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2020 Custody Guardian *ad Litem* Training Manual

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The Washington Post

The High Cost of Poverty: Why the Poor Pay More

Advertisement

By DeNeen L. Brown
Washington Post Staff Writer
Monday, May 18, 2009; C01

You have to be rich to be poor.

That's what some people who have never lived below the poverty line don't understand.

Put it another way: The poorer you are, the more things cost. More in money, time, hassle, exhaustion, menace. This is a fact of life that reality television and magazines don't often explain.

So we'll explain it here. Consider this a primer on the economics of poverty.

"The poor pay more for a gallon of milk; they pay more on a capital basis for inferior housing," says Rep. Earl Blumenauer (D-Ore.). "The poor and 100 million who are struggling for the middle class actually end up paying more for transportation, for housing, for health care, for mortgages. They get steered to subprime lending. . . . The poor pay more for things middle-class America takes for granted."

Poverty 101: We'll start with the basics.

Like food: You don't have a car to get to a supermarket, much less to Costco or Trader Joe's, where the middle class goes to save money. You don't have three hours to take the bus. So you buy groceries at the corner store, where a gallon of milk costs an extra dollar.

A loaf of bread there costs you $2.99 for white. For wheat, it's $3.79. The clerk behind the counter tells you the gallon of leaking milk in the bottom of the back cooler is $4.99. She holds up four fingers to clarify. The milk is beneath the shelf that holds beef bologna for $3.79. A pound of butter sells for $4.49. In the back of the store are fruits and vegetables. The green peppers are shriveled, the bananas are more brown than yellow, the oranges are picked over.

(At a Safeway on Bradley Boulevard in Bethesda, the wheat bread costs $1.19, and white bread is on sale for $1. A gallon of milk costs $3.49 -- $2.99 if you buy two gallons. A pound of butter is $2.49. Beef bologna is on sale, two packages for $5.)

Prices in urban corner stores are almost always higher, economists say. And sometimes, prices in supermarkets in poorer neighborhoods are higher. Many of these stores charge more because the cost of doing business in some neighborhoods is higher. "First, they are probably paying more on goods because they don't get the low wholesale price that bigger stores get," says Bradley R. Schiller, a professor emeritus at American University and the author of "The Economics of Poverty and Discrimination."

"The real estate is higher. The fact that volume is low means fewer sales per worker. They make fewer dollars of revenue per square foot of space. They don't end up making more money. Every corner grocery store wishes they had profits their customers think they have."

According to the Census Bureau, more than 37 million people in the country live below the poverty line. The poor know these facts of life. These facts become their lives.

Time is money, they say, and the poor pay more in time, too.

When you are poor, you don't have the luxury of throwing a load into the washing machine and then taking your morning jog while it cycles. You wait until Monday afternoon, when the laundromat is most likely to be empty, and you put all of that laundry from four kids into four heaps, bundle it in sheets, load a cart and drag it to the corner.

"If I had my choice, I would have a washer and a dryer," says Nya Oti, 37, a food-service worker who lives in Brightwood. She stands on her toes to reach the top of a washer in the laundromat on Georgia Avenue NW and pours in detergent. The four loads of laundry will take her about two hours. A soap opera is playing loudly on the television hanging from the ceiling. A man comes in talking to himself. He drags his loads of dirty sheets and mattress pads and dumps them one by one into the machines next to Oti.

She does not seem to notice. She is talking about other costs of poverty. "My car broke down this weekend, and it took a lot of time getting on the bus, standing on the bus stop. It was a waste of a whole lot of times. Waiting. The transfer to the different bus."

When she has her car, she drives to Maryland, where she shops for her groceries at Shoppers Food Warehouse or Save-A-Lot, where she says some items are cheaper and some are higher. "They have a way of getting you in there on a bargain. You go in for something cheap, but something else is more expensive." She buys bags of oranges or apples, but not the organic kind. "Organic is too much," she says.

"When you are poor, you substitute time for money," says Randy Albelda, an economics professor at the University of Massachusetts at Boston. "You have to work a lot of hours and still not make a lot of money. You get squeezed, and your money is squeezed."

The poor pay more in hassle: the calls from the bill collectors, the landlord, the utility company. So they spend money to avoid the hassle. The poor pay for caller identification because it gives them peace of mind to weed out calls from bill collectors.

The rich have direct deposit for their paychecks. The poor have check-cashing and payday loan joints, which cost time and money. Payday advance companies say they are providing an essential service to people who most need them. Their critics say they are preying on people who are the most "economically vulnerable."

"As you've seen with the financial services industry, if people can cut a profit, they do it," Blumenauer says. "The poor pay more for financial services. A lot of people who are 'unbanked' pay $3 for a money order to pay their electric bill. They pay a 2 percent check-cashing fee because they don't have bank services. The reasons? Part of it is lack of education. But part of it is because people target them. There is evidence that credit-card mills have recently started trolling for the poor. They are targeting the recently bankrupt."

Outside the ACE check-cashing office on Georgia Avenue in Petworth, Harrison Blakeney, 67, explains a hard

financial lesson of poverty. He uses the check-cashing store to pay his telephone bill. The store charges 10 percent to take Blakeney's money and send the payment to the phone company. That 10 percent becomes what it costs him to get his payment to the telephone company on time. Ten percent is more than the cost of a stamp. But, Blakeney says: "I don't have time to mail it. You come here and get it done. Then you don't get charged with the late fee."

Blakeney, a retired auto mechanic who now lives on a fixed income, says: "We could send the payment ahead of time but sometimes you don't have money ahead of time. That's why you pay extra money to get them to send it."

Blakeney, wearing a purple jacket, leans on his cane. He has no criticism for the check-cashing place. "That's how they make their money," he says. "I don't care about the charge."

Just then, Lenwood Brooks walks out of the check-cashing place. He is angry about how much it just cost him to cash a check. "They charged me $15 to cash a $300 check," he says.

You ask him why he didn't just go to a bank. But his story is as complicated as the various reasons people find themselves in poverty and in need of a check-cashing joint. He says he lost his driver's license and now his regular bank "won't recognize me as a human. That's why I had to come here. It's a rip-off, but it's like a convenience store. You pay for the convenience."

Then there's credit. The poor don't have it. What they had was a place like First Cash Advance in D.C.'s Manor Park neighborhood, where a neon sign once flashed "PAYDAY ADVANCE." Through the bulletproof glass, a cashier in white eyeliner and long white nails explained what you needed to get an advance on your paycheck -- a pay stub, a legitimate ID, a checkbook. This meant you're doing well enough to have a checking account, but you're still poor.

And if you qualify, the fee for borrowing $300 is $46.50.

That was not for a year -- it's for seven days, although the terms can vary. How much interest will this payday loan cost you? In simple terms, the company is charging a $15.50 fee for every $100 that you borrow. On your $300 payday loan -- borrowed for a term of seven days -- the effective annual percentage rate is 806 percent.

The cashier says that what you do is write First Cash Advance a check for $345.50 plus another $1 fee, and it will give you $300 in cash upfront. It holds the check until you get paid. Then you bring in $346.50 and it returns your check. Or it cashes the check and keeps your $346.50, or you have the option of extending the loan with additional fees. You'll be out $46.50, which you'd rather have for the late fee on the rent you didn't pay on time. Or the gas bill you swear you paid last month but the gas company swears it never got.

But now the payday advance place has closed, shuttered by metal doors. A sign in the front door says the business has moved. After the D.C. government passed a law requiring payday lenders to abide by a 24-percent limit on the annual percentage rate charged on a loan, many such stores in the District closed. Now advocates for the poor say they are concerned about other businesses that prey on poor people by extending loans in exchange for car titles. If a person does not pay back the loan, then the business becomes the owner of the car.

All these costs can lead the poor to a collective depression. Douglas J. Besharov, resident scholar at the American Enterprise Institute, says: "There are social costs of being poor, though it is not clear where the cause

and effect is. We know for a fact that on certain measures, people who are poor are often more depressed than people who are not. I don't know if poverty made them depressed or the depression made them poor. I think the cause and effect is an open question. Some people are so depressed they are not functional. 'I live in a crummy neighborhood. My kids go to a crummy school.' That is not the kind of scenario that would make them happy." Another effect of all this, he says: "Would you want to hire someone like that?"

The poor suspect that prices are higher where they live, even the prices in major supermarkets. The suspicions sometimes spill over into frustration.

On a hot spring afternoon, Jacob Carter finds himself standing in a checkout line at the Giant on Alabama Avenue SE. Before the cashier finishes ringing up his items, he puts $43 on the conveyor belt. But his bill comes to $52.07. He has no more money, so he tells the clerk to start removing items.

The clerk suggests that he use his "bonus card" for savings.

Carter tells the clerk he has no such card.

He puts back the liter of soda. Puts back the paper towels. Sets aside $9 worth of hot fried chicken wings. He returns $13 worth of groceries. "Y'all got some high prices in this [expletive]," he says, standing in Aisle 4, blue shirt over work clothes.

The clerk suggests that he take his cash off the conveyor belt, because if she moves the belt the money will be carried into the machinery. Then the money will be gone.

Carter, a building engineer, snatches up the money, then gives it to the clerk. His final bill is $39.07.

He looks at the receipt and then announces without the slightest indication as to why: "Just give me all my [expletive] money back. It's too high in this [expletive]." The clerk calls the supervisor, who comes over. The supervisor doesn't argue with Carter. She just starts the process of giving him a refund.

"I want my money back. This [expletive] is too high. My grandmother told me about this store."

The supervisor returns $39.07 in cash. "Sir," she says, "have a blessed day."

The food in this supermarket might be cheaper than the goods at a corner store. But Carter still feels frustrated by what he thinks is a mark-up on prices in supermarkets in poor neighborhoods. Carter walks out.

The poor pay in other ways, ways you might never imagine. Jeanette Reed, who is retired and lives on a fixed income, sold her blood when she needed money. "I had no other source to get money," she says. "I went to the blood bank. And they gave me $30.

"I needed the money. I didn't have the money and no source of getting money. No gas. No food. I have to go to a center that gives out boxes of food once a month. They give you cereal or vouchers for $10. They give you canned tuna and macaroni and cheese. Crackers and soup. They give you commodities like day-old bread."

The poor know the special economics of their housing, too.

"You pay rent that might be more than a mortgage," Reed says. "But you don't have the credit or the down

payment to buy a house. Apartments are not going down. They are going up. They say houses are better, cheaper. But how are you going to get in a house if you don't have any money for a down payment?"

There is also an economic cost to living in low-income neighborhoods.

"The cheaper housing is in more-dangerous areas," says Reed, who lives in Southeast Washington. "I moved out of my old apartment. I hate that area. They be walking up and down the street. Couldn't take the dog out at night because strangers walking up and down the street. They will knock on your door. Either they rob you, kill or ask for money. If you're not there, they will steal air conditioners and copper. They will sell your copper [pipes] for money."

And then there is the particular unpleasantness when you make too much money to fall below the poverty line, but not enough to move up, up and away from it.

For our final guest lecturer on poverty we take you to the Thrift Store on Georgia Avenue and Marie Nicholas, 35, in an orange shirt, purple pants and thick black eyeliner. She is what economists call the working poor.

She is picking through the racks. The store is busy with customers on a Monday afternoon. There is the shrill sound of hangers sliding across racks under fluorescent lights. An old confirmation dress hangs from the ceiling. It has faded to yellow. It's not far from the used silver pumps, size 9 1/2 , nearly new, on sale for $9.99.

"People working who don't make a lot of money go to the system for help, and they deny them," Nicholas says. "They say I make too much. It almost helps if you don't work."

She says she makes $15 an hour working as a certified nursing assistant. She pays $850 for rent for a one-bedroom that she shares with her boyfriend and child. She went looking for a two-bedroom unit recently and found it would cost her $1,400. She pays $300 a month for child care for her 11-year-old son, who is developmentally delayed. She tried to put him in a subsidized child-care facility, but was told she makes too much money. "My son was not chosen for Head Start because I wasn't in a shelter or on welfare. People's kids who do go don't do nothing but sit at home."

Money and time. "I ride the bus to get to work," Nicholas says. It takes an hour. "If I could drive, it would take me 10 minutes. I have to catch two buses." She gets to the bus stop at 6:30 a.m. The bus is supposed to come every 10 or 15 minutes. Sometimes, she says, it comes every 30 minutes.

What could you accomplish with the lost 20 minutes standing there in the rain? Waiting. That's another cost of poverty. You wait in lines. You wait at bus stops. You wait on the bus as it makes it way up Georgia Avenue, hitting every stop. No sense in trying to hurry when you are poor.

When you are poor, you wait.

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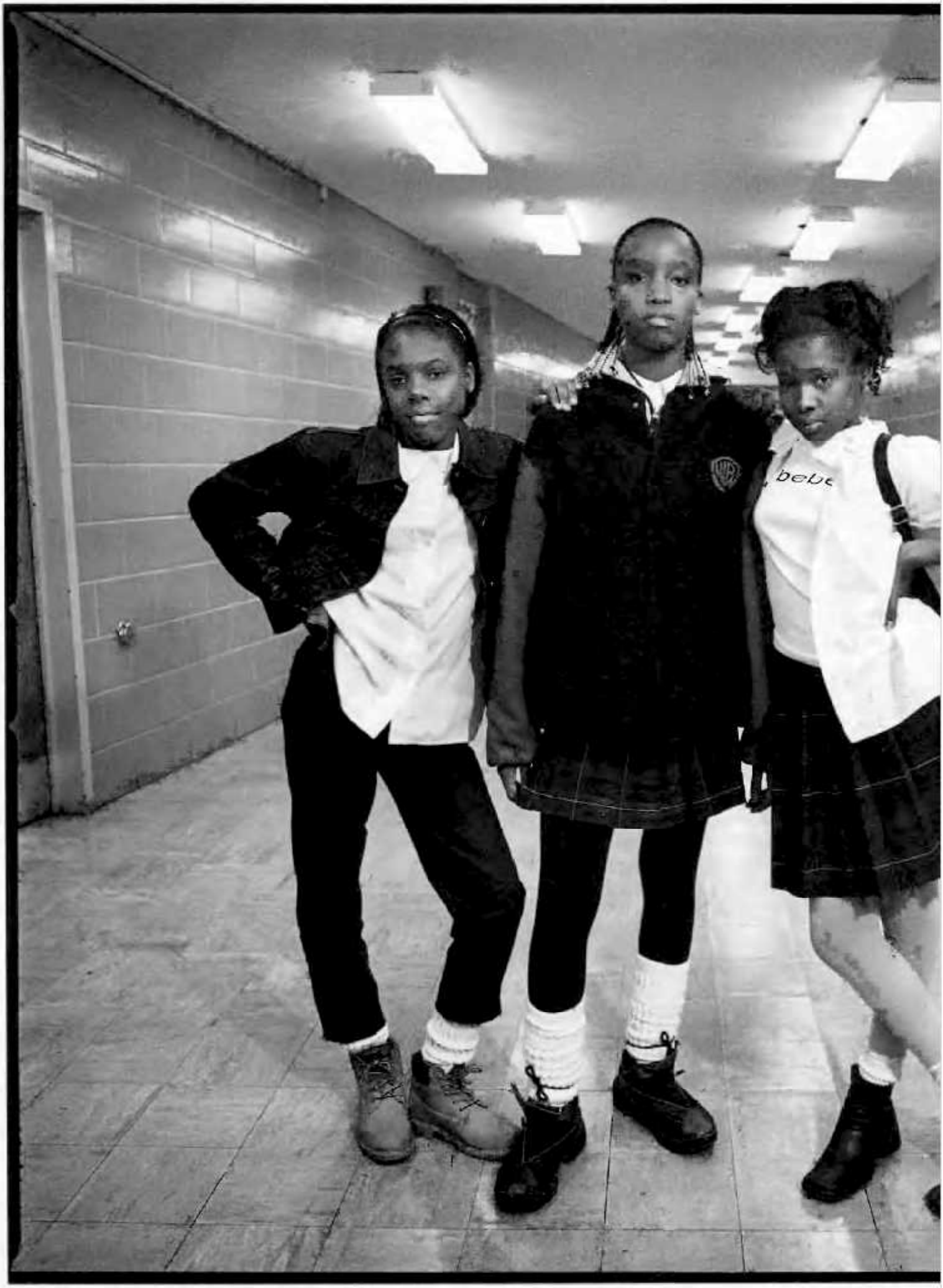
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A REPORTER AT LARGE

AFTER WELFARE

Working two jobs, Elizabeth Jones does her best for her family. But is it enough?

BY KATHERINE BOO

When children on the easternmost tip of the District of Columbia try to explain where they live, they often say "by the Shrimp Boat," a worn seafood carryout whose small, barred windows look east to the city's hardest ghetto and west to the United States Capitol. That the Shrimp Boat has come to stand for a neighborhood of ten thousand people speaks less to the quality of its crab legs than to the featurelessness of the surrounding landscape. Among large housing projects and old brick homes, there is no other landmark. At the start of the twentieth century, this patch of the District was known for the industry of its inhabitants, black craftsmen who bivouacked in shanties while constructing the monuments of the federal city. At the end of the century, the supposed indolence of communities like the Shrimp Boat helped inspire in the federal city the most celebrated social-policy initiative in a generation—the Personal Responsibility and Work Opportunity Act of 1996.

Last August 22nd was the fourth anniversary of the passage of the welfare-reform bill. Five miles from the Capitol, at a stand outside the Shrimp Boat, extra-

PHOTOGRAPHS BY MARY ELLEN MARK

Jones's daughter, Drenika (center, with friends), who watches her brothers when her mother (above), is on duty, is increasingly adult outside the home.

large T-shirts flapped in the breeze like a country's colors at the border. Their inscriptions testified to a culture's changing aspirations. The wrestling hulks and marijuana leaves of previous years had been supplanted by exhortations in the red, black, and green of African independence. "Educate 2 Elevate," the shirts read. "Each 1, Teach 1." Such sun-drenched sentiments moved me more than I cared to admit, for I had come to the Shrimp Boat to see three children whose elevation I particularly root for.

Dernard, Drenika, and Wayne were ten, eleven, and thirteen, respectively, last August. I have known them, first as a newspaper reporter and then as a friend, since 1996, when they were living in public housing with their mother, Elizabeth Jones, who was then twenty-six and had been on welfare for nine years. Worried that the world would mistake her good kids for ghetto thugs, Elizabeth decided that welfare reform could be her family's rescue. She got a secondhand suit from a charitable organization and reached up for the socioeconomic ladder's lowest rung.

Since the law's passage, Miss Cookie, as Shrimp Boat kids call Elizabeth, has done everything that reformers could reasonably ask of the daughter of a single mother and a father she never met who, by the age of twenty-one, had a high-school diploma, a history of victimization by rape and domestic abuse, and three babies by three hit-and-run men. After a volunteer clerkship and a course in WordPerfect, she got, at twenty-seven, the first real job of her life, as a receptionist, with a salary of twenty-two thousand dollars a year. Not long after, she saw, on the side of a bus, a recruitment poster for the Metropolitan Police Department. In September of 1998, she graduated from the police academy and became an officer on the night shift in Southeast D.C., the city's most violent quadrant—her own.

Cookie is funny and smart and tells the truth even when it makes her look bad. She dislikes melodrama and is, in her own estimation, a mediocre cop. ("For real, I'd rather go to school for mortuary science," she says. "Dead people, you just pump them up and they don't talk back.") She is also, at age thirty-one, a Shrimp Boat phenomenon, subject to high fives when she takes her boys to Campbell's barbershop for a shapeup. She is among the most successful former welfare recipients in the District's inner city.

One premise of welfare reform, which transfers federal power to local government, is that the public and private institutions closest to the poor can best see their needs. But the inverse is also true: the closer you get to families like Elizabeth's, the more clearly you see the flaws in the infrastructure that serves the children of the post-welfare world.

On the August day last year when I arrived at Elizabeth's house, it was lunchtime, and, as usual, she wasn't there. Her police shift runs all night, and after it ended, just before dawn, she went downtown to work as a security guard—a part-time job she has taken in order to meet her car payments. Her children had been home alone since seven the night before. In the living room, a pillow-lipped slacker on MTV's "Real World Miami" wore a T-shirt that said "F**k work." In the kitchen, eleven-year-old Drenika lit the stove and dropped a clump of ramen into a pot of water. Drenika's heart-shaped face has a perpetual squint, as if a private sun were blasting into her eyes. That day, she wanted to run the streets with Rico, a thirteen-year-old who had begun showing an interest after she started refusing to wear her eyeglasses. But ever since Drenika was seven, when a day-care subsidy stopped because of a municipal error, she has been taking care of her younger brother, Dernard, who is bright and anxious, and her older brother, Wayne, who is learning-disabled. The day before, Drenika had packed a plastic bag in anticipation of an overnight stay with her father, who didn't materialize. The bag was still on a chair by the door.

"Dernard, you want one boiled egg with your noodles or two?" Drenika asked. Her fingernails were bitten to the quick. "And which one of you was so trifling as to leave your gum stuck on the floor?"

Dernard licked powdered chicken seasoning from his palm as he waited for his egg. He was worried, he told his sister, about his imminent entrance into fifth grade, where it might become clear to the meaner of his classmates that he is not a club-level thug—"that all I am is a nerd without glasses," he told Drenika, mournfully. Drenika, putting out plates, agreed with her younger brother's assessment: "You'd be beat every day at my school." She recommended silence in class until he grew taller.

Then thirteen-year-old Wayne, still in his pajamas, emerged from the basement, where he had spent the morning in a world of his own devising. Elizabeth cannot afford private tutoring or therapy for her son, who is six feet two and whose eyes tilt slightly toward the ceiling. To help Wayne make a neighborhood friend, she had recently registered him for a local peewee-football team. But his mother is gentle with him, as the world at large sometimes is not, and in her absence Wayne prefers the companionship he has created in his mother's old toy chest. With deft craftsmanship and small thefts from school and dollar stores, he has been perfecting, over half his life, a private shrine to middle-class comfort. In Wayne's wooden box—do not call it a doll house—pipe-cleaner curtains swag just so. The sister has a parrot to talk to when she's lonely, which is not often, thanks to the businessman father and the live-in grandmother. In the bedroom, the windows are not taped over with cardboard. There is, instead, a classic boyhood enchantment: a tall ship that has somehow slipped into a narrow-necked bottle.

At lunchtime, working security at a chemists' convention, Elizabeth stole a minute to make a laminated name badge for each of her children: "Hello, My Name Is . . . Wayne. Architect. Washington, D.C." Meanwhile, in a frame house in the Shrimp Boat, Drenika tried to enforce the standards that she'd learned from her mother the striver: "Don't be ghetto, Wayne, eating all standing up." And the three children sat and ate their ramen and egg in silence.

Elizabeth Jones earns around thirty-nine thousand dollars a year from her two jobs. Compared with the average income of those who leave the welfare rolls in the District (seventeen thousand dollars, an Urban Institute study says), this is an astronomical sum. Compared with what is required to meet the basic needs of a family of four in Washington (fifty-two thousand dollars, says another study), it is not. Elizabeth's rent

and car payments consume twelve hundred and twenty dollars of her sixteen-hundred-dollar monthly take-home from the police department. Her other bills include a two-hundred-and-eighty-two-dollar monthly payment on a student loan she took out years ago for a fly-by-night trade school, so a second job is essential. The material rewards of the two jobs are real: a car, a Suzuki Esteem, with the names of her children stencilled on the rear window, like a university affiliation, and a rented frame house four crucial blocks from East Capitol Dwellings, a notorious public-housing project where she used to live. In the small dining room, there is a computer, on which the kids can play Frogger, which they do frequently, because their mother, whose work keeps her abreast of the perils of the neighborhood, forbids them to play outside when she's not there. The children no longer have to wear shoes with the size stamped conspicuously on the sole (stigmata of Payless), and, until Elizabeth decides that she can't afford it, they enjoy a legitimate cable-television hookup, instead of the bootleg connections known around here as "fable." But when Dernard hears gunshots outside the house at midnight and shakes with terror, he can't cry out for his mother. He has to page her.

Elizabeth, who as a rule does not belabor the obvious, rarely talks of fatigue. She does speak of missing her kids: "Like, I'm at work chasing after some crazy person and I am thinking, Have my kids taken a bath, did they do their homework, did they turn out the lights—the electricity bill is breaking me—did they eat dinner, did they go outside like they're not supposed to, did they watch something terrible on TV?" One of her happiest weeks of last year was the time she got bronchitis and had to stay home with her children.

Welfare reform has been chronicled by journalists, academics, and policymakers who are thriving in America's culture of opportunity, and the assumptions of the new law tend to ratify those of the professional class: work leads inexorably to moral (and, by extension, civic) improvement; and the economic good of a mother—a self-sufficient working mother—leads inexorably to the good of a child. If these newly working mothers are weaned of their dependence on public assistance, they will become, to put it bluntly, more like us: less violent, less isolated, less likely to use drugs and alcohol, and better parents. Indeed, the women of the Shrimp Boat—part of a group described not long ago as a permanent underclass—are steadily becoming more like the American middle class.

"Did you remember to whack the cat?"

• •

Washington is divided into four unequal sections, radiating out from the United States Capitol. The Shrimp Boat sits toward the end of East Capitol Street, one of the dividing lines. In 1996, only three per cent of householders in the projects surrounding the carryout earned the majority of their income; most of the rest collected public assistance. Today, one-third work for the greater part of their income, an improvement at least partially attributable to a good economy. As Shrimp Boat parents spend more time at work, their daily dilemmas increasingly mirror those of the middle class, which long ago discovered that the interests of career-conscious parents and demanding children sometimes clash. In the Shrimp Boat, though, these imperatives collide with particular velocity. These families have one parent. Child-care options do not include live-in sitters or after-school piano lessons. The sixth-grade school day in the ghetto begins with a metal detector and a mandatory frisk. "A baby's first words are supposed to be the ABCs," Drenika once observed in frustration. "But where we live their first word be 'bitch.'"

The physical privations of inner-city children are often overstated, and their parents' resourcefulness undersold. A more logical worry, it seems to me, is whether a cycle of opportunity really is replacing the cycle of pathology, even for the luckiest children of reform. Ghetto children are told regularly to "be positive," and, until faced with overwhelming evidence to the contrary, they usually are. But the exodus of mothers into the workplace has created something new and not wholly positive in the Shrimp Boat: a world of free-range children at the mercy of unreformed institutions that, in the absence of parents, are all they have.

On a sweltering evening later that August week, I happened to be in a row house near Elizabeth's where a mother had returned from the first full-time job she'd held in fifteen years and found her fourteen-year-old daughter bearing her nineteen-year-old son with an ironing board. The boy had stolen the girl's cheeseburger—the remainder of a two-for-one special she'd bought at McDonald's and squirrelled under a bed for dinner. "I'm not going to lose another job for this Tom and Jerry business I have to

"Hang in there, Dave—time heals all haircuts."

• •

come home to!" the mother yelled. After dialling 911, she raised a cane to "knock this temper out of you-all's head." As the grievances of mother, sister, and brother intensified and enlarged, I noticed for the first time a seven-year-old girl watching from a doorway, cheeks distended. Her name was Starletta. She was literally holding her breath.

I left the house with a perceptive beat cop named Brad Wagner, whom the kids call Officer Superman, or Officer Supe-Doggy-Dogg. We drove past skeletons of tents from a long-gone gospel revival and into the Shrimp Boat's busiest crack market, where in the previous year two events had altered the landscape: a fifty-six-year-old grandmother had been murdered while shooing toddlers out of the path of bullets, and the authorities had undertaken some improvements. To hinder the drive-through drug trade, the city barricaded the block with metal fencing and erected, in the newly created cul-de-sac, a set of monkey bars. The old heads observe that these improvements prevent police cars from pursuing armed drug dealers while, at the same time, luring toddlers into the crosshairs. But on that August midnight, like most others, the children of the Shrimp Boat cheerfully assumed the risk. To surf the jungle gym's top tier is not merely to rise above the addicts bargaining at curbside. It is to secure a private glimpse, over the viscous Anacostia River, of the white-lit federal city. A boy, naked but for a diaper, hung like a bat from the bars. A girl who looked about eight waved hello. "We don't have to go to bed tonight," she called, and seemed surprised when we walked over. Afterward, Officer Superman said that sometimes he felt that his service to the children of the community had little to do with public safety; it was, rather, being a nearby adult. "What these kids want more than anything," he said, "is just evidence that they exist."

In September, during recess one day in the second week of seventh grade, Drenika and her best friend, Erica, sat self-consciously by the basketball court of Ronald H. Brown Middle School. The school sits on drained swampland, and over the summer nature had reclaimed a bit of the court. It was tufted now, which skewed the bounce, but Drenika and Erica were only marginally interested in watching the game. They were hoping to be watched themselves. On their dark skin, under the oxford button-downs and green plaid skirts that public-school officials mandated last year in the name of educational focus, they had customized themselves in glistening white ink. "Sexy," Erica's biceps read. Drenika's said, "Baddest Chick/53rd Street Mob." On her bony wrist were the words "Love Rico." The two eleven-year-olds spoke coolly of a classmate—his mother had a scrub job—who couldn't afford a gel body-write pen. He had committed the social felony of decorating himself with Wite-Out.

Over the years, Elizabeth has called me periodically with unsettling bulletins: that she has found the bullet-ridden body of a teen-ager she'd been close to since he was a youngster; that she is standing in the middle of her ransacked living room, intruder's whereabouts known, and the police, whom she's called eight times, have not responded. I have never heard her more undone than when Drenika, then barely nine, got her period. Elizabeth, born to a mother who got pregnant at sixteen, became pregnant herself at sixteen. She has impressed on her daughter the importance of breaking that chain. But Drenika, who is expected to act grown up when she is home—who has cooked a perfect sausage link since she was seven—is increasingly adult when she goes outside it. It's as if the ghetto pose that Elizabeth has herself worked so hard to shed had rematerialized on her daughter's slender frame. Elizabeth worries when she learns about a girl in Drenika's school who is pregnant, the one for whom the school guards have been collecting baby clothes. She sees a note written by the nine-year-old daughter of one of her girlfriends, inviting a fellow fifth grader to have sex with her again, and worries more. She sees her own pretty daughter in a throng of boys and feels sick. Drenika is a restive preteen target—one whose single mother works the late shift.

Elizabeth, trying to start a conversation with her daughter lately, sometimes feels as if she were interrogating a perp. But one day, as the school year began, Drenika painstakingly informed her notebook of everything that hadn't happened over the latest summer of covering for her mother at home: "I wanted to go to Orlando Florida to Disney World and go shopping. I also so wanted to go away for camp my friend did for a week." She wanted to play with kids her own age, sleep late, go to Senegal and New Jersey and North Carolina and Ocean City, Maryland. What she usually got was

house lockdown with two brothers who rely on her to interpret the world. One day, I came upon her in her bedroom, where, feeling grown, she had recently packed eleven years' worth of dolls into a trash bag. Squinting into the mirror, she knotted her T-shirt and pulled a skullcap over her eyes. As Lil' Kim sang on a tiny radio, Drenika danced. The room fairly shook with her impatience.

When Elizabeth was on welfare, she sometimes watched "All My Children." She also volunteered regularly at her children's schools, keeping an eye on their teachers and friends. This year, her schedule does not permit such luxuries. When her police shift ends, at 4 A.M., she sleeps for two hours, wakes her children for three different schools, sees one to the bus and drives the two others, along with four neighborhood kids who depend on her, to their schools. Then she heads downtown to her part-time job as a private security guard. When she finishes, at 5 P.M., she fetches her children and the four others from their schools, drops them all at their doors, and goes to the police station to start her shift. On days off, she sleeps.

Because she cannot personally watch over Drenika, she signs her up for supervised distractions: track; after-school tutoring; cheerleading for the Bison, the football team for which she also registered Wayne and Dernard. Elizabeth is blunt when she talks to her daughter about her own sexual activity, which began in junior high school and led to five pregnancies, three children, and nine years on welfare. ("But you made it with three kids," Drenika counters.) Elizabeth doesn't allow her own longtime boyfriend, a maintenance worker, to stay overnight. She puts a call block on the telephone to stop Rico from phoning Drenika, and spies on her, with Dernard in the role of informer.

Still, Elizabeth knows that the best way to protect Drenika, who had straight A's at the beginning of elementary school and mostly C's at the end, is to keep her interested in school. So Elizabeth petitioned school authorities to get her daughter reassigned from the infamous Shrimp Boat middle school, Evans, to a place where Drenika had a better chance of getting an education. A public middle school on Capitol Hill had encouraging test scores, but it had seven times as many names on the waiting list as it had places for children who live outside Capitol Hill. Elizabeth settled on Ronald H. Brown Middle School, which is five stops from home on the Washington Metro. There, another legend of the District ghetto, a no-nonsense principal in a Grace Jones flattop and a turtleneck, had for years been converting hard cases into readers. By the time Drenika enrolled, however, the principal had taken a job in a public school in Maryland.

Students at Ron Brown do far better on standardized tests than students at Evans. But better does not mean good. Last year at Ron Brown—a year in which one-fifth of the students were judged by tests to be illiterate—a physical-education teacher pleaded guilty to having sex with two fourteen-year-old girls. One was a learning-disabled student he attacked in a bathroom and attempted to silence with a twenty-dollar bill. She later gave birth to his child.

By September, a new physical-education teacher had already been suspended; and after recess Drenika and Erica had ample time to speculate on the reason, because two of their six classes weren't held that day—their teachers weren't there. Drenika and her classmates were put in an unused classroom, where they passed the time talking to each other. Later in the day, the new principal, a warm, earnest woman in her forties, asked what I thought of the school. I remarked that Drenika and the others had spent one-third of their school day doing nothing. She told me that substitutes were in short supply in the system and admonished me to be positive.

Drenika's last class of that day was geography. At its start, the teacher wrote the daily "objective" on the blackboard. Objectives, like uniforms, are part of the new urban catechism of disciplined, outcome-oriented education. This day's objective: Students would review last week's work. Hands shot up. "Miss Carney, we reviewed last week's work yesterday." Miss Carney moved to Objective B: Students would write their reflections about the class. "Write about things you enjoyed, like when we went outside for class," she told them. "It's important that I know what you think, so I can do something you like more." Miss Carney turned on a boom box and soft jazz filled the room. Drenika sucked her pen and then, chin resting on her desk, set to work:

> Semptember 15. The first day of class I thought Mrs. Carney was going to talk a hole in my head but she did not. We played a game called Guess Who we played that for a little while she gave use some Bazooka gum but I gave my to Erica because I did not have a taste for sweets. Something I like about her is that she relate to you she don't give me a hard time. Her homework is easy if you try to do it.

Drenika then pulled out some Crayola pencils and drew sky-blue clouds around her heading, "A Reflection." She really likes her seventh-grade teachers, she told me later. "This year they stoop to our level."

The bell sounded, and students turned in their books. For complex reasons involving a lack of lockers, they were not allowed to take books home. Careering past engraved oak signs that adorn the school's foyer—celebrating the Philosophy Club, the Math Club, and other extracurriculars that do not in fact exist at Ron Brown—four hundred and seventy children poured into the streets. Now Drenika was supposed to go to one

"As a company, and as individuals, we are without irony. Will that bother you?"

In the charter school that Elizabeth picked for Dernard—her bookish son—students sat at empty desks, doing nothing.

extracurricular that Ron Brown does offer—track. Instead, she declared she had "growing pains," and she, Erica, and her other best friends headed for the subway station, hot on the trail of Rico, who had been banned from after-school athletics because of low grades.

And there he was, sheepish and handsome on the elevated platform on Minnesota Avenue, whispering in the ear of another seventh-grade girl.

"I heard he was out with a dirty girl . . ." Drenika's friends, loyally, started to sing.

"I don't want him no more," Drenika told them gloomily as the train glided home.

But wait, her friends told her. Look: Rico was in the next car. He was getting off at her stop. And for the next few hours, as Elizabeth pictured her daughter running wind sprints, Drenika was alone with the boy whose name rated prime real estate on the inside of her wrist.

The new anodyne for bad urban schools is "choice." Here, though, giving parents a wealth of educational options sometimes presents a familiar inner-city conundrum: What if all your choices are bad ones? Elizabeth had to obtain special permission to win for Drenika the poor education she's getting now—an education that may well be an improvement over the middle school closer to home. To judge by test scores, it may also be an improvement over most of the twelve publicly funded charter schools that have sprouted up around the Shrimp Boat.

Last spring, I occasionally accompanied Elizabeth to one of these schools. Construction-paper flowers bloomed in its front windows. In the principal's office, there were handsome brochures

Wayne has built, in boxes, a shrine to middle-class life. "He always makes stuff that is," his brother says. "Only, he makes it better."

from the Massachusetts company that runs it. Elizabeth was particularly moved by the school's namesake: a D.C. police officer who'd grown up in the Shrimp Boat and was murdered here.

It was to this promising place—the Robert Louis Johnson, Jr., Arts and Technology Academy—that Elizabeth entrusted her fourth grader, Dernard, who the year before had tested at a seventh-grade reading level and had beaten the daylights out of a boy who had teased him one day in the bathroom. As usual, she joined the PTA, where for most of the year she constituted one-third of the regular attendance.

The Shrimp Boat ten-year-old who gets off track at school greatly increases his odds of not reaching the age of twenty. Elizabeth understands this viscerally. A year earlier, a teen-ager had come pounding on her door. "Miss Cookie! Tank down!" Tank, the seventeen-year-old son of Elizabeth's closest friend in the neighborhood, a kid I'd always found dull and decent, was dying of gunshot wounds behind Elizabeth's house. He had stolen fifty dollars from a female crackhead whose male friend had a street-sweeping Mac 12. Paramedics reported difficulty extracting from Tank's hand his own rinky-dink .38. Younger children on the block expressed dismay at the capture of the killer, who in addition to being a popular neighborhood drug dealer drove an ice-cream truck.

Perhaps Elizabeth should have reconsidered her choice of schools when, shortly after the academic year began, the widow of the dead officer demanded the removal of her husband's name from the enterprise, because she believed the school was mishandling some of its grant money. Or when Elizabeth heard about the rats in the hallways. Or when

Dernard's new teacher—the third of the year—started telling the ten-year-olds unsettling tales from his previous job as a corrections officer at the D.C. jail. But at the public elementary school in her neighborhood, Shadd, sixty-one per cent of students were unable to read—the worst test scores in the city. So it wasn't until the academic year was almost over that Elizabeth gave up, deciding that staying at home for the few remaining days of class was better for Dernard than going to the charter school she had carefully chosen for him.

I went with Elizabeth to pick up his books. In his classroom, ten boys in khakis and maroon polo shirts sat quietly at empty desks. No books, no paper, not even an objective on the blackboard. They stared into space as the teacher sat at his desk doing the same. Elizabeth grabbed Dernard's books, jumped in her Suzuki, and drove maniacally, the air thick with her undetonated anger. "It's like people think that in this part of town we settle for anything," she said.

"I learned," Dernard said later, trying to make her feel better. "I just learned what I learned already."

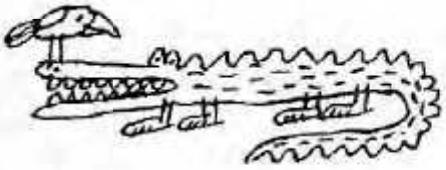
Elizabeth did not feel better. She hated the thought of returning Dernard to the public school she had traded in for the charter, and where, she feared, he had been labelled a troublemaker after his fight. "Like, you know, this other child was having problems in math?" she told me. "An administrator was, like, 'Why? All little black boys know how to count money.' I mean, she already got the boy selling drugs. And, you know, for real I think some of them teachers already got the boy six feet in the ground."

Elizabeth tore through the Shrimp Boat until her fury was contained. Then she pulled to a curb, inhaled, and opened a spelling book that her brainy son had been using that year. Holding it out as if it had landed on her from a great distance, she began to read the words aloud: " 'Look.' 'Took.' 'Good.' 'Stood.' " Dernard. Her reader.

A few feet from where we sat, teenage boys strolled past, wearing the coolie hats that were that moment's high fashion. Shortly after, smoke rose around younger children playing double Dutch on the sidewalk. Someone had set the project's parched hedges on fire. A hook-and-ladder came, along with three police cruisers. Someone spoke of the burning bush and Moses. Elizabeth remained fixed on the paperback speller: "Look," "Took"—evidence of a quieter crime.

In the Shrimp Boat, it is possible to see welfare reform as a Ponzi scheme whose currency is children. You put your children in day care so that you can work, but the only work you may be qualified for, after years of being a full-time mother, is in a day-care center. There you take care of the children of other poor women, many of whom now spend their days working at other day-care centers. This child-swapping has a levelling effect. The children of incompetent parents may receive the nurturing of more conscientious parents, while the children of parents like Elizabeth can expect to be tended by less competent parents. This phenomenon, familiar to the middle class, is particularly unsettling in the Shrimp Boat, where you notice that the operator of a neighborhood crack house, whose own five children were removed by child-protection services, has, thanks to welfare reform, become a caregiver at a Benning Road recreation center. Despite a doubling of federal day-care subsidies, many mothers here make the calculation that Elizabeth made when her children were six, seven, and nine, and her day-care reimbursements stopped. They note the mentholated-cigarette smoke in the infant room and the felony who are monitoring the playground, and decide that the best way to protect their children is to keep them home, teach them how to make grilled-cheese sandwiches, dial 911, and operate the dead bolts on the door.

Therefore Elizabeth was particularly relieved when she found someone trustworthy in the community to look after her children: a slight, goateed mailman who coaches the after-school football team. For five months a year, at a quarter to six nightly, Dernard and a hundred and eighty-four other boys with pad-broadened shoulders spilled forth from Benning Terrace, East Capitol Dwellings, Arthur Capper, and neighborhoods across the Maryland line, and converged on a football field at an abandoned school which became, for two hours an evening, perhaps the District's safest hundred yards. Their volunteer coach, Andre (Jay) Ford, grew up in the Shrimp Boat and has delivered mail for seventeen of his thirty-four years. After walking his five-mile postal round, he comes to the field and coaches kids aged eight to fourteen.



