

Disproportionality in Child Welfare

The Prevalence of Black and Minority Ethnic Children
within the 'Looked After' and 'Children in Need'
Populations and on Child Protection Registers in England

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The views expressed in this report are the authors' and do not necessarily reflect those of the Department for Children, Schools and Families.

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TCRU's Responsive Research Programme

This study was carried out as part of the Thomas Coram Research Unit's programme of responsive research for the Department for Children, Schools and Families. This provides a facility for government policy makers to request small-scale, exploratory studies on issues of immediate policy relevance. Such work is carried out by experienced researchers in accordance with sound research principles. It is, however, important when reading and using reports from responsive programme studies to bear in mind the limited time and resources available for each piece of work. Responsive programme studies are particularly useful in bringing together diverse evidence, 'scoping' a new field, and providing a basis for more substantive in-depth research where this appears to be necessary.

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Executive summary

Introduction

It has long been known that children from black and mixed ethnic backgrounds are over-represented among children who are looked after, and that Asian children tend to be under-represented. Less is known about why this might be the case, or about over- and under-representation of children at earlier stages such as being identified as 'in need' or being placed on the child protection register¹. This desk-based study was commissioned by the Department for Children, Schools and Families (DCSF) to provide further insight into differences between ethnic groups in their contact with child welfare services in England, and to examine possible reasons for this. New analyses were conducted on three national datasets (the Children in Need Census, children on the child protection register and children looked after), and looked after children's care histories were examined to see if over- or under-representation could be explained by factors such as differing rates of entering or leaving care. These analyses were supplemented by a review of relevant research literature.

Key findings

- The patterns of over- and under-representation of black and minority ethnic children among the looked after population are for the most part replicated in the Children in Need Census and on child protection registers (the Children in Need Census includes children who are looked after and those on child protection registers). Children of mixed ethnic background are over-represented in all three categories, and Asian children under-represented in each category. However, although black children are over-represented among children in need in general and among children who are looked after as a specific group, they are not over-represented on the child protection register.
- Children from mixed and black ethnic groups start to become looked after at higher rates than their presence in the population, but all ethnic groups cease being looked after at rates similar to the rate at which they enter care. It therefore seems that differences in rates of starting to be looked after contribute to disproportionalities in the care population, but differences in rates of leaving do not.
- Once in care, Black Caribbean children are almost twice as likely to experience a placement in residential care compared with Bangladeshi children. This is not simply a feature of age, since the mean age at first entering care is lower for Black Caribbean than for Bangladeshi children.
- Overall, 18 per cent of children are returned home to a parent after being in care. Reunification is more common among children from the Pakistani, Indian and Bangladeshi ethnic groups (between 21 and 23 per cent) than for Chinese, Black African, 'Other' and Black Caribbean children (between 9 and 12 per cent).
- Children of mixed ethnicity and white British children have the highest rates of adoption from care. Black children and those of Pakistani and Bangladeshi origin have the lowest.

¹ Separate child protection registers were phased out by April 2008 and replaced by child protection plans (*Working Together to Safeguard Children*, HM Government 2006).

- It is likely that many different factors interact to contribute to the differences shown by the statistical analyses, making it impossible to draw straightforward conclusions.

Aims

The main aims of this study were:

- to undertake new analyses of national and local statistics from England in relation to over- or under-representation of black and minority ethnic children who are looked after;
- to use this analysis, supplemented by a review of findings from relevant published research studies, to provide further insight into possible reasons for any disproportionality;
- to highlight where further research or data collection is needed to address these issues.

Methodology

The study consisted of two parts. The first was an overview of qualitative data from relevant research studies, focusing particularly on research undertaken in the UK but also reviewing findings from key US studies where there has been a strong tradition of research in what has been termed 'disproportionality'. Literature was identified through searching social care databases, checking references in lists compiled by relevant organizations, and identifying publications from major child welfare studies known to have included significant numbers of minority ethnic children in their research samples.

The second part involved secondary analysis of three separate datasets of child welfare statistics, using unrounded figures supplied by DCSF. These datasets represented children in contact with child welfare services (the Children in Need Census), children subject of a child protection plan (on child protection registers) and children looked after (the SSDA903 annual statistical return). Analyses were carried out at local authority and national level, and figures from more than one year were averaged to increase the underlying sample sizes and make the estimates more reliable.

Longitudinal data recording individual children's histories in the care system were also examined. A special database was constructed from the SSDA903 statistics on children looked after in the years 2004 to 2006, removing all children recorded as unaccompanied asylum seekers, all episodes of care representing a series of short breaks, and all children with a gap in their care history (due to a period of time when information was only collected on a one-third sample). The final dataset included 479,389 'episodes' of care relating to 121,705 children.

Findings

Area level analysis

Two kinds of local authority level analysis were carried out on each of the three child welfare databases. The first considered any differences in the rate at which children in each ethnic group were 'in need', on the child protection register or looked after, compared to their rate in the local population ('disproportionality'). This controls for some of the effects of area - for example, if black and minority ethnic children are more likely to live in areas of high disadvantage. The analysis showed that on average, children of mixed ethnic groups and black children are over-represented in the child welfare statistics and Asian children are

under-represented (see table). The only exception is a slight under-representation of Black children on the Child Protection Register, but this was not significant. Some of these mean disproportionalities are very large: for example, the rate of Asian children on the Child Protection Register was less than one third of the rate that would be expected if they were represented at the same rate as they are in the local authority populations, whilst black children were more than three times more likely to be looked after relative to their rate in the local population. However, these means mask a lot of local variation. In every case there were local authorities that ran counter to the overall trend, and other local authorities where the disproportionalities were much more extreme than the averages would suggest.

Table: Over and under representation of ethnic groups in child welfare compared to in the population

	White	Mixed	Asian	Black
Children in Need Census	As expected	Over	Under	A lot over
Child Protection Register	As expected	Over	A lot under	As expected
Children Looked After	As expected	A lot over	Under	A lot over

(see Table 3 in main report for actual figures)

The second local analysis compared rates of black and other minority ethnic children in the three sets of child welfare statistics with rates for white children living in the same areas ('disparity'). If ethnicity were not a factor, the rates should be the same. A Disparity Index was constructed which showed that:

- Children of mixed ethnicity were, on average, 'in need' and on the child protection register at a rate one and three-quarter times the rate for White children in the same area; and their rate amongst looked after children was two and a half times that of White children.
- Black children were deemed to be in need at four times the rate of white children in the same local authorities. They were on the child protection register at the same rate as white children, but they were looked after at a rate three and a half times that of the white children. These are averages, not maximums: in some local authorities black children were looked after at more than ten times the rate of white children.
- Asian children, by contrast, were under-represented in all three datasets compared to White children in the same area. Their rate of being children 'in need' was just three-quarters the rate for white children, their rate of being on the child protection register was only one-third the rate for white children, and their rate of being looked after was half that of white children in the same local authority.

Analysis of children's care histories

In addition to the area level analyses, various aspects of children's pathways into and out of care were examined to see if they might contribute to differences between ethnic groups. These included rates of starting and ceasing to be looked after; age at first entering care; total length of time spent in care (for those in the database who were no longer looked after); type of placement and experiences of adoption or return to parents.

Starting and ceasing to be looked after

Children of mixed and black ethnicity become looked after at higher rates than their presence in the population. These differences in rates of entering care contribute to the observed differences in rates of being looked after. If mixed and black children were ceasing to be looked after at lower rates than they were starting to be looked after, that would also help to account for their over-representation in the care population. Similarly, if Asian children were ceasing to be looked after at higher rates, that would account for their under-representation. But the rates of ceasing to be looked after almost exactly match those of starting to be looked after, so it is not the case that some ethnic groups are ceasing to be looked after at different rates from their rates of entering care. Differences in rates of starting to be looked after thus appear to contribute to disproportionalities in the care population, but differences in rates of leaving care do not.

Age at first entry to care and total time in care

Children from mixed ethnic backgrounds tend to start being looked after at a younger age but also stay in care longer than those from other ethnic groups. This could help to account for why they are disproportionately represented in the looked after population. By contrast, the three black groups are very varied in their average age at first being looked after and in their total length of time in care, so this does not help to explain their over-representation in the national statistics for looked after children. Similarly, the four Asian groups (Indian, Pakistani, Bangladeshi and Other Asian) have varied ages at first becoming looked after, but they do tend to spend a shorter time in care than most other groups, which might partially account for their under-representation.

Type of care

Fostering is by far the most common type of placement for all ethnic groups. There was little variation by ethnic group in the proportion who have ever experienced a period of foster care, although rates were slightly higher for the mixed ethnic group and lower for Chinese and Asian children. For residential care, however, there were marked differences. Black Caribbean children were far more likely to have experienced a period of care in a children's home (30 per cent) than were Bangladeshi children (16 per cent).

Reunification and adoption

Overall, 12 per cent of looked after children experienced adoption, and 18 per cent ceased being looked after by returning to their parents. Return to parents varied much more by ethnic group than did being adopted. Children from the Pakistani, Indian and Bangladeshi ethnic groups were much more likely to be returned to their parents than Chinese, Black African, Black Caribbean children or those categorised 'Other'. For children from the mixed ethnic groups, the rates of return to their parents were between these two patterns. Turning to adoption, it was mixed ethnicity children and the white British who were the most likely to be adopted.

Messages from the literature

The literature reviewed suggested possible mechanisms for under- or over-representation of black and minority ethnic children in child welfare statistics, such as lack of access to appropriate support services; greater unwillingness in some cultures to report concerns about a child's safety; and greater uncertainty among child welfare professionals about how to respond appropriately to the needs of minority ethnic families. There was little evidence to support the view that social workers and other child welfare professionals operate different thresholds for different ethnic groups in relation to offering services, or removing children

from their parents' care. Overall, the research reviewed provided no simple answer to the question of why disproportionality and disparity exist.

Research and data needs

The study highlights potentially useful areas for further research. For example, in order to understand why some local authorities are 'outliers', with unexpectedly high or low rates of black and minority ethnic children on various child welfare measures, it would be useful to interview local managers and child welfare practitioners. Better data are also needed on ethnicity at each point that children come into contact with child welfare services, and on family circumstances in the records held on individual children who become looked after.

1 Introduction

1.1 Background

It has long been known that black and mixed ethnicity children are over-represented within the Children Looked After (CLA) population (relative to their numbers in the overall population) and that Asian children are under-represented (Bebbington and Miles, 1989). The reasons children are recorded as needing to be looked after also vary by ethnicity. White and mixed ethnicity children are more likely to come into care because of abuse or neglect and are less likely than other ethnic groups to have 'absent parenting' recorded as a cause of needing care, while Asian children are the most likely to become looked after because of a disability (Bebbington and Beecham, 2003).

A large-scale study of placement stability, involving analysis of data on over 7000 children from 13 English local authorities, found significant differences between various ethnic groups in care in relation to age, age at entry and gender. Much of this variation was explained by the presence of asylum seekers, but some differences remained even when this group was removed. For example, there were proportionately more girls among the Indian and Pakistani children who were looked after, and certain groups (Mixed White and Black African, Mixed White and Asian, Pakistani and Bangladeshi children) contained an unusually high percentage of children entering as babies under one year old. African children were much more likely to enter as teenagers (Sinclair et al., 2007).

Less is known about ethnic variation among children on the Child Protection Register (CPR), although a similar pattern of over- and under-representation has been observed (Chand, 2000). Publications from the Children in Need census (CiN) have also pointed to an over-representation of black and mixed ethnicity children among those receiving services from Children's Services during a given week (Department for Education and Skills, 2006).

There is relatively little qualitative research on the reasons for differences of this kind. A key study was by Barn (1993), but even this study had such small numbers of minority ethnic children that it was only possible to have a single category of 'minority ethnic', when it is apparent from the published statistics that the pattern of over- and under-representation varies by ethnic group. Although large-scale statistical studies cannot answer questions of causation, they can help to clarify the nature of the issues. For example, are black and mixed ethnicity children over-represented because they become looked after or are put on child protection registers in larger numbers, or because they are removed at a lower rate than the white population - or perhaps both?

1.2 The study

In order to begin exploring further the reasons for differing prevalences, the Department for Children, Families and Schools (DCSF) commissioned the Thomas Coram Research Unit (TCRU) to undertake a small-scale study within the unit's responsive research programme. It was agreed that the study would include two parts: further analysis of three national datasets of child welfare statistics (on child protection, children looked after and children in contact with Children's Services); and an overview of qualitative data from research studies that have considered possible reasons for the over- or under-representation of black and minority ethnic children in child welfare services.

Two other potential data sources were considered: focus groups of child welfare professionals with a particular knowledge of and interest in black and minority ethnic children, to explore their understandings of the reasons for differing prevalence rates; and interviews with senior managers in selected local authorities with particularly high or low

rates of these children looked after compared to the rate for white children. However, it was decided in consultation with DCSF advisers to focus the limited resources available for this study on secondary analysis of statistics supplemented by a review of key findings from in-depth research studies, and to identify areas where further research might be appropriate.

1.3 Aims

- to undertake secondary analysis of three national child welfare datasets (on children looked after, children in need and children on child protection registers) in relation to over- or under-representation of black and minority ethnic children;
- to use this analysis, supplemented by a review of findings from relevant published research studies, to provide further insight into possible reasons for any disproportionality;
- to highlight where further research or data collection is needed to address these issues.

Results from the overview of literature are presented in Part One of this report, and findings from the statistical analyses in Part Two. A concluding section draws some tentative conclusions and suggests where further research is needed.

2 Part One: Overview of relevant literature

2.1 Identification of literature

In order to make best use of the limited time available for the literature review, the following strategy was adopted:

- A focus on existing overviews (such as Barn, 2006; Chand and Thoburn, 2005a and 2005b; Thoburn et al., 2005; Hill, 2006).
- A search of two key databases, *Social Care Online* and the *Applied Social Sciences Index and Abstracts (ASSIA)*, plus the internet search engine *Google Scholar*, using terms such as ethnic(ity), race, disproportionality and over/under –representation in combination with terms such as looked after child(ren); child(ren) in need, child protection, family support and social care provision.
- Checking references in lists compiled by relevant organisations, for example NSPCC’s reading list on black and minority ethnic children, young people and families.

Additionally, publications were identified from a number of child welfare studies known to the author to have included significant numbers of minority ethnic children in their research samples, although these were not picked up by database searching since ethnicity was not a particular focus of the original study. There may well be other such studies, although it was not possible to identify these within the timeframe for this review.

This overview includes a number of particularly relevant reports from the United States, where there has been a much stronger tradition of research on what is termed ‘disproportionality’ in child welfare statistics according to ethnicity. These American studies are included not because the findings are necessarily translatable to an English context (in fact they are unlikely to be so, given the very different welfare and service framework and the different minority ethnic populations in the US), but because some of the possible reasons that have been put forward in a US context for differences in prevalence between ethnic groups may be worth testing out in other settings. There are currently limits, however, to how far many of these hypotheses can be examined using English data, since the relevant information is not currently collected. We return to this issue in the conclusion. The overview begins with a summary of the key North American research, and then considers the information available from qualitative studies that have been carried out in England.

2.2 The United States: ‘disproportionality’ versus ‘disparity’

Two factors characterise much of the research in the United States on differences between ethnic groups involved in the child welfare system: a distinction between ‘disproportionality’ and ‘disparity’; and a pathway approach whereby differences are considered at each stage of the child welfare process, from initial contact through entry to care to reunification or adoption. In the introduction to a synthesis of research on over/under representation of minority ethnic children conducted by the Casey-CSSP Alliance for Racial Equity in the Child Welfare System (Hill, N. 2006), **disproportionality** is defined as ‘differences in the percentage of children of a certain racial or ethnic group in the country as compared to the percentage of the children of the same group in the child welfare system’. **Disparity** is defined as ‘unequal treatment when comparing a racial or ethnic minority to a non-minority’ (Hill, R., 2006, p3). This disparity could occur at decision-making points such as investigation of possible abuse or entry to foster care; or in the allocation or availability of treatment, services or resources.

Many US studies look at whether a child's or family's ethnic background influences the decisions professionals make at six different stages of the child welfare process:

- **reporting** of concerns (by professionals, community members or the families themselves);
- **investigation** (whether or not reports are accepted for further investigation);
- **substantiation** (whether concerns are upheld)
- **care placement** (decisions about if and where a child should be placed to ensure their safety);
- **exit** from care (through reunification with parents or relatives, being adopted or 'ageing out' of the system); and
- **re-entry** to care.

Whilst some earlier studies showed conflicting results, possibly due to different study designs, the Casey Alliance synthesis concludes that 'most of the larger, national-level studies and most recent research show that race is related to professionals' decision making at almost every stage of the process. It appears that it is only at the last stage - when children return to foster care - that their race or ethnicity is not an issue' (Hill, N. 2006, p5).

However most of these studies are concerned with establishing differences in proportions of ethnic groups at each stage, rather than exploring *why* such differences might exist.

