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Prediction of placement into out-of-home care for American Indian/Alaskan Natives compared to non-Indians

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ABSTRACT

Nationally representative child welfare data collected between October of 1999 and December 2000 were utilized to explore those variables that would predict the likelihood of American Indian/Alaskan Native children being placed into out-of-home care compared to non-Indian families. In comparison to non-Indian children, American Indian/Alaskan Native children came from poorer homes, and had caregivers with greater mental health and alcohol abuse service needs compared to non-Indian caregivers. Possible bias by child protective services workers may have affected the decision-making that led to the removal of American Indian/Alaskan Native children from their homes. Acknowledgement of past and present instances of racism in the child welfare system can lead to a decrease of American Indian/Alaskan Native children being placed into out-of-home care.

1. Introduction

According to the Adoption and Foster Care Analysis and Reporting System (AFCARS) the number of children in out-of-home care in the United States reached 510,000 by September of 2006 (U.S. Department of Health and Human Services, 2006) (USDHHS, 2006). The 10,168 American Indian/Alaskan Native children in out-of-home care represented approximately 2% of the total number of children in the foster care system, while the American Indian/Alaskan Native children in the U.S. accounted for only 1% of the census (USDHHS, 2006). This disproportion of American Indian/Alaskan Native children in out-of-home care has persisted almost 30 years after the passage of the Indian Child Welfare Act of 1978 (ICWA), of which a major objective was to decrease the number of American Indian/Alaskan Native children being placed into the foster care system (Donald, Bradley, Day, Critchley, & Nuccio, 2003). The disproportion of American Indian/Alaskan Native children in out-of-home care can be found not only nationally but at the state and local districts (Harris & Hackett, 2008). For example, it was found that in Minnesota, compared to non-Indian children, American Indian/Alaskan Native children were placed in out-of-home care five times more often than average and in Montana 13 times more often (Fischler, 1980).

Despite the passage of ICWA and the desire to decrease the numbers of American Indian/Alaska Native children in placement, there is a paucity of empirical data on the national level related to the factors of child maltreatment among those American Indian/Alaska Natives who are in out-of-home care. It is a goal of the research community to assist practitioners in reducing the level of disproportional representation in out-of-home care among American Indian/Alaskan Natives; therefore it is important to explore those factors related to child maltreatment that predict such placement. Such explorations can help fill the knowledge gap in the literature that seeks to explain differential child welfare outcomes for American Indian/Alaskan Natives when compared to non-Indians.

The purpose of this study was to conduct a secondary analysis of a national dataset to explore those characteristics of children and families involved with child protective services that might predict placement into out-of-home care for American Indian/Alaskan Native children. The analysis was accomplished by first reviewing relevant literature, examining the methodologies used, and collating the results from the statistical analysis. This is followed by sections that discuss the statistically significant factors, limitations of the study, and implications for practice before the conclusion.

2. Literature

This study explored those characteristics of families that precipitated an investigation subsequently leading to a child being placed into out-of-home care. Zuravin and DePanfilis (1997) reported that a high percentage of caregiver-related factors predicted out-of-home care placement. Therefore, this review of the literature examined caregiver characteristics, but it also considered both the age of the child and child maltreatment types since a disproportionate number of American Indian/Alaskan Native children in out-of-home care were found both to be younger and suffering from maltreatment type neglect (Donald et al., 2003).

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2.1. Factors

2.1.1. Family characteristics

The research on family characteristics was more bountiful when the literature was expanded to include African American children in out-of-home care and studies on Aboriginal families in Canada and Australia. Needell, Brookhart and Lee (2003) found African American infants who lived in areas with concentrated poverty and were members of large families (sibling group of five) were more likely to be placed into out-of-home care. The removal of Aboriginal children was associated with poverty, housing problems, and caregiver alcohol use (Trocme, Knoke, & Blackstock, 2004; Trocme, Tourigny, MacLaurin, & Fallon, 2003). The Trocme et al. (2004) and Trocme et al. (2003) studies were based on the 1998 Canadian Incidence Study of Reported Child Maltreatment (CIS-98). The CIS-98 was a random national sample of child welfare agencies and was comprised of 7672 reports collected from a survey of social workers Trocme et al. (2001). Similar results were reported in Fox's (2004) study that found those factors most associated with American Indian children in out-of-home care, namely, poverty, alcohol use by caregiver and violence in the home (p. 80). Finally, Donald et al. (2003) looked at children in out-of-home care and reported the following American Indian/Alaskan Native caregiver-related problems: domestic violence, crime, inappropriate caregiver, and parent–child conflict (p. 270).

