood experiences of youth in foster care. For example, youth in foster care are not exposed to early educational or other interventions that they need to succeed in school. Studies by Johns Hopkins researcher Robert Balfanz show that children entering foster care already have missed too many days of school, and after they are in the system, they have higher rates of absence compared with other children. Foster children also have higher rates of suspensions and expulsions, especially in kindergarten and the early grades, with 75 percent performing below academic standards in grade school.

> *"As with a good foster home, schools also must be places of nurturance and competence building for all students."*
>
> **—Dr. David Osher, Vice President and Institute Fellow, American Institutes for Research**

Several studies confirm that

foster youth fall further behind in high school. A study of foster high school youth in four California counties showed that only 21 percent to 28 percent were at proficiency levels for English and language arts in 11th grade compared with 45 percent for all students, and the picture was even more dismal for math at 6 percent to 14 percent compared with 34 percent overall. When disaggregated by race, African-American students were up to 40 percent less likely to score proficient in English compared with white students in foster care. African-American foster care alumni also are significantly less likely to have a regular high school diploma than their white counterparts and more likely to earn a General Equivalency Degree (GED), which does little to nothing in terms of increasing income and earnings.

"We always have to think about the conditions under which young people operate—micro assaults and the conditions of adults who work with them," said Dr. Osher, adding that the adults often suffer from burnout. He also noted that "Schools are a place where most kids experience alienation, negative relations, poor adult role models, segregation with anti-social peers," and harsh discipline. Indeed, many schools have been "over-criminalized" because of an emphasis on school safety, with little thought to the implications for kids of color, as Dr. Osher added. All of these factors can exacerbate the risk of school failure for children in the child welfare system.

Schools also can provide protective factors and can foster positive relationships between adults and youth that are critical to competency and success. One such example is the Eagle Academy for Young Men led by One Hundred Black Men, Inc. and founded in 2004 by community leaders, parents, teachers, and corporate partners in South Bronx, New York. The model is so successful that it has been replicated in Brooklyn, Queens, and Newark, New Jersey. Others are planned for Staten Island and Harlem. The academy's strong core values include academic excellence, leadership, character development, mentoring, and community service. Schools are committed to parental engagement, academic rigor, ample extended and summer learning opportunities, rituals, summer programming and mentoring, all of which characterize the Eagle Academy approach.

"It isn't easy. Teachers and staff who work at the academy need a thick skin and an understanding of what the young men in their charge come to school with. They come in with luggage you did not help create."

—Donald Ruff, Director of Strategic Initiatives and College Planning, The Eagle Academy Foundation, Member of the Coalition of Schools Educating Boys of Color (COSEBOC)

The key to Eagle Academy's success is that parents see themselves as equal stakeholders in their children's success. Parents sign a contract to support their child's learning, and school-employed family coordinators provide ongoing assistance to ensure two-way communication. Five annual parent meetings are held on weekends and are extremely well attended—with standing room only.

Eagle Academy operates on an extended school day, which serves two purposes: It keeps students out of trouble and allows more time for learning. There is a rigorous college culture, and extracurricular activities are offered. College campus visits begin in sixth grade, and college graduation is expressed as the expectation from the first day. To help students prepare for college, the academy offers a three- to four-hour summer bridge program that provides early

assessment and learning partnerships with local universities that often offer expensive college-prep programs with set-asides for minority and low-income students. Saturday mentoring sessions with One Hundred Black Men leaders also help prepare students for college.

Galvanizing Community Support to Impact the Well-Being of African-American Youth and Families

The African proverb "It takes a village to raise a child" has a literal translation: The community is the village, and it has an important role to play in supporting the well-being of African-American youth and their families. The community must include traditional and nontraditional agencies and organizations to improve the conditions of youth and families, particularly those who have been impacted by the child welfare system. According to Pastor Darrell Armstrong, the antidote to the social ills facing African-American males in the child welfare system is religion, which is in itself a protective factor. He noted the power of the African-American faith community as a preserver of tribal life and strong social connections and concrete support in times of need.

The National Parenting Survey, conducted among parents of children ages birth to 3, showed that families believe religious background and faith tradition are extremely influential in their children's lives. Research by Donahue and Cook also indicates the strong role of the church in promoting resilience among inner-city youth.