An exception is the 'Disproportionality Project' in San Francisco in 2004, which investigated reasons for the over-representation of African American children in the child welfare system locally (Bowser and Jones, 2004; Inter-City Family Resource Network Inc., 2004). This study used focus groups and qualitative interviews with social workers to elicit their insights about what might be behind this over-representation, and then attempted to test out these hypotheses by analysing statistics from child welfare data systems. Explanations given by social workers for the disproportionately high rate of **initial reports** of concern about children in African American families (which was double that for Hispanics and three times the rate for white children) included:

- High levels of poverty among African Americans.
- High levels of drug misuse especially by African American lone mothers.
- Within the US system of mandatory reporting of suspicions of abuse, parents in affluent families (who are disproportionately less likely to be African American than white) may be more likely to be given the benefit of the doubt or helped in other ways that do not involve reports to child welfare services.
- African American mothers who have mental health problems may receive less support from extended families, since family members in more stable circumstances tend to leave the city for more affordable housing and to escape drug-related violence.
- Relatives in African American families appear more willing to report neglect to the child welfare services.

In relation to the last hypothesis, the statistics showed that there was more than three times the number of African American reporters in comparison to family reporters in other ethnic groups (although in the Disproportionality study there was no difference in the rate at which reports of concern were substantiated across ethnic groups). Social workers said that African American families used the system in two ways that other ethnic groups were less willing to do or did not know about: to secure help (including foster care) for a relative with children whose behaviour was beyond the family's control; and in situations where relatives were already taking care of the child but had no legal authority to do so. They therefore reported their concerns about the child as a way to protect themselves and the child from the birth parent's arbitrary and destructive parenting. However, the use of relatives as carers in the US is significantly different to the UK (over half of African American fostered children in San Francisco were placed with relative carers), so it is unlikely that a similar explanation would hold for the UK.

Explanations put forward by social workers in the San Francisco study for over-representation of African American children **entering foster care** included:

- African American extended families who might be potential relative care-givers have greater difficulty in meeting acceptable household standards due to poverty.
- Demographics - African American families that go into foster care generally have more children than other ethnic groups, so a relatively few families can contribute a high number of children to foster care.

Analysis of the data on children's first episode in care showed that African American children stayed longer in foster care and exited at lower rates than other ethnic groups. They also had higher re-entry rates. Focus groups of social workers suggested that the longer time spent in care could be because of the high proportion (55%) of African American children placed with relatives, meaning that there was less urgency for re-unification because parents felt their child was safe and well cared for and they were not worried that they would lose the child to adoption.

A special issue of the American journal *Children and Youth Studies* (Courtney and Skyles, 2003) contains eight papers examining 'racial disproportionality' in the US child welfare system and the mechanisms that may contribute to this. Key points to emerge from these papers are that state level measures may obscure county level variations, that there is a reduced effect of race after controlling for other factors such as poverty, and that it is important to undertake sub-group analyses since differences between ethnic groups (for example in rates of adoption or reunification after being in care) may vary according to the child's age, type of placement or family structure (Fluke et al., 2003; Wulczyn, 2003; Harris and Courtney, 2003).

Wulczyn and Lery (2007) analysed data on a large number of children first placed in foster care in over 1,000 US counties between 2000 and 2005. They found that disparity rates were highest for infants, decreasing over childhood (as placement rates rose for white children) but then increasing again for teenagers. Disparity tended to be lower in counties with a large proportion of African American residents, children living in poverty, female-headed households and residents with less than a high school education. Other studies have also pointed out how ethnicity, economic status and community context often interact, making it difficult to disentangle the specific effects of ethnicity (Hill, N., 2006; Johnson et al., 2007).

The US research suggests avenues to explore, but it is unwise to assume that explanations are transferable from one country and culture to another. We turn next to consider the rather limited evidence from studies carried out in the UK on the prevalence of minority ethnic groups in child welfare processes. We have considered both over- and under-representation, although most attention has been paid in the literature to those groups (such as black and mixed race children) who have *more* contact than would be expected with child welfare services, rather than those (such as most Asian groups) who are generally under-represented.

2.3 Evidence from the UK

Possible factors that might contribute towards over- or under-representation in child welfare fall into a number of broad categories. The first is demographic explanations, such as higher rates of poverty, larger families, proportion of single-parent households or rates of childhood disability. Other possible explanations focus on differences between ethnic groups in their pathways through the care system, such as differences in age at entry, length of stay or the rate at which children leave care through being returned to their families or adopted. A third group of factors concern the possibility of differential treatment or cultural differences. These include access to support services, families' attitudes and practices or the attitudes and practices of child welfare professionals.

The new analyses undertaken for this study of national and local child welfare statistics (presented in Section 3 of this report) begin to address some of the factors in the first two categories, although the lack of individual level data on the backgrounds of children and families limits what can be done. In this part of the report, we review the available evidence from UK research literature relevant to the third category of explanation, whether there are differences in the way that minority ethnic groups respond to, or are treated by, child welfare services in England. The conclusions drawn are necessarily tentative, given the exploratory nature of the review.

2.4 Availability and appropriateness of support services

If minority ethnic children and families are less well supported than other children and families when they experience difficulties, this could help to account for differences in their prevalence within the child welfare system - either making them less likely to be in contact with child welfare services, or more likely to be taken into care. There is some evidence that minority ethnic children (as a combined group) are more likely to come to the attention of child protection services in crisis situations and not to have been worked with or supported beforehand (Hunt et al., 1999). Similar concerns were raised in a study by Barn et al. (1997) which found that Afro-Caribbean children were more likely than all other ethnic groups to enter care quickly (68 per cent became looked after within two weeks of referral, compared to 59 per cent of mixed parentage children, 50 per cent of Asian and 49 per cent of white children), suggesting that little support had been offered to help children remain at home. Family group conferences are one way in which support can be mobilised to help prevent children needing to enter care, but appear to be used less with minority ethnic families. An analysis by the Family Rights Group of the ethnicity of nearly 1500 children offered a family group conference (Ashley, 2005) found that some projects were effective in reaching black and minority ethnic families. However, they claimed that black and minority ethnic families were under-represented among those being offered a family group conference compared to their representation in the care population in Britain.

Inspection reports and research studies have noted a lack of appropriate services to support minority ethnic families (e.g. O'Neale, 2000; Becher and Husain, 2003; Butt and Box, 1998; Greene et al., 2008). Criticisms have also been made about the availability of support services for families in general, not just those from minority ethnic backgrounds (Social Services Inspectorate, 1999), but accessing support services may be particularly problematic for some minority ethnic groups. For example, an inspection of services to minority ethnic children and their families in eight local authorities (O'Neale, 2000) found that families seeking support often experienced difficulties in accessing services because they did not understand the role of social services, especially when English was not their first language. An overview by the National Family and Parenting Institute of support for families from South Asian backgrounds also reported a range of barriers preventing such families accessing both preventative and universal family and parenting services, including lack of trust in current provision (Becher and Husain, 2003).

Problems with the availability or suitability of interpreting services are frequently reported in studies of minority ethnic families involved in child welfare procedures (Chand, 2005; Humphreys et al., 1999; Brandon et al., 1999; Brophy et al., 2003). The quality of communication between families and professionals is particularly important in child protection situations where the family is not previously known to social services, which seems to be more frequently the case for minority ethnic families (Hunt et al., 1999; Selwyn et al., 2008). Yet interpreting facilities are often inadequate, especially in the initial stages of an investigation (Chand, 2005). One study of social work practice in relation to Asian families who had attended case conferences in a Midlands local authority (Humphreys et al., 1999) found that 12 out of 20 south Asian families needed an interpreter. Although interpreters were involved in all the case conferences, they were not routinely used in less formal meetings, and most interpreters were men, which was particularly problematic for South Asian women who felt it was not appropriate to discuss private matters in the presence of a man.

Asian families with a disabled child have been shown to receive lower-cost services than other families with a disabled child (Bebbington and Beecham, 2003), and to be less likely to receive respite care - although it is unclear whether this is due to unwillingness to accept such care from people outside the extended family (Qureshi et al., 2000) or whether low take-up is more likely to be explained by language issues and lack of awareness of such services (Hatton et al., 2004). In another study, minority ethnic families caring for a severely disabled child reported higher levels of unmet need than did white British parents in comparable situations (Chamba et al., 1999). What is clear is that outreach work can play an important role in making support services more accessible to black and minority ethnic parents (Page, Whitting and McClean, 2007). However, evaluations focusing on work with minority ethnic families in large-scale initiatives such as Sure Start (Lloyd and Rafferty, 2006; Craig et al., 2007) and the Children's Fund (Morris et al., 2006) have found that, on the whole, such outreach work has been given insufficient attention. New services tend to reach minority ethnic families who are already in contact with agencies or voluntary groups.

One action research project in a London borough attempted to address the low referral rates to Child and Adolescent Mental Health Services (CAMHS) of Bangladeshi families, by seconding minority ethnic social workers from elsewhere in the social services child care division to work for a year with the CAMH service (Messent and Murrell, 2003). Although Bangladeshi children formed 54 per cent of the school aged population in this borough they accounted for only 19 per cent of referrals to CAMHS, and often had to wait longer to be seen due to a shortage of interpreters. Bangladeshi parents and professionals who participated in the project felt that the lack of referrals to the service did *not* mean that Bangladeshi families had fewer problems for which they needed this sort of help, but instead reflected a lack of knowledge about the service among both parents and voluntary sector bodies providing a service to the Bangladeshi community.

2.5 Poverty and isolation

Paradoxically, although most research studies show that minority ethnic families are less well served by family support services, they may have a greater need for such support to counteract the effects of poverty and isolation. In a large-scale study of parenting in poor environments, Ghate and Hazel (2002) found that minority ethnic families tended to have smaller than average support networks compared to white families. A review for the Joseph Rowntree Foundation of poverty and ethnicity research since 1991 (Platt, 2007) found that all of the minority groups identified had higher than average rates of poverty. The risk of poverty was highest for Bangladeshis, Pakistanis and Black Africans, reaching nearly two thirds among the Bangladeshi households, although rates were also above average among Caribbean, Indian and Chinese populations. This review also reported different patterns for levels of social contact by ethnic group. Bangladeshis and Pakistanis did not appear to be lacking informal social contact, but Black Caribbeans and Black Africans, particularly women, did. There was, however, substantial variation within as well as between ethnic groups in both income and level of social contacts, highlighting the need to avoid regarding minority ethnic groups as homogenous populations.

A recent large-scale study of over 7,000 children looked after by 13 English local authorities concluded that children who were not white (a quarter of the sample) were 'more likely to enter the care system at least in part for reasons of poverty or other social disadvantage' (Sinclair et al., 2007, p50). The researchers based this conclusion on the fact that the behavioural and family difficulties of the black and minority ethnic children in the care system were on average less severe than those of the white children. Whilst one explanation for this could have been that the carers of the minority ethnic children were particularly successful in supporting them, this would have suggested that the longer the children were in care, the better they would do, and in fact the reverse seemed to be true.

2.6 Availability of foster / adoptive placements

A study by BAAF has estimated that it takes on average 200 days longer for a child of black, Asian or mixed parentage to be adopted compared to a white child (Ivaldi, 2000). One possible reason for this could be a lack of suitable adopters or foster carers for children from BME backgrounds, given the generally accepted policy of seeking ethnically matched placements as far as possible. Refined matching may be especially difficult when the proportion of minority ethnic carers from a specific group is very small and the chance that they have a vacancy when a particular child from their group needs it is likely to be low (Sinclair, 2005; Sinclair et al., 2007).

Population analysis also illustrates the challenges facing social workers wanting to recruit a pool of foster carers or adoptive parents that provides a close 'fit' with waiting children (Frazer and Selwyn, 2005). The very young age profiles of the mixed parentage, Pakistani and Bangladeshi communities, and of the Muslim and Sikh communities, may place children from these groups at a relative disadvantage in terms of the number of adults available to them as potential substitute carers. These demographic influences may be further compounded by environmental and family factors such as family size and household composition, employment patterns, levels of poverty and the effects of overcrowding and poor housing, making some ethnic groups less likely to be in a position to consider offering a home to a non-related child.

A recently completed study by Selwyn and colleagues focused specifically on 'pathways to permanence' for black, Asian and mixed ethnicity children (Selwyn et al., 2008). Information was collected from a stratified sample of 200 case files in three local authorities in England, and interviews with social workers about 50 minority ethnic children whose cases were booked to go to the adoption panel for consideration of an adoption recommendation. Over three quarters of the children were less than a year old when referred, and the majority were of mixed ethnicity (predominantly children with a white mother and a father from a Pakistani or Caribbean background). Low numbers of Asian and black children and the influence of sibling groups limit the generalisability of the findings. Bearing this in mind, there was more delay in permanency decisions for black and Asian children, and the quality of assessments was particularly poor for these children. They were usually the first generation to have contact with the care system, whereas mothers of white and mixed ethnicity children being considered for adoption had often been in care themselves and were well known to professionals.

Selwyn and her colleagues found that age and ethnicity were the main determinants of whether a child was adopted or not. Infants were ten times more likely to be adopted than a child older than three years at the time of the adoption recommendation, and mixed ethnicity children were four times more likely to be adopted than an Asian child. The researchers suggest that the Asian and black children were unlikely to be placed for adoption for a complex mixture of reasons: a concentration on 'same race' placements; community demographics; adopter preferences; limited promotion of these children to prospective adopters and social workers' pessimism about the likelihood of finding a placement.

2.7 Cultural attitudes and practices within families

One of the reasons sometimes put forward for over- or under-representation of minority ethnic groups on child protection registers or among children looked after is 'cultural relativity' - parenting behaviours that are acceptable in one culture may not be so in another, and thus trigger safeguarding concerns. Although national statistics record the main reason for a child becoming looked after by ethnicity (see 3.3.3), no ethnic breakdown is given for children at earlier stages of contact with the child welfare system, for example initial referrals. Information therefore needs to be obtained from research studies that have explored whether there are differences in the concerns and types of maltreatment that lead to the referral of different ethnic groups. However, sample sizes in these studies are often too small reliably to comment on ethnicity, and different minority ethnic groups may be combined for purposes of analysis making it difficult to tease out complex differences between ethnic groups.

No consistent picture emerges from these studies (Chand and Thoburn, 2005b; Bernard and Gupta, 2006). In relation to physical abuse, a survey of a community sample of nearly 400 parents of 7 to 11 year olds (Barn, 2006) found no real differences between ethnic groups with regard to attitudes towards physical punishment of children. In an overview, Thoburn and colleagues concluded that minority ethnic children as a group were no more likely than white children to be referred to child welfare services because of concerns about physical abuse, but that among such referrals, minority ethnic parents were more likely to have used implements to chastise their children. In other words, it was 'the way in which it [physical punishment] is inflicted that has brought some minority ethnic parents into the formal child protection (conference and registration) system or court arena' (Thoburn et al., 2005, p83). A study by Gibbons and Wilding (1995) identified that inadequate supervision or 'home alone' cases disproportionately involved more African families and suggested that this could be influenced by parents' income and inability to access affordable childcare.

Another suggestion in the literature is that strongly gendered norms placing women in a subordinate position within African families may operate to constrain mothers in their ability to protect their children in the context of domestic violence (Bernard and Gupta, 2006). There is, however, little research evidence to support or contradict this. Domestic violence was recorded as a cause for concern in the court files of half the children of Black African mothers in one recent study of care proceedings (Masson et al., 2008 – see below) but this was very similar to the rate for all mothers in the sample.

In the study by Selwyn and colleagues (2008) comparing the 'care careers' of white and minority ethnic children who became looked after, there were high levels of abuse and neglect in all groups but white and mixed ethnicity children were more likely to be referred for neglect, whilst black children were often referred for physical abuse and Asian children because their family was experiencing acute stress and there was the potential for abuse or neglect. This might have been a consequence of age rather than ethnicity, however. The black children in the study were older when they were first referred, and neglect may be seen as of greater concern for infants. Mental health problems and domestic violence were equally prevalent in minority ethnic and white families.

Judith Masson and her colleagues analysed court files relating to nearly 400 cases of children involved in care proceedings, over a quarter of whom were from minority ethnic backgrounds. Their overall conclusion was that there was no evidence to indicate that local authorities brought care proceedings without good reason. Although the report does not discuss ethnicity in any depth, the researchers examined the number and type of concerns recorded in case files about the mothers of the children, and present these separately for the three main minority ethnic groups as well as for young and older mothers (Masson et al., 2008, p80). The sample size for this analysis was small (18 Black Caribbean, 22 Black African and 12 South Asian mothers), so caution in interpretation is needed, but there were some differences between ethnic groups in the reasons that care proceedings had been brought. Concerns about drug abuse were much more likely to be recorded in the case files of Black Caribbean mothers and much less likely to be recorded as a concern in the case of Black African or South Asian mothers. Crime, neglect/repeat accidents, accommodation problems and maternal mental health problems were also more frequently recorded for Black Caribbean mothers, and nearly a third had a history of being in care themselves compared to 17% of all mothers in the sample (and hardly any of the Black African or South Asian mothers). Concerns about physical abuse or over chastisement were recorded less frequently for Black Caribbean mothers but at an above average rate for Black African and South Asian mothers. However, the numbers in the minority ethnic samples are too small to draw definite conclusions.

