

Sub-Saharan African Immigrant Parents and Child Protection in the United States: Considerations for the U.S. Child Welfare System

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Abstract

The sub-Saharan African (SSA) immigrant population in the United States has continued to grow since the 1970s. Despite SSA immigrant families facing elevated risks of becoming involved with U.S. child welfare systems due to their intersectional identities as Blacks, immigrants, and predominant low-income status, there is limited research focused on how this population understands the child welfare system in the United States. This qualitative study sought to bridge this gap by gaining insight into the dynamics between SSA immigrant parents and U.S. child welfare systems. Using purposive and snowball sampling techniques, 15 SSA immigrant parents in Delaware and Pennsylvania were recruited for this study. Two major themes emerged from the interview data: risk factors and protective factors. Eleven subthemes emerged within the two major themes. The study highlights perspectives of SSA immigrant parents on the U.S. child welfare system. These perspectives provide important considerations for the U.S. child welfare system.

Keywords: sub-Saharan Africans, immigrants, child welfare, risk factors, protective factors

Introduction

The sub-Saharan African (SSA) immigrant population has continued to grow in the United States at a steady rate. According to the U.S. Census Bureau (2014), the number of foreign-born Africans in the United States grew rapidly within a 40-year span (1970 to 2008-2012), from about 80,000 in 1970 to about 1.6 million between 2008 and 2012. The SSA foreign-born population particularly saw a significant jump—from 130,000 to 1.5 million—between 1980 and 2013, including a significant 13% increase from 1.3 million to 1.5 million between 2010 and 2013 alone (Zong & Batalova, 2017). Echeverria-Estrada and Batalova (2019) found that there were a little over 2 million immigrants from sub-Saharan

Africa in the United States as of 2018. Though the SSA population constituted a small fraction (4.5%) of the 44.7 million immigrant population in the United States as of 2018, its increase of 52% between 2010 and 2018 far outpaced the 12% growth rate for all immigrants in the United States during the same period (Echeverria-Estrada & Batalova, 2019). For the purposes of this research, and based on the U.S. Census Bureau's 2010 data, sub-Saharan Africa encompasses all African countries except for Algeria, Egypt, Libya, Morocco, Sudan, and Tunisia.

Zong et al. (2019) estimated that 18.2 million children, or 26% of the 70 million children in the United States, live with at least one immigrant parent. In recent years, child welfare agencies and juvenile courts have become increasingly involved with immigrant families. Traditional reasons like child abuse or neglect, as well as the recent spike in unaccompanied minors and deportation of parents, have

significantly contributed to the rates of involvement of immigrant parents and their children with the child welfare system in the United States (Finno-Velasquez & Dettlaff, 2018).

Studies have found various factors that impact immigrant populations' relationships and interactions with the child welfare system in the United States. In their groundbreaking Third National Incidence Study of Child Abuse and Neglect (NIS-3) study, Sedlak and Broadhurst (1996) found that families earning less than \$15,000 per year were 22 times more likely to experience child maltreatment than those with higher incomes. Stokes and Schmidt (2011) added that immigrants, especially those who are newcomers, are less likely to find high-paying jobs, which can elevate child maltreatment risk levels for those families. Dettlaff and Earner (2012) also found that immigrant families have a higher chance of living below the federal poverty level than their American counterparts, with more than half of immigrant children living in poverty.

Studies have found an association between parental stress and increased propensity for child abuse and neglect (e.g., Dettlaff & Earner, 2012; Rasmussen et al., 2012). Dettlaff and Earner (2012) noted that migrating from one country to another can be stressful and traumatic, and that factors including culture shock and adaptation to a new environment can create anxiety that can affect the relationship between immigrant parents and their children. Specifically regarding culture shock, Critelli (2015), for example, argued that the difference in cultural norms and child-rearing practices, coupled with immigrant parents' lack of understanding of their rights and responsibilities within the U.S. framework of child welfare laws and policies, play a significant role in real or suspected incidence of child abuse and neglect. Also, Rasmussen et al. (2012) established that SSA immigrant families have a higher chance of getting involved with the child welfare system because of differences in cultural practices, citing most West African cultures' use of corporal punishment as an example.

