

Stacy Gehringer ([00:00:06](#)):

Hello. Welcome everyone. Thank you for tuning into the CASCW Podcast Channel. My name is Stacy Gehringer and I'm the Outreach Director at the Center for Advanced Studies in Child Welfare. We are excited to share our latest podcast series with you. This series is titled Early Development and Child Welfare and features interviews with a variety of professionals in the fields of early childhood and child welfare listeners will enjoy content related to attachment culture, screening, brain development, infant mental health, and more. Please be sure to subscribe to our channel for future episodes. Thank you for listening and take care.

Tanika Eaves Simpson ([00:00:49](#)):

Hello. I'm Tanika Eaves, from Fairfield University's Egan School of Nursing and Health Studies. And I am honored to be here to have a conversation with Dr. Amittia Parker of the Georgetown Center for Health and Human Development. Today, we're going to be having some conversation about culture and sort of how culture enters child welfare work. What does culture mean? What implications does it have for working with families and identifying risk and thinking about some of the power dynamics and differentials. As well as sort of traditional norms that we've all been conditioned and trained in and how that may, hinder or prohibit effective child welfare practice. So, so happy to be with you today, Amittia. You have such vast rich experience and I wonder for you, what does culture mean? You know, what is the meaning of culture? We know that in a relationship based work, you know, we have to acknowledge culture. And we have to think about, you know, where we are positioned culturally and what that means and what does it mean for the people that we're helping? So how would you define culture?

Dr. Amittia Parker ([00:02:09](#)):

Sure. Thank you. That's a great question to Tanika, culture defining it is, is something that I think is difficult to do because it is, I would say multifaceted there's many parts of aspects to culture. So I like to describe it more so than anything. And, and for me, culture is it's a way of being right. It's a way of thinking, behaving, acting. I think about some of the different aspects such as like values and beliefs. I think about traditions, I think about music and food and dance and cultural, like patterns, rituals. I think about things that are passed down meanings, I think about spirituality or faith, right? In experiences with one's higher power. If there is a, there's so many things that go into culture for me, and I think it's really important for all of us to think about. Not only like, what is our cultural, so the personal, what is our culture and our values, beliefs, our attitudes, or thinking, or the traditions or customs or ways of being, that we hold, right.

Dr. Amittia Parker ([00:03:33](#)):

That are a part of us. And now we bring into our work because our work is personal and is professional. I bring my self into my work. And so, you know, and I think about my own culture and my, the ways that I was, the ways that I am, right. And the ways that I want to be and show up in the world, that in many ways is shaped by my culture, how I see my work, how I see the people I interact with, is all filtered through, you know, my culture. And I think that, you know sometimes people think about how culture, you know, they, they, that culture aligns with different groups. Right. And, and I see that to be so, I identify as a black African-American woman and I say black, and African-American because I am the descendant of slaves.

Dr. Amittia Parker ([00:04:23](#)):

And I think that, that naming that specifically situates, you know, my experience, my racial or ethnic origins, right. In context, in that I bring in my work, there are different ways that we talk. There are different ways that we interact with one another. The food that we eat is different. The music that we listened to is distinct, right. The way that we move our bodies. And so the way that I interact with, with people is in many ways shaped by my background experiences, my culture in, I think about cultural identity too, because I think that not only are people like connected to different types of groups. Right. But they, they identify with it sometimes in different ways. I know of people who don't want to be called black, they want to be called, African-American or Afro American or something else entirely. Right. Like, cause some people say that race is constructed. That's the oppressors language. Right. And so I think that it's important for us to also think about identity and like how we do or do not identify with certain aspects of culture. So I think that's important too, to think about how that shapes, how we think, how we feel, how we behave, how we, how we show up in our work.

Tanika Eaves Simpson ([00:05:50](#)):

So this what you really, it feels like in your illustration of culture, it's like, the lifeblood of human experience. And it's varied, it's individual, but it enters every aspect of, I think being human and being alive. Right. And so you mentioned how you bring yourself into your work. And I wondered if you'd say more about that, but also maybe in a more, in a broader sense, how does culture enter child welfare work, enter the work of working with children and families? What role does culture play?