In fact, Andre prefers chess—he can riff for hours on the nineteenth-century master Paul Morphy, whose moves seemed mathematically impossible until he easily defeated his opponents. But, as Andre knows from his Shrimp Boat childhood, football offers a more credible cover for kids who want to grow up to be something other than hardheads. Andre sees the game as a means, not an end, and that is why the least athletic kids on the team get playing time and the stars who skip mandatory tutoring sessions don't. It is also why his coaching points frequently address such athletic imperatives as whether a boy can go blind from masturbating.

A favorite word of Elizabeth's kids is "fake." Some of the fakery that the Shrimp Boat kids see around them is funny, such as how the kids of crackheads wear "I Love Jesus" bowrettes in their hair. Some of it isn't funny, such as how, at a local nonprofit organization, funds meant for computer training financed the living-room furniture of the executive director. (Another of the kids' favored words is "nonchalant": when you get screwed, make like you don't care.) Andre Ford, Elizabeth's kids concur, is not fake, and when they are with him they drop their protective attitude of indifference. Last fall, the city sometimes forgot to mow the field the boys play on. Their fathers sometimes forgot to come to games. But six days a week, as armed drug dealers worked the dark slopes north of the field, occasionally descending to headhunt, the letter carrier materialized on the sidelines to yell "Knees up!" to hundreds of backward-running boys. For much of the season, the high beams of cars served as field lights, and some evenings they made a living palimpsest: the boys' shadows eclipsing and then revealing the foul graffiti on the vacant school's façade.

Andre calls his players the Bison, for the once endangered species that has been nurtured back to health. He grew up with Dernard's father, a smart kid who was an addict by the age of twenty. Dernard, whom Andre calls the Philosopher, was so joyful that he could barely speak the day he realized that the coach knew his name.

"One-fourth of one person in this program will even have a chance at an N.F.L. tryout," Andre tells his kids, "though five might get a scholarship to college." Still, the average Bison believes he will get out of the ghetto by going pro. This belief is fomented by a few of the assistant coaches—recovering addicts and blue-collar jobbers who were once youth-league superstars themselves. But when Elizabeth observed Andre's effect on Dernard she saw possibilities unrelated to athletic achievement. She saw a chance to engage her remote older son.

"Would it be possible to speak with the personality that pays the bills?"

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For as long as I have known Wayne, his bright brother and sister have spoken on his behalf, reflexively translating his needs. For as long as I've known Elizabeth, she has been battling someone or another over Wayne's intellectual and emotional potential. When he was younger and smaller, she had to guess his feelings from his posture, because he didn't smile and seldom spoke. As soon as he was old enough to hold a pencil, he created art—from toy-box assemblages to intricate drawings, which he would throw away as soon as they were finished. He drew, in perfect perspective, terraced cityscapes with steel-and-glass schools and filigreed steeples. He drew vast extended families headed by calm-faced fathers. "He always makes stuff that is," Dernard explains. "Only, he makes it better than it is."

Wayne never had a proper art teacher, but Elizabeth, even at her poorest, kept him in sketch pads. "It's like toilet paper—you just have to have it in the house," she once explained. "He's not himself when he runs out of paper."

Wayne's first teachers said he was fine. Elizabeth remembers the day she stopped believing that. She had been volunteering in his second-grade class and looked over his shoulder during a spelling quiz. "He had numbered his paper," she said, "and all the numbers were backward. His name, what he could write of it, was backward, too. And I just started to cry."

When school officials delayed testing him for special education, Elizabeth worked the Shrimp Boat grapevine; eventually, a Metrobus driver directed her to a nonprofit agency that would assess Wayne for free. He was diagnosed as dyslexic, and spent the next three years in the Shrimp Boat elementary school's lone special-ed classroom, where he was regularly punished for stealing small objects for use in his toy box. "They treated him like a germ," Elizabeth said. "I felt if I couldn't get him out of there he would end up in a group home." But it wasn't until fifth grade that she got an attorney who, pro bono, pushed the school system to review Wayne's case. Psychologists concluded that he had pervasive developmental disorders and probably Asperger's syndrome, which is marked by an inability to make social and emotional connections, and that the District of Columbia's special-ed programs weren't meeting his needs. He was first placed in a "non-degree" special-education academy—a school for children with no capacity to fulfill the requirements for high-school graduation. Elizabeth pushed again, harder. Now, every weekday morning, Wayne takes a bus to a small private high school for disabled children in a Maryland suburb, where his tuition is covered by the D.C. school system, the classes have only six students, and his art work hangs in the hallway.

Wayne began the year by raiding a teacher's handbag, then improved his reading to the third-grade level. "Perceives himself as rejected by others," his current psychological assessment says. "Harbors strong feelings of inadequacy." I read the assessment in a classroom one day while Wayne and an overweight white girl teased each other gently in the hall. He has learned to speak with less fear among his learning-disabled classmates, who are fascinated by the intense, artistic boy from the ghetto. He has never had a friend in the Shrimp Boat, and that is why Elizabeth turned to Andre.

Andre told Elizabeth that Wayne, who weighs a hundred and fifty-two pounds, would have to scrimmage in the top weight class, with the biggest, roughest kids. Both Wayne and Elizabeth worried that those kids would hurt him. The boys themselves worried that Wayne, whom they considered a "retard," would slow them down. Some of them had been playing for Andre since

they were eight, and after so many years together they were ready to get good, let fly. Wayne, as far as anyone knew, had never touched a football. But as Andre enforced rules of civility to safeguard Wayne, and as Drenika the cheerleader levelled transgressors with a highly articulate stare, Wayne mastered the playbook and learned to track the ball down the field.

When Wayne is talking to a patient listener, he is increasingly able to keep up his end of a conversation—a conversation that will tend to be more interesting than those one typically has with thirteen-year-olds in the Shrimp Boat. These talks will be filled with questions that Wayne has suppressed for years. ("What are the schools with the furniture outside on Saturday?" he asked one day, trying to solve the riddle of an urban flea market.) But, in a neighborhood with a shortage of such listeners, Wayne's shame about his differences has increased along with his abilities. At football practice, trying to identify the algorithms of ordinary teen-age life (for instance, how to convey interest in the cheerleader who also plays the violin without being ridiculed by his peers), he was finding that he would rather be mocked outright than be patronized by praise he knew he hadn't earned. Once, in Wayne's presence, Dernard gamely asserted that Wayne was now one of the best Bison players. Wayne yelped as if he'd been kicked, "Don't say that! It isn't true." It wasn't. But Elizabeth's son had willed his way from team joke to second-string lineman who was the first to arrive at practice.

As the season progressed, one of Andre's former players, a young man named SeQuan, was murdered on a Shrimp Boat corner—ten shots and nine bystanders who managed to see nothing. A wide receiver's mother was nearly strangled by her boyfriend on the practice field. A thirteen-year-old defensive tackle whose mother was missing and whose father is dead was found to be raising himself, his guardian grandpa having grown senile. And the Bison won game after game.

In the third quarter of a late-season game against Woodland Terrace, with the Bison up by six, the quarterback called a play and Wayne double-checked with his teammates the jersey number of the player he was going to block. The other Bison fell silent, then started to clap. It was the first time they had heard him speak.

Dernard earned an A-plus at his new public school for a writing assignment on his favorite things: "Jordans, Garnetts, Pippens, Paytons, Flights, Timberlands, and Flight Posites." Emboldened, he bore down one November afternoon on "The Mouse and the Motorcycle," by Beverly Cleary. It's a book about a boy who befriends a mouse while living in a luxury hotel, and Dernard was somehow able to wrap his imagination around room service and croquet mallets and antimacassars on overstuffed armchairs. What he couldn't get was why anyone would want a mouse in his room. "Like it was infested?" Then he considered his own lack of companionship. If a boy was sufficiently lonely, he concluded, a mouse would be acceptable to talk to.

Later that rainy night, Elizabeth, sufficiently lonely, called me: "Michael and me, it's over." She was thirty-one and a mother of three, and Michael was the only man she had ever been on a date with—"to the movies, a walk in the park, you know." For five years, he had been her on-and-off boyfriend and her all-time hope for marriage, a permanent means of easing her children's loneliness, as opposed to the short-term Coach Andre solution. "I don't have time in the day to start all over," she said, sighing.

The men who fathered Wayne, Dernard, and Drenika live close to the Shrimp Boat and claim vast regions of the children's psychic maps. But they are all, practically speaking, absentee, with the intervals between their visits often measured in years. Welfare reform has spawned tough new laws to help mothers extract child support from such fathers, and with renewed hope Elizabeth has appeared in court ten times over the past eight months to try to secure from the three men the combined total of a hundred and ninety dollars a month they've been ordered to pay. So far, she has collected nothing, which is basically what she has collected for the last thirteen years. Only thirteen per cent of the city's female-headed households receive alimony or child support, according to D.C. government figures.

Wayne's father was an older guy who picked Elizabeth up after junior high

SHOWCASE *In their book "No Ordi*
man's effect on such exotic landscapes as Ice

had let out for the day. Drenika's father, a crack user, faded from the picture soon after the New Year's Eve on which the baby was conceived. Elizabeth was twenty-one when she left Dernard's father, who had stayed in her life just long enough after her son was born to earn a conviction for assaulting her. Bruised and battered, she looked at her three babies in diapers and found a doctor willing to tie the tubes of a twenty-one-year-old. She gave up on men for five years. "I felt so deep in this hole I didn't want to be in," she said. She took self-esteem classes, then two courses in parenting skills; she focussed on life beyond her living-room couch. And then she met Michael, who seemed compatibly committed to self-improvement. At that time, she was trying to get work experience by volunteering at a community-development agency. He passed her desk daily on his way to Narcotics Anonymous. He was two years clean, went to church, worked maintenance. Unlike most of the men she met, he had never been to jail. One day, he appeared at her desk with a Hershey bar. "That was when I decided to recognize him," she said.

In the five years that Elizabeth had been seeing Michael, he had never given her his home-telephone number. "Still," Elizabeth said, "it was a step up from before." Indeed, if Michael hadn't helped with her children when she had to live for a month at the police academy, she probably wouldn't have made it through the course. Then again, he didn't show up for her academy graduation. When she wondered whether she could afford the house outside the projects, he said he'd help with the rent. He agreed to her idea that they attend a six-week marriage-prep course at the Free Gospel Church. But he never asked her to marry him.

"You know how you remember little things?" Elizabeth said. "I keep thinking about that day when I see at the Marlo Heights theatre there's a dollar movie, 'Air Bud 2'—it's about a dog—and kids get in free. I said, 'Hey, let's take the kids.' And he was just, 'I don't want to.' I mean, I didn't want to, either—nobody grown wants to see 'Air Bud 2.' But it's not for us—it's for the kids. That's being a family. You just go."

Michael had also resumed his crack habit. One autumn night, as Elizabeth returned home from the funeral of a murdered law-enforcement colleague, Michael, who for weeks had been ignoring her attempts to page him, called to ask if he could come over. She said no. And there he was, banging on her doors and windows, and, as much as she hated the thought of putting her private life in play at work, she called the police. Now, in November, Michael wanted to reclaim the stuff he had contributed over the years to her household: the shelves that hold her kids' school trophies; the framed print in the living room of an interlocking African man, woman, and child.

The idea of marriage is relatively new in the Shrimp Boat, where for decades even love was something a woman lied about to caseworkers and talkative children. The old welfare system targeted assistance to single parents, so a woman who married, or even cohabited, usually lost her benefits. The 1996 reform law aimed to encourage two-parent families by removing such economic disincentives, but there is little evidence thus far that it has had an effect, which does not surprise in the Shrimp Boat. Lately, the playlist at WKYS, "the people's station," is thick with odes to the newly self-sufficient woman. "All the honeys making moneys, / Throw your hands up at me," goes a Destiny's Child song that Elizabeth favors. To which the Cash Money Millionaires offer an emphatic male counterpose: "Give me a project chick. / Give me a hoodrat bitch, / One that don't give a fuck."

Elizabeth said, "I know how a typical family is supposed to be—man, woman, children, the man first. But I've been raising kids by myself for thirteen years. It's hard to take off the in-charge hat and put on the submissive-woman hat. There were things I should have done different—" She stopped herself. Heartbreak is a luxury. Last year about this

"Gimme a hand—I'm stuck."

time, her partner at work, a guy who believed in her potential and taught her most of what she knows about being a cop, killed himself over love trouble. Elizabeth sank into depression. "I can't go there," she said now. "I can't hover over it and say, 'Oh, I'm so sad.' "

One afternoon, between a security gig at a McDonald's and a trip to the football field to watch her children practice before she headed to roll call at the station, Elizabeth went online and was instant-messaged by a police officer in Texas. He had read her profile on A.O.L. and was "quite interested in getting to know you."

She had to laugh. Her kids want a father, yesterday. Michael had placed himself in rehab, but her bride-of-Michael fantasies were finished. With her schedule, where but in cyberspace could she unearth a husband?

"Whazzup with U?" she tapped back. Ghetto giveaway. From the other end, silence.

A cold front was coming to the Shrimp Boat. A bullet hit the window of a seventy-five-year-old neighbor of Cookie's as she was sitting down to Thanksgiving dinner; outside, a twenty-year-old was dead and three others had been shot in a drive-by. Three health inspectors testing a creek at the project's edge explained to a fifteen-year-old the aquatic ecology of the inner city, after which the boy robbed two of them at gunpoint and raped the other. Cops grumbled about a new annoyance on the streets: teen-agers who choose not to participate in that rite of passage known as getting a driver's license until they're pulled over and sent to chill in the Benning Road lockup. I met a loquacious six-year-old, Anthony, standing sentry over his father's van, which someone had broken into, leaving behind the bladeless shaft of a knife. "That's where they raped the girl and then they took an eraser and erased all the blood," he explained. We talked at length about his aims for his first-grade year, which hadn't begun because his mother had forgotten to enroll him, but when I happened upon him again, an hour later, he was stunned that I recalled our previous encounter. Elizabeth's kids, I was reminded, are the lucky ones.

Coach Andre, watching those lucky kids, was growing worried about Drenika. "It's tough for boys out here, but it's tougher for girls, and this girl is on fire," he said one day. "Here's a child, not even a teen-ager, who looks older than she is, who needs her mother to be there. And here's a mother who needs to work. And nowhere is the father. When you grow up in a house where your dad is buying you stuff and telling you he loves you, you don't fall for the okeydoke that comes from other guys. But when you don't get attention from males at home, some guy'll say, 'Damn, you got a nice one,' and that'll sound so good. You begin to peel a little more off, wear the booty shorts, get a little more attention. And sad as it is, and try as Cookie does, Drenika is getting out there. She's being fattened up for the kill."

One night at eight, not long after Drenika's twelfth birthday, Elizabeth called from work to learn that her daughter hadn't come home from school. Elizabeth fled the station, panicked, recalling her own sexual initiation at age thirteen: the walk home from school, the two men on PCP, the fist to the mouth, the chill of the laundry-room floor. Elizabeth pounded on the doors of Drenika's friends—Stevie Wonders, all. She drove up and down the Shrimp Boat's streets. As eleven o'clock approached, she turned onto B Street and found her daughter leaning up against a wall with Rico.

Elizabeth put Drenika on total after-school lockdown: "You get enough air to breathe, but the rest belongs to me." Then she marched to Rico's house, where she encountered a boy far less tough than she expected—a kid whose own mother worked, a kid somewhat disoriented by the raft of girls at his disposal. "It's like I just don't know how to say no," he told her. She felt a frisson of sympathy, and then she scared him within an inch of his life. "You go on and be a player, but you make sure it's not gonna be with Drenika," she told him. "Or when you next see me walking toward you, you had better raise up and run."

She persuaded her superiors to give her the 11:30 P.M.-to-6:30 A.M. shift, which is already overpeopled with single mothers trading sleep and safety for evenings with their children. After a brief reprieve, though, she was returned to 7:30 P.M.-to-4 A.M. duty. She got her first gray hair and didn't pluck it—"This one's yours," she told Drenika. And she went to bed many mornings second-guessing her choices. If she keeps working, will she look back on these years and find she made a minimal living by mortgaging the future of her daughter?

And what about Wayne, whose mind is on fire—whose presumptive slowness now seems more like Edwardian reserve? He wants to learn about the Kennedy Center, the Capitol. He wants a mentor to "teach me the stuff about being a man." He does not want to hear that there are waiting lists for mentors at the programs Elizabeth has called. He has been waiting too long already. And then there's Dernard, smart Dernard, who the coaches say is so starved for attention he's been picking fights at practice, and who sometimes climbs into Cookie's bed on her days off, as he did when he was four. "Is there a pill to stay little?" he asked one day. " 'Cause if there was, I'd eat the whole pack."

One morning, it occurred to Cookie that she had ten years of raising teen-agers ahead of her.

The standard reward for academic achievement in the ghetto is a chrome-plated trophy. It is athletic achievement—even peewee athletic achievement—that reaps the windfall, and in November the Bison won the D.C. midget-football championship. Then they went to Baltimore, where they just managed a victory in the tri-state, and where the defeated team's fans slashed their tires. On to Pennsylvania, where they beat an East Brunswick, New Jersey, powerhouse in the regionals. Thereupon a fantasy about which Shrimp Boat kids speechify at Junior Toastmasters and confide in their journals suddenly became real: the Bison had earned a December trip to Orlando, Florida—the place where, as Dernard put it, the oranges grow up—to compete in the national youth-football championships at Disney World.

This was, from a parental perspective, problematic, as the Bison had no money to get to Orlando. But Cookie and the coaches put the screws on the Shrimp Boat, and a retired cop, a government-worker uncle, a shoe store, and a community-development organization came through with enough for a bus ride: thirty-six kids, fourteen hours, four cans of Arm & Hammer

air freshener. On the first half of the journey, cheerleader Drenika rued the loss of Rico, who, after meeting Cookie, had decided to focus his charms on another seventh-grade girl. On the second half, she began a romance with another boy named Rico, a six-foot-tall guard. Dernard, the water boy, absorbed the information slipping past his window on the first overnight trip of his life. "I never been nowhere but maybe to Virginia once," he said, "so I gotta see everything there is." Elizabeth, team chaperon, was so happy for Wayne that she forgot to fret that the loss of income from her part-time job would mean a lean Christmas. And Wayne himself studied a line drawing materializing in his sketchbook: a minutely realized modern high school encircled by a low boxwood hedge.

Upon arrival in Orlando, Drenika got sunglasses that were dappled like the 102nd Dalmatian. She pushed them up on her forehead and squinted: Christmas lights snaking up the trunks of palm trees, topiary shaped like mouse ears. "We ain't playing now," she said. "This be Disney World for real."

On the Disney playing fields, the Bison promptly provided a return on the Shrimp Boat's investment, crushing a North Carolina team in the quarterfinals, 33–6. In the semifinals, they beat a suburban Illinois squad whose tradition has been celebrated by Wheaties. That put them in the Pop Warner Super Bowl, the ne plus ultra of peewee football. There Andre Ford's team would meet a Miami juggernaut that was undefeated for the last two seasons and had a Web site unofficially sponsored by a law firm.

After sessions on the practice field, the Bison slept four to six to a motel room while Andre lay awake in his room, mentally totting up receipts. Other teams carbo-loaded at Western Sizzlin; the Bison woke up to Fruity Pebbles that Elizabeth bought in bulk at the Orlando Wal-Mart. But even the hardest-faced Bison found themselves grinning. Prep-school and college scouts had gathered; ESPN was filming. The Shrimp Boat kids had come to Disney, where bubble gum has been outlawed for its crimes against clean sidewalks, to have their existence widely acknowledged. Don't say *if* we win, they told me. Say *when* we win.

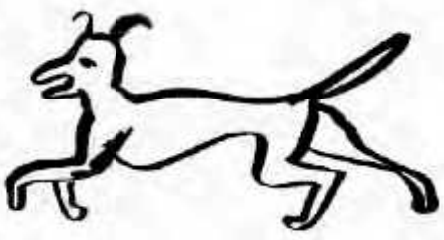
The night before the Super Bowl, the league held a pregame party for the country's best junior football players and cheerleaders. On the way to the event, the Bison visited a gift shop, where, when they entered, every other customer exited and every clerk and manager closed in. It was unclear whether this reaction was a response to their size, their do-rags, the rubber boa constrictors around their necks, or just their jerseys, which, in the absence of laundry funds, were ripe from the playoff games.

The Bison walked into the party acutely aware of their own smell. At the sight of them, their counterparts from the rest of America started to shriek with unbridled approval. "Follow them Bison boys!" they cheered. "D.C. knows how to party!" It was a momentary astonishment to the Bison that the kids of Tucson and Honolulu and Toms River covet their hard-core culture, or fetishize the store-bought version, anyway. Shrimp Boat music—Jay-Z, OutKast—blasted from the soundstage.

"It's like everybody want to be us," a Bison wide receiver named Joe said as a Louisville girl snapped his picture. But full contemplation of this phenomenon was deferred by an undulating mass of cheerleader tweens. Assessing the situation, Wayne asked me for an Altoid.

"Every time you wobble wobble it gets me horny / So I can ride that ass from the night until in the morning. . . ." As Cookie and I danced on a trembling picnic table, we could look down through the manufactured smoke on Shrimp Boat kids getting loved up by girls in spaghetti straps, orthodontics, and glitter-smeared cheeks. Jealous athletes from other teams raised voices and fists. At home, the Bison would not have let such disrespect go unaddressed. But at Disney they kept dancing.

The smoke made everyone look younger, and nothing that happened that night seemed to suggest that the game was rigged against the ghetto kids' future. I thought about what Ralph Ellison called the unexpectedness of the American experience—great achievements that emerge from conditions of profound implausibility. One of the dancing Bison, a thirteen-year-old named Michael Howard, had earlier that evening told me a secret. He'd read a story called "The Tell-Tale Heart." It made no sense, but he couldn't shake all that pounding under the floorboards. So he read it again, and this time broke through the clots of language. Clear as day: the pounding was the guy's own conscience. Michael had felt his mind at work, and liked it.



Observing the mingled limbs and sympathies of the youth cultures of Shrimp Boat and suburbia, I imagined that all these children were, in the end, more alike than not—that violence and parental absence and low expectations do only superficial damage; that Shrimp Boat kids might prove competitive in the post-welfare meritocracy by dint of sheer desire. By the time the d.j. veered into "Y.M.C.A.," I was deep in the pudding of Shrimp Boat/football-coach/Disney-ad affirmation. Not *if* we win, *when* we win. What you believe you can achieve.

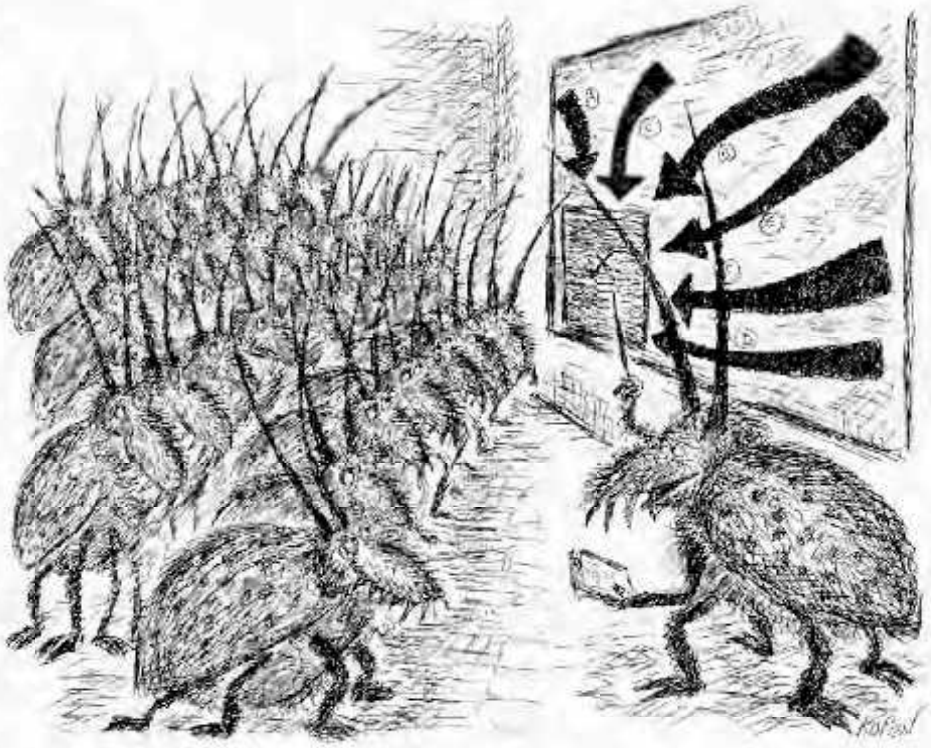
Andre reined in the Bison early for a good night's sleep before the game. As Dernard walked out of the theme park, his face tightened and he grabbed my hand. A small red pool was spreading across the sidewalk. Melted Popsicle, I offered. He crouched, dipped a finger, resumed breathing.

The next morning, after the N.F.L. film crew miked up the Bison center, Wayne marched proudly onto the playing field in a column of chanting, grunting boys. Four-foot-ten Dernard shouldered an equipment bag as large as he was. Drenika and the other cheerleaders, wearing T-shirts under their sleeveless uniforms in the name of modesty, sang at the top of their lungs, "So good to be a Biiii-son . . ."

The Shrimp Boat kids knelt, held hands, and dedicated the game to God. Then they went out and got obliterated. At the half it was 40–6. Wayne, his arm bloodied, hopelessly chased a Miami back with world-class speed and Division I coaches already plotting his future. The Bison's best back, a boy named Speedy, who wore the T-shirt of his murdered cousin beneath his jersey, sobbed until he hyperventilated. Eliza-

beth, on the sidelines, struggled not to follow suit. "We ain't got this far for nothing," pleaded tackle Curtis Lynch, trying to rally his teammates as eye black streamed down his own cheeks. "We got here. It must mean something." The assertion came out as a question. In the third quarter, Pop Warner mercy rules kicked in, and the referees ran out the clock.

The Bison had thought positive, tried their best, but were not good enough. Afterward, Andre told them so. "You know what champions do?" he said. "Champions get better." The boys, stripped shirtless, seemed smaller now, and the saddest among them mourned more than the loss of one game. Most had played under Andre for the last time. Today, the children aged out into a harsher world. They packed their dirty gear into garbage bags. They loaded the bus and left the Magic Kingdom for the Shrimp Boat, bits of girl glitter still shimmering on their skin.



"Today's objective is the genetically modified corn in this quadrant."

• •

Sometimes Cookie thinks about what her life would be like if she hadn't left welfare. This speculation requires a tolerance for ambiguity. She wouldn't have had the clarity and confidence she has now about what she wants for her children—to finish high school without having children and to go to college—but she might have had more time to help them reach those goals. She would have been a better day-to-day mom but a lousier role model, particularly for Drenika. "Still," she said one day, "it's too hard not to think sometimes about a life where I could have real time with Wayne, to read and really help him with things. You can't just schedule him in for half an hour in between jobs, the way I have to do now—he just doesn't work that way. There'd be time to help them all with homework, answer Dernard's million and two questions, do family things—like make a meal together, me and Drenika, instead of calling her in for a catch-up conversation when I'm taking a shower. I could take them to church more—we totally just don't go anymore, with my schedule, but that's no excuse, not really. We could communicate. We could be a family. I mean, I'm not saying we're not one now, but it could be like in a book."

Drenika was listening from the other end of the dining-room table. "A family like in a fairy tale?" she asked. For a moment, she sounded very young.

In January, during the Inauguration of George W. Bush, Officer Elizabeth Jones worked crowd control over demonstrators for twenty-four hours straight, most of those hours in icy rain. She spent the next four days in the hospital with a hundred-and-four-degree fever and chest pains, after which she resumed her two jobs and started a remedial-math class, in order to better help her kids with their homework.

Drenika, who failed geography in the first half of seventh grade, was, at the start of the second half, thrown to the floor at school by a boy who had previously run over the assistant principal with a stolen car. She kept it to herself so as not to worry her mother, for whom she continued to run an efficient household.

Dernard, at home, discovered Harry Potter and invented an imaginary companion named DreSean. At school one day, shortly after failing art because a teacher misplaced the tepee he had built out of twigs, he was assigned to hide an old computer under a table as a teacher sprayed Lysol around the classroom. "They said the First Lady was going to pay a visit, and I guess the school didn't look so well," Dernard explained. The First Lady didn't come. Three weeks later, the school was scrubbed again. This time, President Bush himself arrived. As network-news crews filmed, he read the children a story about a poor black boy who loved learning and grew up to be a great leader.

"I'd say he was nice, almost like a regular man," Dernard said. "But why doesn't our school have to look right on all days and not just some days?"

Wayne continued to progress markedly in reading at his school, where his therapists are coming to believe that his gravest disability was being ostracized by his peers. The child once considered retarded is in fact bright, they say—a real striver—and will soon be ready for full-scale mainstreaming. This astonishing achievement will end Wayne's special-education funding and send him back to the public schools of the Shrimp Boat. At home, he started a diet, hoping to grow smaller and reclaim a position on Andre's team. He began as well to disassemble his toy box, in an effort to force himself further into the realer world outside his door. Then he realized he wasn't ready, not just yet. •

FIVE EVILS: MULTIDIMENSIONAL POVERTY AND RACE IN AMERICA

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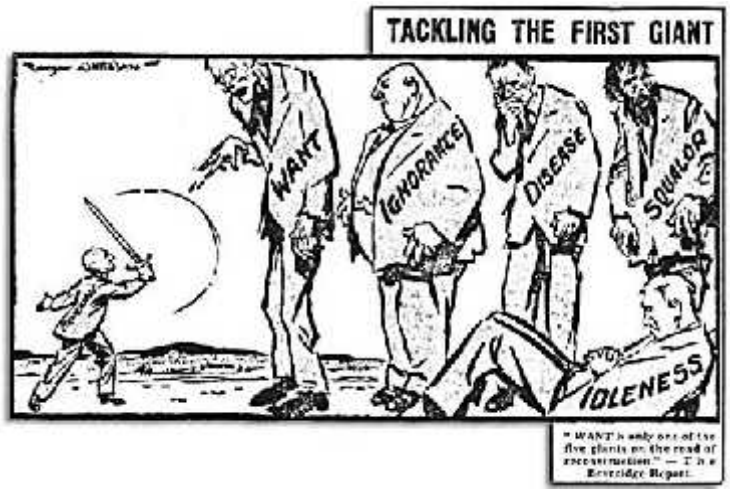
The Brookings Institution
April 2016

Metropolitan Policy Program at BROOKINGS

Center on Children and Families at BROOKINGS

Introduction

In 1942, at the height of the Second World War, the British academic and former civil servant William Beveridge issued a report titled *Social Insurance and Allied Services* (1942). Already preparing for peace, Beveridge identified "Five Giant Evils" that needed to be confronted and defeated once the war was won. These five evils were "squalor, ignorance, want, idleness, and disease." Beveridge believed that all five had to be addressed through concerted government action, with improved housing ("squalor"), universal secondary education ("ignorance"), income transfers to the poor ("want"), full employment ("idleness"), and a national health service ("disease").



Sales of the full Beveridge report broke 100,000 within a month. When a more accessible summary was produced, a further 600,000 copies were distributed. Beveridge, a soft-spoken academic, became a household name. His plan became the animating vision for post-war British society. Although a Liberal,[1] Beveridge helped prepare the ground for the Labour Party's victory in 1945 and the resulting creation of the National Health Service, universal school system, and social insurance schemes for the unemployed and elderly.

Beveridge's report was not only about poverty in the narrow sense of lack of income, or "want," but also about poverty and disadvantage as broader concepts. He understood, in other words, that disadvantage is *multidimensional*.

This insight remains a useful one. There is a continuing, mostly facile debate over whether the U.S. won or lost the War on Poverty declared by President Lyndon B. Johnson more than five decades ago. But among its other problems, this argument is often restricted to a narrow, income-based conception of what it means to be poor. Of course poverty is about a lack of money. But it is not *only* about that. This is one reason many other labels are used: disadvantaged, vulnerable, at-risk, low-skilled, economically insecure, socially excluded, and so on. Poverty as a lived experience is often characterized not just by low income, but by ill health, insecurity, discomfort, isolation, and lack of agency.[2] In practice, of course, the various dimensions of poverty often go together. A lack of paid work almost always means a low income, which can induce stress that leads to health problems, make accessing health care more difficult, and so on.

Many politicians, in different ways, argue for a more equal society. But as famously asked by Amartya Sen (1979), the real question is: "Equality of What?" There are hundreds of ways in which equality (or inequality) can be defined, specified, and measured. One way to judge inequality in a society is by assessing the degree to which certain social and economic hardships overlap with each other. "A society of equals is a society in which disadvantages do not cluster, a society where there is no clear answer to the question of who is the worst off," argue Jonathan Wolff and Avner de-Shalit (2013) in their book *Disadvantage*. "To achieve this, governments need to give special attention to the way patterns of disadvantage form and persist, and to take steps to break up such clusters."

To the extent that different dimensions of poverty or disadvantage can be "de-clustered," their overall impact is blunted and society can be considered more equal—even if the level of inequality on the individual dimensions is unchanged. A person who is income-poor but who graduated high school, lives in an economically mixed neighborhood, and has a job and health insurance is less disadvantaged—less "poor" in multidimensional terms—than someone with the same low income but with no job, no diploma, no health insurance, and a home in a very poor neighborhood.

In this paper we take up Wolff and de-Shalit's challenge and examine the clustering of five dimensions of poverty, roughly based on Beveridge's five evils: low household income, limited education, lack of health insurance, concentrated spatial poverty, and unemployment. We'll pay particular attention to differences by race. In an upcoming paper, we will focus on geographical patterns.

Our hope is that a richer, multidimensional formulation of the problems of poverty and disadvantage, and in particular the way disadvantages cluster together for certain people or groups, or in particular places, can help to inform policy.

The main thrust of policy will be—and should be—to try and reduce the number of people who are disadvantaged on each of these and other dimensions. Our point is simply that it is important to consider ways to *de-cluster* as well as to *reduce* disadvantage. These goals are perfectly compatible. Policy ought to aim at lowering the proportion of people who face disadvantage X and the proportion of people who face disadvantage Y. But it should also aim at lowering the correlation between X and Y.

The clustering of disadvantage and multidimensional poverty

There have been previous efforts by other scholars to examine multidimensional poverty, including the creation of a neighborhood-based Child Opportunity Index[3] (Acevedo-Garcia et al. 2014), and a

handful of other specific attempts to construct a multidimensional poverty measure in the U.S. (see Appendix A for a table showing the dimensions, specific indicators, and data sources used in five previous studies).

Koohi-Kamali and Liu (2014), who restrict their analysis to Pennsylvania, find high rates of multidimensional poverty among black and Hispanic single mother households. Wagle (2008) differentiates between three broad categories of poverty: what he labels "economic wellbeing poor," "capability poor," and "social inclusion poor." He finds that the risk of being "deeply poor" (i.e. disadvantaged on at least two of the three) or "abject poor" (all three) is much greater for black, Hispanic, and Native American respondents. As he concludes:

> The multidimensional approach…does not just assess poverty status. It assesses the state of human well-being by focusing on 'what one has,' 'how much prospect one has,' and 'how much advantaged or disadvantaged one is in society.'

Dhongde and Haveman (2014) also found significant variations in multidimensional poverty by race; Asian residents suffered from multidimensional disadvantage most frequently, partly because the authors included indicators for "crowded housing" and "lack of English fluency."

Scholars studying multidimensional disadvantage lean heavily on the work of researchers in the human development field like Sabina Alkire and James Foster (2007). The multidimensional approach has been influential in a number of countries (OPHI 2014), but so far has received less attention in more advanced economies. This is unfortunate, since there is growing dissatisfaction with traditional, narrowly income-based measures in many nations, including the U.S. and the UK. There is a danger, however, of going too far the other way, and casting the net too wide. Interpreting a long list of indicators can be difficult.

Five dimensions of poverty

We attempt to steer a middle course between narrowness and complexity and adopt five dimensions of poverty using the 2014 American Community Survey Public Use Microdata Sample (ACS PUMS). Our dimensions and thresholds are as follows:

1. LOW HOUSEHOLD INCOME

While poverty is not just about income, income is still important (a lesson lost on the UK government, incidentally, but that's another story[4]). For our purposes, respondents are considered poor in terms of income if they are in a household below 150 percent of the federal poverty line (FPL). Why 150 percent of FPL rather than the FPL? Because the FPL is too low—in 2015, $24,250 for a family of four.[5] When it was set in the 1960s, the FPL was close to 50 percent of median

income. Today, because it has only been adjusted for inflation, it is closer to 30 percent of the median (Smeeding et al. 2011).

2. LIMITED EDUCATION

Lack of education inhibits life chances, earning opportunities, and economic security. In the modern labor market, for example, people without a high school diploma are typically at a sharp disadvantage. We therefore adopt this threshold for our analysis. We also include those with GEDs as disadvantaged, since these appear to be less valuable than traditional diplomas in the labor market (Heckman and Rubinstein 2001; Heckman, Humphries, and Kautz 2014).

3. NO HEALTH INSURANCE

Ideally, we would construct a measure of ill health as one of our dimensions of disadvantage. The ACS contains questions about disability status, such as blindness, deafness, self-care difficulty, and ambulatory difficulty.[6] But we define a lack of health insurance, either public or private, as our third dimension of disadvantage. This is for two reasons. The first is that disability is potentially subjective; it could also omit other forms of ill health, like diabetes, asthma, hypertension, or high blood pressure. As a binary measure, health insurance coverage is also more similar to our other dimensions. And insurance status captures many aspects of health-related disadvantage that we want to capture. Lacking insurance exposes people to greater health and financial risks in the event of illness. Research also suggests that the uncertainty associated with uninsurance creates ongoing psychological stress for families.[7]

4. LOW-INCOME AREA

Living in a high-poverty area puts people at a disadvantage, above and beyond their own household's income-poverty status, because of local factors like the quality of schools, social capital, job connections, and crime.[8] For the purpose of our multidimensional measure, we define disadvantage as living within a Public Use Microdata Area (PUMA)[9] where poverty exceeds 20 percent (here using the standard FPL). PUMAs are statistical geographies created by the Census Bureau. Each contains roughly 100,000 people. In dense New York City, PUMAs are about the size of zip codes; in Dallas, PUMAs encompass three or four zip codes; fewer than 10 PUMAs cover all of sparsely-populated South Dakota.

5. UNEMPLOYMENT

Employment brings advantages above and beyond current income, including the prospect of a higher income in the future and a sense of purpose and structure. Of course not all adults need to have a job—especially in a household with caring responsibilities—but it is better to be in a working family than a jobless family, even apart from the obvious economic implications. Our respondents are therefore considered disadvantaged if no one in their household between 25 and 61 is employed.

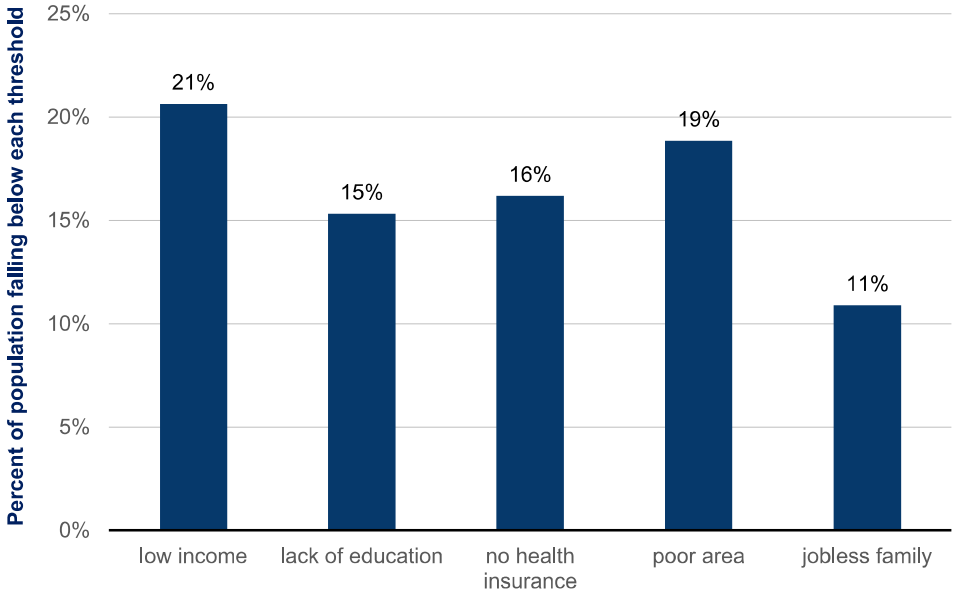
All our dimensions are captured at a particular point in time. What is therefore missing from our analysis is a measure of persistence. It is one thing to be temporarily low-income, or jobless, for example, but quite another to be in that position for many years.[10] We hope in future work to include time and persistence in our measures of multidimensional poverty.

How much multidimensional poverty?

Using one-year estimates from the American Community Survey data for 2014, we first calculate the percentage of people falling below each of these thresholds in the general adult population. Our sample consists of resident adults aged from 25 to 61 inclusive.[11] This group can reasonably be considered the prime working-age population, between the years typically required for full-time education but before the age at which social security can be claimed (Burtless 2015).

The proportion of the adult population classified as poor is broadly similar on each of the dimensions, using the thresholds described above. The slight exception is the risk of living in a jobless household, which is somewhat lower, at 11 percent.