Lack of social support networks is another factor that has contributed to the incidence and prevalence of child abuse and neglect among immigrant families. Rasmussen et al. (2012) noted that the feeling of an unsecured environment, along with the challenges associated with finding a job without reliable supports, can negatively affect immigrant parents' parenting responsibilities. Mugadza et al. (2019) also found that some immigrant parents in Australia bemoaned the struggles that come with the lack of extended family supports to help them (immigrant families) go about finding economic opportunities.

Little evidence exists on factors that prevent SSA immigrants from becoming involved with the U.S. child welfare system. Two common protective factors that are repeatedly mentioned in the literature are social support and adaptation to the host country's child welfare practices. These two protective factors apply to the overall immigrant population, as opposed to just SSA immigrant families. Immigrant families who adapt to their new country's child-rearing practices have been found to have lower risk of becoming involved with the child welfare system in the new country. Cheah et al. (2013), for example, found that many newly arrived Chinese immigrant parents in the United States become more flexible and less restrictive in their parenting, as they come to understand that parenting laws in the United States differ from those in China. Focusing on African immigrant parents, Alaazi et al. (2018) noted that African immigrant families use a hybrid of African and Western disciplinary practice, a forced but deliberate blend of traditional African and Western child disciplinary practices, to raise their children.

Research has found the availability and utilization of social supports to be an important factor in preventing families from being involved in the child welfare system. While this is not widely studied in African immigrant parents, one study by Bailey et al. (2015) found that in Latinx families, particularly those who are Spanish speaking, social support from neighbors, friends, and members of the

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community was an important factor in preventing child abuse. Expanding beyond immediate social support, the study also showed that involvement in the community via schools and churches was also protective (Bailey et al., 2015).

As the preceding review of the literature portrays, SSA immigrants are at increased risk for becoming entangled with the child welfare system in the United States due to intersectional and other factors. Though some existing studies have found factors such as poverty, racial discrimination, lack of informal and formal supports, and worker bias as contributing to the overrepresentation of Black children, including those from SSA immigrant families, in the U.S. child welfare system (e.g., Cénat et al., 2021; Chibnall et al., 2003; Child Welfare Information Gateway, 2016; Dettlaff et al., 2020), a very limited number of these extant studies focused on immigrants of SSA descent (e.g., Mugadza et al., 2019; Rasmussen et al., 2012). There is the need for more SSA immigrant-specific studies to increase our understanding of the dynamics between SSA immigrant families and the U.S. child welfare system, and this study addresses some of these dynamics.

Methodology

The purpose of this study was to explore SSA immigrant parents' perspectives on the child welfare system in the United States. Approval for the study was obtained from West Chester University Institutional Review Board (IRB). Included in the IRB application was a recruitment letter, recruitment flyer, and online screening survey to determine study eligibility. Once eligibility was established, participants were invited for a qualitative, 12-question interview.

Participants for this study were recruited in Pennsylvania and Delaware. The study included SSA immigrant parents over the age of 18 who previously raised or were currently raising children in the United States. Participants were offered a \$20 Amazon gift card for participating in the study.

Purposive sampling and snowball sampling were used to recruit participants for this study. Study invitation materials were distributed using a recruitment letter and flyer sent via email to community and civic organizations catering to specific needs for immigrants from sub-Saharan Africa. These organizations were selected due to contacts various study team members had with individuals from these agencies. Members of the study team approached individuals in their networks who met the eligibility criteria for the study. Additionally, participants who completed the study were asked if they knew anyone who would qualify for the study and were provided with study materials to distribute to those who would be eligible.

Based on the purpose of the study, the study team developed a semi-structured interview guide containing qualitative questions to conduct the interviews. The interview guide asked questions on knowledge of a child welfare system in the United States and in the participant's home country, awareness of child welfare policies and laws in the United States and their home country, thoughts on how child welfare laws and policies in the United States affect SSA immigrant parents, perceptions of why children enter the U.S. child welfare system, factors that contribute to entering the U.S. child welfare system, steps to prevent the participant's child/children from entering the U.S. child welfare system, community resources available to prevent children from entering the U.S. child welfare system, similarities and differences in the child welfare system in the United States and home country, and recommendations for improvement of the U.S. child welfare system.

Descriptive statistics for the study sample were obtained using an online screening survey that was used to determine study eligibility. Data collected included age, gender, country of origin, marital status, overall household size, employment status, and number of children. Informed consent forms were emailed to eligible participants, and signed consent forms were returned to the investigators before the interview.

