ASSESSING CHALLENGES AND BARRIERS FOR BILINGUAL CAREGIVERS TO BE EFFECTIVE PLACEMENTS FOR SPANISH-SPEAKING YOUTH.

By

Maribel Andrea Valencia

A Project Presented to
The Faculty of Humboldt State University
In Partial Fulfillment of the Requirements for the Degree
Master of Social Work

Committee Membership
Yvonne Doble, MSW, Committee Chair
Dr. Marizol Ruiz PhD, Committee Member
Laura Power, MSW, Committee Member
Geneva Shaw MSW, Program Graduate Coordinator

May 2016
Abstract

ASSESSING CHALLENGES AND BARRIERS FOR BILINGUAL CAREGIVERS TO BE EFFECTIVE PLACEMENTS FOR SPANISH-SPEAKING YOUTH.

Maribel Andrea Valencia

The purpose of this project was to assess what bilingual caregivers need to know in order to be effective placements for Spanish-speaking youth in the foster care system in a rural northern California county. Semi-structured interviews were conducted with community service providers, focusing initially on bilingual service providers and others serving the Spanish-speaking community in a rural northern California county.

Themes were gathered from the interviews completed with the community service providers. The themes bring forward the service provider’s understanding of the issues facing bilingual caregivers in a rural northern California county. The themes that were found through the interviews describe the barriers and challenges that arise for bilingual caregivers and the Spanish speaking youth in the foster care system. Recommendations are provided on the best way to support the bilingual caregivers through issues that may arise, so they may become an effective placement.
Acknowledgements

I would like to thank Humboldt State University’s Social Work Department, and my Master’s Committee: Yvonne Doble MSW, Dr. Marizol Ruiz, PhD my community partner Laura Power MSW, and LatinoNet for all the advice given. I would also like to thank my accountability team of Judy Kidd and Loren Stentzel IV for both supporting me through this project and taking this journey with me.

In addition, I’d like to thank my son Aaron Valencia and my partner Tristan Caswell for all the support, encouragement, and time you have given through several years of papers and classes. Now that we come to the finish line, I’m so glad and grateful that you both have been by my side. And to my family thank you for being there for me, and encouraging me through all my schooling.
# Table of Contents

Abstract ............................................................................................................................... ii  
Acknowledgements ............................................................................................................ iii  
List of Appendices ............................................................................................................. vi  
Introduction ......................................................................................................................... 1  
  Latino or Hispanic? ......................................................................................................... 1  
  Growing Population ........................................................................................................ 2  
  Rural Challenges ............................................................................................................. 3  
Literature Review ................................................................................................................ 5  
  Trauma Training and Awareness .................................................................................... 5  
  Child Welfare Interaction ............................................................................................... 8  
  Culture ............................................................................................................................ 9  
Methodology ....................................................................................................................... 13  
Results ............................................................................................................................... 16  
  Bilingual Staff ............................................................................................................... 16  
  Trauma and Early Child Development Education ........................................................ 17  
  Culture .......................................................................................................................... 18  
  Child Welfare Knowledge ............................................................................................ 19  
Conclusions ....................................................................................................................... 21  
  Invest in Bilingual Services Staff ................................................................................. 22  
  Bilingual Caregiver Training & Outreach .................................................................... 23  
  Future Steps .................................................................................................................. 25
List of Appendices

Appendix A: Interview Questions ................................................................. 30
Introduction

The purpose of this project was to assess what bilingual caregivers need to know in order to be effective placements for Spanish-speaking youth in the foster care system in a rural northern California county. Semi-structured interviews were conducted with community service providers, focusing initially on bilingual service providers and others serving the Spanish-speaking community in a rural northern California county.

Themes were gathered from the interviews completed with the community service providers. The themes bring forward the service provider’s understanding of the issues facing bilingual caregivers in a rural northern California county. The themes that were found through the interviews describe the barriers and challenges that arise for bilingual caregivers and the Spanish speaking youth in the foster care system. Recommendations are provided on the best way to support the bilingual caregivers through issues that may arise, so they may become an effective placement.

Latino or Hispanic?

