

UNDERSTANDING THE ROLE OF CASEWORKER BIAS IN RACIAL AND ETHNIC INEQUITIES IN HUMAN SERVICES

Introduction

Caseworkers involved in the provision of human services can be key actors in the perpetuation and/or disruption of racial and ethnic inequities in human services systems. As front-line workers in local communities, the implicit and explicit biases of caseworkers affect the accessibility and experiences of a service, specifically for Black, Hispanic/Latino, Native American, and multi-racial families. Although racial disproportionality in human services programs is well documented, there is less clarity regarding the causal mechanisms perpetuating racial disparities (Kahn & Hanson, 2017; McDaniel et al., 2017). Inequities in human services could be effects of systemic racism that perpetuate increased risks of poverty and adverse human services program outcomes for Americans of color through racist policies and programming. Additionally, client-facing caseworkers may perpetuate racial/ethnic disparities in human services programs through biased decision-making due, in part, to human services agencies' policies and procedures and individually held biases.

This memo begins by defining caseworkers' implicit and explicit racial bias in human services provision. It then discusses theories explaining how caseworker bias perpetuates racial/ethnic disproportionality and disparity in U.S. poverty rates and human services programs outcomes. Caseworkers operate within human services agencies and are influenced by federal and state policy as well as agency procedures. Therefore, this memo suggests mechanisms to disrupt the potential negative impacts of caseworker bias through training, policy change, and updates to program administration.

Defining Bias in Human Services Provision

In general, biases are the positive or negative assumptions that develop through normal cognitive processes to categorize an individual's values and experiences (DeNard et al., 2017). Biases tend to create and reinforce group-based distinctions, wherein individuals who are familiar are categorized as positive, and those who are unfamiliar are categorized as negative (Daumeyer et al., 2019). Implicit biases are assumptions or stereotypes made unconsciously and influence inferences about unknown or unfamiliar people and situations (Daumeyer et al., 2019). For example, implicit biases may lead someone to think that all families should be in the form of

Key Findings

- Caseworker bias may perpetuate racial and ethnic disparities in human services provision.
- Biases impact Black, Hispanic/Latino, Native American, and multi-racial families' access to necessary services and experiences with those services.
- Promising practices to increase equity by reducing caseworker bias include:
 - Training on implicit biases and systemic racism with ongoing follow-up and technical assistance;
 - Reduced opportunities for subjective caseworker discretion and increased oversight of human services programs and opportunities for client voice; and
 - Smaller caseloads to allow caseworkers time to slow down decision-making processes.

one's own family, and to think stereotypes about unfamiliar communities or practices are true (Ellis, 2019). Additionally, people of color may internalize racial biases and stereotypes, resulting in negative perceptions about their own racial group (David et al., 2019; Pyke, 2010). Explicit biases, however, are conscious preferences and attitudes, sometimes based on personal experience, that shape the ways in which we identify with others or perpetuate stereotypes (Daumeyer et al., 2019). Examples of explicit biases are overt racist comments and actions, or caseworker opinions of clients' "deservingness" for a service (DeNard et al., 2017). While the development of biases is a normal and involuntary process in human behavior, unacknowledged or unchecked individual biases coupled with longstanding racial and ethnic oppression perpetuate systemic inequities in human services for Black, Indigenous, and people of color (BIPOC) populations.

Theories Explaining Bias in Service Delivery

Theoretical frameworks from (1) Social Cognitive Theory, (2) Feminist Theory, and (3) Critical Race Theory offer contexts for explaining how caseworker biases perpetuate racial/ethnic inequities in human services.