All interview sessions were conducted over the Zoom platform with audio recording only and stored in a password-protected file. Interviews were 45-90 minutes in length, and interviewers transcribed them using transcription software before the study team verified them. Verified transcripts were imported to Dedoose version 8.3.43 for qualitative data analysis. In the first-order thematic step, the two interviewers each reviewed their transcripts, highlighted relevant statements, and coded the statements. In the second-order thematic step, the interviewers reviewed the codes together and clustered them into themes. This step also involved consolidating redundant codes from the first step and ensuring reliability of the coding for all transcripts. During the overall synthesis phase, various themes were categorized into risk factors and protective factors. Following the overall synthesis process, overall themes for risk and protective factors were selected based on the number of times they appeared in the data along with poignant quotes to represent each theme.

Results

Seventeen eligible participants were recruited for this study. Of that, 15 (88%) eventually participated in interviews. Seven (46%) participants identified as females, and the other eight (53%) identified as males. Geographically, a significant proportion of the participants (12) resided in Pennsylvania, with the remaining three living in Delaware. The participants originally migrated from across six SSA countries, including Ghana, Kenya, Nigeria, Senegal, Sierra Leone, and Côte d’Ivoire. Each participant had lived in the United States for at least five years at the time of the interview. All interviews were conducted in English with one exception where the participant spoke French; this interview was conducted by a study team member who was bilingual in French and English. All participants met the inclusion criteria for this study. Participant demographics are presented in Table 1.

Table 1
Participant demographics

Demographic	N (%)
Gender	
Male	8 (53.3)
Female	7 (46.7)
Age (mean ± sd)	46.4 ± 9.2
Country of Origin	
Côte d’Ivoire	1 (6.7)
Ghana	2 (13.3)
Kenya	2 (13.3)
Nigeria	4 (26.7)
Senegal	4 (26.7)
Sierra Leone	2 (13.3)
Marital status	
Married	14 (93.3)
Not married	1 (6.7)
Number of children currently living at home	
0	2 (13.3)
1	3 (20.0)
2	5 (33.3)
3	3 (20.0)
4	1 (6.7)
5	1 (6.7)

All study participants were employed in various sectors including healthcare, social services, hospitality, and self-employment. All participants were married, and one participant had had an interaction with the child welfare system in the United States at the time of data collection. Although

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the other 14 participants had never been involved with the child welfare system in the country, responses from all 15 participants revealed certain factors that were found to either contribute to or guard against SSA immigrants' interaction with the U.S. child welfare system.

Two major themes emerged from participants' interview responses: risk factors and protective factors. Within these two major themes emerged eleven subthemes. The six risk factor subthemes that emerged from the data were parental mental health and substance use issues, child abuse, child neglect, low income, unfamiliarity with child protection laws, and culture shock. The five protective factor subthemes that emerged included home training, avoidance of abuse and neglect, responsible parenting, social supports/networks, and community resources.

Risk Factors

Interview responses from participants revealed the six previously mentioned risk factor subthemes as pervasive factors that cause SSA immigrant families to come in contact with the U.S. child welfare system, especially child protective services (CPS). Each of the subthemes is presented below and supported by poignant and representative quotes from participants.

Parental Mental Health and/or Substance Use Issues

Responses from participants indicated that an SSA immigrant parent is at more risk of becoming entangled with the child welfare system if the parent struggles with mental health and/or substance use issues. Participant #5, who was from Ghana, shared how parental mental health struggles can draw parents into the child welfare quagmire: *"I think it is more the mental [health] issue in terms of the parents where they are not able to handle their parenthood."*

On how parental mental health issues lead to SSA immigrant parents becoming involved with the U.S.

child welfare system, Participant #12, a Nigerian, said: *"I understand that some parents are into drugs. I understand some parents are into heavy alcohol. So, that might make those parents to start abusing their children, which will now attract the attention of DHS."* Other participants' perspectives on how parental mental health and substance use issues instigate the involvement of the child welfare system with SSA immigrant families were similar to those shared by Participants #5 and #12.