Recent evidence from an NSPCC study involving 500 British Asian families suggests that one reason for the low rates of children from this community appearing on child protection registers may be a particular reluctance to report suspected child abuse, due to fears of the negative impact this would have on the honour (*izzat*) of the child or their own family. Sexual abuse was rated as having the most negative effect on *izzat*, followed by physical and then emotional abuse. Over a third of those interviewed had suspected a child was being abused but nearly half of these did nothing about their concerns. (NSPCC, 2007). Similarly, consultations with 130 Asian women in Bradford, facilitated by a community organisation that had produced a booklet for the Asian community on protecting children from abuse, found that they would be reluctant to report child sexual abuse because of cultural imperatives arising from *izzat*, *haya* (modesty) and *sharam* (shame, embarrassment), as well as knowing that others affected within their community had found it difficult to access relevant services (Gillingham and Akhtar, 2006). The concept of family honour has also been found to play a significant part when Asian women give up their baby for adoption (Selwyn et al., 2008).

2.8 Professionals' attitudes and practices

Anecdotal accounts, as well as evidence from investigations such as the Climbé Inquiry, suggest that professionals involved with minority ethnic families in child protection situations may be more reluctant to act because of fears of offending community sensibilities or being accused of racism (Scorer, 2005; Bernard and Gupta, 2006). However, research studies provide little evidence to support this. A study of 1752 referrals for suspected abuse or neglect in eight English authorities concluded that 'differences in policy and practice between local authorities do not seem to be significant in causing initial child protection conferences (Gordon and Gibbons, 1998, p432). White children in this study were less likely to have an initial child protection conference, but there was no difference between white and minority ethnic children in the likelihood of their being placed on the child protection register. Vulnerability factors such as parental mental illness or having a criminal record, or the child being part of a reconstituted family, were more likely than ethnicity to be associated with the decision to make protective plans in respect of referred children.

Findings from a study of the influence of ethnicity on care proceedings (Brophy et al., 2003) also suggested that professionals' decisions were grounded in real concerns about children's welfare, and that although conflicts did exist between professionals and some minority ethnic parents about culturally specific childrearing practices, by the time cases came to court these issues of cultural conflict were 'rarely pivotal' in deciding whether the threshold criteria for compulsory intervention had been met.

Another possible source of evidence on whether social workers respond differently to families depending on a child's ethnic background is provided by studies that have presented social workers with hypothetical vignettes of potential child protection situations. In one such cross-national study, which included 178 UK social workers, half were presented with a vignette about a child with a boy's name common among the majority ethnic population in their country, and half with the same vignette about a child named 'Ali Habib'. In all countries including the UK, social workers reacted in similar ways regardless of the child's supposed ethnic background (Williams and Soydan, 2005).

The most recent evidence, from Selwyn and colleagues' study comparing care pathways and placement outcomes among mostly very young children who became looked after, concluded that there was 'no *systematic* bias against, or mishandling of, minority ethnic children compared with white children from the time they came to the attention of Children's Services'. Nor was there a tendency to take minority ethnic children into care more precipitately (Selwyn et al., 2008). However, this study did find that social workers were more hesitant and sometimes confused about how best to meet the needs of minority ethnic children, and more insecure in their decision making. They were more pessimistic about the chance of finding adopters for many minority ethnic children with adoption recommendations than they were for white children.

2.9 Summary

This overview of key literature has considered a range of possible reasons for the under- or over-representation of black and minority ethnic children in child welfare statistics, including the availability and appropriateness of support services; the impact of poverty and isolation; the availability of 'matched' foster placements; differences in willingness to report concerns or to seek help; and the response of child welfare professionals to culturally specific childrearing practices. There is certainly evidence of a lack of accessible, appropriate support services for children and parents from minority ethnic groups (for example, family support or Child and Adolescent Mental Health services), and this could mean that children are less able to remain safely at home. However, studies involving mostly white families

have also reported a lack of accessible provision, so inadequate support is not restricted to minority ethnic groups.

The consistent under-representation of Asian children in child welfare statistics is more likely to be due to a reluctance within Asian communities to report concerns or seek help, rather than to lower levels of need. This under-representation should be as much a cause for concern as the over-representation of other groups such as children from Black Caribbean or mixed ethnic backgrounds, but has received far less attention.

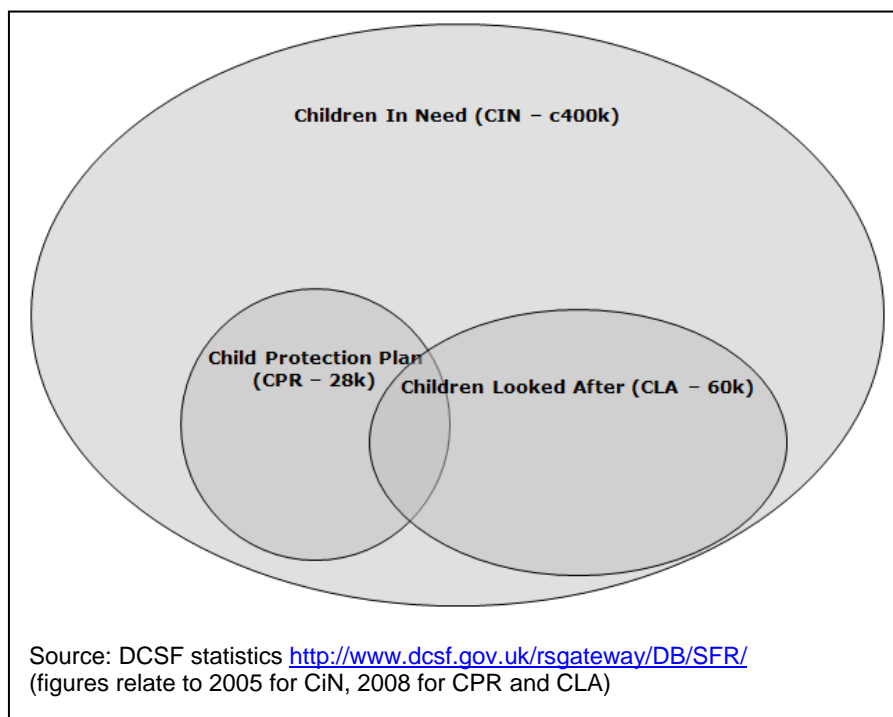
There is little evidence to support the view that social workers and other child welfare professionals operate different thresholds for offering services, or removing children from their parents' care, on the basis of ethnicity. However, at least one study has found that assessment and care planning tend to be of poorer quality when involving children from black and minority ethnic groups, suggesting a need for additional support and training for social workers and further research to clarify the processes by which this happens.

Overall, the research reviewed provides no simple answer to the question of why disproportionality exists. In Part Two of this report, we set out findings from detailed secondary analysis of three existing datasets: on children in need, children on the child protection register and children who are looked after. These analyses provide new information on the rates at which different ethnic groups are represented in these three aspects of the child welfare system. This includes a local authority level analysis to test whether the national patterns are replicated at local level and analysis of longitudinal data on individual looked after children, to see if over- or under-representation could be at least partly accounted for by differences between ethnic groups in, for example, rates of starting or leaving care.

3 Part Two: Exploring the statistics

The studies of disproportionality and disparity by ethnicity in the American child welfare system referred to above cannot be directly replicated with English data, as the English child welfare system is organised somewhat differently and data on ethnicity have not been routinely collected at early stages of contact with the system. However, it is nevertheless possible to identify three levels of involvement with services where data on ethnicity are available for analysis: these concern children in need, children on the child protection register and children who are looked after. Children in need might be thought of as the lowest level of concern, with the child protection register being a higher level, where more intensive intervention would take place; and the most severe level being where a child is taken into care by the local authority and becomes looked after. The three groups overlap, as illustrated in Figure 1.

Figure 1 Children in contact with child welfare services in England



Many studies in England have found that there are more black and mixed race children involved in these three aspects of the child welfare service than would be expected given their proportions in the national population (e.g. Bebbington and Miles, 1989; Thoburn et al., 2005). However, representation ought to be judged against the local population rather than against the national population. It is known that being in contact with the child welfare system is associated with poverty, so children who live in poorer areas might be expected to be over-represented in the datasets. It is also known that minority ethnic children are more likely to live in poorer areas (e.g. Dorling and Thomas, 2004). Consequently, their over-representation could be more to do with poverty and where they live than with ethnicity itself. For that reason, it is important always to compare the proportions in contact with the child welfare system against the local population.

This part of the report presents the findings of new analyses of national and local statistics from England in relation to three aspects of children in contact with child welfare services. The aim of the first part of this analysis has been to compare the representation of children from different ethnic groups in the child welfare statistics, at a local level, so controlling for some of the effects of area. The second part of the analysis has focused on the care histories of looked after children and examined ethnic differences in the experience of care and its termination. Before presenting those analyses, it is necessary to consider the nature of the datasets available since these affect the analyses that are possible.

3.1 Child Welfare Datasets

Four different data sources have been analysed for this report. Three of these present detailed statistics at a local authority level, making it possible to conduct analyses that control for area. The fourth contains data on the complete care histories of looked after children.

- ***Children in Need***

Data on children in need (CiN) have been collected by the Children In Need Census. This census serves as the main source of data on the numbers and characteristics of children receiving social services support in England. The CiN census has been conducted in 2000 (Department of Health, 2000), 2001 (Department of Health, 2002), 2003 (Department for Education and Skills, 2004) and 2005 (Department for Education and Skills, 2006) (although the first survey provided little usable data). The censuses take place in a 'typical' week and record details of all children who received services from Social Services during that week. Figures are published for each local authority in England. For 2003 and 2005 the numbers of children were reported by ethnic group, in five categories: White, Mixed, Asian, Black and Other. This is less detailed than the categorisation used to collect the data, but as many local authorities have few black and minority children and consequently few in need, figures for a more detailed ethnic categorisation would not give reliable data. Published figures are rounded to the nearest 5, but unrounded figures were supplied by the DCSF for this analysis. For this report data for 2003 and 2005 have been averaged, in order to increase the underlying sample size and make the estimates more reliable.

- ***Child Protection Register***

Each local authority in England sends details annually of children on its Child Protection Register (CPR) to the DCSF on form CPR3. This includes details of all children who are the subject of a Child Protection Plan. Figures are published for each local authority in England. The DCSF web site includes a table for England by ethnic group, using the same five categories as the CiN census. However, figures for ethnic group for each local authority are not published. These figures were made available by DCSF for this analysis. For this report figures for the three years of 2004, 2005 and 2006 have been averaged. There is a potential problem with adding numbers across years, as children who remain on the register for more than a year would be counted more than once, but averaging the figures serves to increase the overall sample size and so give more reliable figures.

- ***Children Looked After***

Information on Children Looked After (CLA) is collected on the SSDA903 statistical return annually by DCSF. The SSDA903 is a longitudinal record of each looked after child. It contains information about all placements for looked after children. Data are summarised each year ending 31 March (e.g. DCSF, 2008) but the actual statistical record covers the whole history of care for each looked after child. The DCSF web site includes figures by

ethnic group for each local authority using the same five-group classification as the CiN census and the CPR figures. The published figures are rounded to the nearest 5, but again DCSF supplied unrounded figures for the current analysis. For this report figures for 2004, 2005 and 2006 have been averaged, to give more reliable estimates.

- ***Individual Records***

In addition to the annual figures published on a local authority basis, the raw data from the individual longitudinal records from the SSDA903 have also been made available for this analysis. The data are anonymised, so that no child can be identified. Having the full longitudinal record makes other kinds of analyses possible. For example, for children with more than one period of care, it is possible to look at their repeat experiences.

The first three local authority based datasets (CiN census, CPR and LAC) all have the limitation that they present data for a restricted period - one week for the CiN census and one year for the other two. The major problem with this is that it gives low numbers in some minority ethnic groups for many local authorities, and consequently the possibility of some volatility in the data, with large year on year variations, since a difference of a few children when the baseline itself is low can produce large percentage differences. This problem has been reduced here by averaging over consecutive datasets, as described above. However, this also has its drawbacks: firstly because it does not distinguish between one child appearing in more than one year and two different children in the different years. Secondly, when local authorities are changing either in their composition or their behaviour, this can be masked by taking data over a longer period. Despite these limitations, there are a number of area-level analyses that could be conducted which would help to clarify the extent and nature of any over-representation.

Analysis of these datasets would help to answer the following questions:

- Are children from minority ethnic groups designated as Children in Need, on the Child Protection Register, or looked after, in each local authority, in proportion to their presence in the area (disproportionality)?
- Are children from minority ethnic groups designated as Children in Need, on the Child Protection Register, or looked after, in each local authority, at the same rate as White children living in the same area (disparity)?

For Looked After Children (but not CiN or children on the CPR), the SSDA903 can be used to analyse children's complete care histories, since it is a longitudinal, individual level database. It can be used to look at rates of starting to be looked after and rates of ceasing to be looked after, the length of time in care, experience of different placements, and how periods of care come to an end. Not all of this information is published, so it cannot be obtained from the annual statistical reports.

If children start to be looked after at a higher rate than they are present in the population, then that would contribute to their being over-represented in the care population. Similarly, if they ceased to be looked after at a lower rate than they were present in the care population, that would also contribute to an over-representation, as children from that group would be leaving care less frequently. Another way of looking at the figures is in terms of total length of time in care: if some ethnic groups are spending, on average, longer in care, then that would also contribute to their over-representation.

Analysis of this longitudinal dataset would help to answer the following questions:

- Do children from different ethnic groups start to be looked after at different rates?
- Do children from different ethnic groups cease to be looked after at different rates?
- Does the percentage of children looked after who experience a period of being fostered during their time in care vary by ethnic group?
- Does the percentage of children looked after who experience a period of residential care vary by ethnic group?
- Do children from different ethnic groups spend different lengths of time being looked after?
- Does the percentage of children who are adopted vary by ethnic group?

The area-level analyses of all three datasets are presented below, followed in 3.3 by findings from our new analysis of the longitudinal dataset on individual looked after children.

3.2 Area level analysis

3.2.1 *Black and minority ethnic populations*

Before looking at ethnic group differences in the child welfare statistics, it is necessary to establish the numbers of children in each of the ethnic groups living within each local authority. These data are not collected routinely. The only comprehensive source is the decennial National Census. The most recent census for England, conducted in April 2001, included a question on ethnic group which was to be answered for all individuals, including children. Table S101 from the national census gives the numbers of people in each of the ethnic groups by age for each local authority. This table has been used to provide an estimate of the numbers and percentages. These figures apply to 2001, and so are earlier than the child welfare data that are being used, but it is unlikely that very big changes will have taken place in areas as large as local authorities in such a short space of time.

For reporting the national census, categories for ethnic group have been combined to reflect those reported in most of the child welfare statistics.

Table 1 shows the average population of children (here aged 0-17) in each ethnic group across the 150 local authorities in England and the average numbers in each of the child welfare statistics. Some of the local authority mean numbers in some of the statistics are quite low for some ethnic groups (although never zero), in particular the numbers on the Child Protection Register. In total there is an average per local authority in England of fewer than 200 children on the CPR, and most of these are white children. The coefficient of variation is the ratio of the standard deviation (SD) to the mean, and where this value is above 1 this indicates a high degree of variation: many of these means have a coefficient of variation over 1. This is particularly the case for the CPR. For example, the average number of Asian children on the CPR was just 7, with a standard deviation of 12; for black children the average was 10 with a standard deviation of 21. This indicates that there was a high level of variation between local authorities on these statistics.

Table 1 Mean child population (0-17) and mean numbers in child welfare statistics by ethnic group in English local authorities

		White	Mixed	Asian	Black	Other
Population (Census 2001)	Mean	64,165	2,344	4,871	2,201	644
	SD	54,139	2,124	8,381	4,363	635
Children in Need	Mean	1,142	83	58	102	37
	SD	749	92	94	184	61
Child Protection Register	Mean	145	13	7	10	-
	SD	104	14	12	21	-
Children Looked After	Mean	320	34	12	32	7
	SD	236	42	22	63	10

The same figures are shown in **Table 2** as percentages. From the national census figures it can be seen that on average over 84% of children are white. The largest minority ethnic group is that of Asian (7.3%), then at about half that size are black (3.8%) and mixed (3.5%) which are very similar in size. There is a small 'other' group (1.0%) which is sometimes included in reported tables and sometimes not. (This is such a diverse group that it is not possible to draw any conclusions about these children: they are only included here for completeness.)

