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## Transracial Adoption: Families Identify Issues and Needed Support Services

*Maria Vidal de Haymes and Shirley Simon*

The gap between the number of children of color in care and the recruitment of minority foster and adoptive homes has triggered growing support for transracial adoption, culminating in the Multi-Ethnic Placement Act (MEPA) and the Interethnic Adoption Provisions (IEP) legislation. Although MEPA and IEP focus on eliminating barriers to transracial placements, they do not address support for families that choose to adopt transracially. A lack of professional literature exists in this area. This study explores a number of trans-racial placements and adoptions, with the goal of identifying, from the perspective of the families interviewed, potential services that would enhance such placements and adoptions.

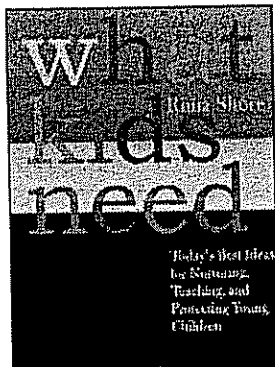
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# A Culturally Responsive Practice Model for Urban Indian Child Welfare Services

*Robert Mindell, Maria Vidal de Haymes,  
and Dale Francisco*

This article describes collaboration among a university, a state child welfare agency, and a Native American community organization to develop a culturally driven practice model for urban, Native American child welfare. The approach includes a strategy to build resources to serve Native American clients, a training program for child welfare and court personnel using a culturally responsive curriculum, and an advocacy program that monitors for Indian Child Welfare Act compliance and provides assistance to child welfare workers and the court. The discussion identifies challenges and opportunities in addressing the needs of urban Native American communities. The article concludes with principles for culturally responsive practice for urban Native American child welfare practice.

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## Overrepresentation of Native American Children in the Child Welfare System and the Indian Child Welfare Act

When Congress enacted the Indian Child Welfare Act (ICWA) in 1978, expectations were that it would usher in an era of federally mandated good practice in providing child welfare services to Native American children and families throughout the country. Congress passed ICWA after years of strenuous advocacy by tribes and Native American child welfare advocates, who presented a disturbing picture of social work practices and government policies that resulted in the removal of great numbers of Indian children from their families and tribes and their adoption into non-Native families.

Prior to passing ICWA, Congress heard expert testimony about the devastating effect of the loss of children to tribes over generations (in many cases, threatening the cultural and political survival of tribes) and on the lives of individual Native children who grew up cut off from their cultures. In states with large Native American populations, as many as 35% of Native American experienced out-of-home placement or adoption prior to 1978, a rate much higher than that of any other ethnic or racial group (*House Report, 1978*). In one state, 97.5% of Native children placed for adoption were placed with non-Native families (*House Report, 1978*). Congress also heard testimony on the difficult adjustment of Native Americans raised outside their tribal culture, and their profound sense of alienation from Native and non-Native societies, of ethnic confusion, and of abandonment and loss (*ICWA, 1977*).

At the heart of this widespread system of bad practice were a lack of cultural responsiveness to Native American people and a long legacy of misguided federal and state Native American policy. In testifying before Congress, Calvin Isaac, Tribal Chief of the Mississippi Band of Choctaw Indians, spoke directly to the pervasive lack of cultural competency of non-Native child welfare systems:

One of the most serious failings of the present system is that Indian children are removed from the custody of their natural parents by non-tribal governmental authorities who have no basis for intelligently evaluating the cultural and social premises underlying Indian home life and child rearing. Many of the individuals who decide the fate of our children are at best ignorant of our cultural values and at worst contemptful of the Indian way and convinced that removal to a non-Indian household or institution can only benefit an Indian child. (*Hearings on S. 1214, 1978, pp. 191-192*)

ICWA established minimum federal standards for child custody proceedings involving Native American children who are enrolled or eligible for enrollment in a federally recognized tribe and a procedural baseline for public and private child welfare agencies on how Native child cases should be handled. Inherent in the law are a few specific provisions that address cultural competency issues, most notably, the provision requiring qualified expert witness testimony in state court proceedings before out-of-home placement or termination of parental rights can be ordered. In very limited ways, ICWA provisions that uphold the jurisdiction of tribal courts, the right of tribes to intervene in state court proceedings and set placement preferences, and the imposition of higher evidentiary standards for removing Native children may indirectly promote more cultural responsiveness in practice. ICWA did not bring about a revolution in culturally competent practice in Native child welfare cases, however, and most systems are still struggling with basic compliance with the law on a case-by-case basis. A discussion of the limitations of ICWA is beyond the scope of this article, but the lack of specific enforcement provisions and penalties within the statute (unlike the serious penalties for noncompliance contained in the Adoption and Safe Families Act or the Multi-Ethnic Placement Act) has not compelled most states to rigorously comply with ICWA or to establish culturally responsive programs.