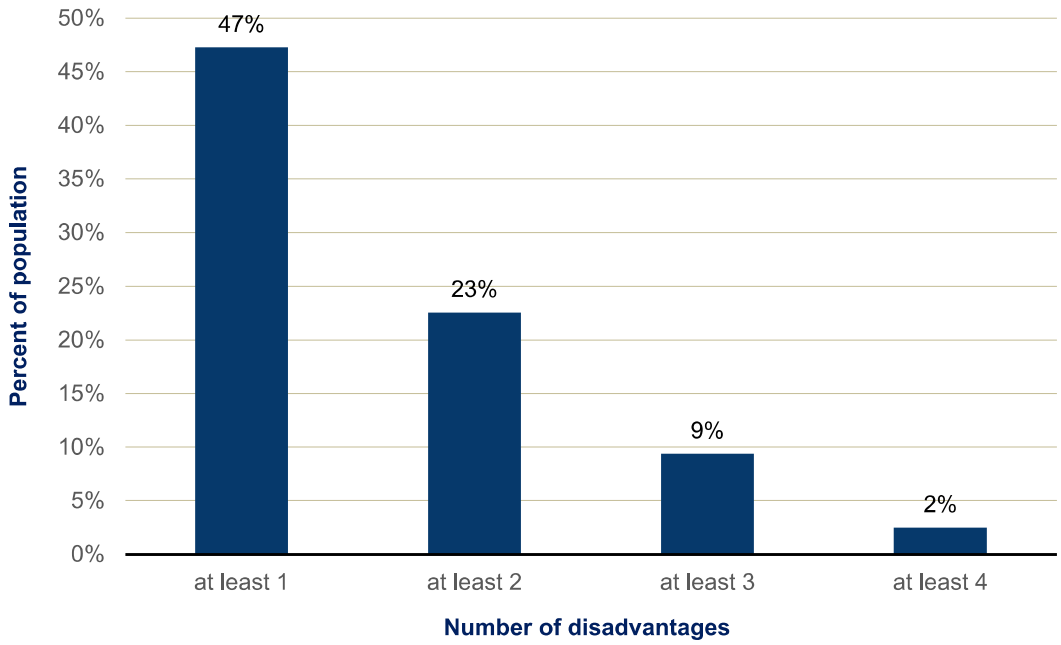
Figure 1. The five evils of poverty



Source: Author's tabulations of 2014 ACS 1-year estimates

Our primary motivation is to measure how often those who are poor on one dimension are also poor on other dimensions—in other words, how often disadvantages cluster together for particular individuals and families.[12] Almost half the population suffers from at least one of our five disadvantages. Almost a quarter have two or more disadvantages, and almost a tenth have three or more. Few (just over 2 percent) suffer from four or more.

Figure 2. Half face at least one disadvantage



Source: Author's tabulations of 2014 ACS 1-year estimates

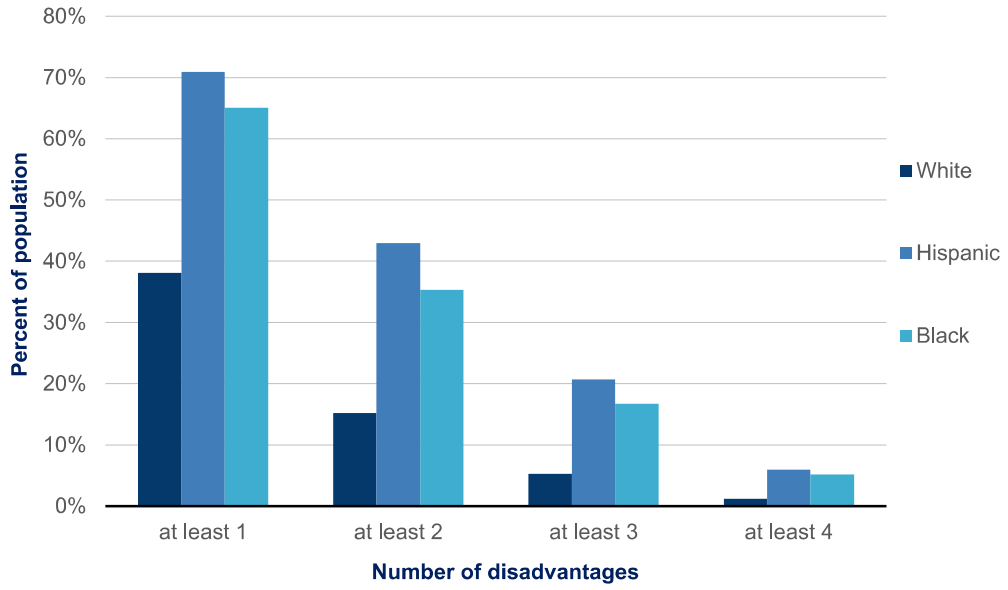
The proportion of the population who are disadvantaged on all five dimensions is so small—less than 1 percent—that we do not report results for this group. On the face of it, there is some encouraging news here. While disadvantages do cluster together, a relatively small proportion of overall population suffers from more than two disadvantages at the same time.

Large race gaps in multidimensional poverty rates

But there may be different risks of multidimensional poverty for different groups or different geographical areas. In what follows, we examine racial differences in the extent to which the dimensions of disadvantage cluster together.

There are marked differences in multidimensional poverty rates and patterns by race. Most blacks and Hispanics are disadvantaged on at least one dimension; most whites are not.[13] (We do not report results for Asian Americans here, but they are almost identical to those for whites).[14] Most whites who are disadvantaged on one dimension are not disadvantaged on any others. By contrast, most African Americans and Hispanics who are disadvantaged on one dimension are also disadvantaged on at least one more.

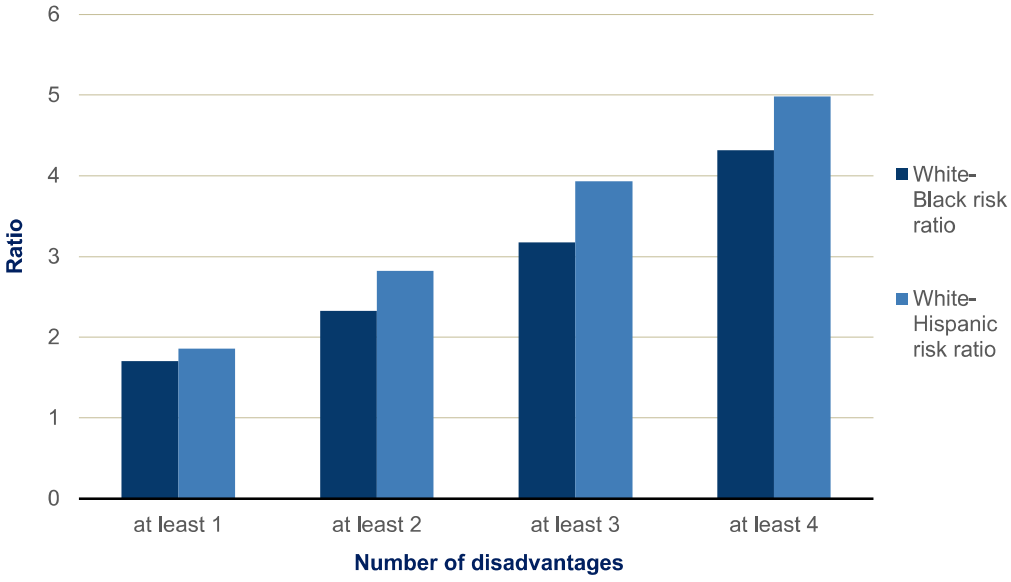
Figure 3. Blacks and Hispanics face more disadvantages



Source: Author's tabulations of 2014 ACS 1-year estimates

Multidimensional poverty, then, is clearly much more common among blacks and Hispanics. While the percentage of all groups with many disadvantages is obviously low, the absolute numbers are not trivial; more than 3 million black and 5 million Hispanic adults suffer from at least three disadvantages. A different way to illustrate this stark race gap is in terms of the relative risk for African Americans and Hispanics of being disadvantaged on multiple dimensions compared to whites.

Figure 4. The more dimensions of poverty, the bigger the race gap

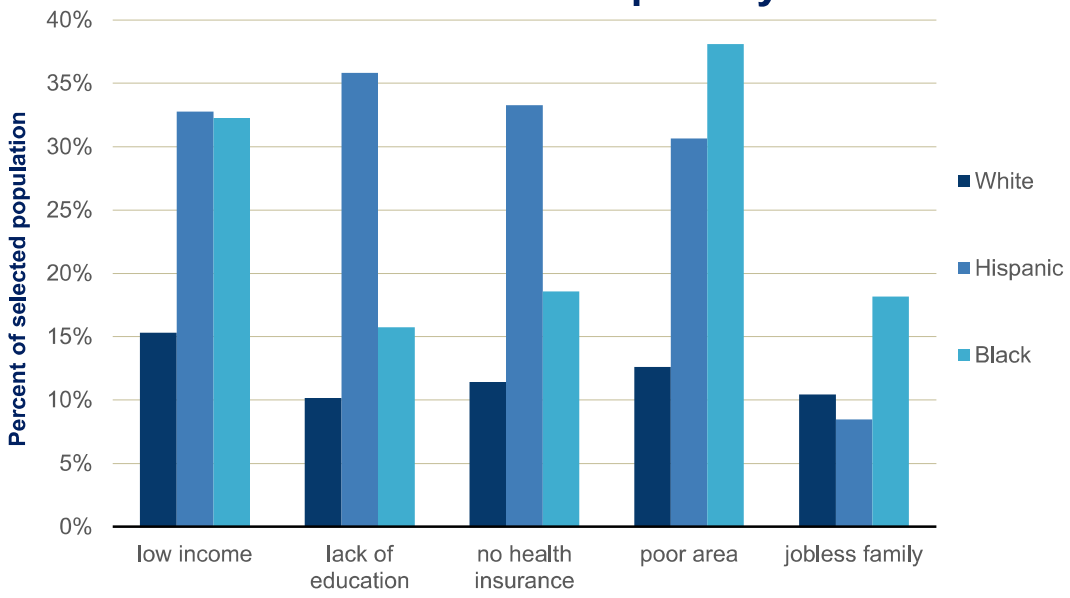


Source: Author's tabulations of 2014 ACS 1-year estimates

With each additional dimension, the relative risk for blacks and Hispanics rises by roughly a factor of one. Compared to whites, blacks and Hispanics are twice as likely to be disadvantaged on at least two dimensions; more than three times as likely to be disadvantaged on at least three dimensions; and more than four times as likely to be disadvantaged on at least four dimensions. Blacks and Hispanics are more likely to experience disadvantages piling on top of each other.

But while Hispanics and blacks have similar rates of multidimensional poverty, the specific clusters differ. The rates of income poverty (using our 150 percent FPL cut-off) are virtually identical (32 percent and 33 percent), and more than twice the rate of white income poverty. But while black Americans are more likely to be jobless and/or live in a poor area, Hispanics are more likely to have a lower level of education and/or lack health insurance.

Figure 5. Black and Hispanic differences in multidimensional poverty



Source: Author's tabulations of 2014 ACS 1-year estimates

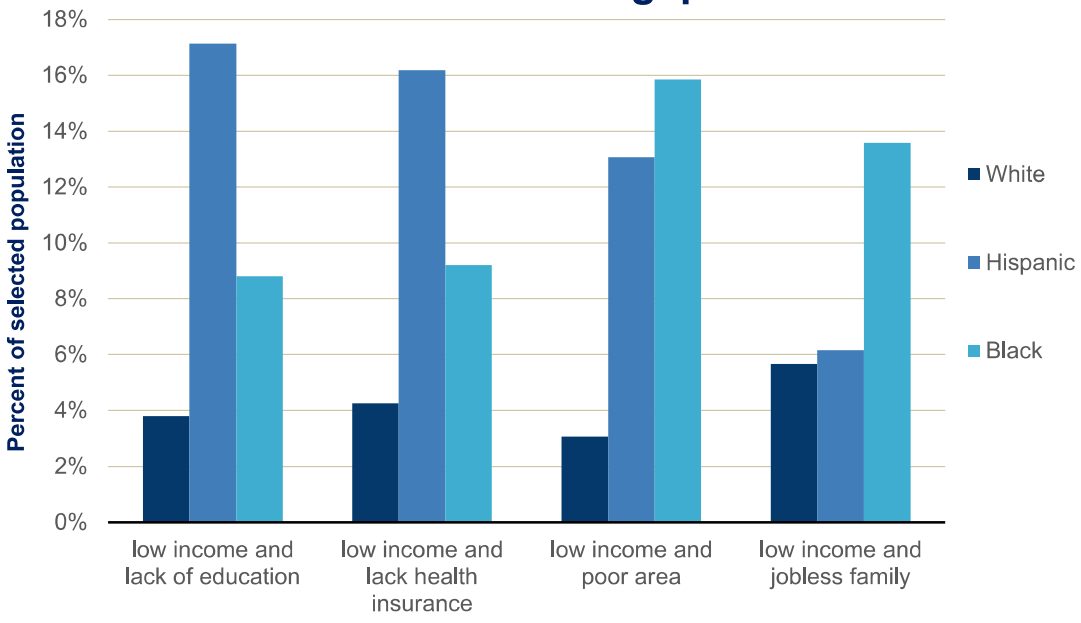
Disadvantage clusters by race: Low income plus other dimensions

We can dig further into race gaps by analyzing specific clusters of disadvantage to see which dimensions overlap with each other for different racial groups. With five dimensions, there are of course a large number of different possible combinations. So for the purposes of this exercise, we treat low income as a necessary condition of multidimensional disadvantage. Many of the adults with multiple disadvantages tend to suffer from low income; among white adults with 2 or more

disadvantages, 71 percent are low-income. For Hispanic adults, the figure is 66 percent, and for black adults, it's 75 percent. In all the analyses that follow, we adopt this "income-plus" approach to the creation of clusters of disadvantage.

Whites are less likely than the other two demographic categories to have both a low household income and some other disadvantage. But there are also clear differences between Hispanic and black residents. Hispanics, for example, have about the same rate of the "low income plus unemployment" disadvantage as whites (both around 6 percent), but four times the risk of having the "low income and no high school diploma" disadvantage compared to whites (17 percent vs. 4 percent). Blacks adults, however, are much more likely than white adults to have the double disadvantage of low income and joblessness, or low income and concentrated geographic poverty.

Figure 6. Two disadvantages including low income: Race gaps

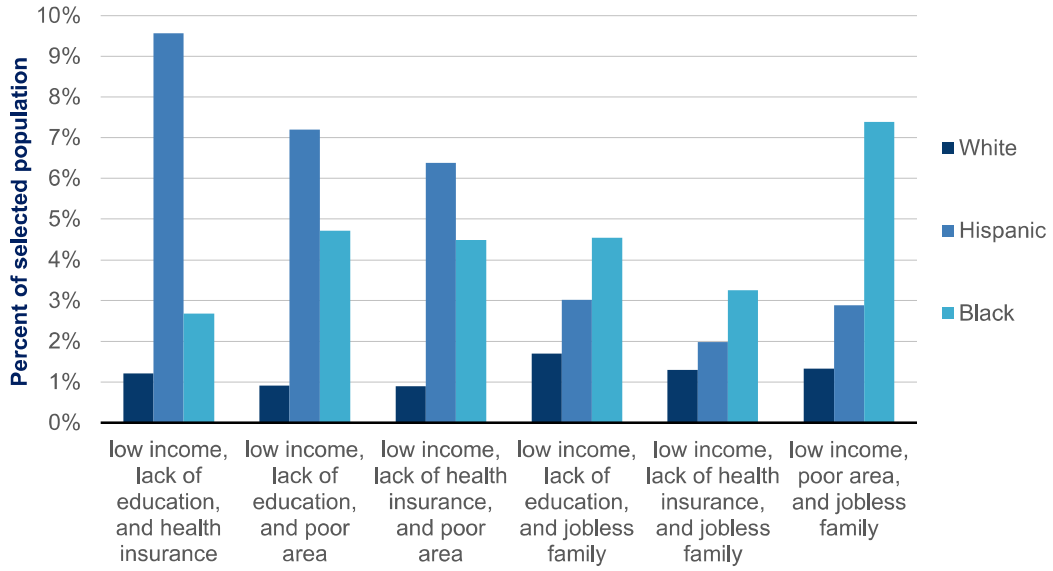


Source: Author's tabulations of 2014 ACS 1-year estimates

Next we calculate how many people suffer from a combination of at least three disadvantages. The overall rate is of course lower—about 9 percent. Among that 9 percent, the vast majority suffer from the low-income disadvantage. And the race gaps are even larger.

Again, black and Hispanic residents suffer from different forms of clustering. Hispanics are almost 10 times more likely than whites to be low-income, without a high school degree, and uninsured (9.6 percent vs. 1.2 percent). On the other hand, black adults are 7 times more likely than white adults to be low-income, live in a high-poverty area, and reside in a jobless household (7.4 percent vs. 1.3 percent).

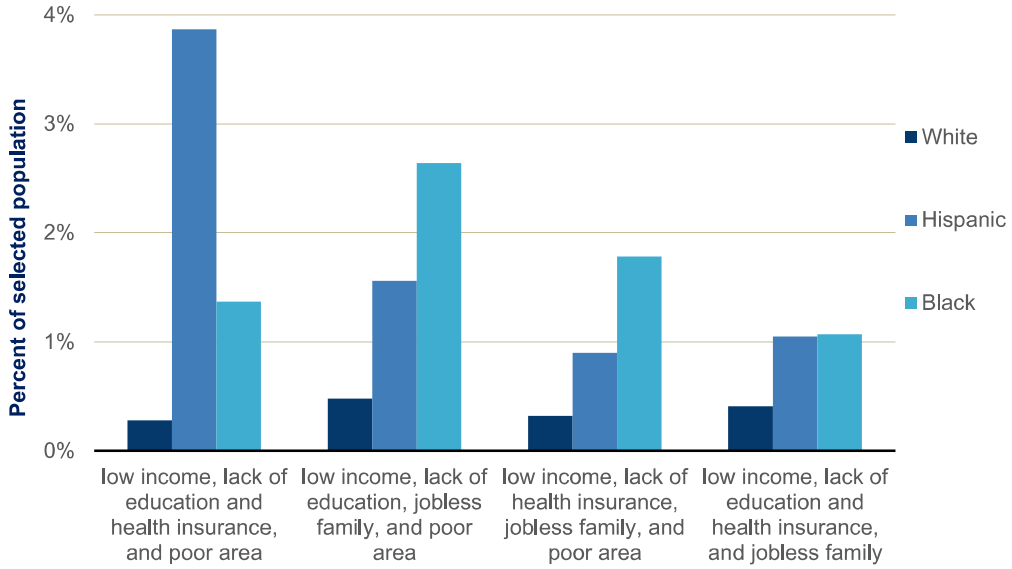
Figure 7. Three disadvantages including low income: Race gaps



Source: Author's tabulations of 2014 ACS 1-year estimates

Turning last to the small number of deeply disadvantaged people, those below our disadvantage thresholds on four or even all five categories, the same story emerges. There are almost no white adults in this category. Low-income Hispanics are most at risk of additionally being without health insurance, having less than a high school education, and living in a poor area. For black Americans, being in a jobless household is a bigger risk factor.

Figure 8. Four disadvantages including low income: Race gaps

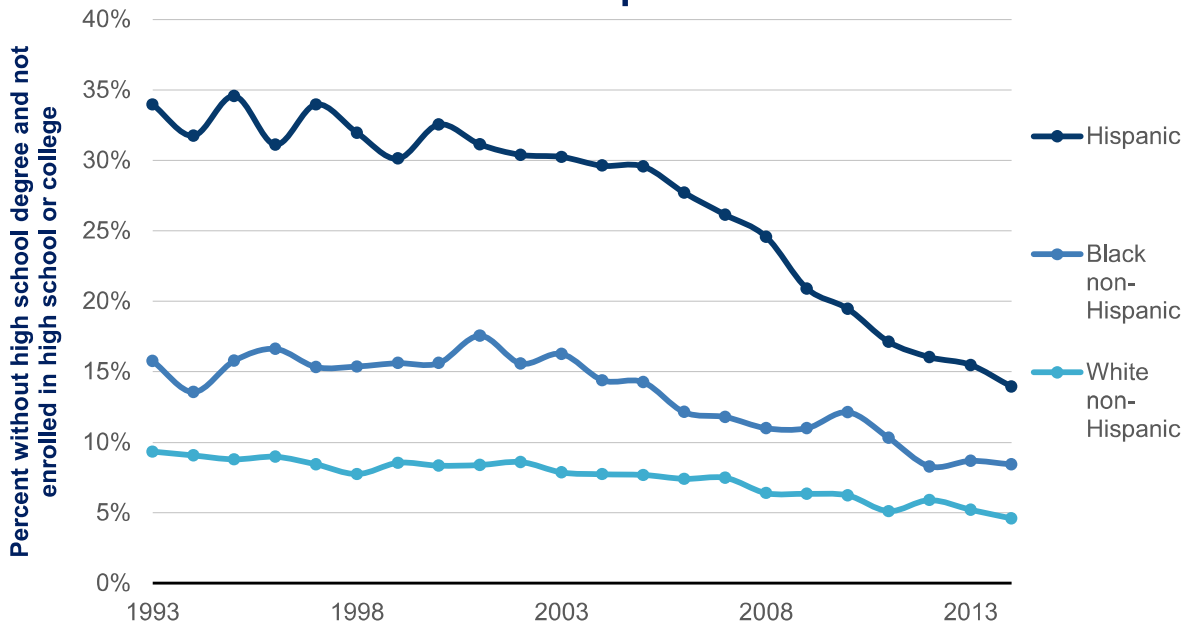


Source: Author's tabulations of 2014 ACS 1-year estimates

Mixed messages: Trends in risk factors for multidimensional advantage

So far we have presented a snapshot of multidimensional disadvantage at a particular moment in time. But a number of factors, including changes in the economic cycle, unemployment rate, and immigration patterns, are likely to influence these results over time. If the goal of policy is to de-cluster these disadvantages, it is important to look not only at existing patterns, but also at trends. Good news first. On one of the non-income dimensions of disadvantage that Hispanics are most likely to experience—low high school graduation rates—the trend is in the right direction. The proportion of young Hispanics without a high school diploma (and not currently enrolled in either high school or college) has dropped sharply in recent years.[15]

Figure 9. Fewer young adults without a high school diploma

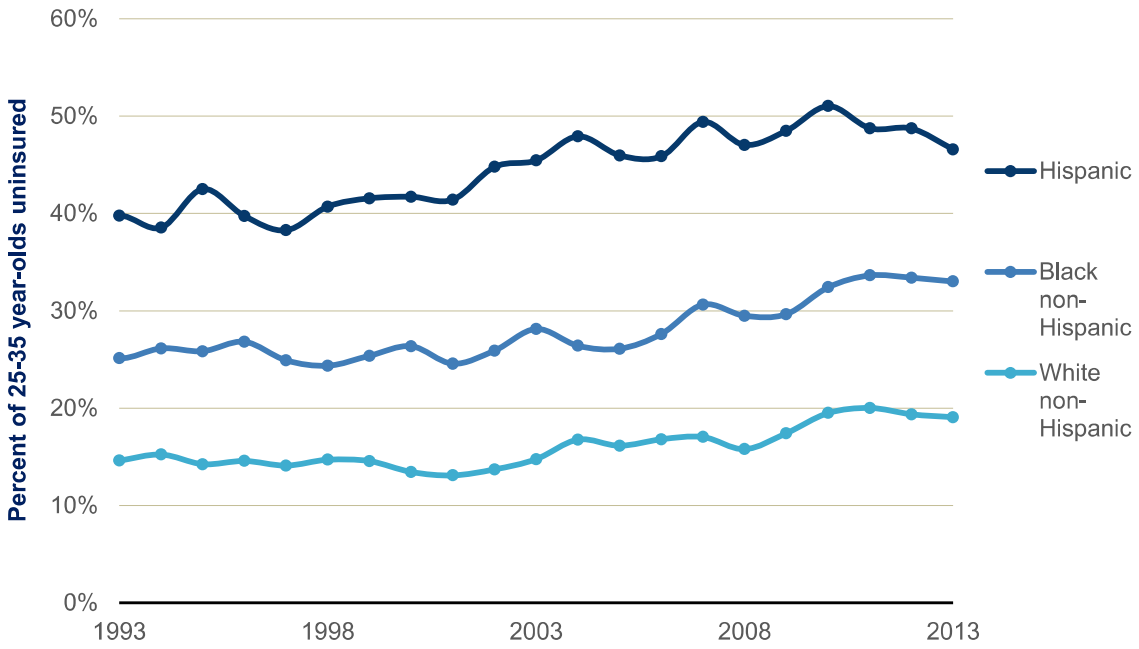


Source: Author's tabulations of IPUMS CPS, 1993-2014; University of Minnesota

There is a still some way to go to close race gaps in high school graduation, of course. There are also growing concerns about the value of a diploma (Kamenetz 2015). But it seems certain that the risks of being both low-income and without a high school diploma are declining in general, and for the Hispanic population in particular.

What about the other key risk factor for low-income Hispanics, lack of health insurance? The trend in recent decades has been discouraging—at least until the introduction of the Affordable Care Act (ACA).

Figure 10. Health insurance coverage: Race gaps

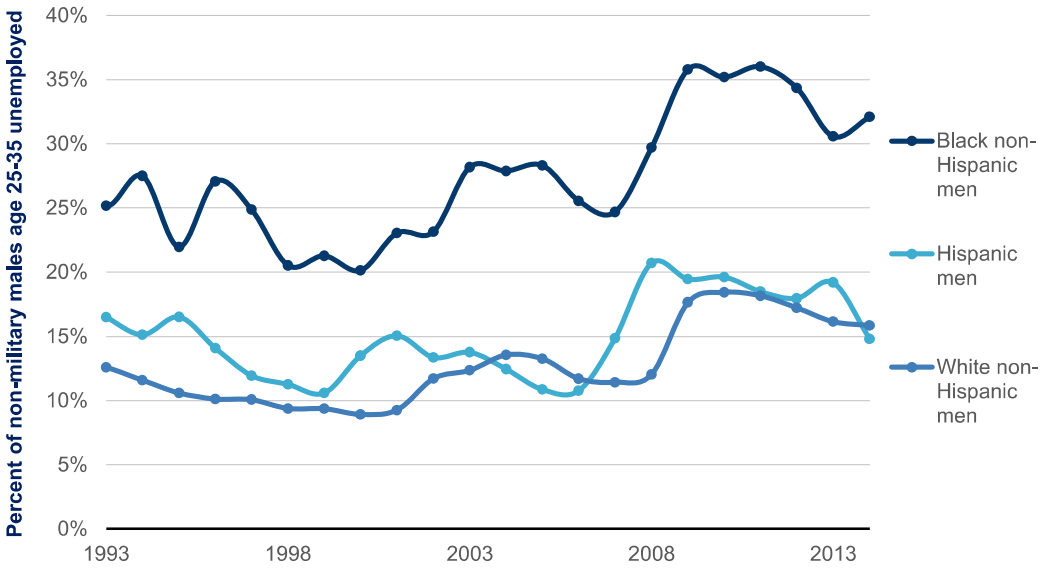


Source: Author's tabulations of IPUMS CPS; University of Minnesota

If anything, the gap between Hispanics and the rest of the population in terms of health insurance coverage has widened in the last 20 years.[16] This suggests that the clustering of low-income status and lack of health insurance has increased. However, the trend among adults has at least stabilized in the last few years. Among Hispanic children the picture is rosier, with a drop from 16 to 10 percentage points in the portion of the population that was uninsured between 2009 and 2014, according to research by La Raza and the Georgetown University Health Policy Institute (Schwartz et al. 2016). If the ACA has the intended effect of expanding coverage, there ought to be a slow de-clustering of these two disadvantages in the years to come.

On balance, then, we might expect that Hispanic multidimensional disadvantage will abate to some degree. However, that might not be the case for black adults. First, the black/white employment gap has shown little sign of improvement, especially for men: their black/white employment gap has remained between 13 and 18 percentage points over the last 20 years.

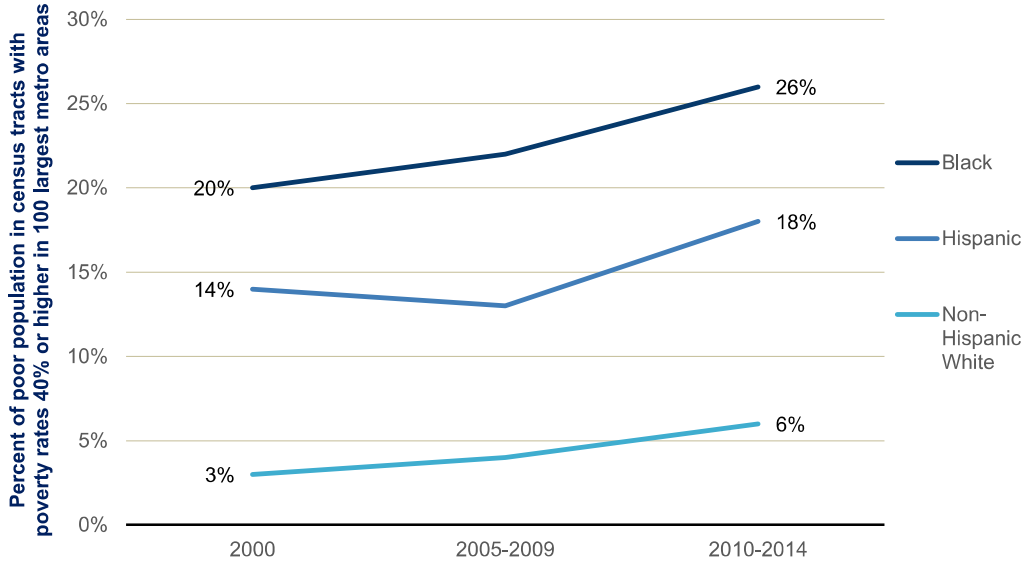
Figure 11. Joblessness: Stubborn black-white gaps



Source: Author's tabulations of IPUMS Current Population Survey; University of Minnesota

Second, the risk of living in a poor area remains significantly higher for black families. In the 1990s there was some improvement on this front, but according to recent work by Elizabeth Kneebone and Natalie Holmes (2016), the recession brought that progress to an abrupt halt. Between the 2000 decennial census and the 2010-2014 American Community Surveys, the chances that black Americans living below the FPL in the nation's 100 largest metro areas also resided in an extremely poor census tract (where more than 40 percent of residents lived below the poverty line) rose from 1 in 5 to more than 1 in 4.

Figure 12. High-poverty neighborhoods: Race gaps



Source: Elizabeth Kneebone and Natalie Holmes' tabulations of decennial census and American Community Survey data

De-clustering disadvantage: Policy implications

Polices aimed at tackling poverty often focus solely on raising income. But an equally important goal of anti-poverty policies is to de-cluster disadvantage, and reduce the *consequences* of having a low income on other aspects of life. In other words, make income poverty matter less.

Health care reform offers a topical example. The U.S. is still some way from providing universal health care, but great strides have been made at both the federal and state level to reduce the chances of lacking health insurance as a result of lacking income. Data from the State of Colorado illustrates the point. The proportion of state residents without health insurance has dropped sharply, from 14.3 percent in 2013, before the Affordable Care Act kicked in, to 6.7 percent in 2015 (Olinger 2015; Reeves and Sawhill 2015). The impact has been particularly strong for lower-income minority families, who saw their uninsurance rates cut almost in half.[17] The reform has, in other words, helped to de-cluster income poverty and lack of health care.

Of course, other states have taken a different approach to health insurance coverage. Policymakers at all levels of government, as well as at non-profit institutions, have different priorities, resources, and tools. Our hope is that taking an explicitly multidimensional approach to measurement will help policymakers and practitioners leverage and deploy existing (and limited) resources, by understanding how disadvantage clusters differently across the groups they serve, and also how clusters vary between different places (the subject of our next paper).

Poverty: More than an income story

"Organization of social insurance should be treated as one part only of a comprehensive policy of social progress," wrote William Beveridge in his famous report. "Social insurance fully developed may provide income security; it is an attack upon Want. But Want is one only of five giants on the road of reconstruction and in some ways the easiest to attack."

Beveridge was writing about a war-ravaged United Kingdom, not 21st century America. But his reminder is still relevant. Disadvantage extends well beyond income poverty. Understanding the different patterns and clusters of disadvantage is an important step towards understanding inequality in its broadest sense. In particular, a multidimensional approach further illuminates the yawning race gaps that afflict the U.S., and the need for concerted action to eliminate them.

Endnotes

1. "Liberal" here refers to the UK Liberal Party, one of the two major parties in the 19th and early 20th centuries. See https://en.wikipedia.org/wiki/Liberal_Party_(UK).

2. Previous analyses of the "underclass" in the U.S. provide examples of geographically-based multidimensional frameworks. See Wilson (1987) or Sawhill and Jargowsky (2006).

3. Child opportunity maps for U.S. metropolitan areas can be found here: http://www.diversitydatakids.org/data/childopportunitymap.

4. For commentary, see Reeves 2015.

5. The 2016 federal poverty guidelines can be found here: https://aspe.hhs.gov/poverty-guidelines.

6. See the link below for a list of the variables in the 2014 ACS public-use microdata: http://www2.census.gov/programs-surveys/acs/tech_docs/pums/data_dict/PUMSDataDict14.pdf

7. For recent evidence, see Finkelstein et al. 2012.

8. For a detailed analysis of concentrated poverty, see Kneebone and Holmes 2016.

9. For more information on PUMAs, see https://www.census.gov/geo/reference/puma.html.

10. The ACS includes a question about the length of time since respondents last worked, but the possible responses are somewhat broad: "within the past 12 months," "1 to 5 years ago," or "over 5 years ago or never worked." See here for a copy of the 2014 ACS questionnaire: https://www.census.gov/programs-surveys/acs/methodology/questionnaire-archive.2014.html.

11. Excluding active duty members of the military and people living in group quarters, like college dormitories, nursing homes, or correctional facilities.

12. Part of the character of "deeper" multidimensional disadvantage appears in the income figures. Adults with at least 3 disadvantages have household incomes that average only 93 percent of the federal poverty line. Those with one or more disadvantages average 220 percent of the FPL.

13. In constructing our racial categories, we have followed the approach of William H. Frey and others. Respondents are categorized as "white" and "black" based on their own definition,

but only if they described themselves as “non-Hispanic.” “Hispanics” include those who defined themselves as such, as well as in many cases describing themselves as “white” or “black.” See Frey 2014. Our sample also includes non-citizens.

14. Citizenship status makes a difference; re-tabulating the results while omitting non-citizens lowers Hispanic rates of disadvantage. The new levels are generally comparable to those experienced by black adults. 61 percent of Hispanic citizens face at least one disadvantage (versus 71 percent of all Hispanics), 31 percent face two or more (versus 43 percent), 13 percent face three or more (versus 21 percent), and 4 percent face four or more (versus 6 percent). We choose to include non-citizens in our main results, since they still participate in most aspects of American life through their workplaces and communities. (Only about a third of immigrants are unauthorized, according to analyses by the Pew Research Center. See Passel, Cohn, and Gonzalez-Barrera 2013.)

15. There’s some debate about how much of this change represents real improvement, and how much resulted from lowering graduation standards. See Kamenetz 2015 for more.

16. Here, too, the citizenship status of the Hispanic population makes a difference. Roughly 19 percent of Hispanic citizens lack health insurance (versus 33 percent in the tabulations above).

17. See Reeves, “Two anti-poverty strategies” for more.

APPENDIX A: PREVIOUS STUDIES OF MULTIDIMENSIONAL POVERTY: DIMENSIONS, INDICATORS, AND DATA SOURCES

Author/ Date	Dimensions	Indicators	Data Source(s)	Selected conclusions
Acevedo-Garcia et al. (2014)	• Educational opportunities • Health and environment • Social and economic opportunities	• School poverty rate • Student math and reading proficiency • Proximity to licensed and high-quality early childhood education centers • Early childhood education participation • High school graduation rate • Adult educational attainment • Proximity to health care facilities • Retail health food environment index • Proximity to toxic waste sites • Proximity to parks and open spaces • Housing vacancy rate • Foreclosure rate • Poverty rate • Unemployment rate • Public assistance rate • Proximity to employment	2007-2001 ACS U.S. Department of Education, National Center for Education Statistics, Common Core of Data 2010-2011 State Departments of Education, 2010-2011 school year diversitydatakids.org Early Childhood Database ESRI Business Analyst, 2011 U.S. Environmental Protection Agency, Toxic Release Inventory, 2010 2010 Decennial Census U.S. Department of Housing and Urban Development, Neighborhood Stabilization Program, 2010 U.S. Census Bureau, ZIP Business Patterns, 2009	• Across the U.S., 40% of black and 32% of Hispanic children live in very low-opportunity neighboorhods within their metro areas, compared to 9% of white children.
Alkire and Foster (2008)	• Household poverty • Health • Educational attainment	• Poverty line status • Report only “fair” or “poor” health • Health insurance coverage • High school completion	2004 National Health Interview Survey	• At least 12% of the population deprived in terms of any of the dimensions. • About 24% of the population deprived of at least one dimension, 11% of two dimensions; 4% of three; and 0.44% of all four.

Author/ Date	Dimensions	Indicators	Data Source(s)	Selected conclusions
Dhongde and Haveman (2014)	• Health • Education • Standard of living • Housing	• Health insurance coverage • Disability status • High school completion • English proficiency • Poverty status • Employment status • Whether there are more occupants than rooms in a home • Housing costs exceed 50% of income	2011 American Community Survey (ACS) Public Use Microdata Sample	• In 2011, one in five adults was multidimensional poor; compared to an official poverty estimate of 13%. Multidimensional poor experienced about 7% of all deprivations possible. • Variation explained more by race, nativity, and region than by age or gender.
Koohi-Kamali and Liu (2014)	• Education • Work • Income • Standard of living	• High school completion • Employment status of household head and spouse • SNAP benefits • Public assistance income • SSI income • More than 2 residents per bedroom • Vehicle ownership • Real estate ownership	2006-2010 ACS Public Use Microdata Sample (specifically for Pennsylvania)	• Hispanics most deprived in educational dimension; blacks most deprived in employment dimension. • For full sample, most significant dimension of multidimensional poverty is work status (contributes 41% of total deprivation.)
Wagle (2008)	• Economic well-being • Capability • Social inclusion	• Respondent income • Total family income • Satisfaction with financial situation • Educational attainment • Health condition • Feel as though people are treated with respect at work • Occupational prestige • Industry • Work status • Weeks of work • Self-employment indicator • Activism • Voted in 2000 • Group membership • Associational activity, and perceived importance of associational activities • Number of friends and relatives	2004 General Social Survey	• The Northeast has lower multidimensional poverty rates; the South has the highest rates. • Blacks, Hispanics, and American Indians suffer from multidimensional poverty at disproportionate rates. The same is true for widowed Americans.

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DATA SNAPSHOT

Ward Snapshots: Tracking Child Well-Being in Your Ward

Do you know the birth, health and education trends for children in your ward? Learn more from the newest edition of DC KIDS COUNT's Ward Snapshots.

Why Does Ward-Level Analysis Matter?

Where children live, play and grow, and the assets available to them, have a profound effect on their quality of life and future. That is why DC KIDS COUNT tracks indicators of child well-being at the neighborhood and Ward level, so that parents, service providers, advocates and policymakers can see outcomes for children more clearly.

In our DC KIDS COUNT Data Tool 2.0, you can explore neighborhood-level data interactively. However, because DC is organized politically by its eight Wards, Ward-level data and advocacy is especially important. Ward-level data, in comparison with District-wide data, captures a more representative picture of child well-being than do District-wide averages, which often do not capture disparate outcomes and assets for children.

Who Are the Ward Snapshots for?

The Ward snapshots are for anyone who wants to learn more about trends and outcomes for children ages 0 to 18 in DC.

How Do I Read the Ward Snapshots?

Each snapshot includes DC KIDS COUNT indicators in five categories:

1) Demographics,

2) Economic Well-Being,

3) Health,

4) Family and Community,

5) Education

The left side column includes the outcomes for each Ward in 2010 compared with more recent data. The change since 2010 is highlighted with a colored arrow. The direction of the arrow indicates which way the indicator is trending, and the color of the arrow indicates whether that change is positive (green), negative (red), or neutral (blue). We include a category for "neutral" because changes in some indicators, such as population, birth rate and Medicaid enrollment, are important to know, and cannot be interpreted without further information and context.

The right side column compares changes in a Ward to changes in DC over the same time period.

The graph on page one of each snapshot illustrates the race/ethnicity composition of children under 18 in each ward. The graph on page two highlights longitudinal changes in the child poverty rate by ward between 2000 and 2015.

What Can I Learn From Ward Snapshots?

Below we've highlighted data points from each Ward Snapshot:

- *Ward 1: Largest decrease in the number of children receiving TANF.*
- *Ward 2: Median income for families with children increased by 65%.*
- *Ward 3: Highest percentage increase of children enrolled in Medicaid.*
- *Ward 4: Largest decrease in infant mortality rate.*
- *Ward 5: Largest increase in population of children under 5, by over 54%*
- *Ward 6: Children in poverty decreased by 15.3%.*
- *Ward 7: One of only two wards with a decrease in Unemployment*
- *Ward 8: Greatest decrease in teen birth rate, by over 37%.*

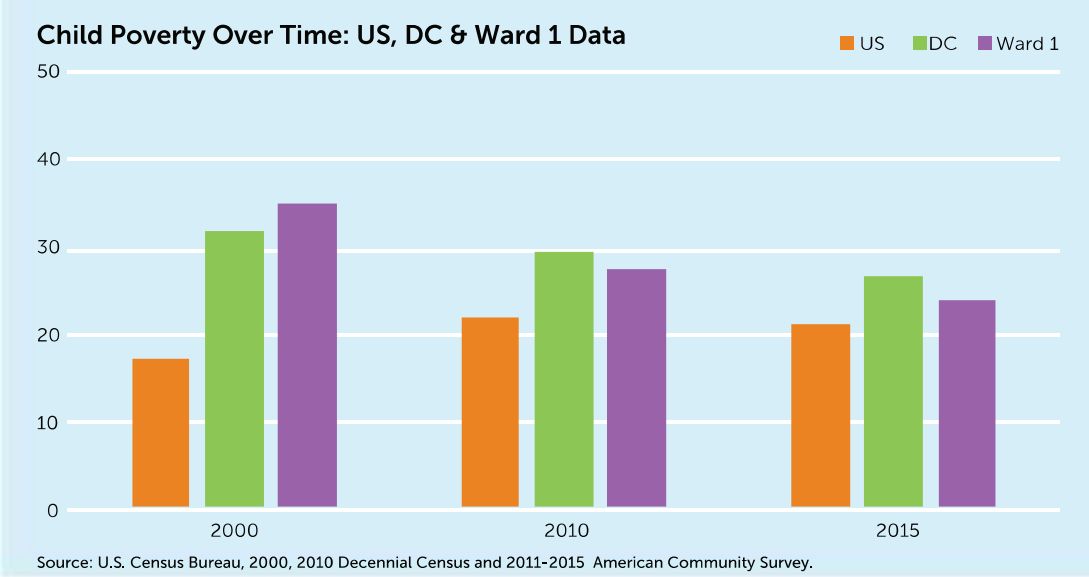
DC KIDS COUNT is a project of DC Action for Children with support from the Annie E. Casey Foundation. For more information, contact Shana Bartley, sbartley@dckids.org

APRIL 2017

DC KIDS COUNT Snapshot, Ward 1

March 2017

DC KIDS COUNT is a project of DC Action for Children with support from the Annie E Casey Foundation. For more information, contact Shana Bartley, sbartley@dckids.org.