Initially in describing the children and caregivers who are the focus of this project, I have used the words bilingual and Spanish speaking. This is in part because the naming of identity can be controversial, and different for each person. In the choice to name oneself Hispanic or Latino, a lot of culture and context comes with that. The Merriam Webster dictionary defines Latino as a person who was born or lives in South America, Central America, or Mexico or a person in the U.S. whose family is originally
from South America, Central America, or Mexico (Merriam Webster, n.d.). The dictionary definition of Hispanic is described as relating to, or being a person of Latin American descent living in the United States; especially: one of Cuban, Mexican, or Puerto Rican origin (Merriam Webster, n.d.). It appears that both terms can be used for the same people, but there is a difference. According to this definition, the difference between Latino and Hispanic is generations. Hispanics are people that have lived in the U.S. for generations that may not speak Spanish and have integrated into the U.S. culture. Latino are people that have just come to the U.S. from South America or Mexico or are first generation; they have Spanish as their first language and their original home culture is still very prevalent in their homes here in the U.S. It is important to recognize that this is just one definition. Many Spanish speaking people will define their ethnicity differently. For the purpose of this project, the population I am focusing one would be considered Latino children and families.

**Growing Population**

The Spanish speaking population of California has increased quite a lot in the last couple of years. By the year 2030, it is projected that the Latino population of the U.S. will increase to 73 million and constitute 20.1% of the U.S. population, making them the fastest growing group in the country (Garcia, 2009, p. 1240). As the Latino population increases, the number of Latino children involved in child welfare will increase, as of 2014 in California there is 62,097 children in foster care, 31,230 of those children are Latino (Kidsdata.org, n.d.). Even, northern California has seen its Latino population
increase to 38.6\% as of the 2014 Census (Population Projections, n.d.). While this demographic is not yet representative of foster care in Northern California this can reasonably be expected to change in the next 15 years.

**Rural Challenges**

Most of Northern California counties are rural. This can bring additional difficulties to the Latino population in those counties. For example, many rural counties do not have the infrastructure to work with the Spanish speaking population. Especially if the population is involved in the child welfare system, which already has a level of stigma within Spanish speaking populations. In my own experience as a social work student and intern, and as a Spanish speaking community member in a rural community, I’ve seen first-hand how the lack of resources for families and lack of understanding of the child welfare system can become a significant barrier. Caregivers are often afraid to access support or talk to service providers outside of their community.

Conversely, the child welfare system is not accessing a significant number of potential healthy safe placements for children in the foster care system, due to a lack of engagement of bilingual caregivers. In order to bridge this gap, the Latino community will need a road map of what they need to learn and take into account before making the commitment to become a foster placement. This project tackles the first step of this process, by engaging with the service providers who are already interacting with these potential bilingual caregivers in the community. By interviewing these service providers, I hope to gain a deeper understanding of some of the issues these care providers may face.
including: What are the issues that they need to think about to make the decision to have a child placed in their home?; once that child is in their home, what issues might come up that they would need to work through to have a successful placement?

The questions that bring me personally to this project are: How can our community be prepared to support our youth? How can we support the people who are willing to become placement for those youth that are in need of a stable and caring home to help them in their time of need? The purpose of this project is to understand the challenges and barriers that bilingual caregivers will face to become effective placements for Spanish speaking youth, and based on this understanding, identify steps that can be taken to support the caregivers and tackle the issues that will came up for those caregivers.
**Literature Review**

This literature review first addresses some of the aspects of trauma that children in the foster care system may experience, and aspects of training that may be integrated to support trauma-informed practice. An overview of the child welfare system is also key to considering child welfare education and culture as the sections of importance as the challenges and barriers of the Spanish speaking community.

**Trauma Training and Awareness**

When children are placed in foster care they not only experience the traumatic experience(s) of abuse or neglect that led to their placement, but often face additional chronic stressors including separation from siblings, friends, and community; possible maltreatment in foster care settings; and uncertainty about future plans and their reunification with their parents (Conradi, 2011, p.207). Child traumatic stress occurs when children and adolescents are exposed to traumatic events or traumatic situations, and when this exposure overwhelms their ability to cope with what they have experienced. Depending on their age, children respond to traumatic stress in different ways. Many children show signs of intense distress—disturbed sleep, difficulty paying attention and concentrating, anger and irritability, withdrawal, repeated and intrusive thoughts, and extreme distress—when confronted by anything that reminds them of their traumatic experiences. Some children develop psychiatric conditions such as
posttraumatic stress disorder, depression, anxiety, and a variety of behavioral disorders (National Child Traumatic Stress Network, n.d.)