While no study of American Indian/Alaskan Natives specifically cited mental health as a predictor of out-of-home care, the presence of alcohol use and violence among caregivers warranted an examination of the caregivers' mental health. Among Aboriginal caregivers whose infants were placed into out-of-home care, alcohol use and violence were precipitating factors (Delfabbro, Borgas, Rogers, Jeffreys, & Wilson, 2009).

2.2. Age

In regard to age, two studies (Donald et al., 2003; Plantz, Hubbell, Barrett, & Dobree, 1989) found younger American Indian/Alaskan Native children compared to non-Indian children of the same ages were more often placed in out-of-home care. The research by Donald et al. examined 52 American Indian families in one Minnesota County; while the Plantz et al. study was based on a 1986 nation wide survey of child welfare programs that offered services to American Indian/Alaskan Native children and families. In a multi-state study of 693,231 children Wulczyn, Hislop, and Harden (2002) found the group most likely to be overrepresented in out-of-home care was African American infants. Trocme et al. (2004) found that age was not a predictor of placement when Aboriginal children and non-Aboriginal children were compared. The Trocme et al. findings were based on the 1998 Canadian Incidence Study of Reported Child Maltreatment (CIS-98). The CIS-98 was a random national sample of child welfare agencies that was comprised of 7672 reports collected from a survey of social workers.

2.2.1. Child maltreatment types

Neglect was the child maltreatment type most associated with the disproportionate placement of American Indian/Alaskan Native children into out-of-home care (Ards, Myers, Malkis, Surgure, & Zhou, 2003; Plantz et al., 1989; Fox, 2004). The Ards et al. results came from CPS data collected on 21,560 children from the state of Minnesota for the year 2000. In addition, Aboriginal children placed into out-of-home care in Canada were most associated with neglect as the child maltreatment type (Trocme et al., 2004). When compared to non-Aboriginals, Aboriginal infants in out-of-home care in Australia were more likely to come from homes where they were severely neglected (Delfabbro et al., 2009). A sample of 137,300 children in the California child welfare system was examined by Needell et al. (2003). They found the child maltreatment type most associated with Black children in out-of-home care was neglect.

2.2.2. Race

The role of race in the literature as a predictor of placement into out-of-home care revealed mixed results. Race was found to be a predictor for the placement of American Indian/Alaskan Native children into out-of-home care in several studies (Mech, 1983; Donald et al., 2003; Fox, 2004). African American and American Indian/Alaskan Native children in the child welfare system of southern California were most likely to experience disproportionality in out-of-home care placement when compared to White children (Marts, Lee, McRoy, & McCroskey, 2008). Trocme et al. (2001) reported that Aboriginal children were over represented in out-of-home care in Canada. Similar results were found in several studies (Trocme et al., 2004; Trocmé et al., 2005; Blackstock, Trocme, & Bennett, 2004) that reported Aboriginal children were twice as likely to be placed in out-of-home care compared to non-Aboriginal children. Comparable results were reported in two studies (Lu et al., 2004; Needell et al., 2003) of California's child welfare populations; when compared to White children, African American children were overrepresented in out-of-home care. The over-representation of Aboriginal children was found in Australia, where compared to non- Aboriginals, Aboriginal children were nine times more likely to be placed into out-of-home care (Delfabbro et al., 2009).

The previous findings were in contrast to the Government Accountability Office's (GAO) (2005) report that found little difference in placement outcomes for those children covered by ICWA and non-Indian children. These findings confirmed the research findings of Courtney et al. (1996) who conducted a comprehensive review of the literature related to race and child welfare outcomes over 20 years ago. This review included studies (Mech, 1983; Plantz et al., 1989) on American Indian/Alaskan Native children. Courtney found that after controlling for poverty, race and ethnicity had no effects as predictors of out-of-home care placement.

