As the Hispanic population grows in the United States and the child welfare system, it is necessary to examine how experiences of Hispanic families differ from those of White/Caucasian families and to assess whether Hispanic families’ needs are properly addressed. This literature review will examine research on the outcomes and experiences of Hispanic families in the child welfare system and how case characteristics interact with the experiences of Hispanic families. This article will then explore theories for Hispanic families’ different experiences and conclude by recommending future directions and solutions for improving the experiences of Hispanic families in the child welfare system.

Key Points for the Family Court Community:
- Hispanic families experience the child welfare system differently than White/Caucasian families and other minority families.
- Risk factors associated with involvement with the child welfare system, case process, and case outcomes interact with Hispanic ethnicity and culture, potentially impacting families’ experiences within the system.
- There are several theories, including the Hispanic Paradox, which attempt to account for the differences in experiences for Hispanic families involved in the child welfare system.
- National and court policies such as the American Safe Families Act and failure-to-protect laws can impact Hispanic families, particularly immigrant families, differentially compared to families of other races and ethnicities.
- Additional research is needed to better understand the strengths and needs of Hispanic families in the child welfare system and improve quality and availability of services in the child welfare and other court systems.

Keywords: Child Maltreatment; Child Welfare; Hispanic; Latinx; Disparity.

There were approximately four million reports of child maltreatment involving over seven million children in the United States in 2016 (Child Welfare Information Gateway, 2018). Once a report is made, the child welfare system is responsible for investigating child maltreatment claims and administering services to families that need assistance in caring for their children. Children may remain at home or be removed and placed into out-of-home care. In the United States, families with substantiated reports of maltreatment typically receive reunification services for up to 15 months, at which point the family is reunified or their parental rights are terminated (Erickson, 2000). The decision-making process varies based on location, as substantiation rates and recommended services differ depending on the country (Benbenishty et al., 2015).

Child welfare systems within each country have their own culture and values concerning child maltreatment. Each orientation (child protection or family service) views child maltreatment through its own problem framework and has different modes of intervention, and the relationship between parents and government can vary (Gilbert, 2012). Over time, the United States has moved from a primarily child protection focus (characterized by deviant behavior and poor parenting being the primary problems and an investigative intervention with adversarial relationships with parents) to a more combined focus between child protection, family service (increased focus on the stress of the family and emphasis on needs assessment and partnering with families), and child development (emphasizing early intervention and government involvement in caring for children; Gilbert, 2012). Even though there have been these shifts within the United States, there are still cultural mismatches that occur between the primarily dominant culture of the child welfare system and minority cultures of many of the families involved.

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Previous research based in the United States indicates that children of color tend to be overrepresented in the child welfare system (Hines, Lemon, Wyatt, & Merdinger, 2004; Hogan & Siu, 1988; Shaw, Putnam-Hornstein, Magruder, & Needell, 2008) and that these children tend to experience poorer outcomes compared to their White/Caucasian counterparts (Courtney, 1994; Courtney et al., 1996; Hines, Lee, Drabble, Snowden, & Lemon, 2002; Wells & Guo, 1999). Families from minority racial/ethnic groups come into the system with a distinct constellation of risk factors (Hines et al., 2002) and have disparate experiences in the system that often result in lower reunification rates (Courtney, 1994; Courtney et al., 1996; Hines et al., 2002). Most research examining the role of race/ethnicity in child welfare has focused on comparing the experiences of African American families with White/Caucasian families (Fluke, Harden, Jenkins, & Reuhrdanz, 2011) and little research has examined the experiences of Hispanic families. Understanding Hispanic families’ interactions within this child welfare system is important, as the Hispanic population is the largest minority population in the United States (U.S. Census Bureau, 2016), and the number of Hispanic families in the child welfare system has steadily increased over the last several years (Dettlaff, 2008). The proportion of Hispanic children with substantiated reports of maltreatment has more than doubled in the last 20 years (U.S. Department of Health and Human Services, 1997, 2018) and the population of Hispanic children in foster care has similarly risen (Child Welfare Information Gateway, 2017). In 2014, the percentage of children with substantiated reports of maltreatment was higher for Hispanic children than for African American children (U.S. Department of Health and Human Services, 2016).

Though rates of Hispanic children within the system are increasing, Hispanic children are still slightly underrepresented in the child welfare system as a whole when compared to general population statistics (Child Welfare Information Gateway, 2016). However, there is increasing evidence of state and regional differences, resulting in overrepresentation in some states and underrepresentation in others (Hines et al., 2004; Maguire-Jack, Lanier, Johnson-Motoyama, Welch, & Dineen, 2015). Hispanic children experience different case outcomes than White/Caucasian children and reunify at a lower rate than White/Caucasian children (Hines et al., 2002), indicating there may be differences in how Hispanics interact with the child welfare system once a case is opened.