Source: U.S. Census Bureau, 2000, 2010 Decennial Census and 2011-2015 American Community Survey.

	Ward 1			DC		
Demographic Indicators[1]						
Total population	2010 2011-2015	76,197 82,859	9%	2010 2011-2015	601,723 647,484	8%
Child population under age 18	2010 2011-2015	9,034 9,509	5.3%	2010 2011-2015	100,815 111,305	10%
Young child population under age 5	2010 2011-2015	3,480 4,136	18.9%	2010 2011-2015	32,613 40,144	23%
Economic Well-Being Indicators[2]						
Children (under 18) in poverty* family income below 100% of the federal poverty level	2006-2010 2011-2015	27.3% 23.7%	-3.6%	2006-2010 2011-2015	29.6% 26.7%	-2.9%
Unemployment rate* residents 16 years and older who are not employed	2006-2010 2011-2015	4.8% 5.1%	.3%	2006-2010 2011-2015	6.3% 6.5%	.2%
Median family income in 2015, families with own children under 18	2006-2010 2011-2015	$53,033 $61,196	15.3%	2006-2010 2011-2015	$53,906 $66,297	22.9%
Children receiving TANF monthly average enrollment of children under 18	2010 2011-2015	2,171 1,446	-33.4%	2010 2011-2015	30,154 28,115	-6.8%

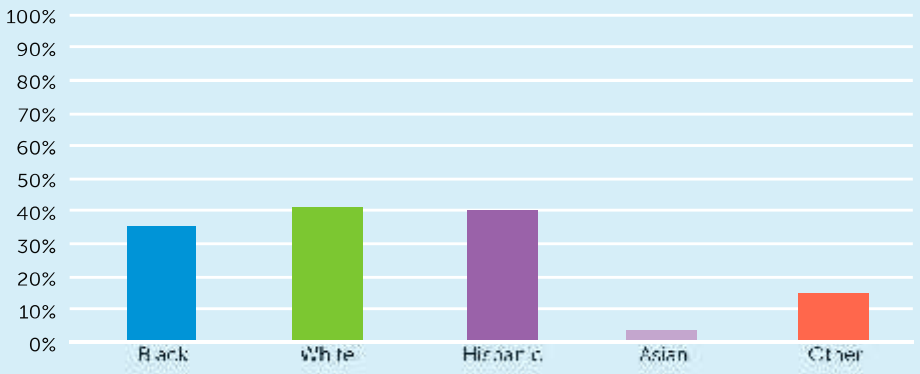
Getting better | Getting worse | Unchanged | Change is neutral

Find more city and ward level data at the DC KIDS COUNT Data Center: datacenter.kidscount.org/data/bystate

KIDS COUNT Snapshot, Ward 1

	Ward 1			DC		
Health Indicators[3]						
Children enrolled in Medicaid under age 18	2010 2015	7,535 8,579	13.9%	2010 2015	73,507 88,931	21%
Teen birth rate births to women ages 15-19, per 1,000 population	2010 2014	34.2 19.7	-14.5	2010 2014	45.4 27.6	-17.8
Infant mortality rate infant deaths under one year old, per 1,000 live births	2010 2014	4.1 7.1	3	2010 2014	8 7.6	-.4
Family and Community Indicators[4]						
Families headed by a single woman* as a share of all families with related children	2006-2010 2011-2015	42.1% 30.7%	-11.4%	2006-2010 2011-2015	48% 42.1%	-5.9%
Average family size by ward	2006-2010 2011-2015	3.1 3.2	.1%	2006-2010 2011-2015	3.1 3.2	.1%
Households with high housing cost burden where more than 30% of the monthly income is spent on rent, mortgage payments, taxes, insurance and related expenses	2006-2010 2011-2015	40.5% 38%	-2.5%	2006-2010 2011-2015	44.7% 41.7%	-2.9%
Education Indicators[5]						
School Enrollment Public School Enrollment (DCPS)	2014-2015 2015-2016	5,430 5,431	0%	2014-2015 2015-2016	47,548 48,439	1.8%
Charter School Enrollment (PCS)	2014-2015 2015-2016	5,689 6,130	7.2%	2014-2015 2015-2016	37,684 38,905	3.1%
PARCC Results % Meeting or Exceeding Expectations - 4+ ELA	2014-2015 2015-2016	21% 26.2%	5.2%	2014-2015 2015-2016	24.8% 26.7%	1.9%
Math	2014-2015 2015-2016	18.1% 20.2%	2.1%	2014-2015 2015-2016	22.1% 24.8%	2.7%

Race/Ethnicity of DC Children (Under 18), Ward 1



Source: U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey.

Sources and Notes

[1] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

[2] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey; D.C. Department of Human Services, Economic Security Administration

[3] D.C. Department of Health, Data Management and Analysis Division, Center for Policy, Planning and Evaluation; D.C. Department of Health Care Finance

[4] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

[5] D.C. Office of the State Superintendent of Education

Additional Notes:

1. The 2006-2010 ACS Data utilizes 2002 DC geographic ward boundaries, while the 2011-2015 ACS Data utilizes 2012 geographic ward boundaries.
2. For the race/ethnicity figures, identification of more than one race/ethnicity may have occurred.
3. School enrollment numbers represent enrollment by Ward of school
4. This document does not take into account the 123 online Charter School learners for SY14-15

*Change for this indicator is recorded in percentage points.

DC KIDS COUNT Snapshot, Ward 2

March 2017

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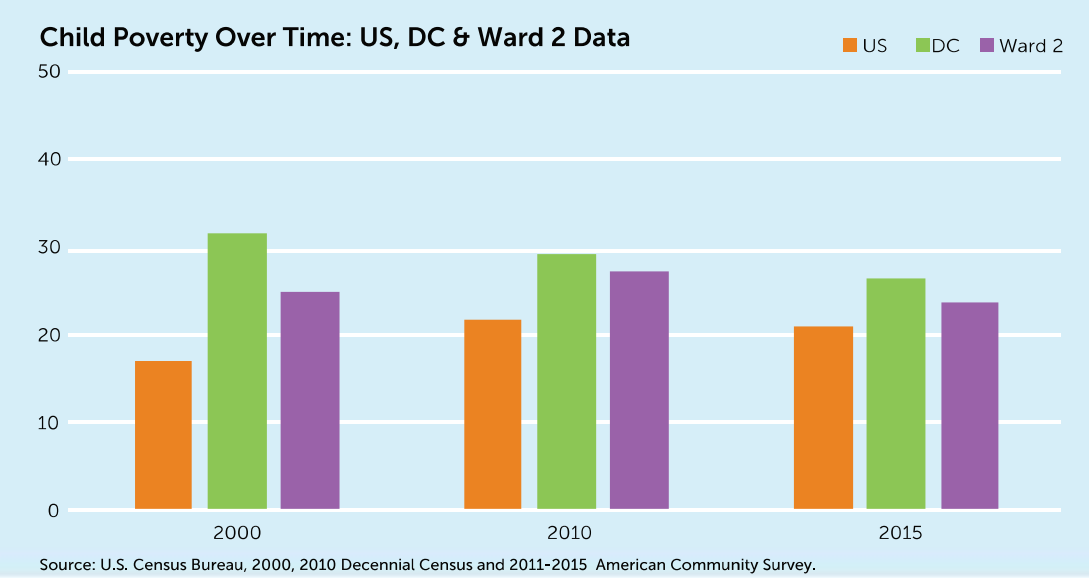


Source: U.S. Census Bureau, 2000, 2010 Decennial Census and 2011-2015 American Community Survey.

	Ward 2			DC		
Demographic Indicators[1]						
Total population	2010 2011-2015	79,915 77,645	-3%	2010 2011-2015	601,723 647,484	8%
Child population under age 18	2010 2011-2015	4,656 4,340	-5.9%	2010 2011-2015	100,815 111,305	10%
Child population under age 5	2010 2011-2015	2,021 2,174	6%	2010 2011-2015	32,613 40,144	23%
Economic Well-Being Indicators[2]						
Children (under 18) in poverty* family income below 100% of the federal poverty level	2006-2010 2011-2015	12% 6.1%	-2.9%	2006-2010 2011-2015	29.6% 26.7%	-2.9%
Unemployment rate* residents 16 years and older who are not employed	2006-2010 2011-2015	2.4% 2.7%	.3%	2006-2010 2011-2015	6.3% 6.5%	.2%
Median family income in 2015, families with own children under 18	2006-2010 2011-2015	$114,752 $189,324	64.9%	2006-2010 2011-2015	$53,906 $66,297	22.9%
Children receiving TANF monthly average enrollment of children under 18	2010 2011-2015	2,024 1,591	-21.4%	2010 2011-2015	30,154 28,115	-6.8%

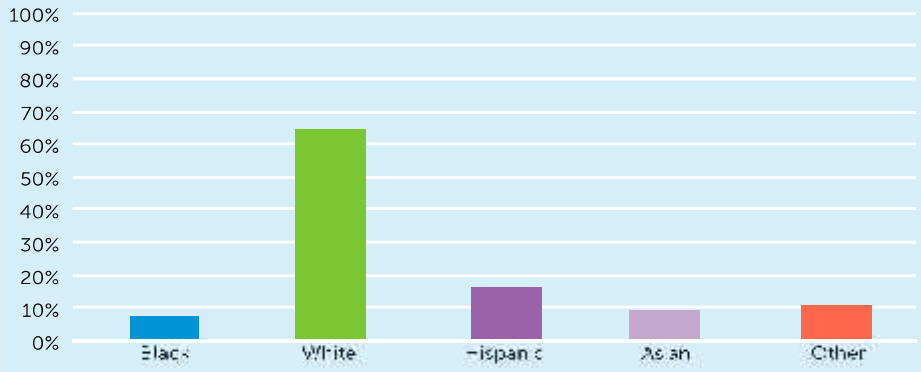
Getting better | Getting worse | Unchanged | Change is neutral

Find more city and ward level data at the DC KIDS COUNT Data Center: datacenter.kidscount.org/data/bystate

KIDS COUNT Snapshot, Ward 2

	Ward 2			DC		
Health Indicators[3]						
Children enrolled in Medicaid under age 18	2010 2015	10,193 8,214	-19.4%	2010 2015	73,507 88,931	21%
Teen birth rate births to women ages 15-19, per 1,000 population	2010 2014	5.4 1.6	-3.5	2010 2014	45.4 27.6	-17.8
Infant mortality rate infant deaths under one year old, per 1,000 live births	2010 2014	2.9 6.4	3.5	2010 2014	8 7.6	-.4
Family and Community Indicators[4]						
Families headed by a single woman* as a share of all families with related children	2006-2010 2011-2015	28.6% 11.7%	-16.9%	2006-2010 2011-2015	48% 42.1%	-5.9%
Average family size by ward	2006-2010 2011-2015	2.6 2.5	-.1%	2006-2010 2011-2015	3.1 3.2	.1%
Households with high housing cost burden where more than 30% of the monthly income is spent on rent, mortgage payments, taxes, insurance and related expenses	2006-2010 2011-2015	42.6% 38.2%	-4.4%	2006-2010 2011-2015	44.7% 41.7%	-2.9%
Education Indicators[5]						
School Enrollment Public School Enrollment (DCPS)	2014-2015 2015-2016	2,900 2,943	1.5%	2014-2015 2015-2016	47,548 48,439	1.8%
Charter School Enrollment (PCS)	2014-2015 2015-2016	551 599	8%	2014-2015 2015-2016	37,684 38,905	3.1%
PARCC Results % Meeting or Exceeding Expectations - 4+						
ELA	2014-2015 2015-2016	49% 49.6%	.6%	2014-2015 2015-2016	24.8% 26.7%	1.9%
Math	2014-2015 2015-2016	41.9% 47.3%	5.4%	2014-2015 2015-2016	22.1% 24.8%	2.7%

Race/Ethnicity of DC Children (Under 18), Ward 2



Source: U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey.

Sources and Notes

[1] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

[2] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey; D.C. Department of Human Services, Economic Security Administration

[3] D.C. Department of Health, Data Management and Analysis Division, Center for Policy, Planning and Evaluation; D.C. Department of Health Care Finance

[4] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

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Additional Notes:

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3. School enrollment numbers represent enrollment by Ward of school
4. This document does not take into account the 123 online Charter School learners for SY14-15

*Change for this indicator is recorded in percentage points.

DC KIDS COUNT Snapshot, Ward 3

March 2017

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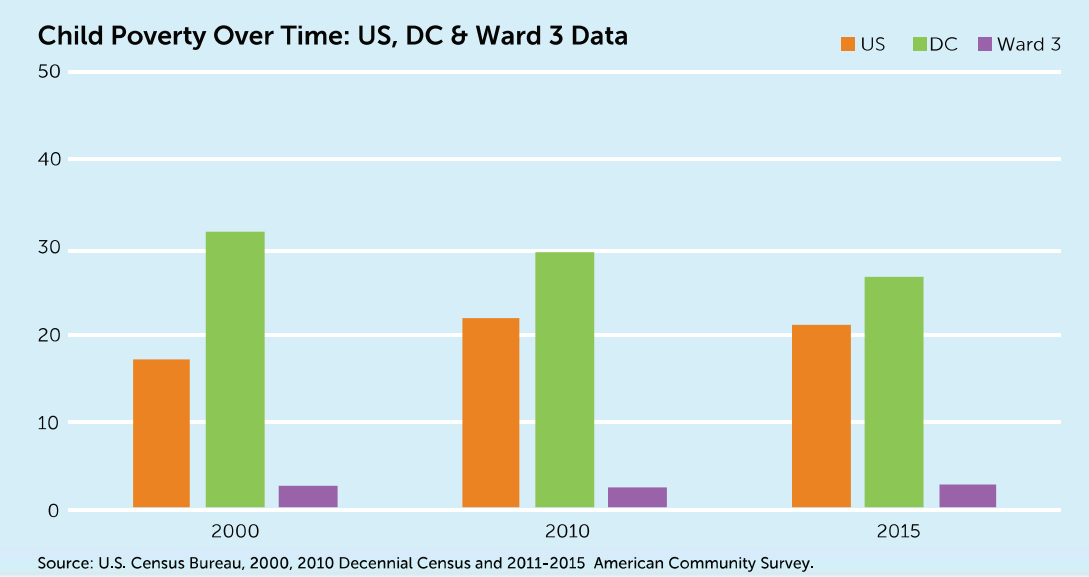

Source: U.S. Census Bureau, 2000, 2010 Decennial Census and 2011-2015 American Community Survey.

		Ward 3			DC		
Demographic Indicators[1]							
Total population	2010	77,152	8%	2010	601,723	8%
	2011-2015	83,152		2011-2015	647,484	
Child population under age 18	2010	10,108	26%	2010	100,815	10%
	2011-2015	12,738		2011-2015	111,305	
Young child population under age 5	2010	3,377	26%	2010	32,613	23%
	2011-2015	4,241		2011-2015	40,144	
Economic Well-Being Indicators[2]							
Children (under 18) in poverty* family income below 100% of the federal poverty level	2006-2010	2.4%	.5%	2006-2010	29.6%	-2.9%
	2011-2015	2.9%		2011-2015	26.7%	
Unemployment rate* residents 16 years and older who are not employed	2006-2010	2.4%	.2%	2006-2010	6.3%	.2%
	2011-2015	2.6%		2011-2015	6.5%	
Median family income in 2015, families with own children under 18	2006-2010	$209,165	3.4%	2006-2010	$53,906	22.9%
	2011-2015	$216,193		2011-2015	$66,297	
Children receiving TANF monthly average enrollment of children under 18	2010	36	-11.1%	2010	30,154	-6.8%
	2011-2015	32		2011-2015	28,115	

Getting better | Getting worse | Unchanged | Change is neutral

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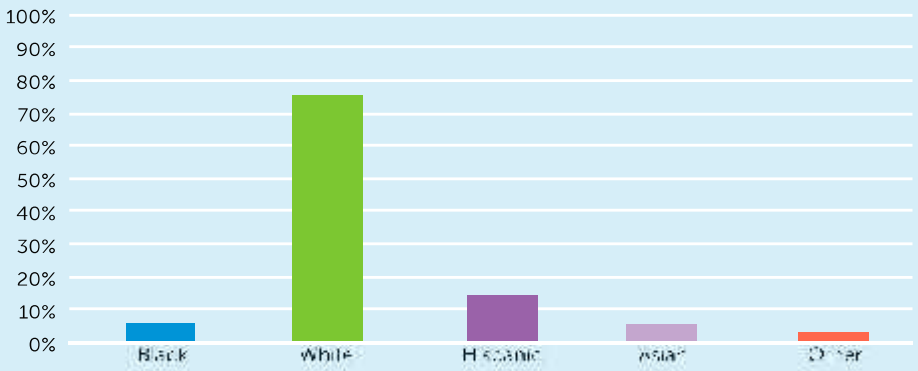
KIDS COUNT Snapshot, Ward 3

	Ward 3			DC		
Health Indicators[3]						
Children enrolled in Medicaid under age 18	2010 2015	419 845	101.7%	2010 2015	73,507 88,931	21%
Teen birth rate births to women ages 15-19, per 1,000 population	2010 2014	-.8 0	-.8	2010 2014	45.4 27.6	-17.8
Infant mortality rate infant deaths under one year old, per 1,000 live births	2010 2014	5 1.3	-3.7	2010 2014	8 7.6	-.4
Family and Community Indicators[4]						
Families headed by a single woman* as a share of all families with related children	2006-2010 2011-2015	11.2% 12.2%	1%	2006-2010 2011-2015	48% 42.1%	-5.9%
Average family size by ward	2006-2010 2011-2015	2.8 2.8	0%	2006-2010 2011-2015	3.1 3.2	.1%
Households with high housing cost burden where more than 30% of the monthly income is spent on rent, mortgage payments, taxes, insurance and related expenses	2006-2010 2011-2015	39% 35.3%	-3.7%	2006-2010 2011-2015	44.7% 41.7%	-2.9%
Education Indicators[5]						
School Enrollment Public School Enrollment (DCPS)	2014-2015 2015-2016	6,932 7,123	2.7%	2014-2015 2015-2016	47,548 48,439	1.8%
Charter School Enrollment (PCS)	2014-2015 2015-2016	0 0	0%	2014-2015 2015-2016	37,684 38,905	3.1%
PARCC Results % Meeting or Exceeding Expectations - 4+ ELA	2014-2015 2015-2016	64.5% 59.8%	-4.7%	2014-2015 2015-2016	24.8% 26.7%	1.9%
Math	2014-2015 2015-2016	49.4% 52.2%	2.8%	2014-2015 2015-2016	22.1% 24.8%	2.7%

Race/Ethnicity of DC Children (Under 18), Ward 3



Source: U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey.

Sources and Notes

[1] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

[2] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey; D.C. Department of Human Services, Economic Security Administration

[3] D.C. Department of Health, Data Management and Analysis Division, Center for Policy, Planning and Evaluation; D.C. Department of Health Care Finance

[4] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

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Additional Notes:

1. The 2006-2010 ACS Data utilizes 2002 DC geographic ward boundaries, while the 2011-2015 ACS Data utilizes 2012 geographic ward boundaries.
2. For the race/ethnicity figures, identification of more than one race/ethnicity may have occurred.
3. School enrollment numbers represent enrollment by Ward of school
4. This document does not take into account the 123 online Charter School learners for SY14-15

*Change for this indicator is recorded in percentage points.

DC KIDS COUNT Snapshot, Ward 4

March 2017

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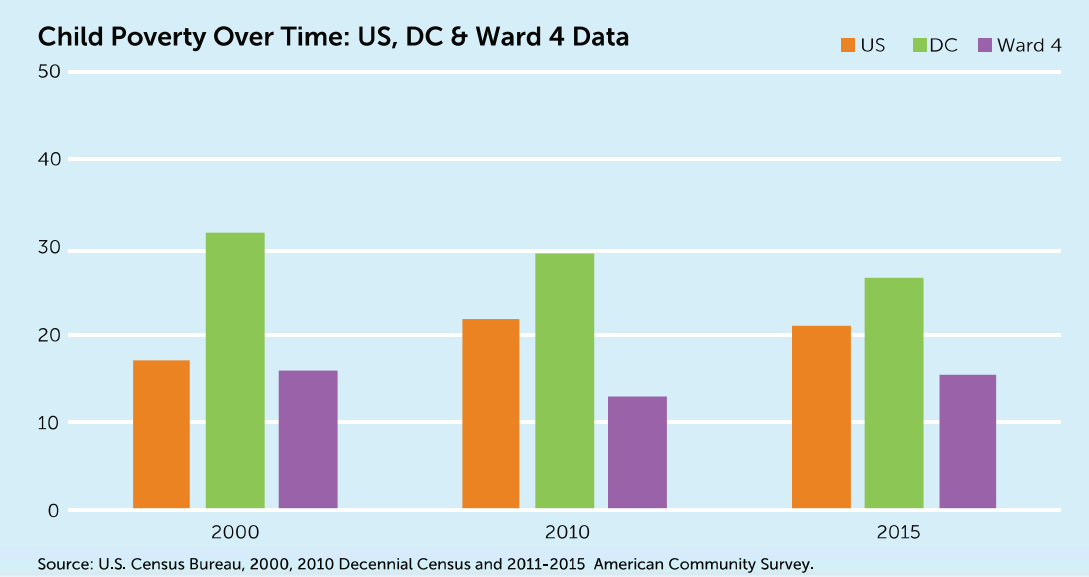

Source: U.S. Census Bureau, 2000, 2010 Decennial Census and 2011-2015 American Community Survey.

	Ward 4			DC		
Demographic Indicators[1]						
Total population	2010	75,773	10%	2010	601,723	8%
	2011-2015	83,066		2011-2015	647,484	
Child population under age 18	2010	15,202	10%	2010	100,815	10%
	2011-2015	16,700		2011-2015	111,305	
Young child population under age 5	2010	4,783	16%	2010	32,613	23%
	2011-2015	5,565		2011-2015	40,144	
Economic Well-Being Indicators[2]						
Children (under 18) in poverty* family income below 100% of the federal poverty level	2006-2010	13.3%	3%	2006-2010	29.6%	-2.9%
	2011-2015	16.3%		2011-2015	26.7%	
Unemployment rate* residents 16 years and older who are not employed	2006-2010	5.8%	1.1%	2006-2010	6.3%	.2%
	2011-2015	6.9%		2011-2015	6.5%	
Median family income in 2015, families with own children under 18	2006-2010	$78,599	19.1%	2006-2010	$53,906	22.9%
	2011-2015	$93,592		2011-2015	$66,297	
Children receiving TANF monthly average enrollment of children under 18	2010	2,829	-14.9%	2010	30,154	-6.8%
	2011-2015	2,408		2011-2015	28,115	

Getting better | Getting worse | Unchanged | Change is neutral

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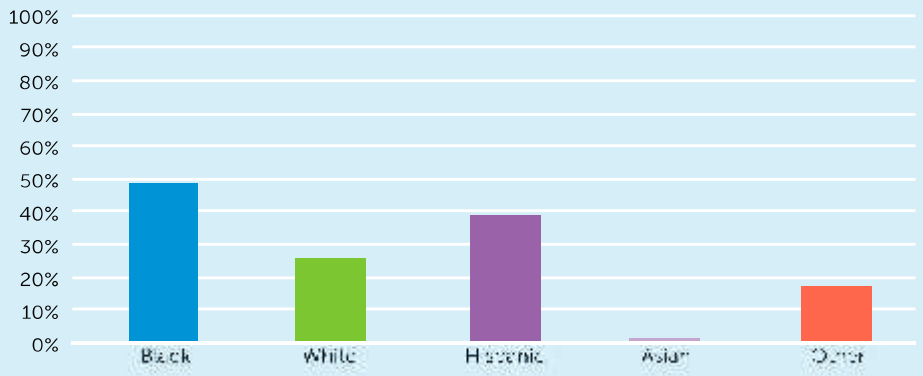
KIDS COUNT Snapshot, Ward 4

	Ward 4			DC		
Health Indicators[3]						
Children enrolled in Medicaid under age 18	2010 2015	10,021 14,589	45.6%	2010 2015	73,507 88,931	21%
Teen birth rate births to women ages 15-19, per 1,000 population	2010 2014	58.6 36.3	-22.3	2010 2014	45.4 27.6	-17.8
Infant mortality rate infant deaths under one year old, per 1,000 live births	2010 2014	11.3 4.1	-7.2	2010 2014	8 7.6	-.4
Family and Community Indicators[4]						
Families headed by a single woman* as a share of all families with related children	2006-2010 2011-2015	33.7% 26.4%	-7.3%	2006-2010 2011-2015	48% 42.1%	-5.9%
Average family size by ward	2006-2010 2011-2015	3.3 3.5	.2%	2006-2010 2011-2015	3.1 3.2	.1%
Households with high housing cost burden where more than 30% of the monthly income is spent on rent, mortgage payments, taxes, insurance and related expenses	2006-2010 2011-2015	46.8% 41.2%	-5.6%	2006-2010 2011-2015	44.7% 41.7%	-2.9%
Education Indicators[5]						
School Enrollment Public School Enrollment (DCPS)	2014-2015 2015-2016	6,950 7,659	9.3%	2014-2015 2015-2016	47,548 48,439	1.8%
Charter School Enrollment (PCS)	2014-2015 2015-2016	5,790 5,462	-6%	2014-2015 2015-2016	37,684 38,905	3.1%
PARCC Results % Meeting or Exceeding Expectations - 4+ ELA	2014-2015 2015-2016	27.6% 28.4%	.8%	2014-2015 2015-2016	24.8% 26.7%	1.9%
Math	2014-2015 2015-2016	24.4% 25.2%	.8%	2014-2015 2015-2016	22.1% 24.8%	2.7%

Race/Ethnicity of DC Children (Under 18), Ward 4



Source: U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey.

Sources and Notes

[1] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

[2] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey; D.C. Department of Human Services, Economic Security Administration

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[4] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

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Additional Notes:

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4. This document does not take into account the 123 online Charter School learners for SY14-15

*Change for this indicator is recorded in percentage points.

DC KIDS COUNT Snapshot, Ward 5

March 2017

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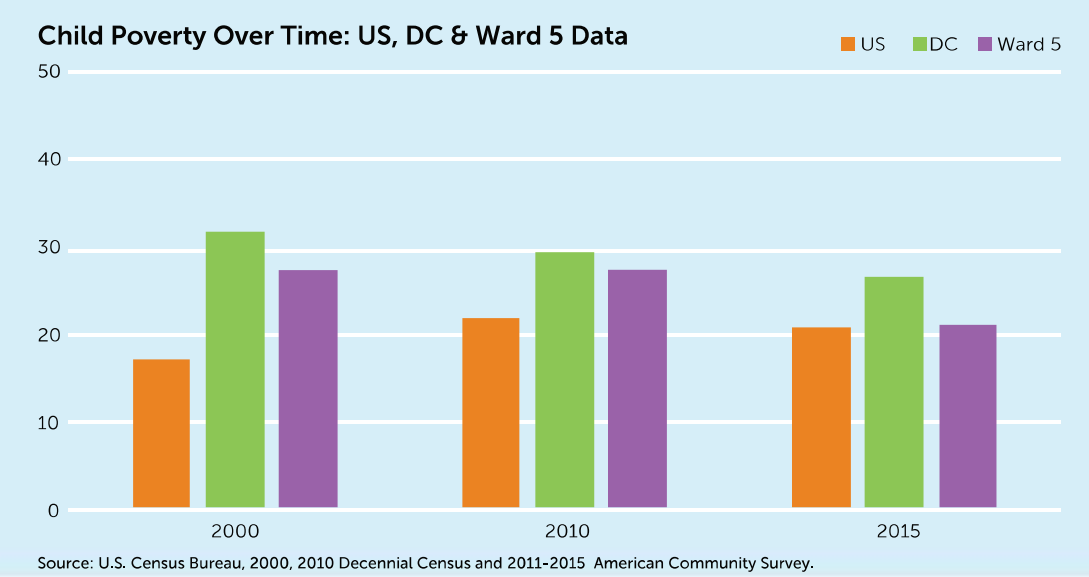

Source: U.S. Census Bureau, 2000, 2010 Decennial Census and 2011-2015 American Community Survey.

	Ward 5			DC		
Demographic Indicators[1]						
Total population	2010 2011-2015	74,308 82,049	10%	2010 2011-2015	601,723 647,484	8%
Child population under age 18	2010 2011-2015	12,732 14,653	15%	2010 2011-2015	100,815 111,305	10%
Young child population under age 5	2010 2011-2015	3,735 5,743	54%	2010 2011-2015	32,613 40,144	23%
Economic Well-Being Indicators[2]						
Children (under 18) in poverty* family income below 100% of the federal poverty level	2006-2010 2011-2015	27.7% 21.3%	-6.4%	2006-2010 2011-2015	29.6% 26.7%	-2.9%
Unemployment rate* residents 16 years and older who are not employed	2006-2010 2011-2015	8.5 % 9%	.5%	2006-2010 2011-2015	6.3% 6.5%	.2%
Median family income in 2015, families with own children under 18	2006-2010 2011-2015	$49,113 $60,351	22.8%	2006-2010 2011-2015	$53,906 $66,297	22.9%
Children receiving TANF monthly average enrollment of children under 18	2010 2011-2015	3,896 3,400	-12.7%	2010 2011-2015	30,154 28,115	-6.8%

Getting better | Getting worse | Unchanged | Change is neutral

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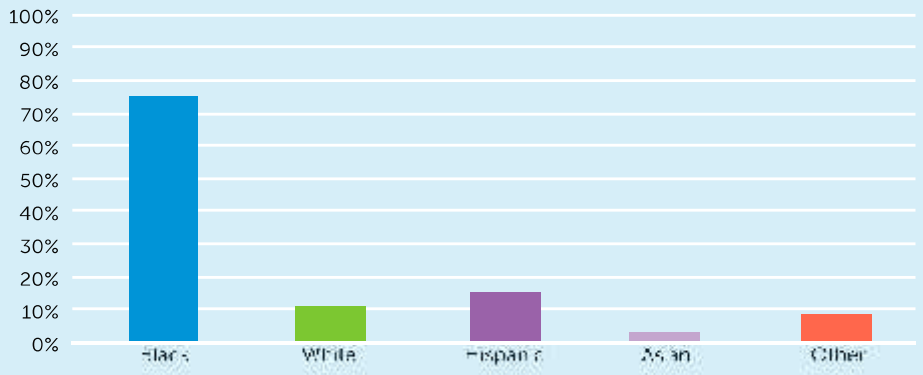
KIDS COUNT Snapshot, Ward 5

	Ward 5			DC		
Health Indicators[3]						
Children enrolled in Medicaid under age 18	2010 2015	8,701 10,500	20.7%	2010 2015	73,507 88,931	21%
Teen birth rate births to women ages 15-19, per 1,000 population	2010 2014	43.5 30.8	-12.7	2010 2014	45.4 27.6	-17.8
Infant mortality rate infant deaths under one year old, per 1,000 live births	2010 2014	10.3 10.7	.4	2010 2014	8 7.6	-.4
Family and Community Indicators[4]						
Families headed by a single woman* as a share of all families with related children	2006-2010 2011-2015	53.3% 46.5%	-6.8%	2006-2010 2011-2015	48% 42.1%	-5.9%
Average family size by ward	2006-2010 2011-2015	3.3 3.4	.2%	2006-2010 2011-2015	3.1 3.2	.1%
Households with high housing cost burden where more than 30% of the monthly income is spent on rent, mortgage payments, taxes, insurance and related expenses	2006-2010 2011-2015	50.7% 44.6%	-6.1%	2006-2010 2011-2015	44.7% 41.7%	-2.9%
Education Indicators[5]						
School Enrollment Public School Enrollment (DCPS)	2014-2015 2015-2016	4,566 4,435	-3%	2014-2015 2015-2016	47,548 48,439	1.8%
Charter School Enrollment (PCS)	2014-2015 2015-2016	8,514 8,440	-.9%	2014-2015 2015-2016	37,684 38,905	3.1%
PARCC Results % Meeting or Exceeding Expectations - 4+						
ELA	2014-2015 2015-2016	20.5% 23.5%	3%	2014-2015 2015-2016	24.8% 26.7%	1.9%
Math	2014-2015 2015-2016	17.5% 19.4%	1.9%	2014-2015 2015-2016	22.1% 24.8%	2.7%

Race/Ethnicity of DC Children (Under 18), Ward 5



Source: U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey.

Sources and Notes

[1] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

[2] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey; D.C. Department of Human Services, Economic Security Administration

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4. This document does not take into account the 123 online Charter School learners for SY14-15

*Change for this indicator is recorded in percentage points.

DC KIDS COUNT Snapshot, Ward 6

March 2017

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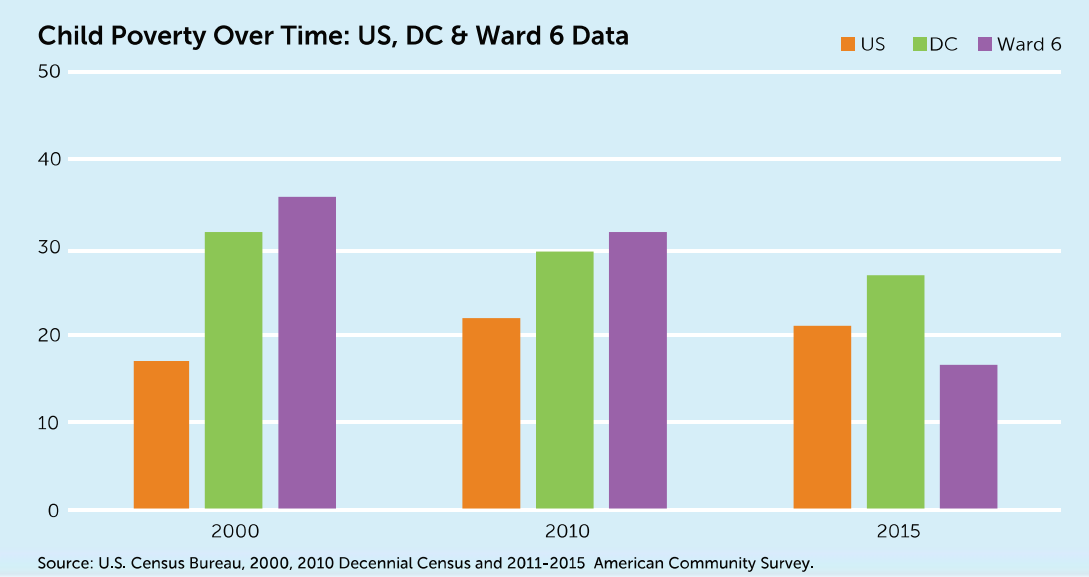


Source: U.S. Census Bureau, 2000, 2010 Decennial Census and 2011-2015 American Community Survey.

		Ward 6			DC		
Demographic Indicators[1]							
Total population	2010	76,598	10%	2010	601,723	8%
	2011-2015	84,290		2011-2015	647,484	
Child population under age 18	2010	9,881	10%	2010	100,815	10%
	2011-2015	10,849		2011-2015	111,305	
Young child population under age 5	2010	3,902	23%	2010	32,613	23%
	2011-2015	4,805		2011-2015	40,144	
Economic Well-Being Indicators[2]							
Children (under 18) in poverty* family income below 100% of the federal poverty level	2006-2010	31.8%	-15.3%	2006-2010	29.6%	-2.9%
	2011-2015	16.5%		2011-2015	26.7%	
Unemployment rate* residents 16 years and older who are not employed	2006-2010	6%	-1.3%	2006-2010	6.3%	.2%
	2011-2015	4.7%		2011-2015	6.5%	
Median family income in 2015, families with own children under 18	2006-2010	$93,735	30.7%	2006-2010	$53,906	22.9%
	2011-2015	$122,500		2011-2015	$66,297	
Children receiving TANF monthly average enrollment of children under 18	2010	3,920	-2.2 %	2010	30,154	-6.8%
	2011-2015	3,832		2011-2015	28,115	

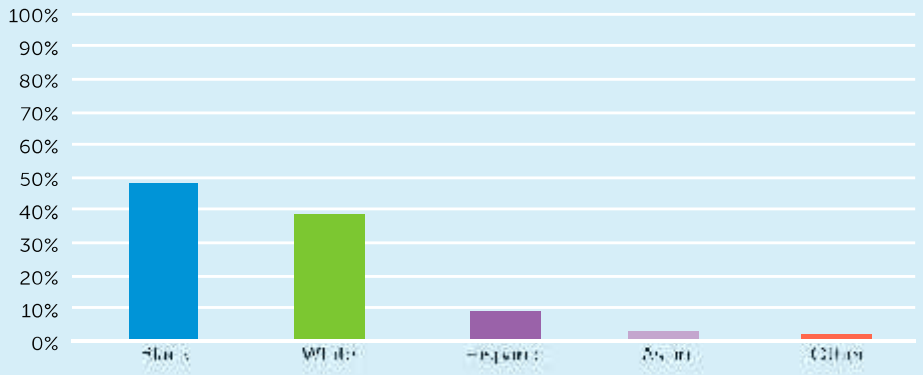
Getting better | Getting worse | Unchanged | Change is neutral

Find more city and ward level data at the DC KIDS COUNT Data Center: datacenter.kidscount.org/data/bystate

KIDS COUNT Snapshot, Ward 6

	Ward 6			DC		
Health Indicators[3]						
Children enrolled in Medicaid under age 18	2010 2015	7,379 8,168	10.7%	2010 2015	73,507 88,931	21%
Teen birth rate births to women ages 15-19, per 1,000 population	2010 2014	58.3 32.3	-26	2010 2014	45.4 27.6	-17.8
Infant mortality rate infant deaths under one year old, per 1,000 live births	2010 2014	9.8 5	-4.8	2010 2014	8 7.6	-.4
Family and Community Indicators[4]						
Families headed by a single woman* as a share of all families with related children	2006-2010 2011-2015	42% 32.6%	-9.4%	2006-2010 2011-2015	48% 42.1%	-5.9%
Average family size by ward	2006-2010 2011-2015	3 2.9	-.1%	2006-2010 2011-2015	3.1 3.2	.1%
Households with high housing cost burden where more than 30% of the monthly income is spent on rent, mortgage payments, taxes, insurance and related expenses	2006-2010 2011-2015	37.5% 34.7%	-2.8%	2006-2010 2011-2015	44.7% 41.7%	-2.9%
Education Indicators[5]						
School Enrollment Public School Enrollment (DCPS)	2014-2015 2015-2016	7,109 7,252	2%	2014-2015 2015-2016	47,548 48,439	1.8%
Charter School Enrollment (PCS)	2014-2015 2015-2016	3,629 4,137	12.3%	2014-2015 2015-2016	37,684 38,905	3.1%
PARCC Results % Meeting or Exceeding Expectations - 4+ ELA	2014-2015 2015-2016	21.5% 24.6%	3.1%	2014-2015 2015-2016	24.8% 26.7%	1.9%
Math	2014-2015 2015-2016	21.5% 24.8%	3.3%	2014-2015 2015-2016	22.1% 24.8%	2.7%

Race/Ethnicity of DC Children (Under 18), Ward 6



Source: U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey.

Sources and Notes

[1] U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey

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[3] D.C. Department of Health, Data Management and Analysis Division, Center for Policy, Planning and Evaluation; D.C. Department of Health Care Finance

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Additional Notes:

1.The 2006-2010 ACS Data utilizes 2002 DC geographic ward boundaries, while the 2011-2015 ACS Data utilizes 2012 geographic ward boundaries.

2.For the race/ethnicity figures, identification of more than one race/ethnicity may have occurred.

3.School enrollment numbers represent enrollment by Ward of school

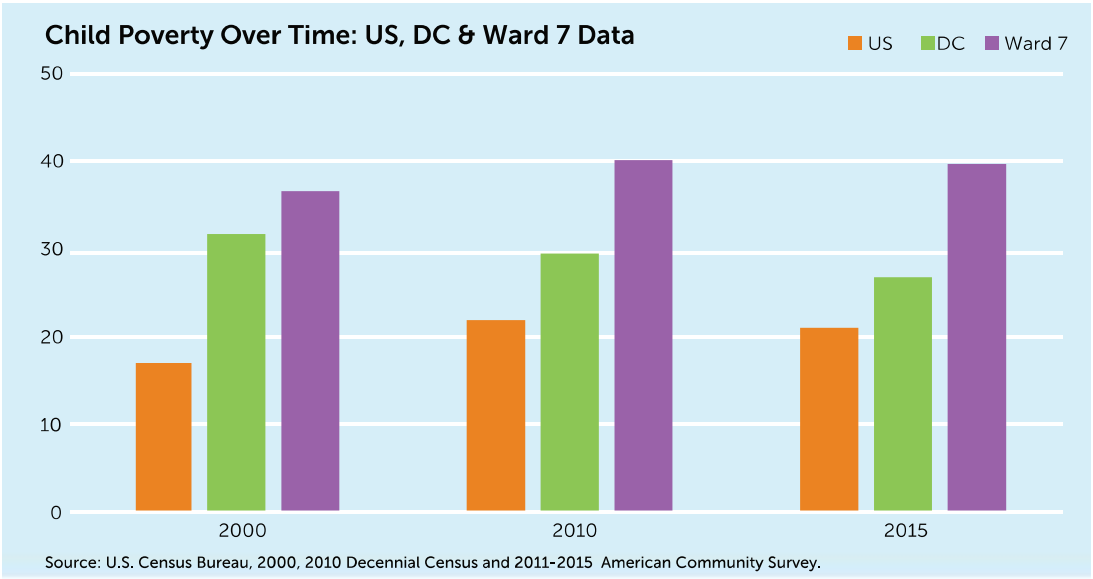
4.This document does not take into account the 123 online Charter School learners for SY14-15

*Change for this indicator is recorded in percentage points.