The current research examined variables selected from the literature review that have previously been found to predict placement into out-of-home care. The majority of the previous studies have taken analytical approaches that were either descriptive or bivariate. Their sample sizes tended to be small or non-random, whereas this study utilized a random sample from a national dataset to conduct multivariate logistic regressions examining those factors thought to predict placement of American Indian/Alaskan Native children into out-of-home care. The NSCAW dataset was chosen because it was national in scope, was longitudinal, and presented researchers with the opportunity to examine many facets of the child welfare experiences of American Indian/Alaskan Native children and their families in the United States. The purpose of this research is to determine if certain variables predict placement into out-of-home care for American Indian/Alaskan Native children when they are compared to non-Indian children.

3. Methods

The NSCAW dataset represented one of the most comprehensive collections of data ever from a national sample of children and families in the child welfare system. The survey was conducted between October 1999 and December 2000. Two representative samples were obtained. This study used the larger of the two: a child protective services (CPS) sample comprised of 5504 children investigated for abuse or neglect (Dowd et al., 2003).

The children were selected from 92 Primary Sampling Units (PSUs). In order to create a nationally representative baseline of information regarding American Indian/Alaskan Native children, data were only collected from Wave 1 of this longitudinal study. The NSCAW data were held at Cornell University with the National Data Archive on Child Abuse and Neglect (NDACAN) (Dowd et al., 2003, p.7). Data were obtained by the researcher from NDACAN after an application that included a signed licensing agreement, and approval

Table 1
Descriptive characteristics (percentages) by race/ethnicity of children in sample.

	AI/NA ($n=341$)	Non-Indian ($n=5154$)	Total ($n=5495$)	Chi square
Child's age				
0–2	16.42	19.03	18.87	4.89
3–5	15.35	20.82	20.48	4.77
6–10	41.07	35.93	36.25	52.51*
11–14	27.15	24.23	24.41	2.80
Basic needs	23.02	24.06	24	0.04
Domestic violence	9.08	13.76	13.47	3.08
Child's gender—Male	48.54	48.17	48.19	0.001
3 or more children in home	47.9	42.11	42.47	3.44
Primary caregiver				
Mental health problems	18.57	15.05	15.28	0.20
Alcohol	8.2	8.26	8.26	0.002
Drug	6.90	9.42	9.26	2.29
Maltreatment type				
Physical neglect	29.94	22.72	23.17	0.94
Physical abuse	20.37	21.67	21.59	0.21
Sexual abuse	10.82	10.60	10.62	0.01
Lack of supervision	12.97	23.36	22.71	6.35**

*$p<.05$, **$p<0.10$, Corrected Chi Square = F statistic times (df).

by the researcher's Institutional Review Board (IRB) was completed. The children, their caregivers, and the child protective services workers were the primary sources of the data collected through face-to-face interviews. The age of the children ranged from birth through 14 years old. For further information regarding NSCAW methodology see Dowd et al. (2003).

3.1. Measures

3.1.1. Dependent variables

The dependent variables were outcomes for American Indian/Alaskan Native children and non-Indian children. In this sample the Indians were aggregated into Native American and Alaskan Indians. The non-Indian children were White non-Hispanic, Black non-Hispanic, and Hispanic. No other race or ethnicity was sampled in this data.

3.1.2. Independent variables

Comparisons between American Indian/Alaskan Native children and non-Indian children were made by examining child and caregiver variables associated with a child being placed into out-of-home care. Those variables were derived from a checklist compiled by child welfare workers at the time of the initial investigation. The workers reported whether or not serious issues related to alcohol and/or drugs (AOD), mental health, and domestic violence were present (Libby et al., 2007, p.152). Maltreatment types were identified using a modified Maltreatment Classification Scale (Manly, Cicchetti, & Barnett, 1994) (physical neglect, lack of supervision, physical and sexual abuse). Poverty was examined by looking at a variable called "basic needs," described as a family's ability to pay for basic necessities. The ages of the children were divided into four groups: 0–2 years old, 3–5 years old, 6–10 years old, and 11–14 years old. The placement types for the children who were placed into out-of-home care were as follows: foster home, kin care setting, group home/residential program, and other out-of-home care arrangements. All variables were dummy coded (1 = yes, 0 = no).