Dr. Amittia Parker ([00:06:28](#)):

Well that's another good one that I think that our culture comes into our work in that it, it shapes how we think about the work, depending on what specific role one plays and who a person is interacting with. For example, when I interact, when I was a mental health consultant, right. Interacting directly with families with young children when I interacted with my Latino families speaking in Spanish. Right. and they experienced me as a black woman. Right. And, you know, they didn't know how to make sense of me sometimes. And so I would get a lot of questions, but at the same time, I think that being a black woman and being also able to speak Spanish, and connect with people, along those dimensions of oneself, I think being a person of color and also speaking the language, right.

Dr. Amittia Parker ([00:07:26](#)):

Knowing a little bit about, ways of interacting with people, not rushing conversations. You know, starting with the small talk. Right. I was I mean, some may say that I was breaking some rules to a certain extent in that, you know, not literally, but I knew that there were ways I needed to show up in those spaces with my families who were Latino, they'd offer me tea or water or bread like pans. Me being able to be with them and accept that right. And appreciate the gift that they were giving me to enter their space and then also to share themselves and their stories that I had to learn that was a part of the process. Right. Like, and I think that my own culture and upbringing, right. It taught me that relationships are important.

Dr. Amittia Parker ([00:08:25](#)):

It taught me that food is a way that you connect with people. And through food and drinks, like there's unspoken, there's an unspoken connection that happens in that, in that context. And it's, it's an honor when a person wants to offer you themselves, right Offer what they have, even when they have limited resources, you know, being able to just like, I don't know, sit with and appreciate that. But then to know that there's a greater, good, right? Like the relationships that I'm building and the time that I'm spending

building relationship will lead to me continuing to serve these families over time. Versus like, I know so many other folks who they could, they couldn't keep families. They couldn't keep families engaged. They kept losing families like lost the contact. They fell off the map. They, you know, I had some of the higher, higher risk, higher needs families.

Dr. Amittia Parker (00:09:25):

Right. But I was able to stay connected with a lot of them because I was intentional about my relationship building because that felt right to me. I was intentional about taking my time also, because that felt right to me. And because of, you know, I think my culture, my upbringing values, beliefs, attitudes towards interacting with people. Those things shaped me to know that even though I need to do X, Y, and Z, the timelines are there, the documentation is there. I will do all of those things. It may take me a little bit longer, but I'll do those and be able to maintain a good relationship, quality outcomes at the end. But I think that it's getting to a place where I finally decided that no, this feels right. And I know that there's alignment with my culture. And then it lead to me staying engaged with families, which I think was important as well. So that's kind of how my, I would say my culture and then like being able to tune in and, and recognize where that source comes from that desire to like build relationships, stay connected and appreciate, and honor, the gifts that people give.

Tanika Eaves Simpson (00:10:44):

Wow. So much to unpack there. You know you mentioned sort of your awareness and recognition of who you are culturally and how you identify and how that then meets with the families that you serve, but also how that might open you up to hearing their story and seeing things from their perspective. And this idea you've mentioned breaking rules, this idea of sort of, what are the professional norms, what are the organizational norms and how does that sometimes run counter to maybe what we need to do in order to develop that relationship and form that relationship. And, it raises questions of, so how do these norms get established based on whose assumptions and values and who were the norms meant to serve, right. And then, and how that that can clash with not only the cultural stuff, the lifeblood of the people and the experience that we are in service to, but also maybe who we are as practitioners. If we grew up understanding the value of relationship or intimacy or touch, or affection or food, and that, that has a place in the work, but we're trained that maybe that doesn't have a place in the work.

Tanika Eaves Simpson (00:12:13):

And how do you negotiate that? And then how do you still meet your professional standards? You know, that then say, you've done, you did this job, you know, you've completed your job. So I think that you've, just, there's, there's so much that goes on there there's so much to negotiate.