If traumatized children are placed in a home where a care provider does not have the right training to support them, the placement can be even more traumatic to the children and this can cause the placement to not be successful. Over all foster children have behavior problems at three to four times the rate of the general population of children (Leathers, 2011. p1270). This cycle can serve to increase the challenges youth in care may experience. As Lisa Conradi (2011) states in her article *Promising Practices and Strategies for Using Trauma-Informed Child Welfare Practice to Improve Foster Care Placement Stability: A Breakthrough Series Collaborative* she states “The longer traumatic stress reactions to these events remain unaddressed, the more likely it is that children will experience behavioral, psychological, and other problems …untreated traumatic stress reactions may lead to placement disruptions” (p.208).

Making sure the foster placement has the right training to deal with the children that are going to be placed in their home is crucial, as when children are placed in placement there are other children and adults that will be affected. Because if or when these placements are disrupted, feelings of blame and rejection along with the breaking of attachments (siblings, schools, foster parents, or kinship care) can compound the child’s traumatic experience and result in externalizing behaviors. The system that is designed to create safety and permanency, may inadvertently amplify instability (Conradi, 2011, p. 208). This instability will affect the child in their future placement, and the placement itself. Also the other children and adults that live in the placement have their lives and
routine upset by the children being removed. The issue of trauma-informed child welfare practice (TICWP) has been looked into for several years, and some key elements have been brought out. These elements include maximizing the child’s sense of physical and psychological safety, using comprehensive screening and assessment practices, and coordinating services with other agencies (Conradi, 2011, p. 209).

Second is mental health, this is a key component of trauma-informed practice by conducting appropriate and effective trauma screening and assessment of children in foster care. While assessment is a continuous process, the initial assessment must gather comprehensive information from a variety of sources; be inclusive of birth parent, foster parent, and youth perspectives; and ultimately be used as a guide for case planning and treatment (Conradi, 2011, p.211).

Planning and treatment is a critical component of trauma-informed practice and the relationship between social workers, families, and children is a crucial one. Once children are more effectively screened for trauma and identified as needing comprehensive assessment and treatment, those must be available from skilled mental health providers (Conradi, 2011, p. 211). As the children get placed into foster care, trauma is one of the issues that the placement and the children themselves need to cope with and work out. Sharing trauma-informed resources across systems is beneficial, for example several treatment approaches, including manualized intervention protocols as well as research-supported best practice guidelines, Trauma Focused Cognitive Behavioral Therapy TF-CBT, relational and attachment-based approaches have also received empirical support with children and adolescents with complex trauma histories,
including those in foster care System (Dauber, 2015, p.530). To the foster parents and
the social workers including tools, trainings, and other products is crucial and can help
the placement to be successful.

**Child Welfare Interaction**

The child welfare system (CWS) is charged with protecting and caring for youth
who have experienced maltreatment. Children taken into protective custody by CWS
often enter foster care (Greenson, 2011, p.93). Latino children and families represent the
fastest growing group in the child welfare system (Rivera, 2002). However, research and
practice lack explanatory frameworks that incorporate contextual pathways to entering
and remaining in the child welfare system for this population (Garcia, 2009, p.1240).

It is essential to unpack how systemic hardships produce cumulative risk for
Latinos who enter the child welfare system. Once stressors elevate to a point where CWS
is involved, Latino children often remain in the child welfare system for a longer duration
than their Caucasian counterparts (Garcia, 2009, p.1241). According to statistics, the
numbers of Latinos in the child welfare system are increasing as the population continues
to grow. As of 2014, 48.2% (31,230) of the children in foster care were Hispanic
(Kidsdata.org, n.d.). This is a remarkable difference from when Hispanics used to only
account for 8% in 1990 and 15% of the children in foster care in 2001(Garcia, 2009.
p1241).

Some studies show strong evidence that Latinos are younger even at the referral
stage, and spend a significant more time in state custody than do non-Latino Whites
Moreover, Latino youth are less likely to be adopted than their Caucasian counterparts (Garcia, 2009). At this critical time when the Latino population continues to grow, human service agencies, which all face similar barriers (e.g., high caseloads, high turnover, lack of staff training, and lack of culturally and linguistically competent services), do not maintain the infrastructure to address the specific factors that contribute to the growing numbers of Latinos in the child welfare system (Garcia, 2009, p. 1248).