Social Cognitive Theory

Social cognitive theorists posit that human services caseworkers often make biased decisions due to the rapid decision-making processes that are required in the field, resulting in the unconscious application of stereotypes to support information processing (DeNard et al., 2017; Ellis, 2019; Miller et al., 2013). The brain creates shortcuts in normal information processing to assist in quick decision-making and relies on both individual experiences and broad stereotypes to close knowledge gaps (Azar & Goff, 2007; DeNard et al., 2017). For example, perceived differences between racial groups based on racial stereotypes (e.g. that Black women are dependent on welfare services) often influence caseworkers' use of Temporary Aid for Needy Families (TANF) sanctions (Ojeda et al., 2019; Schram et al., 2009; Timberlake & Estes, 2007). Caseworkers can recommend a client's benefits be suspended or reduced if the caseworker determines the client is not complying with program requirements such as failing to complete the required number of work hours or activities (Fording, 2011; Schram et al., 2009). In fact, race plays a significant role in how TANF sanctions are implemented; studies consistently find that African American and Hispanic/Latina women are more likely to receive TANF sanctions compared to White recipients (Chang et al., 2001; English & Paulsell, 2018; Keiser et al., 2004; Lee & Yoon, 2012; Monnat, 2010; Schram et al., 2009); these patterns hold even after controlling for various factors including work history and children's ages (McDaniel et al., 2017).

Social Cognitive Theory

Social cognitive theory describes how caseworkers' decision-making processes are affected by individual experiences and schemas which can be influenced by stereotypes; these factors can lead caseworkers to make biased judgements about clients (Azar & Goff, 2007).

Feminist Theory

Feminist theorists build on social cognitive theory and assert that negative stereotypes about gender and race converge to influence caseworkers' decisions. For example, the stereotypes that Black and Latino fathers are absent in their parenting roles may bias caseworkers' interactions with fathers and disproportionately disadvantage Black, Hispanic/Latino, and multi-racial fathers (Arroyo et al., 2019; Kobulsky et al., 2021). For example, child support enforcement proceedings against low-income Black men were found to emphasize perceived personal deficiencies rather than racial stratification in employment, which frames poor Black fathers as economic failures and reproduces systems of racial

Feminist Theory

Feminist theory considers cultural and historical categories of gender by highlighting the structural inequities between men and women and challenging societal expectations of dualistic gender norms (Duke & McCarthy, 2009).

subordination (Brito et al., 2015). Potentially because of these and other stereotypes, child welfare caseworkers are less likely to identify, locate, or contact Black, Hispanic/Latino, and multi-racial fathers than White fathers for participation in case planning (Arroyo et al., 2019). By assuming that fathers are willfully absent, caseworkers exclude them from planning and perpetuate gendered approaches to parenting that assume mothers are the most appropriate primary caregiver (Kobulsky et al., 2021).

Critical Race Theory

Critical race theory asserts that caseworker biases are normalized and reinforced by structural forces outside the human services system. For example, greater police presence and racial bias in policing and prosecution in low-income neighborhoods contribute to the over-reporting of BIPOC populations in programs like child welfare which reinforces the pernicious stereotype that parents of color are unfit (Dettlaff & Boyd, 2021; Ellis, 2019; Kolivoski et al., 2018; Miller et al., 2013). With the backdrop of this reinforced social construct (i.e., unfit parents of color), child welfare caseworkers tend to provide fewer or less appropriate services and engage less with families of color compared to White families (Lovato-Hermann et al., 2017; Cooper, 2013; Yi & Wildeman, 2018). When families of color resist engagement with caseworkers due to past negative experiences and fears associated with pervasive racism, caseworkers often consider these actions as willful resistance to change, further impacting the services provided and the caseworker's engagement with the family (Miller et al., 2012; Merritt, 2021). Reduced access to services increases the amount of time Black children spend in foster care and influence timely reunification and placement stability (Bonds, 2006; Lovato-Hermann et al., 2017; Miller, 2008; Pryce et al., 2019). From screening decisions to substantiation to foster care placements, children of color, particularly Black children, fare worse than their White counterparts (Fluke et al., 2003; Dettlaff et al., 2011; Maguire-Jack et al., 2020; Font et al., 2012; National Juvenile Defender Center, 2018).

Critical Race Theory

Critical race theory asserts that implicit and explicit racism is normalized and perpetuated by individuals and institutions, resulting in pervasive systemic racism in welfare policy and program administration (Kolivoski et al., 2018).