DC KIDS COUNT Snapshot, Ward 7

March 2017

DC KIDS COUNT is a project of DC Action for Children with support from the Annie E Casey Foundation. For more information, contact Shana Bartley, sbartley@dckids.org.



Source: U.S. Census Bureau, 2000, 2010 Decennial Census and 2011-2015 American Community Survey.

	Ward 7			DC		
Demographic Indicators[1]						
Total population	2010 2011-2015	71,068 73,290	3%	2010 2011-2015	601,723 647,484	8%
Child population under age 18	2010 2011-2015	17,825 16,992	-5%	2010 2011-2015	100,815 111,305	10%
Young child population under age 5	2010 2011-2015	4,758 5,204	9%	2010 2011-2015	32,613 40,144	23%
Economic Well-Being Indicators[2]						
Children (under 18) in poverty* family income below 100% of the federal poverty level	2006-2010 2011-2015	40.3% 39.9%	-.4%	2006-2010 2011-2015	29.6% 26.7%	-2.9%
Unemployment rate* residents 16 years and older who are not employed	2006-2010 2011-2015	11.5% 11%	-.5%	2006-2010 2011-2015	6.3% 6.5%	.2%
Median family income in 2015, families with own children under 18	2006-2010 2011-2015	$34,562 $31,273	-9.5%	2006-2010 2011-2015	$53,906 $66,297	22.9%
Children receiving TANF monthly average enrollment of children under 18	2010 2011-2015	6,731 6,811	1.2%	2010 2011-2015	30,154 28,115	-6.8%

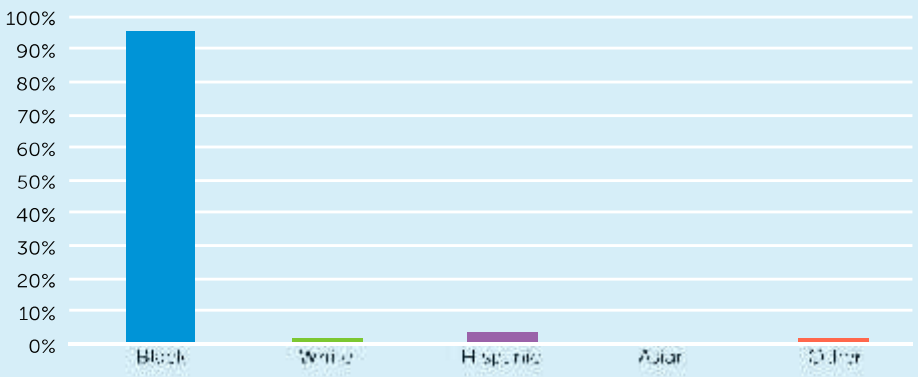
Getting better | Getting worse | Unchanged | Change is neutral

Find more city and ward level data at the DC KIDS COUNT Data Center: datacenter.kidscount.org/data/bystate

KIDS COUNT Snapshot, Ward 7

	Ward 7			DC		
Health Indicators[3]						
Children enrolled in Medicaid under age 18	2010 2015	13,529 17,154	26.8%	2010 2015	73,507 88,931	21%
Teen birth rate births to women ages 15-19, per 1,000 population	2010 2014	75.9 58.5	-17.4	2010 2014	45.4 27.6	-17.8
Infant mortality rate infant deaths under one year old, per 1,000 live births	2010 2014	6.6 9.6	3	2010 2014	8 7.6	-.4
Family and Community Indicators[4]						
Families headed by a single woman* as a share of all families with related children	2006-2010 2011-2015	70.8% 72.1%	1.2%	2006-2010 2011-2015	48% 42.1%	-5.9%
Average family size by ward	2006-2010 2011-2015	3.3 3.3	0%	2006-2010 2011-2015	3.1 3.2	.1%
Households with high housing cost burden where more than 30% of the monthly income is spent on rent, mortgage payments, taxes, insurance and related expenses	2006-2010 2011-2015	51.5% 49.7%	-1.8%	2006-2010 2011-2015	44.7% 41.7%	-2.9%
Education Indicators[5]						
School Enrollment Public School Enrollment (DCPS)	2014-2015 2015-2016	5,531 5,542	.2%	2014-2015 2015-2016	47,548 48,439	1.8%
Charter School Enrollment (PCS)	2014-2015 2015-2016	6,014 6,337	5.1%	2014-2015 2015-2016	37,684 38,905	3.1%
PARCC Results % Meeting or Exceeding Expectations - 4+						
ELA	2014-2015 2015-2016	12.1% 16.2%	4.1%	2014-2015 2015-2016	24.8% 26.7%	1.9%
Math	2014-2015 2015-2016	15.5% 19.8%	4.3%	2014-2015 2015-2016	22.1% 24.8%	2.7%

Race/Ethnicity of DC Children (Under 18), Ward 7



Source: U.S. Census Bureau, 2006-2010 and 2011-2015 American Community Survey.

Sources and Notes

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*Change for this indicator is recorded in percentage points.

DC KIDS COUNT Snapshot, Ward 8

March 2017

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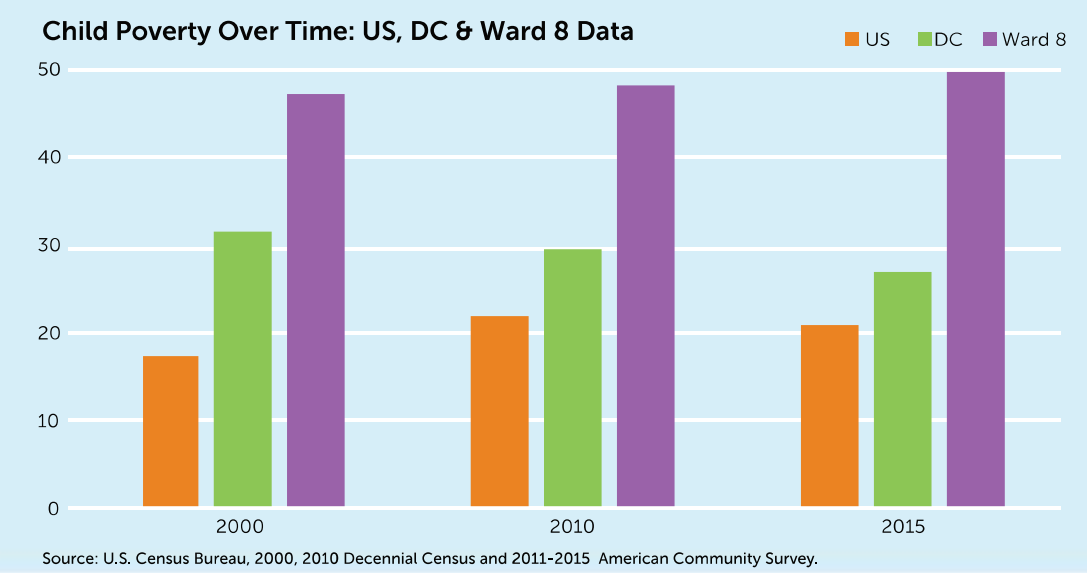

Source: U.S. Census Bureau, 2000, 2010 Decennial Census and 2011-2015 American Community Survey.

	Ward 8			DC		
Demographic Indicators[1]						
Total population	2010 2011-2015	70,712 81,133	15%	2010 2011-2015	601,723 647,484	8%
Child population under age 18	2010 2011-2015	21,377 24,499	15%	2010 2011-2015	100,815 111,305	10%
Young child population under age 5	2010 2011-2015	6,557 7,869	20%	2010 2011-2015	32,613 40,144	23%
Economic Well-Being Indicators[2]						
Children (under 18) in poverty* family income below 100% of the federal poverty level	2006-2010 2011-2015	48.3% 49.6%	1.3%	2006-2010 2011-2015	29.6% 26.7%	-2.9%
Unemployment rate* residents 16 years and older who are not employed	2006-2010 2011-2015	11.1% 12.7%	1.6%	2006-2010 2011-2015	6.3% 6.5%	.2%
Median family income in 2015, families with own children under 18	2006-2010 2011-2015	$28,979 $24,096	-16.9%	2006-2010 2011-2015	$53,906 $66,297	22.9%
Children receiving TANF monthly average enrollment of children under 18	2010 2011-2015	8,547 8,594	.5%	2010 2011-2015	30,154 28,115	-6.8%

Getting better | Getting worse | Unchanged | Change is neutral

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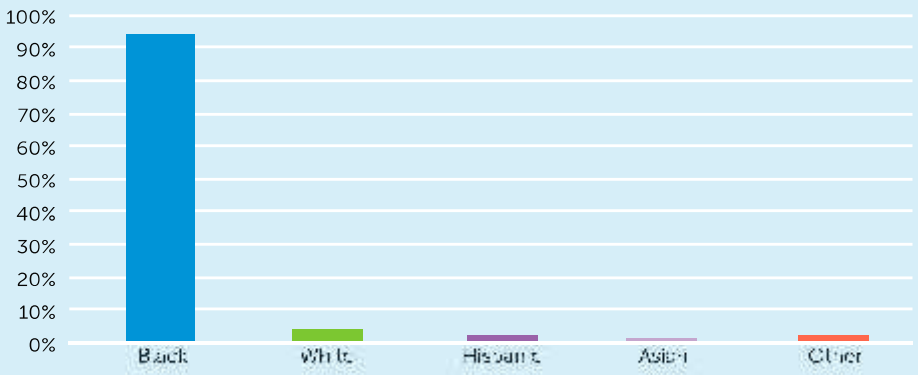
KIDS COUNT Snapshot, Ward 8

	Ward 8			DC		
Health Indicators[3]						
Children enrolled in Medicaid under age 18	2010 2015	15,838 20,882	31.8%	2010 2015	73,507 88,931	21%
Teen birth rate births to women ages 15-19, per 1,000 population	2010 2014	90.5 53.2	-37.3	2010 2014	45.4 27.6	-17.8
Infant mortality rate infant deaths under one year old, per 1,000 live births	2010 2014	10.4 12.5	2.1	2010 2014	8 7.6	-.4
Family and Community Indicators[4]						
Families headed by a single woman* as a share of all families with related children	2006-2010 2011-2015	73.6% 72.5%	-1.1%	2006-2010 2011-2015	48% 42.1%	-5.9%
Average family size by ward	2006-2010 2011-2015	3.4 3.5	.1%	2006-2010 2011-2015	3.1 3.2	.1%
Households with high housing cost burden where more than 30% of the monthly income is spent on rent, mortgage payments, taxes, insurance and related expenses	2006-2010 2011-2015	55.6% 58.9%	3%	2006-2010 2011-2015	44.7% 41.7%	-2.9%
Education Indicators[5]						
School Enrollment Public School Enrollment (DCPS)	2014-2015 2015-2016	8,130 8,054	-.9%	2014-2015 2015-2016	47,548 48,439	1.8%
Charter School Enrollment (PCS)	2014-2015 2015-2016	7,374 7,800	5.5%	2014-2015 2015-2016	37,684 38,905	3.1%
PARCC Results % Meeting or Exceeding Expectations - 4+						
ELA	2014-2015 2015-2016	11.2% 13.1%	1.9%	2014-2015 2015-2016	24.8% 26.7%	1.9%
Math	2014-2015 2015-2016	10.9% 12.7%	1.8%	2014-2015 2015-2016	22.1% 24.8%	2.7%

Race/Ethnicity of DC Children (Under 18), Ward 8



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*Change for this indicator is recorded in percentage points.

THE ANNIE E. CASEY FOUNDATION

2019 KIDS COUNT PROFILE

DISTRICT OF COLUMBIA

ECONOMIC WELL-BEING

	UNITED STATES			DISTRICT OF COLUMBIA	
CHILDREN IN POVERTY US: 13,353,000 | DC: 32,000	22% 2010	18% 2017	BETTER	30% 2010	26% 2017 BETTER
CHILDREN WHOSE PARENTS LACK SECURE EMPLOYMENT US: 20,075,000 | DC: 52,000	33% 2010	27% 2017	BETTER	44% 2010	42% 2017 BETTER
CHILDREN LIVING IN HOUSEHOLDS WITH A HIGH HOUSING COST BURDEN US: 22,908,000 | DC: 49,000	41% 2010	31% 2017	BETTER	42% 2010	39% 2017 BETTER
TEENS NOT IN SCHOOL AND NOT WORKING US: 1,171,000 | DC: 2,000	9% 2010	7% 2017	BETTER	9% 2010	8% 2017 BETTER

EDUCATION

	UNITED STATES			DISTRICT OF COLUMBIA	
YOUNG CHILDREN (AGES 3 AND 4) NOT IN SCHOOL US: 4,223,000 | DC: 4,000	52% 2009–11	52% 2015–17	SAME	31% 2009–11	25% 2015–17 BETTER
FOURTH-GRADERS NOT PROFICIENT IN READING US: N.A. | DC: N.A.	68% 2009	65% 2017	BETTER	83% 2009	71% 2017 BETTER
EIGHTH-GRADERS NOT PROFICIENT IN MATH US: N.A. | DC: N.A.	67% 2009	67% 2017	SAME	89% 2009	79% 2017 BETTER
HIGH SCHOOL STUDENTS NOT GRADUATING ON TIME US: N.A. | DC: N.A.	21% 2010–11	15% 2016–17	BETTER	41% 2010–11	27% 2016–17 BETTER

DC Action for Children
www.dcactionforchildren.org | 202.234.9404

Learn more at **datacenter.kidscount.org/DC**

N.A.: Not available

THE ANNIE E. CASEY FOUNDATION

2019 KIDS COUNT PROFILE

DISTRICT OF COLUMBIA

HEALTH

	UNITED STATES			DISTRICT OF COLUMBIA	
LOW BIRTH-WEIGHT BABIES US: 318,873 | DC: 1,001	8.1% 2010	8.3% 2017	WORSE	10.2% 2010	10.5% 2017 WORSE
CHILDREN WITHOUT HEALTH INSURANCE US: 3,925,000 | DC: 2,000	8% 2010	5% 2017	BETTER	2% 2010	1% 2017 BETTER
CHILD AND TEEN DEATHS PER 100,000 US: 20,337 | DC: 34	26 2010	26 2017	SAME	41 2010	25 2017 BETTER
TEENS WHO ABUSE ALCOHOL OR DRUGS US: 1,028,000 | DC: 2,000	5% 2015–16	4% 2016–17	BETTER	6% 2015–16	5% 2016–17 BETTER

FAMILY AND COMMUNITY

	UNITED STATES			DISTRICT OF COLUMBIA	
CHILDREN IN SINGLE-PARENT FAMILIES US: 24,001,000 | DC: 59,000	34% 2010	34% 2017	SAME	60% 2010	51% 2017 BETTER
CHILDREN IN FAMILIES WHERE THE HOUSEHOLD HEAD LACKS A HIGH SCHOOL DIPLOMA US: 9,557,000 | DC: 17,000	15% 2010	13% 2017	BETTER	19% 2010	14% 2017 BETTER
CHILDREN LIVING IN HIGH-POVERTY AREAS US: 8,545,000 | DC: 30,000	13% 2008–12	12% 2013–17	BETTER	31% 2008–12	25% 2013–17 BETTER
TEEN BIRTHS PER 1,000 US: 194,377 | DC: 408	34 2010	19 2017	BETTER	45 2010	21 2017 BETTER

STATE BABY FACTS

A Look at Infants, Toddlers, and Their Families in 2015

Washington, D.C.

Do you know what lies ahead for Washington, D.C.? No need to consult a crystal ball. The clearest way to envision what the future holds is to take a look at the babies. They tell us an important story of what it is currently like to be a very young child in this state and the important resources that can change the future life course for the many children who are not getting off to the best start.

A baby's early experiences shape the brain's architecture into a strong—or fragile—foundation for learning, health, and success in the workplace. Adverse early experiences, such as poverty, can weaken babies' brain development and follow them their entire lives. A state's ability to build a strong, competitive economy in an increasingly global marketplace is jeopardized when the future of so many young children is compromised. By evaluating these facts and using them to improve relevant programs and services, Washington, D.C. can re-prioritize infants, toddlers, and their families and change the future for all of us.

All babies in Washington, D.C., and across the United States, need **good health**, **strong families**, and **positive early learning experiences** to foster healthy brain development and realize their full potential. How does Washington, D.C. compare with the United States in providing these supports?

The Basics about Infants and Toddlers in Washington, D.C.

	26,517	24%	14%	45%	71%
STATE					
NATIONAL	11,886,860	16%	11%	34%	62%
	Total population under age 3	Percentage of children under age 18 who are infants and toddlers	Live in families with parents who are unemployed	Live with an unmarried parent	Mothers in the labor force with infants

BABIES AT RISK:

Infants and toddlers by family income level

In Washington, D.C., a significant percentage of infants and toddlers live in low-income families, leaving them particularly vulnerable. Research shows that poverty at an early age can be especially harmful, affecting later achievement and employment.

Washington, D.C.

National

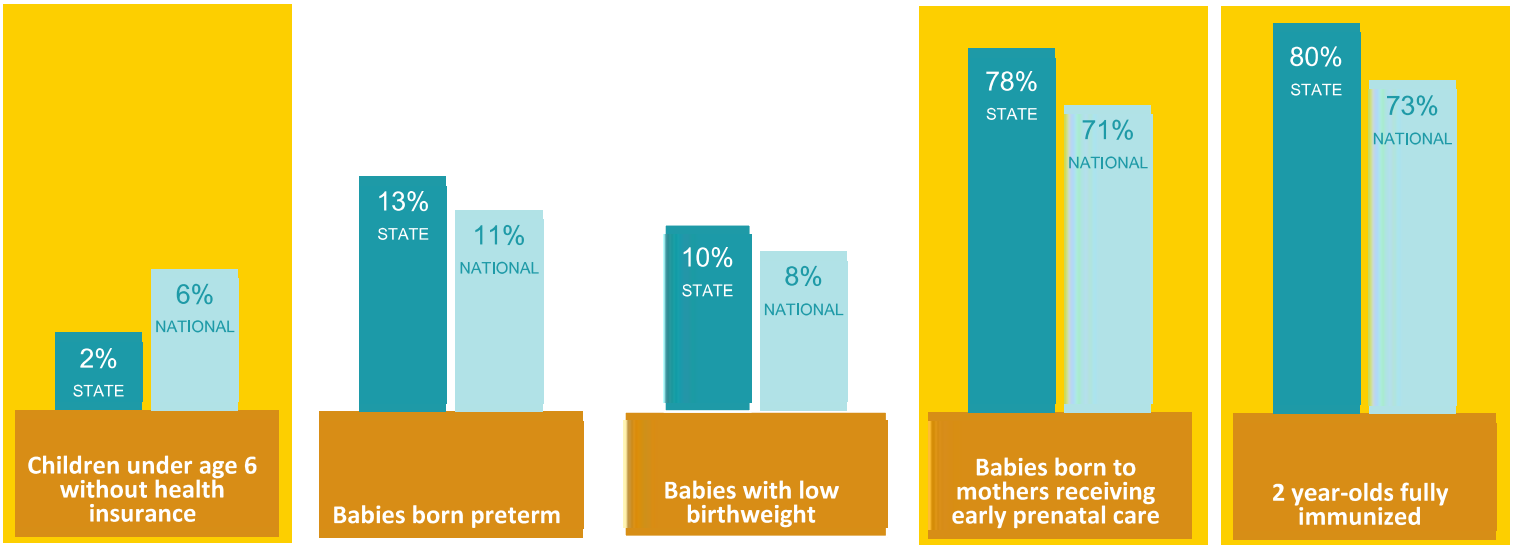
FPL = Federal Poverty Level

SOURCE: National Center for Children in Poverty

WASHINGTON, D.C.'S GOOD HEALTH

Good health is the foundation from which young children grow and develop physically, cognitively, emotionally, and socially. The need for high-quality medical care and adequate nutrition before birth and during a child's earliest years is more crucial than at most other times in life. Preventive care and screening can catch problems early and are key building blocks for healthy early development.

HOW DOES WASHINGTON, D.C.'S GOOD HEALTH COMPARE WITH U.S.?



HOW CAN WE SUPPORT GOOD HEALTH?

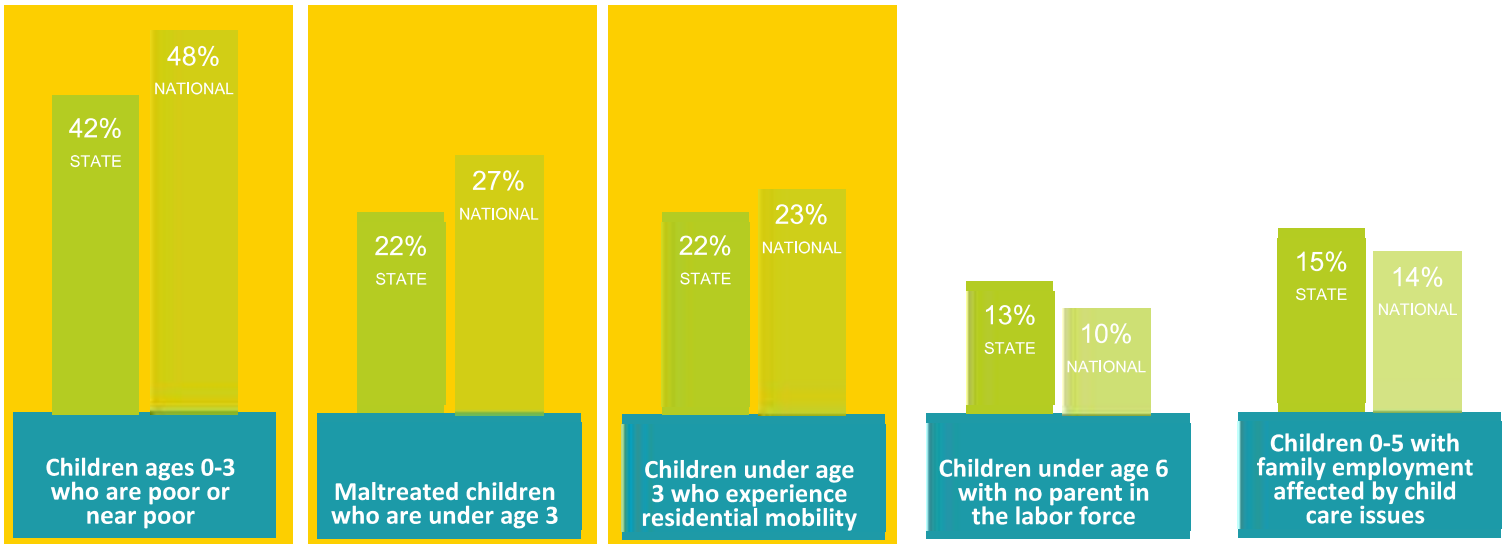
Programs can help ensure that Washington, D.C.'s babies get a healthy start in life, as health and nutrition programs play a key role in protecting the health of the most vulnerable infants and toddlers. These programs include **Medicaid**, the **Supplemental Nutrition Assistance Program (SNAP)**, and the **Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)**. For more information on these programs, go to www.zerotothree.org/goodhealth.

68%	90%	13%	28%	STATE
45%	90%	14%	23%	NATIONAL
BIRTHS COVERED BY MEDICAID	INFANTS ON MEDICAID THAT RECEIVE AT LEAST ONE EPSDT SCREENING	SNAP RECIPIENTS UNDER AGE 5	WIC RECIPIENTS THAT ARE INFANTS	

WASHINGTON, D.C.'S STRONG FAMILIES

Young children develop in the context of their families, where supportive relationships nurture their growth. Especially during an economic downturn, it can be challenging for parents to provide their children the necessities of life. During these early years, factors like family stress, multiple moves, fluctuating family structure, difficult economic situations, negative environmental effects, and abuse and neglect can impair the development of infants and toddlers.

HOW DO WASHINGTON, D.C.'S STRONG FAMILIES COMPARE TO THE U.S.?



HOW CAN WE SUPPORT STRONG FAMILIES?

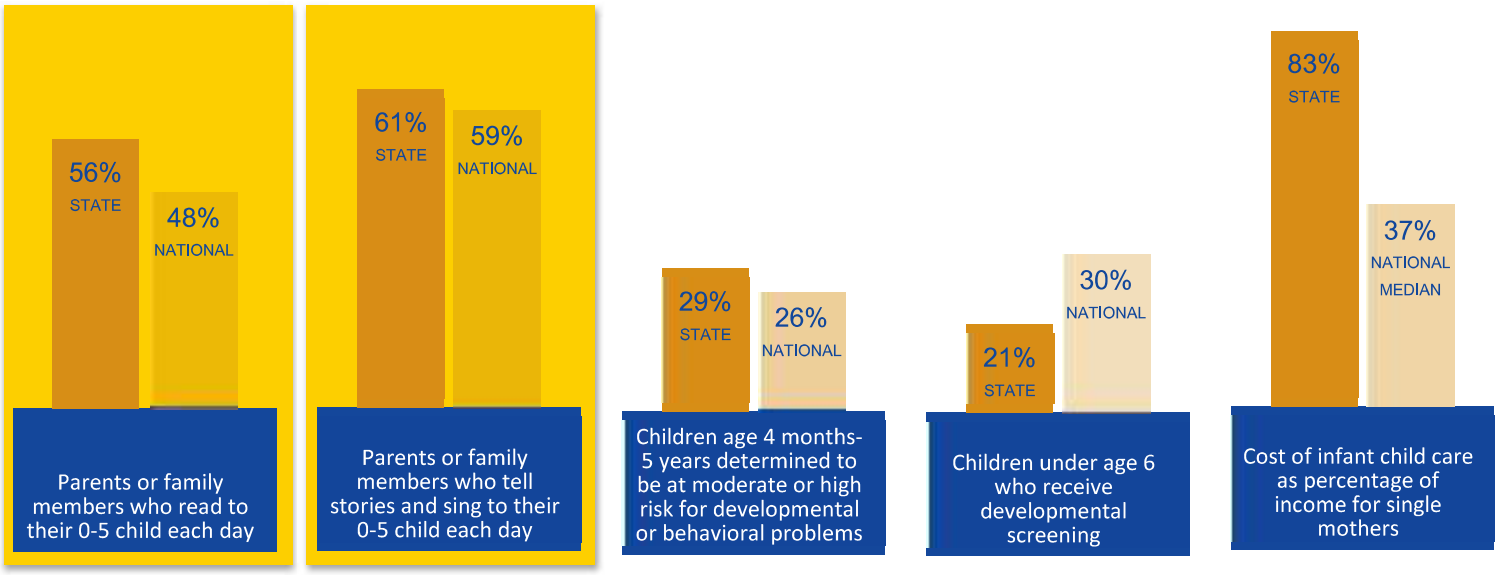
Programs like **Temporary Assistance for Needy Families (TANF)**, **Low Income Home Energy Assistance Program (LIHEAP)**, **Home Visiting**, **Child Welfare**, and **Paid Family Leave** play an important role in helping Washington, D.C.'s families support their child's healthy growth and development. For more information on these programs, go to www.zerotothree.org/strongfamilies.

53%	24%	32%	STATE
37%	22%	31%	NATIONAL
FAMILIES ON TANF WITH AT LEAST ONE CHILD UNDER AGE 3	HOUSEHOLDS RECEIVING LIHEAP HEATING ASSISTANCE WITH CHILD UNDER AGE 6	CHILDREN ENTERING FOSTER CARE THAT ARE UNDER AGE 3	

WASHINGTON, D.C.'S POSITIVE EARLY LEARNING EXPERIENCES

For very young children, learning takes place through play, the active exploration of their environment, and, most importantly, through positive interactions with the significant adults in their lives. Gaps between children of different income levels in the amount of talk, vocabulary growth, and style of interaction appear early and widen long before a child enters school. Relationships with parents, early childhood professionals, and caregivers are critical as the brain forms the complex web of visual, language, motor, and social-emotional connections essential for later learning.

HOW DO WASHINGTON, D.C.'S POSITIVE EARLY LEARNING EXPERIENCES COMPARE TO THE U.S.?



HOW CAN WE SUPPORT POSITIVE EARLY LEARNING EXPERIENCES?

For infants and toddlers, learning unfolds in many settings, including the home, **child care centers, Early Head Start (EHS), family child care homes**, and **family, friend, and neighbor care**. High-quality care that promotes positive early learning can have lasting effects into adulthood, particularly for children who are at risk for starting school behind their peers. For more information on these programs, go to www.zerotothree.org/earlylearning.

594	NOT AVAILABLE	2%	STATE
107,393	27%	3%	NATIONAL
INFANTS, TODDLERS, AND PREGNANT WOMEN WHO PARTICIPATE IN EHS	PERCENTAGE OF CHILDREN RECEIVING FEDERAL CHILD CARE SUPPORT UNDER AGE 3	INFANTS AND TODDLERS WHO RECEIVE PART C EARLY INTERVENTION SERVICES	

DISTRICT OF COLUMBIA'S CHILDREN 2017

District of Columbia's Children at a Glance[1]

State Population[2]	672,228	Poverty Rate, Children Under 18[3]	25.6%
Population, Children Under 18[4]	117,838	Poverty Rate, Children Ages 5–17[5]	28.7%
State Poverty Rate[6]	17.3%	Poverty Rate, Children Under 5[7]	20.3%

CHILD ABUSE AND NEGLECT

- In 2015, District of Columbia had 14,674 total referrals for child abuse and neglect. Of those, 5,735 reports were referred for investigation.[8]
- In 2015, there were 1,348 victims of abuse or neglect in District of Columbia, a rate of 11.4 per 1,000 children, a a decrease 11.8% from 2014. Of these children, 84.5% were neglected, 20.2% were physically abused, and 3% were sexually abused.[9]
- The number of child victims has decreased 43.3% in comparison to the number of victims in 2011.[10]
- In 2015, there were 3 child deaths resulting from abuse or neglect reported in District of Columbia[11]
- 947 children in District of Columbia lived apart from their families in out-of-home care in 2015, compared with 1,797 children in 2011. Of the children living apart from their families in 2014, there were 278 aged 5 or younger, and 307 were 16 or older.[12]
- The number of children living apart from their families in out-of-home care has decreased 47.3% in comparison to the number of children in out-of-home care in2011.[13]
- In 2015, of children in out-of-home care in District of Columbia, < .5% were white, 89% were black, 9% were Hispanic, N.R. were American Indian/Alaskan Native, < .5% were Asian or Pacific Islander and 1-2% were of more than one race or ethnicity/undetermined race or ethnicity.[14]

ADOPTION, KINSHIP CARE, AND PERMANENT FAMILIES FOR CHILDREN

- Of the 550 children exiting out-of-home care in 2014 in District of Columbia, 31% were reunited with their parents or primary caretakers.[15]
- 106 children were legally adopted through a public child welfare agency in District of Columbia in 2015, a decrease of 0.9% from 107 in 2014.[16]
- Of the 947 children in out-of-home care in 2015, there were 224 or 23.7% waiting to be adopted.[17]

- In 2015, approximately 6,272 grandparents in District of Columbia had the primary responsibility of caring for their grandchildren.[18]
- 172 of the children in out-of-home care in 2014 were living with relatives while in care.[19]

CHILD POVERTY AND INCOME SUPPORT

- The monthly average number of individuals receiving Temporary Assistance for Needy Families (TANF) in District of Columbia decreased from 15,670 in 2015 to 13,634 in 2016, a 14.9% change. There was a 5,472 monthly average of families received TANF in 2016, a decrease of 14.1% from 2015.[20]
- In District of Columbia in 2015, 52,000 children lived below 200% of poverty.[21]
- $262,957,426 was spent in 2015 on TANF assistance in District of Columbia, including 26.3% on basic assistance, 22.3% on child care, 0.0% on transportation, and 0.0% on nonassistance.[22]
- $7,670,984 was spent in 2015 on WIC (the Special Supplement Nutrition Program for Women, Infants, and Children) in District of Columbia, serving 14,526 participants.[23]
- In 2014, District of Columbia distributed $47,357,275 in child support funds, a decrease of 1.6% from 2013.[24]
- 42,000 children in District of Columbia lived in households with a high housing burden in 2014, where more than 30% of monthly income is spent on housing costs.[25]
- In December of 2016, the unemployment rate in District of Columbia was 5.8.[26]
- 13.2% of households in District of Columbia were food insecure on average from 2012 to 2014, meaning that the family experienced difficulty providing enough food due to lack of resources at some point during the year.[27]

CHILD CARE AND HEAD START

- In 2015, District of Columbia had a monthly average of 1,500 children served by subsidized child care. An average of 1,200 children received subsidized child care per month in 2014 and 1,700 were recipients in 2013.[28]
- In 2016, to be eligible for subsidized child care in District of Columbia, a family of three could make no more than $45,775 at application, which is equivalent to 65% of the state's median income.[29]
- As of early 2016, District of Columbia had no children on its waiting list for child care assistance.[30]
- In 2015, Head Start served 3,306 children in District of Columbia, an increase of 6.0% from 2014.[31]
- Through federal grants from the Home Visiting Program, in fiscal year 2015, home visitors in District of Columbia made 3,367 home visits to 514 parents and children in 273 families, as well as enrolled 351 new parents and children to the program.

HEALTH AND SUBSTANCE ABUSE

- 89,210 children in District of Columbia were enrolled in Medicaid in 2015, a decrease of 2.2% from 2014.[32]
- In 2015, District of Columbia had 10,676 children enrolled in its State Children's Health Insurance Program, an increase of 33.6% from 2014, when 7,085 children were enrolled.[33]
- In 2015, District of Columbia had 1,806 uninsured children.[34]
- 959 babies were born weighing less than 2,500 grams in District of Columbia in 2015.[35]
- 82 infants under age 1 died in District of Columbia in 2015.[36]
- In 2015, the birth rate for teens ages 15 to 17 in District of Columbia was 18.2 births per 1,000 girls. The rate was 30.5 for teens ages 18 to 19. This reflects a total rate of 26 births for girls ages 15 to 19.[37]
- Cumulative through 2015, there were 21,252 adults and adolescents and 193 children younger than 13 reported as having HIV/AIDS in District of Columbia.[38]
- In 2015, an estimated Less than 500 children ages 12 to 17 were alcohol dependent in the past year and 25,000 adults age 18 and older were dependent on alcohol or used heroin in the past year in District of Columbia.[39]
- In 2014, approximately 1,000 children ages 12 to 17 needed but had not received treatment for alcohol use in the past year.[40]
- In 2014, approximately 1,000 children ages 12 to 17 needed but had not received treatment for illicit drug use in the past year.[41]
- In 2015, health care costs related to opioid abuse in District of Columbia reached $62,588,368.

VULNERABLE YOUTH

- 64 children in District of Columbia aged out of out-of-home care—exited foster care to emancipation—in 2015.[42]
- 62% of high school students in District of Columbia graduated on time at the end of the 2012-13 year.[43]
- 2,000 teens ages 16 to 19 in District of Columbia were not enrolled in school and not working in 2015.[44]
- 8,000 young adults ages 18 to 24 were not enrolled in school, were not working, and had no degree beyond high school in 2015.[45]
- 72% of young adults in District of Columbia ages 25 to 34 had an associate's degree or higher from 2011 to 2013.[46]
- In 2015, there were no reports of children in District of Columbia aged 10 to 14 committing suicide, and less than 10 reports of suicide among children aged 15 to 19.[47]

JUVENILE JUSTICE AND DELINQUENCY PREVENTION

- 13 children under age 19 were killed by a firearm in District of Columbia in 2015, compared to less than 10 in 2014.[48]
- 417 children younger than 18 were arrested in District of Columbia in 2015. Violent crimes were the reason for 67 of the arrests in 2015.[49]
- 228 children lived in juvenile correction facilities in District of Columbia in 2013.[50]

CHILD WELFARE WORKFORCE[51]

- The federal Child and Family Service Reviews have clearly demonstrated that the more time a caseworker spends with a child and family, the better the outcomes for those children and families.[52]
- According to a 2003 GAO report, the average caseload for child welfare/foster care caseworkers is 24–31 children; these high caseloads contribute to high worker turnover and insufficient services being provided to children and families. CWLA recommends that foster care caseworkers have caseloads of 12–15 children.[53]
- Average turnover rates for child welfare agencies range from 20% to 40%.[54] Turnover rates at around 10% are considered to be optimal in any agency.[55]
- Caseworker turnover has negative outcomes for children in the child welfare system, including placement disruptions and increased time in out-of-home care.[56]
- According to the National Survey of Child and Adolescent Well-Being II baseline report, 75% of caseworkers earned a salary between $30,000 and $49,999.[57]
- The majority of caseworkers hold a bachelor's degree (52.3%) or a bachelor of social work degree (21.9%). Only 25% of caseworkers hold a master's degree.[58]
- A workload model in Colorado found that approximately 574 additional caseworkers were needed in their state to adequately provide child welfare services, due to estimated time requirements for meaningful services. This number represents a 49% increase that is needed on top of hours already spent on case related tasks.[59]

SOCIAL SERVICES BLOCK GRANT

- In 2014, District of Columbia's sum of expenditures for services totaled $3,948,294. The most utilized service in District of Columbia was Other Services totaling $2,094,888.[60]

FUNDING CHILD WELFARE SERVICES FOR DISTRICT OF COLUMBIA'S CHILDREN

- In 2014, District of Columbia spent $223,186,331 for child welfare services. Child welfare services are all direct and administrative services the state agency provides to children and families. Of this amount, $66,297,739 was from federal funds and $156,888,592 was from state and local funds.[61]

- In 2014, of the $66,297,739 in federal funds received for child welfare, 94.0% was from Title IV-E Foster Care and Adoption Assistance, 1.3% came from Title IV-B Child Welfare Services and Promoting Safe and Stable Families, 0.3% was from Medicaid, 0% came from Social Services Block Grant, 0% was from TANF, and 4.4% came from other federal sources.[62]

- District of Columbia received $30,885,985 in federal funds for IV-E foster care expenditures in 2014, including $7,446,083 for maintenance payments and $23,439,902 for administration, child placement, the statewide automated child welfare information system, and training.[63]

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[59] Colorado Department of Human Services. (2014). *Colorado child welfare county workload study.* Retrieved March 7, 2016 from http://www.leg.state.co.us/OSA/coauditor1.nsf/All/E5214710B77C878487257D320050F29A/$FILE/1354S%20-%20Colorado%20Childrens'%20Welfare%20Workload%20Study%20Report%20August%202014.pdf.

[60] U.S. Department of Health and Human Services, Administration for Children and Families, Office of Community Services. (2016). *SSBG Annual Report FY 2014*. Retrieved March 20, 2017 from https://www.acf.hhs.gov/ocs/resource/ssbg-annual-report-fy-2014

[61] DeVooght, K., Fletcher, M., & Cooper, H. (2014). F*ederal, State, and Local spending to address child abuse and neglect in SFY 2012: Appendix A:SFY 2012 State-by-State Data.2008/2010 Casey Child Welfare Financing Survey and 2012 Casey Child Welfare Financing Survey.* Washington, DC. Retrieved February 26, 2016 from http://www.childtrends.org/wp-content/uploads/2014/09/2014-61ChildWelfareSpending-2012-2nd-revision-march.pdf.

Note: Examples of direct services include child abuse/neglect investigations, foster care, community-based programs, case management, and all such services required for the safety, permanency, and well-being of children. Examples of administrative services include management information systems, training programs, eligibility determination processes, and all services that provide the infrastructure supports for the public agency. The component funding streams may not equal the total, depending on additional child support and demonstration funds for this state.

[62] Ibid.

[63] Ibid.

STEPPING UP FOR KIDS

what government and communities should do to support kinship families

policy report

KIDS COUNT

The Annie E. Casey Foundation

STEPPING UP FOR KIDS

what government and communities should do to support kinship families

Across every generation and culture, grandparents, other relatives, and close family friends have stepped forward to raise children whose parents can no longer care for them. This time-honored tradition, known as kinship care, helps protect children and maintains strong family, community, and cultural connections. When children cannot remain safely with their parents, other family and friends can provide a sense of security, positive identity, and belonging.

Extended family members and close family friends care for more than 2.7 million children in this country, an increase of almost 18 percent over the past decade.[1] The vast majority of these living arrangements are established informally within families.

Nevertheless, about 104,000 of these children have been placed with kin formally, as part of the state-supervised foster care system. In fact, children placed with kin by the formal foster care system represent one-fourth of all children who have been removed from their homes by the public child welfare system and placed in state custody.[2]

Whether they took in children through informal arrangements or through the state-supervised foster care system, all kinship caregivers face the emotional, physical, and financial strain of raising children who have experienced the trauma of parental separation. Many kinship caregivers take on this responsibility without government assistance, often because they do not realize they could get help. And even those who are able to get help find themselves navigating through thickets of bureaucratic rules and procedures that evolved without kinship families in mind.

With help, kinship caregivers have proven they can ensure that children are kept safe and healthy and are able to achieve their full potential. Smart investments in these caring families also save money. Their loving support enhances children's development, preventing the need for more intrusive and expensive government interventions down the line.

This policy report summarizes what we know about kinship care, identifies

Overall, 1 in 11 children lives in kinship care at some point before the age of 18. One in 5 black children spends time in kinship care at some point in their childhood.

What Is Kinship Care?

The term *kinship care* refers to situations in which children are cared for full time by blood relatives or other adults with whom they have a family-like relationship, such as godparents or close family friends. There are two main types of kinship care. ***Private***, or ***informal, kinship care*** is an arrangement in which extended family members raise children without child protective services involvement. ***Public kinship care*** describes situations in which families care for children involved with the child welfare system. ***Kinship foster care*** describes the subset of child welfare-involved children who are placed with relatives, but remain in the legal custody of the state.[3]

the problems and issues these families face, and recommends how we can best support caregivers as they step up to take responsibility for children in their extended families and communities.