Dr. Amittia Parker (00:12:36):

Totally, There's so much gray area, right? Like even within our professional norms or standards, right. Like, I think a lot of things are subject to interpretation. And I think that because I was able to get connected with other black social workers, for example, the National Association of Black Social Workers, one entity, right. That has really shaped my understanding of my identity as Black in social work and how, there are some spaces in which there is some incongruence, right? There's some mixing of things that happen. And it places us in a place where we feel a little bit uncomfortable or uneasy. And I think that I've tended to lean towards what feels right in those gray areas. And then I can justify it. Now there are some things that actually, you know, like in all honesty, it's not gray, it's black and white, right.

Dr. Amittia Parker ([00:13:34](#)):

And the black and whites, I'm not breaking those things. I need a job. I need money to survive and provide for my family or whatnot. But I think that there's a lot of gray area and it is around some of these like more nuanced values like relationships. For example, I'll just give one example, like we in my family. When you enter a space, you speak to and greet every individual, right? You greet everybody in that space. I don't care who they are. They could be just the post-man walking by. Right. It doesn't matter. You greet everyone. And I know of other people who they were not socialized in that way, right. That's not a part of, you know, their experience and they'll walk in and say nothing to no one. And for me, that's always kind of rubbed me the wrong way only because I'm socialized in a different way.

Tanika Eaves Simpson ([00:14:29](#)):

You should come to New England, that's the norm.

Dr. Amittia Parker ([00:14:32](#)):

But you know, it's one of those things that it's interesting though, like how that works in practice. Like it's interesting how, you know, there are different clashes. Right. And I think that I tend to lean toward what feels right. Being able to justify all the decisions that I'm making and those things that come from the heart. Right. Learning about what are the standards or norms, and what does the research say? And not say, I think has always helped with my justifications of my decisions on how I show up and engage with families. And I think that's a struggle for a lot of people because they don't know the research. Right. They don't know how things like our social work code of ethics were created, and then even how they evolved over time. And knowing that history is really important so that, you know who is at the table and how those things were established. And then you can have a better understanding of how biased they really are to a certain extent. Right. And then how to proceed accordingly.

Tanika Eaves Simpson ([00:15:47](#)):

Absolutely. That makes a lot of sort of who is at the table. Making decisions really is sort of, I feel like that's a question we need to ask ourselves all the time, you know, in our practice and our work and certainly in terms of understanding policy. But I, I wanted to spend a little time talking about assumptions. Because I think a lot of what becomes normed or standardized gets based on assumptions. And on this macro level, but then individually, you know, how do, how our assumptions might influence how we interact with, or approach others. So in your mind, or in your experience, you know where do our, where do assumptions come from and how do we sort of talk about assumptions from a cultural lens?

Dr. Amittia Parker ([00:16:38](#)):

Yeah, I think assumptions, like if I'm operating from the description of assumptions, like being like those automatic or prejudgment kinds of thoughts or feelings that we have about certain things, for me, those things derived from a variety of different sources. The assumptions that I hold are a part of a really complex process. Like there are thoughts and feelings and automatic thoughts and feelings, right. That, that come from my family of origin and what they taught me or what they showed me, what I experienced. And then what did I learn in school about, you know, thinking about values and beliefs, like, what is true? What is right, what is wrong? And in those, all of those things were in many ways, like taught to me very early in life. And then reinforced in other spaces that I encountered or interacted with.

Dr. Amittia Parker ([00:17:42](#)):

So within the schools, if I was involved with, with teams or smaller communities, right. It's not just community that like the geographic community, but it's the other communities we interact with. Non-geographic. So think family, think, friends think you know spiritual community, right. I'm a person of faith. And I have, you know, I was reared within Church of God in Christ. Right. So COGIC communities. Right. And so that, that there are assumptions that were, I think, developed and reinforced within my spiritual origins. Right. Or faith-based background. Additionally, like, I think that when you think about it, where else was I at during my timeframe, you know, in high school or in college, right. Like once I got into social work, they began to socialize me to think in, feel certain things about certain people or certain ways of acting or behaving or being right in the work.