An additional barrier that the Spanish speaking foster placements have is lack of understanding of Child Welfare System. Addressing the lack of education about what CWS does and provide can benefit the population that will become placement before entering into the system and also the population with the children in the system, will understand the road ahead of them with CWS support.

**Culture**

When children are placed in a foster home, it is the role of a social worker to ensure the child's best interests are served, taking into account the preservation of the child's cultural, racial and linguistic heritage (Daniel, 2011, p. 2230). Having a foster placement that has the same culture, racial, and linguistic heritage can make the placement more likely to be successful. Research indicates there are an under-representation of foster parents from racialized groups and an overrepresentation of children from racialized groups in North American foster care (Daniel, 2011. Because of the shortage of foster parents nationwide, placements are often made based on the
availability of foster parents rather than on an appropriate fit between the background, experience and skills of foster parents and the needs of the children (Daniel, 2011).

When a child from a racialized group has to leave their birth family and move in with a Caucasian family, there will be cultural differences that both parties need help understanding, no matter how loving the foster family (Coakley & Buehler, 2008). According to Carter-Black (2002), one of the most notable problems occurs when Caucasian foster parents disregard the importance of race. Unfortunately, within transcultural placements, the cultural development of these children could be affected if foster parents are unwilling or unable to address their specific racial or cultural needs. These needs may coalesce around cultural development, identity formation, as well as establishing or maintaining relationships children and youth, from racialized groups, have with their families of origin. Additionally, these needs may be impacted by the availability of resources and support offered through child protection agencies or the lack thereof. As such, foster parents must be willing and able to promote the development of cultural and racial identities of the children from racialized groups in their care (Daniel, 2011, p. 2231).

Foster parents are in the front line of service delivery and are responsible for meeting most of the needs for the children in their care. Having a foster placement that knows the culture and the linguistic needs of a child is the best way for those children that are already in a stressful situation to feel comfortable.
There are some benefits in cultural matching a foster parent placement, one of them is having the caregiver be familiar with the child’s extended family, as well as the child’s support network (Brown, Cohon, & Wheeler, 2002), proximity to the child's community (Cook, Natoli, & O'Neill, 2006) and ongoing contact with the child's family (Brown, 2009. p1020). Also foster parents who care for children who have a shared culture may find it easier to understand the behavior of a child (Pacifici, Delaney, White, Nelson, & Cummings, 2006). The child may find it easier to follow similar rules and have consistent expectations that they had in their own family (Rodrigo, Correa, Miquez, Martin, & Rodriguez, 2006). In addition, communication between adults and children is more likely to be similar when common values, beliefs and traditions are shared (Brown, 2009, p. 1020).

Lastly, when a child is placed in a home that has the same culture, racial, and linguistic heritage, that child feels safe and comforted in that family environment, where beliefs are shared. When a “child is in a good place” the “child feels safe and success follows” (Brown, 2009). As a result, the “child grows up feeling secure and happy” (Brown, 2009). Because she or he is in a home that is an “extension of the family” and the “child can go with the flow of the household”, that child can feel safe and secure in that foster family, and they can work through the difficulties that brought him or her into care (Brown, 2009). Such healing benefits the child as well as the family and cultural community so there is “mutual benefit” (Brown, 2009, p.1022). These are some of the reasons why a bilingual foster placement can be of tremendous value but also it will be one of the challenges that they will have to work through as they become a foster parent.
to a child that may or may not speak Spanish. This is why our community needs to make sure that these placements will have the right support, so the placement will be successful.
Methodology

The research question this project is trying to answer is what are the challenges and barriers that bilingual caregivers will face to become effective placements for Spanish-Speaking youth, and how we can support the caregivers and tackle the issues that will come up for those caregivers? I conducted semi-structured interviews with community service providers, focusing initially on bilingual service providers and others serving the Spanish-speaking community in a northern California county. By talking to the organizations that works with the Spanish speaking community the goal was to get an overall view of what the Latino community needs are and insight into the interaction of the Latino community with the child welfare system in this county.

By interviewing the service providers that work with the Spanish speaking community, a secondary goal was to create avenues of integration and understanding for the future Spanish speaking foster parents to work with the Child Welfare System. The frame work this process was guided by is systems theory, because it calls into attention the structures around the clients, for example, the family, organizations, institutions. Systems theory gives a way to understand the process of making social order, how to integrate or include individuals in the community (Kihlstrom, 2012, p.288). System theory also helps by providing a way of understanding communication systems; communication is another way to understand power, including the power to decide whether the system is functioning to build on norms or not (Kihlstrom, 2012, p. 292).
Participants were recruited through the LatinoNet community partner network, via announcements during monthly meetings and an email flyer in both English and Spanish. LatinoNet is an organization that works with the community in the county to improve the quality of life for Spanish-speaking families through networking, exchange of information, collaboration, education and advocacy (LatinoNet, n.d.). Participants were also recruited via the snowball sampling method at the end of each interview.