3.2. Data analysis

The survey data were dichotomized to make comparisons between American Indian/Alaskan Native children and non-Indian clear and understandable. Cross tabulations were run using weighted data. Percentages, 95% confidences intervals, and corrected Pearson chi-squares were reported. The analyses and chi square corrections were done using the statistical software Stata (StataCorp, 2004). An alpha of 0.05 was used in interpreting statistically significant results; trends indicating statistically significant levels between 0.10 and 0.05 were also noted. The use of an alpha level of 0.10 was appropriate when conducting exploratory research. Adhering to the more restrictive 0.05 alpha level could have eliminated more substantive findings (Morrison & Henkel (2006). Specifically, in this exploratory study cross tabulations were utilized to examine demographics, family issues, and child maltreatment types.

The second phase called for the calculation of odds ratios to estimate the likelihood of a particular variable acting as a predictor of an American Indian/Alaskan Native child being placed into out-of-home care (Table 2). The dependent variable out-of-home placement was conceptualized to be a dichotomous nominal variable. Direct logistic regression analyses were employed to determine the effect of child and parental characteristics on the dependent variable (out-of-home placement).

In a direct logistic regression all the variables were entered at one time since there was no specific explanation for which variables should be entered first (Tabachnick & Fidell, 2003). Once all the variables were entered, a backwards step-wise procedure was followed where all the non-statistically significant ($p>0.05$) variables were removed one at a time. Variables approaching statistical significance ($p<0.10$) were left in the model. The final step involved addressing possible confounding relationships between those variables remaining in the model once the backwards step-wise procedure was completed. Interaction variables were created by multiplying the remaining variables by each other (e.g., basic needs × mental health). All the interaction variables were entered at one time.

The results of the regression analyses are in the form of odds ratios (OR). The odds ratio and beta coefficient are interchangeable statistics in a logistic regression (Munro, 1997). In these analyses, the odds ratio lets the reader know the likelihood that a child will be placed into out-of-home care. A predictor that has an OR equal to 2.0, for example, indicates a person is twice as likely to be placed, while an OR of 0.50 indicates a person is 50% less likely to be placed.

4. Results

4.1. Descriptive statistics

4.1.1. Demographics

The age distribution between American Indian/Alaskan Native children and non-Indian children in the sample was found to be statistically significant for only one age group: 41.1% of American Indian/Alaskan Native children were aged six to 10 (χ^2 (1) = 52.51, $p=0.005$) compared to 35.9% of non-Indian children (See Table 1). Compared to non-Indians, there was also higher percentage of American Indian/Alaskan Native children in the sample aged 11–14 (27.15% vs. 24.23%). Children in the sample five years old and younger were more likely to be non-Indian. The percentage of non-Indians compared to American Indian/Alaskan Natives was larger for children aged three to five (20.82% vs. 15.35%) and aged two and younger (19.03% vs. 16.42%). Overall, a larger percentage of American Indian/Alaskan Native children were found to be six years and older, while a larger percentage of non-Indians were found among those children ages five years and younger. There were no gender differences found between the two groups. American Indian/Alaskan Native families were larger (47.9% vs. 42.1%), while non-Indian families were slightly more likely to be poor (24.06% vs. 23.02%).

4.1.2. Major family issues

In Table 1 the major family issues were factors related to the primary caregiver, and none were found to be statistically significant. While family violence and substance abuse were present for both groups, they were more prevalent among non-Indians. Non-Indians

Table 2
Results of logistic models predicting American Indian/Alaskan Native placement.