Child Abuse

Participants noted child abuse is one of the most common reasons why SSA immigrant parents and their families get involved with the U.S. child welfare system. For example, Participant #3, from Senegal, identified "physical, sexual, emotional, and psychological abuse" as specific forms of child abuse that can cause the involvement of CPS into the families of SSA families. Most participants singled out physical abuse as the major child maltreatment risk factor that triggers CPS investigations. For example, Participant #6, a Nigerian, said: *"There are a lot of reasons why children [of sub-Saharan African immigrant parents] end up in child protection. Child abuse—physical abuse [for example]. Some sub-Saharan African immigrant parents abuse their own children."*

Participant #8, a Kenyan, said, *"My understanding is that in very minor cases of things that us as Africans we perceive to be minor, you can end up losing your child for something as simple as just caning a child... And they [child] can go to school and say, 'My dad slapped me,' or, 'My daddy caned me,' and you will find that they [school] don't take that on face value."* This quote perfectly summed up the role that physical child abuse, regardless of the severity of the act, plays in inviting CPS into the families of SSA immigrant families.

Child Neglect

Participants also extensively described child neglect as a leading risk factor for SSA immigrants to become entangled with the U.S. child welfare

system. Overall, child neglect was the most discussed risk factor in this study. Participants' descriptions of what constitutes child neglect ranged from physical and emotional forms of neglect to medical and educational forms of neglect and lack of supervision. These various forms of child neglect were partially encapsulated in Participant #2's, a Kenyan, response that if you are a SSA immigrant parent and you *"don't bring your child to school, neglect your child, don't feed your child,"* then you will become involved with the child welfare system. On educational neglect specifically, Participant #2 noted that as a SSA immigrant parent, you will be in trouble with CPS *"when you know that it's time to send your child to school, to register your child for school, and you don't do that."*

Participants' responses notably highlighted lack of supervision as a neglect issue that engenders the involvement of CPS with SSA immigrant families. For instance, Participant #10, who was Senegalese, tied lack of supervision to child endangerment, noting: *"When the child is in danger because they were left alone in the house by themselves, or the parents are in the situation like being a drug user and cannot take care of the child."* Participant #15, who was from Sierra Leone, recalled the experience of a SSA immigrant friend: *"I know a bit of story with one of my friends who because of a little bit of error, they said she left the child unattended, and she just went to purchase a bread and by the time she came back cops were called, and the cops took the baby and she was shamed and taken to court and then to jail and all this stuff."*

Similar to participants' identification of physical abuse as the leading form of child abuse, participants also identified physical neglect as the most prevalent form of child neglect. Participant #9, who was from Côte d'Ivoire, for example, intimated: *"I know some situation like if the mother is not able to take care of the kids, they [CPS] take the kid."* Participant #12, a Nigerian, said, *"I know that if you have any problem with the kids or maybe if they [CPS] think you're not taking good care of the kids, they can take them away from you and give them to foster parents,"*

which appeared to echo Participant #9's perspective on physical neglect as the most common form of child neglect.

Low Income

The fourth subtheme that emerged under the risk factor theme was low income among SSA immigrant families. Participants described the significant roles that low income, including inadequate financial and other resources, plays in elevating the risk of SSA immigrants becoming entangled with child welfare system. For example, Participant #15, a Sierra Leonean, said: *"Inadequacy or insufficiency of resources can lead to children being malnourished or underfed. Those children may not be active in school because there is not enough income to upkeep them, and at the end of the day if that comes to the attention of social services in school, then that can lead to the child being taken away."*

Similarly, Participant #1, a Ghanaian, linked low income among SSA immigrant parents to difficulties with childcare services, and with balancing childcare and work duties, as a likely outcome that can engender child neglect, saying, *"They [sub-Saharan African immigrant parents] will need some sort of childcare and sometimes due to issues around income, one would have to stay home and the other would have to work to take care of the child. But if they do not have enough income where one would just have to work and the other stays home, they would have to juggle with trying to take care of the child and work."* Participant #1 noted that childcare and work balance challenges are unalienable factors that engender child neglect.

Unfamiliarity With Child Welfare Laws

As the fifth risk factor, participants described how lack of familiarity with the complex policies and laws of the U.S. child welfare system has led to many SSA immigrant families becoming embroiled in it. Participants pinpointed the lack of education on CPS laws and misconception of how the law works as risk-elevating factors for CPS involvement in SSA immigrant families. On the lack of education on

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CPS laws, Participant #3 from Senegal, for example, noted that SSA immigrant parents are “...not well educated about what exactly is appropriate and what’s not appropriate. I often find that there’s a lot of not only miseducation but also misconceptions of how the system is supposed to work and for the responsibilities of a parent.”