Dr. Amittia Parker ([00:18:51](#)):

And so they also, through the, I won't say rigorous process, but the process of like developing in shaping my thinking about what is ethical and what is not ethical, right. What is good and what is bad, our profession does, do a lot of that to prepare us for the workforce. And then you have lots of different practical experiences, but outside of our educational experiences, there's also the media, right. The media shapes our thinking about what is good or bad. The media also shapes what we believe to be, you know, superior, inferior, important or not important by directing our attention to certain things and not others. Right. Making us see certain groups of people as dangerous or as harmful, or as less advantaged or whatever the case may be. So the media, be it the news sources, the papers, the journal articles, or not just journal articles, but any kind of written stuff, any kind of stuff that's happening online.

Dr. Amittia Parker ([00:20:08](#)):

So the media in public press has a role in developing and reinforcing assumptions. And then I would say policies and practice too. Because the policies and the practices that are instituted in many ways, tell us what is good or bad right. Or wrong. Those policies create, I would say, an imprint in our minds about what types of behaviors are desirable or not desirable. And what's okay. And what's not. And we operate like all of us operate. I'm putting this in the context of myself, right. Personally, in how that's developed and reinforced me. But this dynamic process is a part of all of our lives. Right. And I think that when we slow down, we can begin to see like, okay, why? So I'll give you an example. I was at the store with my daughter and there were two checkers.

Dr. Amittia Parker ([00:21:04](#)):

There was one who appeared to be a white male, and there was one who appeared to be light skinned, but person of color, curly hair. I wasn't sure of she was what her race or ethnicity was, but my daughter at the time was five. And she said, mom, I know why you went to this other person, the woman who appeared to be a person of color it's because she's black. And I'm like, baby, I don't know if she's black or white or mixed race or of some other race or ethnicity. I went to her because the guy who appeared to be white had just sneezed. And we're in the COVID era. So I seen him sneeze through his mask. I didn't know what he had going on. So bam, I'm going over here to this other woman. But still like that, that my newt event, right.

Dr. Amittia Parker ([00:21:54](#)):

That my daughter stopped me in my tracks. And it made me think, did I go to this woman who appeared to be woman who appeared to be person of color because of the color of her skin, or because she felt like a person who I could feel like more comfortable or safer with, with me also being a person of color

and woman, or literally because she sneezed that I don't know, but it's possible that I chose her just based on the things. It could have been entirely true that my daughter was. Right, right. I don't know. But I think that pausing is helpful to help us think about why do we think the way we think, why do we do the things that we do? And it's not until we pause and stop and break apart these like minute events that we can really identify what are the assumptions or the prejudgments, the, the automatic thoughts and feelings that we have about certain individuals or certain situations. And then like you can, you can't undo bias that you donate, that you don't acknowledge. So

Tanika Eaves Simpson ([00:23:02](#)):

Yeah, it feels, I mean, I think that's an excellent example of sort of implicit bias, which is this new sexy term, but not really because it's, you know, it's as old as time and, and how so much of maybe what we are conditioned, you know, what we learned in home, which is often a reflection of, like you said, these other really much larger forces. And I think what's also interesting or fascinating to me is how early that happens. You know you mentioned your daughter is five years old and that she's already absorbed enough information to be able to hypothesize about why you might choose one over another is really telling about right. And so we're all subject to these assumptions, even if we're the victim, right. You know or from whatever position or standpoint, because it's everywhere sort of how we are, how we're conditioned to see people and to see groups of people and to see difference perhaps as well.

Tanika Eaves Simpson ([00:24:10](#)):

And that very often the assumption is, difference is somehow bad or negative. Right. And you're right. And how do you, it takes mental and emotional work to stop and interrogate yourself and say, well, why did I have that particular reaction? To that particular individual what's really going on there. You know, what could it be? So that's, it's just really fascinating and you're right. You can't address it until you acknowledge it. That, you know, so many people say I don't have any biases. And it's actually something that many of my undergraduate social work students will say, like, I'm just going to help whoever I need to help no matter, you know, how, no matter what the issues are, if I don't agree, or if I see things differently because you have to be unbiased. And, and that's, and I have to often gently reframe, you know, if you have a brain you have bias. And so the question is not so much being unbiased, but it's recognizing biases and challenging them and being in conversation.