I. CURRENT ARTICLE

Understanding the experiences of Hispanic families in the child welfare system is crucial for determining whether changes in policy and practice are necessary to ensure that the unique needs of Hispanic families are met by the system. Further, families involved in the child welfare system often are simultaneously involved in other court systems, such as family, criminal, and juvenile courts (Adam, 2010; National Council of Juvenile and Family Court Judges Cross-Over Committee, 2009). While many courts exist in content-specific silos, families have complex problems that often span multiple courts. The current article aims to describe the experiences of Hispanic families in the U.S. child welfare system. It will first examine the literature detailing the experiences of Hispanic families as they are processed within the child welfare system. Second, it will review research explaining how various risk factors interact with the Hispanic ethnicity and culture, thus potentially impacting their experiences and outcomes within the system. Third, it will explore various theories accounting for the differences in experiences for Hispanic families in the child welfare system. Finally, the current article will outline future research directions.

II. CASE FLOW AND DECISION POINTS WITHIN THE CHILD WELFARE SYSTEM

A. REPORT RATES

Racial/ethnic disparities exist at each decision point with a child maltreatment case. The initial report of maltreatment provided to child protective services (CPS) is typically the first point of contact for a family in the child welfare system. Overall, Hispanic children and White/Caucasian
children are reported at similar rates, though both are lower than African American children (Child Trends Data Bank, 2015). However, when assessed state by state, there are varying trends, as some states indicate Hispanic children are reported at the same or slightly lower rate than White/Caucasian children (Church, Gross, & Baldwin, 2005; James & Texas Department of Family and Protective Services, 2010), and other states indicate Hispanic children are more likely reported (Washington State Racial Disproportionality Advisory Committee and the Department of Social and Health Services, 2008; Webster, 2016). Some hypothesize that this may be related to data indicating that mandated reporters are more likely to report minority children over White/Caucasian children (Jenny, Hymel, Ritzen, Reinert, & Hay, 1999; Lane, Rubin, Monteith, & Christian, 2002).

B. SUBSTANTIATION RATES

The next decision point in a child welfare case is whether a report is substantiated (i.e., caseworkers’ finding that maltreatment has occurred or is unsubstantiated; Child Welfare Information Gateway, 2013). At a national level, substantiation rates are relatively comparable between Hispanic children and White/Caucasian children, though Hispanic children are slightly more likely to have a report substantiated (U.S. Department of Health and Human Services, 2017). Similar to reporting rates, there is some variation in substantiation rates on a state-by-state basis (U.S. Department of Health and Human Services, 2017).

C. PLACEMENT

When a decision is made to remove a child, there are several different types of out-of-home placements available (i.e., foster care, group homes, shelters). In a pattern similar to rates of reporting and substantiation, there are differences in national and state-level data, as Hispanic children are overrepresented in the foster care system in 14 states (Summers, 2015) and are slightly underrepresented in foster care in the United States as a whole (Dettlaff, 2011; Summers, 2015). When Hispanic children are removed, they spend more time in their out-of-home placements than non-Hispanic children (Church, 2006; Church et al., 2005; Ryan, Garnier, Zyphur, & Zhai, 2006). Additionally, when Hispanic children are removed, they are removed within a shorter period of time, providing less time for assessment as compared to White/Caucasian children (Church et al., 2005).

One potential factor associated with decreased rates of foster care use is that Hispanic children are more likely to be placed with relatives than White/Caucasian children (Grogan-Kaylor, 2001). This may benefit these children by allowing them to preserve familial ties. Children in kinship/relative placements have fewer behavioral issues (Winokur, Holtan, & Batchelder, 2014) and fewer placements overall than children in nonkinship/nonrelative foster care (Winokur et al., 2014). Although kinship/relative placement can be a protective factor, research shows that kinship providers receive fewer services (Berrick, Barth, & Needell, 1994). Additionally, children placed in kinship/relative care reunify more slowly than children in nonkinship/nonrelative placements (Berrick et al., 1994; Benedict & White, 1991; Courtney, 1994). Further, kinship/relative placement decreased the likelihood of reunifying with parents for Hispanic children, but not for other races/ethnicities (Grogan-Kaylor, 2001).