Participant #12, a Nigerian, distinguished between African child protection practices and those in the United States, using the distinction to drive home SSA immigrants’ misconceptions of how CPS laws work. Participant #12 said, “In Africa you can just leave your kid and run out to buy something and the neighbors that are there will help you take care of the kids. It is not [like] that here, and most times you have to take your children to all the things you need to do. Some of them don’t know this law and they leave their kids and go out to do stuff and by the time they’ll come back, maybe people will...call child welfare on them.”

Culture Shock

Participants profoundly discussed the sixth and final risk factor, culture shock, as they found this factor to be one of the leading causes of SSA immigrant families’ entanglement with the U.S. child welfare system. Participants contended that, in many cases, SSA immigrant families attract the attention of CPS due to the families’ African cultural practices running afoul of child welfare practices and laws in the United States. This contention was summed up by Participant #11, a Senegalese, when they used their own practice as an example: “Where I’m from is a kind of different culture; you can corporally discipline your child. We don’t call it abuse. Some Africans beat their kids—you can do that—but here, it is not the case. Sometimes I tell my kids to not violate the rules. Sometime after I warn them, I can beat them. To be honest with you, I don’t consider that as an abuse. It is educational. Even though I try to do my best to apply the United States law with the kids, I’m not hundred percent following the laws. I think it is a cultural issue there.”

Participants also noted how SSA immigrant parents are shocked to find out that U.S. child welfare laws are actually enforced, unlike those in the parents’ home countries. For example, Participant #15, a Sierra Leonean, opined that people from Africa are often surprised about how child welfare policies in the United States are taken very seriously, which in turn becomes a cultural shock that affects them in diverse ways, including their struggle to reconcile their native childrearing practices with those of the United States.

Protective Factors

Interview responses from participants pointed at five protective factor subthemes as pervasive reasons that protect SSA immigrant families from involvement with the U.S. child welfare system. Each of the five protective risk factor subthemes is presented below, supported by poignant and representative quotes from participants.

Home Training

Responses from participants indicated that SSA immigrant parents attributed good home training, which includes religious upbringing of children and parents and nurturing children in the home, as a protective factor preventing them from involvement with CPS. Participant #4 from Nigeria said, “So, from my own culture, we believe in training the children and bringing them up in the fear the Lord and admonition. We don’t really, we don’t spank children, but we train them very well to be obedient. So, I cannot recall any Nigerian that has any issue with DHS. I don’t know anyone.” Participant #2 from Kenya mentioned: “So, for me I really don’t do it for the child welfare system; I do it for the well-being of my kids. I don’t believe in physicality screaming my child or any child.” It is important to note that parents mentioned that the choice to nurture their children is not out of fear of CPS, but out of concern for the well-being of the children.

Avoidance of Abuse and Neglect

Education and knowledge of the U.S. CPS was noted as one of the reasons behind less involvement with the CPS. Participant #15 from Sierra Leone said they were “...very quick to educate myself with listening to people that there is this system called child protection service, that’s always geared towards the welfare of the kids and they are advocates for kids and they make sure that kids are taken care of even by their parents. Any violation of the child’s rights, the parents are going to feel some severe consequences—sometimes imprisonment or fine or withdrawal of the child from the parents.”

Additionally, participants mentioned that obeying current laws in the United States was a factor in preventing their involvement with CPS; this was a conscious effort on the part of the parents. Participant #13 from Nigeria said: “So I follow the law. Like I said, we came here with a different mindset, we came with our culture from Nigeria. But whatever they say is the law, you have to follow it. I think that’s it. If they say don’t beat your child, you don’t do it [beat your child]. All you need to do is talk talk talk to your children.” These two quotes suggested that participants’ knowledge of CPS could have been gained from purposefully seeking the knowledge, or as a consequence of wanting to understand all the laws of the United States.

Responsible Parenting

Two participants explicitly mentioned responsible parenting as a way to avoid involvement with CPS. Participant #1 from Ghana centered their comment around supervision, describing, “keeping an eye on them, to ensure that I’ve given them the best care I can as a father. And one of the things I have done as a family, I have to work and my wife had to sacrifice her time staying home to take care of the child is something we agreed on as a family for now.”

