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# Racial Disparities in the U.S. Child Protection System Etiology and Solutions

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## Abstract

Long-standing disparities exist in the rates at which African American families come under the scrutiny of child welfare systems. Disparities occur most often at the reporting stage. African Americans families are disproportionately reported to and investigated for child neglect but not physical abuse. The strains of economic disadvantage experienced disproportionately by African American families make them more likely to be scrutinized by mandated reporters leading to a higher number of African American children who are removed from the care of their families and placed in foster care. Once under the supervision of the child welfare system, a lack of cultural sensitivity and a bias toward punishment make the system less likely to provide families the assistance they need to support the healthy development of their children. The outcomes of the majority of the children placed in foster care do not provide strong support that upon exiting the system the children are much better off for it. Upon leaving foster care almost half are chronically unemployed and are relegated to dead end low-wage job on which they are hardly able to meet their own needs let along support a family. This situation has led to calls for a radical re-envisioning of child welfare system to make it more pro-active and preventive. To address racial disparities institutional racism in child welfare must be confronted, a moratorium on mandated reporting of neglect should be enacted and child welfare systems should be re-focused from investigations of negligent families to reducing the disadvantages of socially neglected families.

**Keywords** African Americans · Racial Disparities · Mandated Reporting · Racism · Family Support

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*“Man charged with breaking 22 ribs of his infant daughter”*

*“Grandparents, uncle, charged in beating resulting in death of 11 year old boy”*

*“Woman arrested for allegedly punching, biting, and burning her one-month old baby”*

The behaviors described in these news headlines are emotionally wrenching in a society committed to valuing and protecting its children. Although such incidents are not commonplace, even one is intolerable. The sentiment to protect children has given rise to federal and state statutes that authorize state inquiry when there is reason to suspect that a child is endangered, provide for sanctions against responsible adults, and create programs such as family social services and foster care for children whose parents are deemed unfit to care for them. Accounts of child maltreatment such as the ones depicted in the headlines above often arouse moral outrage and the impulse to protect innocent children and punish the perpetrators. Most perpetrators are related to the child; parents make up 81% of perpetrators and about 88% of these are biological parents; more than half are women (Administration on Children and Families 2012).

In 2018 alone, 3.5 million families were referred to social services due to suspected maltreatment with more than 678,000 cases substantiated (Administration on Children and Families 2020). More than 60% of these cases were classified as neglect or endangerment, about 11% as physical abuse, 7% as sexual abuse children and 15% as victims of multiple types of abuse (Administration on Children and Families 2020). Most victims of child maltreatment are very young children and are as likely to be a boy as a girl. Foster care placements have been funded to shelter children found to be endangered or abused. In 2017, foster care in the U.S. was a large and growing enterprise with about 443,000 children placed outside of their homes. Moreover, more than 690,00 children spent some time that year in foster care (Child Welfare Information Gateway 2019a).

Reliance on aggregate national data may obscure the fact that state laws differ in how they define abuse and neglect and delineate who needs protection, from what, and from whom. In addition to differences across states in their child protection statutes, counties and local governments organize and administer child protection services differently (Child Welfare Information Gateway 2011). Thus, Child protection looks different depending on the state of residence and sometimes on locales within states. Differences in child protection across states and local jurisdictions arise from how maltreatment is legally defined by the state and interpreted at the program level (DeLong Hamilton and Bundy-Fazioli 2013). Although most states mandate reporting of both abuse and neglect, clear definitive guidance about what should be reported is often lacking (U.S. Advisory Board on Child Abuse and Neglect 1993). State and local definitions of child abuse and neglect have as their starting point Section 3 of the Federal Child Abuse Prevention and Treatment Act (CAPTA). CAPTA defines the scope of child maltreatment in the following way: “At a minimum, any recent act or set of acts or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act, which presents an imminent risk of serious harm” (CAPTA, 42 U.S.C. § 5101 note). Actual or potential harm through endangerment is the central focus of this statute. Actual harm can occur in the form of physical abuse, sexual abuse, and

emotional or psychological abuse. This definition focuses mostly on serious harm but casts a wide net by including acts of omission along with acts of commission.

Neglect is the inability of a family to meet a child's basic need and placing the child in danger of harm (U.S. Department of Health and Human Services 2010). Basic needs are defined in terms of attending to a child's emotional, environmental, physical, educational, and medical well-being. Wald (2017) argues that child protection policies aim not only to protect children's physical and emotional health but also are concerned about children's development in terms of their ability to function socially, achieve academically and ultimately support themselves as financially independent adults. Accordingly, adequate parental supervision would involve ensuring a child's safety, health, and overall well-being. Actual physical harm may be easy to judge, but potential harm can be difficult to assess and is inherently subjective (Proctor and Dubowitz 2014). The lack of uniform terms and definitions across states also make it difficult to estimate the national prevalence of abuse and neglect data based on data reported by states.