KINSHIP CARE: A COMMON SOLUTION THAT WORKS FOR KIDS

Nationally, relatives or family friends are raising approximately 2.7 million children because their parents can no longer care for them.[4] Kin and close friends step up to care for children for many reasons: parental substance abuse and mental illness; child abuse, neglect, or abandonment; illness or death; incarceration; and domestic violence.[5]

Children may also go to live with relatives because of military deployment, employment opportunities in other states, divorce, and deportation. In all of these very different circumstances, kinship care arrangements vary in length from several weeks or months to lifelong caregiving relationships.[6]

Although the vast majority of children live in kinship families without any child protective services involvement, state agencies also depend on kin to care for abused and neglected children under state supervision. The most recent data available show that more than 1 in 4 children in foster care—approximately 104,000 children—are in foster care with relatives.[7] In addition, approximately 400,000 children who came to the attention of the child welfare system, but were diverted from state custody, live with kin as an alternative to foster care.[8] In other words, after a referral has been made to the child welfare system, a worker helps the family find an alternative living arrangement for the child with a family member, at least temporarily, without that system securing legal custody and accepting oversight responsibility.

Data show that families are relying on kinship care at a much higher rate than in years past. In fact, over the past decade the number of children in kinship care grew six times faster than the number of children in the general population (18 percent versus 3 percent).[9] Newly available data suggest that a large number of children spend time in kinship care at some point during their childhoods, with 1 in 11 children living in kinship care for at least three consecutive months at some point before the age of 18. The likelihood that African-American children will experience kinship care is more than double that of the overall population, with 1 in 5 black children spending time in kinship care at some point during their childhood.[10]

Kinship Care Increases Child Safety, Stability, Permanence, and Well-Being

The notion that children do better in families is a fundamental value that cuts across all racial, ethnic, and socioeconomic boundaries. Kinship care helps children maintain familial and community bonds and provides them with a sense of stability, identity, and belonging, especially during times of crisis. Kinship care also helps to minimize the trauma and loss that accompany parental separation. For children

TABLE I

How Many Children Are in Kinship Care?

About 4 percent of all children are in kinship care. While only around 104,000 of them are in state-supervised foster care, they represent nearly 26 percent of the foster care population.

State	Children in Public and Private Kinship Care[1]		Children in State-Supervised Kinship Foster Care[2]	
	Number	% of all children	Number	% of all children in foster care
United States	2,712,000	4%	103,943	26%
Alabama	50,000	4%	660	12%
Alaska	7,000	4%	451	25%
Arizona	60,000	3%	3,605	37%
Arkansas	34,000	5%	566	15%
California	333,000	4%	16,338	28%
Colorado	32,000	3%	923	13%
Connecticut	24,000	3%	601	14%
Delaware	8,000	4%	71	10%
District of Columbia	5,000	5%	322	16%
Florida	164,000	4%	8,071	43%
Georgia	103,000	4%	989	14%
Hawaii	12,000	4%	556	46%
Idaho	7,000	2%	399	27%
Illinois	105,000	3%	6,208	35%
Indiana	59,000	4%	3,814	31%
Iowa	18,000	3%	1,478	23%
Kansas	27,000	4%	1,536	26%
Kentucky	63,000	6%	632	9%
Louisiana	65,000	6%	956	21%
Maine	8,000	3%	408	26%
Maryland	48,000	4%	2,037	34%
Massachusetts	31,000	2%	1,616	18%
Michigan	59,000	2%	5,690	35%
Minnesota	21,000	2%	879	17%
Mississippi	53,000	7%	998	28%
Missouri	56,000	4%	2,087	21%
Montana	8,000	3%	562	33%
Nebraska	14,000	3%	1,153	22%
Nevada	19,000	3%	1,619	34%
New Hampshire	5,000	2%	139	18%
New Jersey	58,000	3%	2,518	35%
New Mexico	24,000	5%	324	17%
New York	153,000	3%	5,433	20%
North Carolina	101,000	4%	2,076	24%
North Dakota	4,000	3%	115	11%
Ohio	100,000	4%	1,631	14%
Oklahoma	56,000	6%	2,271	29%
Oregon	22,000	3%	2,254	25%
Pennsylvania	101,000	4%	3,456	23%
Rhode Island	6,000	2%	534	26%
South Carolina	54,000	5%	294	7%
South Dakota	7,000	3%	244	16%
Tennessee	67,000	5%	537	8%
Texas	276,000	4%	8,506	29%
Utah	15,000	2%	553	19%
Vermont	4,000	3%	132	14%
Virginia	69,000	4%	312	6%
Washington	53,000	3%	3,404	34%
West Virginia	19,000	5%	549	13%
Wisconsin	20,000	2%	1,944	30%
Wyoming	4,000	3%	196	20%

[1] Population Reference Bureau's analysis of 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys. Estimates represent 3-year averages. Children in Public and Private Kinship Care are those children under age 18 who were living in households with no parents present and includes those who are related to the householder by blood or marriage, as well as unrelated children who are not classified as roomers, boarders, or foster children.

[2] KIDS COUNT Data Center's analysis of 2010 AFCARS data, http://datacenter.kidscount.org/data/acrossstates.

NOTE U.S. total includes 1,296 children in state-supervised kinship foster care in Puerto Rico.

in the custody of the state child welfare system, placement with caring relatives helps prevent the unnecessary stress of adjusting to foster care with adults they do not know. Kin can provide safe, stable, and nurturing care temporarily when children are removed from their homes, and they can provide care permanently when parents are unable to resume full-time care of their children.

A growing body of research confirms that, in most circumstances, kinship care is the best option when children cannot live with their own parents.[11] Particularly for foster children placed with kin, several studies have found that children in kinship foster care are better able to adjust to their new environment and are less likely to experience behavioral problems and psychiatric disorders than those in the general foster care population.[12,13] Finally, children in kinship foster care experience fewer school disruptions than children in non-kin foster care.[14]

TABLE 2

Who Are Kinship Families?

According to U.S. Census Bureau data, kinship caregivers are more likely to be poor, single, older, less educated, and unemployed than families in which at least one parent is present.

	Children Living With at Least One Parent	Children in Public and Private Kinship Care
HOUSEHOLD POVERTY		
Below the poverty line	22%	38%
Below 200% of the poverty line	43%	63%
EMPLOYMENT		
Caregiver employed	71%	50%
Employed full time	53%	36%
Caregiver retired	<1%	16%
Caregiver disabled	5%	19%

	Children Living With at Least One Parent	Children in Public and Private Kinship Care
RACE/ETHNICITY		
White (non-Hispanic)	55%	40%
Black	14%	31%
Hispanic	23%	23%
OTHER CHARACTERISTICS		
Single parent	31%	55%
Caregiver age 50+	10%	60%
No high school diploma	14%	27%

SOURCE Population Reference Bureau's analysis of the 2011 Current Population Survey Annual Social and Economic Survey.

COMMON CHALLENGES FOR KINSHIP FAMILIES

While many kinship families value the emotional rewards of caregiving, they also experience serious hardship in taking on the full-time care of additional children. Raising children costs money and requires serious commitments of time, energy, and attention. Kin who are given the unanticipated responsibility of caring for additional children quickly confront financial, health, and social challenges. Many grandparents and other relatives raising children also struggle with feelings of guilt and shame about the family circumstances that led to the caregiving arrangement.

These challenges are all the more daunting when caring for children who have experienced trauma, and they are further exacerbated by the difficulties of navigating government and community support systems in an effort to meet children's needs. In some cases, kinship care families lack the requisite legal authority to make decisions on behalf of the children in their care. While these challenges do not diminish the positive impact that kin can have on children, they do call attention to the need for comprehensive supports to address the common barriers facing these families.

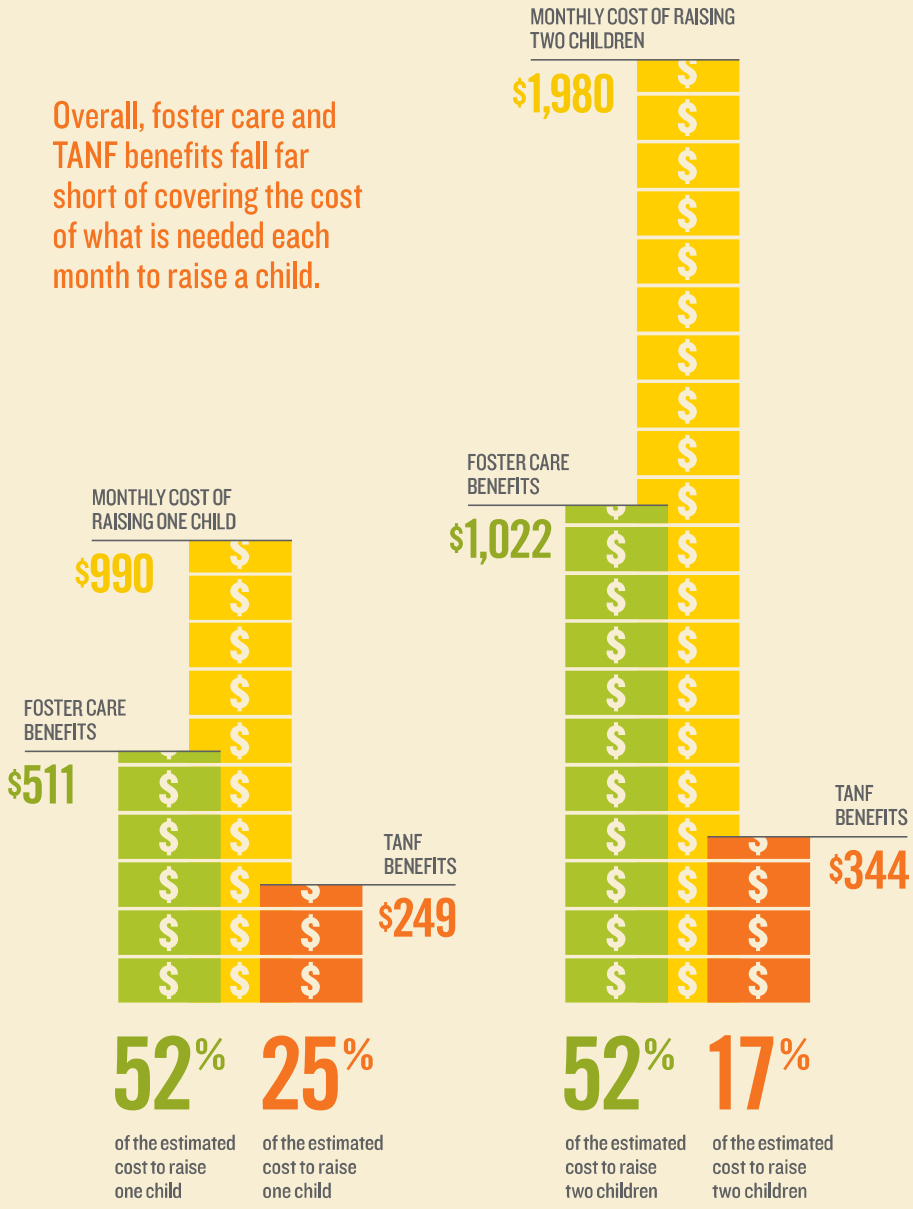
Financial, Health, and Social Stresses of Caregiving

According to U.S. Census Bureau data, kinship caregivers are more likely to be poor, single, older, less educated, and

FIGURE 1

How Does the Cost of Raising Children Compare to Available Government Support?

Kinship caregivers, whether they obtain assistance from foster care or TANF, receive much less financial support than what the USDA estimates it costs to raise a child. Caregivers receive considerably greater assistance from foster care than from TANF, especially when they care for more than one child, because TANF assistance only increases incrementally.



SOURCES Data from Mark Lino, *Expenditures on Children by Families*, miscellaneous publication no. 1528-2010 (Washington, DC: U.S. Department of Agriculture, Center for Nutrition Policy and Promotion, 2010); U.S. Government Accountability Office (GAO), *TANF and Child Welfare Programs: Increased Data Sharing Could Improve Access to Benefits and Services* (Washington, DC: GAO, October 2011), see http://www.gao.gov/products/GAO-12-2.

A growing body of research confirms that, in most circumstances, kinship care is the best choice when children cannot live with their own parents.

unemployed than families in which at least one parent is present.[15] The financial burdens kin face can be even more severe when kin are already caring for other children, take in large sibling groups, are retired, or are living on a fixed income.

Whether children living with kinship families were placed through the formal child welfare system or informal agreements within a family, they often face similar challenges, such as a history of parental abuse and neglect, substance abuse, and/or domestic violence. Compared to the general population of children, those in private, informal kinship care tend to have higher poverty rates, are less likely to be covered by health insurance, and are more likely to have physical and mental disabilities.[16] Children in public, formal kinship care are also more likely to face behavioral and emotional issues associated with the abuse or neglect that initially brought their families to the attention of the child welfare system.

In addition to its impact on work, finances, and retirement plans, the sudden decision to take in a child may also disrupt important family relationships. Caregivers often experience a complex set of emotions, including shame, guilt, or anger over the behavior of the children's parents. The emotional impact is especially difficult on grandparent caregivers who must also manage relationships with, and sometimes provide care for, their adult children at the same time they are raising their grandchildren. Focusing on the needs of the children in their care while ignoring their own needs can lead to chronic stress, depression, or physical illness such as hypertension.[17]

It Can Be Hard for Kinship Families to Get Help

Kin caregivers often find it difficult to get the benefits and services they need to take care of the children they've taken in. In fact, many do not even realize that certain government supports exist to help them, or they receive inaccurate information about their eligibility for help.

Financial Help: Temporary Assistance for Needy Families

For many families, their most immediate need is for additional money to pay for the added costs of caring for a child. As mentioned above, kin families are more likely to be poor or low income, and many older kin caregivers are living on fixed retirement incomes. Adding the expense of caring for a child, or several children, is a significant challenge.

Many kin caregivers do not realize that they may be eligible for financial help to pay these extra expenses. In most states, almost all children living apart from their parents—including those living with other family members—are eligible for cash assistance through Temporary Assistance for Needy Families (TANF), even if the family member they are now living with is not eligible. Full-time relative caregivers do not need legal custody or guardianship to apply for assistance on a child's behalf. Additionally, if they meet certain eligibility requirements,

low-income caregivers themselves may also receive cash grants.

Although states can use TANF funds to provide cash assistance and services to kinship families, these programs do not always respond to the unique needs of kinship families. The program has evolved with a focus on nuclear families, including restrictions and time limits that can be inappropriate and unworkable when applied to kinship families.

Less than 12 percent of kinship families receive any assistance from TANF, although nearly 100 percent of the children in such families are eligible, as well as many of the caregivers themselves.[18] Kin are often reluctant to apply for TANF assistance because of a perceived stigma associated with the program, or because they do not know that TANF is available or how to apply for it. They also may not have appropriate documentation verifying the caregiver's relationship to the child.[19]

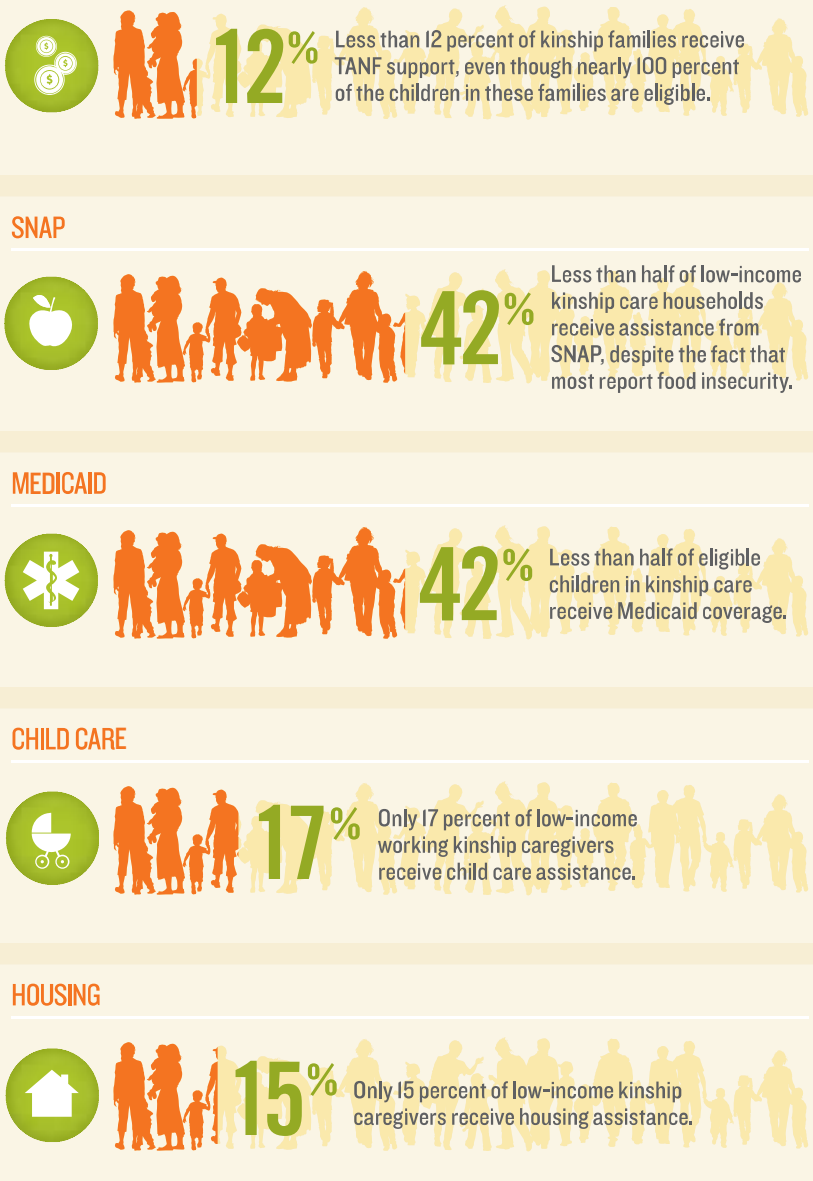
Other Financial Assistance

Because most kinship caregivers fail to receive TANF, they miss opportunities to receive other public benefits, as well. For example, less than half of low-income kinship care households receive assistance from the Supplemental Nutrition Assistance Program (SNAP—formerly Food Stamps), despite the fact that most report food insecurity. Less than half of eligible children in kinship care receive Medicaid coverage. Only 17 percent of low-income working kinship caregivers receive child care assistance. Similarly,

FIGURE 2

How Many Kinship Families Receive Financial Assistance?

The majority of kinship caregivers are not receiving the financial help for which they are eligible, and many do not even realize that certain government supports exist to help them care for the children they have taken in.



SOURCES TANF data from Richard Bavier, "Children Residing With No Parent Present," *Children & Youth Services Review* 33, no. 10 (2011); SNAP, Medicaid, Child Care, and Housing data from Jennifer Ehrle and Rob Geen, *Children Cared for by Relatives: What Services Do They Need?* National Survey of America's Families, Series B, No. B-47 (Washington, DC: The Urban Institute, 2002).

only 15 percent of low-income kinship caregivers receive any housing assistance, despite most having reported difficulty paying housing costs.[20]

Lack of Affordable Legal Representation

Kinship families are called upon to take the place of parents, yet they often need basic legal authority to make daily caregiving decisions for children, such as obtaining medical care or enrolling children in school. Private health insurance usually covers only biological and adoptive children, not children in kinship care, and caregivers are often unaware of children's eligibility for Medicaid and the Children's Health Insurance Program (CHIP). Because of their unclear legal status, some kinship families struggle to access other critical benefits, including Supplemental Security Income (SSI), SNAP, available child care subsidies, and other programs.

Many caregivers find it difficult and intimidating to interact with adversarial court systems, especially when they have to bring cases against their own family members.[21] Cuts in funding for legal services and growing caseloads make it difficult for low-income families to find qualified and affordable lawyers. Many caregivers earn too much to qualify for free or low-cost legal services, but too little to afford the high cost of a private attorney. Although some courts have committed to making their proceedings more open and supportive for kinship families, the majority still fail to consider the complex dynamics of these families.

Barriers to Effective Use of Kinship Families in the Child Welfare System

Federal and state child welfare policies express a strong preference for relatives to care for those children who cannot safely live with their parents. In fact, federal and state laws require that child welfare agencies notify and consider placement with relatives from the time a child first enters state custody. In 2010, more than one-fourth of children in foster care—approximately 26 percent—were placed with kinship families.[22]

Yet, just as the nation's financial support system has evolved with a primary focus on nuclear families, the foster care system itself was not originally designed to assist family members with playing such a direct, parent-like role in meeting the needs of children.

Uneven State Progress in Placing Children With Kin

Despite the fact that policies and laws prefer placement with kin over placement with families unknown to the child, state reliance on kinship families for children in foster care varies widely, ranging from 6 percent to 46 percent. The failure to identify and engage family resources for children in foster care too often results in losing the family connections that are vital to their long-term well-being. The lack of family connections is particularly difficult for those children who leave foster care at age 18 (or, in some cases, up to age 21) with no permanent relationships.

Despite making resources available to children in kinship care, public benefits programs have evolved with nuclear families in mind. As a result, kinship care families are often the "square pegs" in the round holes of the TANF program and other existing government systems.

Barriers to Licensing Kin as Foster Parents

To care for a child in foster care and receive the same supports as other foster parents, relatives typically must be fully licensed as kinship foster parents. However, current state licensing requirements and agency practices for licensing kin families often prevent caregivers from being approved for licensed placements. In fact, more than half of children placed with relatives under state supervision are in unlicensed homes.[23]

In some cases, foster care regulations such as physical space requirements (e.g., square footage of bedrooms, size of windows) were not designed with relatives in mind. Foster parent training, a licensure requirement in almost all states, typically focuses on the wide range of issues facing traditional foster families and may not be relevant to kinship families. While many states allow waivers—exceptions to licensing requirements that do not directly impact child safety—the waiver process is often ignored or inconsistently applied.[24] The failure of some state child welfare agencies to inform caregivers that licensing is an option may also cause them to miss out on the financial support and other benefits that are typically offered to non-kin foster parents.

Inconsistent Kinship Diversion Policies

When a child first comes to the attention of the child welfare system, many agencies divert children to live with kin as an alternative to bringing the child into state custody, a practice that is commonly referred to as *kinship diversion*. This means placements are made without the system securing legal custody and accepting oversight responsibility. It is estimated that kin are caring for more than 400,000 children who have been diverted from foster care.[25]

Despite their prevalence, diversion practices vary significantly both across and within states, and few jurisdictions have developed clear policies to guide them. While some agencies offer ongoing services and supervision, others provide few if any follow-up services to the birth parent, the caregiver, or the child. Many families also agree to diversion without a full understanding of their other options (including the choice to become a licensed foster parent), or without the appropriate legal authority to make decisions on behalf of the child. Because most states do not track outcomes for children who are diverted, little is known about the experience of children living with kin outside of foster care.

Expanding Permanency Options for Children in Kinship Foster Care

When child welfare agencies determine that it is not possible for a child to return home to their parents, many relatives choose adoption to ensure a permanent home for the child.[26] Recognizing that adoption may not be the most appropriate choice for every kinship family, federal law also allows states to use federal funds to provide an ongoing payment so that eligible children can live permanently with relatives who obtain legal guardianship through the courts. Although 30 states have taken advantage of this option, 21 states have yet to apply for the program.[27]

POLICY RECOMMENDATIONS

how to improve government and community support for kinship families

Kinship families step forward to nurture and protect some of our nation's most vulnerable children. Government agencies and community stakeholders also have an important responsibility to help struggling kinship families provide the best possible care and opportunities for the children they are raising. In many states, innovative models and best practices are emerging that help increase the financial stability of kinship families, meet the unique needs of families who have come to the attention of the child welfare system, and improve and expand community-based responses to help kinship families thrive. The following recommendations are based on the best of these ideas and should be expanded across states to strengthen the support system for kinship families.

I. Increase Financial Stability of Kinship Families

To increase their financial stability and prevent unnecessary and more costly involvement in the child welfare and other systems, states should use the flexibility under current federal statute to increase basic income supports for low-income kinship families. Here are some examples of how states can help kinship families secure the resources they need to meet the basic needs of the children they are caring for:

Ensure kinship families have access to benefits to which they are eligible. States should ensure that kinship families are aware of and receive available assistance to meet the basic needs of the children in their care. This includes access to TANF, SNAP, the National School Lunch Program, Social Security, Medicaid, CHIP, child care, housing assistance, foster care subsidies, and other programs as appropriate. For working kinship caregivers, receipt of the Earned Income Tax Credit (EITC) can also help to ensure family financial stability.

Kinship navigator programs are proving to be excellent vehicles to link kinship families with resources to meet their needs.[28] These programs coordinate efforts among public agencies and educate workers and families about eligibility requirements. United Way-sponsored 211 call-in centers, as well as state resource and referral programs, which provide information on local government and community-based services through a single point of contact by telephone, can also be a first point of contact for access to benefits.

Design TANF-funded programs that meet the unique needs of kinship care families. TANF block grants provide states with opportunities to better meet the needs of low-income kinship families. Some states have increased TANF grant levels to better reflect the actual cost of raising children who have been separated from their parents, and they have extended child care benefits to working caregivers.[29] States have also increased asset limits, removed work requirements, and ignored time limits on cash assistance for older caregivers.[30] States implementing these reforms recognized that such eligibility requirements and restrictions were designed primarily with young, single mothers in mind and are not as relevant for older kin. States can also use flexible TANF funds or authorize state funding for emergency assistance to help

kinship families through the transition of assuming responsibility for their children.[31]

States can do more to coordinate TANF programs with child welfare agencies, especially for kinship caregivers involved in both systems, such as unlicensed foster parents or those who became caregivers as a result of diversion. For these families, states can ensure that kinship caregivers have the financial capacity to meet the needs of children without foster care payments. And certainly states need to ensure that the needs of biological parents are being met so that reunification can occur.

2. Strengthen Kinship Families Involved in the Child Welfare System

As reliance on kinship care continues to grow, states are recognizing the need to ensure that abused and neglected children living in kinship families achieve safety, permanence, and well-being, as required by federal law. Best practices from around the country include the following:

Aligning public agency and court practices with the philosophy of placing children with kin. Leading state and local child welfare systems are now working to identify and engage kin as early as possible when a child becomes involved in the child welfare system; to assess kin for their capacity to serve as appropriate placement resources; and to support kin when they step up to care for children. Courts are also playing an increasing role by requiring agencies to identify and engage kin whenever possible. Family decision making

CASE STUDY

Allegheny Department of Human Services: A Second Chance for Kinship Families

In 1994, Allegheny County in Pennsylvania responded to a judicial consent decree requiring that resources be provided to kinship foster parents. Recognizing that kinship families needed an approach that was different from the way traditional foster care is provided, the county partnered with A Second Chance, Inc. (ASCI), a licensed foster care agency designed to meet the unique needs of kinship care families. As the only agency in the country that specializes in child welfare-involved kinship families, ASCI is able to license 93 percent of its families so that they have access to needed financial support, while providing parents with services to help them regain custody of their children. As part of its comprehensive approach, ASCI provides kinship care training specially designed to address the dynamics of kinship families; intensive in-home services; emergency assistance, including a clothing bank and flexible funding for other necessary expenses; respite services; and transportation. ASCI also assigns different social workers to work with the caregiver and the parent to ensure that immediate service needs, as well as longer-term reunification and permanency goals, are being met. The Department of Human Services now places more than 60 percent of the children in foster care with kin and achieves permanence in 89 percent of its cases.

and front-end family finding are just two examples of promising practices that help agencies work with kin families.[32,33]

Assuring that any decision to divert children to live with kin as an alternative to state custody is guided by sound policy and practice. Clear policies help workers determine whether diversion away from state custody is appropriate for children who come to the attention of the child welfare system. Clear program guidance defines how the agency supports these families outside of the traditional foster care structure. These policies include provisions for an independently facilitated team decision-making meeting[34] to explore the best options for care and protection of the child with the family.

Kinship families need to understand all of their options, including the option to become licensed kinship foster parents, and they need to understand what supports will be available to them, the children, and the birth parents once the diversion occurs. Child welfare agencies should also track the experiences of children who are diverted from foster care to live with kin to ensure that they are in safe and stable living arrangements. Finally, caregivers who may be struggling should feel safe in seeking support from the child welfare agency without worrying that doing so might lead to having the child removed unnecessarily from their home.

Reforming foster home licensing requirements. Some states and counties have carefully reviewed their existing licensing standards to eliminate overly burdensome or prescriptive requirements. States have developed clear and timely processes to grant waivers for those standards that might be appropriate for traditional foster care but that are not relevant for kinship families. States should ensure that training for kinship foster parents is relevant to their needs and does not create a barrier to licensing kinship families.

Adding subsidized guardianship to the permanency options for foster children. All states should opt into the federal government's Guardianship Assistance Program (GAP). GAP provides federal subsidies for kinship families who agree to permanently care for foster children when they cannot return home or be adopted. GAP can help children leave foster care to find permanent homes with kin and can help states save the administrative costs of continuing to visit with and provide court hearings for the child.

3. Enhance Other Community-Based and Government Responses for Kinship Families

Community and government systems can come together to develop a comprehensive and coordinated network of services and supports for kinship families. This network harnesses the collective action of government agencies, state legislatures, businesses, the legal community, faith-based organizations, and others. An effective network would ensure that kinship care families have the following:

In many states, innovative models and best practices are emerging that help increase the financial stability of kinship families, meet the unique needs of these families, and improve and expand community-based responses to help them thrive.

- **Stable Housing:** The U.S. Department of Housing and Urban Development, housing authorities, housing developers, and children's agencies can promote the development of grandfamily housing. Grandfamily housing enables children and their relative caregivers to live in stable housing with other kinship families with supportive services specially designed to meet their needs.[35]
- **Affordable Legal Representation:** The legal community can help kinship families secure quality and low-cost legal representation through partnerships with local law schools or pro bono representation through local law firms and bar associations. It can also advocate for the expansion of legal services programs targeted at kinship families.
- **Access to Health Care:** States should enact medical consent laws that allow kinship caregivers to access medical care for children without court-ordered legal custody or guardianship.
- **Ability to Enroll Children in School:** States should enact educational consent laws that allow kinship caregivers to enroll children in school without legal custody or guardianship.
- **Community-Based Support:** The National Family Caregiver Support Program (NFCSP)[36] enables state Area Agencies on Aging to use up to 10 percent of their funding to support grandparents and other relatives age 55 and older who are raising children. This funding has provided critical community-based services and supports for kinship families. States should be encouraged to use the full 10 percent of their NFCSP allotment to enhance community support for kinship families.

CONCLUSION

Millions of American families have stepped up to care for the children in their extended families. To help them care for these children, public systems, private agencies, faith-based organizations, and the entire community must also step up. The Casey Foundation encourages states and communities to continue to strengthen existing policies and programs for kinship care families.

Kinship care enjoys strong bipartisan support. In 2008, Congress unanimously passed the Fostering Connections to Success and Increasing Adoptions Act, which provided new federal resources to support kinship care families and instructed states to ensure that relatives are identified and engaged when children must be removed from their parents' homes.

States are also stepping up. Many states have focused on removing barriers to licensing kin to care for children placed in foster care.[37] Several states have also taken advantage of the flexibility of the TANF block grant to help kinship care families cover the unexpected costs of taking in a child and eliminate the need for unnecessary foster care.[38] Community-based programs have created effective one-stop service delivery models designed specifically for kinship families.[39]

Now is the time to bring many of these innovative programs and policies to a national scale so that no matter where they live and what their needs are, kinship care families have the support they need to ensure that children thrive.

> "Ours is by no means a tradition limited to respect for the bonds uniting the members of a nuclear family. The tradition of uncles, aunts, cousins, and especially grandparents sharing a household...has roots equally venerable and deserving of recognition."

Supreme Court Justice Lewis Powell, *Moore v. City of East Cleveland*[40]

ENDNOTES

1. Population Reference Bureau's analysis of the 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys.

2. Ibid.; KIDS COUNT Data Center's analysis of 2010 AFCARS data, see http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?loct=2&by=a&order=a&ind=6247&dtm=12994&ch=2621&tf=133.

3. *Grandfamilies* is also used to describe families in which grandparents and other relatives are caring for children who cannot remain with their parents, a term popularized by Generations United based on extensive public opinion research.

4. Population Reference Bureau's analysis of the 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys.

5. James P. Gleeson et al., "Becoming Involved in Raising a Relative's Child: Reasons, Caregiver Motivations, and Pathways to Informal Kinship Care," *Child & Family Social Work* 14, no. 3 (August 2009): 300–10.

6. Richard Bavier, "Children Residing With No Parent Present," *Children & Youth Services Review* 33, no. 10 (2011): 1891–1901; Olivia Golden and Amelia Hawkins, *TANF Child-Only Cases* (Washington, DC: The Urban Institute, 2012), 3.

7. KIDS COUNT Data Center's analysis of 2010 AFCARS data, see http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?loct=2&by=a&order=a&ind=6247&dtm=12994&ch=2621&tf=133.

8. Jennifer Ehrle, Rob Geen, and Regan Main, *Kinship Foster Care: Custody, Hardships, and Services* (Washington, DC: The Urban Institute, 2003). The difference between the estimated 542,000 children placed as a result of social services involvement and the 131,000 known to be in state custody in that year (2001) was approximately 400,000.

9. Population Reference Bureau's analysis of the 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys.

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14. *National Survey of Child and Adolescent Well-Being (NSCAW), CPS Sample Component Wave 1 Data Analysis Report* (Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, April 2005).

15. Population Reference Bureau's analysis of the 2009, 2010, and 2011 Current Population Survey Annual Social and Economic Surveys.

16. Richard Bavier, "Children Residing With No Parent Present, *Children & Youth Services Review* 33, no. 10 (2011): 1891–1901; Olivia Golden and Amelia Hawkins, *TANF Child-Only Cases* (Washington, DC: The Urban Institute, 2012), 3.

17. Jennifer Crew Solomon and Jonathan Marx, "The Physical, Mental, and Social Health of Custodial Grandparents," in *Grandparents Raising Grandchildren*, ed. Bert Haylsip Jr. and Robin Goldberg-Glen (New York: Springer Publishing Company, 2000); Meredith Minkler et al., "Grandparent Caregiving and Depression" (ibid.).

18. Bavier, "Children Residing With No Parent Present."

19. U.S. Government Accountability Office (GAO), *TANF and Child Welfare Programs: Increased Data Sharing Could Improve Access to Benefits and Services* (Washington, DC: GAO, October 2011), see www.gao.gov/products/GAO-12-2; Golden and Hawkins, *TANF Child-Only Cases*, 3.

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21. Additional research is needed to determine precisely how many private kinship families lack legal custody or guardianship of the children under their care.

22. KIDS COUNT Data Center's analysis of 2010 AFCARS data, see http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?loct=2&by=a&order=a&ind=6247&dtm=12994&ch=2621&tf=133.

23. Children's Bureau, Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, *Report to Congress on States' Use of Waivers of Non-Safety Licensing Standards for Relative Foster Family Homes* (2011), see www.acf.hhs.gov/programs/cb/pubs/statesuse/statesuse.pdf.

24. Federal legislation enacted in 2008, the Fostering Connections to Success and Increasing Adoptions Act, reaffirmed the ability of states to grant waivers for non-safety licensing standards on a case-by-case basis, but many states still fail to take advantage of this flexibility.

25. Jennifer Ehrle, Rob Geen, and Regan Main, *Kinship Foster Care: Custody, Hardships, and Services*. (Washington, DC: The Urban Institute, 2003). The difference between the estimated 542,000 children placed as a result of social services involvement and the 131,000 known to be in state custody in that year (2001) was approximately 400,000.

26. U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, *The Adoption and Foster Care Analysis and Reporting System (AFCARS) Report: Preliminary FY 2010 Estimates as of June 2011* (18), see www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report18.htm.

27. The District of Columbia is considered a state for the purposes of the Guardianship Assistance Program (GAP). For more on GAP, see *Title IV-E Guardianship Assistance*, www.acf.hhs.gov/programs/cb/programs_fund/index.htm#state. The following 21 states have not yet taken up the GAP option: Arizona, Delaware, Florida, Georgia, Indiana, Iowa, Kansas, Kentucky, Minnesota, Mississippi, Nevada, New Hampshire, New Mexico, North Carolina, North Dakota, Ohio, South Carolina, Utah, Virginia, West Virginia, and Wyoming.

28. Kinship navigator programs are state initiatives that provide information and referral services to grandparents and other relatives raising children to link them to the benefits and services that they or the children need. For more information, see www.grandfamilies.org/index.cfm?page=topics&topicid=29.

29. The Urban Institute's analysis of state information in the Welfare Rules Database.

30. Ibid.

31. GAO, *TANF and Child Welfare Programs*.

32. "Family team decision making" is a process for making decisions about the safety of the child anytime a placement decision is being contemplated. It is designed to bring together the agency, families, and their communities and empower families to participate in developing action plans.

33. "Family finding" is a practice initially designed to conduct an extensive search for family members of children who had become disconnected from their family networks while in foster care. Some agencies have adapted family finding as a practice to find family resources for children when they first come into foster care. For more on family finding and other strategies for identifying and engaging relatives, see www.senecacenter.org/familyconnectedness and http://childfocuspartners.com/pdfs/RelativeSearchGuide10–15.pdf.

34. "Team decision making" is a form of team meetings specifically designed around the decision to place or to change the placement of a child. Other forms of family team meetings are used at various points in the case process, but are not specific to the placement decision.

35. For more on grandfamily housing and other solutions to securing stable housing for kinship families, see Generations United, *Grandparents and Other Relatives Raising Children: An Action Agenda to Create Affordable Housing Opportunities* (Washington, DC: Generations United, 2005).

36. For more on the National Family Caregiver Support Program, see www.gu.org/LinkClick.aspx?fileticket=Lgq5WfhP-Tg%3d&tabid=157&mid=606.

37. For example, in Indiana, between 2006 and 2012, the percentage of foster children placed with relatives increased by 118 percent (from 18 percent to 40 percent). Similarly, Connecticut had an increase of 79 percent (from 14 percent to 25 percent) in a single year (2010–2011).

38. For example, Washington State allows unrelated caregivers, such as a friend or neighbor, to apply for TANF child-only assistance after undergoing a home study and background check. In addition, Washington developed appropriate standards and requirements to ensure the health, well-being, and success of children, including caregiver training and well-child exams. Finally, the TANF agency implemented an integrated case management model that serves relative caregivers receiving child-only grants.

39. Examples include the K.A.R.E. Center in Arizona, Grand Central in Philadelphia, and Edgewood Center in San Francisco.

40. Moore v. City of East Cleveland, 431 U.S. 494,97 S. Ct. 1932,52 L. Ed. 2d 531 (1977).

ABOUT THE ANNIE E. CASEY FOUNDATION AND KIDS COUNT

The Annie E. Casey Foundation is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. It was established in 1948 by Jim Casey, one of the founders of UPS, and his siblings, who named the Foundation in honor of their mother. The primary mission of the Foundation is to foster public policies, human-service reforms, and community supports that more effectively meet the needs of today's vulnerable children and families. In pursuit of this goal, the Foundation makes grants that help states, cities, and communities fashion more innovative, cost-effective responses to these needs.

KIDS COUNT®, a project of the Annie E. Casey Foundation, is a national and state-by-state effort to track the status of children in the United States. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich local, state, and national discussions concerning ways to secure better futures for all children. At the national level, the initiative develops and distributes reports on key areas of well-being, including the annual *KIDS COUNT Data Book*.

The initiative also maintains the KIDS COUNT Data Center, which uses the best available data to measure the educational, social, economic, and physical well-being of children.

Additionally, the Foundation funds a nationwide network of state-level KIDS COUNT projects that provide a more detailed, community-by-community picture of the condition of children.

Additional data and copies of this report can be found at www.aecf.org/kinship.

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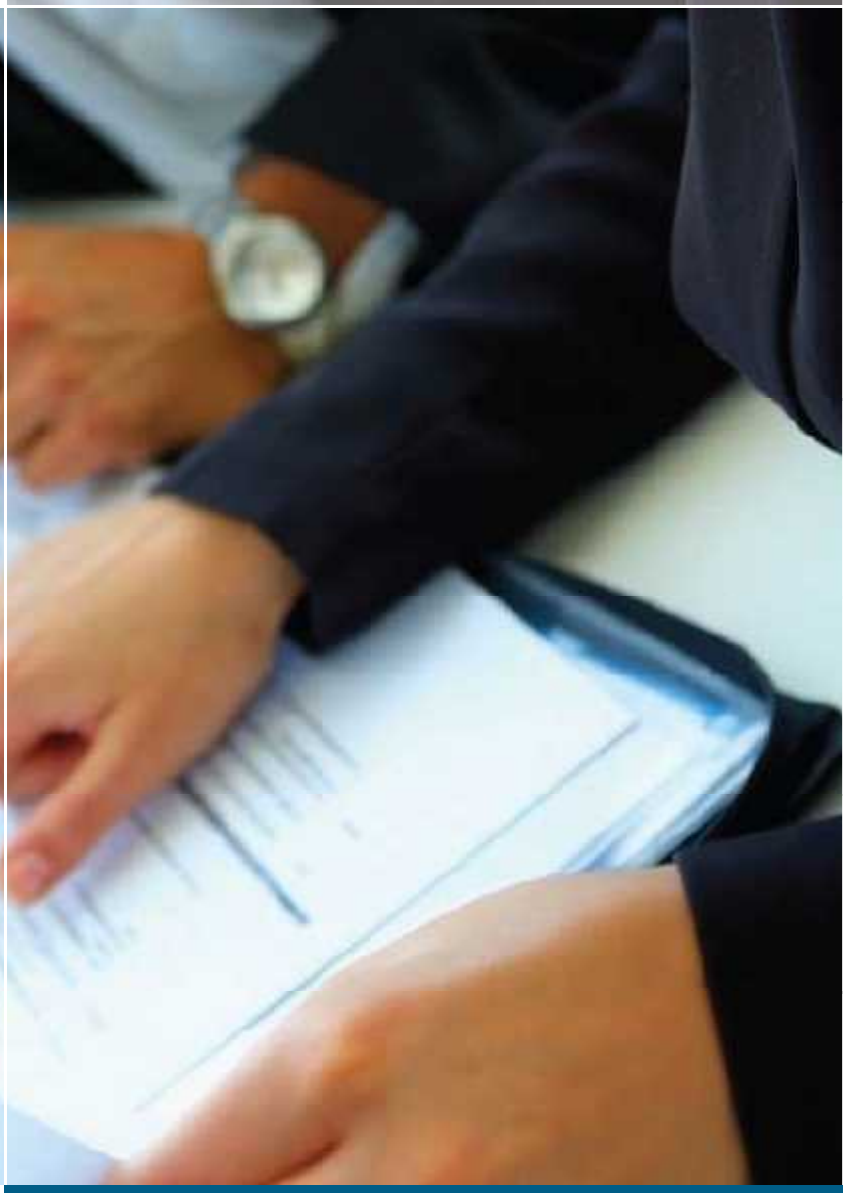
Beyond Bias—
Cultural Competence as a Lawyer Skill

By Nelson P. Miller



Fast Facts:

A lawyer's cultural competence goes beyond avoiding bias. To serve diverse clients, lawyers should have special communication and interpersonal skills. Those skills can be taught and learned.