On the other hand, Participant #15 from Sierra Leone centered their comment on parents providing basic essentials for children, saying, “Of course, it’s only just to go the extra mile. If you’re supposed

to work one job, then you have to do two jobs. Your income is not going to be a hundred percent what you need, but at least you can provide what is necessary as far as a parent, all that to meet the demands [of their children], not all but the basic means so that you keep up.” From these quotes we see that the issue of responsible parenting can take different forms. The definition of what constitutes responsible parenting also differs between study respondents. The central idea of this theme is that providing and guiding one’s child/children is a way of preventing them from ending up in the CPS.

Social Support/Networks

Participants repeatedly mentioned social support and social networks as ways that African immigrant parents have avoided involvement with CPS both personally and for others. Networks can be local, like in Participant #8 from Kenya’s comment: “Normally what happens, migrants kind of, for the most part, they live in a kind of knit, tight knit society, whereby if somebody comes here from sub-Saharan Africa, they tend to look for people of their own. For example, I’m from Kenya. If I go somewhere, my first thing is to look for others from Kenya. Can I meet any Kenyans or anyone from Africa? Then from there you relate and you get to learn that, you know what? You can’t do this, you can’t do that. And just by sharing and hearing other people’s stories, we really learn a lot from our fellow brothers and sister.”

Over time, with increasing numbers of immigrants of African descent across the world, wider networks have been formed. Participant #2 from Kenya, gave an example of one such network, saying: “We are very supportive of each other. I see cases all the time like this one group of Kenyan women in the U.S. and Canada that has about 20,000 members where are people always getting help. People will post ‘I’m a single mom and this happened and that happened’ and people contribute \$50,000 like that.” Social support and networks are responsible for the education of new immigrants to the laws and policies of the United States, help with transitioning families to new neighborhoods, and provide a source

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of general information for all people within the network.

Community Resources

Community resources was the last protective factors subtheme that emerged during these interviews, and this subtheme was closely linked with social support and social networks. Participants discussed the availability of community resources that were designed to aid children and families in need, like Participant #15 from Sierra Leone, who explained: *“So, you think about the resources that are here, the number of nonprofit organizations that provide services to give help to struggling families are very good. They are more than you can ever imagine.”*

Participant #8 from Kenya went further to describe specific resources that are helpful in preventing African immigrant parents from involvement in CPS, saying: *“In the United States, they have a lot of resources. Even before the father and the mother come in, in terms of helping even a child, they have a lot of free resources. Like you can be given things like stamps, you can enroll in things like CHIP, if the parents are not able to [provide insurance for the child].”*

Knowledge and access to community resources serve in the same capacity as social support and networks in that they provide African immigrant parents with information that is helpful in educating them about the community and what resources are available to them. Community resources also serve as an avenue for African immigrant parents to share information with others about their experiences and provide vital services to the community.

Discussion

There is limited research on the dynamics of the SSA immigrant population in the United States and the U.S. child welfare system. With the SSA immigrant population in the United States seeing a steady increase over the last several decades, this study set out to gain the perspectives of SSA immigrant parents on the U.S. child welfare system,

including their understanding of the child welfare system’s laws, policies, and practices. To better capture participants’ perspectives on the U.S. child welfare system, it was imperative to know whether participants had had any encounters with the child welfare system and what steps or protective factors, if any, had helped or enabled them to avoid interactions with the child welfare system.

Only one participant had been directly involved with CPS in the past. Though the other 14 participants had never had a direct interaction with the U.S. child welfare system, they all enumerated and described many risk factors that they found to elevate SSA immigrants’ risks of entanglement with it. These risk factors include parental mental health and substance use issues, child abuse, child neglect, low income, unfamiliarity with child protection laws, and culture shock. The results indicate that an SSA immigrant family may encounter more than one of these risk factors, which could elevate their vulnerability of becoming entangled with the U.S. child welfare system. Conversely, the data also indicated that SSA immigrant families utilize diverse methods and resources to counteract the risk factors. These protective factors include home training, avoidance of abuse and neglect, responsible parenting, social support/networks, and community resources.