D. SERVICES

Once Hispanic families enter the child welfare system, they receive fewer and less effective services than White/Caucasian families (Courtney, 2000; Courtney et al., 1996). Hispanic families tend to have less detailed service plans (Hogan & Siu, 1988), have fewer family visits and daycare services (Close, 1983), and have less contact with caseworkers (Tracy, Green, & Bremseth, 1993). These discrepancies are even greater for mental health services. Hispanic children in foster care are less likely to receive mental health services compared to White/Caucasian or African American children (Garland et al., 2000; Garland, Landsverk, & Lau, 2003; Leslie et al., 2000; Tingus, Heger,
Foy, & Leskin, 1996), even after controlling for other factors such as low socioeconomic status (SES) and severity of mental health symptoms (Garland et al., 2003; Hurlburt et al., 2004; McCabe et al., 1999). Important to note is that there is extremely limited current research on the quantity and types of services all immigrant and nonimmigrant Hispanic families receive in the child welfare system. In summary, Hispanic children are often at a disadvantage within the child welfare system. They experience racial/ethnic disparities from increased rates of reporting, substantiation of the reason for the report, placements (although more often in kinship/relative placement), and services offered/received. In addition to these differences, there are various factors that interact with a child’s race/ethnicity that are associated with different case outcomes.

III. CASE CHARACTERISTICS, CHILD FACTORS, AND CASE OUTCOMES

Hispanic children who are referred to the child welfare system often have different family and child characteristics compared to children of other races/ethnicities and have added challenges moving through the child welfare system. Understanding the makeup of Hispanic families that enter the child welfare system sheds light on the risk and protective factors for these families.

A. CASE CHARACTERISTICS

1. Type of Maltreatment

Overall, Hispanic children reportedly experience maltreatment at lower rates than African American children but at slightly higher rates than White/Caucasian children, regardless of the type of maltreatment (Sedlak et al., 2010). Though Hispanic children reportedly experience maltreatment at lower rates overall, there are some differences based on the type of maltreatment. Hispanic children reportedly experience marginally higher rates of physical abuse than White/Caucasian children (Sedlak et al., 2010). This may be associated with the increased use of corporal punishment within the Hispanic culture (Fontes, 2000, 2002). However, Hispanic children are less likely to reportedly experience psychological or emotional maltreatment (Sedlak et al., 2010). Despite the rates of physical abuse, Hispanic children are less likely than White/Caucasian or African American children to die from abuse or neglect (U.S. Department of Health and Human Services, 2016).

2. Substance Abuse

Hispanic families are less likely to be involved in the child welfare system due to allegations of substance abuse compared to White/Caucasian and African American families (Berger, Slack, Waldfogel, & Bruch, 2010; U.S. Department of Health and Human Services, 1999). Despite some studies indicating Hispanic families have lower levels of substance use allegations, other studies indicate they are subject to greater rates of random alcohol and drug test orders (Hines et al., 2002). Further, alcohol treatment is ordered more often for Hispanics than Whites/Caucasians and African Americans (Hines et al., 2002). The discrepancy between decreased rates of substance abuse allegations and increased rates of drug testing and substance-related recommended services may be an indicator of potential racial/ethnic bias within the child welfare system.

B. CHILD CHARACTERISTICS

1. Age

Hispanic children tend to be younger than White/Caucasian children at the time of initial report, of substantiation of the report, and when placed into out-of-home care (Church et al., 2005). There
are also differences in placement types, as younger Hispanic children are more likely to be placed in out-of-home care than non-Hispanic children or older Hispanic children (Alzate & Rosenthal, 2009). Further, adolescent Hispanic children spend more time in out-of-home placements than younger Hispanic children or non-Hispanic children in any age group (Church, 2006).

2. Sex

Overall, Hispanic females are slightly more likely to be the subject of and have a substantiated maltreatment report compared to Hispanic males and White/Caucasian children of both sexes (Alzate & Rosenthal, 2009; Church, 2006). Though females were more likely to have a substantiated report of maltreatment, there are differences in the types of maltreatment reported by Hispanic males and females. Similar to other races/ethnicities, Hispanic males are more likely to be reported for physical abuse compared to Hispanic females (Alzate & Rosenthal, 2009; Christian & Committee on Child Abuse and Neglect, 2015) and are more than twice as likely to have a report of physical abuse than non-Hispanic males (Alzate & Rosenthal, 2009).