Interviews were scheduled in a comfortable and confidential location. Consent forms were reviewed with participants in their preferred language prior to signature. A copy of the consent form was provided to the participants. Signed consent forms were kept in a sealed envelope until being delivered to Yvonne Doble. Consent forms were stored by Yvonne Doble in a locked file cabinet for three years and then shredded.

Interviews were conducted in both English and Spanish, based on preference of the person being interviewed. Interviews were recorded digitally. Digital recordings were stored on a password-protected computer accessible only to the primary investigator. Additional notes were taken by hand. Notes were stored in a locked file until they were transcribed. Transcribed notes were stored on a password-protected computer. Paper notes were shredded after transcription. All recordings, transcriptions and notes were destroyed at the conclusion of this project.

Interview responses were reviewed via inductive analysis. Inductive analysis is based on the concept of learning from experience. Patterns, resemblances and regularities in experience (premises) are observed in order to reach conclusions or to generate ideas (Research Methodology, n.d.). By using inductive analysis, the raw information and data
was reviewed in order to discover the themes of the challenges and barriers for the Spanish speaking community for engaging into the foster system. I was able to follow the intended outcome of the process and create a small number of summary categories (e.g., between three and eight categories) that captured the key aspects of the themes identified in the raw data and were assessed to be the most important themes given the evaluation objectives (Thomas, 2006, p. 242). No identifying information was connected to the interview documentation or analysis. All information reported in the final document was generalized into key themes; no individual quotes were identified.
Results

Eight community organizations that work with the Spanish community were interviewed. The organizations provide access to health education, mental health support, child care and other county level systems, to low-income Spanish speaking families as well as infant, toddler, school and older youth. From the interviews, four themes were obtained as the challenges and barriers for bilingual caregivers to be effective placements for Spanish-speaking youth.

Bilingual Staff

The lack of Spanish speaking staff members in our community organizations and programs is the biggest obstacle for the Spanish speaking community in this county. Not being able to talk to the people and the programs that provide help with a child’s physical and mental health will be frustrating and it will make people not want to make the effort to help these children. Also the lack of Spanish speaking staff or the lack of appropriate translation and interpreting resources in the CWS system will affect the individual that want to become foster placement. Child Welfare needs to make an effort to provide an adequate source of bilingual services for any Spanish speaking clients. Some of the quotes supporting the theme of bilingual staff as a means of enhancing the interaction of the child welfare system with the Spanish community are as follows:
-A few years back I worked with a couple who wanted to become foster parents and I called and got information but she could not do anything because she did not speak English.

-If you don’t have a staff that is bilingual it doesn’t matter if you have a Spanish pamphlet, because if someone calls and the machine is all in English and there isn’t an option for Spanish maybe people will leave a message and maybe they will be called back.

-Child welfare will get a referral but the family only speaks Spanish, and how are the social workers going to investigate if they cannot communicate with the parents and other family members.

Trauma and Early Child Development Education

Comparable trauma and early child development training for foster placement in another language other than English is crucial. Once a family makes the decision to become a foster placement, training is essential. Training will make a novice foster parent feel better prepared in taking this new step in their life and will also benefit the foster child by coming into a foster home that is better equipped to support them. The consensus was that training is the key element to prepare the foster parent in regards of what to expect when the foster child will be in the home, even though nothing truly prepares you, but training makes a difference. Some of the quotes supporting the theme of trauma and early child development training as a means of enhancing the interaction of the foster parent system with the Spanish community are as follows:
-It is important the foster parent get education on children’s development, because at least they will have some idea and understanding of children and how are they going to behave.

-Kids might have gone through some sort of trauma in regards of being separated from their biological parents maybe or being placed in different households (foster placements) that is a bit traumatic for children. Parents (foster) need to be very mindful of how trauma can affect them (children) how it may show in their behavior, knowing that sometimes kids may have appeared to be “difficult” but it is just a reaction to what they are holding on to.