Likewise, the prevalent social stereotype that people of color are unmotivated to work is normalized and reinforced by structural racism in the labor market and can bias caseworkers' decision-making processes regarding TANF benefits (Pryce et al., 2019). Employment discrimination also makes it more difficult for applicants of color to obtain and retain employment (Monnat, 2010). These challenges in the labor market reinforce the stereotype that people of color are less likely to take advantage of employment services than White jobseekers. As a result of this reinforced stereotype, TANF caseworkers offer fewer service options—such as childcare, work readiness programs, education and training programs, and other supports—to African American and Hispanic/Latino recipients compared to White recipients and sometimes direct Hispanic/Latino immigrants away from TANF training and education programs and into low-wage employment (Marchevsky & Theoharis, 2008; McDaniel et al., 2017). Without access to these services, participants of color are even more marginalized in the job search process, further increasing the chances of prolonged unemployment and reinforcing the established stereotype that their lack of success is due to personal rather than structural failings (Monnat, 2010).

Mechanisms to Disrupt Inequity

Caseworker training is a useful mechanism for reducing the prevalence of bias, increasing awareness, and highlighting the negative impact of bias on case outcomes. Trainings should provide detailed information about implicit bias, structural racism, and cultural competency; attempts to raise awareness about individual biases in a “colorblind” or race-neutral system will only further the impact of racist systems on BIPOC populations and perpetuate racial disparities by ignoring important differences in treatment (Berman et al., 2017; Capacity

Building Center for Tribes, 2018; Capatosto, 2015; Lee & Yoon, 2012; Westerberg, 2016).¹ To ensure that caseworkers maintain appropriate tools to check their own biases and limit the effects of bias in their decisions, ongoing support and technical assistance are needed after initial trainings are complete (Berman et al., 2017; Lantos et al., 2021). Regular training follow-ups allow caseworkers to process situations with other professionals, review decisions, understand how bias influenced those decisions, and plan for more appropriate, unbiased options for the future (Lantos et al., 2021).

Federal and state policy changes that revise the rules and administrative structures which guide the work of caseworkers have the potential to reduce the impact of caseworker biases on decision-making. Redesigning state TANF sanctions to be administered in a nondiscriminatory way could reduce inequities. For example, states could end sanction-rate targets, create racial equity performance standards, and institute a fair hearing process and an ombudsman program to reduce potential unfairness of sanction policies (Fording et al., 2011; Lee & Yoon, 2012). Alternatively, federal policymakers could eliminate TANF sanctions to address their disproportionate negative impact on people of color (English & Paulsell, 2018; Fording et al., 2011). Increased bonuses, funded by states and/or the federal government, for caseworkers demonstrating ability to reduce racial disparities may also help to improve outcomes for people of color (Gooden, 2006). Additionally, creating state-level procedures, programs, and policies to support caseworkers in including client advocates—to provide current clients with a voice to tell caseworkers what they need and support clients in advocating for themselves—may improve outcomes for people of color (Ellis, 2019). For example, a pilot evaluation of Parents in Partnership, a parent mentorship program in which parents who have successfully reunified with their children after child welfare involvement provide support for parents currently navigating the system, found that parents who participated in the program were five times more likely to reunify with their children (Enano et al., 2017). Finally, empowering clients to tell caseworkers what they need, training caseworkers to ask clients what their needs are, and including clients in case planning will ensure that families have an active role in and access to the most appropriate services. It is also important to identify specific, evidence-based frameworks that are culturally competent and recognize diversity among cultures to truly support racial equity (Wells et al., 2009).

To reduce the prevalence of stereotypes in their decisions, programs should give caseworkers more time to slow down their decision-making processes and be cognizant of their potential for bias in each case. Smaller caseloads would allow caseworkers to be deliberate, present, and logical in their decisions rather than relying on stereotypes to fill in gaps that come up in rapid decision-making (Capacity Building Center for Tribes, 2018).

Conclusion

Biased decision-making impacts the accessibility of human services and the outcomes experienced by individuals and families of color. Human services agencies have the power to reduce racial/ethnic disparities and to promote equity by taking active steps to diminish racialized stereotypes and the frequency of biased decision-making. Human services systems must consider ongoing training and support of caseworkers, policy change to increase oversight of requirements, increased objectivity in measures of success, and supports in program administration that allow caseworkers to be more deliberate and that increase parent voice. Federal and state policymakers can support these efforts by reconsidering key policies and performance metrics that would support these needed changes.

¹ For additional information on colorblind racism, see Memo 1 in this series: “Understanding Systemic Racial and Ethnic Inequities in Human Services Provision” (May 2021).

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