Table 2 Mean child population (0-17) and mean numbers in child welfare statistics by ethnic group in English local authorities: percentages

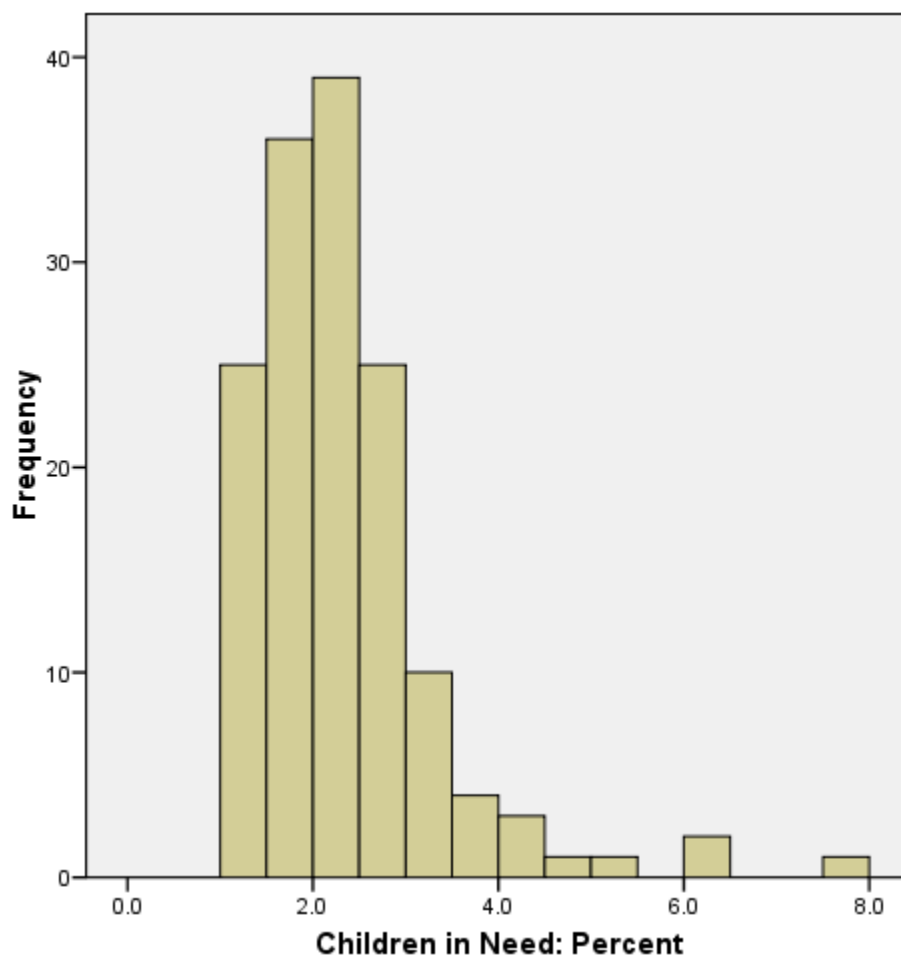
		White	Mixed	Asian	Black	Other
Population (Census 2001)	Mean	84.4	3.5	7.3	3.8	1.0
	SD	17.4	2.6	10.1	7.6	1.1
Children in Need	Mean	81.0	5.4	4.0	6.8	2.6
	SD	21.0	3.8	5.3	11.0	3.7
Child Protection Register	Mean	82.4	7.4	3.8	5.5	-
	SD	18.3	6.1	5.9	10.0	-
Children Looked After	Mean	80.3	7.8	2.6	7.3	2.0
	SD	20.1	5.9	3.8	12.0	3.8

It is clear from **Table 2** that white children are represented on the children in need census (81.0%) and on the child protection register (82.4%) at almost the rate that might be expected from their percentage in the overall population (84.4%), but they are a little below their population rate amongst children looked after (80.3%). The situation is very different for the children of mixed ethnic background: they are over-represented in every category - being high for children in need (5.0%) and more than double their population percentage (3.5%) amongst children on the child protection register (7.4%) and amongst those looked after (7.8%). The position for the Asian children is just the opposite, being under-represented in every category: their population percentage is 7.3% but they are only about half this figure for children in need (3.7%) and children on the child protection register (3.8%) and even lower amongst children looked after (2.6%). The picture for black children is similar to that for the mixed children, being over-represented in every category, but the pattern is slightly different: in particular, for mixed children the rate of being on the Child Protection Register is double the rate in the population, but for black children the rate (5.5%) is only slightly above the population percentage (3.8%). For children in need (6.8%) and children looked after (7.3%) the percentage is almost double.

3.2.2 Disproportionality

The difference between the percentage in the child welfare statistics and the percentage in the population was described in Part One of this report as ‘disproportionality’ (e.g. Courtney & Skyles, 2003). As **Table 2** shows, nationally, there are some clear disproportionalities in the child welfare statistics. However, this national average needs to be examined at a local level. If ethnicity were not a factor in children entering the welfare system, then the percentage in each of the datasets should match the percentage in the local population. If the black and mixed ethnicity children tended to live in areas with high rates of children in the welfare system, then their national over-representation would simply reflect their geographic concentration in areas of high need. (For this to constitute an adequate explanation, this would also require that Asian children tend to live in areas with low levels of need.) It is certainly the case that there is much variation in the overall rates of need between different authorities. For example, **Figure 2** shows the number of local authorities with different percentages of their children deemed as ‘in need’. They range from a minimum of 0.16 percent to a maximum of 15.0 percent (one local authority is off the scale) - a factor of nearly 10.

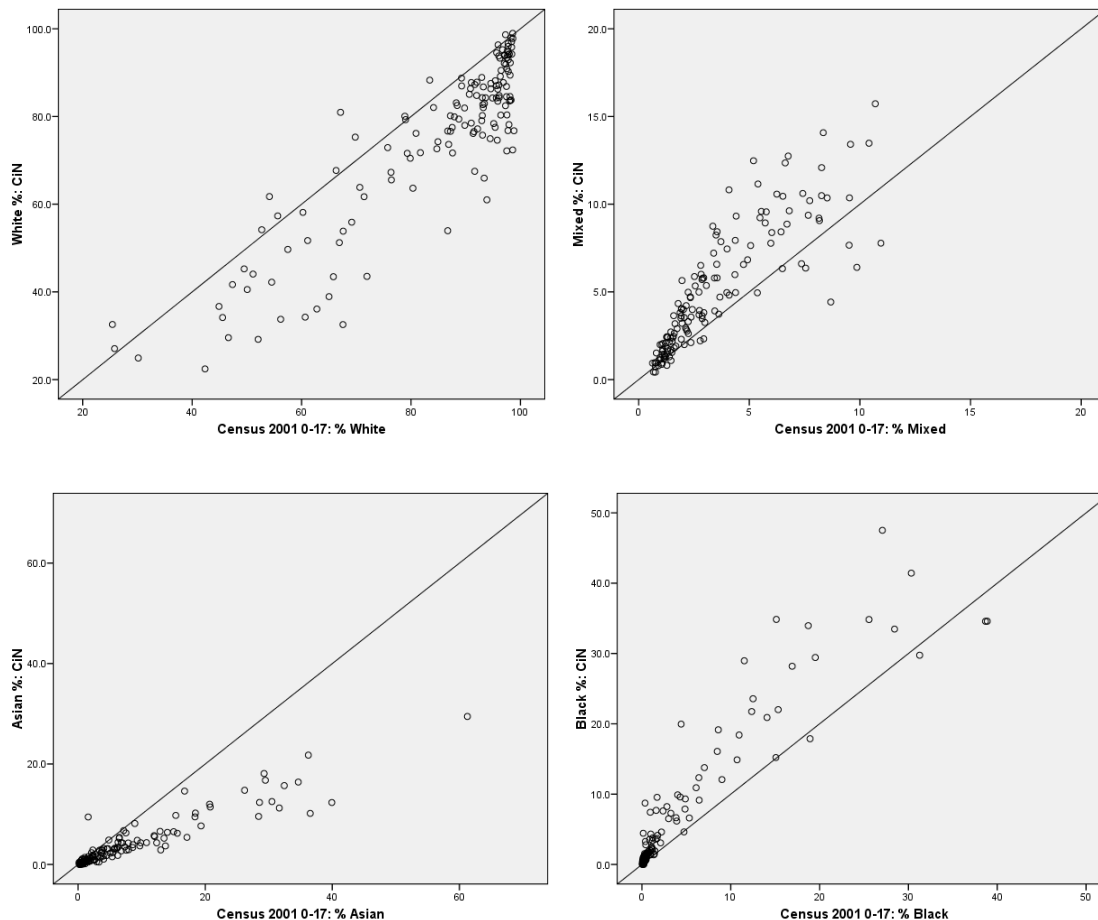
Figure 2 Histogram of percentage of children in need by local authority (England)



In order to explore local variation in disproportionality, the percentage of each ethnic group in each of the child welfare statistics has been plotted against the percentage of that group in the local child population. **Figure 3** shows the percentage of children in need for each ethnic group. The horizontal axis shows the percentage of the ethnic group in the population and the vertical axis the percentage of the group for the CiN census. Each circle represents one local authority. If children from an ethnic group were ‘in need’ at the same rate as their

presence in the population, then all the circles should lie along the diagonal line. If they are in the children in need figures at a higher rate than they are in the population, then the points will lie above the line; if they are 'in need' at a lower rate than in the population, then the points will be below the line. There are four charts in **Figure 3**, each representing one ethnic group. The first is for the white group. It is clear that most local authorities lie below the diagonal line, meaning that White children generally appear in the CiN census at a lower rate than they are to be found in the population.

Figure 3 Percentage of children in the Children in Need census and in the population



The second chart (top right) represents children of mixed ethnicity. Here the pattern is quite different, with most local authorities above the line. This indicates that in most authorities, mixed ethnicity children are in the CiN census at a higher rate than they are present in the population.

The third chart shows Asian children. It is clear that most authorities are below the line, but the pattern is much more extreme than for the white children. This indicates that Asian children are particularly under-represented in the CiN census relative to their presence in the local population.

The final chart represents black children. As with the mixed children, most local authorities are above the diagonal line, indicating the presence of black children in the CiN census at higher rates than their presence in the population. In the large majority of cases the points are above the line, indicating that in the majority of local authorities, Black children are over-represented in the statistics of children in need. Overall, this confirms that the pattern of

over- and under-representation at national level of ethnic groups in the CiN census is repeated at local authority level.

Figure 4 shows the statistics for children on the Child Protection Register. The first chart represents white children. Whilst the majority of local authorities cluster around the diagonal, indicating that white children tend to be on the Child Protection Register at much the same rate as their representation in the population, some are quite a long way from the line - both above and below. This indicates that some local authorities have an over-representation of white children on the CPR and some have an under-representation. The second chart shows children of mixed ethnic origin. Here almost all local authorities are above the diagonal, indicating an over-representation. Some of these over-representations are very high, with mixed children being on the CPR at more than twice their rate in the population. The third chart is for Asian children. This shows the opposite distribution, with most local authorities below the diagonal, indicating an under-representation relative to their number in the local population. The final chart is for black children. Like for the mixed children, most local authorities are above the diagonal, but the over-representation is not as marked.

Figure 4 Percentage of children on the Child Protection Register and in the population

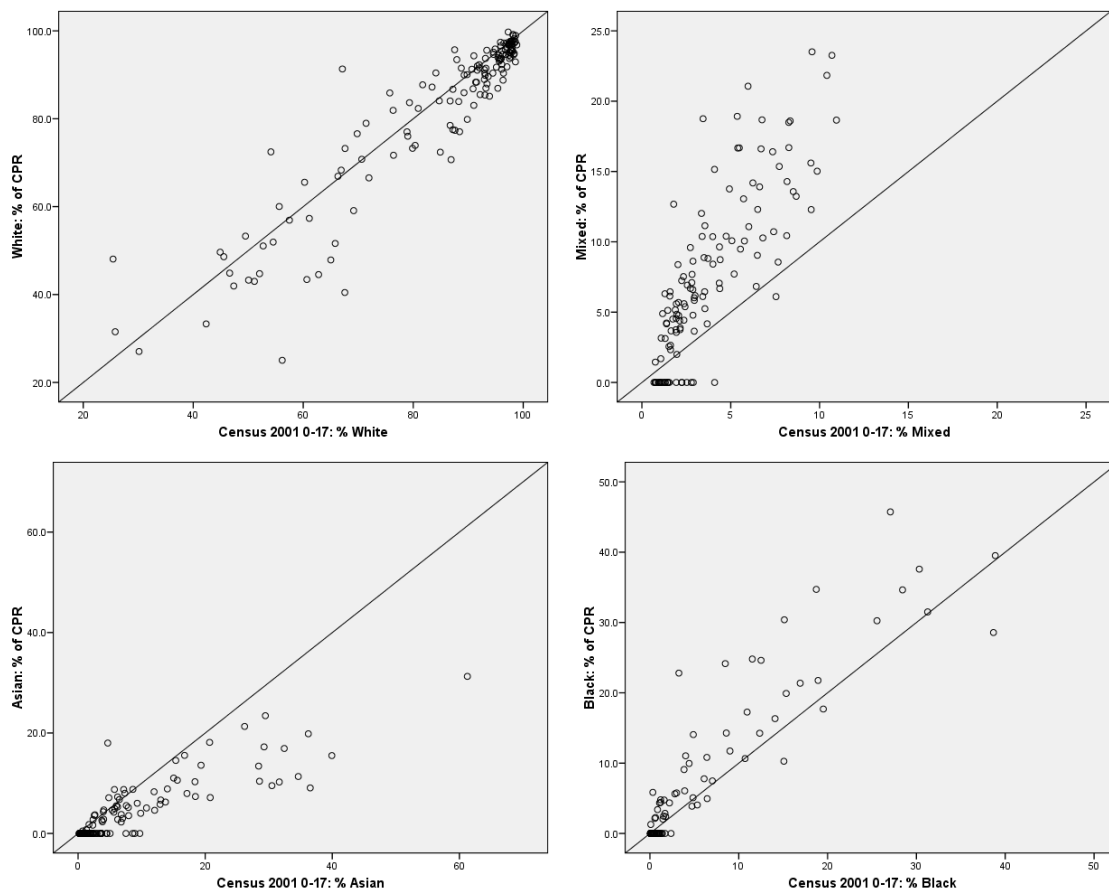
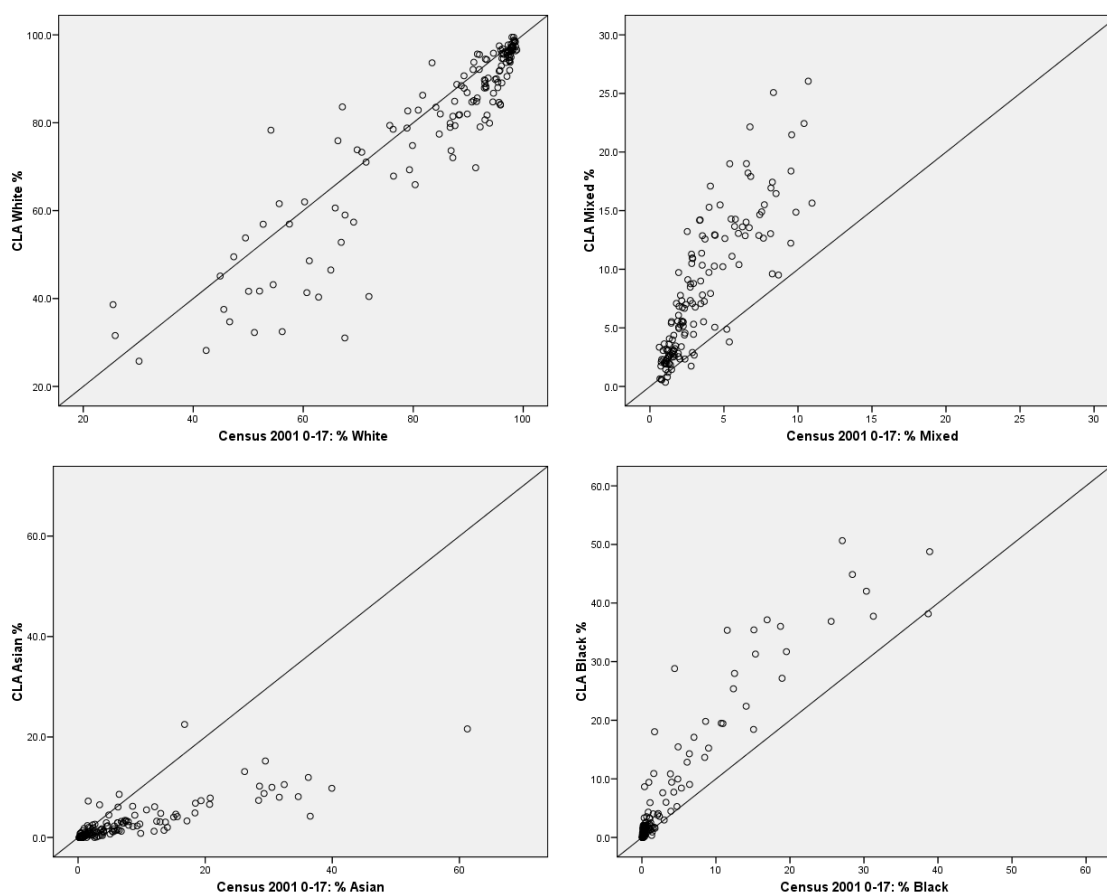


Figure 5 shows the figures for the third child welfare database examined, on looked after children. The four charts very much follow the pattern for **Figure 3** and **Figure 4**. The first chart, for White children, shows that in most local authorities there was an under-representation of white children amongst those looked after. The second and fourth charts show an over-representation of the mixed and black children. There is again an under-representation of Asian children, but much more so than for the white children.

Figure 5 Percentage of children looked after and in the population



These differences between the rates in the population and the rates in the child welfare statistics can be represented quantitatively using the Disproportionality Index. Disproportionality is defined as follows:

$$\text{Disproportionality} = \frac{\text{Percentage in Category}}{\text{Percentage in Population}} \quad (\text{Equation 1})$$

The average disproportionality indices across the local authorities are shown in **Table 3**. A disproportionality index of 1 would mean that the ethnic group was represented in the category at the same rate as they were represented in the population – that is, along the diagonal in **Figure 3** to **Figure 5**. A disproportionality index greater than 1 indicates that the ethnic group was represented in the category at a higher rate than in the population - in other words, that they were over-represented: this is shown by being above the diagonal in the Figures. A disproportionality less than 1 indicates that the ethnic group was represented in the category at a lower rate than in the population - i.e. they were under-represented; this is shown by being below the diagonal.

Some of these values for disproportionality in **Table 3** seem discrepant with **Table 2**. For example, the average disproportionality index for Black children on the child protection register is less than one (.87), although Black children formed 3.8 percent of the population and 5.5 percent of children on the children protection register - which suggests that the index should be greater than one. Although this result is paradoxical, it is not a mistake. It occurs because the disproportionality index is a ratio, and an average of the ratios is not necessarily the same as the ratio of the averages. Here it is better to take the average disproportionality index, given in **Table 3**, as it is less influenced by the overall size of the population.

Table 3 Average disproportionality index

	White	Mixed	Asian	Black
Children in Need Census	.88	1.50	.62	2.86
Child Protection Register	.98	1.65	.33	.87
Children Looked After	.95	2.35	.46	3.17

What is very clear from **Table 3** is that, on average, children of mixed ethnic groups and black children are over-represented in the child welfare statistics and Asian children are under-represented. (The only exception is the slight under-representation of black children on the Child Protection Register.) Some of these mean disproportionalities are very large: for example, the rate of Asian children on the Child Protection Register was less than one third of the rate that would be expected if they were represented at the same rate as they are in the local authority populations, whilst black children were more than three times more likely to be looked after relative to their rate in the local population. However, these means mask a lot of local variation. In every case there were local authorities which were counter to the overall trend, and other local authorities where the disproportionalities were much more extreme than the averages would suggest.

The importance of these disproportionality figures is that they take account of local prevalence in the population, thus controlling for uneven geographic distribution of minority ethnic children in England. The implication is that it is **not** neighbourhood factors that are making the difference.

3.2.3 Disparity

Another way of looking at the statistics is to compare the rates of black and minority ethnic children in the welfare statistics with those for white children living in the same area. These rates are shown in **Table 4**. If ethnicity were not an influence on children being in the welfare statistics, then the percentage for each group should mirror its percentage in the population. The extent to which this is not the case (disproportionality) shows that even within a local authority area, ethnicity is having an influence. **Table 4**, on the other hand, shows the rate for each ethnic group within the child welfare statistics. If area had no effect, then these rates should be the same for all local authorities.

Table 4 Mean Rate (per 10,000 of ethnic group)

		White	Mixed	Asian	Black	Other
Children in Need	Mean	202	340	140	657	581
	SD	78	165	118	752	727
Child Protection Register	Mean	24.8	41.9	8.9	22.4	-
	SD	10.7	37.4	12.9	55.7	-
Children Looked After	Mean	56	134	26	196	125
	SD	22	70	30	269	301

Moreover, if ethnicity were not a factor, then the rates should be the same regardless of ethnicity. This is what was described earlier as *disparity*, the difference between the rate for a reference group and another group. Here the reference group is the white group, as that is the largest group and the one that would not be expected to be subjected to racialised discrimination. It is, therefore, possible to see if black and minority ethnic children are present in the statistics to the same degree as the majority white children. The relative rates are plotted in **Figure 6** to **Figure 8**. In these charts, the rate for white children is plotted on the horizontal axis and for the minority ethnic children on the vertical axis. Each circle

represents one local authority. If the rates for the black and minority ethnic children were the same as for White children, then the local authorities should line up on the diagonal. (The line does not look diagonal, but that is because the scales on the two axes are different to encompass overall differences in rates. All points on the line have the same values on both axes). Local authorities above the line have a higher rate for the minority ethnic children than for the white children and local authorities below the line have lower rates for minority ethnic children than for white children.

For each of the child welfare statistics there are three charts, one for mixed ethnicity children, one for Asian and one for black. **Figure 6** shows the statistics for the Children in Need census. The first chart is for children of mixed ethnic origin. Most local authorities are above the diagonal line, indicating that children of mixed ethnicity are more likely to be deemed in need than white children in the same area. The second chart is for Asian children. Here most local authorities are below the diagonal, indicating that Asian children are less likely to come to the attention of child welfare services as being in need than are white children. The final chart is for black children, where again most local authorities are above the diagonal. For some authorities the difference in rates is very striking, with the local authority that has the highest rate for black children having a rate almost ten times that for its white children.

Figure 6 Children in Need census: Disparity

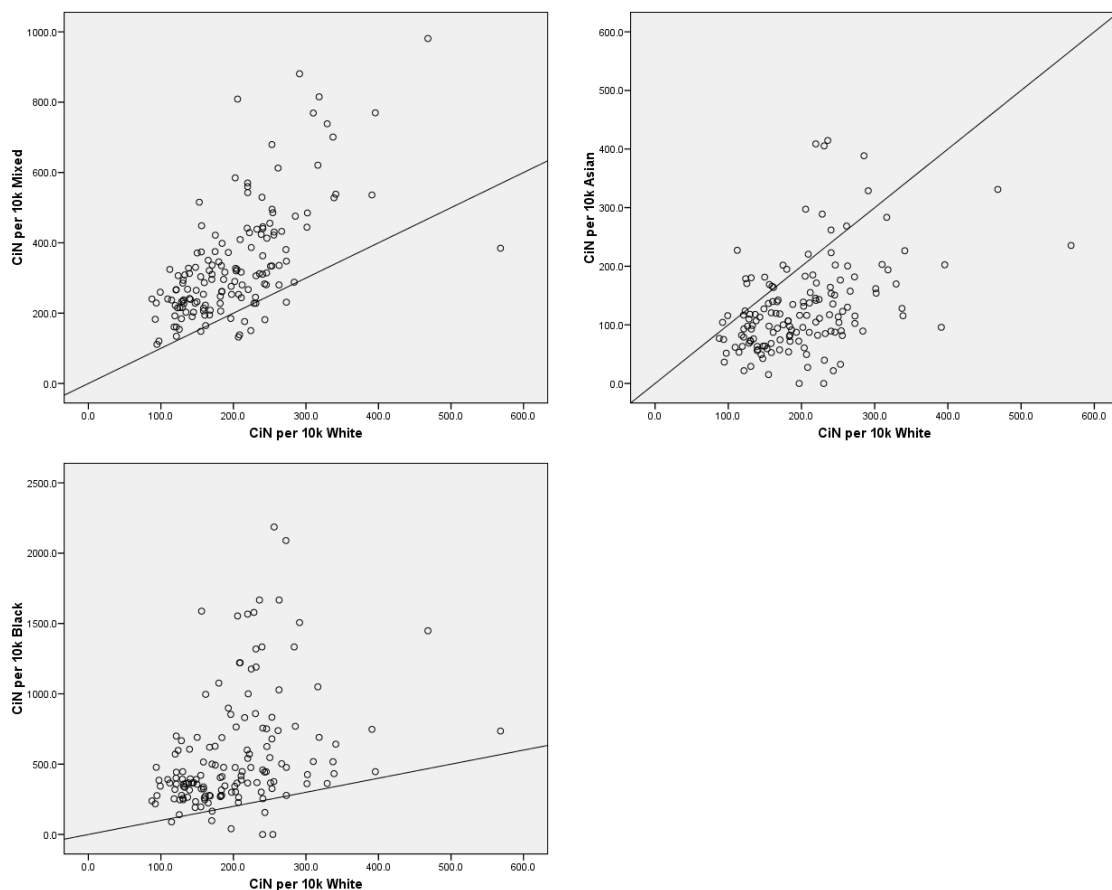


Figure 7 shows statistics for the Child Protection Register, and the three charts show a similar pattern, although the disparity for black children is not nearly as marked as in the statistics for children in need. (The row of circles along the bottom of each graph represents local authorities with no children from that ethnic group on the child protection register. The number of such authorities is surprisingly large, but mainly consists of authorities with few children in the ethnic group).

Figure 7 Child Protection Register: Disparity

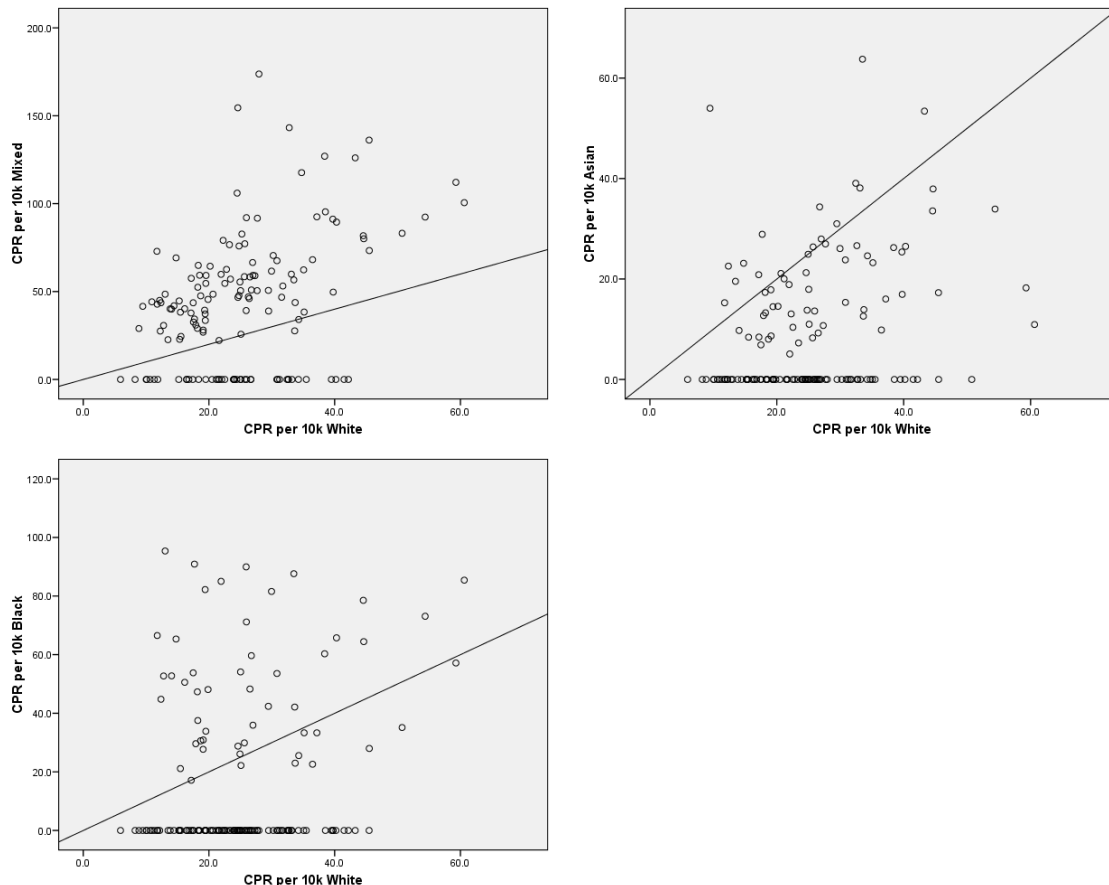
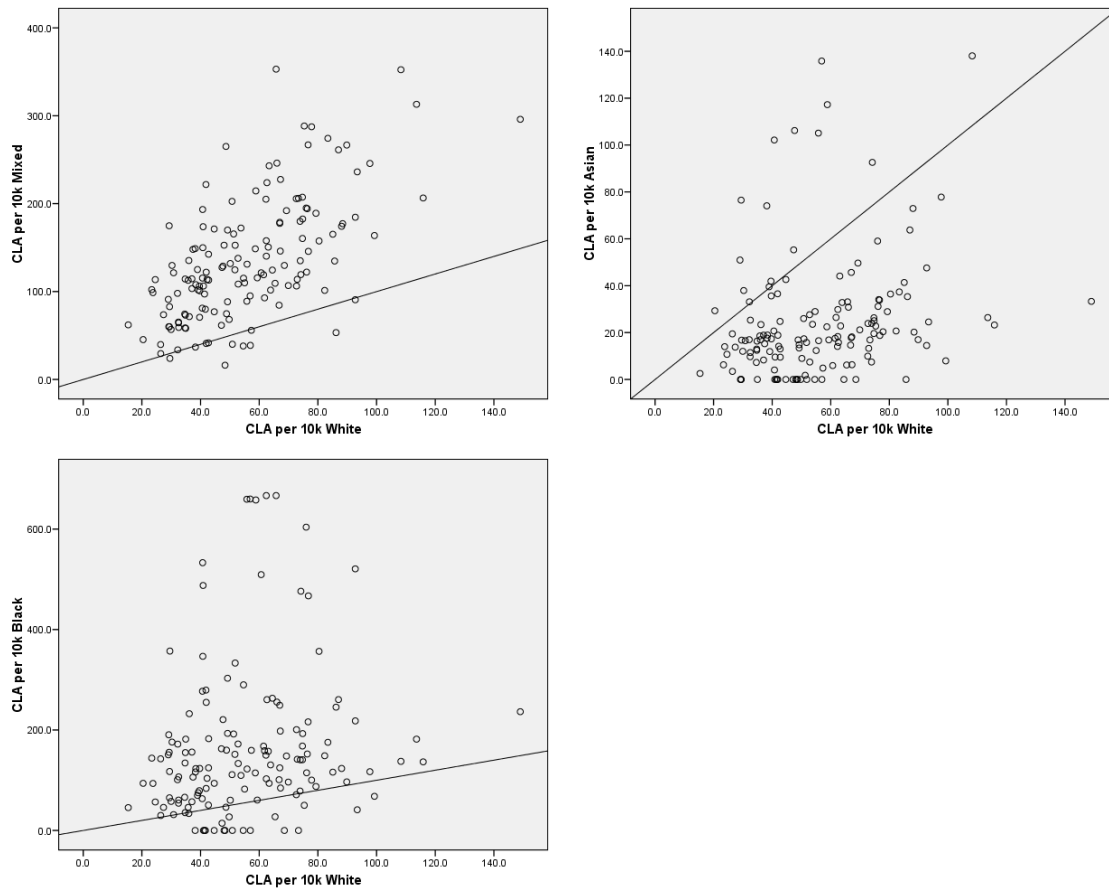


Figure 8 represents children looked after, and again the three charts follow the same pattern. The first chart shows that for almost all authorities the rate of being looked after is much higher for mixed children than for white children. The second chart shows the rate for Asian children as compared to white: most authorities have much lower rates for the Asian children, but some are a long way above the line. The third chart is for black children. Here most authorities are above the line, some a very long way above. Indeed eleven authorities have a rate of black children being looked after more than ten times the rate for white children. Six of these authorities have fewer than 100 black children living in the area, which illustrates the problem of small numbers, where just a few children can make a big proportional difference, so distorting the picture. However, the authority with the largest disparity had more than 500 black children in the area, but these were predominantly black African, which raises the issue of whether the figures for some authorities are being distorted by unaccompanied asylum seekers being taken into care. Although in our analysis we excluded all children recorded as being unaccompanied asylum seekers, it is possible that some failed to be identified as such in the statistics.

Figure 8 Children Looked After: Disparity



Taking this second group of figures together, it is clear that mixed and black children are found in the child welfare statistics at higher rates than White children living in the same local authority; Asian children are found at lower rates. There is some difference between the CiN census, the Child Protection Register and children looked after, but the pattern is consistent across all three aspects of child welfare.

The differences between the minority ethnic groups and the White group can be expressed quantitatively as the Disparity Index. The index is defined as follows:

$$\text{Disparity} = \frac{\text{Percentage of ethnic group in Category}}{\text{Percentage White in Category}} \quad (\text{Equation 2})$$

Means for each ethnic group on the disparity index are shown in **Table 5**. The patterns clearly reflect what was seen in the figures, but are also similar to the pattern for the disproportionality index (**Table 3**). There is a marked disparity for the mixed children, with higher rates than for the white children in all three aspects of the child welfare statistics: it is especially high for children looked after. The Asian children show disparity in the opposite direction, with lower rates than the white population. This is most marked for the Child Protection Register, where they are represented at a little over one-third of the rate of white children. However, on the Child Protection Register the black children are represented at the same rate as white children. Yet for children in need and looked after children they are far above the rates for white children and for all other ethnic groups: for the CiN data the disparity for black children was more than twice that for mixed children. The figure shows that black children are (on average) four times as likely to be identified as in need compared to White children in the same local authorities.

Table 5 Mean Disparity Index

		Mixed	Asian	Black
Children in Need	Mean	1.75	.72	4.00
	SD	.60	.68	8.60
Child Protection Register	Mean	1.76	.37	1.00
	SD	1.46	.694	2.48
Children Looked After	Mean	2.53	.50	3.56
	SD	1.07	.64	3.87

The underlying reasons for these patterns of disproportionality and disparity cannot be explored further with the statistics available. They serve to raise questions. These include questions about the behaviour of social workers: do they anticipate more problems for mixed and black children but fewer for Asian children and so behave in line with those expectations? Alternatively, are there other features of the families of children that predispose them to coming into the child welfare system, and these happen to be more common for mixed and black children but less common for Asian children? To explore these questions would require different kinds of studies and different data. One thing that would help, in terms of data, would be if more information was recorded on the families and not just the individual children. This could include information on the parents, such as whether they live with the child, their ages, their own history of care, whether they have drug or alcohol problems, their accommodation, etc. Many factors which might influence whether children come into contact with the child welfare system, however, are not recorded and so cannot be explored.

3.3 Children looked after: Individual data

So far the analysis has concentrated on an area level, and this has allowed us to control for some of the important sources of variation in contact with child welfare services which might not be related to ethnicity - for example, local rates of poverty or variation in local thresholds for accessing services. However, the longitudinal data on looked after children (SSDA903) allow other questions to be addressed. It is still not possible to investigate family factors, because those data are not collected (or, at least, not collated centrally). But because the SSDA903 data include the whole history of being looked after, it is possible to investigate more than just the annual picture of children who are looked after.

This dataset is not publicly available, but was provided by DCSF for analysis in this project. All identifiers were removed so that the data were anonymised and no child could be identified. The data collection on the SSDA903 return began on 1 April 1992, although data for earlier episodes of care for children already being looked after on that date were included where possible. Initially the record included all children looked after. However, from 1998 the return was reduced to a one-third sample, to diminish the administrative burden on local authorities. From 2004 the return again became a complete census, covering all children looked after. This means that some children will have a break in their record of care.

The project was supplied with data for all children who were being looked after in the twelve months prior to 31 March in three years: 2004, 2005 and 2006. This amounted to 664,416 episodes of care relating to 142,521 children. (A change of accommodation or of legal status for the child initiates a new episode of care: a period of care is a set of continuous episodes without a break.) Of these children, 7,733 (5.4 percent) were unaccompanied asylum seekers. They were excluded from our analysis as they are likely to have markedly different experiences from all other children (Sinclair et al., 2007). Any child who had a break in their care record, because of the period when data were only collected on a one-third sample, was also excluded. All episodes which were described as short-term respite care were also

excluded, as these are known to be different from longer term care. In addition, some data cleaning to remove inconsistencies was also conducted. The final dataset included 479,389 episodes relating to 121,705 children.

Eighty percent of children in the dataset had only had one period of care, although only a third had not experienced at least one change of placement during their care. During their time in care children may have multiple placements, possibly including a mixture of foster and residential care. A period of care may end with adoption, with the child returning to their parent or parents, or with the young person leaving care and moving into independent living. One child may experience all of these, and possibly all of them more than once – even adoptions sometimes break down and adopted children become looked after once again. So in these analyses, we often refer to children ‘ever’ having a particular experience, for example adoption. Since categories are not usually mutually exclusive, a child may be counted in more than one category (although only once in each category). For example, a child may experience both foster care and residential care during their lifetime, and even during one period of care, but in the published annual statistics they will only be shown once, in the form of care they were in on 31 March. The analyses we have undertaken here permit greater exploration of this complex dataset, since all categories of placement are taken into account.

In the SSDA903 dataset the full set of 16 national census ethnic group codes are used. The numbers of looked after children in each of the ethnic groups and the corresponding percentages from the 2001 national census are shown in **Table 6**. Although the ethnic breakdown is more detailed, the same patterns of over- and under-representation that were found for the summary categories in **Table 2** can be seen: all of the mixed groups are over-represented, the ‘Other Mixed’ most especially so; the Asian categories are under-represented, particularly the Indian group; the Black groups are all over-represented.

Table 6 Children looked after, starting to be looked after and ceasing to be looked after by ethnic group, and children (0-17) from national census 2001: Percent of total

	Looked After at 31 March	First Started to be Looked After	Ceased to be Looked After	National Census
White British	77.2	74.3	75.5	84.3
White Irish	.8	.6	.8	.4
Other White	2.3	2.6	2.6	1.8
White / Black Caribbean	3.1	2.9	2.8	1.3
White / Black African	.8	.9	.8	.3
White / Asian	1.2	1.2	1.2	.9
Other Mixed	3.2	3.2	2.9	.7
Indian	.6	.6	.6	2.4
Pakistani	1.1	1.3	1.2	2.5
Bangladeshi	.5	.7	.6	1.1
Other Asian	.6	.8	.7	.6
Black Caribbean	2.9	3.1	3.0	1.2
Black African	3.0	4.1	3.8	1.4
Other Black	1.5	1.7	1.6	.4
Chinese	.1	.2	.2	.4
Other	1.2	1.7	1.6	.4
Total	100	100	100	100

The table above also serves to highlight that the combined categories used in the earlier statistics put together groups of children who are disparate. For example, there are four groups which are combined to form the mixed group: of these, the White and Black Caribbean group and the White and Black African group show a similar degree of over-representation, but the White and Asian group show a lower level of over-representation whilst the 'Other' Mixed show a much higher level.

Table 6 also shows percentages of children starting and ceasing to be looked after. The dataset includes all those children who had an episode of care during the years ending 31 March 2004, 2005 and 2006, although for many their care experience had begun earlier. The column in the table for started to be looked after considered only those children who began to be looked after for the first time in those three years, and shows the percentage by ethnic group. In many cases the percentages differ from the population percentages derived from the national census, but closely reflect those for all children looked after. So the Mixed groups and the Black groups are starting to be looked after at rates higher than their presence in the total population, but little different from their overall rate of being looked after. Also, some of those looked after during the three years ceased to be looked after. The third column of **Table 6** shows all those who ceased to be looked after in those three years by ethnic group. For all ethnic groups, the rates of ceasing to be looked after match almost exactly the rates of those starting to be looked after, although they also differ, for some ethnic groups, from their rates in the population.

From these starting and ceasing rates, then, the disproportionality seen in the rates of being looked after is reflected in differences of rates of starting to be looked after. Children of mixed and black ethnicity become looked after at higher rates than their presence in the population would suggest they should. These differences in rates of entering care would contribute to the observed differences in rates of being looked after. If mixed ethnicity and black children were ceasing to be looked after at lower rates than they were starting to be looked after, that would also help to account for their over-representation in the care population. Similarly, if Asian children were ceasing to be looked after at higher rates, that would account for their under-representation. However, this is not the case. Once in care, rates of leaving are not related to ethnicity, as for all ethnic groups the rate of leaving care closely matches their rate in the care population. Consequently, rates of ceasing to be looked after seem not to contribute to the disproportionalities in the care population, although differences in rates of starting to be looked after do contribute to over-representation of children of mixed and black ethnicity.

Another possible factor might be differences in the total length of time children remain in the care system: that is looked at next.

3.3.1 Length of time looked after

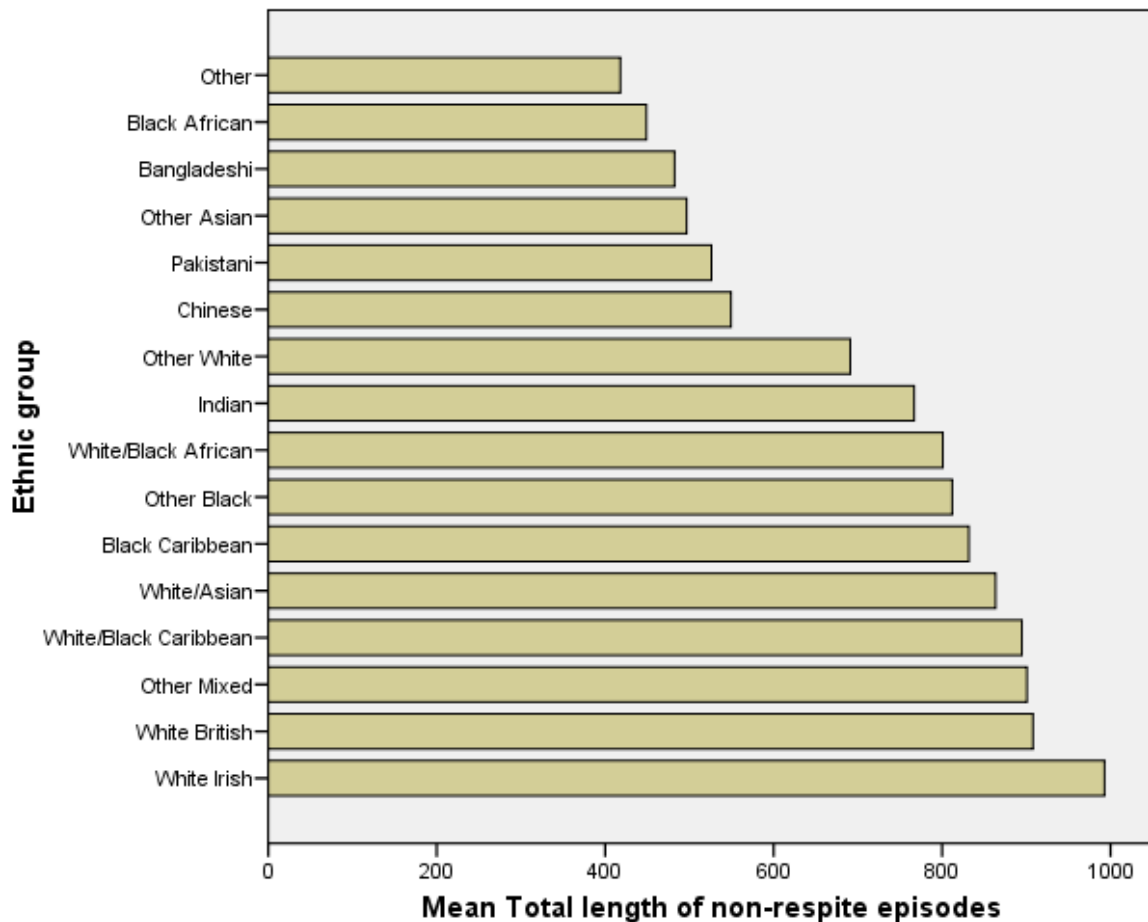
Having the full care history, it is also possible to calculate the total length of time a child is looked after. Some of the children in the dataset were still being looked after so they will not have completed their period of care.

Table 7 shows the average length of all non-respite episodes in days for children who were no longer being looked after on 31 March 2006. The same data are also shown in **Figure 9**, which shows that the ethnic groups which on average spend the shortest total length of time looked after are those included together in the 'Other' category, Black African, Bangladeshi and Other Asian. Those who spend longest in care are the White Irish and White British. Three of the Mixed groups (Other Mixed, White and Black Caribbean, and White and Asian) also spend relatively long periods looked after. The White and Black African group spend a medium amount of time in non-respite care.

Table 7 Total length of non-respite episodes by ethnic group

Ethnic group	Mean	N	SD
White British	908	48817	1095
White Irish	993	547	1097
Other White	691	1713	926
White / Black Caribbean	895	1838	1074
White / Black African	801	495	1057
White / Asian	864	762	1032
Other Mixed	901	1895	1102
Indian	767	395	1131
Pakistani	526	748	960
Bangladeshi	482	382	738
Other Asian	497	444	933
Black Caribbean	832	1910	1179
Black African	449	2478	749
Other Black	812	1042	1242
Chinese	549	106	823
Other	418	1066	720
Total	860	64638	1081

Figure 9 Mean total length of non-respite episodes by ethnic group



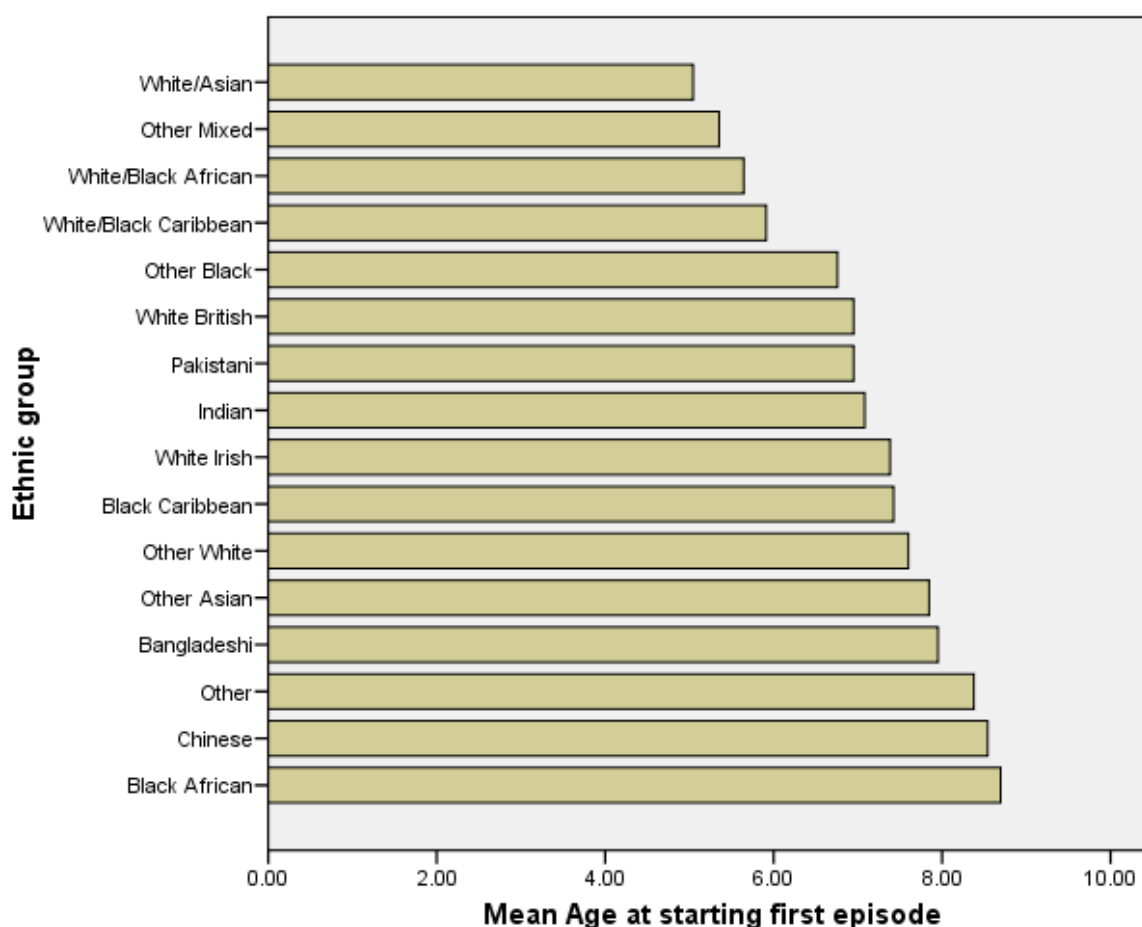
3.3.2 Age at first starting to be looked after

The average age of first entering care for the children in this dataset was almost 7. **Table 8** shows the mean ages for the different ethnic groups. The same data are also shown in **Figure 10**, but here the data are sorted by age. In this figure it is clearer to see that children in the four Mixed categories (White and Black Caribbean, White and Black African, White and Asian, and Other Mixed) are the groups with lowest mean age of first being looked after. White British children also first start to be looked after younger than most ethnic groups, whilst Black African, Chinese, 'Other' and Bangladeshi children tend to be older.

Table 8 Mean age at starting first episode by ethnic group

Ethnic group	Mean	N	SD
White British	6.95	93790	5.19
White Irish	7.38	993	4.89
Other White	7.60	2770	5.56
White / Black Caribbean	5.91	3767	5.07
White / Black African	5.65	917	5.33
White / Asian	5.04	1500	4.95
Other Mixed	5.35	3838	5.12
Indian	7.08	673	5.54
Pakistani	6.95	1290	5.43
Bangladeshi	7.95	644	5.56
Other Asian	7.85	708	6.12
Black Caribbean	7.42	3527	5.52
Black African	8.69	3694	5.45
Other Black	6.76	1824	5.46
Chinese	8.54	155	5.95
Other	8.38	1474	5.92
Total	6.95	121564	5.26

Figure 10 Mean age at starting first episode by ethnic group



From these two calculations it is clear that mixed ethnicity children tend to start being looked after at a younger age but also stay in care longer. This could help account for why they are disproportionately represented in the looked after population. By contrast, the three Black groups are very varied in their average age at first being looked after and in their total length of time in care, so this does not help to explain their over-representation in the national statistics for looked after children. Similarly, the four Asian groups (Indian, Pakistani, Bangladeshi and Other Asian) vary in their ages at first becoming looked after, but they do tend to spend a shorter time in care than some other groups, which might partially account for their under-representation.

3.3.3 Reasons for becoming looked after

When a child begins a period of being looked after, a reason is recorded. The reasons are shown in **Table 9**, along with the percentage of children from each ethnic group who had ever been recorded with that category of need. (The percentages do not add up to 100, as a child may have more than one period of care). A major problem with these need codes is that only one can be assigned - the main reason: if a child has two or more of these needs, then only the 'main' one will be recorded.

Table 9 Main reason for starting to be looked after: percentage by ethnic group

	Categories of need							
	Abuse or neglect	Disability	Parental illness or disability	Family in acute distress	Family dysfunction	Socially unacceptable behaviour	Low income	Absent parenting
White British	61.3	4.0	6.2	10.8	13.6	5.0	.1	3.3
White Irish	62.6	2.6	8.0	10.0	10.4	6.2	.2	5.4
Other White	51.4	4.0	7.8	10.0	12.2	4.8	.5	13.1
White / Black Caribbean	62.1	2.3	8.8	9.4	11.5	4.8	.3	5.4
White / Black African	60.0	1.9	10.0	9.0	10.9	5.1	.4	6.3
White / Asian	65.8	2.4	9.0	9.5	8.9	2.9	.5	4.9
Other Mixed	62.0	2.8	8.1	9.2	11.9	3.6	.3	6.4
Indian	57.4	8.5	7.7	8.5	8.9	3.3	.3	8.8
Pakistani	63.7	5.8	9.2	7.3	5.7	2.2	.0	7.2
Bangladeshi	71.5	4.0	7.0	6.4	5.1	2.3	.0	6.1
Other Asian	49.8	2.8	7.8	8.8	10.2	3.7	.8	18.8
Black Caribbean	55.3	3.0	10.3	9.3	12.4	6.7	.3	7.6
Black African	48.3	3.3	12.1	6.2	7.3	4.4	1.0	20.6
Other Black	52.9	3.3	11.4	7.4	12.5	4.7	1.0	11.9
Chinese	44.5	12.9	5.2	12.3	6.5	2.6	.6	16.8
Other	43.2	2.8	8.8	8.6	10.1	4.5	1.0	24.0
Total	60.2	3.9	7.0	10.3	12.8	4.9	.2	5.0

It is clear from **Table 9** that the main reason for starting to be looked after is abuse or neglect (60.2 percent). This is the most common reason for all ethnic groups, although it is less than 50 percent for the 'Other' ethnic group, Chinese, Black African and 'Other' Asian. These four groups, on the other hand, all have very much higher rates for absent parenting (5.0 percent overall), being almost a quarter for the 'Other' ethnic group. This might suggest that some of these children were in fact unaccompanied asylum seekers, but were not coded as such in the dataset. (Unaccompanied asylum seekers were excluded from these analyses.) However, Black African children also had a high percentage with parental illness or disability (12.1 percent), above the average (7.0 percent).

The next most common categories were family dysfunction (12.8 percent) and family in acute distress (10.3 percent). These two tended to go together, although Chinese children were below average on family dysfunction (6.5 percent) but above average on family in acute distress (12.3 percent). Children from Bangladeshi, Pakistani, Black African and Indian ethnic groups tended to low on these two categories.

Socially unacceptable behaviour as a reason for becoming looked after was relatively uncommon (4.9 percent), although it was noticeably higher for Black Caribbean (6.7 percent) and White Irish (6.2 percent) children. Disability as a reason was even lower (3.9 percent), but was very high for Chinese children (12.9 percent).

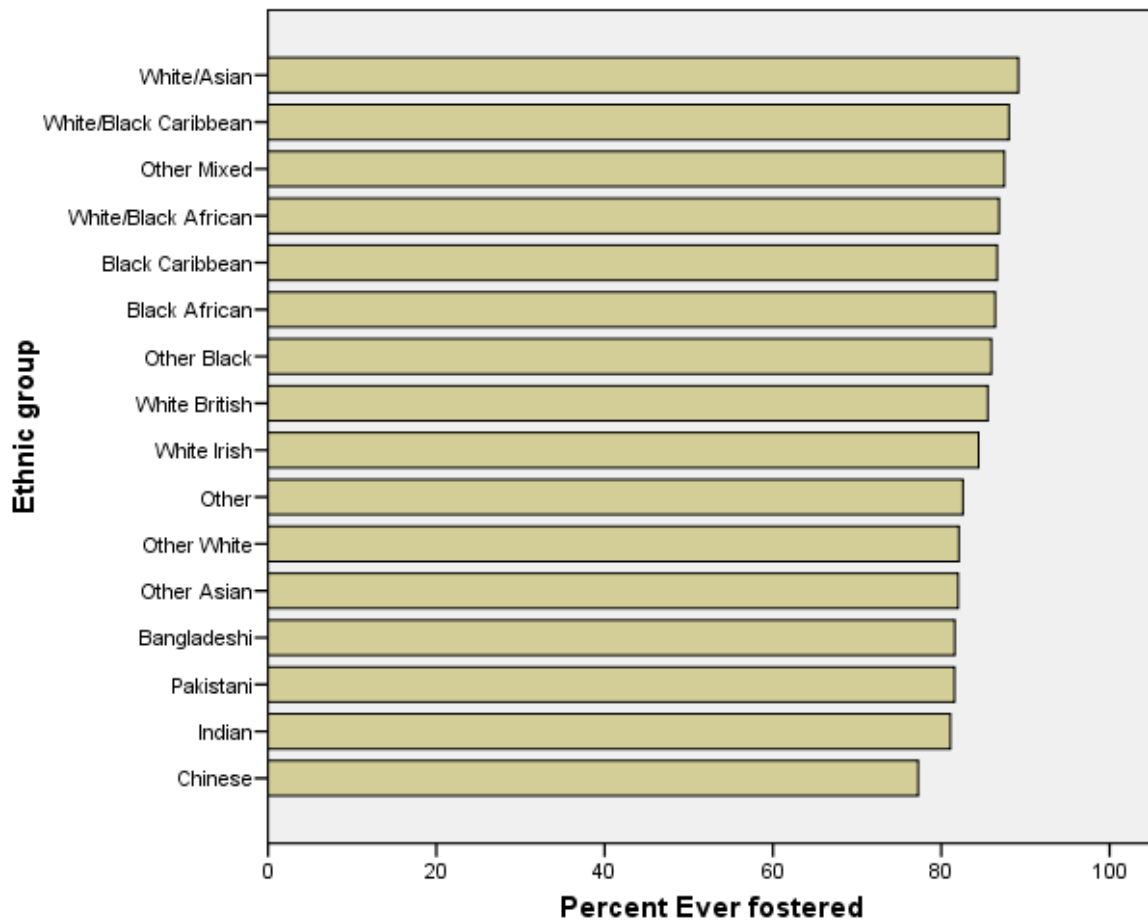
3.3.4 Type of care

Whilst being looked after, the two main categories of care placements are fostering and residential care, with fostering being the more common. Overall 85.3 percent of children looked after in this dataset experienced foster care. This showed quite small variation by ethnic group, as shown in **Table 10** and **Figure 11**. The four Mixed ethnic groups were the most likely to be fostered, followed by the Black children, whilst Chinese and Asian children were the least likely.

Table 10 Percent ever fostered by ethnic group

	Ever fostered	
	Yes	No
White British	85.2	14.8
White Irish	84.1	15.9
Other White	81.7	18.3
White / Black Caribbean	87.8	12.2
White / Black African	86.6	13.4
White / Asian	88.9	11.1
Other Mixed	87.2	12.8
Indian	80.7	19.3
Pakistani	81.2	18.8
Bangladeshi	81.2	18.8
Other Asian	81.6	18.4
Black Caribbean	86.4	13.6
Black African	86.1	13.9
Other Black	85.7	14.3
Chinese	76.8	23.2
Other	82.2	17.8
Total	85.3	14.7

Figure 11 Percent ever fostered by ethnic group

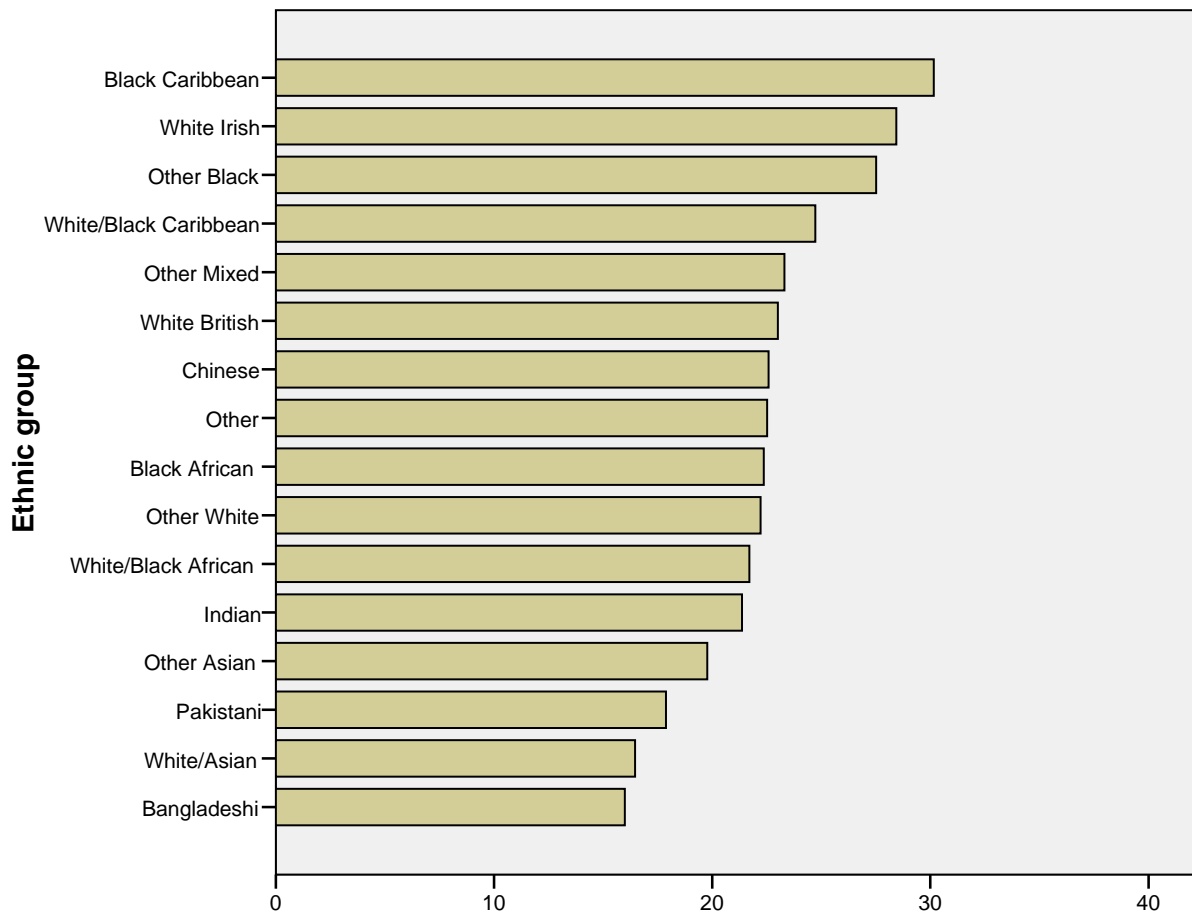


The pattern for residential placements is quite different, and not the mirror of that for foster placements. This is shown in **Table 11** and **Figure 12**. The overall percentage of children who experienced residential care was 23.1 percent, much lower than for foster care. It was Black Caribbean children who were most likely to experience residential care, followed by White Irish and Other Black, Bangladeshi, Mixed White / Asian, Pakistani and Indian children were the least likely to experience residential care. The difference between the highest (Black Caribbean: 30.2%) and the lowest (Bangladeshi: 16.0%) was almost a factor of two, showing big ethnic differences in the types of placement. This cannot be explained simply as a function of age, with Black children entering care at a later age (when residential care is a more common option). In fact, as shown earlier in **Figure 10**, the opposite is true: the mean age at starting first episode of care was lower for Black Caribbean than Bangladeshi children.

Table 11 Percent ever in residential care by ethnic group

	Ever residential care	
	Yes	No
White British	23.0	77.0
White Irish	28.4	71.6
Other White	22.2	77.8
White / Black Caribbean	24.7	75.3
White / Black African	21.7	78.3
White / Asian	16.5	83.5
Other Mixed	23.3	76.7
Indian	21.4	78.6
Pakistani	17.9	82.1
Bangladeshi	16.0	84.0
Other Asian	19.8	80.2
Black Caribbean	30.2	69.8
Black African	22.4	77.6
Other Black	27.5	72.5
Chinese	22.6	77.4
Other	22.5	77.5
Total	23.1	76.9

Figure 12 Percent ever in residential care by ethnic group



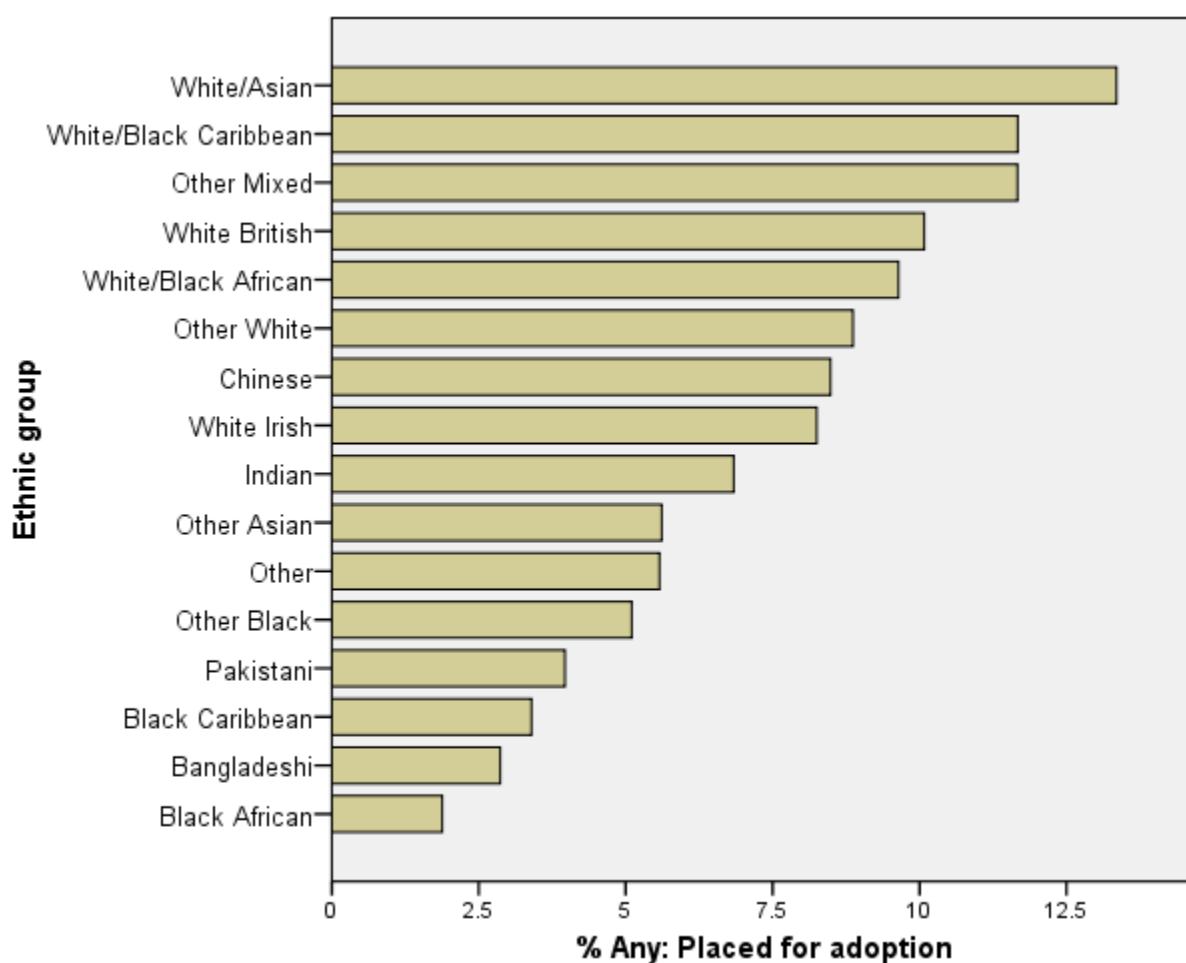
3.3.5 Adoption

Social workers are known to have a strong preference for children looked after who are adopted being adopted by a family ethnically like themselves. (e.g. Ahmed, Cheetham, & Small, 1986; Selwyn et al., 2008). This preference has led to concerns that black and minority ethnic children might spend longer in care because of the difficulty of matching them with a family of the same background. This is potentially even more problematic for children of mixed race, when it might be hard to find a family of the same mix who want to adopt (Barn, 1993). In the next analysis, figures from the SSDA903 have been used to explore which children are most likely to be adopted, according to their ethnic group. Results are shown in **Table 12** and in **Figure 13**. As can be seen, it is in fact the mixed ethnicity children (and the white British) who are most likely to be adopted. The statistics do not show the ethnic background of the adopting family, but this is a surprising result in the light of the known preference for ethnic matching. It is the black children and those of Pakistani and Bangladeshi origin who are least likely to be adopted. This higher rate of adoption for mixed ethnicity children and lowest rates for black and Asian children is consistent with the findings of Selwyn and colleagues (2008).

Table 12 Percent ever adopted by ethnic group

	Ever adopted	
	Yes	No
White British	13.3	86.7
White Irish	11.8	88.2
Other White	11.9	88.1
White / Black Caribbean	13.8	86.2
White / Black African	11.8	88.2
White / Asian	16.5	83.5
Other Mixed	15.0	85.0
Indian	9.3	90.7
Pakistani	5.3	94.7
Bangladeshi	4.2	95.8
Other Asian	7.8	92.2
Black Caribbean	5.3	94.7
Black African	2.6	97.4
Other Black	7.1	92.9
Chinese	12.3	87.7
Other	8.1	91.9
Total	12.4	87.6

Figure 13 Percentage adopted by ethnic group



3.3.6 Return to parents

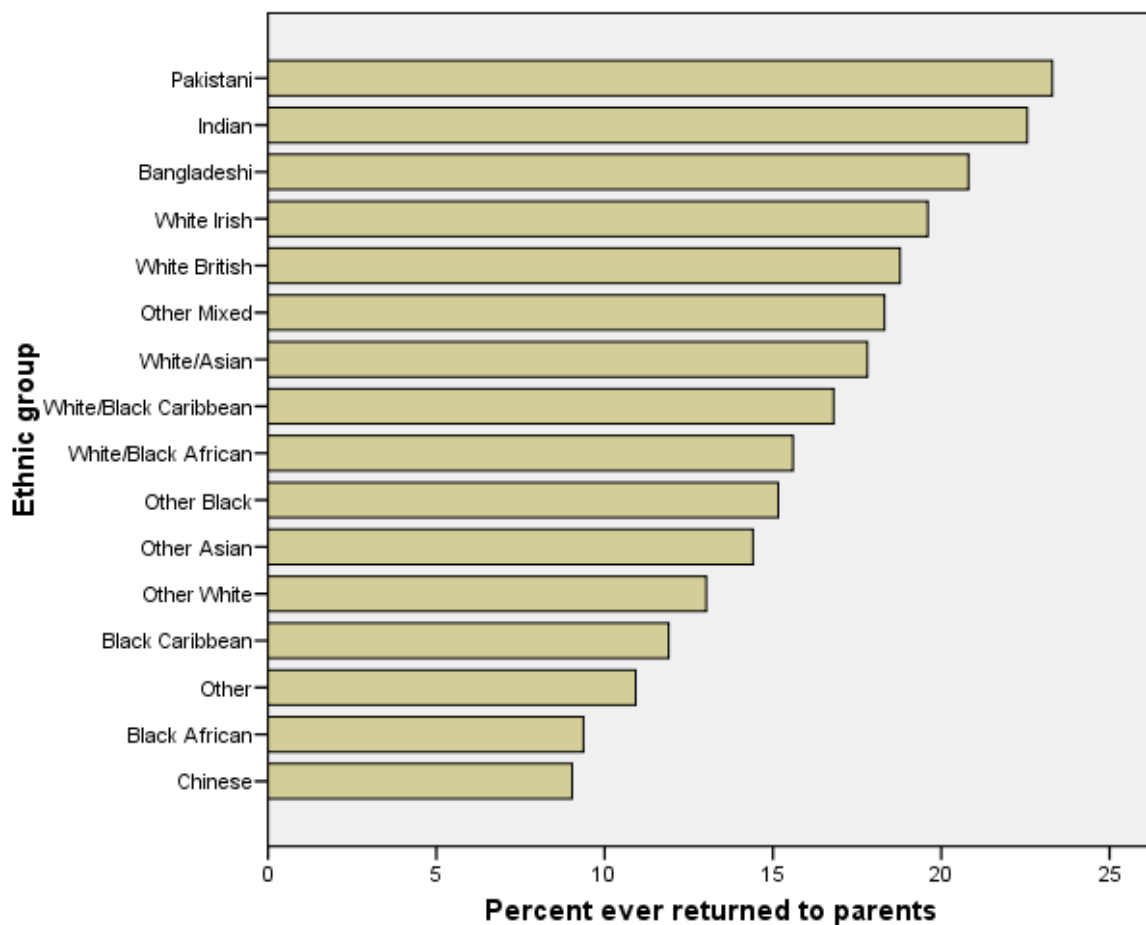
Overall, 12.4 percent of looked after children experience adoption. However more children cease being looked after by returning to their parents.

Table 13 shows that on average 17.9 percent of looked after children were returned to their parents. (It is important to remember that a child may have more than one period of care, so may cease to be looked after more than once and possibly in more than one way.) **Figure 14** shows the same figures, but makes it clearer that returning to parents varied much more by ethnic group than did being adopted. Children from the Pakistani, Indian and Bangladeshi ethnic groups were much more likely to be returned to their parents, whereas Chinese, Black African, 'Other' and Black Caribbean children were much less likely to be returned to parents. Children from the Mixed ethnic groups were very much in the middle. It is not possible to tell just from the statistics why there were such big differences in the rates at which children looked after were returned to their parents. It might be that the parents were absent, or that they were not deemed suitable to take back their children.

Table 13 Percent ever returned to parents by ethnic group

	Ever returned to parents	
	Yes	No
White British	18.8	81.2
White Irish	19.6	80.4
Other White	13.0	87.0
White / Black Caribbean	16.8	83.2
White / Black African	15.6	84.4
White / Asian	17.8	82.2
Other Mixed	18.3	81.7
Indian	22.6	77.4
Pakistani	23.3	76.7
Bangladeshi	20.8	79.2
Other Asian	14.4	85.6
Black Caribbean	11.9	88.1
Black African	9.4	90.6
Other Black	15.2	84.8
Chinese	9.0	91.0
Other	10.9	89.1
Total	17.9	82.1

Figure 14 Percent ever returned to parents by ethnic group



4 Conclusions

It has long been recognised that black and minority ethnic children have been disproportionately represented in the child welfare system. The analyses presented here aimed to get behind those headline statistics to try to establish possible differences between rates of entry, length of stay and rates of leaving care for different ethnic groups, in order to illuminate possible reasons for the differences. An overview of information from primarily qualitative research studies was also undertaken to complement the statistical analyses and to suggest avenues for further exploration.

4.1 What is new about the current analyses?

The analyses described in Section 3 of this report break new ground by examining data on children in contact with child welfare services in England in several new ways. First, they examine over- and under-representation of black and minority ethnic groups at a local authority as well as at a national level, to see if the same patterns hold. Second, they disaggregate the broad categories of ethnicity reported in the annual published data, allowing a more nuanced view of differences between minority ethnic groups. Third, they consider aspects of individual children's care histories by ethnicity, using a specially prepared dataset containing anonymised information on all children looked after in England during the years 2004-2006. This was drawn from the SSDA903 national longitudinal database, which represents a relatively untapped source of detailed information on children who are looked after. Part of the reason for the national SSDA903 database not being fully exploited is its complexity: individual children's care careers frequently involve changes of placement, carer and legal status ('care episodes') as well as periods in and out of care. Together, the analyses presented are innovative in being able to establish both disproportionality and disparity by ethnicity for looked after children.

4.2 Summary of findings on variation by ethnicity

The analyses undertaken for this report have been able to clarify a number of issues in relation to the presence of black and minority ethnic children in the child welfare system. They demonstrate that the patterns of over- and under-representation that have long been reported in national level statistics are also reflected at local authority level. This is the case for all three datasets considered – children in need, child protection registers and children looked after. Children from black and minority ethnic groups are represented in these statistics at rates different to their presence in the local population (disproportionality) and at rates different to those for White children locally (disparity) which broadly match the pattern at the national level. A small number of local authorities show patterns that are exceptions to the general rule, and these 'outliers' might merit further investigation.

By conducting analyses at a local level, it was possible to control for differences between areas in their overall levels of children in the child welfare system. Even after controlling for this, the differences between ethnic groups were very marked. This indicates that the under- and over-representation of certain minority ethnic groups is not simply a function of living in areas with overall low or high levels of children involved with the child welfare system. Ethnicity is making a big difference beyond the differences due to where a child happens to live.

It is more difficult to distinguish a clear picture from the analyses of individual care history data in the SSSDA903 statistical returns. We aimed to see if the patterns of entry to, and exit from, care could help to explain some of the local differences in the rates of children being looked after. The results from these analyses are complex. However, it was clear that children from some ethnic groups did start to be looked after at rates different from their presence in the population. In particular, black and mixed ethnicity children began to be looked after at higher rates than their presence in the population, whilst Asian children started to be looked after at lower rates. These differences in rates of starting to be looked after potentially contribute to differences of rates of being looked after. On the other hand, all groups were ceasing to be looked after at more or less the same rate as their presence in the care population, suggesting that differences in the rate of ceasing to be looked after could not account for differences in the overall rates of being looked after.

One clear finding from the analysis of data from individual children was that children of mixed ethnicity tend to start being looked after slightly earlier than other ethnic groups; this might go some way to accounting for their over-representation. They also tend to stay in care longer. On the other hand, the mixed groups are also the most likely to be adopted (along with the white British), countering the view that children of mixed ethnicity are the hardest to place for adoption.

The picture for the black groups was the least clear. The Black African children come into care, on average, at the oldest age, nearly nine years old. The mixed ethnicity children on average come into care below the age of seven. The Black Caribbean children, though, start to be looked after just a little above the average age for all children, whilst the 'Other' black children start to be looked after for the first time at a slightly younger age than average. So the age of starting to be looked after does not account for the over-representation of black children. The Black African children also are looked after, on average, for the shortest length of time - less than 15 months compared to an overall average of 28 months. Black Caribbean and 'Other' black children, on the other hand, are looked after for a shorter duration than the average. So it is not clear from this analysis why the Black group should be so over-represented amongst the looked after population.

Asian children start to be looked after, on average, slightly older than the average for all groups, but they tend to stay in care for a shorter time. However, the difference is not marked and does not itself account for the extreme under-representation of Asian children in the care population.

4.3 What might cause these differences?

These analyses have raised some issues that would merit further investigation. In particular, different ethnic groups enter care for the first time at different ages, they stay looked after for different lengths of time, and they vary in their likelihood of being either adopted or returned to their parents. Yet the differences in these patterns are complex, and do not obviously point to reasons for the observed disproportionalities.

The literature reviewed in Section 2 offers some clues as to potential mechanisms for over- or under-representation, such as lack of access to appropriate support services, greater unwillingness in some cultures to report concerns about a child's safety, or greater uncertainty among child welfare professionals about how to respond appropriately to the needs of minority ethnic families. However, it is likely that many different factors interact to contribute to the differences shown by the statistical analyses, making it impossible to draw straightforward conclusions. As an illustration, there are higher rates of poverty and disadvantage among many minority ethnic groups which could be expected to contribute to the over-representation of black children as 'children in need' - but this would not explain under-representation among Asian children who are even more likely to live in poverty.

The analyses show that black children are more likely than white children to be looked after, but are on child protection registers at a similar rate to white children. One hypothesis suggested by the literature reviewed might be that they are being taken into care too quickly, before there has been much attempt to offer services or work with the family to safeguard the child's welfare at home. This is not, however, supported by the fact that Black children were over-represented in the Children in Need census, which recorded all families in contact with children's social care services during a particular week. Another possible explanation for why black children are over-represented as children in need and as children looked after but are not over-represented on child protection registers might be that black children come into care for different reasons, which have less to do with fears for their safety. But again, this cannot be deduced from the available data. There was some variation in the reasons children started to be looked after, although for all groups the most common reason was abuse or neglect. However, these data are problematic as only one main reason can be recorded, and this may not be sensitive enough. A third explanation might be that situations placing black children at risk of harm are not being sufficiently well recognised, and so they are not afforded the protection of being placed on the child protection register and end up being taken into care at a higher rate as an emergency measure. Again, this cannot be concluded from the evidence available either in the literature reviewed or from our statistical analyses.

4.4 Possible areas for further research

This report has focused primarily on secondary analysis of child welfare statistics, and investigation of the reasons for differences between ethnic groups is largely beyond the scope of such an analysis. Detailed qualitative research would be needed to tease out what is happening in social work encounters that might produce these outcomes. To say that is not to accuse social workers of behaving in a discriminatory fashion. One of the most consistent themes in the literature reviewed in Section 2 (above) was a *lack* of evidence that black and minority ethnic children are systematically treated differently by child welfare professionals, although this may of course occur in individual cases.

There remains, however, a need to explore what might be producing these differences between ethnic groups. Such research requires what has been described as a 'sophisticated and nuanced approach' to race and racism among social work professionals, situating cultural sensitivity within the context of power relations (Barn, 2007). It has also been argued that such research is best carried out by, or in collaboration with, members of the minority ethnic groups involved. A study in the US investigating the reasons for disproportionality involved a partnership between researchers and members of a community action group, with the latter acting as facilitators in focus groups of professionals, family members and key stakeholders, to seek information about the mechanisms of decision-making at each decision point in the child welfare pathway. The researchers believed that this collaborative approach was crucial in sensitising them to examples of institutional racism that would otherwise have been missed (Harris and Hackett, 2008).

Another possible area for further research would be to identify from the analyses undertaken for this report, those local authorities with an exceptionally high or exceptionally low prevalence of particular minority ethnic groups in the different welfare categories ('in need', on the child protection register, looked after, being adopted or returned to parents etc.). Local fieldwork could then explore possible reasons for this 'outlier' status. This could include both further analysis of local data (for example, within an individual local authority, to see whether rates vary between districts in ways that cannot be explained by differing demographics) and interviews with key officers to discuss what might lie behind the outlier status. This methodology has successfully been adopted in earlier studies of local authority variance, although not focused specifically on ethnicity (Oliver et al., 2001; Statham et al., 2002).

4.5 Recommendations for data collection

Another need highlighted by this study is for more extensive and more detailed data to be collected to allow longitudinal analyses of ethnic disproportionality and disparity. In particular, there is a need for:

- Good monitoring and recording of ethnicity by local children's services. Fourteen per cent of children in the Children in Need census had unreported ethnicity.
- An ability to disaggregate minority ethnic groups. It was clear from the analysis of the detailed ethnic data in the SSDA903 dataset that the ethnic groups put together in the four summary categories do not all have the same experiences and trajectories, so that the summary classification may be masking important differences. On the other hand, even with these wider categories, the numbers of children in some ethnic categories in some local authorities is still very small.
- Data on the ethnicity of children at each point in the child welfare pathway, so that it would be possible (as is the case in the US) to investigate whether over- or under-representation occurs at particular stages of contact with the child welfare system or is present throughout. The current SSDA903 dataset contains no information about children before they became looked after. However, the DCSF plans to collect child level ethnicity data in a new Children in Need Census, from the point of referral to children's services. The potential of this new data to help understand the over- and under-representation of black and minority ethnic children in child welfare services should be fully exploited.
- Integrating data on the family with data on the children. There may be important differences between the families of children with different welfare experiences, such as who lives in the household, parents' own history of care, whether they have drug or alcohol or mental health problems etc. Such factors might influence whether children come into contact with the child welfare system, and cut across any differences due to ethnicity. However, these kinds of data on family circumstances are not linked to information on children contained in the SSDA903 dataset, so it is not currently possible to pursue these possibilities.

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