-Parenting classes about children in a foster care system, because most of the kids have been through traumatic experiences.

Culture

The lack of culturally adequate foster homes in the foster system is the norm. The children that are placed in foster homes have had so many traumatic experiences, making the foster home an environment that will be relatable and beneficial to them should be an issue that is important to CWS. We can make this issue better by having foster placements have the same cultural, racial and linguistic need that the foster children have. Having children be in foster family that looks like them eats like them and speaks the same languages that they do will make the transition into foster care a little bit easier. Some of the quotes supporting the theme of culture as a means of enhancing the interaction of the foster care system with the Spanish community are as follows:
Cultural competency, there is many people from different part of the world that speak Spanish and the culture is very different, knowing were the kids are from, their cultural beliefs, religious beliefs, what do they celebrate - that really helps with children making them feel at home and at ease, that these people understand me and they (foster parent) are not trying to force me (child) to speak a language that they do not feel comfortable with.

Having a cultural coach for the parents (foster parent) so they can call when they have questions, because parents that are taking care of children in the foster care system might need more support when the children are from different cultures.

Providing trainers and staff that are knowledgeable and also speak their (foster parent) language and they will feel comfortable because the staff will be culturally sensitive and appropriate and (foster parents) will then trust the agency.

Child Welfare Knowledge

The last theme that come up in the interview is the lack of knowledge the Spanish speaking community has about the Child Welfare System. The lack of knowledge about CWS in the Spanish speaking community is because of fear. This is the overall fear that the Spanish speaking community has when it comes to government organizations in direct relationship to the history of deportation within the county. Some of the quotes supporting the theme of child welfare education as a means of enhancing the interaction between the child welfare system and the Spanish community are as follows:
- There is a lack of understanding in the Latino community of what it is to be a foster parent, because a lot of parents have good intention and want to help but as soon as they hear child welfare they get scared and they get closed off,
- If the community doesn’t know you (organization) they will not talk to you (organization). They will tell you (organization) that everything is fine but they will not open up because they are scared.
- If a family is involved with the child welfare system in the Spanish community that family is looked at in a negative way and other families don’t want to interact with them.
- There is a lot of misinformation that the Spanish community has about child welfare, the Spanish community needs to be properly informed about what services are provided from which agencies and how they are or are not connected to the government.
Conclusions

The goal of this project was to assess the challenges and barriers Bilingual Caregivers will have to become effective placements for Spanish-speaking youth. I interviewed ten people from eight different organizations that work with the Spanish speaking community, out of these interviews four themes were identified.

These themes were of lack of bilingual staff in the organizations and programs foster caregivers will have to work with, the lack of training in trauma informed care and early child development, the lack and the importance of cultural, racial, and linguistically appropriate caregivers in the foster care system and the lack of training about the child welfare system in the primary language of the caregivers. In the interviews other themes came up, but these four were the ones that all the individuals interviewed brought up. There are a lot more issues that could be explored, but to start with these four would help in tackling the challenges and barriers that bilingual caregivers will face to became effective placements for Spanish-speaking youth.

Some of the ways our community and Child Welfare Services need to support the placement would be by providing education in trauma informed care. Children that have been removed from their home have gone through a traumatic experience and this trauma will be manifested in negative behaviors. By providing education the foster placement would be better equipped with the knowledge and tools to help the children through this transitional time.
A better understanding of the Child Welfare System will help the bilingual placement to understand their position. The Spanish community might have a view of CWS as a malicious organization and might not want to participate with the organization. By educating the community on the benefits of working with CWS, they can show how they help the Spanish placement by providing support and referrals to other organization and programs that will help in the day to day of raising the foster children. Collaboration, is the key to this issue by CWS working with the organization and programs that work with the Spanish community to bring in training to teach the community about what they do and how they support the clients they will help the community not be afraid to call CWS.

**Invest in Bilingual Services Staff**

The first recommendation on how to begin addressing these issues is by investing in more bilingual services staff in Child Welfare Services, as well as other programs that interface with current and prospective foster parents. Working on providing bilingual training to future caregivers will also benefit the children. When foster parents have the right training, children are more likely to benefit from the care they receive (Spielfogel, 2011).

The lack of bilingual staff in community organizations as a whole is a concern. Studies show that parents with language barriers confront obstacles to health care for their children more frequently than those who speak English well, which can lead to suboptimal health status for these children; parental misunderstanding of diagnoses,
medications, treatments, and follow-ups; and a lack of a regular, consistent source of medical care for the children (Schneiderman, 2010, p. 20).