	Model 1 ($n=263$)		Model 2 ($n=280$)		Model 3 ($n=280$)	
Variables	OR (CI)	SE (p)	OR (CI)	SE (p)	OR (CI)	SE (p)
Child's age						
0–2	Reference					
3–5	1.07 (0.00, 1908.3)	2.52 (0.98)				
6–10	1.13 (0.06, 1.18)	1.04 (0.90)				
11–14	2.70 (0.30, 24.26)	1.86 (0.25)				
Basic needs	3.11** (1.44, 6.72)	.75 0.02	3.26* (0.94, 11.28)	1.27 (0.06)	3.09 (0.34, 28.0)	2.14 (0.20)
Domestic violence	1.85 (0.05, 63.01)	2.05 (0.62)				
Child's gender—Male	1.82 (0.17, 19.77)	1.36 (0.49)				
3 or more children in home	1.06 (0.61, 1.82)					
Primary caregiver						
Mental health problems	3.42 (0.60, 19.48)	1.87 (0.11)	4.41* (0.77, 25.5)	2.43 (0.07)	2.95 (0.07, 124.4)	3.47 (0.43)
Alcohol	2.41 (0.16, 35.9)	2.04 (0.38)	7.99** (2.73, 23.4)	2.69 (0.01)	3.70 (0.38, 35.8)	2.64 (0.16)
Drug	8.30 (0.20, 50.45)	9.76 (0.17)				
Maltreatment type						
Physical neglect	4.16** (1.28,13.52)	1.54 (0.03)				
Physical abuse	1.31 (0.37, 4.66)	.52 (0.54)				
Sexual abuse	1.34 (0.07, 23.87)	1.21 (0.77)				
Lack of supervision	2.48 (0.02, 290.0)	3.71 (0.59)				
Interaction variables	Model 1		Model 2		Model 3	
	OR (CI)	SE (p)	OR (CI)	SE (p)	OR (CI)	SE (p)
(BasicMH) Basic needs × Mental health					1.08 (0.03, 39.18)	1.22 (0.95)
(BasicALCOHOl) Basic needs × Alcohol					1.10 (0.09, 13.75)	.87 (0.91)
(MHALCOHOl) Mental health × Alcohol					5.30 (0.04, 742.9)	8.24 (0.36)

Note. OR = odds ratio; (CI) = 95% confidence intervals; SE = standard errors (p) = p value. *$p<0.10$, **$p<0.05$.

experienced higher levels of domestic violence (13.76% vs. 9.08%), alcohol abuse (8.26% vs. 8.2%) and drug abuse (9.42% vs. 6.90%) when compared to American Indian/Alaskan Native families. On the other hand, American Indian/Alaskan Native caregivers were more likely to have mental health problems (18.57% vs. 15.05%).

4.1.3. Child maltreatment types

The only child maltreatment type that approached statistical significance (<0.10) was lack of supervision (χ^2 (1) = 6.35, $p = 0.086$). Non-Indian caregivers were more likely to leave their children unsupervised (23.36% vs. 12.97%) when compared to American Indian/Alaskan Native caregivers. There were no differences in regard to sexual abuse, and non-Indian caregivers were slightly more likely to have physical abuse substantiated (21.7% vs. 20.4%) compared to American Indian/Alaskan Native caregivers, while American Indian/Alaskan Native caregivers were more likely to have physical neglect substantiated (29.9% vs. 22.7%) when compared to non-Indians.

4.2. Placement regression analyses

The results of the direct logistic regressions predicting out-of-home placement are found in Table 2. Model 1 showed the results of regressing all of the variables at the same time. Two of the 14 variables were found to be statistically significant. The odds of out-of-home placement were four times greater if the child maltreatment type was physical neglect (OR = 4.16, $p = 0.031$). In addition, the likelihood of being placed into out-of-home care was three times greater for families that had difficulty paying for their basic needs (OR = 3.11, $p = 0.018$).

After removing those variables one at a time that did not approach statistical significance ($p>0.10$), the results for Model 2 revealed several changes from Model 1. The child maltreatment type physical neglect was no longer statistically significant ($p = 0.192$; results not displayed in a table). A new predictor variable was found to be statistically significant: children of a caregiver who abused alcohol (OR = 7.99, $p = 0.009$) were eight times likely to be placed into out-of-home care. Two variables now approached statistically significance: children of a caregiver with mental health problems (OR = 4.41, $p = 0.074$) were four times more likely to be placed. This compared with children from homes where the caregiver's inability to pay for basic needs (OR = 3.26, $p = 0.056$) increased their likelihood of being placed by three times.

The final step of the analyses involved addressing possible confounding relationships among the predictor variables from Model 2: alcohol, mental health and basic needs. Multiplying the variables among each other created interaction variables: alcohol × mental health; alcohol × basic needs; and basic needs × mental health. No confounding relationships were evident among the predictor variables, since no statistically significant interactions were found to exist among any of the variables in Model 3.