C. FAMILY STRUCTURE

The interaction between race/ethnicity and family structure shows that Hispanic children are more likely to live in single-parent homes than non-Hispanic children (Child Trends Databank, 2015). When children live with only their mothers, Hispanic children were more likely to have substantiated cases of abuse or neglect (Church et al., 2005) and take longer to reunify with their parent than White/Caucasian children who live with only their mothers (Harris & Courtney, 2003). Research indicates that a two-parent household acts as a greater protective factor for Hispanic children than White/Caucasian children (Harris & Courtney, 2003), though it is unclear what mechanisms may explain this discrepancy.

D. IMMIGRATION STATUS

Whether Hispanic children and their parents are immigrants has an impact on several aspects of their reported experience in the welfare system. Hispanic children with immigrant mothers were less likely to be involved with CPS than both Hispanic children of non-immigrant mothers and White/Caucasian children (Putnam-Hornstein, Needell, King, & Johnson-Motoyama, 2013). However, Hispanic families immigration statuses do not seem to impact overall substantiation rates (Dettlaff, Earner, & Phillips, 2009a; Dettlaff & Johnson, 2011). Immigration status is associated with the type of maltreatment that is substantiated. Hispanic children with immigrant parents were more likely to be the victims of emotional abuse (Dettlaff & Johnson, 2011) and more likely to have a substantiated report of sexual abuse compared to Hispanic children with nonimmigrant parents (Dettlaff, Vidal de Haymes, Velazquez, Mindell, & Bruce, 2009b). Hispanic immigrant families may be more vulnerable to certain types of maltreatment, as immigrant parents are more likely to use “excessive discipline,” including corporal punishment (Dettlaff & Johnson, 2011). Immigrant parents also may be at a higher risk for neglect allegations, as they are more likely to leave their children unattended (Fontes, 2000).

There are also differences in child placements for Hispanic children based on their parents’ immigration status. Immigrant children and first-generation U.S. citizen children are less likely than their nonimmigrant counterparts to live in kinship/relative foster care (Vericker, Kuehn, & Capps, 2007) and are more likely to have a case plan consisting of independent living or long-term foster care than Hispanic U.S.-born children (Dettlaff & Earner, 2007). This may be due to immigrant families’ having fewer family members who can serve as kinship/relative placement options than Hispanic children in nonimmigrant families.
IV. THEORIES FOR RACIAL/ETHNIC DISPARITIES

There are several theories that attempt to address the discrepancies in Hispanic families’ experiences in the child welfare system as compared to White/Caucasian families. It is likely there is not one sole explanation, but several that coexist to account for the unique experiences of Hispanic families at various points within the child welfare system.

A. SOCIAL FACTORS

Cases of child maltreatment are disproportionately reported in low-income families (Berger, 2005; Coulton, Korbin, Su, & Chow, 1995; Freisthler, Bruce, & Needell, 2007; Gelles, 1992; Pelton, 1978). Children from families with low socioeconomic statuses experience maltreatment at more than five times the rate of children whose families have higher socioeconomic statuses (Sedlak et al., 2010). Additional risk factors that are associated with maltreatment and low SES include substance abuse, domestic violence, parental mental illness, and parental incarceration (Hines et al., 2004). Hispanic families are more likely to have lower incomes than White/Caucasian families (DeNavas-Walt & Proctor, 2014). It is possible that Hispanic families’ lower socioeconomic statuses may raise their chances of coming into contact with CPS by increasing the likelihood of experiencing a multitude of problems related to poverty, including child maltreatment.

SES is also associated with a lower likelihood of reunification (Barth et al., 1987; Courtney, 1994; Jones, 1998). Low SES may hinder a family’s ability to participate in services required by the child welfare system to reunify. Hispanics living in impoverished communities have limited access to service providers and are often put on long waiting lists (Garcia, Aisenberg, & Harachi, 2012). When they are able to schedule an appointment, they may have limited flexibility in their work schedules and struggle to afford transportation in order to participate in services (Garcia et al., 2012). Though SES is one pathway that can impact how Hispanic families interact with the child welfare system, it is not the only one.

B. CULTURAL DIFFERENCES

The Hispanic culture can act as a protective factor, though there are some aspects of the Hispanic culture that may operate as risk factors within the child welfare system. In addition to SES-related barriers to obtaining services, there is a stigma associated with mental health issues within the Hispanic culture, and Hispanic families are less likely to utilize mental health services in general (Clement et al., 2015; Corrigan, 2004), even when controlling for rates of mental health disorders (Guarnaccia, Martinez, & Acosta, 2005; Hough et al., 1987; Interian et al., 2010; Vega, Kolody, Aguilar-Gaxiola, & Catalano, 1999). If they do initiate services, Hispanics are also more likely to drop out of mental health counseling prematurely (Olson et al., 2009). Parents with mental illness may be at increased risk for maltreating their children (Hines et al., 2004), and failure to seek treatment or dropping out of treatment prematurely may maintain factors associated with maltreatment.