Table 1 presents examples from the National Incidence Study (NIS)-4 of terms used to capture incidents of abuse and neglect. This study attempts to address the differences across jurisdictions and to standardize data that states report to the federal government (Sedlak et al. 2010). Neglect is a particularly troublesome category suffused with class bound judgments and colored by assumptions about resources available to parents and about the amount of control they have over the adverse social conditions in which their children are being raised (DeLong Hamilton and Bundy-Fazioli 2013). In Table 1, italics highlight items that appear to the author to be slightly to highly subjective, linked to socioeconomic differences, and difficult to apply in assessing adequacy of functioning among families. These items are most rife with ambiguity and vulnerable to the subjective application of class norms and culturally biased attitudes. This ambiguity may be difficult to resolve uniformly because there is little cross-cultural consensus about what constitutes appropriate parenting or its violations across diverse socioeconomic and ethnic groups. This dilemma is especially troubling because neglect is the most common form of maltreatment numbering 678,000 or 60.8% of substantiated cases in the child welfare system in 2018 (U.S. Department of Health and Human Services 2020).

## Racial Disparities in Child Protection

Although conceptual ambiguities in child welfare standards are troubling in the abstract, they are devastating in practice for African American children and families. African American children and families are disproportionately scrutinized for suspicion of child maltreatment (Dorch et al. 2010). For example, Krase (2013) found that children of color were overrepresented in referrals for suspected abuse and that the higher rates of referrals occurred across the range of reporters. In addition, racial disproportionality was found to be greater for reports than for removal, perhaps due to the success of policy mandates to reduce racial disparities in out-of-home placements often through alternative diversion programs (U.S. Department of Health and Human Services 2020). Nevertheless, African American families are still more likely to be reported for suspected maltreatment and their children are slightly more likely to be

**Table 1** Definitions of Abuse and Neglect subtypes

Sexual Abuse	<ul style="list-style-type: none"> <li>• Intrusion sex without force</li> <li>• Intrusion sex involving use of force</li> <li>• Child's prostitution or involvement in pornography with intrusion</li> <li>• Molestation with genital contact</li> <li>• <i>Exposure/voyeurism</i></li> <li>• Providing sexually explicit materials</li> <li>• Child's involvement in pornography without intrusion</li> <li>• <i>Failure to supervise the child's voluntary sexual activity</i></li> <li>• Attempted/threatened sexual abuse with physical contact</li> <li>• Other/unknown sexual abuse</li> </ul>
Physical Abuse	<ul style="list-style-type: none"> <li>• Shake, throw, purposefully drop</li> <li>• Hit with hand</li> <li>• Hit with object</li> <li>• Push, grab, drag, pull</li> <li>• Punch, kick</li> <li>• <i>Other physical abuse</i></li> </ul>
Emotional Abuse	<ul style="list-style-type: none"> <li>• Close confinement: tying/binding</li> <li>• Close confinement: other</li> <li>• <i>Verbal assaults and emotional abuse</i></li> <li>• Threats of sexual abuse (without contact)</li> <li>• <i>Threats of other maltreatment</i></li> <li>• <i>Terrorizing the child</i></li> <li>• Administering unprescribed substances</li> <li>• Other/unknown abuse</li> </ul>
Physical Neglect	<ul style="list-style-type: none"> <li>• Refusal to allow or provide needed care for a diagnosed condition or impairment</li> <li>• Unwarranted delay in seeking or failure to seek needed care</li> <li>• Refusal of custody/abandonment</li> <li>• Other refusal of custody</li> <li>• <i>Illegal transfer of custody</i></li> <li>• <i>Other or unspecified custody-related maltreatment—unstable custody arrangements</i></li> <li>• <i>Inadequate supervision</i></li> <li>• <i>Inadequate nutrition</i></li> <li>• <i>Inadequate personal hygiene</i></li> <li>• <i>Inadequate clothing</i></li> <li>• <i>Inadequate shelter</i></li> <li>• Other/unspecified disregard of child's physical needs and physical safety</li> </ul>
Educational Neglect	<ul style="list-style-type: none"> <li>• Permitted chronic truancy</li> <li>• Other truancy</li> <li>• Failure to register or enroll</li> <li>• Other refusal to allow or provide needed attention to a diagnosed educational need</li> </ul>
Emotional Neglect	<ul style="list-style-type: none"> <li>• <i>Inadequate nurturance/affection</i></li> <li>• Domestic violence</li> <li>• Knowingly permitting drug/alcohol abuse</li> <li>• Knowingly permitting other maladaptive behavior</li> <li>• Refusal to allow or provide needed care for a diagnosed emotional or behavioral impairment/problem</li> <li>• <i>Failure to seek needed care for an emotional or behavioral impairment/problem</i></li> <li>• <i>Overprotectiveness</i></li> <li>• <i>Inadequate structure</i></li> <li>• <i>Inappropriately advanced expectations</i></li> <li>• <i>Exposure to maladaptive behaviors and environments</i></li> <li>• <i>Other inattention to developmental/emotional needs</i></li> </ul>
Other Maltreatment	<ul style="list-style-type: none"> <li>• Lack of preventive health care</li> <li>• General neglect—other/unspecified neglect allegations</li> <li>• <i>Custody/child support problems</i></li> </ul>