5. Discussion

This study analyzed nationally representative data on children who became involved with the child welfare system between October 1999 and December 2000. This exploratory research was conducted in an effort to find which variables predict placement into out-of-home care for American Indian/Alaskan Native children when they are compared to non-Indian children.

5.1. Descriptive statistics

A comparison of child and caregiver characteristics for American Indian/Alaskan Native and non-Indian families receiving child welfare services (CWS) revealed only a few differences. In the full sample a higher percentage non-Indians were younger (aged five years and less) and a larger percentage American Indian/Alaskan Native were found among those aged six to ten.

Several results stand out because there were no statistically significant differences: basic needs and substance abuse use. A higher percentage of non-Indian families compared to American Indian/Alaska Native families were unable to pay for their basic needs. This contrasted starkly with the poverty rate for American Indian/Alaska Natives in this country, which was twice the national rate in 2000. In regard to substance abuse, a higher percentage of non-Indian caregivers had alcohol and drug problems when compared to American Indian/Alaska Native caregivers. Compared to non-Indians, a slightly higher percentage of American Indian/Alaskan Native caregivers had mental health

problems. There were also differences among child maltreatment types. A larger percentage of American Indian/Alaskan Natives were receiving services for physical neglect, while lack of supervision was found to be more prevalent among non-Indians.

5.2. Regression

The results support the hypotheses that there were differences between American Indian/Alaska Native and non-Indian families whose children have been placed into out-of-home care. The initial regression analyses predicting placement into out-of-home care for American Indian/Alaska Native children (Table 2) found two factors in Model 1were approaching statistical significance ($p<0.1$): basic needs and physical neglect. It was interesting to compare the different impact physical neglect had on the full sample of children receiving services and those placed into out-of-home care. The difference between non-Indian children and American Indian/Alaska Native children was not statistically significant in the full sample, but American Indian/Alaska Native children were four times more likely to be removed from their families because of physical neglect.

A similar relationship existed between the impact of basic needs on the full sample and its role as a predictor of removal of American Indian/Alaska Native children from their caregivers. While the comparison of American Indian/Alaska Native and non-Indian caregivers who were receiving child welfare services revealed no statistically significant differences in regards to basic needs, that was not the case when it came to the removal of American Indian/Alaska Native children from their homes. American Indian/Alaska Native children who came from homes with difficulty paying for basic needs were three times more likely to be placed into in out-of-home care.

The second phase of the regression analyses involved a backwards step-wise procedure that left only those factors that approached statistical significance ($p<0.10$). In Model 2 only three factors approached statistical significance: basic needs, caregiver with mental health problems, and alcohol use problems. Of these three the only factor found to be statistically significant was a caregiver with alcohol problems ($p=0.009$). Once again it must be noted that when comparing American Indian/Alaska Native and non-Indian caregivers who were receiving child welfare services, there were no statistically significant differences in regard to caregivers with alcohol problems. However, children of American Indian/Alaska Native caregivers with an alcohol problem were eight times more likely to be removed from their homes.

5.2.1. Alcohol abuse

Abuse of alcohol has long been associated with children being placed into out-of-home care. The increased likelihood of American Indian/Alaskan Native caregivers having a problem with alcohol compared to non-Indian caregivers was consistent with previous findings (Donald et al., 2003; Trocme et al., 2004). Donald reported a much higher percentage of Indian caregivers (67% vs. 43%) had alcohol problems compared to non-Indian caregivers. While the same association between caregiver alcohol abuse and Aboriginal children in placement was found by Trocme et al. (2004), they questioned whether or not stereotypes regarding alcohol abuse among American Indian/Alaskan Native caregivers may have caused the prevalence of the problem to be exaggerated when it came to neglect related cases. In a review of a sample of CPS case files, Rittner (as cited in Trocme et al., 2004) reported a significant over-estimation of alcohol abuse by caretakers for whom neglect had been substantiated. Though Trocme et al. did not discount the significance of alcohol abuse as a problem for American Indian/Alaskan Native caregivers, the previously cited errors by the CPS workers opened up the possibility of biased decision-making or decision-making influenced by racist stereotypes (p. 595).