Hiring bilingual individuals would be the key. Once these individuals are hired, it is important that they are supported and compensated for the job they are doing and the language skills they are utilizing. These individuals will become the face of your organization to the Spanish speaking community. The Spanish speaking community may come to them for other issues as well, because other organizations in the community will not have bilingual staff. This can be a challenge to balance the needs of the family that are effecting their overall wellbeing, versus the mission of an organization. The staff member will also need the support of the organization to be consistent in the information they are giving out and in the time they are going to be available to the community. The Spanish speaking community is a very tight community and they communicate well with each other. Once they know an organization is working with them and there is a person there for them, they will utilize that person. However, if the information they are getting is not consistent and correct they will close off, and it will be very hard for that organization to work with this community again.

**Bilingual Caregiver Training & Outreach**

This recommendation relates to the goal of providing adequate training and seminars for the Spanish speaking community to learn more about child welfare. This also involves finding strategies for training staff at multiple levels in numerous ways, training bilingual foster parents on trauma, and providing supports to staff to address the
secondary trauma that can result from working with children and families adversely affected by traumatic events (Conradi, 2011, p.211). One strategy to engage potential caregivers could be providing the Incredible Year education (IY) in Spanish. This intervention was developed for a wider age range of children, with versions with established effectiveness for children ranging in age from 0 to 12 (Leathers, 2011, p. 1271).

Outreach and collaboration is the key. By working with the organizations that work with the Spanish community, Child Welfare would have the opportunity to reach more Spanish caregivers. This should be a significant goal, as adding Spanish speaking caregivers to the foster care system, would allow CWS to provide ethnic compatible foster families for children to be placed with. This will facilitate the child's positive basis of appearance and group membership. A stronger and more positive connection to an individual's ethnic group predict higher self-esteem, academic achievement, psychological adjustment, coping abilities, and lower levels of depression and loneliness (Anderson, 2012, p.598).

Collaborating with these organizations also helps CWS, because the Spanish community already trusts the organizations and they will not be afraid to talk to CWS. As the Spanish community is reaching out to CWS, CWS needs to be aware of how they will communicate with this community. Numerous social work studies and literature have over the years expressed concern about the inadequate or inappropriate interpreting and translation services in social work, and the impact this has had on minority ethnic families (Chand, 2005, p. 808). Communication is one of the most important ways to
create avenues of integration and understanding for the future Spanish speaking foster parents to work with Child Welfare.

**Future Steps**

One strategy to move forward would be for child welfare or other programs serving foster children to develop a strategic plan to build interagency opportunities for collaboration with organizations and programs that are already serving the Spanish speaking community. This could establish a foundation to create new avenues of communication between the child welfare system and the Spanish speaking community. It will be important that these collaborations are approached from a space of mutual respect and with an understanding of the social structure of the communities we are working with, the organizations that are working with them and the individuals that are being affected.

Additional conversations with key service providers, as well as the hoped for future Spanish speaking care providers, would be beneficial in order to explore new themes and challenges that may arise. A similar project could be completed in the future in order to gather more detailed input and themes.

**Limitations**

One limitation of this research was the time it took to secure participation and how few people participated. Another factor was that the interview pool did not include organizations or individuals that work with the child welfare system and the foster care
system. The data would have been richer, if there was time to go back and re-interview the sample after some time had passed to see if the themes remained the same. It was difficult to find articles that discuss the challenges and barriers of Spanish speaking foster placement, this appears to be a gap in current research that is beyond the scope of this project to address. Finally, this project did not have the capacity to look into the policy side of the research question and the new statewide laws going into effect in January of 2017 regarding foster placement of children with family or other placement and what that may mean for Spanish speaking foster placements.
References


https://www.census.gov/population/projections/data/national/2014.html


doi:10.1177/1098214005283748
Appendix A: Interview Questions

What do you think bilingual caregivers need to know to be effective placements for Spanish-speaking youth in the foster care system in Humboldt?

What barriers do you think these caregivers may face?

What kinds of training would be most accessible to these caregivers?

What resources or systems may best support these caregivers?

What would be the best way to connect with the potential caregivers?

What concerns or fears might these caregivers have?

How can these fears be addressed?

Is there anyone else you think I should speak with about these questions?