Four of the six risk factors found in this study—parental mental health and substance use issues, child abuse, child neglect, and low income—are extensively researched in extant studies. In fact, a plethora of existing studies have concluded that Black families are more likely to encounter these four risk factors (e.g., Cénat et al., 2021; Chibnall et al., 2003; Child Welfare Information Gateway, 2016; Dettlaff & Boyd, 2021; Dettlaff et al., 2020). The parental mental health and substance use risk factor, for example, corroborates earlier studies that have found positive correlations between this risk factor and various forms of child maltreatment that trigger the involvement of CPS agencies (e.g., Chemtob, et al., 2013; Dubowitz et al., 2011; Kepple, 2017). Similarly, the child abuse and child neglect risk factors find ample support in extant

studies, as child abuse and neglect are responsible for nearly all interactions between families and child welfare agencies in the United States, including SSA immigrant families (e.g., Child Welfare Information Gateway, 2019; Lalayants, 2013; Lalayants & Epstein, 2005).

Unsurprisingly, child neglect was participants' most discussed risk factor. The current literature finds child neglect as the most prevalent form of child maltreatment that instigates the involvement of child welfare agencies with U.S. families (Antle et al., 2008; Courtney et al., 2005; Dettlaff & Earner, 2012). In addition, low income as a risk factor for child maltreatment and the resultant outcome of child welfare agencies' involvement with families, corroborates the findings of existing literature. The U.S. Centers for Disease Control and Prevention (2021), for example, found that a caregiver's low-income status was a major individual risk factor for child maltreatment and associated outcomes.

Unlike the four risk factors discussed above, the other two risk factors—culture shock and unfamiliarity with child protection laws—have yet to be extensively investigated. That said, Critelli (2015) found that, although many immigrant families do not intentionally abuse or neglect their children, differences in cultural norms and child-rearing practices play a role in incidents of suspected child abuse and neglect. Critelli's (2015) finding is corroborated by our data, which indicated that SSA immigrant parents' struggles to immerse themselves in American society while trying to maintain their native cultures, especially as they pertain to child-rearing, is a challenging transition process that sometimes results in child maltreatment and interaction with the child welfare system. Similarly, the data pointed to the susceptibility of SSA immigrant families to possible interactions with the U.S. child welfare system due to the families' lack of understanding of even basic child protection laws and policies, including the acts and failures to act that constitute child abuse and neglect in the states in which these families reside.

Social supports/networks are among the most studied

protective factors that emerged from this study. Family support has been identified as a protective factor against involvement with CPS (Davidson et al., 2019). Additionally, research finds that factors in the community including “family members and their informal social networks” are protective against involvement with CPS (Davidson et al., 2019). Responses from participants support these points; several participants remarked that community members and social networks help prevent African immigrant parents from involvement with CPS. While few studies have been conducted with African immigrant parents, Bailey et al. (2015) found similar impacts of social support for Latino parents.

Linking immigrant parents to community resources is one way to increase social support in immigrant communities and to get them the help they need regarding the health and welfare of their children (Maiter et al., 2009). Study participants repeatedly mentioned access to and knowledge of community resources, financial and nonfinancial, as one way to prevent involvement with CPS. Community resources mentioned in this study include money, healthcare, schools, community centers, and libraries. There is also an important link between social supports/networks and community resources, as many immigrants are made aware of community resources through others living in their communities.

The last two protective factors, home training and avoidance of child abuse and neglect, are less studied. Our data suggest that SSA immigrant families use their native, culturally sound upbringing skills—which, among other factors, emphasize modeling good behavior, respecting one's caregivers, and following the tenets of personal self-control—to help them raise their children in ways that help them avoid abuse or neglect.

Limitations

There are some limitations to this study. First, most participants did not have personal experiences with the U.S. child welfare system, which would affect how these parents viewed the system. Also, the purposive and snowball sampling techniques

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employed in recruiting participants meant that we were left with participants with similar backgrounds and professions, limiting their diversity of experiences and, in turn, perspectives. It is important to state that perspectives of SSA parents who have personal experiences with the U.S. child welfare system may be different from those who have no experience.

Second, definitions of “child welfare” differed among participants, as some mentioned child welfare in a holistic sense and not as a government system designed to protect children. It is possible that this wording could differ across different countries, making it hard for us to capture systems similar to those in the United States. These different understandings could also affect perspectives of SSA immigrant parents as they may see the U.S. child welfare system as a way to raise children rather than a government entity meant to intervene in cases where children are at risk. While an understanding of all these perspectives is important, the lack of an operationalized definition may lead to unrelated conclusions.