Finally, two recent studies, the first by Falk, Hsiao-Ye, and Hiller-Sturmhöfel (2008), refuted the prevalence of alcohol use among American Indian/Alaskan Natives compared to Whites. Falk et al. (2008) found reported alcohol use among adults to be higher for Whites compared to American Indian/Alaskan Natives, while the Substance Abuse and Mental Health Services Administration (SAMHSA) report ((2008) found that Whites aged 12 years and older compared to American Indian/Alaskan Natives were more likely to drink alcohol (p. 33). The same studies cited higher rates of alcohol abuse among American Indian/Alaskan Natives compared to Whites. Interestingly, the Falk, Hsiao-Ye, and Hiller-Sturmhöfel study supported its findings of alcohol abuse by noting that the previous literature found a connection between alcohol abuse and higher rates of alcohol use (p.108). This may be true, but in these current studies, the Whites have the highest rates of alcohol use.

5.2.2. Basic needs

The degree of impoverishment and high rates of unemployment among American Indian/Alaskan Natives has long been known. These facts are difficult to reconcile with the statistics in this study that found a larger percentage of non-Indian families compared to American Indian/Alaskan Native families unable to pay for basic needs. These differences were not found to be statistically significant. Yet, a comparison of caregivers who could not meet their basic needs found the children of American Indian/Alaskan Natives to be three times more likely to be placed into out-of-home care. This disproportional removal of American Indian/Alaskan Native children resonates with the historical treatment of poor American Indian/Alaskan Natives. Gustavsson and MacEachron (1997) said that "poverty has been used as the primary weapon and excuse to destroy Native American Families" (p. 85).

The association between the removal of American Indian/Alaskan Native children from their homes and poverty was found in other studies (Donald et al., 2003; Fox, 2004). The Johnson, Clark, Donald, Pedersen, and Pichotta (2007) study of Minnesota's child protection system found American Indian/Alaskan Native children who came from homes where there were financial difficulties and were said to live in inadequate housing were almost twice as likely to be placed into out-of-home care.

The historical and current problems related to oppression and poverty places the stability of the American Indian/Alaskan Native families at continued risk. That "basic needs" is such a strong predictor for American Indian/Alaskan Native children to be removed from their homes should give pause to the federal government and child protections services.

5.2.3. Mental health

Mental health was the last caregiver-related characteristic to approach statistical significance. American Indian/Alaskan Native caregivers whose children were in out-of-home care were more likely to have mental health problems, when compared to non-Indian caregivers.

While the following studies do not address caregivers of children in out-of-home care, they do address the prevalence of mental health problems among American Indian/Alaskan Natives. For example, Bohn's (2003) research noted the prevalence of substance abuse and depression among survivors of sexual and physical violence. Therefore it should come as no surprise to find significant mental health problems among American Indian/Alaskan Natives who nationally experience the highest levels of interpersonal violence compared to other racial groups (p.334). In addition, Walls, Johnson, Whitbeck, and Hoyt (2006) found that among all ethnic groups, American Indian/Alaskan Natives reported the highest percentage (12.9) of mental distress (p. 522). On the other hand, Fox's (2004) study of children for whom neglect had been substantiated found White caregivers were more likely to have mental health problems than American Indian/Alaskan Native caregivers.

5.3. Limitations

A major limitation is the American Indian/Alaskan Native sample itself. The American Indian/Alaskan Native population is extremely

heterogeneous and diverse in regards to culture and languages. As of the year 2000, the Federal government recognized 579 tribes among whose members speak at least 200 different languages (National Congress of American Indians, 2007). Therefore, any generalizations made must be done with the understanding that much of the aforementioned diversity will not be reflected in research conducted upon aggregated data.

Another major limitation of this research was that it was cross sectional: a one-time snap shot of the data obtained at the time of the interviews with the children, their caregivers, child protective services workers, and the other stake holders familiar with the children.

The secondary analysis examined the data and described associations between variables; however, the preferred way to make inferences would be to do a prospective study. A prospective study would allow a researcher to more clearly examine the causal affects of the variables—which variables came first.

Finally, there was no examination between the racial categories independent of the dichotomous variables American Indian/Alaskan Native and non-Indian. In the future, it might be important to examine the differences between racial categories as there might be some significant differences not found due to the dichotomization.