**Table 1** (continued)

	<ul style="list-style-type: none"> <li>• <i>Behavior control/family conflict issues</i></li> <li>• <i>Parent problem</i></li> <li>• General maltreatment—unspecified/other</li> </ul>
Others	<ul style="list-style-type: none"> <li>• Involuntary neglect</li> <li>• Chemically dependent newborns</li> </ul>

Source: National Incidence Study (NIS)-4 Abuse and Neglect Classifications (Sedlak et al. 2010)

placed in foster care (Font et al. 2012). Analyses of data gathered in 2017 reveal that African American children, who make up 13.8% of the population, accounted for 22.6% of reported victims of child abuse and 24.3% of those placed in foster care (Child Welfare Information Gateway 2019a). By comparison, European Americans, who constitute 51.9% of the population made up only 46.4% of referrals for suspected maltreatment and 43% of those children placed in foster care. In comprehensive analyses of state data reported to the federal government, Sedlak, McPherson and Das (2010) found that race differences for actual emotional harm and endangerment were small or nonexistent among children living in low SES households. Therefore, the most common reason for which African Americans are embroiled in the child welfare system is neglect in 2018 and although they comprise only 13.7 % of the child population they accounted for 20.6% of cases confirmed for neglect. (U.S. Department of Health and Human Services 2020)

Data reveal modest racial disparities at entry into and leaving the system through adoption or by exiting from foster care. In spite of their lower representation in the population, African Americans accounted for 22.4% of children entering and 23% of those exiting foster care; European Americans accounted for 46% of those entering foster care and 45.6% of those exiting foster care. African Americans represented 23% of those waiting to be adopted, and only 19.4% of those children were adopted; European Americans made up 43% of those awaiting adoption and 48.5% of those who were adopted (Child Welfare Information Gateway, *ibid*). Although the disparities at the entry into child maltreatment systems are substantial, differences beyond that point are modest (Font 2013).

### Racism in Child Protection systems

Racial disparities in the child welfare system have striking parallels with disparities in education, criminal justice, and health. They share a common pathway, *viz.*, poverty, implicit bias, discrimination, and victim-blaming (Lee et al. 2015a, b). Use of the pipeline to prison metaphor draws attention to associations among poverty, race and disparate outcome in child welfare that might not be apparent at first glance. It underscores the role of racial discrimination, institutionalized forms of oppression, and cultural imperialism in disparate treatment of African American families within child welfare.

The ubiquity of institutional racism has a pervasive inexorable impact on the lives of African Americans. Many African American families are investigated by the child welfare system for problems related specifically to poverty (DeLong Hamilton and Bundy-Fazioli 2013) For example, entry into the child welfare system is often preceded



by domestic violence, alcohol abuse, illicit drug use, homelessness and chronic unemployment. All are linked to economic disadvantage and poverty (Lown et al. 2006). The pipeline-to-prison metaphor underscores the adverse processes of systemic racism within schools and juvenile justice that disproportionately mark African American children as aberrant, problematic and needing sanctions. By disciplining harshly and expelling differentially, schools exacerbate achievement gaps and place youth at risk of incarceration (Barbarin 2010). In effect, these systems take a similar series of steps over time that prepare children well for incarceration. By stigmatizing, blaming, and expelling the child, the system is able to justify punishment instead of remediating misbehavior and conveying expectations for academic excellence.

In a similar fashion, the child welfare system treats problems related to neglect as *individual-level* problems meriting punishment. It often fails to consider the contribution of systemic issues such as economic deprivation, cultural differences, and racial bias. Because families are blamed and characterized as maladaptive, neglectful, and morally culpable, child protection programs can justify removing the child and punishing the parent all in the name of serving the best interest of the child (DeLong Hamilton and Bundy-Fazioli 2013). The labeling of the parent as abusive and neglectful makes it difficult to see parents as competent persons struggling against the overwhelming odds of poverty and isolation.

To add further to the analogy of the pipeline to prison, children are brought into the child welfare system at a very young age. The median age for all children currently in foster care is 6.5. About 41% of that group are either African American or Latinx (U.S. Department of Health and Human Services 2020). The disruptive effects of out of home placement on emotional wellbeing and educational attainment are palpable. Each year, 30,000 youth between the ages of 18 and 21, depending on the state of residence, age out of child protective placements (Child Welfare Information Gateway 2020). With a few notable exceptions at the end of the child welfare pipeline, outcomes are not positive and most leaving the system face significant obstacles to becoming self-supporting. They are often left on their own to survive and many do not do well. Their long term adaptation is often marked by low academic achievement and employment, homelessness, illness, drug use and incarceration. Unemployment rates were high for African American men (64%) and women (58%) When employed, most are trapped in low-skill, low-wage jobs. Moreover, children exiting the child welfare system were more likely to be involved in criminality than their peers (Gypen et al. 2017). For these reasons, the prison pipeline is an apt metaphor that elucidates many aspects of the disparate involvement of African American families in the child welfare system (Barbarin 2010).