Dr. Amittia Parker ([00:25:18](#)):

Exactly. Cause that's just the way the brain works, right? Like you're taking in loads of information and yeah. Categorizing people in situations without, you know, even thinking about it. And I think it's so important for especially people who are working with historically marginalized and underrepresented groups, underserved groups to really be thinking about what have you been told right. About these groups, through your family, your friends, your faith, or your if you are spiritually oriented, right? Like the institutions within that. What have you seen in the news right in the media? What have you read in these textbooks? Right. Like I think about, and this is really, it's not a new, it's not new for me because I've been critiquing cultural competence for a really long time. But it's one of those things where I'm now at the place where I'm like, we are reinforcing these assumptions in our textbooks in the way that we even do our education, like social work education sometimes.

Dr. Amittia Parker ([00:26:32](#)):

And I think we don't, we don't, we're now recognizing the ramifications of that. Right. But to also think that, like, it's not your fault that you hold biases or you're making these prejudgments, right. It's it's to

acknowledge that they exist. And even I think about how we've done diversity and cultural competence or integrating diversity at the end, you know, there's different little small things that we have done as a field in our education and in our textbooks that have continued to reinforce in marginalized, historically underrepresented groups. And I think that it's now come to my understanding, like, oh my gosh, I don't want to continue. I don't want to continue to replicate this. Right. I don't want to continue to enforce that. You can learn about, Latinx populations or immigrant populations or the Black populations. And then things that you are culturally competent, meaning that you are competent and ready to respond and engage in a way that is sensitive, responsive and, and helpful. Right. But I think that we teach, that's just the way that it's, that it, that it's framed and it's, I don't know how to do a better yet. But I do, I think that, I want to think more deeply about how I can do it better because it's so important to not continue to feed these negative narratives in the kinds of biases that we don't want, you know, the next generation of folks to hold.

Tanika Eaves Simpson ([00:28:12](#)):

I really, I love how you brought up sort of how, how, how does education inform assumptions? And I'm thinking too, you know I'm educated in social work as well. And I may have been in school before a long time before I'm thinking I'm older than you, but and remembering that any sort of discussion, like you said, it would be the end of a chapter about the Black family or the Latin X family or the immigrant family. And it will be two pages as if you, as if you could capture the depth of the experience of these vastly different groups, not to mention the variants within groups in you know, six pages. And then the, so then it's like, and who was the rest of the chapter talking about the name, this very normative way. And so these, the last six pages is sort of the deviation from the norm and how powerful that is. And it said, this is a nice segue into my next question, which has to do with power, because you talked about how the media informs our assumptions, policies inform our assumptions and policies get made based on, you know, like desirable or undesirable behaviors or who is perceived as deserving of support or help, and who is undeserving. And so, you know, how do we think about the power differential in dialogue about culture? You know, how does that factor?

Dr. Amittia Parker ([00:29:49](#)):

Yeah. You know, power is a really interesting concept, right? And it, it also has many different meanings and I've learned more over the last few years about power. And for me, I was just thinking about positions of power initially, right. And as I'm thinking about, you know, using this cultural lens to think about our own culture and the culture of those we're interacting with, but also thinking about power and how does power, um, interact with our work. I think that we have to look at power, more multi-dimensionally. So not just think about positions of power, right. Who has the purse and who you mean who has the money? Right. And who's making the decisions. But to also consider like who has the power to decide anything like, which each of us has the power to decide something, if nothing else, our own actions, right.