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## Child Welfare and Urban Indian Communities: The Illinois Context

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### *Illinois's Native American Population*

The steadily increasing rates of urbanization and intermarriage of Native American people since the federal relocation program of the 1950s are significant factors in the discussion of developing and maintaining cultural competence within state child welfare programs. Based on the 2000 federal census, an estimated 80% of all Indians now live in off-reservation, mostly urban settings.

In the 2000 Census in Illinois, which has no tribes within its borders, approximately 73,000 people claimed some degree of Native ancestry, 42,000 declared themselves Native-biracial, and 31,000 declared themselves solely Native American (U.S. Bureau of the Census, 2000b). Approximately 136 of the 557 federally recognized tribes are represented within the Native American population in Illinois. Although there has always been a Native American presence in Illinois, the Native American land base was dissolved through treaty long ago. A major force in shaping the contemporary Native American community in Illinois was the federal relocation program of the 1950s and 1960s, in which Chicago was one of five major relocation sites (Arndt, 1998).

The relocation program has had a significant effect on Illinois' Native American community. By removing large numbers of people from sites where federally funded Indian social services were available and placing them where neither the federal nor state government had any legal obligation to provide comparable services close by, and because tribal affiliation is more easily questioned and overlooked off the reservation, the challenges faced by indigenous people were compounded in the urban setting. This situation has had a lasting, damaging effect on the availability of appropriate social services for Native American families in Illinois. To date, Illinois has no Indian land base, court, or a tribal-state agreement. Furthermore, Illinois has only

one specific health care agency in the entire state to serve the Native American/Alaska Native population, and that one agency has never received state funding or assistance for specific Native health issues (Illinois HR 204, 1999).

The 2000 Census indicates that 31,006 individuals claiming exclusive Native American ancestry reside in Illinois, and of these individuals, 21,555, or 79%, reside in the Chicago metropolitan area (U.S. Bureau of the Census, 2000a). On a national level, Chicago also represents a significant population center for Native Americans. Chicago has the eighth-largest concentration of Native Americans residing in U.S. urban centers (U.S. Bureau of the Census, 2002). The Chicago Native American community is tremendously diverse. In Chicago, more than 100 of the 557 federally recognized tribes are represented (Wagner, 1998). The high degree of tribal and racial diversity presents great difficulty to non-Native child welfare practitioners in identifying Native children (who may appear to be white, African American, or Latino), in dealing with the myriad tribal cultures and governments outside the state, and even in recognizing and conceptualizing urban Indians as Indians. The problems that stem from the stereotyping of traditional, reservation-based Native Americans seem simple compared with those that stem from the common inability of non-Natives to recognize, conceptualize, and understand multiracial urban Indians living in the same town as themselves.

### *Child Welfare Services in Illinois*

The Illinois child welfare system is often viewed locally as a monolithic entity, but in reality, it is a complex system of interconnected organizations: the Illinois Department of Children and Family Services (DCFS), numerous private child welfare agencies across the state (which care for 80% of children in substitute care), and 102 independent county juvenile courts. Within the larger courts are semiautonomous legal offices, for example, the public defender, the guardian ad litem, the state attorney, and judges' offices, which establish their own policies, procedures, and staff

training. (In neighboring states that have county-based child welfare systems, an additional level of complexity exists: Child welfare services are administered through independent county agencies, which may be required to follow state guidelines but which, in the absence of strict state enforcement, tend to do things their own way.) A simple axiom fits Illinois and probably all child welfare systems, each in its own way: The administrative complexity of systems presents a major obstacle to developing effective Native American child welfare services and complying with ICWA. Administrative complexity, for instance, makes it very difficult to adequately train all child welfare and legal practitioners in the same system to even a minimum common standard of knowledge and practice in dealing with Native child welfare cases.

After enactment of ICWA in 1978, Illinois did little to implement the new law, and DCFS did not establish written policies, rules, and procedures to implement it until late 1982. The absence of tribal governments within the state, and the fact that the Native population in Illinois was tribally and racially diverse, urban, and not politically organized or highly visible, made it easy for all components of the child welfare system to ignore ICWA between 1978 and 1997 without any direct consequences. During this period, no sustained programmatic efforts existed to implement ICWA within DCFS. Most courts and private child welfare agencies ignored it, and they removed and adopted out a significant number of Native children without regard to the federal law. It is worth noting that in a survey of training needs conducted in 1997, more than half of public and private child welfare agency workers had never heard of ICWA, and the majority of those who had heard of it had no knowledge of its provisions.