### Accounting for Racial Disparities

It is tempting to attribute racial disparities in child protection to poverty alone. After all, African Americans are disproportionately poor, and the poor are disproportionately involved in child protection programs. For example, Pelton (2015) raises questions about the extent to which racism accounts for disparities in child protection arguing that rates in child welfare are the same as their poverty rates and that it is possible that substantiations of neglect are just less accurate for African Americans than other groups because the system produces as many false negatives as false positives. Nevertheless,



Pelton (2015) cites empirical evidence of bias toward African American, albeit mixed. Moreover, to the extent that the Pipeline-to-Prison analogy is compelling, race and culture become important touchpoints for examining the origin of racial disparities (Rivaux et al. 2008). This analysis begins with a recognition of the long-standing history of racial animus against African Americans. Poverty continues to be relevant to this analysis because systemic racist policies and discrimination lead to economic deprivation, a plethora of daily hassles, and stressors that contribute to impaired physical and psychological health (Williams et al. 2003). Families challenged by discrimination and inadequate resources must raise children under conditions over which they often have little control. Their access to critical resources is uneven and marked by insecurity with respect to employment, food, housing, neighborhood safety, and health care.

Because African Americans are disproportionately poor, they are disproportionately subjected to the biased “gaze” of a system doubtful about their fitness to provide for and raise their children properly (Nadan et al. 2015). Often judgments of the system do not consider the pernicious conditions that make family life stressful, deplete emotional resources for coping, and undermine well-being. The challenges of discrimination may be so overwhelming that it is not feasible for some families to emulate the middle-class ideal of “sensitive, responsive” parenting. Victim-blaming of African Americans and a lack of empathy for the material challenges they face weave their way into decisions to identify African American families as neglectful.

Animus and discrimination against single parenthood may also figure into racial disparities. About 3.9 million of a total of 8.5 million (46%) of African American families are led by solo mothers (Kreider and Elliott 2009). Child welfare systems may have little sympathy or tolerance for these single parents who are forced to compromise safety norms to earn enough to feed their children as they scramble between multiple jobs in the absence of any options for childcare. Lacking support, these parents are indicted on charges of child neglect and endangerment. Following similar scenarios, African American families may be targeted disproportionately for not adhering to the dominant cultural norms about how to properly safeguard and care for children. Moreover, the system fails to acknowledge that poor and African American families cherish their children no less but express and care for them as best they can within the constrained social conditions that accompany economic disadvantage. This failure opens the system up to criticism that it imposes the values of a privileged majority onto the poor.

### **Mandated Reporting and Implicit Bias**

In 1993, the National Research Council flagged imprecise definitions and standards as a urgent problem to be remedied. In spite of the high probability of bias due to unclear reporting standards, many states require anyone who suspects child neglect to report it. Some states go even further and attach sanctions to professionals who fail to report. In many states the list of mandated reporters is exhaustive. (See Table 2.). The covered professions often include social workers, teachers, and healthcare professionals. For many professionals, penalties include the revocation of professional licenses, thus threatening their livelihoods.

**Table 2** Mandated Reporters. (Persons mandated by legislation to report suspicions of child abuse and Neglect)

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The most common mandated reporters:

- Social workers
- Teachers, principals, and other school personnel
- Physicians, nurses, and other health-care workers
- Counselors, therapists, and other mental health professionals
- Child care providers
- Medical examiners or coroners
- Law enforcement officers

Additional professionals who are mandated to report suspected or known maltreatment by some States include the following:

- Commercial film or photograph processors (12 States, Guam, and Puerto Rico)<sup>3</sup>
- Computer technicians (in 6 States)<sup>4</sup>
- Substance abuse counselors (14 States)<sup>5</sup>
- Probation or parole officers (17 States)<sup>6</sup>
- Directors, employees, and volunteers at entities that provide organized activities for children, such as camps, day camps, youth centers, and recreation centers (13 States)

Other Mandated Reporters:

- In approximately 18 States and Puerto Rico, any person who suspects child abuse or neglect is required to report.
- Of these 18 States, 15 States and Puerto Rico specify certain professionals who must report but also require all persons to report suspected abuse or neglect, regardless of profession.
- The other three States—Indiana, New Jersey, and Wyoming—require all persons to report without specifying any professions.