6. Conclusion

The purpose of this study was to explore those variables that would predict the likelihood of American Indian/Alaskan Native children being placed into out-of-home care compared to non-Indian families. The analysis of NSCAW data utilizing backwards step-wise regression found three variables to be predictive of American Indian/Alaskan Native children being placed into out-of-home care: caregivers having alcohol problems, caregivers having mental health problems, and caregivers having an inability to pay for basic needs. The analyses in the study also revealed that none of the aforementioned factors were statistically significant when American Indian/Alaskan Natives were compared to non-Indians in the full sample of families receiving child welfare services. In fact, alcohol abuse and a family's inability to meet basic needs were more prevalent among non-Indian caregivers. The percentage of American Indian/Alaskan Native caregivers who had mental health problems was only slightly higher when compared to non-Indian caregivers. Therefore, the decision-making that occurred when choosing to remove American Indian/Alaskan Native children from their homes may have been biased. Berger, McDaniel, and Paxson's (2006) empirical study that assessed the objective and subjective parenting characteristics in a sample found the race of the interviewing worker mattered when assessing subjective factors. White workers tended to be harsher in their assessments of Black parents compared to White parents. No differences were found for Black workers' assessments of either the White or Black parents. The results made them question the idea of racially neutral assessments of child maltreatment. The Harris and Hackett (2008) study of CPS decision-making in a Washington state child welfare sample found many examples of racial bias as American Indian/Alaskan Native children made their way through the child welfare system. The issue of possible racial bias or racism needs to be looked at more closely when examining the three predictors of out-of-home care for American Indian/Alaskan Native children.

The historical evidence of racism in the child welfare system for children of color has not been disputed. The child protection system in its creation was generally designed for White children only. Once the doors were opened widely for children of color, disproportional placement into out-of-home care has been the norm and not the exception. History has also documented the collaboration in 1958 between the Child Welfare League of America (CWLA) and the Bureau of Indian Affairs (BIA) in facilitating the adoption of American Indian/Alaskan Native children into "more suitable" White homes (Mannes, 1995). In an effort to stem the disproportionate placement of American Indian/Alaskan Native children into out-of-home care, the Indian Child Welfare Act of 1978 (ICWA) was passed. The current implementation of the standards as set forth in ICWA varies widely from state to state (Cross, Earle, & Simmons, 2000; Earle, 2000). It took the CWLA 41 years to apologize for the racist behaviors of their former leaders and to acknowledge the lingering effects of racism today (Bilchik, 2001). While the standard bearers of child welfare (CWLA) can admit to the impact of race for American Indian/Alaskan Natives in the child welfare system, many researchers (Courtney et al., 1996) do not. ICWA was passed not with the assistance of child welfare researchers but was passed in spite of their work.

Research in child welfare has paid little attention to the measurement of racism in child welfare samples. Although this study does not address it directly, it does raise new questions for research. In the full sample, when comparing American Indian/Alaskan Native and non-Indian caregivers, there were no statistically significant differences when examining the variables alcohol, basic needs or mental health. The logistic regressions looked at the effect of a variable on an outcome after controlling for all the other variables. In this study the outcome was placement into foster care. Why would the effect of those three variables dramatically increase the likelihood of placement into out-of-home care for American Indian/Alaskan Native children when compared to non-Indian children? Such unanswered questions may raise uncertainties about racism.

Cross (2008) does not directly answer the question, but seeks to ameliorate the problem of the over-representation of American Indian/Alaskan Natives in the child welfare system through an examination of "structural interventions" (p.18). One structural barrier is the institutional racism that permeates many child welfare agencies. Cross deems addressing structural issues as paramount if the over-representation of children of color in out-of-home care is to decrease. Two of the issues of note are substance abuse and poverty. Mental health treatment can easily be put on the list. The literature as it relates to child removal is replete with intonations regarding poverty; i.e., children should not be removed from their homes (and communities) because of poverty. Still, poverty continues to be a predictor of out-of-home care placement. Finally, cultural competence comes to the fore when the treatment of substance abuse and mental health arises. Trust is lacking between families of color and the treatment providers who are predominately White. Before the regaining of trust, White representatives of the fields of social work and child welfare must engage in a period of "reconciliation" where those persons disavow current racist practices towards children and families of color by the dominant culture (Cross, 2008). Perhaps if such actions are begun, the levels of substance and mental health disorders in the American Indian/Alaskan Native communities will decrease.

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