Within the Hispanic culture, there is an increased rate of mistrust of healthcare providers (Davis, Bynum, Katz, Buchanan, & Green, 2012); Hispanics are more likely to report feeling judged by providers (Johnson, Saha, Arbelaez, Beach, & Cooper, 2004). This distrust may be well founded, as healthcare providers’ negative stereotypes about Hispanics may contribute to disparate treatment (Bean, Stone, Moskowitz, Badger, & Focella, 2013) and can directly impact Hispanic families’ involvement in the child welfare system. Hospital personnel were more likely to evaluate and report Hispanic children to child welfare services for suspected abuse compared to White/Caucasian children, even when controlling for the likelihood of abuse (Lane et al., 2002). Once in the system, caseworkers may assign Hispanic families to fewer services, as research shows that caseworkers tend to prioritize cases with families who are perceived to be easiest to help and most likely to
succeed (Smith & Donovan, 2003). Parents of color are perceived as less likely to benefit from services (Hogan & Sui, 1988).

Earlier studies indicate that Hispanic patients were more likely to perceive interactions as negative compared to neutral perceptions reported by White/Caucasian patients (Perez-Stable, 1987; Triandis, Marin, Lisansky, & Betancourt, 1984). However, more recent studies indicate that even though Hispanics are less likely to attend doctor’s appointments, they were more likely to report positive communication with providers when English was the primary language (Devoe, Wallace, & Fryer, 2009). As a result of Hispanic families’ being less likely to utilize healthcare professionals, caseworkers may perceive Hispanic families’ failure to obtain care for their children as either uncooperative or medically neglectful (Suleiman, 2003b).

In addition to the stigma associated with mental health and the mistrust of providers, Hispanics place a greater value on privacy (Frevert & Miranda, 1998) and tend to rely on their social networks for assistance rather than public services (Garza, 2004; Guarnaccia et al., 2005). As Hispanics typically utilize social and public services less frequently than other races/ethnicities, they may be less likely to interact with mandated reporters; therefore, maltreatment is less likely to be reported (Putnam-Hornstein et al., 2013). The collectivistic nature of the Hispanic culture (Black, Mrasek, & Ballinger, 2003; Suleiman, 2003b) may clash with the individualistic nature of the child welfare system (Healy, Darlington, & Feeney, 2011).

Compared to other countries, the U.S. child welfare system has a greater individualistic focus on child protection over a family focus. This is particularly so since the passage of the American Safe Families Act in 1997 (U.S. Public Law 105-89, Section 103). Day-to-day practices, such as unannounced visits by caseworkers, can be perceived as dramatic invasions of privacy by Hispanic families (Ayón & Aisenberg, 2010). The collectivistic nature and high value placed on privacy may increase reluctance to engage in court-mandated services. For Hispanic families, when all family members are involved in goal setting and creating treatment plans, a more family-focused intervention, caseworkers’ efforts are most productive (Cheng & Lo, 2012).

C. LANGUAGE BARRIERS

Several studies show that language barriers impact the experiences of Hispanic families throughout their interactions within the child welfare system, putting Spanish-speaking Hispanic children at higher risk of removal and termination of parental rights (Ayón, 2009; Dettlaff et al., 2009b; Garcia et al., 2012; Suleiman, 2003b). The limited number of bilingual investigators means that misinformation often occurs at the time of investigation. Investigators may rely on neighbors or their children to interpret, hindering the ability of caseworkers to make accurate decisions and provide services that will benefit the families (Suleiman, 2003b). Spanish-speaking reunification services are limited, and bilingual providers are scarce (Ayón, 2009; Garcia et al., 2012). Long waitlists may decrease a family’s ability to complete services in a timely manner (Suleiman, 2003b), and if services are not provided in the family’s primary language, they may be rendered ineffective when the family is unable to fully understand them (Ayón, 2009; Suleiman, 2003a).