Permissive Reporters of Maltreatment:

- In all other States, territories, and the District of Columbia, any person is permitted to report.
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At first glance, mandated reporting by professional helpers would appear to be a justifiable policy that is needed for early detection. By enlisting a wide array of professionals in the child surveillance network, there is a greater likelihood of discovering and mitigating child maltreatment. In theory, mandatory reporting is a race-neutral social policy. In practice, the African American poor are at heightened risk of coming under surveillance because they disproportionately utilize public services staffed by mandated reporters. The problem of pervasive surveillance is exacerbated by inadequate guidance about the grounds for reporting. The gaps left by imprecise standards and definitions are filled in by value judgments that often emanate from dominant cultural proclivities. In the absence of clear and validated standards, the African American poor may be judged by middle class value paradigms about what constitutes proper care and found wanting. Some have suggesting solving this problem by employing more nuanced ecological assessments (DeLong Hamilton and Bundy-Fazioli 2013). Such assessments are more comprehensive and focus not only on the family but also on the family's social environment accounting for both risk and protective factors. In the absence of an ecological approach racial and economic bias can flourish and insinuate themselves into the disposition of abuse and neglect cases.

For these reasons mandated reporting has an especially pernicious role in contributing to racial disparities in child protection.

Widespread mandate reporting of neglect by professional service providers also has the undesirable effect of derailing family relationships with professional service providers (McTavish et al. 2017). The impact of the mandatory reporting requirements on the relationships between service providers such as physicians, teachers, caseworkers, or therapists and their clients is under appreciated. The act of reporting may be experienced by families as a betrayal, a breach of the trust on which helping relationships depend. However, by requiring reporting by professionals whose effectiveness depends on the trust of families, the unanticipated consequences may neutralize and handicap the very relationships that could minimize child maltreatment by supporting families

This requirement to report to the state even the suspicions of neglect undermines and destroys the relationship and the trust which is a foundation on which the helping relationship is built. Parents may be reluctant to share the most intimate details of their lives for fear that their candor might be used against them. Mandated reporting can weaken the therapeutic alliance and make families reluctant to disclose important information that is essential for keeping children safe. This is especially true when the guidelines are vague and professional judgment and discretion is prohibited. The reporting requirement reinforces for the family that the service provider from whom they are seeking help is in fact part of an investigative apparatus of the state. For the family this means that professional have dual loyalties and therefore may not be fully trusted to serve the interest of the family. This can have negative consequences for the quality of services and the likelihood that poor and ethnic minority families will seek out services. Mandatory reporting can thus deprive families of the very services that they need and might benefit from. In fact, it undermines their ability to be supported in a way that might in fact reduce abuse and neglect. Thus, the overzealous enlistment of these helping professionals paradoxically may contribute to the problem.

To illustrate the dilemma arising from overzealous reporting laws consider the example of a child and family mental health service center providing therapeutic services to low-income, African American families. An adolescent girl in therapy for depression mentioned in passing to her therapist that her mother had been drinking prior to attending the session. This report of drinking set off a red flag for the therapist who worried that the adolescent girl might be placed at risk if she were allowed to ride home with a mother possibly impaired by alcohol. The therapist had just completed in-service training on the state's mandatory reporting law. Based on what she heard in the training, the therapist did not feel free to exercise discretion. Although the clinician did not smell alcohol on the mother, she still felt compelled to call in a report to child protective services. She did not feel free to assess the degree of intoxication and on that basis discern whether the adolescent might truly be at risk.

The clinician did what many professionals would do in this case in that she took the most conservative route. She reiterated for the adolescent and her mother the requirement for mandatory reporting that was mentioned in their initial session. She also informed the mother that she could not allow her to drive her daughter home. The daughter became distraught about what it would mean in

terms of the stability of her life with her mother once child protective services was involved. She wondered whether she might be taken away and about whether the mother might be angry at her for disclosing the drinking. The outcome might have been different had the therapist felt free to make a sound assessment about whether the mother in fact was impaired and whether she posed the imminent danger to her daughter. Moreover, other options were available to protect the daughter such as arranging a ride home for her and her mother. This was not the route taken. Not surprisingly, the mother was incensed and stormed out of the center with her daughter in tow. For both the mother and daughter the report to child protection service seemed to be an over-reaction that mounted to a betrayal. Although the child protection investigation led to a conclusion of non-substantiation of child endangerment, the harm was done. The relationship with the therapist and Center was irretrievably destroyed without any palpable contribution to child safety. Would the European American therapist had been as likely to report if the family were not African American and poor?

The critique of mandated reporting made here is not new. It has come under withering criticism on multiple grounds over a long period of time. For example, the current system of mandated reporting has been described as an extremely negative and bankrupt policy (Melton 2005). It was labeled bankrupt because its primary emphasis was to identify perpetrators and to garner enough evidence of parental misdeeds to punish by suspending or annulling parental rights and removing the child from the home. Too often well-intentioned child advocates and lawyers underscore the threat of sanctions such as loss of licenses if professionals failed to report any suspicion. As a result, reporting families becomes the default when there is the slightest indication of possible danger.