Dr. Amittia Parker ([00:30:47](#)):

Who has the power to change something or anything. Right. And in, when I think about it in that way, I also think about like, where, where could this be happening at, like, where could power be used, or where could power be built. Who has the capacity to decide or change that kind of a thing. And I think that irrespective of where a person's position is in the organization, most organizations these days are asking folks, what they think would be helpful, to improve an organization or just in the process of continuous improvement in staff morale or whatever, you know, keeping people happy. So they stay in

the work. Child welfare is one of those fields that has struggled with turnover. So I'm willing to bet money that they're asking people what they think and feel about the work and how to improve, the organization in outcomes of families.

Dr. Amittia Parker ([00:31:49](#)):

Right. And so I think about, you know, what are the ways in people? What are the ways in which people are using the power that they do hold if you're a direct service provider, interacting directly with families, how are you interacting with them? Are you acknowledging the power dynamics that are at play there and those interactions. Are you know, giving voice to their experience in the other spaces that you're in? So I think about how direct service providers can share what their families are desiring, or at least to say, offer space, right. If people want to know how families are doing share the power and share the space, let me invite somebody. Let me ask a mom or a parent, a caregiver, or a family member to come in and share what they think should be done differently. So for me, power, it looks a lot of ways, and I think who's in the positions of power. What do they look like? What's their experience, who has the capacity to share power and are they doing it? Are they trying to build power? Are they trying to build what could be a collective power, right. Where you shift from, you know, hierarchial, a few individuals are making decisions to multiple individuals making decisions, right,

Tanika Eaves Simpson ([00:33:22](#)):

Right. Or a partnered joint decision-making I mean, I think, you know, one of the things in your right, when we typically talk about power, it's sort of on this larger macro level of who's controlling society, but that as practitioners and for child welfare professionals, and I think they're even, they're also perceived to have a great deal of power by the families and the communities that they're working in. I mean, many times people don't even understand, and some practitioners don't understand this at first for child welfare workers, they are not the ones who ultimately make a decision about whether or not a child stays in a home. It's a judge. And it may be, it's a judge who doesn't know anything often about child development or, or the community or the home, or the realities of the face. So that's sort of another example of sort of where it was, where maybe its power misplaced, or maybe re-imagining what that power in that decision making should look like. And, and how, and how critical that is and how you absolutely have to consider culture, um, in that planning and in those conversations.

Dr. Amittia Parker ([00:34:31](#)):

Yeah, totally. I think, like I heard of. I was writing a paper with some folks on poor outcomes in child welfare for Black families and doing some research to look at what are some different models or ways of like shifting and building power within this really complex system that is operated a certain kind of a way for such a long time. And what I came across was an example of where a community decided on his own that instead of there being like one, the child welfare workers became more aware of the power that they do in fact hold in that they language, the perspective and experience of the people that they're working with. So how they write and how they talk about families does indeed matter. And they became more aware of that and also how their own biases, right.

Dr. Amittia Parker ([00:35:31](#)):

Values, beliefs, or whatnot can creep into their writing. And I thought that was so powerful, like to them making those connections. But then additionally, like in terms of system change there this community created more measures of joint decision making and accountability. And so the thing, it wasn't the child welfare worker. And then the reports then shared with the judge that was like dictating how the



proceedings would, you know, um, proceed, whatever. But in fact it was like multiple layers and multiple steps and multiple people, moist, multiple voices, including the families, um, family was amplified, right? The family voice, the family supports were amplified intentionally, and that was done to kind of like counter, um, the power dynamics, like to, you know, one of the key areas of humility is around like adjusting power imbalances, like in mitigating them where you can.

Dr. Amittia Parker ([00:36:33](#)):

Right. And so this is an example of how that could look, and I really appreciate it because one, they created some tools that allow people to think about where their own values and beliefs, ideas, thoughts about child development, thoughts about parenting could creep into the work with this rubric they created, which was very cool. But anyway, I say that to say that there are ways that communities or practitioners working visitations can, um, examine the power dynamics and also create ways to share power, build power and address just address some of those imbalances. Cause that's a barrier to like real, like, I feel like it's real change. I mean, I don't have a better way to say besides like connecting and meeting families where they are in a very authentic way, making the process really transparent and also then demonstrating that the, the process intends to help serve and elevate and support families.

Dr. