Exploring Disproportionality in the Illinois Child Welfare System

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Disproportionality in the child welfare system refers to the over- or underrepresentation of a group (usually a racial/ethnic group) compared to that group’s representation in a base population (Child Welfare Information Gateway, 2016). This research brief explores rates of racial disproportionality in the Illinois child welfare system. It is the second brief in a series exploring disproportionality.

**What Is Disproportionality?**

Disproportionality is often represented by a racial disproportionality index (RDI), calculated by dividing the percentage of children in a given racial group by the percentage of children in a base population or comparison group. The Children and Family Research Center uses two forms of RDI. Absolute RDI uses the percentage of children in the Illinois child population as the comparison group for each child welfare decision point, while relative RDI uses the percentage of children at the previous decision point as the comparison group. For both forms of RDI, values above 1 indicate overrepresentation of that racial group, while values under 1 indicate underrepresentation. In this brief, we use this methodology to investigate disproportionality in the Illinois child welfare system.

**Disproportionality in Illinois**

We look at both absolute and relative RDIs at five decision points in the child welfare system (see Figure 1).

A. investigated maltreatment reports,
B. protective custodies,
C. indicated maltreatment reports,
D. entries into substitute care, and
E. timely exits from substitute care.

![Figure 1. Child Welfare Decision Points](image-url)
The first decision point examined is investigated reports. At this stage, DCFS workers at the State Central Register (SCR) screen each call that is received from a maltreatment reporter to determine if the circumstances meet the criteria for a maltreatment investigation. Calls can be either screened-in to become investigated reports or screened-out and no further child welfare actions are taken. African American children are overrepresented at this decision point, Hispanic children are underrepresented, and White children are proportionally represented, compared to their proportions of the general population (Figure 2). Relative RDI is the same here, as the general population is the most meaningful comparison point.

Figure 2. Absolute RDI at Five Child Welfare Decision Points

The second decision point examined is protective custody. During an investigation, a CPS worker can take protective custody of a child if they believe that the child is unsafe in their home or with their caregiver; the child is taken into care for up to 48 hours (excluding weekends) until a shelter hearing is convened (Illinois DCFS, 2015). The absolute RDI patterns at this decision point are similar to those for maltreatment investigations (Figure 2). The relative RDI, which compares representation in protective custodies with representation among investigated reports, shows that African American children are disproportionately likely to be taken into protective custody compared to their representation in maltreatment investigations. Hispanic children, on the other hand, are disproportionately less likely to be taken into protective custody compared to their representation in maltreatment investigations (Figure 3).

The next decision point examined is indicated maltreatment reports. Reports are indicated when CPS workers find credible evidence that the alleged maltreatment occurred (Illinois DCFS,

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1 General population estimates are obtained from the U.S. Census Bureau, including the 2011–2015 American Community Survey 5-Year Estimates for the most recent year.
2015). At this decision point, though absolute RDIs continue to show disproportionate overrepresentation for African American children and underrepresentation for Hispanic children (Figure 2), there is no disproportionality when examining relative RDIs (Figure 3). Reports are indicated for racial groups in exact proportion to the rates at which they are investigated; thus, we can conclude that there is no evidence of racial bias in the rates at which maltreatment is indicated.

The next decision point examined is substitute care entries. If the CPS worker finds evidence that maltreatment has occurred and if the child cannot safely remain in the home, the child may be removed and placed into substitute care. Absolute RDIs continue to show an overrepresentation of African American children, underrepresentation of Hispanic children, and proportional representation of White children among children taken into care (Figure 2). Relative RDIs show patterns similar to the use of protective custody (Figure 3). African American children are taken into substitute care at a rate higher than investigations of maltreatment are indicated, while Hispanic children are taken into care at a rate lower than their indication rate.

Figure 3. Relative RDI at Five Child Welfare Decision Points

The final decision point examined is substitute care exits. When children are removed from their families and placed into substitute care, the goal is for them to safely exit substitute care as soon as possible, through reunification with their biological caregivers, adoption, or guardianship. A sizeable percentage of children remain in substitute care for long periods of time in Illinois, and this indicator examines the percentage of children in each racial group that remain in substitute care for more than three years. Absolute RDIs continue to show overrepresentation of African American children and underrepresentation of Hispanic children, as well as slight underrepresentation of White children, compared to their proportions in the general population (Figure 2). Relative RDIs, comparing the proportions of children staying more than 36 months with the proportions of children entering care, show that African American children are overrepresented, while Hispanic and White children are underrepresented (Figure 3).
Conclusions

Disproportionality patterns in Illinois, as shown through absolute RDI, reveal consistent overrepresentation of African American children, underrepresentation of Hispanic children, and proportional representation of White children. Relative RDIs suggest these patterns come from three sources.

First, though we do not have data for initial reports made to CPS hotlines in the state, it appears that a higher proportion of reports are about African American children compared to their representation in the general population. It also appears that Hispanic children are reported less frequently than their proportion of the general population, and White children are reported proportionally. This results in absolute RDIs that are consistent across all decision points.

The second source of disproportionate representation in the child welfare system is in protective custodies, which are disproportionately likely to be used with African American children, and disproportionately less likely to be used with Hispanic children. What we cannot determine is if this step is necessary because of disproportionate harm for investigated cases or if these differences are because of systematic biases. Removing children from their home can protect them from harm, but it is also traumatic for children (for example, see Berger et al., 2009).

The third source of disproportionate representation is among children taken into care after a report is investigated and maltreatment indicated. Children in all three racial groups we examined have their maltreatment allegations indicated at rates proportional to investigation rates. Following indication, however, African American children are overrepresented among children taken into care, and Hispanic children are underrepresented.

These patterns reiterate that disproportionality in the child welfare system is not necessarily caused by the system itself. Though some decision points show disproportionate relative RDIs, disproportionality begins at the report stage. We do not have enough information to know if this disproportionality reflects the “true” rate of maltreatment in the population, but the results presented here underscore that reducing child maltreatment is a societal responsibility. We must all work to reduce maltreatment and ensure that the factors that predict maltreatment do not disproportionately affect any one racial group.
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