## Recommendations for Reducing Racial Disparities

The data confirming racial disparities in child protection are incontrovertible. Yet, there is little evidence to support the claim that racial disparities result from intentional discrimination. The reality is more subtle and the roots of racial disparities more structural and implicit (Martin and Connelly 2015). It is reasonable to pose the question: what would it take to reduce and eliminate racially disparate treatment and outcomes for African Americans in the child welfare systems around the country. What steps should be taken and what should reform look like? Based on the arguments made here, efforts to reduce racial disparities and improve the process should target institutional racism and implicit bias, mandatory reporting, and prioritize support of needy families. Accordingly, three recommendations are made to reduce racial disparities and reform the child welfare system. The recommendations are:

1. Combat institutional racism by increasing diversity competence throughout the child welfare system.
2. Establish a moratorium on mandated reporting of neglect.
3. Move child protection away from investigating negligent families toward helping neglected families

## Combat Institutional Racism by Increasing Diversity Competence Throughout the Child Welfare System

A combination of poverty and racism make African American families doubly vulnerable to suspicions of child neglect. A first step toward remedying the situation is to acknowledge and call out racial bias within the existing procedures of the child welfare systems. This means recognizing the impact of economic inequality, life stressors related to material deprivation, and discrimination that result in stigmatizing African American families. To do this, system personnel at all levels must critically examine bias in reporting, substantiating and placing children in foster care. This first involves analysis of how racial and economic bias manifest, followed by implementation of administrative controls to reduce disparities. Admittedly, much of this will be difficult without a fundamental rethinking of the assumptions on which the system is based. Rigorous quantitative and qualitative analysis can help identify the conditions that lead to suspicions of child neglect and the points at which disparities most often arise. For example, analyses could focus on the geographical hot spots for maltreatment and target these neighborhoods for a host of anti-poverty interventions *before* referral. What is recommended here not intensified surveillance but a Promise Neighbor intervention like the Harlem Children's Zone which selected a community that had significant risks related to poverty and provide a wide range of universal preventive services without identifying individual parents as a problems (Fryer and Katz 2013). Analyses could identify other risk factors that increase the likelihood of entering the system and provide prevention services before an incident occurs that requires a referral (for example, see Putnam-Hornstein et al. 2013).

Using its own data, the child welfare system could also focus on procedural changes once children enter the system. An example of a procedural change would be to anonymize case records before substantiating neglect or deciding to remove the child from the home. Anonymizing is accomplished by eliminating demographics such as race, economic and social class indicators to reduce the influence of implicit bias is case disposition. For example, New York reduced or eliminated information that might signal the ethnicity or socioeconomic status of families in case materials so that when social workers or administrative program administrators assessed and made recommendations regarding a case that they did not have bias triggering information to influence their judgments investigation (Miller and Esenstad 2015). The strategy has been effective in reducing racial and economic disparities in findings of abuse/neglect at the point of investigation.

**Diversity Competence** Blind reviews are just one way to improve organizational functioning with respect to racial disparities. Increasing staff diversity and cross-cultural expertise in child welfare organizations is another way to stem racial bias. Diversity competence is a quality of an organization as much as of the individuals who staff it. It begins with recognition of ways implicit bias can seep into each phase of child protection: reporting, investigation, service provision, out-of-home care, permanency planning, etc. Diversity competence can be achieved through staff training and recruitment of a diverse staff. Training can provide opportunities to reflect on one's cultural background and uncover attributions of superiority to one's own cultural practices regarding socialization and care of children. This is a form of cultural

imperialism in which staff invoke uncritically their own values and disparage the parental values and behaviors of those who are different. Overcoming cultural imperialism and developing diversity competence can result in the ability to suspend temporarily judgments based on personal values and to look upon others with empathy.

It may not always be possible to hire a diverse enough staff or provide enough training to increase substantially the diversity competence of child protection services in a given locale. Diversity competence can be increased by engaging families and neighborhoods. For example, child protection can draw on kin and neighborhood helpers who are similar in racial and socio-cultural backgrounds to the families served by the child welfare system (Annie E. Casey Foundation 2012). In such instances, child protection would draw on the motivation of family members to care for and protect their kin.

Calling on neighbors and their institutions to look out for children has many advantages. Neighbors are ubiquitous and see much more than professional who are not a part of that community. The assistance they provide is reciprocal; everyone is capable of helping and everyone at some point will have a time in life when they need help from others. For example, in the Strong Communities program (Melton and McLeigh 2020), relationships are nurtured so that people become so connected that they will *notice* when something out of the ordinary is happening. When someone is feeling especially good or especially vulnerable, neighbors will take note, but with the purpose of expressing their *care*, not of gathering evidence to be used to stigmatize. This requires a focus on community development and strengthening neighborhoods (see, e.g., US Advisory Board On Child Abuse And Neglect 1993). Parents and community leaders of diverse backgrounds can be enlisted in planning various cultural appreciation events and in reviewing the cultural appropriateness of policies and services. The goal should be to foster greater appreciation for cultural diversity, including both pride in one's own culture and respect for the cultural backgrounds of others.