American popular culture judges in terms of "bias" the quality of relationships between cultures and classes. A good person is defined to be one who is free of cultural, ethnic, and class bias. A bad person exhibits bias—perhaps a Don Imus against African Americans or an Al Sharpton or Mel Gibson against Jews (to take celebrated recent examples).

The problem for lawyers is that the bias model is one of purity, not performance. The litmus test of bias allows us to draw comfort from simply not saying the wrong thing. It has nothing to do with how we actually perform as professionals in complex interactions with individuals of diverse cultures and classes. The comfort we draw in not exhibiting bias is an obstacle to real lawyer skill. It tells us that as long as we have not said anything wrong, we are acceptably professional. In truth, good lawyers—culturally sensitive and aware lawyers—employ considerable skill. Cultural competencies can be taught. Indeed, they are taught to educators, translators, social workers, nurses, missionaries, and a host of others who deal with diverse populations. By and large, they are not taught to lawyers.

Cultural competencies cover a wide range of areas. Communication is primary. It is important how we speak and listen. Communication varies. What is understood and appreciated in one household will not be understood and may instead be offensive in another household. And it is not only communication that varies. So, too, do individual cognition, individual and family resources, cultural references, and relationships.

Lawyers should possess cultural competencies in at least those five areas. Lawyers who possess and exercise these skills are able to meaningfully serve diverse populations. They can serve black and white, rich and poor, educated and uneducated, helping each to draw on their available skills and resources without mistakenly misjudging any to be uncommunicative or unintelligent. Lawyers who do not possess and exercise these skills cannot serve diverse populations effectively.

Take as an example the different language registers clients of different cultures may employ. A language "register" is the form or level of language (intimate, casual, consultative, formal, or frozen) that a speaker uses, indirectly indicating preferences in the way the speaker wishes to treat the relationship with the listener. Lawyers ordinarily speak in a consultative register, but many clients do not. An effective lawyer adjusts to the client's register, not the other way around, because register is closely connected to hidden rules and cognitive practices within various cultures.

Thus, in some pro bono work at a local Hispanic center, the lawyer spoke only English. The client was a shy Guatemalan woman whose first language was a dialect, but who also spoke just enough Spanish to communicate in that second language. The translator was a pert Mexican Spanish-speaker who spoke English as a second language, but did not speak the Guatemalan dialect. Although he could not understand the Guatemalan client's Spanish, the lawyer quickly discerned from her hesitancy and tearfulness that she was probably communicating only in an intimate (child to parent) or at best casual (close friend to close friend) register. The lawyer quickly adjusted accordingly, speaking much more like a parent or friend than the lawyer would have when using the typical consultative register with which all lawyers are familiar. Lawyers typically render legal advice in a consultative, not intimate or casual, register.

The problem was that the Mexican translator had not recognized the shift in registers, or if she had recognized it, was unwilling to accommodate the shy Guatemalan client. This much the lawyer could tell from the client's confusion and the air of superiority the translator was exhibiting. The translator was (as the observing translator-trainer explained it later) dressing up the lawyer's words into flowery and important-sounding messages that the client was unable to grasp and process. The observing translator-trainer had to intervene and employ the appropriate intimate and casual register to successfully salvage the consultation. Competence in cultural communication, of course, does not mean being able to work with translators. The incident simply shows how important language register is and how roles and expectations can interfere with sensitive communication.

Take another example from the area of cultural reference. The narrator of the *Planet Earth* television series makes an important cultural reference when she intones (in that dry seriousness typical of the genre) that it is a matter of "luck" that the Sun/Earth relationship has remained so stable over billions of years. A lawyer making a similar comment about the "luck" involved in some event would already have appeared foolish and insensitive to what some low-income clients would more reasonably regard as extremely improbable but clearly providential events.

Thus, listen carefully to a client's answer to the greeting, "How are you?" The response "I am blessed" is a low-income, minority client's clearly intentional deviation from the majority culture's standard answer of "fine" or "good." It is a hint to the finely attuned ear, or in some cases a declaration against the obstinate dominant culture, that the client is a person not of fate but of faith. It would be insensitive for the lawyer to think the response weird or unintelligent, when instead it is a reflection of a highly developed ethic having potentially important consequences to the consultation.

Listen carefully to a client's answer to the greeting, "How are you?" The response "I am blessed" is a low-income, minority client's clearly intentional deviation from the majority culture's standard answer of "fine" or "good." It is a hint to the finely attuned ear that the client is a person not of fate but of faith.

Is it indeed significant that we notice these differences about our clients? It was significant to one. The lawyer met the pro bono client in a cubicle off the soup kitchen's day room, where patrons could get identification, a locker, a haircut, and mail, shower, and use a washer-dryer. The homeless client, a middle-aged and quite weary African-American male,

nonetheless responded to the lawyer's greeting with "I'm blessed. How are you?" The consultation then ensued about child support that had accumulated while the client was incarcerated for better than a decade. At its conclusion, the client rose appreciatively but wearily, saying that, in the end, he was concerned about the drugs and prostitutes tempting him on the streets. It was not a complaint, but an almost-silent plea without expectation of response.

But the lawyer then remembered the client's faith expressed in the greeting. So as the client turned to leave, the lawyer said simply: "Ah. There is no temptation except that which…." The client stopped, turned back, brightened noticeably, and completed the verse, saying he had not thought of it (powerful advice for anyone in the client's situation) since his release from prison 10 weeks before. There now seemed little doubt that the client would stay sober another night—a greater victory for the client and community, perhaps, than anything else the lawyer and client might have accomplished that day.

Here, then, are some tips on cultural competence. Although the examples have been in pro bono settings and with elderly clients, these competencies can be just as important in law-firm settings with paying clients. Please keep in mind, though, that if you are serving a client who is from a culture different from your own, you have already demonstrated the first cultural competency, which is willingness. Consider the following recommendations to increase your cultural competency:

- ***Introduce yourself*** in a manner that puts the client at ease. Always say your name. Anonymity appears aloof, insular, uncaring, and arrogant. Make eye contact, unless the client studiously avoids eye contact, and smile. If the client appears ready to offer a handshake, offer a handshake first. If the client is reluctant to offer a handshake, do not embarrass the client with an extended hand. Accept that there are hidden rules of interaction you do not know.
- ***Understand intimate and casual register*** and communicate accordingly. Not all clients share your verbal skills and interests. They may speak in indirect and generalized fashion and using frequent nonverbal assists. Participate with frequent verbal acknowledgments ("mm-hmm," "yeah, I know," etc.), behavioral prompts (nodding, smiling, etc.), and emotional responses (shared interest, sorrow, satisfaction, etc.). Do not force a client to say something the client wishes to avoid saying. Respect the circular nature of casual register. Avoid power struggles over language. Use calm, nonjudgmental, adult voice, never commanding or scolding in parent voice, and never defensive or emotional in child voice. Appreciate the client's humor. Use metaphor and story as a guide. Draw diagrams. Recognize cultural references. Accept and employ them to contextualize and communicate solutions.
- ***Ask why the client is here*** before making any assumptions. Ask open-ended questions, like "What worries you?" or "What do you want to happen?" Respect the client's freedom and personality. Be wary of assuming that the client has purely legal goals. Legal goals may be enmeshed in social, political, moral, financial, familial, ethical, personal, and spiritual goals, or legal goals may be absent. Assist with more than purely legal goals when your life experience enables you. Refer the client for other help with nonlegal goals. Think in terms of broad, team solutions while helping the client avoid negative influences. Legal solutions are not the only solutions.
- ***Listen to the client*** rather than your own judgment about what is important. Let the client decide. Do not dismiss the client's hopes, goals, expectations, and objectives, even when you would choose different objectives. Active pursuit of an unrealistic but safe goal can serve the client by indirectly achieving more useful objectives. Listen for words that seem out of place to you. They may be clues to a resource, habit, or understanding on which the client can draw for solutions. Develop a context for the client's situation—whether personal, medical, legal, family, or social.

Be prepared to pick up on a small parting comment and to address new legal issues at what you thought was the conclusion of the session.

Develop factual content when you see a legal issue that you can help address. Clients may express emotions and opinions, leaving it to you to prompt for relevant facts.

- ***Watch the client*** with an eye sensitive to the client's reactions. Summarize the client's goals and your advice on how to achieve them. If the client does not share your confidence in the solution you proposed, you may not have understood the client properly, or you may have assumed that the client has capabilities and resources that the client does not have. Continue to listen, ask, summarize, suggest, and generate other options until the client appears satisfied with your advice. What seems to you to be readily achievable may in fact not be for reasons only the client can appreciate. Suggest and teach coping strategies. Gently let the client know that you are offering bridges out of negative situations.
- ***Break down steps*** into manageable components. Think of each step that a larger task requires and then explain those steps for the client. Clients of poverty may lack the ability to break larger tasks down into manageable components. Help the client do so. When the steps become too many, stop, return to the first step that the client can understand and follow, and then plan another consultation for the rest of the steps. Watch for signs that the client is overwhelmed or frustrated. Assign to the client only those tasks that the client believes are clearly manageable. Model self-talking through procedures, but also propose role models. Clients of poverty can benefit more through mentors and relationships than through systems and actions. Be a coach, not a commander, judge, or taskmaster. Speak about choices and consequences. Help the client identify cause and effect (impulse and consequence) relationships.
- ***Confirm the plan*** that you have developed. Ask the client if the client would like you to write it down. If you do write it down, print in a clearly legible handwriting and number the steps. Clients may lack the planning and initiating skills that you possess. Help them prioritize and plan. Then help them record the plan in a manner that they can understand and use. Help them confirm that the plan will lead them toward their objective. Ensure throughout that they believe that they have the resources available to follow the plan. Do not plan anything for which the client lacks the resources. Solutions are not systems. They are relationships leading to small steps in the right direction. But also limit your responsibility. Be responsible *to* them for the steps you accept that you will perform. Make it clear to them what you are and are not going to do for them. But do not be responsible *for* them.
- ***Express hope and optimism*** about the client's situation, no matter how dire it may seem to you. Building and maintaining hope is essential for clients who have few resources. You may indeed have a client whose legal situation cannot be addressed. But through your discussion of it and your continuing relationship with the client, the client may develop other objectives that are achievable. Be frank in your advice, but do not destroy the client's confidence. Stress the client's internal assets—perhaps the client's perseverance and tenacity, or the client's knowledge of truth, or the client's faith and ethics.
- ***Listen for a parting request*** from the client. The consultation does not end until the client has left. Just because you think it is over does not mean it is over. Some clients will use the consultation time simply to develop trust and understanding and only introduce the important matter when you think the consultation is over. It is not always about what you think it is about. Be prepared to pick up on a small parting comment and to address new legal issues at what you thought was the conclusion of the session. Be sure to elicit any lingering concerns with a question like, "Is there anything else we should talk about?"
- ***Tell the client when you are next available*** for further consultation, especially if time did not permit you to answer all of the client's questions and address all of the client's legal issues. To clients with limited resources, the relationship with you is more important than the service you rendered. Clients get out of poverty not through service, but through relationship. Letting the client know that you value the relationship may contribute more to the client's situation than any legal service you are able to provide. If you cannot be a mentor, then think of and offer one. ■

Sources and Suggested Reading: Payne & Krabill, *Hidden Rules of Class at Work* (Aha Process, Inc, 2002); Payne, *Understanding Learning: The How, the Why, the What* (Aha Process, Inc, 2001); Payne, DeVol & Smith, *Bridges Out of Poverty: Strategies for Professionals and Communities* (Aha Process, Inc, 2001); Payne, *A Framework: Understanding and Working with Students and Adults from Poverty* (Texas: RFT Pub, 1995); Bryant, *The five habits: Building cross-cultural competence in lawyers,* 8 Clin L R 33 (2001); *Initial Interview Protocol,* Thomas M. Cooley Law School Clinics.

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cross cultural communication

Lawyers...want to know how well you communicate cross culturally? Take a look at your level of cultural competence.

By Jatrine Bentsi-Enchill

In today's current age of globalization cross cultural communication is rapidly becoming an important skill for lawyers to master.

When lawyers interact with clients and colleagues on a daily basis they are interacting with issues related to culture. Behavior, communication, relationships, parenting, decision making, expectations and so much more, have cultural significance.

Effective cross cultural communication is the ability to communicate with individuals from other cultures in a way that minimizes conflict, promotes greater understanding and maximizes one's ability to establish trust and rapport. In addition, it will require lawyers to learn to properly interpret non-verbal and verbal cues.

For lawyers, gaining an awareness of cultural differences will favorably impact business development, staff retention, client service and most importantly, attorney client relationships.

Cross cultural communication and cultural competence

As individuals, lawyers, like everyone else, interpret the world through their individual cultural lens or worldview. These interpretations ultimately become positive, negative and often erroneous judgments about the behavior, decisions and choices made by clients and others.

The ability to communicate cross culturally is tied to one's level of cultural competence. As one's level of cultural competence increases, so will cross cultural communication skills.

So what is cultural competence?

For individuals, cultural competence is:

- The ability to function effectively in the context of cultural difference
- The capacity to effectively adapt, accept and interpret culturally relevant behavior

Think of cultural competence as a "lens" that can accurately interpret culturally relevant behavior and values.

How culturally competent are you?

The most effective way to determine your level of cultural competence is to take an assessment. Absent such an assessment, Dr. Milton Bennett, who developed the Developmental Model of Intercultural Sensitivity provides a good starting place to review current perspectives around culture and difference.

The model outlines six stages that give insight into an individual's level of intercultural sensitivity and cultural competence. The stages are as follows:

STAGE ONE: Denial

Lawyers in this stage are acutely *unaware* of cultural difference.

The prevailing attitude is likely to be: "business is business the world over" or "everyone would respond this way". Lawyers in this stage of development might be so intent on the tasks at hand that they fail to notice the cultural aspects of business relationships with clients and colleagues. In this stage, there is a general lack of awareness about difference.

However, awareness is a key element in cross cultural communication. Effective cross cultural communication requires that individuals have some awareness and appreciation of difference. A lawyer in denial would be completely insensitive to their client's cultural taboos, expectations, family norms, communication and conflict styles.

While in the denial stage, lawyers will be ineffective in establishing trust and good

client relations with clients from other cultures. The failure to understand the significance of cultural differences may lead lawyers to implement ineffective case strategies due to the misinterpretation of client behavior.

For lawyers in this stage, unnecessary conflicts and misunderstandings, along with an overall lack of understanding of the importance of cross-cultural communication are common.

STAGE TWO: Defense

Lawyers in this stage will 1) recognize some cultural differences and 2) view such differences negatively.

Instead of striving to understand or interpret the patterns of conduct or communication that differ from their own culture, lawyers in defense are likely to mislabel such conduct as "wrong" "unintelligent, "dishonest" etc. In this stage, the greater the difference, the more negatively it is perceived.

A criminal defense lawyer in the denial stage will most likely be frustrated by a female murder defendant from China, who is more committed to preserving family honor than asserting a claim of self defense in the murder of her husband. (For many Chinese, issues of honor, shame and commitment to family take precedence over individual goals and objectives.) How effectively could a lawyer in the denial stage represent this client? How might the difference in cultural worldviews and behaviors affect the lawyers' relationship with her client?

Clearly, lawyers in this stage will struggle to communicate and work effectively with clients they perceive as different. This perception may cause otherwise well-meaning lawyers to misjudge or stereotype a client. Negative attitudes and perceptions held about people from other cultures serve to diminish cross-cultural understanding and communication, ultimately undermining a lawyer's ability to establish a healthy and respectful relationship with his or her client.

STAGE THREE: Minimization of Difference

It's common for lawyers in this stage to avoid stereotypes and even appreciate differences in language and culture.

However, many will still view their own values as universal and superior, rather than viewing them simply as part of their own ethnicity and culture.

Consequently, it's common for lawyers in minimization to believe that everyone else shares their ideals, goals and values with regard to family, work, professionalism, humor, communication etc. In dealing with clients, the lawyer is likely to misinterpret the client's behavior, opinions and reactions because the lawyer will misperceive that the client shares his or her cultural values.

For example, in American culture when assessing credibility, lawyers may read a client or witnesses failure to maintain eye contact as a sign of dishonesty. However, in many cultures averting the eyes is a sign of respect to someone in authority. How will inaccurate read on behavior impact the lawyer's ability to make an accurate assessment of the credibility of a client or witness?

Lawyers in this stage focus on minimizing difference and in so doing they misread relevant behavioral and communication cues that are based on culture. Assuming similarity when none exists serves as a barrier to successful cross cultural communication.

STAGE FOUR: Acceptance of Difference

Lawyers in this stage acknowledge that identifying significant cultural differences is crucial to understanding and improving their interactions with individuals from other cultures.

There is an awareness of one's own culture and an understanding that although individuals from other cultures communicate differently, have different ideas and customs; they are neither superior nor inferior. Lawyers in this stage are beginning to interpret culture through a culturally unbiased lens.

Lawyers who are able to accept cultural differences have the ability to shift perspectives to understand that behavior typically defined as "ordinary" in one's own culture can have different meanings in different cultures.

Flexibility, adaptability and open-mind-

edness are the route to successful cross cultural lawyering and communication. Understanding, embracing and addressing cultural differences leads to the breaking of cultural barriers, and the decrease of "culture clashes". These skills lead to better lines of communication, stronger interpersonal relationships, mutual trust and enhanced client service.

It's important for lawyers to have the ability to properly analyze and respond to clients as a basis for establishing effective attorney client relations.

The following situation was recently shared with me by an immigration lawyer. It provides a great example of effective cross cultural communication and lawyering:

The lawyer was representing a client eager to obtain his permanent residence status so he could take a long awaited trip home to visit family and friends. The lawyer reported that his client is from a culture where it is customary to pay officials bribes in order to expedite certain processes. In fact, in the client's culture, such bribes are often expected. During a discussion about time frame for the permanent resident process, the lawyer gently explained to the client why his expectations regarding processing time lines were unreasonable and simply impossible to meet. In an attempt to "expedite" the process the client responded by offering the lawyer a bribe. In this situation, the immigration lawyer was aware of his client's cultural background and was able to respond in an appropriately sensitive and informative manner. Additionally, since the lawyer approached the situation with understanding instead of judgment, the attorney client relationship was preserved. This lawyer reported that his opinion of his client's integrity was not adversely affected. Instead, he interpreted the bribe as an indication of his client's desire and perhaps desperation to visit his family.

This example speaks to the heart of the significance of cultural awareness and competence required to develop and sustain successful attorney client relationships.

STAGE FIVE: Adaptation to Difference

In this stage of development, lawyers are able to take the perspective of another culture and operate successfully within that culture.

Lawyers in this stage, are likely to have developed solid skills in cross-cultural communication. Their increased awareness, acceptance and ability to adapt to other cultures makes such communication possible. They are more likely to independently strive to understand the nuances of other cultures which most often leads to openness and ability to connect with others.

STAGE SIX: Integration of Difference

In this stage, lawyers have the ability to evaluate another individual's behavior in the frame of reference of their client, opponent, colleague or staff member.

They will be able to establish rapport and read the verbal and non-verbal cues of an individual from another culture.

This skill is useful in learning how to "read" people in relevant ways that are accurate vs. stereotypical.

Lawyers in the integration stage become adept at evaluating any situation from multiple cultural frames of reference. Additionally, lawyers in leadership roles within organizations will define their roles by demanding intercultural competence and encouraging educational training in those skills. They strive to ensure that there is respect for cultural diversity that leads to a highly diverse workforce and client base. Organizations that have successfully embraced diversity and inclusion possess a significant advantage over other organizations when dealing with diverse clientele.

These stages clearly reflect that the further along a lawyer is on the continuum of cultural competence, the more effectively he or she will be able to communicate with clients and others cross-culturally.

Cultural competence is a developmental process that evolves over an extended period through the proper use of competency assessments, training and coaching.

Effective cultural competence training programs should take a multi-dimensional approach and focus on helping individuals

gain skills, knowledge and attitudes that encompass five elements:

1. Awareness, acceptance and appreciation of difference;
2. Awareness of one's own cultural values;
3. Understanding of the dynamics of difference;
4. Development of cultural knowledge;
5. Ability to adapt and practice skills to fit the cultural context of co-workers, managers, clients and/or customers.

Most importantly, programs should be sensitive to the needs of all participants and structured in ways to create a safe learning environment where each participant's opinion is respected and valued regardless of where the individual's skill level may lie on the cultural competence continuum.

Tips for improving cross cultural communication.

Although training and coaching interventions are the most effective method of improving cross cultural communication skills and cultural competence, the following are some things that lawyers can begin doing to improve cross cultural communication skills:

1) **Gain awareness.** Become aware that although a gesture, word or response may mean something in your culture; it may mean something totally different to someone from another culture.

2) **Take a look at your own culture:** Understanding how your worldview and culture impacts your perception of others will help you identify instances where you may tend to use biases or stereotypes when interacting with those who you perceive as different.

3) **Try a little understanding.** In trying to better understand your clients and their motivations, understand the impact that culture plays on their values, perspectives and behavior.

4) **Listen closely and pay attention** Try to focus on verbal as well as non-verbal cues and the behavior of your client. If the client seems distracted, confused, or ill at ease, ask questions.

5) **Suspend judgment as much as possible.** Approaching people from other cultures in a judgmental manner will hinder your ability to gain a clear understanding of the situation.

6) **Be flexible:** Flexibility, adaptability and open-mindedness are critical to effective cross cultural communication. Understanding, embracing and addressing cultural differences will lead to better lines of communication, client service and lawyering.

Lawyers who are willing to address cultural issues when dealing with clients and colleagues will enhance client relationships and improve their ability to problem solve and negotiate. Keep in mind that improving cross cultural communication and cultural competence is a process and a journey so be patient with yourself. Your commitment and desire to improve will go a long way toward enhancing the service you provide your clients as well as the overall quality of your lawyering skills.

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Five Habits for Cross-Cultural Lawyering[1]

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Practicing law is often a cross-cultural experience. The law, as well as the legal system in which it operates, is a culture with strong professional norms that give meaning to and reinforce behaviors. The communication style of argument predominates, and competition is highly valued. Even when a lawyer and a non-law-trained client share a common culture, the client and the lawyer will likely experience the lawyer–client interaction as a cross-cultural experience because of the cultural differences that arise from the legal culture.

In addition to these cultural differences, we know that the global movement of people, as well as the multicultural nature of the United States, creates many situations where lawyers and clients will work in cross-cultural situations. To meet the challenges of cross-cultural representation, lawyers need to develop awareness, knowledge, and skills that enhance the lawyers' and clients' capacities to form meaningful relationships and to communicate accurately.

This chapter, and the habits it introduces, prepares lawyers to engage in effective, accurate cross-cultural communication and to build trust and understanding between themselves and their clients. Section 1 identifies some ways that culture influences lawyering and the potential issues that may arise in cross-cultural lawyer–client interactions. Section 2 identifies the principles and habits that are skills and perspectives that can be used to identify our own cultural norms and those of our clients and to communicate effectively, knowing these differences. As one anthropologist has recognized, there is "a great distance between knowing that my gaze transforms and becoming aware of the ways that my gaze transforms."[2] To help lawyers identify the ways their gaze transforms and the cultural bridges that are needed for joint work between lawyers and clients, we have developed five habits for cross-cultural lawyering.

Culture and the Role It Plays in Lawyers' Work

To become good cross-cultural lawyers, we must first become aware of the significance of culture in the ways in which we make sense out of the world. Culture is like the air we breathe: it is largely invisible, and yet we are dependent on it for our very being. Culture is the logic through which we give meaning to the world.[3] Our culture is learned from our experiences, sights, books, songs, language, gestures, rewards, punishments, and relationships that come to us in our homes, schools, religious organizations, and communities.[4] We learn our culture from what we are fed and how we are touched and judged by our families and significant others in our communities. Our culture gives us our values, attitudes, and norms of behavior.

Through our cultural lens, we make judgments about people based on what they are doing and saying. We may judge people to be truthful, rude, intelligent, or superstitious based on the attributions we make about the meaning of their behavior. Because culture gives us the tools to interpret meaning from behavior and words, we are constantly attaching culturally based meaning to what we see and hear, often without being aware that we are doing so.[5]

In this chapter, when we talk about cross-cultural lawyering, we are referring to lawyering where the lawyer's and the client's ethnic or cultural heritage comes from different countries, as well as where their cultural heritage comes from socialization and identity in different groups within the same country. By this definition, everyone is multicultural to some degree.[6] Cultural groups and cultural norms can be based on ethnicity, race, gender, nationality, age, economic status, social status, language, sexual orientation, physical characteristics, marital status, role in family, birth order, immigration status, religion, accent, skin color, or a variety of other characteristics.

This broad definition of culture is essential for effective cross-cultural lawyering because it teaches us that no one characteristic will completely define the lawyer's or the client's culture.[7] For example, if we think about birth order alone as a cultural characteristic, we may not see any significance to this factor. Yet if the client (or lawyer) comes from a society where "oldest son" has special meaning in terms of responsibility and privilege, identification of the ethnicity, gender, or birth order alone will not be enough to alert the lawyer to the set of norms and expectations for how the oldest son ought to behave. Instead, the lawyer needs to appreciate the significance of all three characteristics to fully understand this aspect of the client's culture.

A broad definition of culture recognizes that no two people have had the exact same experiences and thus no two people will interpret or predict in precisely the same ways. People can be part of the same culture and make different decisions while rejecting norms and values from their culture. Understanding that culture develops shared meaning and, at the same time, allows for significant differences helps us to avoid stereotyping or assuming that we know that which we have not explored with the client. At the same time that we recognize these individual differences, we also know that if we share a common cultural heritage with a client, we are often better able to predict or interpret, and our mistakes are likely to be smaller misunderstandings.

When lawyers and clients come from different cultures, several aspects of the attorney–client interaction may be implicated. The capacities to form trusting relationships, to evaluate credibility, to develop client-centered case strategies and solutions, to gather information, and to attribute the intended meaning from behavior and expressions are all affected by cultural experiences. By using the framework of cross-cultural interaction, lawyers can learn to anticipate and name some of the difficulties they or their clients may be experiencing. By asking ourselves as part of the cross-cultural analysis to identify ways in which we are similar to clients, we identify the strengths of connection. Focusing on similarities also alerts us to pay special attention when we see ourselves as "the same" as the client so that we do not substitute our own judgment for the client's through overidentification and transference.

Establishing Trust

Lawyers and clients who do not share the same culture face special challenges in developing a

trusting relationship where genuine, accurate communication occurs. Especially where the culture of the client is one with a significant distrust of outsiders[8] or of the particular culture of the lawyer, the lawyer must work hard to earn trust in a culturally sensitive way. Similarly, cultural difference may cause the lawyer to mistrust the client. For example, when we find the client's story changing or new information coming to light as we investigate, we may experience the client as "lying" or "being unhelpful." Often this causes us to feel betrayed by our client's sanctions.

Sometimes when a client is reacting negatively to a lawyer or a lawyer's suggestions, lawyers label clients as "difficult." Professor Michelle Jacobs has warned that white lawyers interpreting clients' behavior may fail to understand the significance of racial differences, thereby erroneously labeling African American clients as "difficult." Instead, the lawyer may be sending signals to the client that reinforce racial stereotypes, may be interpreting behavior incorrectly, and therefore may be unconsciously failing to provide full advocacy.[9]

In these situations, lawyers should assess whether the concept of insider-outsider status helps explain client reactions. Where insider-outsider status is implicated, lawyers must be patient and try to understand the complexities of the relationship and their communication while building trust slowly.

Accurate Understanding

Even in situations where trust is established, lawyers may still experience cultural differences that significantly interfere with lawyers' and clients' capacities to understand one another's goals, behaviors, and communications. Cultural differences often cause us to attribute different meanings to the same set of facts. Thus one important goal of cross-cultural competence is for lawyers to attribute to behavior and communication that which the actor or speaker intends.

Inaccurate attributions can cause lawyers to make significant errors in their representation of clients. Imagine a lawyer saying to a client, "If there is anything that you do not understand, please just ask me to explain" or "If I am not being clear, please just ask me any questions." Many cultural differences may explain a client's reluctance to either blame the lawyer for poor communication (the second question) or blame himself or herself for lack of understanding (the first question). Indeed clients from some cultures might find one or the other of these results to be rude and therefore be reluctant to ask for clarification for fear of offending the lawyer or embarrassing themselves.

Cultural differences may also cause lawyers and clients to misperceive body language and judge each other incorrectly. For an everyday example, take nodding while someone is speaking. In some cultures, the nodding indicates agreement with the speaker, whereas in others it simply indicates that the listener is hearing the speaker. Another common example involves eye contact. In some cultures, looking someone straight in the eye is a statement of open and honest communication, whereas a diversion of eyes signals dishonesty. In other cultures, however, a diversion of eyes is a sign of respect. Lawyers need to recognize these differences and plan for a representation strategy that takes them into account.

Organizing and Assessing Facts

More generally, our concepts of credibility are very culturally determined. In examining the credibility of a story, lawyers and judges often ask whether the story makes "sense" as if "sense" were neutral. Consider, for example, a client who explains that the reason she left her native country was that God appeared to her in a dream and told her it was time to leave. If the time of leaving is a critical element to the credibility of her story, how will the fact finder evaluate the credibility of that client's story? Does the fact finder come from a culture where dreams are valued, where an interventionist God is expected, or where major life decisions would be based on these expectations or values? Will the fact finder, as a result of differences, find the story incredible or evidence of a disturbed thought process or, alternatively, as a result of similarities, find the client credible?

The way different cultures conceptualize facts may cause lawyers and clients to see

different information as relevant. Lawyers who experience clients as "wandering all over the place" may be working with clients who categorize information differently than the lawyer or the legal system. If a lawyer whose culture is oriented to hour, day, month, and year tries to get a time line from a client whose culture is not oriented that way, she may incorrectly interpret the client's failure to provide the information as uncooperative, lacking intelligence, or, worse, lying.[10] A client who is unable to tell a linear time-related story may also experience the same reaction from courts and juries if the client's culture is unknown to the fact finders.

Individual and Collective

In other settings, the distinction between individual and collective cultures has been called the most important concept to grasp in cross-cultural encounters.[11] Understanding the differences between individual and collective cultures will help lawyers see how they and clients define problems, identify solutions, and determine who important players are in a decision.[12]

Lawyers who explore differences in individual and collective cultures may see different communication styles, values, and views of the roles of the lawyer and client. In an individualistic culture, people are socialized to have individual goals and are praised for achieving these goals. They are encouraged to make their own plans and "do their own thing."[13] Individualists need to assert themselves and do not find competition threatening. By contrast, in a collective culture, people are socialized to think in terms of the group, to work for the betterment of the group, and to integrate individual and group goals. Collectivists use group membership to predict behavior. Because collectivists are accepted for who they are and feel less need to talk, silence plays a more important role in their communication style.

Majority culture in the United States has been identified as the most individualistic culture in the world.[14] Our legal culture reflects this commitment to individualism. For example, ethical rules of confidentiality often require a lawyer to communicate with an individual client in private if confidentiality is to be maintained and may prohibit the lawyer from representing the group or taking group concerns into account to avoid potential conflicts.[15] Many client empowerment models and client-centered models of practice are based on individualistic cultural values.

Here is an example of how a result that appeared successful to the lawyers can nevertheless be unacceptable when taken in the context of the client's collective culture. In this case, lawyers negotiated a plea to a misdemeanor assault with probation for a battered Chinese woman who had killed her husband and who faced a 25-year sentence if convicted of murder. The client, who had a strong self-defense claim, refused to plead to the misdemeanor charge because she did not want to humiliate herself, her ancestors, her children, and their children by acknowledging responsibility for the killing. Her attorneys did not fully comprehend the concept of shame that the client would experience until the client was able to explain that the possibility of 25 years in jail was far less offensive than the certain shame that would be experienced by her family (past, present, and future) if she pled guilty. These negative reactions to what the lawyers thought was an excellent result allowed the lawyers to examine the meaning of pleas, family, responsibility, and consequences within a collective cultural context that was far different than their own.[16]

Legal Strategy and Decision Making

In another case, attorneys—whose client was a Somalian refugee seeking political asylum—had to change their strategy for presenting evidence in order to respect the client's cultural and religious norms. Soldiers had bayoneted her when she resisted rape, and she was scarred on a breast and an ankle. To show evidence of persecution, the plaintiff would have had to reveal parts of her body that she was committed, by religion and culture, to keeping private. Ultimately the client developed a strategy of showing the injury to the INS lawyer who was also female.[17] This strategy, challenging conventional legal advocacy and violating cultural norms of the adversarial system, allowed the client to present a case that honored her values and norms.[18]

Immigrant clients often bring with them prior experiences with courts or interactions with governments from their countries of origin that influence the choices they make in their cases. Strategies that worked in their country of origin may not be successful here. For example, clients from cultures that punish those challenging governmental action may be resistant to a lawyer's suggestion that a Supplemental Security Income (SSI) benefits appeal be taken, challenging the government's decision to deny a claim. Conversely, those who come from societies where refusal to follow government requirements is a successful strategy may be labeled as belligerent by the court when they consistently resist or challenge the court.

Finally, cultural differences may cause us to misjudge a client or to provide differential representation based on stereotype or bias. Few lawyers engage in explicit open racial or cultural hostility toward a client. However, if recent studies in the medical field have relevance for lawyers, we need to recognize that even lawyers of goodwill may engage in unconscious stereotyping that results in inferior representation. Studies in the medical field show that doctors are less likely to explain diagnoses to patients of color and less likely to gather significant information from them or to refer them for needed treatment.[19] Although no studies of lawyers to our knowledge have focused on studying whether lawyers engage in discriminatory treatment, two recent studies have identified differential treatment by the legal system based on race. One study done by Child Welfare Watch shows that African American children are far more likely to be removed from their home, put in foster care, and left there longer than similarly situated white children.[20] Another study showed that African American juveniles received disproportionate sentences when compared with similarly situated white youths. In each of these legal studies, lawyers—as prosecutors, representatives, and judges—were deeply implicated in the work that led to the differential treatment.

Once a cultural difference surfaces, we can see stark cultural contrasts with clear connections to lawyering choices. In hindsight, it is easy to see the cultural contrasts and their effect on the clients' and lawyers' challenges to find acceptable accommodations to the legal system. In the moment, however, cases are more difficult, and the differences and similarities are more subtle and, at times, invisible. The following sections give you some insights into how to make this more visible.

Culture-General and Culture-Specific Knowledge

In addition to developing awareness of the role that culture plays in attributing meaning to behaviors and communication, a competent cross-cultural lawyer also studies the specific culture and language of the client group the lawyer represents. Culture-specific knowledge, politics, geography, and history, especially information that might shed light on the client's legal issues, relationship with the lawyer, and process of decision making will assist the lawyer in representing the client better. As the lawyer develops culture-specific knowledge, he or she should apply this knowledge carefully and examine it on a case-by-case basis. Finally, a lawyer will have a greater capacity to build trust and connection if he or she speaks the client's language even if they do not share a common culture.

If the lawyer represents clients from a multitude of cultures, the lawyer can improve cross-cultural interactions by acquiring culture-general knowledge and skills. This culture-general information is also helpful to lawyers who are beginning to learn about a specific culture. Because learning any new culture is a complex endeavor (remember the number of years that we spent learning our own), the lawyer can use culture-general knowledge and skills while learning specifics about a new culture.

Habit 1: Degrees of Separation and Connection

The first part of Habit 1 encourages lawyers to consciously identify the similarities and differences between their clients and themselves and to assess their impact on the attorney–client relationship. The framework of similarities and differences helps assess lawyer–client interaction, professional distance, and information gathering.

The second part of the habit asks the lawyer to assess the significance of these similarities and differences. By identifying differences, we focus consciously on the possibility that cultural misunderstanding, bias, and stereotyping may occur. By focusing on similarities, we become conscious of the connections that we have with clients as well as the possibility that we may substitute our own judgment for the client's.

Pinpointing and Recording Similarities and Differences

To perform Habit 1, the lawyer brainstorms, as quickly as possible, as many similarities and differences between the client and himself as he can generate. This habit is rewarded for numerosity—the more differences and similarities the better. A typical list of similarities and differences might include the following:

Ethnicity	Economic Status	Marital Status
Race	Social Status	Role in Family
Gender	Language	Immigration Nationality
Sexual Orientation	Religion	Education
Age	Physical Characteristic	Time
Individualistic/ Collective	Direct or Indirect Communication	

With each client and case, you may identify different categories that will influence the case and your relationship. These lists will change as the relationship with the client and the client's case changes. Exhaustive lists help the lawyer make conscious the less obvious similarities and differences that may enhance or interfere with understanding.

Consciously identifying a long list of similarities and differences allows lawyers to see clients as individuals with personal, cultural, and social experiences that shape the clients' behavior and communications. In asking you to create long lists, we do not mean to suggest that all similarities and differences have the same order of importance for you or your client. For example, in interactions involving people of color and whites, race will likely play a significant role in the interaction given the discriminatory role that race plays in our society.[21] In some cases, such as rape or domestic violence, gender differences may also play a greater role than in others. The connections that cause a lawyer to feel connected to a client may be insignificant to a client.

The most important thing is to make this list honestly and nonjudgmentally, thinking about what similarities and differences you perceive and suspect might affect your ability to hear and understand your client's story and your client's ability to tell it.

Another way to illustrate the degrees of connection and separation between client and lawyer is through the use of a simple Venn diagram. Draw two circles, overlapping broadly if the worlds of the client and of the lawyer largely coincide, or narrowly if they largely diverge. By creating a graphical representation of Habit 1, the lawyer can gain insight into the significance of the similarities and differences. For example, the list of similarities may be small, and yet the lawyer may feel "the same" as the client because of one shared similarity, or the lawyer may have many similarities and yet find herself feeling very distant from the client.

Analyzing the Effect of Similarities and Differences on Professional Distance and Judgment

After creating the lists and diagrams, the lawyer can identify where the cross-cultural challenges might occur. By naming the things that unite and distance us from our clients, we are able to identify relationships that need more or less professional distance because they are "too close" or "too far." No perfect degree of separation or connection exists between lawyer and client. However, where the list of similarities is long, the lawyer may usefully ask, "Are there differences that I am overlooking? Am I developing solutions to problems that may work for me but not for my client?" By pondering these questions, we recognize that even though similarities promote understanding, misunderstanding may flow from an assumption of precise congruence. Thus, in situations where lawyers and clients have circles that overlap, the lawyer should ask herself, "How do I develop proper professional distance with a client who is so similar to me?"

In other cases, where the list of differences is long, the question for the lawyer is "Are there any similarities that I am missing?" We know that negative judgments are more likely to occur when the client and lawyer see the other as an "outsider." Thus the lawyer who identifies significant cultural differences between the client and herself will be less likely to judge the client if she also sees herself as similar to the client. Where large differences exist, the lawyer needs to consciously address the question "How do I bridge the huge gap between the client's experiences and mine?"

What does the analysis of connection and difference indicate about what we ought to share with clients about ourselves? Lawyers usually know far more about their clients than the clients know about the lawyers. Some information of similarity and difference will be obvious to a client, and other significant information will be known only if the lawyer chooses to tell the client. In thinking about establishing rapport with clients, lawyers often think about revealing information that will reveal similarities and establish connections to clients. Of course, exactly what information will cause the client to bond with the lawyer is difficult to know, as the significance of specific similarities and differences may be very different for the lawyer and the client.

Analyzing the Effect of Similarities and Differences on Gathering and Presenting Information

Differences and similarities or assumptions of similarity will significantly influence questioning and case theory. One example of how differences and similarities in the lawyer–client dyad may influence information gathering can be seen in the way lawyers probe for clarification in interviews. Lawyers usually ask questions based on differences that they perceive between their clients and themselves. Thus a lawyer, especially one with a direct communication style, tends to ask questions when a client makes choices that the lawyer would not have made or when he perceives an inconsistency between what the client is saying and the client's actions. A lawyer tends not to ask questions about choices that a client has made when the lawyer would have made the same choices; in such a situation, the lawyer usually assumes that the client's thought processes and reasoning are the same as his own.

For example, in working with a client who has fled her home because of spousal abuse and is living with extended family members, a lawyer might not explore the issue of family support. In contrast, had the client explained that she could not go to her family for support, the same lawyer might have explored that and developed housing alternatives. The probing occurs when the lawyer perceives the client's choices as different from the ones the lawyer might make, and therefore she tries to understand in this case why the client has failed to involve her family. The same lawyer might ask few questions about family support when she assumes that a client living with family had family support, because the lawyer would expect her own family to support her in a decision to leave an abusive spouse.

In her failure to ask questions of the first client, the lawyer is probably making a host of assumptions about cultural values that relate to the client's and the lawyer's family values. Assumptions of similarities that mask differences can lead the lawyer to solutions and legal theories that may not ultimately work for the client. For example, in assuming that the first client has family support, the lawyer in the previous example may neglect to explore other housing arrangements or supportive environments that the client needs. Family relationships are incredibly rich areas for cultural misunderstanding, and thus assumptions of similarity are perhaps even more problematic when issues of family are involved.

To identify the unexplored cultural assumptions that the lawyer may be making, the lawyer should ask what she has explored and what she has left unexplored. Reflection on the attorney–client interview allows the lawyer to identify areas where the lawyer may have missed relevant explanations of behavior.

Habit 2: Rings in Motion

If the key to Habit 1 is "identifying and analyzing the distance between me and my client," the key to Habit 2 is identifying and analyzing how cultural differences and similarities influence

the interactions between the client, the legal decision makers, the opponents, and the lawyer.

Lawyers interview clients to gain an understanding of the client's problem from the client's perspective and to gather information that will help the lawyer identify potential solutions, particularly those that are available within the legal system or those that opponents will assent to. What information is considered relevant and important is a mixture of the client's, opponent's, lawyer's, and legal system's perspectives.