One could describe this situation simply as neglect or insensitivity on the part of state and local government, but the 1980s and 1990s were periods of crushing demand on the Illinois system as a whole, as tens of thousands of children came into care. The absence of effective advocacy from the community for the

implementation of ICWA and Native American services also played an important role in allowing Illinois child welfare institutions to ignore ICWA. During the 1980s, individual Native Americans and one Native program in Chicago, St. Augustine's Center, tried to advocate for Native children and families and were sometimes successful in individual cases, but they were never able to exert enough pressure to bring about greater compliance with the law.

In the absence of government initiative and compelling community advocacy in implementing ICWA, several notable factors influenced delivery of Native American child welfare services in Illinois. First is cultural insensitivity, often in the form of invisibility. Although the races and ethnicities of other children entering care are usually noted, or at least noticed, serious problem exists with identification of Native American children. Their status as Native American is frequently overlooked or mistaken. Often a child is identified by surname or color of skin. Given the history of Native Americans, many have Spanish surnames and, because of the urban (off-reservation) context, many people make interracial and intertribal marriages or are not registered with a tribe. This misidentification results in interventions that are not culturally responsive, nor are they in compliance ICWA.

Often, a child's Native American identity is "discovered" some time after a case has been opened and considerable planning and movement have already occurred. The child may already have been placed in a non-Native home and developed a relationship with the family. Once the Native American identity of the child becomes known, the case comes to a halt, as child welfare workers and courts attempt to address the error. In Illinois, this often takes a long time, because caseworkers and court personnel generally are not knowledgeable about ICWA court procedures or how to interact with tribes.

Another challenge lies in the lack of resources available to urban Indians. In Illinois, the Native American Foster Parent Association (NAFPA) and St. Augustine's Center in Chicago are the

only organizations in the state proving services for and advocating in behalf of Native American children and families involved with the child welfare system. The geographic distance of the tribes and the lack of tribal court resources to intervene pose serious problems. In the absence of a tribal reservation, government-recognized Native organization, tribal-state agreement, tribal colleges, Native state commission, ICWA courts, ICWA specialty units, or tribal social services, federal Title IV-E funding cannot be directly secured. The lack of government resources and access to funding have also limited the development of community resources in the area, such as indigenous healers, licensed Native American therapists, and other community-based Native organizations. This is the case in Illinois. It also appears to be a general problem in urban Native communities that are geographically distant from land bases. Very few resources exist for Native child welfare east of the Mississippi River. Consequently, Midwestern states are often overlooked, underfunded, and grossly negligent in complying with ICWA provisions.

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### **A State, University, and Community Collaboration in Illinois to Provide Culturally Responsive Services**

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#### *Collaborative Capacity Building*

In 1996, after contact by a group of Native Americans in Chicago who were in the process of becoming licensed foster parents and organizing informally as a Native child welfare advocacy group, the Illinois DCFS turned its attention to Native child welfare issues. The advocacy group members had initially attempted to interest existing Chicago Native organizations in developing an active child welfare program combining advocacy and direct service but could not generate sufficient interest.

As the group members became licensed foster parents and recruited a few others in the community, they began to see themselves as a force for change. As people who had direct experience with substitute care (several had been raised in foster care or

Native boarding schools) and with relocation, they understood the issues of urban Native Americans. As licensed foster parents, they began to see themselves (and felt they should be recognized) as stakeholders in the Illinois child welfare system and as having more knowledge and understanding of that system than the system had of the Native community.

In the initial meetings of the foster parent group and DCFS, participants reviewed areas of community concern (lack of Native foster care, lack of knowledge by DCFS and private agency staff about ICWA, and general noncompliance with ICWA) and principles for future collaboration. It was important to the foster parents that they be treated as equal partners and stakeholders and, in future endeavors such as jointly developing appropriate training for child welfare staff, that Native people be directly involved in planning and delivering any training and that it not be done in their behalf by the state. The foster parent group and DCFS agreed to collaboratively develop training and linkage and referral services for child welfare staff, recruitment of Native foster homes, and tribal enrollment services for Native children entering or already in care. In spring 1997, the foster parent group legally incorporated as NAFFA. They chose contracting with a community organization for these services over developing resources internal to DCFS. They chose this strategy because of its community development features and benefits that could be derived through the creation of anchor institutions in the community.

#### *Curriculum Development and Training*

Researchers have surveyed Illinois's public and private child welfare workers several times in the past five years to assess their knowledge of ICWA and its practice implications (Mindell, 1997; Vidal de Haymes, 2000). These studies revealed that child welfare workers had little knowledge of ICWA and knew even less about its application. These findings, along with numerous practice anecdotes, clearly indicate a need for a comprehensive professional training program.