### **Establish a Moratorium on Mandated Reporting of Neglect**

Cultural bias can occur at any step in the child welfare process. Nowhere is the possibility of bias more likely than at the reporting stage because of the ambiguity of criteria and the plethora of mandated reporters. As noted, African American and poor families are more often the targets of surveillance. Mandated reporting of neglect exacerbates these disparities. Mandated reporters often lack a reliable standard for reporting neglect. The vacuum left by the lack of a clear standard is filled with culturally based assumption often based on middle-class standards for parenting. When diffuse and subjectively applied reporting standards open to biased application are combined with increased surveillance by expanded numbers of mandated reporters, an adverse effect on African American families is almost inevitable. Because of the potential unfairness a moratorium should be placed on mandated reporting of neglect. To be clear, surveillance and mandated reporting as tools for child protection are not the problem *per se*. The requirement to report suspected battering and sexual abuse of children is valuable and should be maintained. In addition, watchfulness and surveillance to identify struggling families offer many advantages when it applies community



based standards and a desire to support families. Under the right conditions, neighborhood surveillance can be helpful and culturally sensitive. Systemic surveillance and vigilance would be much more effective than the current system if it were driven by a desire to identify family systems that are in distress and to provide the support they need (Melton 2005). Reporting something should be based on protective vigilance and community watching as a first step to give families the help they need to care for their children. Enlisting neighborhoods as part of the child surveillance system combined with a focus on family support would be a helpful innovation to reduce the disparate rates at which families are targeted for possible state intervention. The principle driving neighborhood engagement is captured in the mantra of the Strong Community initiative: “Every child and every parent should know that, if they have reason to celebrate, worry, or grieve, someone will notice, and someone will care” (Melton and McLeigh 2020). When done with caring and cultural sensitivity, community surveillance can be a public good that benefits families.

### **Move Child Protection Away From Investigating Negligent Families and Toward Helping Neglected Families**

Caring and sensitivity can be achieved by changing the frame of child welfare from one of detecting negligent families to identifying families who are socially neglected and need assistance. Racial disparities could be reduced if attention and resources were devoted to prevention. Moreover, this approach requires less victim blaming justification and reflects greater empathy for the ravages of economic disadvantage on optimal functioning.

Child protection should emphasize prevention of abuse and neglect by addressing the system and individual factors that place children and families at risk (US Advisory Board On Child Abuse And Neglect 1993). Much is already known about the relationship of poverty to conditions that impair a family’s ability to nurture and protect its children. These include joblessness, material deprivation, housing instability, and job-related stressors such as those arising from varied unpredictable schedules, low wages, and limited options for childcare. Moreover, many African American families are concentrated in poor neighborhood have suffered historic neglect and failure to receive adequate municipal and public safety services, housing, employment, health care, education, and safe recreational outlets for children (US Advisory Board On Child Abuse And Neglect 1993). There have been efforts to engage in family support in a range of family preservation programs but often they do not go far enough to make a difference in a families material circumstances and functioning (Ringel et al. 2018).

Reformation of the child welfare system would involve shifting its mission from ferreting out negligent families to channeling resources to families in difficulty due to social neglect. This means that systems should be built to identify families which have been isolated and denied access to resources needed to meet basic needs. Objective assessment of neglected families could focus on several readily available indicators including stable employment in a job that provides a living wage; quality affordable childcare; safe stable housing that does not cost more than 30% of income; food security; social connections to neighbors and extended family; and access to mental health and substance abuse treatment when needed. In addition to addressing basic needs, programs might also focus on promoting multi-generational positive



development. This would involve providing opportunities for prosocial behavior, networking, and mentoring of parents and parents to be. Particular attention should be given to providing constructive opportunities for youth to network with each other, with positive adult role models, and to find positive roles for themselves in their community (US Advisory Board On Child Abuse And Neglect 1993).

The assessment and interventions for neglected families should not be restricted to the child welfare system but should come through the co-ordination of multiple systems including pediatricians at well baby clinic visits; early childhood programs; teachers at the child's entry to Kindergarten, middle school and high school graduation; family courts at the time of licensure for marriages, divorces and civil unions; hospitals at the diagnosis of serious and life threatening illness; churches and funeral homes at the time of bereavement over loss. These are universal touch points, and they can provide families with access to services without being stigmatized as child welfare cases.