Third, generalizability of the study’s findings is limited by participants’ employment and level of education, as well as their geographical location in the United States. Participants in this study mostly worked in formal jobs, which meant participants had acquired a certain level of education. Being educated meant that participants may have a better understanding of the U.S. child welfare system. Therefore, perspectives of these educated, formally employed SSA immigrant parents may not represent those of their less-educated, blue-collar SSA compatriots. Similarly, participants were drawn from two northeastern states (Delaware and Pennsylvania). Perspectives of SSA immigrant families in other parts of the United States might be drastically different from those of this study’s participants, especially as some child welfare laws, policies, and practices differ from state to state.

Generalizability of the findings is also limited by the number of SSA countries from which participants hail. Sub-Saharan Africa is made up of 46 countries,

but only six countries were represented in this study. This study did not capture possible differences in cultural experiences and values, including child rearing and protection, in the other 40 SSA countries and how those experiences and values shape the perspectives of African immigrant parents from those countries. This makes it difficult to generalize the perspectives of this study’s SSA immigrant parents to all SSA immigrant parents in the United States.

Study Implications

U.S. child welfare laws, policies, and practices can be enigmatic for United States-born citizens, and for immigrants, the laws, policies, and practices can exceed enigma due to the latter group’s intersectional identities of being Blacks and immigrants, as well as challenges with the U.S. sociocultural landscape. Despite this, research on SSA immigrant families’ understanding of how the U.S. child welfare system works is very limited. This study opens a window into SSA immigrant parents’ perspectives on the U.S. child welfare system, providing some useful considerations for the U.S. child welfare system.

First, the study revealed that SSA immigrant parents face some factors that tend to elevate their risk of interaction with the child welfare system. While some of the risk factors (for example, child neglect, child abuse, and low income) found in the study are very common among diverse families involved with U.S. child welfare system, the study also found an uncommon risk factor: culture shock, which existing literature finds as typical among immigrant families. With this knowledge, the U.S. child welfare system can adopt strategies that have worked well with immigrant families to work with SSA immigrant families in particular. It is important to stress that such strategies must be adapted to consider the cultural and social experiences of SSA immigrant families.

Second, the numerous protective factors possessed or utilized by SSA immigrant families serve as pertinent resources that can be tapped into by the U.S. child welfare system to promote the system’s primary goal of keeping families together. It is imperative to stress that these protective factors alone would

not be enough to keep SSA immigrant families from interacting with the child welfare system, but it would be efficacious and relevant for the child welfare system to take them into consideration.

Third, having these findings at its disposal can help the child welfare system to engage SSA immigrant parents in culturally sensitive and competent ways. For instance, the study shed light on SSA immigrant parents' culturally supported beliefs and practices of using corporal punishments and other disciplinary measures that are frowned upon in the United States. Understanding these beliefs and practices would enable the child welfare system to find culturally sensitive and competent ways to engage and intervene with SSA immigrant families.

Fourth, the study found that SSA immigrant parents generally have limited knowledge about the U.S. child welfare system. This finding opens the door for the child welfare system to sensitize SSA immigrant families to the U.S. child welfare system's laws, policies, and practices. This can serve as an effective preemptive measure that would not only reduce SSA immigrant families' risks for interacting with the child welfare system, but also save the system money and time that would have been devoted to intervening with SSA immigrant families who would have otherwise become involved with the system.

Conclusion

With limited research on how immigrants of African descent understand the U.S. child welfare system, this study sought to gain the perspectives of SSA immigrant parents on the child welfare system in the United States. Being Blacks in a country that has an overrepresentation of Black families in the child welfare system, it was important to investigate what SSA immigrant parents in the United States know about child welfare laws, policies, and practices in the country. This study revealed that SSA immigrant parents had a generally fair understanding of certain risk and protective factors that influence SSA immigrant families' interaction with the U.S. child welfare system. However, participants mostly viewed the U.S. child welfare system through

their own cultural lenses; participants interpreted the child welfare system in juxtaposition with the sociocultural expectations and experiences of their countries of origin. Overall, the study provides some considerations that can help child welfare systems in the United States to adopt strategies that are culturally aware when working with SSA immigrant families, whether proactively or retroactively.

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