D. IMMIGRATION STATUS

Immigration status may also account for some of the differences in experiences of Hispanic as compared to White/Caucasian families in the child welfare system. Both the child’s and parents’ statuses may have an impact on the way the families are processed through the system and their likelihood of coming into contact with it. Children whose parents are immigrants are more likely to live in poverty (DeNavas-Walt & Proctor, 2014). Immigrant families often experience high stress levels because of issues such as struggling with acculturation, difficulty obtaining jobs, and language barriers (Lu et al., 2004). Low rates of immigrant families within the child welfare system could be associated with a myriad of protective factors associated with immigrant families, but it could also signify underreporting
in Hispanic immigrant populations. Immigrant families and especially those who have undocu-
mented or noncitizen members have very low utilization of public services, thus limiting their inter-
action with mandated reporters (Capps, Fix, Ost, Reardon-Anderson, & Passel, 2004). This could
be related to beliefs that they are ineligible for services, fear of consequences due to their immigra-
tion status (e.g., deportation), and federal/state policies that prevent them from using those services
(Capps et al., 2004; Dettlaff & Johnson, 2011; Velazquez & Dettlaff, 2011).

E. SYSTEMIC BIAS

Bias within the child welfare system and among local, state, and national policies may contribute
to disparities against Hispanic families. One example is the Adoption and Safe Families Act
(ASFA; Suleiman, 2003b), which requires that permanent decisions for children be made within
12 months and that agencies petition to terminate parental rights for any child who has been in fos-
ter care for 15 of the most recent 22 months (U.S. Public Law 105–89). Often language and cultural
barriers hinder timely assignment to competent services and can limit the benefit derived from pro-
vided services. The timeline required by the ASFA may not provide enough time for Hispanic fami-
lies, especially those with limited English proficiency, to attend language-appropriate services and
to make the changes necessary for reunification (Suleiman, 2003b). In addition, the Multiethnic
Placement Act (MEPA) of 1994 (U.S. Public Law 103–82), which forbids agencies from consider-
rance, color, or origin in placements (Hollinger, 1998), has been used to argue against imple-
menting bilingual services (Suleiman, 2003b). Caseworkers trying to avoid the penalties of
violating the MEPA may refrain from considering a child’s ethnicity in case planning, preventing
some families from getting the bilingual services they need (Suleiman, 2003b). Oftentimes, a child
or family’s race/ethnicity may be assumed by a child welfare caseworker (Child Welfare Informa-
tion Gateway, 2016) or may not be included in large samples due to lack of accurate record collect-
ing and reporting (Kesner, 2008).

The caseworker’s own racial/ethnic identity and beliefs may impact the case outcomes for
Hispanic children, as in 2008–09, only 14.9% of caseworkers identified as Hispanic (Dolan, Smith,
Casanueva, and Ringeisen, 2011). Hispanic children with African American caseworkers remained
in foster care longer and had lower reunification rates than African American or White/Caucasian
children (Ryan et al., 2006). It is important to note that even though some studies indicate there is a
presence of racial or ethnic bias in caseworkers, others found no evidence of racial or ethnic bias
among child welfare workers (Drake et al., 2011; Levine, Doueck, Freeman, & Compaan, 1996),
suggesting it is likely not the sole explanation for disparities in Hispanic families’ experiences.

F. PROTECTIVE FACTORS

Though there are disparities that Hispanic families report within the child welfare system and
risks associated with the cultural mismatch between the family-centered Hispanic population and
the primarially child protection–centered child welfare system, there are several protective factors
related to being Hispanic in the United States, specifically within the child welfare system.

The ‘Hispanic paradox’ is a phenomenon found for health outcomes wherein Hispanic and
Latino Americans tend to have health outcomes that are “paradoxically” often better than those of
U.S. non-Hispanic Whites even when Hispanics have lower average income, lower average educa-
tion, lower rates of medical insurance, and some higher health risk factors such as diabetes (Ruiz,
Hamann, Mehl, & O’Connor, 2016). There may be a similar phenomenon operating in relation to
the child welfare system. For instance, Hispanic families have higher poverty rates than White/Cau-
casian families, yet equivalent maltreatment rates (Maguire-Jack et al., 2015). Moreover, Hispanic
families’ lower SES would typically put them at increased risk of foster care, yet they are slightly
underrepresented when compared to their proportion in the overall U.S. population (KIDS COUNT
Data Center, 2017), suggesting a similar pattern to the Hispanic paradox in health contexts.
Hispanic families’ cultural values may act as protective factors. Though some cultural differences between Hispanics and Whites/Caucasians can negatively impact their experiences, others may serve as strengths. Studies show that parents with fewer people in their social networks and who thus likely receive less support are at greater risk of maltreating their children (Cooley, 1996). Even though parental mental health and substance abuse are related to various biological, social, and psychological factors, Hispanics’ high value on family relationships can act as a protective factor (Sale et al., 2005), such that close-knit, cohesive families may soften the effect of or decrease the likelihood of parental mental health problems (Campos, Ullman, Aguilera, & Dunkel Schetter, 2014) and substance abuse problems (De La Rosa, Holleran, Rugh, & MacMaster, 2005), thus potentially decreasing parental risk for child maltreatment. In addition, the value of personalismo (investment in personal relationships; Suleiman, 2003b) can help facilitate extended kinship networks that parents can turn to for support (Cooley, 2001) and utilize to help with child rearing (Church, 2006; Fontes, 2002).