If these perspectives are different in material ways, information will likely be presented, gathered, and weighed differently. Habit 2 examines these perspectives explicitly by asking the lawyer to identify and analyze the similarities and differences in different dyads and triads to assess the various cultural lenses that may affect the outcome of a client's case.

Like Habit 1, the lawyer is encouraged to name and/or diagram the differences and similarities first and then to analyze their effect on the case.

Pinpoint and Record Similarities and Differences in the Legal System–Client Dyad

The lawyer should identify the similarities and differences that may exist between client–law and legal decision maker–law. As in Habit 1, the similarities and differences can be listed or can be put on a Venn diagram. In many cases, multiple players will influence the outcome and should be included when identifying the similarities and differences. For example, a prosecutor, a prospective jury, a presentence probation officer, and a judge may all make decisions that influence how the client charged with a crime will be judged and sentenced. Or a forensic evaluator in a custody case may play a significant role in deciding the outcome of a case. Therefore, at various points in the representation, different, important players should be included in the diagram of similarities and differences.

For example, a forensic evaluator in examining a capacity to parent may look for signs of the parent's encouragement of separation of parent and child. In cultures that do not see this kind of separation as healthy for the child, the evaluator may find little that is positive to report. For example, the parent may be criticized for overinvolvement, for practices such as sharing beds with children, or for failing to tolerate "normal" disagreements between child and parent. Lawyers should identify the potential differences that exist between the client and decision makers and focus on how to explain the client's choices where they differ from the evaluator's norms.

In thinking about how differences and similarities might influence the decision makers, lawyers often try to help clients make connections to decision makers to lessen the negative judgments or stereotyping that may result from difference. To the extent that lawyers have choices, they may hire or suggest that the court use expert evaluators that share a common culture or language with the client. Cross-cultural misunderstandings and ethnocentric judgments are less likely to occur in these situations. By checking with others that have used this expert, lawyers can confirm that, despite their professional education, the expert has retained an understanding and acceptance of the cultural values of the client. When the client and decision makers come from different cultures, the lawyer should think creatively about similarities that the client shares with the decision makers. By encouraging clients and decision makers to see similarities in each other, connections can be made cross-culturally.

In addition to focusing on the decision makers, the lawyer should identify the cultural values and norms implicit in the law that will be applied to the client. Does the client share these values and norms, or do differences exist?

Pinpoint and Record Similarities and Differences in the Legal System–Lawyer Dyad

The lawyer should also focus on the legal system–lawyer dyad and assess the similarities and differences between herself and the legal system. To what extent does the lawyer adopt the values and norms of the law and legal decision makers? How acculturated to the law and legal culture has the lawyer become? In what ways does the lawyer see the "successful" client the same as the law and legal decision makers,

and to what extent does the lawyer have different values and evaluations? Understanding the differences and similarities between the lawyer and the legal system players will help the lawyer assess whether her evaluation of the case is likely to match the legal decision maker.

Again the lawyer can list or create a diagram that indicates the similarities and differences. By studying these, the lawyer can develop strategies for translation between the client and the legal system that keeps the client and her concerns central to the case.

Pinpoint and Record Similarities and Differences of Opponents to Legal Decision Makers/Clients/Lawyers

The cultural background of an opposing party may also influence the outcome of a case. By listing or diagramming similarities and differences of the opponent with the various other players involved in a case, the lawyer can assess a case and design creative solutions. Often in settling cases, lawyers look for win-win solutions that meet the needs of clients and their adversaries. For example, in assessing the possibility of resolving a custody case, a lawyer may want to know what the norms of custody are in the opposing party's culture and the extent to which the opposing party still embraces these values. How might gender norms about who should have custody influence the opponent's capacity or willingness to settle the case? Will the opponent be the only decision maker in resolving the case, or might the extended family, especially the grandparents, be the people who need to be consulted for the settlement to take place. All these factors and more should be included in a lawyer's plan for negotiation.

Reading the Rings: Analyze the Effect of Similarities and Differences

After filling in the diagrams and/or making the lists of the different dyads, the lawyer can interpret the information to look for insights about the impact of culture on the case and potential successful strategies. The lawyer's goal in reading the rings is to consciously examine influences on the case that may be invisible but will nonetheless affect the case.

The following questions may help identify some of those insights:

Assessing the legal claim: How large is the area of overlap between the client and the law?

Assessing cultural differences that result in negative judgments: What are the cultural differences that may lead to different values or biases, causing decision makers to negatively judge the client or the opponent?

Identifying similarities that may establish connections and understanding: What does a successful client look like to this decision maker? How similar or different is the client from this successful client?

Assessing credibility: How credible is my client's story? Does it make "sense"? To what extent is knowledge of the client, her values, and her culture necessary for the sense of the story? How credible is my client? Are there cultural factors influencing the way the client tells the story that will affect her credibility?

Identifying legal strategies. Can I shift the law's perspective to encompass more of the client's claim and desired relief? Do my current strategies in the client's case require the law, the legal decision maker, or the client to adjust perspectives?

Identifying bones to pick with the law: How large is the area of overlap between the law and myself?

Identifying how my biases shape the inquiry: How large is the area of overlap between the lawyer–client, lawyer–law, and client–legal system circles? Notice that the overlap is now divided into two parts: the characteristics relevant to the legal case that the lawyer shares with the client and those relevant characteristics that the lawyer does not share with the client. Does my client have a plausible claim that is difficult for me to see because of these differences or similarities? Am I probing for clarity using multiple frames of reference—the client's, the legal system's, the opponent's, and mine? Or am I focused mostly on my own frame of reference?

Identifying non-human issues: Of all the characteristics and perspectives listed on the rings, which loom largest for me? Are they the same ones that loom largest for the client? For the law?

Habit 2 is more cumbersome than Habit 1 and requires looking at multiple frames of reference at once.[32] However, lawyers who have used Habit 2 find that it helps them to focus when a case or client is troubling them. The lawyer can identify why she has been focusing on a particular aspect of a case even when that aspect is not critical to the success of the case. She may gain insight into why a judge is bothered by a particular issue that is presented in the case. In addition, lawyers might gain insight into why clients are resisting the lawyer's advice or the court's directive and are "uncooperative." Lawyers might also begin to understand why clients often see the lawyer as part of a hostile legal system when a high degree of overlap between the lawyer and the legal system is identified.

What can the lawyer do with the insights gained from reading the rings or lists? Lawyers can ask whether the law and legal culture can be changed to legitimate the client, her perspective, and her claim. Can the lawyer push the law or should she persuade the client to adapt? Hopefully, by discovering some of these insights, the lawyer may be better able to explain the client to the legal system and the legal system to the client.

Habit 3: Parallel Universes

Habit 3 helps a lawyer identify alternative explanations for her client's behavior. The habit of parallel universes invites the lawyer to explore multiple alternative interpretations of any client behavior. Although the lawyer can never exhaust the parallel universes that explain a client's behavior, in a matter of minutes the lawyer can explore multiple parallel universes to explain a client's behavior at a given moment.

For example, if a lawyer has a client in a custody dispute who has consistently failed to follow a court order to take her child for a psychiatric evaluation, the lawyer might assume that her client has something to hide. Although the client tells the lawyer she will do it, it remains undone. A lawyer using parallel universe thinking can imagine many different explanations for the client's behavior: the client has never gone to a psychiatrist and is frightened; in the client's experience, only people who are crazy see psychiatrists; going to a psychiatrist carries a lot of shame; the client has no insurance and is unable to pay for the evaluation; the client cannot accept that the court will ever give the child to her husband, who was not the primary child caretaker; the client may fear that she will be misinterpreted by the psychiatrist; or the client simply did not think that she needed to get it done so quickly.

Using parallel universe thinking, the lawyer for a client who fails to keep appointments can explore parallel universe explanations for her initial judgment that "she does not care about the case." The behavior may have occurred because the client lacked carfare, failed to receive the letter setting up the appointment, lost her way to the office, had not done what she promised the lawyer she would do before their next appointment, or simply forgot about her appointment because of a busy life.

The point of parallel universe thinking is to get used to challenging oneself to identify the many alternatives to the interpretations to which we may be tempted to leap on insufficient information. By doing so, we remind ourselves that we lack the facts to make the interpretation, and we identify the assumptions we are using. The process need not take a lot of time; it takes only a minute to generate a number of parallel universe explanations to the interpretation to which the lawyer is immediately drawn.

Parallel universe thinking would cause the lawyer in the introductory example to try to explore with the client why she is resistant or to talk to people who share the client's culture to explore possible cultural barriers to her following the court's order.

Parallel universe thinking is especially important when the lawyer is feeling judgmental about her client. If we are attributing negative inferences to a client's behavior, we should identify other reasons for the behavior. Knowledge about specific cultures may enlarge the number of explanations that we can develop for behavior. Parallel universe thinking lets us know that we may be relying on assumptions rather than facts to explain the client's behavior and allows the lawyer to explore further with the client or others the reasons for the behavior. This exploration may also be helpful in explaining the client's behavior to others.

By engaging in parallel universe thinking, lawyers are less likely to assume that they know why clients are doing what they are doing when they lack critical facts. Parallel universe thinking also allows the lawyer to follow the advice of a cross-cultural trainer who suggests that one way to reduce the stress in cross-cultural interactions is to ask, "I wonder if there is another piece of information that, if I had it, would help me interpret what is going on."[22]

Habit 4: Red Flags and Remedies

The first three habits focus on ways to think like a lawyer, incorporating cross-cultural knowledge into analyzing how we think about cases, our clients, and the usefulness of the legal system. Habit 4 focuses on cross-cultural communication, identifying some tasks in normal attorney–client interaction that may be particularly problematic in cross-cultural encounters as well as alerting lawyers to signs of communication problems.

Good cross-cultural interaction requires mindful communication where the lawyer remains cognitively aware of the communication process and avoids using routine responses to clients. In cross-cultural communication, the lawyer must listen deeply, carefully attuned to the client and continuously monitoring whether the interaction is working and whether adjustments need to be made.

Habit 4 is accomplished in the moment and requires little planning for the experienced lawyer. The lawyer can identify ahead of time what she will look for to spot good communication and "red flags" that will tell her that accurate, genuine communication is probably not occurring.

In addition to paying attention to red flags and corrective measures, culturally sensitive exchanges with clients should pay special attention to four areas: (1) scripts, especially those describing the legal process; (2) introductory rituals; (3) client's understanding; and (4) culturally specific information about the client's problem.

Use Scripts Carefully

The more we do a particular activity, the more likely we are to have a "script." Lawyers often have scripts for the opening of interviews, explaining confidentiality, building rapport, explaining the legal system, and other topics common to the lawyer's practice. However, a mindful lawyer uses scripts carefully, especially in cross-cultural encounters, and instead develops a variety of communication strategies to replace scripts and explore understanding.

Pay Special Attention to Beginnings

A lawyer working with a client from another culture must pay special attention to the beginnings of communications with the client. Each culture has introduction rituals or scripts as well as trust-building exchanges that promote rapport and conversation. A lawyer who is unaware of the client's rituals must pay careful attention to the verbal and nonverbal signals the client is giving to the lawyer. How will the lawyer greet the client? What information will be exchanged before they "get down to business"? How do the client and lawyer define "getting down to business"? For one, the exchange of information about self, family, status, or background is an integral part of the business; for another, it may be introductory chitchat before the real conversation takes place. If an interpreter who is familiar with the client's culture will be involved with the interview, the lawyer can consult with the interpreter on appropriate introductory behavior.

Use Techniques That Confirm Understanding

Both clients and lawyers in cross-cultural exchanges will likely have high degrees of uncertainty and anxiety when they interact with someone they perceive to be different. The lack of predictability about how they will be received and their capacity to understand each other often leads to this uncertainty and anxiety. To lessen uncertainty and anxiety, both the lawyer and the client will be assisted by using techniques that consciously demonstrate that genuine understanding is occurring. Active listening techniques, including feedback to the client rephrasing his or her information, may be used to communicate to the client that the lawyer understands what the client is saying.[23]

In addition to giving the client feedback, the lawyer should look for feedback from the client that she understands the lawyer or is willing to ask questions if she does not understand. Until the lawyer knows that the client is very comfortable with a direct style of communication, the lawyer should refrain from asking the client if she understands and instead probe for exactly what the client does understand.

Gather Culture-Sensitive Information

How do we gather information that helps us interpret the client within her cultural context? In the first instance, the lawyer should engage in "deep listening" to the client's story and voice. For reasons identified in Habit 1, the lawyer, in question mode, will often be too focused on his or her own context and perspective. When exploration of the client's values, perspective, and cultural context is the goal, the lawyer needs to reorient the conversation to the client's world, the client's understandings, the client's priorities, and the client's narrative. Questions that get the client in narrative mode are usually the most helpful.

Questions that ask the client how or what she thinks about the problem she is encountering may also expose differences that will be helpful for the lawyer to understand the client's worldview. What are the client's ideas about the problem? Who else has the client talked to and what advice did they give? What would a good solution look like? What are the most important results? Who else besides the client will be affected? Consulted? Are there other problems caused by the current problem? Does the client know anybody else who had this problem? How did they solve it? Does the client consider that effective?

If the client has come from another country, the lawyer should ask the client how this problem would be handled in the client's country of origin. For example, in many legal cultures, the lawyer is the "fixer" or the person in charge. In contrast, most law students in the United States are taught client-centered lawyering, which sees the lawyer as partner, and our professional code puts the client in charge of major decisions about resolving the case.

Look for Red Flags That the Interaction Is Not Working

What are the red flags that mindful lawyers pay attention to in assessing whether the conversation is working for the client and lawyer? Red flags that the lawyer can look for include the following:

- The client appears bored, disengaged, or even actively uncomfortable;
- the client has not spoken for many minutes, and the lawyer is dominating the conversation;
- the lawyer has not taken any notes for many minutes;
- the client is using the lawyer's terminology instead of the lawyer using the client's words;
- the lawyer is judging the client negatively;
- the client appears angry; or
- the lawyer is distracted and bored.

Each lawyer and client and each lawyer–client pair will have their own red flags.

The first step is to see the red flag and be shaken out of complacency. "Uh-oh, something must be done." The next step is the corrective one. This must be done on the spot, as soon as the red flag is seen. The general corrective is to do anything possible to return to the search for the client's voice and story.

Explore Corrective Measures

In creating a corrective, the lawyer should be careful to use a different approach than the one that has led to the red flag. For example, if the client is not responding to a direct approach, try an indirect approach. If the call for narrative is not working, ask the client some specific questions or ask for narrative on a different topic.

Other suggested correctives include

- turning the conversation back to the client's stated priority;
- seeking greater detail about the client's priority;
- giving the client a chance to explain in greater depth her concerns;
- asking for examples of critical encounters in the client's life that illustrate the problem area;

exploring one example in some depth;

asking the client to describe in some detail what a solution would look like; and

using the client's words.

Again, these are only a few examples of many correctives that can be fashioned. Encounter by encounter, the lawyer can build a sense of the red flags in this relationship and the correctives that "work" for this client. Client by client, the lawyer can gain self-understanding about her own emblematic red flags and correctives that specifically target those flags. Red flags can remind the lawyer to be aware of the client and to be focused on the client in the moment. With reflection, the red flags can help the lawyer avoid further problems in the future.

Habit 5: The Camel's Back

Like the proverbial straw that breaks the camel's back, Habit 5 recognizes that, in addition to bias and stereotype, there are innumerable factors that may negatively influence an attorney–client interaction. A lawyer who proactively addresses some of these other factors may limit the effect of the bias and stereotyping and prevent the interaction from reaching the breaking point. Once the breaking point has been reached, the lawyer should try to identify why the lawyer–client interaction derailed and take corrective actions or plan for future corrective action.

Consider the case of a woman client with a horrible story of torture, whom the lawyer had very limited time to prepare for in an asylum trial (she lived out of town). During their conversation, the woman spoke in a rambling fashion. The lawyer, just back from vacation, was thinking angry thoughts toward the client. In the extreme stress caused by time pressure and by listening to the client tell about some horrible rapes that she had suffered, the lawyer fell back on some awful, old conditioning: against people who are of a different race, people who are overweight, and people who "talk too much."

In the midst of these feelings, which were causing the lawyer shame, what can the lawyer do to put the interview back on track and prevent a collision? This lawyer, like all lawyers, had biases and stereotypes that he brought to this attorney–client interaction. Research on stereotypes indicates that we are more likely to stereotype when we are feeling stress and unable to monitor ourselves for bias. By identifying the factors contributing to the negative reactions and changing some of them, the lawyer could prevent himself, at least sometimes, from acting on the basis of his assumptions and biases.

For example, the lawyer in the previous situation can take a break, have some food and drink, and identify what is interfering with his capacity to be present with the client before he resumes the interview. This, however, requires that the lawyer accept his every thought, including the ugly ones, and find a way to investigate and control those factors that are simply unacceptable in the context of lawyering. Knowing oneself as a cultural being and identifying biases and preventing them from controlling the interview or case are keys to Habit 5 thinking.

Over time, lawyers can learn to incorporate the analysis that they are doing to explore bias and stereotype into the analysis done as part of Habit 1. In addition to biases and stereotypes, straws that break the lawyer's back frequently include stress, lack of control, poor self-care, and a nonresponsive legal system. Final factor analysis identifies the straws that break the lawyer's back in the particular case and corrective steps that may work to prevent this from happening.

For example, assume that a lawyer, after working with a few Russian clients, begins to stereotype Russians as people who intentionally communicate with a lack of candor with lawyers. Habit 5 encourages this lawyer to be extra mindful when interviewing a Russian client. Given her biases, there is a higher likelihood that the lawyer will not find herself fully present with this client. In addition to using the other habits, the lawyer can improve the communication by controlling other factors (hunger, thirst, time constraints, and resource constraints), knowing that she is at greater risk of misunderstanding this client.

The prudent lawyer identifies proactively factors that may impede full communication with the client. Some she cannot control: pressure from the court, lack of resources, bad

timing, excessive caseload. But some she can: the language barrier (through a competent interpreter), her own stress (through self-care and adequate sleep, food, and water), and the amount of time spent with the client (increase as needed).

Habit 5 thinking asks the lawyer to engage in self-analysis rather than self-judgment. A lawyer who has noticed a red flag that recurs in interactions with clients can brainstorm ways to address it. Likewise, a lawyer who has noticed factors that tend to be present at particularly smooth encounters with clients can brainstorm ways to make more use of these advantages. By engaging in this reflective process, the lawyer is more likely to respond to and respect the individual clients.

Notes

1. This work grows out of a joint collaborative process that was conceived in conversations in the early 1990s and began as a project in fall 1998 with a concrete goal of developing a teaching module about cross-cultural lawyering. Ultimately that project resulted in these materials for use in clinical courses, which we first presented at the 1999 CUNY Conference, "Enriching Legal Education for the 21st Century: Integrating Immigrant Perspectives Throughout the Curriculum and Connecting With Immigrant Communities." This work has also contributed to a chapter written by Jean Koh Peters in the supplement to her book, *Representing Children in Child Protective Proceedings: Ethical and Practical Dimensions*.

Many wonderful colleagues, students, and staff from CUNY and Yale aided us in the development of this work. The Open Society Institute, Emma Lazarus Fund, provided support for the conference, our work, and the publication of these materials.

2. R. Carroll, *Cultural Misunderstandings* 3 (University of Chicago Press 1988). Others have referred to this as "conscious incompetence," where the individual recognizes that cross-cultural competence is needed, but the person has not yet acquired the skills for this work. See W. S. Howell, *The Empathetic Communicator* 30–35 (1982).

3. Carroll, *Cultural Misunderstandings* 2. Objective culture includes that which we observe including artifacts, food, clothing, and names. It is relatively easy to analyze and identify its use. Subjective culture refers to the invisible, less tangible aspects of behavior. People's values, attitudes, and beliefs are kept in people's minds. Most cross-cultural misunderstandings occur at the subjective culture level. See K. Cushner & R. Brislin, *Intercultural Interactions* 6 (Sage Publications 1996), p. 6.

4. Those who grew up in cultures in the United States that prized individualism and self-reliance can identify specific experiences from their childhood that helped them develop these traits, such as paper routes and baby sitting jobs and proverbs such as "God helps them who help themselves" and "The early bird catches the worm." Cushner & Brislin, *Intercultural Interactions*, p. 7. Not all who grew up in the United States share this commitment to individualism; significant cultural groups in the United States prize commitment to community. They might have heard "Blood is thicker than water."

5. Ethnocentrism occurs when a person uses his own value system and experiences as the only reference point from which to interpret and judge behavior.

6. Cushner & Brislin, *Intercultural Interactions*, p. 10.

7. Critical feminist race theorists have established the importance of intersectionality in recognizing, for example, that women of color have different issues than white women or men of color. The intersectionality of race and gender gives women of color different vantage points and life experiences. Angela P. Harris, *Race and Essentialism in Feminist Legal Theory*, 42 Stan. L. Rev. 581 (1990); Kimberlé Crenshaw, *Mapping the Margins: Intersectionality, Identity Politics, and Violence Against Women of Color*, 43 Stan. L. Rev. 1241, 1249 n. 29 (1991); see also Melissa Harrison and Margaret E. Montoya, *Voices/Voces in the Borderlands: A Colloquy on Re/Constructing Identities in Re/Constructed Legal Spaces*, Columbia Journal Of Gender and Law (1996), 387, 403. Professors Montoya and Harrison discuss the importance of seeing multiple and changing identities.

8. The insider/outsider group distinction is one of the core themes in cross-cultural interactions. K. Cushner & D. Landis, The Intercultural Sensitizer, in *Handbook of Intercultural Training* 189 (2d ed.; D. Landis and R. Bhagat eds., 1996). Historical struggles between native countries of the lawyer and client or situations where lawyer's or client's native country has dominated the other's country can create difficult power dynamics between lawyer and client.

For example, racial discrimination both historical and current by Anglo-Americans against African Americans can have significant influences on the lawyer–client relationship. *Infra*, note 32.

9. Michelle Jacobs, *People From the Footnotes: The Missing Element in Client-Centered Counseling*, 27 Golden Gate U.L. Rev. 345, 372 (1997).

10. Harrison and Montoya, *supra* note 4, at 160. For example, after discussing the scholarship on lawyer as translator or ethnographer, Professor Zuni Cruz invited Esther Yazzie, a federally certified Navajo translator, to describe and enact the skills necessary to work successfully with language interpreters. "Ms. Yazzie's presentation debunked for all of us the idea that languages are transparent or that representations of reality somehow exist apart from language. One of several examples cited by Ms. Yazzie involved different conceptualizations of time: 'February' translated into Navajo as 'the time when the baby eagles are born.' Certainly, this is a temporal concept more connected to nature and to place than a word such as 'February' and, as such, is a different construct."

11. Cushner & Brislin, Intercultural Interactions, *supra* note 14, at 302.

12. Christine Zuni Cruz, *[On the] Road Back In: Community Lawyering in Indigenous Communities*, 5 Clin. L. Rev. 557, 580–584 (1999), *supra* note 5, at 580–584, tells a number of stories illustrating difference in individualistic and community focused lawyering and how culture influences the choices that lawyers make.

13. Cushner & Brislin, *Intercultural Interactions*, *supra* note 4 at 302.

14. Hofstede 1980 and 1991 as cited in Cushner & Brislin, Intercultural Intersections, *supra* note 4, at 302. Other nations that rank high on this dimension are Australia, Canada, Great Britain, the Netherlands, and New Zealand. Nations that score high on collectivism are primarily those in Asia and South America.

15. See also Kimberly O'Leary, Using "Difference Analysis" to Teach Problem-Solving, Clin. L. Rev. 65, 72 (1997), at 72. Professor O'Leary points to both the ethical rules and concepts of standing as limiting lawyers' conceptions about who is involved in a dispute. Following our presentation at the 2000 AALS Clinical Teacher's conference, Peter Joy alerted us to a contemplated change in California professional responsibility rules on confidentiality, allowing the privilege to be maintained when family members or others were part of the interview process.

16. This scenario was told to me by Professor Holly Maguigan, who for years has represented a number of battered women in criminal cases. In this case, her students worked with a lawyer from the Legal Aid Society. These lawyers were significantly aided by the advocates of the New York Asian Women's Center who perform both language and cultural translations. The New York Asian Women's Center is a community-based organization that works with a diverse group of Asian women in assisting them to deal with issues of intimate violence. For a more detailed analysis of the difference between individualism and collectivism, see Cushner & Landis, *Handbook of Intercultural Training*, note 11 *supra*, at 19.

17. Peter Margulies, *Re-framing Empathy in Clinical Legal Education*, 5 Clin. L. Rev. 605 (Spring 1999). Margulies also presented this case at the 1999 CUNY Conference, "Enriching Legal Education for the 21st Century, Integrating Immigrant Perspectives Throughout the Curriculum and Connecting With Immigrant Communities."

18. The classic fact finder, the judge, never saw the evidence. The adversary learned about the evidence not from the lawyer, but from the client, and the adversary, not the advocate, presented the evidence to the court.

19. See Jacobs, *People From the Footnotes*.

20. *Race, Bias & Power in Child Welfare*, Child Welfare Watch, Spring/Summer 1998, Number 3. Chi'd Welfare Watch is funded by the Child Welfare Fund and produced by City Limits Community Information Services, Inc.

21. The legal system's focus on the protection of individual rights and personal liberties reflects the essential and pervasive cultural value of individualism. The American values of free-market competition, decentralized and minimized government intervention, and laissez-faire economies are mirrored in the adversarial process. The American legal model, including the "rules of the game," fosters competition between largely autonomous and self-interested, zealous advocates in a winner-take-all scheme.

22. Because Habit 2 requires the exploration of multiple frames of reference, Jean came up with the rings as a way to assess the perspectives and analyze where there was overlap of all three perspectives and where there were differences. Not everyone comfortably uses the diagrams or thinks in the visual

ways that diagramming encourages. Habit 2 can be done with lists, filled-in Venn diagrams, or other imaginative ways that help the lawyer concretely examine the cultural differences and similarities that are involved in a case.

23. R. Brislin and T. Yoshida, *Intercultural Communication Training: An Introduction* (Sage Publications, 1994).

24. I do not know how the recommendation that we engage in active listening by identifying the emotional content of the client's communication works for clients from more indirect cultures. One might hypothesize that a client who would be reluctant to directly name the way she is feeling may feel uncomfortable with the lawyer giving feedback of the emotional content of the message.

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Information on "Never Married Parent" Cases

Adapted from a handout provided by Joan K. Raisner, Marriage & Family Counseling Service Mediator, Circuit Court of Cook County, Chicago, IL

Top Ten Reasons Why Never-Married Parents Come to Court

1. A child support case is initiated by a custodial parent or State's Attorney (public benefits cases)
2. Changes in prior, informal access to the child
3. Changes in attitudes and fears regarding an adult's capacity to parent
4. Changes in adult relationships:
    a. New partners
    b. Conflicts or rivalries
    c. Extended family realignments
    d. Death of a caregiver
5. Changes in the child's needs
    a. At infancy
    b. As the child starts school
    c. As the child reaches teenage years
6. Non-custodial parent seeks to re-enter a child's life
7. A child initiates changes
8. Grandparent visitation or third party custody
9. One parent is relocating out of the area
10. An incarcerated parent is released from prison or a parent is entering/leaving a rehabilitation program

Adapted from a handout provided by Joan K. Raisner, Marriage & Family Counseling Service Mediator, Circuit Court of Cook County, Chicago, IL

Possible Considerations for Never-Married Families

If a separate family unit was NOT established:

1. Did the parents have prior experiences in communicating, planning or making decisions together?
2. Did the child have contact with the non-custodial parent? Is the child adjusting to many other new relationships at the same time?
3. The child may be reluctant to give up "junior adult" status to a new parent figure
4. Family members and generational patterns may exert greater influence on the parents
5. The parents' information about each other may be very out-of-date

If a separate family unit WAS established:

1. Assume the parents ended the relationship for good reasons
2. The parents may now feel resentful of being forced by the court to continue the relationship
3. The parents may feel angry or suspicious of each other and the court
4. The parents may have had previous cooperation regarding parenting arrangements and some specific circumstances may have changed those arrangements
5. The child may react emotionally as if the separation is a divorce
6. Plans may need to include half-siblings and "step" relationships

Adapted from a handout provided by Joan K. Raisner, Marriage & Family Counseling Service Mediator, Circuit Court of Cook County, Chicago, IL

Cultural humility versus cultural competence: A critical distinction in defi...
Melanie Tervalon; Jann Murray-Garcia
Journal of Health Care for the Poor and Underserved; May 1998; 9, 2; Research Library
pg. 117

CULTURAL HUMILITY VERSUS CULTURAL COMPETENCE: A CRITICAL DISTINCTION IN DEFINING PHYSICIAN TRAINING OUTCOMES IN MULTICULTURAL EDUCATION

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Abstract: Researchers and program developers in medical education presently face the challenge of implementing and evaluating curricula that teach medical students and house staff how to effectively and respectfully deliver health care to the increasingly diverse populations of the United States. Inherent in this challenge is clearly defining educational and training outcomes consistent with this imperative. The traditional notion of competence in clinical training as a detached mastery of a theoretically finite body of knowledge may not be appropriate for this area of physician education. Cultural humility is proposed as a more suitable goal in multicultural medical education. Cultural humility incorporates a lifelong commitment to self-evaluation and self-critique, to redressing the power imbalances in the patient-physician dynamic, and to developing mutually beneficial and nonpaternalistic clinical and advocacy partnerships with communities on behalf of individuals and defined populations.

Key words: Medical education, minority populations, multicultural, racism, underserved populations.

The increasing cultural, racial, and ethnic diversity of the United States compels medical educators to train physicians who will skillfully and respectfully negotiate the implications of this diversity in their clinical practice. Simultaneously, increasing attention is being paid to nonfinancial barriers that operate at the level of the physician/patient dynamic. This dynamic is often compromised by various sociocultural mismatches between patients and providers, including providers' lack of knowledge regarding patients'

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health beliefs and life experiences, and providers' unintentional and intentional processes of racism, classism, homophobia, and sexism.[1-3]

Several recent national mandates calling for innovative approaches to multicultural training of physicians have emerged from various sources. The Pew Health Professions Commission, specifically seeking to give direction to health professions education for the twenty-first century, stated that "cultural sensitivity must be a part of the educational experiences that touches the life of every student."[4] The Institute of Medicine defines *optimal primary care* as including "an understanding of the cultural, nutritional and belief systems of patients and communities that may assist or hinder effective health care delivery."[5]

The necessity for multicultural medical education provides researchers and program developers with the challenge of defining and measuring training outcomes and proving that chosen instructional strategies do indeed produce these outcomes. However, in the laudable urgency to implement and evaluate programs that aim to produce cultural competence, one dimension to be avoided is the pitfall of narrowly defining competence in medical training and practice in its traditional sense: an easily demonstrable mastery of a finite body of knowledge, an endpoint evidenced largely by comparative quantitative assessments (i.e., MCATs, pre- and postexams, board certification exams).

Rather, cultural competence in clinical practice is best defined not by a discrete endpoint but as a commitment and active engagement in a lifelong process that individuals enter into on an ongoing basis with patients, communities, colleagues, and with themselves (L. Brown, MPH, Oakland health advocate, personal communication, March 18, 1994). This training outcome, perhaps better described as cultural humility versus cultural competence, actually dovetails several educational initiatives in U.S. physician workforce training as we approach the twenty-first century.[4-7] It is a process that requires humility as individuals continually engage in self-reflection and self-critique as lifelong learners and reflective practitioners.[1,2,7] It is a process that requires humility in how physicians bring into check the power imbalances that exist in the dynamics of physician-patient communication by using patient-focused interviewing and care.[8,9] And it is a process that requires humility to develop and maintain mutually respectful and dynamic partnerships with communities on behalf of individual patients and communities in the context of community-based clinical and advocacy training models.[4,6,7]

Self-reflection and the Lifelong Learner Model

Increasing trainees' knowledge of health beliefs and practices is critically important. For instance, the Cambodian child who comes in with the linear marks of "coining," a Southeast Asian healing practice, should not be mistaken for the victim of parental child abuse.

To be avoided, however, is the false sense of security in one's training evidenced by the following actual case from our experience: An African American nurse is caring for a middle-aged Latina woman several hours after the patient

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had undergone surgery. A Latino physician on a consult service approached the bedside and, noting the moaning patient, commented to the nurse that the patient appeared to be in a great deal of postoperative pain. The nurse summarily dismissed his perception, informing him that she took a course in nursing school in cross-cultural medicine and "knew" that Hispanic patients overexpress "the pain they are feeling." The Latino physician had a difficult time influencing the perspective of this nurse, who focused on her self-proclaimed cultural expertise.

This nurse's notion of her own expertise actually stereotyped the patient's experience, ignored clues (the moaning) to the patient's present reality, and disregarded the potential resource of a colleague who might (albeit not necessarily) be able to contribute some relevant cultural insight. The equating of cultural competence with simply having completed a past series of training sessions is an inadequate and potentially harmful model of professional development, as evidenced by this case.

In no way are we discounting the value of knowing as much as possible about the health care practices of the communities we serve. Rather, it is imperative that there be a simultaneous process of self-reflection (realistic and ongoing self-appraisal) and commitment to a lifelong learning process. In this way, trainees are ideally flexible and humble enough to let go of the false sense of security that stereotyping brings. They are flexible and humble enough to assess anew the cultural dimensions of the experiences of each patient. And finally, they are flexible and humble enough *to say that they do not know when they truly do not know* and to search for and access resources that might enhance immeasurably the care of the patient as well as their future clinical practice.

In a related manner, an isolated increase in knowledge without a consequent change in attitude and behavior is of questionable value. In fact, existing literature documenting a lack of cultural competence in clinical practice most reflects not a lack of knowledge but rather the need for a change in practitioners' self-awareness and a change in their attitudes toward diverse patients.[10-13] These data indicate that the prescription of clinical resources from prevention services to potentially life-saving procedures is often differential, dependent on the race or ethnicity of the patient. For example, a study in a university emergency department showed that Latinos were half as likely as white patients to receive analgesia for the same, usually very painful, long-bone fractures, regardless of the linguistic capability or insurance status of the patient.[10] A follow-up study in the same institution showed no difference in physicians' assessment of the level of pain experienced by white and Latino patients experiencing the same, isolated injury.[11] Another study showed that while African Americans are twice as likely to go blind from progressive ophthalmologic diseases such as glaucoma, they are half as likely to receive sight-saving procedures.[12] Such disturbing evidence[13] from the medical profession is a sobering reflection of the parallel reality and tragic costs of racism that persist in American society and that potentially influence every physician.

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Clearly, program developers and researchers cannot, in our cultural competency training, simply stimulate a detached, intellectual practice of describing "the other" in the tradition of descriptive medical anthropology. At the heart of this education process should be the provision of intellectual and practical leadership that engages physician trainees in an ongoing, courageous, and honest process of self-critique and self-awareness. Guiding trainees to identify and examine their own patterns of unintentional and intentional racism, classism, and homophobia is essential.[1,2,14]

One way to initiate such a constructive process is to have trainees think consciously about their own, often ill-defined and multidimensional cultural identities and backgrounds.[2] In leading trainees into this process of cultivating self-awareness and awareness of the perspectives of others, trainers and program planners have used the following pedagogical approaches with success: small-group discussions; personal journals; availability of constructive professional role models from cultural groups and from the trainee's groups; and videotaping and feedback, including directed introspection of residents' interactions with patients.[1-3,15,16] Recognition and respect for others' cultural priorities and practices is facilitated by such initial and ongoing processes that engender self-knowledge.

At the same time and by the same process of self-reflection, awakening trainees to the incredible position of power physicians potentially hold over all patients, particularly the poor, is critical.[2,9,17] Especially in the context of race, ethnicity, class, linguistic capability, and sexual orientation, physicians must be taught to repeatedly identify and remedy the inappropriate exploitation of this power imbalance in the establishment of treatment priorities and health promotion activities.

Again, humility, and not so much the discrete mastery traditionally implied by the static notion of competence, captures most accurately what researchers need to model and hold programs accountable for evaluating in trainees under the broad scope of multicultural training in medical education.

Patient-focused interviewing and care

Embodied in the physician who practices cultural humility is the patient-focused or language-focused interviewing process.[8,9,18,19] Studies of patient-physician communication have shown a strong bias on the part of physicians against patient-initiated questions and agendas, with physicians in one study initiating over 90 percent of the questions.[19,20] Another study[21] demonstrated that although poor and minority patients wanted as much information regarding their conditions as did other patients, they received less information regarding their conditions, less positive or reinforcing speech, and less talk overall.[9,21]

Patient-focused interviewing uses a less controlling, less authoritative style that signals to the patient that the practitioner values what the patient's agenda and perspectives are, both biomedical and nonbiomedical. With these

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communication skills, perhaps along with other specifically cross-cultural interaction techniques,[3,22,23] physicians potentially create an atmosphere that enables and does not obstruct the patient's telling of his or her own illness or wellness story. This eliminates the need for a complete mastery of every group's health beliefs and other concerns because the patient in the ideal scenario is encouraged to communicate how little or how much culture has to do with that particular clinical encounter.

For example, Ridley[14] describes the uniqueness of a patient by detailing the patient's "conjoint membership in eight cultural roles:" as a Mexican American, male, father, husband, Catholic, mechanic, night-school student, and resident of East Los Angeles. Only the patient is uniquely qualified to help the physician understand the intersection of race, ethnicity, religion, class, and so on in forming his (the patient's) identity and to clarify the relevance and impact of this intersection on the present illness or wellness experience. Relevant and effective prevention, health promotion, and therapeutic strategies can then be developed that take into account the patient's life priorities, health beliefs, and life stressors. Humility is a prerequisite in this process, as the physician relinquishes the role of *expert* to the patient, becoming the *student* of the patient with a conviction and explicit expression of the patient's potential to be a capable and full partner in the therapeutic alliance.

Community-based care and advocacy

There is increasing consensus that a substantial portion of physicians' clinical training needs to occur in community sites.[4,6,24-26] It is argued that training needs to happen in arenas where most physicians will eventually practice, away from the university-based, largely tertiary medical center. Part of this training directive includes a population-based approach to health promotion and disease prevention that works toward the optimal health of communities; that is, health in its broadest sense of physical, mental, and social well-being. Evans[24] states that "surely a small part of each physician's responsibility should extend beyond the care of individual patients to the advocacy for changes in the community's policies and practices that influence determinants of health, causes of disease, and the effectiveness of health services."

Competency in advocacy is actually mandated by the American Academy of Pediatrics as a skill to be acquired during pediatric residency. This professional skill is to be taught by way of "structured educational experiences that prepare residents for their future role as advocates for the health of all children . . . with particular attention to underserved populations."[6]

It is hoped that community-based care and advocacy training would go beyond working with community physicians and even beyond training in legislative advocacy to include systematically and methodically immersing trainees in mutually beneficial, nonpaternalistic, and respectful working relationships with community members and organizations. Experiencing with the community the factors at play in defining health priorities, research

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activities, and community-informed advocacy activities requires that the physician trainee recognize that foci of expertise with regard to health can indeed reside outside of the academic medical center and even outside of the practice of Western medicine. Competence, thus, again becomes best illustrated by humility, as physician trainees learn to identify, believe in, and build on the assets and adaptive strengths of communities and their often disenfranchised members. Requiring ongoing self-reflection and a parallel notion of patient-(community-) focused interactions, the possibility then exists for planning, practice, and advocacy in community health work in which physicians and physician trainees are both effective students of and partners with the community.

Institutional consistency

The same processes expected to affect change in physician trainees should simultaneously exist in the institutions whose agenda is to develop cultural competence through educational programs. Self-reflection and self-critique at the institutional level is required, encompassing honest, thorough, and ongoing responses to the following questions: What is the demographic profile of the faculty? Is the faculty composition inclusive of members from diverse cultural, racial, ethnic, and sexual orientation backgrounds? Are faculty members required to undergo multicultural training as are the youngest students of the profession? Does the institutional ethos support inclusion and respectful, substantive discussions of the clinical implications of difference? What institutional processes contradict or obstruct the lessons taught and learned in a multicultural curriculum (i.e., if it is taught that practitioners should not use children or other family members as translators, does the institution provide an accessible alternative?)? What is the history of the health care institution with the surrounding community? And what present model of relationship between the institution and the community is seen by trainees?

Time-limited and explicit educational goals are one dimension of demonstrated institutional cultural competence. For instance, developing a written plan of faculty recruitment and/or curricular development to be in place by a designated date could be a point to which the community and/or other external entities hold the institution publicly accountable with regard to issues of race, ethnicity, language, culture, sexual orientation, and class in health care.

Summary of the challenge to medical education researchers

The emphasis on demonstration of process as opposed to endpoint is not meant to imply that training outcomes in cultural competence programs cannot be measured or monitored. Capturing the characteristic of cultural humility in individuals and institutions is possible, especially with mixed methodologies that use qualitative methods (including participant observation, key informant interviews, trainees' journals, and mechanisms for com-

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munity feedback)[27-30] and action research models[31,32] to complement traditional quantitative assessments (pre- and postknowledge tests, patient and trainee surveys)[27-30] of program effectiveness. A potentially valuable measure is the documentation of an active, ongoing institutional process that includes training, established recruitment and retention processes, identifiable and funded personnel to facilitate the meeting of program goals, and dynamic feedback loops between the institution and its employees and between the institution and patients and/or other members from the surrounding community.

This is not to say that the measurement of individuals' or institutions' cultural competence is a well-developed area of research. Witness this present discussion on defining training outcomes. Indeed, the definition and measurement of program effectiveness in producing cultural competence is a relatively new arena of inquiry in need of careful and attentive intellectual leadership. Nonetheless, acknowledging the necessity for creativity in a program's development and evaluation stages will help avoid the pitfall of adopting the status quo in documenting clinical competence.

Conclusion

In this critically important dialogue of defining training outcomes, it is proposed that the notion of cultural humility be distinguished from that of cultural competence. Cultural humility incorporates a lifelong commitment to self-evaluation and critique, to redressing the power imbalances in the physician-patient dynamic, and to developing mutually beneficial and non-paternalistic partnerships with communities on behalf of individuals and defined populations.

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