In October 1999, Loyola University Chicago School of Social Work received a three-year grant from the U.S. Department of Health and Human Services' Children's Bureau to develop and implement such a training program. Under the grant, Loyola University collaborated with the Illinois DCFS and NAFFA to develop, execute, and evaluate a competency-based training curriculum to assist child welfare agency staff, court personnel, and social work students in acquiring the cultural competence needed to work with urban, Native American children and families. From its inception, the project involved a strong collaboration between Loyola, NAFFA, and DCFS, each bringing their particular expertise, resources, relationships, and points of view to the work.

In the initial stages of curriculum development, the researchers conducted phone interviews with 50 public and private child welfare professionals to identify critical content areas and assess their current knowledge and training needs regarding ICWA. They designed the survey sampling scheme to include a broad representation of child welfare professionals, such as caseworkers, supervisors, protective service workers, administrative case reviewers, attorneys, and court officials.

The three partners hosted and cofacilitated a series of focus groups to identify, from the perspective of Chicago Native American elders, community leaders, foster parents, advocates, and adults who had been in out-of-home care or adopted, what they felt child welfare professionals needed to know to better serve their communities. In addition, the partners conducted a comprehensive review of relevant professional literature and other Native American-focused child welfare training materials. Information gained from these three efforts—interviews, focus groups, and literature reviews—formed the basis for the initial curriculum content development and organization.

Over the subsequent year, the partners drafted training curriculum and revised it numerous times with input from all three groups, community leaders, consultants, and experts in Native

American child welfare. They field-tested and evaluated the training curricula for its effectiveness during a two-day evaluation retreat with 40 child welfare professionals drawn from public and private agencies as well as the courts. The evaluation activities included a separate assessment of the curriculum materials and organization by the trainers, who considered its merits and limitations from their perspective. These evaluation activities informed the final revision of the curriculum materials and training format.

In its final version, the curriculum had four interrelated modules. The first module presents a historical review of the relationship between the U.S. government and Native American tribes. The second module provides an overview of Native American cultural values and practices. The third focuses on ICWA, detailing the specific provisions of the act and its proper implementation. The fourth module presents practice competencies for culturally responsive, strengths-based social work practice with urban Native American children and families. This module also addresses numerous social and psychological issues that are specific to urban Native American communities.

All four modules provide a lengthy discussion with trainer's notes, a bibliography, handouts, several case vignettes, exercises, and a pre/post knowledge test. In addition, the designers developed a presentation for each module. They enhanced both the print and electronic curriculum materials with the original artwork of several local Native American artists and graphic designers commissioned specifically for this project. In addition, support for curriculum model later expanded with the development of a training video, a Web page, and several resource documents. These included an ICWA sourcebook for legal professionals, a parent handbook, a directory and resource guide of Native American organizations and websites, an annotated bibliography of relevant professional literature, and several other items. These components provide a flexible, interactive, multimedia platform for training, as well as a way to evaluate mastery of the material presented.

Given the great training needs in Illinois, it was clear a state-wide training program required a number of individuals to be effectively implemented. In addition to developing the training materials, workers committed resources to the identification and preparation of a cadre of trainers. They recruited individuals with a history of leadership, advocacy, and service in the Chicago Native American community. Although each of these individuals brought extensive knowledge of Native American culture and history to the team, they possessed varied levels of familiarity with ICWA and the field of child welfare, as well as little or no formal training as trainers. The partners gave them a formal course for the preparation of trainers offered by DCFS to certify trainers. Loyola University conducted further training specific to the ICWA curriculum. In addition, project trainers paired with seasoned trainers from the Division of Training and Staff Development of DCFS.

Once reviewed and adopted by DCFS, the trainers widely offered the curriculum across the state in a series of training forums using the project and DCFS team trainer approach. In addition, Loyola University School of Social work adopted the curriculum as a graduate course. The curriculum was further disseminated through community forums, distribution of manuals and the ICWA source book for legal professionals to juvenile court offices, and the project Web page.

### *Indian Child Welfare Advocacy*

The Native American Advocacy Program (NAAP) was an alternative to creating a foster care program by NAFFA. The organization had intended to develop Native American foster care in Illinois as a licensed, accredited program that would at last provide culturally competent substitute care for all Native children in Illinois who needed it. For two years, the organization worked toward this goal with consultation from the Child Welfare League of America.

As it reviewed the operation of other foster care programs, including Native programs in other states, and considering the needs of communities statewide, in 1999, NAFFA decided that it would not proceed with a foster care model for a number of reasons. Because of licensing regulations, it would not be able to use foster parents who were in board, advisory board, or staff positions. It was a new organization, with only a few years of operating experience, and without cash reserves or an efficient fundraising program; its members collectively had years of community experience, but no clinical experience or training. Although it had Native homes to offer, NAFFA did not feel it could necessarily do a better job of managing foster care than other programs. To be effective, it would have to serve all the Native children already in care, most of whom were already in placement with other agencies, some in non-Native homes where they had been placed for some time. Moving them to a new agency could be unnecessarily disruptive for them. Perhaps most important, NAFFA came to believe that, as a foster care provider, it would then become too much a part of the foster care establishment and might take a vested interest in maintaining children in care, becoming in the process, a creature of the state. NAFFA wanted to assist DCFS with ICWA compliance and provide direct services that did not weaken or compromise its advocacy position in the community.

NAAP\* was a program that could be implemented immediately to improve existing services and ensure ICWA compliance for every child, no matter where they were in the system. Trained bachelor's level advocates (there was a provision to hire nondegreed advocates willing to accept a scholarship and return to school) would be hired from the community, intensively trained as child welfare specialists, and clinically supervised by a licensed clinical social worker (LCSW). They would be assigned to exist-

\* Joanne Smith, LCSW, designed and implemented the Native American Advocacy Program. She proposed the concept of a licensed, clinically supervised Native child and family advocacy program, and she directed the program from July 2000 to June 2001.

ing cases that already had an assigned public or private agency case manager. The advocate would both assess the case for ICWA compliance and service provision and provide technical assistance and support to the non-Native caseworker or agency.

The program was to provide benefits directly to children and families and to the child welfare system as a whole. Workers would:

- "track cases from the beginning of the investigation to case closure to insure compliance with federal policies and procedures and to support caseworkers in providing culturally competent casework to Native American children and their families.
- gather information on tribes that the children and families are affiliated with and develop relationships with the tribal communities.
- implement traditional values, beliefs, traditions, and rituals into the everyday life of the child by incorporating these into the service plan and monitoring that this takes place.
- mentor children and families on traditional values, beliefs, traditions and rituals of their tribe.
- coordinate connections with the identified tribe for the child, family, and case manager and facilitate tribal reunification of children and families.
- attend Local Area Network (LAN) service planning meetings and identify community supports and programs for children.
- identify and document gaps in service.
- act as a resource to the Juvenile Court, assisting the Court on tribal enrollment and notification issues, service provision, and cultural competency." (Smith, 1999, pp. 1-3)

The advocacy program implemented a new model of working with Native American families. The model was culturally competent, individualized, and strengths-based. The model used a team approach and wraparound process, connecting families with

supports through a child and family team. This process incorporated informal supports, such as extended families, friends, elders, culture, and spirituality in a healing process.

The advocates were supervised by an LCSW and were extensively trained on ICWA, child welfare case planning and management, and DCFS and juvenile court procedure. The model allowed for the hiring of advocates who already had a four-year degree and those who had less formal education but had community experience and cultural knowledge. Given the lack of formally trained Native American social workers in Chicago and, more generally, in the field of child welfare, NAAP encouraged all advocates to make use of a state-funded Native American child welfare scholarship program to return to school for formal social work education. The goal was to provide more clinically trained Native people as resources for the community and the state child welfare system.

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## Discussion

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As the initiatives to create culturally responsive and effective services went forward into the Native American community in Illinois, guiding principles emerged at every stage of the work. These principles were applicable to all three programmatic components and served to unify them. The key principles were:

- **Accessibility/Flexibility.** Training and resources for staff should be designed comprehensively to be accessible from all components of the child welfare system, including the courts, and all geographic areas of the state, including remote field offices, to provide a common practice reference for all individuals working in the system.
- **Community Empowerment and Participation.** Community advocates and organizations should not merely be consulted in the development of initiatives, but engaged as full and equal stakeholders at every stage.

- **Recognition of Urban Indian Culture and History.** The unique characteristics and conditions of the urban Indian experience must be recognized and addressed in developing initiatives with Native Americans residing off reservations.
- **Bridge the Gap Between Legal and Social Work Practice in Indian Child Welfare.** Efforts should be made to create common training and resources that coordinate and benefit both halves of the child welfare system.
- **Use the Benefits of University, Community, and Child Welfare System Partnerships.** Unique and long-lasting benefits can be derived and institutionalized by including universities in the dyad of child welfare–community partnerships. The three types of organizations offer unique points of view, expertise, resources, and relationships in collaborative efforts. ♦

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