Despite the disadvantages related to Hispanic families’ immigrant statuses, there are numerous strengths associated with immigrant families. For example, immigrant parents are less likely to have arrest histories and substance abuse problems (Dettlaff et al., 2009a). They are also more likely to have two parents in the home (Dettlaff et al., 2009a). In addition, many immigrant families came to the United States because they were motivated by a desire to improve the lives of their children. Thus, the drive to help their families may make them less likely to engage in behavior that would harm their children (Dettlaff & Johnson, 2011) and may motivate them to cooperate with case-workers to reunite them with their children as quickly as possible.

V. CONCLUSION

Given the steady growth of Hispanic families in the child welfare system, it is essential to understand the risks, strengths, and needs of this population. Hispanic children tend to be younger than White/Caucasian children when they are removed from their homes, and female Hispanic children are more likely than Hispanic male children to have abuse reports substantiated by CPS workers. Hispanic families have similar levels of maltreatment compared to White/Caucasian families, but they often contend with significant service delivery disparities once they enter the system. This may be due to a variety of reasons, including poverty, bias (implicit and overt), cultural differences, immigration status, or language barriers, and it likely impairs Hispanic families’ ability to reunify. Despite these risk factors for Hispanic families, significant strengths include prioritization of family relationships and lower substance abuse rates potentially acting as protective factors.

This review has several implications for child welfare policy and practices. It underscores the need to implement strategies to ensure that Hispanic families’ needs are met and that these families are treated fairly and equitably within the child welfare system. Training child welfare staff in cultural competence may improve decision making and service provision, thus improving Hispanic families’ outcomes. Agencies should ensure they have a diverse list of service providers so they can refer Hispanic families to culturally competent providers in the community. Research shows that better outcomes for minority families are associated with an increase in culturally competent services (Kim, 1981; Lu, Organista, Manzo, Wong, & Phung, 2001). For instance, training case-workers in cultural competency has been shown to decrease the likelihood of out-of-home placements for Hispanic children (Dettlaff & Rycraft, 2009). In addition, the use of family group decision making (FGDM; or family/team meetings, team decision making) may be particularly effective for Hispanic families (Child Welfare Information Gateway, 2016). FGDM, or various approaches where family members are included in conversations with child welfare and court personnel to make decisions about care and services for their children, is conducive to family-focused values often held by Hispanic families. Hispanic children exit the child welfare system faster and are more likely to reunify with one or both of their parents when they participate in FGDM (Sheets et al., 2009).
Ideally, hiring more bilingual/bicultural staff to limit misinformation collected by caseworkers and to enable agencies to implement accurate case planning is important, and increasing the number of bilingual/bicultural service providers to ensure that primarily Spanish-speaking families can adequately participate in services would help considerably. There is an even greater need for bilingual/bicultural caseworkers and service providers, as there is already a shortage of availability. It is recommended that caseworkers working with primarily Spanish-speaking, immigrant, or undocumented families carry smaller caseloads because of the extra time and assistance those cases require (Ayón, 2009).

Unfortunately, the child welfare system has extremely limited funding and resources, and those sources have been declining in recent years. Findings from a recent national study show the total spending (state and federal) for child welfare in the United States has decreased for the first time since 1996 (DeVooght, Fletcher, & Cooper, 2015). The study also indicates that the federal portion of spending has decreased since 2010 and total federal funding is at its lowest level since 1998 (DeVooght et al., 2015). The lack of bilingual/bicultural child welfare staff, service providers, and child and parent lawyers is a tremendous problem for providing culturally competent services for Hispanic families.

Community colleges and universities are learning that to successfully recruit and graduate Hispanic students to later hire into these positions, they need to do a better job at reaching out to Hispanic communities and children beginning in elementary school and continue contact through high school. Introducing the idea of going to college and providing role models for elementary school children, providing access to college campuses through campus tours for middle school children, and providing internships for adolescents in high school in research labs, law offices, courts, juvenile justice agencies, service agencies, and with faculty mentors are essential for Hispanic children and adolescents to be in a position to apply to college and consider college as an option. Scholarships and grants are important for the success of these students.