> *"Social sciences have sought to de-legitimatize religion, but the evidence of the power of faith is clear."*
>
> **—Pastor Darrell Armstrong, Shiloh Baptist Church, Trenton, New Jersey**

To help improve the delivery of social services, networks of faith-based organizations are forming across the country, including in New Jersey where Pastor Armstrong has helped to establish and now chairs the General Baptist Convention Commission on Children and Families. Similar collaborative efforts are being launched in Orange County and Atlanta that include faith-based leaders, social service providers, and the Metro Black Chamber of Commerce. These efforts build on best practices, create sacred spaces for families, establish trust and love, and connect parents and children to the appropriate services and assistance.

As Dr. Roger Jarjoura spoke, his focus was on one of the greatest positive community resources that can be brought to bear on impacting the lives of African-American males: adult mentors. When mentoring is done with skill, care, and respect, the relationship between an adult mentor and youth can be "magical," according to Dr. Jarjoura. He also cautioned, however, that it is easy to do it poorly. The challenge is to distill what makes mentoring powerful, seed those ingredients into current practice, and take what works to scale. He outlined several principles essential to effective mentoring:

- **Start with a big vision for the ultimate outcome: productively engaged adult citizens**. This is what we want for our children. It means developing authentic relationships that help nurture the child's well-being and promote positive outcome in

school and life. Mentoring is not an "intervention." The focus is on cultivating children's natural talents and high aspirations.

- **Effective mentoring is about relationships, but context matters**. Mentors must be culturally competent; with African-American males, it is important to be aware of ethnic identity. House of Umoja in Philadelphia has developed effective strategies to reduce gun and gang violence by stressing re-parenting and unconditional love within the context of African culture.

- **Fully address trauma and exposure to violence**. Youth need a safe place to talk about the trauma that they have experienced, and mentors must be equipped to understand its impact, especially within the context of masculinity, and help the youth unpack and ultimately leave the traumatic experience behind.

- **Effective mentoring for African-American boys includes advocacy.** Mentors should be ready to offer alternatives to school disciplinary, child welfare, and juvenile justice systems.

- **Access to model programs is complicated.** It is difficult for effective youth mentoring programs to be recognized and get to scale.

- **Identify strong mentors in the community when family members are absent.** When children are asked to choose a mentor, they usually look to immediate and extended family members, but this can often place children within the child welfare system at a disadvantage, particularly when family members are unavailable. Other community members often make good mentors, such as those who have been nominated by other youth. A good example is the National Guard's Youth Challenge program, which has realized good results.

- **Instill hope for the future by highlighting successful outcomes.** Dr. Jarjoura mentioned the work of Men in Motion in the Community (MIMIC) as an organization that works to turn former gang members into role models. He acknowledges the importance of using young men and women who have overcome poverty, violence, racism, and other traumatic experiences as examples of success for at-risk children.

Another essential factor that was discussed was the importance of engaging African-American noncustodial fathers in support of their children. Sequane Lawrence, Director of the Fathers, Families, and Healthy Communities Demonstration Project, emphasized the efforts of his organization to build the capacity of fathers to be good parents and help them navigate a system that is all too often hostile to them. Mr. Lawrence is working on reconnecting fathers with their children in foster care and is developing a model that other communities can replicate. The program's goal is to connect fathers to a range of critical supports that include legal aid, job-training programs closely tied to employment sectors, and peer support. The program also seeks to measure the impact of these better connections and relationships between fathers and their children.

Small-Group Breakout Sessions

During Day 2, participants were asked to break into small groups to discuss three topics based on issues and themes that emerged during the meeting to promote better outcomes for African-American males in the child welfare system: (1) incorporating a protective-factor approach into cross-system policy and practice; (2) identifying and promoting core competencies for child welfare system leaders and staff; and (3) defining how American Institutes for Research (AIR), the Center for the Study of Social Policy (CSSP), the U.S. Department of Health and Human Services' Administration on Children, Youth, and Families (HHS-ACYF), and the Substance Abuse and Mental Health Services Administration (SAMSHA) can advance this work. The results are as follows:

> *"There is research that says dads don't matter. That says all you need is a mentor or a minister and that a father is irrelevant. ... We reject that. We are putting a stake in the ground for fathers."*

—Sequane Lawrence, Director, Fathers, Families, and Healthy Communities Demonstration Project

- **Incorporating a protective-factor approach.** Participants agreed that all systems should use strength-based approaches and tools to minimize the negative perception of black males. Models such as the one used in Texas should be replicated to reduce disproportionality within the system. Professional development should be provided to develop a common understanding about the protective-factor approach, and child welfare and private agencies should receive help with revising professional development standards. In addition, the distance between adults in the system and the youth that they serve should be closed through help with building bridges and relationships.

- **Identifying and promoting core competencies.** Foster youth case files should include strength-based assessments. Foster parents should be consulted regarding training needs. Staff should be trained to provide "psychological first aid." Cultural competence should be added to the list of protective factors, and anti-racism language should be included in all provider contracts and hiring policies. Staff attitudes toward African-American males should be addressed, and leadership should be trained to have courageous conversations and to develop workers' ability to do the same. Effective community organizing should address feeder systems that are placing too many African-American males in child welfare systems. Core cultural competencies and protective factor constructs should be introduced into the curricula of schools of social work. Child welfare agencies should continually monitor hiring and training to ensure that their staff is diverse and culturally competent. To boost retention, high-quality staff should be rewarded.

- **The role of AIR, CSSP, HHS-ACYF, and SAMSHA in advancing this work.** The small groups suggested that the organizations conduct case analyses to address issues of bias in child welfare systems. In addition, federal funding received by child welfare systems should require that the funds be connected to efforts to reduce disparities, promote cultural competency, address disproportionality, and combat racism. The organizations also should work with the National Council of Juvenile Judges and other organizations to increase cultural competency in judicial systems. Finally, online networks can be created to continue this discussion, and they should include foster parents and youth.

Conclusions and Recommendations

The meeting resulted in the following conclusions and recommendations for consideration:

- The child welfare system continues to remain distant and isolated from the voices, experiences, and wisdom offered by African-American foster youth about the need for much more culturally competent care and more effective post-emancipation services. The further removed the child welfare system is from the youth's insights, the more ill-informed and unprepared it will be about how to improve outcomes. It is recommended that more training opportunities become available to increase the cultural and linguistic competence of service providers in child-serving systems.

- Promulgation of honest, provocative dialogue is needed about race and institutional racism in the child welfare and juvenile justice systems—dialogue that is intended to elicit action toward sustained positive change.

- The meeting identified several of the program elements that help guarantee better outcomes for African-American males in the child welfare system, but it also highlighted how child welfare and other systems must embed those elements in their work to sustain effective programs. It is recommended that guiding principles for data collection and analysis be developed to assist child-serving agencies in their efforts to address disproportionality and build capacity to provide culturally competent service delivery within a community-based context.

- Mental health services for African-American males need to be rethought and reframed to encourage greater emphasis on play and affirmation of cultural identity, increased competency of mental health providers, and less emphasis on the traditional one-on-one treatment models. In addition, mental health providers also should understand and provide trauma-informed care because many African-American males are the victims of trauma in their everyday lives.

- Several community-based service efforts have demonstrated effectiveness and cultural competence in serving African-American males. It may be prudent to identify mechanisms to support and sustain such programming.

- Information about community-based and promising programs needs to be shared broadly by providing information on community-based and promising practices for utilization in the field through the development of a compendium or other community resource.

Next Steps

This meeting was a clear indication that there is much work to be done to make significant progress to improve the outcomes for African-American males in the child welfare system. Susan Notkin (CSSP) and Bryan Samuels (ACYF) provided closing remarks summarizing the central themes. American Institutes for Research and the Center for the Study of Social Policy will continue to work together to identify strategies and interventions to impact change for African-American males, including the need to address institutionalized racism, which includes disparities and disproportionality. In addition, both organizations will collaborate to find agencies that provide effective and culturally responsive mental health services, as well as high-quality aging-out and independent living services.

Mental health services for African-American males need to be rethought and reframed to encourage greater emphasis on cultural identity, trauma-informed care, and increased competency of mental health providers. In addition, data should be used to address disproportionality and build capacity for culturally competent service delivery while shifting away from the traditional one-on-one treatment models.

A key priority emerging from this meeting is to keep the voice of African-American males in the child welfare system and their foster parents central to the work as we move forward. To this end, American Institutes for Research will work with the National Association of Black Social Workers, the Black Administrators of Child Welfare, and the National Association of Foster Parents to conduct a series of 10 focus groups across the country with African-American males in child welfare and their foster parents. The foster parent focus groups are intended to capture their unique perspectives on system challenges, including gaps in training and needed supports for their role.

According to Samuels, work at the federal level will continue in an effort to elevate the issue of childhood trauma and its toxic impacts on children in the child welfare system. He also stated that the meeting advances the work by defining child well-being as an outcome that systems are obligated to address along with safety and permanence. ACYF is granting Title 4 waivers to states that make child well-being an explicit outcome, and so far nine states have applied. ACYF also is encouraging more early and periodic mental health screenings and working with universities to create curricula at schools of social work that emphasize trauma-informed care and well-being outcomes.

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