Accordingly, true reform will require thinking outside of the box of traditional child welfare programs. It should view families as clients from whom feedback is obtained on satisfaction with the quality of services. Requiring such feedback will reinforce the notion that program design should consider consumer preferences and that programs are implemented in a way that are consistent with the values and predilections of the people they are intended to serve. Programs such as the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV; Olds et al. 2014) and Family Connects (Dodge et al. 2019) offer additional models for reducing the population-level prevalence of maltreatment and substantiations in African American communities. The Family Connects Program employs a prevention model in which all parents of a newborn receive a home visit from a nurse who assesses baby health and family access to needed services. If a family has problems or sources of distress, the community health nurse links the family to those services and to a helping neighbor. The nurse assesses not only on child's physical health but also broader family issues, particularly their problems highly correlated with abuse and neglect (i.e., poverty, food insecurity, housing instability, joblessness, underemployment, substance abuse, intimate partner violence, and social isolation). Another way in which this program should break the current mold is to broaden the focus beyond mothers to include fathers, even when they are nonresidential, and extended family and fictive kin. Reformed programs might also look to expand use of service delivery models which rely on telehealth as a timesaver and to ease difficulties with transportation.

### **Optimism About Eliminating Racial Disparities**

The call for universal and prevention programs, increased family and neighborhood engagement, and a reduction of economic disadvantage repeat appeals made by others (e.g., US Advisory Board On Child Abuse And Neglect 1993). These program principles and approaches have a long history (Zeitl 2018). It may be easy to be disheartened by their apparent failure to be adopted, or if adopted, to be abandoned as political winds shift. Social policies such as affirmative action that moderate the effects of institutional racism and poverty programs that improve the lives of children and families gave way to withering criticism that these ideas amounted to reverse discrimination and handouts to an undeserving poor (Katz 1990).

The winds of public sentiment are, however, changing direction. Awareness of racism is growing, as is acceptance of the need to overcome economic inequality and divisiveness. The sentiment is reflected in a Pew Foundation poll that reported an increase in the proportion of Americans convinced that racial inequality exists (Pew Foundation 2020). Almost 90% of Americans believe that racism is a problem, and almost 60% say that it is a big problem. This represents an increase of 8 points in the past 2 years. This is a twofold increase since 2011. This shift in sensitivity to racial inequality may in turn lead to more open-minded approaches to empathizing with the strains on African American families. If true, the United States may be at a tipping point that is auspicious for child welfare reform. Conditions may be ripe for change that will seek to protect children by assuring that families have what they need provide care. We may be witnessing an empathic shift away from blaming parents when problems arise to seeking help for them instead.

## Conclusion

Taking advantage of the shifting winds will make it easier to do what is necessary to address racism and inequality, prioritize support over punishment, and involve neighborhood networks to support families and thus ensure child protection. Eliminating racial disparities in child welfare will not be easy. It will require a fundamental rethinking of how we protect vulnerable children. This rethinking could begin with the resolute adoption of an anti-racist stance built on the pursuit of diversity competence; a moratorium on mandated reporting of neglect; and a shift toward broad support of struggling families. New approaches to child protection could focus on helping distressed families in ways that does not further victimize or blame them.

To regain momentum for these approaches it will be necessary to generate supporting evidence and disseminate it through multiple outlets. For example, qualitative researchers could conduct ethnographies and prepare case studies of families involved in preventive programs. Similarly, quantitative evaluations might provide a window into the issues driving the need for family support and innovative ways child welfare and other systems have responded. This effort can begin by collaborating with traditional allies in human service organizations, foundations, child advocacy groups, community organizers and centers of research, but it will also require the cultivation of potential allies not traditionally focused on or aligned with child welfare. For example, qualitative research and case studies may be shared with and inspire professional fiction and non-fiction writers to deploy their craft on nuanced depictions of families' struggles for a broad audience. Quantitative studies can be shared with journalists, editorial writers, talk show hosts, and producers of documentaries and podcasts for dissemination to audiences they might not reach ordinarily. The use of print and other media such as YouTube channels and video podcasts provide remarkable opportunities for disseminating information and outreach that presents a message with a point of view that will inform and persuade policy makers and the general public that we can do things that will make life demonstrably safer and more secure for children.

With the help of non-traditional allies, it is possible to spread the word and tell the story about needs of economically disadvantaged families for diverse forms of support. Cultivating these allies will present opportunities for telling families' stories in ways

that emphasize their humanity, their strengths and their challenges. If we make them visible where they are now invisible, likable where they are viewed with suspicion as the “other,” then it may be possible to increase public acceptance of child welfare reform and move policy makers to adopt these innovations. Thus to make a difference this time, child welfare advocates must find ways to mainstream their message by explaining, depicting, dramatizing and editorializing about the advantages of adopting a preventive and universal approach; providing multiple avenues for accessing needed services; strengthening family engagement; for drawing on community competence and serving children. The mainstreaming of these ideas in scholarly writings, newspaper editorials, podcasts, theatrical productions, fiction and nonfiction literature, churches, and in every aspect of civic life are admittedly idealistic and perhaps far-fetched. They do suggest a truth that re-focusing public attention on the struggles of poor families and shifting public perceptions about the pernicious effects of racial disparities are critical and often ignored ways to achieve support for the child welfare reforms we so desperately need.

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