Policy reform may also be necessary to improve the experiences of Hispanic families. The time frame allotted by the ASFA may need to be revised, considering the difficulties Hispanic families face in receiving and completing services in a timely manner. Additionally, the MEPA currently requires that states and agencies recruit diverse foster and adoptive families to reflect the backgrounds of the children in their system (Suleiman, 2003b). However, it does not provide funding for this recruitment, and there are no penalties for failing to comply (Suleiman, 2003b). Hispanic families may benefit if agencies are incentivized to recruit more diverse foster care families so that Hispanic children have a higher likelihood of being placed with a family that matches their culture and language.

A. POLICIES IMPACTING COURT SYSTEMS

In addition to policies impacting the child welfare system, there are also several policies that impact multiple court systems. There is a significant overlap between rates of child maltreatment and parental domestic violence (Herrenkohl, Sousa, Tajima, Herrenkohl, & Moylan, 2008). Within the child welfare system, children can be removed from their parents for physical abuse as well as for a victim parent’s failure-to-protect the children from exposure to domestic violence. Removing a child for ‘failure-to-protect’ policies was intended to protect children from witnessing, or being exposed to, domestic violence (Ewen, 2007; Matthews, 1999); however, there has been significant controversy surrounding the implementation of these laws (Ewen, 2007; Fugate, 2001; Rogerson, 2012).

Some argue that the ‘failure-to-protect’ laws often are used against the mothers or victims instead of the perpetrators (Fugate, 2001; Rogerson, 2012). Though Hispanic women are equally as likely to report domestic violence as other races/ethnicities (Cho, 2012), they are more likely to die due to domestic violence. ‘Failure-to-protect’ laws may put them at greater risk of escalating the violence to lethal levels than other races/ethnicities (DeCasas, 2003). Although there are lower reports of
victimization for immigrants compared to nonimmigrants (Sabina, Cuevas, & Schally, 2013; Zadnik, Sabina, & Cuevas, 2016), immigrant women who are married are more likely to experience domestic violence than women who are not married (Dutton, Orloff, & Hass, 2000). For immigrant victims, particularly when undocumented, there may be worries about deportation or having the child removed if they report the domestic violence; thus, the domestic violence and exposure of children to domestic violence continue (Rogerson, 2012).

It is important for the child welfare system and the court system to be aware of the challenges that these families may face and to help support the domestic violence victims to be able to provide a safer environment for the children.

B. FUTURE RESEARCH

Future research could further explore Hispanic families’ case outcomes and how successful they are when obtaining and completing required language-appropriate services. Research should also focus on how child welfare policy can be revised to accommodate the needs of Hispanic families and the effectiveness of cultural competence trainings on improving case outcomes. Further, understanding protective factors for Hispanic families, particularly in regard to immigrant status, offers an area for further research. Finally, more research is needed to further clarify the role of racial bias in caseworkers’ decision making to better understand the reasons Hispanic families experience service disparities.

In addition to better understanding how the child welfare system can change to better serve individuals in the Hispanic population, there needs to be further research to help us understand how these families move between and within the courts and mental health systems when they are involved in multiple courts and systems. Are Hispanic children in the child welfare system more likely to be simultaneously involved in the juvenile justice system as compared to children of other races/ethnicities? Or, are Hispanic families more likely to be simultaneously involved in the child welfare system and family court than other families of color? It may be that the experiences and disparities experienced within the child welfare system impact Hispanic families’ experience of other systems. Hispanic children tend to receive more severe dispositions within the juvenile justice system compared to White/Caucasian youth (Poe-Yamagata, 2009). Children involved in the child welfare system tend to be viewed more negatively in the juvenile justice system and are less likely to receive probation compared to youth not involved in child welfare (Ryan, Herz, Hernandez, & Marshall, 2007). Future research should address whether there are additional discrepancies in other courts for Hispanic children when these children or families are involved in the child welfare system. It is unclear how being Hispanic acts as a risk or protective factor when involved in multiple courts and legal systems.

As the Hispanic population continues growing in the United States and in the child welfare system, we as a country need to do a significantly better job of providing adequate funding for developing appropriate services for these families. We need to address racial/ethnic disparities across all decision points within a case as well as regarding the services recommended and provided. There currently are large gaps in the literature and not enough data to understand the complexities of the interactions and experiences of Hispanic children and their families in the system.

REFERENCES


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