

CaISWEC F&E Symposium – OPENING EXERCISE

Eyes Wide Shut: Fighting Racism in CWS One Social Worker at a Time

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The data on racial disproportionality are well known to us by now. But what still remains unclear are the behaviors, attitudes and decisions that contribute to these gross disparities. Equally as perplexing is how we have achieved these outcomes without anyone seeming to notice.

Perhaps there is speculation that the bias is caused by a few “bad apples” or “bigots”. But the data suggests that the causes are systemic and not just the idiosyncratic acts of a few “bad apples”. It is more likely that all of us -- social workers, supervisors, judges, and legislators, all along the continuum from intake to placement -- contribute to the problem in some inexplicable way. All complicity, regardless of how benign, in accumulation can result in these patterns of disproportionality. But if we are to intervene against such practices, we as individuals need to have some idea of how we contribute to the overall problem. After all, we cannot fix what we cannot understand, see, or believe exists.

The purpose of this exercise is to address:

- Factors that mask bias;
- Behaviors, actions and attitudes that can promote bias without detection;
- Individual and collective interactions that constitute bias; and
- Possible solutions.

Factors Which Allow Discrimination to Persist Without Detection

1. Actions which constitute bias are usually small and incremental “micro-actions”. In isolation they do not appear racist but can accumulatively result in patterns of racial disproportionality.

2. Implicit biases (i.e., those that are powerful enough to operate without conscious thought or intention). Individuals who appear non-prejudiced and who do not possess anti-“black” feelings or hostilities towards other racial groups can discriminate in subtle yet consequential ways.

3. Stereotypes are nuanced, abstract and implicit.

They are rarely blatant or explicit. This would make them too easy to contest. Even though it would never be said, “I took those children out of the home because they are Black,” taking Black children out of their homes in disproportionately higher numbers underscores the possibility that such sentiments may exist.

4. Bias as part of longstanding U.S. cultural values, norms and beliefs and practices is ubiquitous and therefore normalized.

5. Colorblindness rejects notions of persistent racism. It claims that we are living in a colorblind society and we shouldn’t talk about race.

Behaviors, actions and attitudes that represent biases in CWS

1. The use of coded language, e.g., “resistant”, “hostile”, “paranoid”, “grandiose”, “defensive” and “reluctant to use services” to describe a client’s demeanor without examining whether these labels are an accurate reflection of the client or whether they reflect codes or cues which signify a

particular race. The use of these labels is not inconsequential. They can hurt a family's chances of getting their children back.

2. The use of vague definitions of neglect and reporting styles embedded with racial connotations which get passed on from one social worker to another, supervisors, court staff and judges.
3. The tendency to ignore racial differentiation or discrepancies in service delivery patterns.
4. The failure to challenge stereotypes of race/gender groups, even those that are abstract and nuanced, which have the potential to influence decision-making.
5. Personal discomfort with discussions about racism.

Discussion Points

We often cannot see bias as it occurs because it is reflected in behaviors, decisions, and actions which alone seem harmless and therefore are not analyzed or critiqued for bias.

For example, implicit biases (those held on an unconscious level):

- Affect our ability to objectively and fairly interpret the "facts" of the case
- Result in decisions presumed to be based on well-considered objective deliberations and criteria. When behaviors, attitudes and practices which emanate from bias are consistent with agency and societal practices they may not be observable in the selection and application of policies and procedures because they appear "business as usual". If such decisions are consistently applied no matter how biased, they become normalized. If everyone from social worker, through court personnel reiterate similar actions these biases may be imperceptible.
- Influence the social worker's interpretation of policies, and whether they choose to be flexible or inflexible, or choose strict adherence to the rules.
- Affect the perception of risk which is often influenced by stereotypes and biases.

Solutions

1. Know what your biases look like. (Refer to www.harvardimplicitbias.com.)
2. Find opportunities to learn more about implicit biases and how they operate
3. Be open to questioning labels that are vague, speculative, and imprecise. Ask yourself or others, "What does it mean when you say resistant, or reluctant to use services. What are the exact behaviors and actions which constitute that?"
4. Try interrupting assumptions that promote stereotyped outcomes. Don't just go along with inexplicable behaviors. Stop the chain. Make comparisons between service delivery patterns. See if you can identify patterns of difference in the application of policies and procedures.
5. Work collaboratively with co-workers, families and youth, parent partners, and community partners to better understand the context in which "best practices" can be achieved.

Finally, the problems, though they are systemic, rely on the complicity of well-meaning people...and change must occur one social worker at a time.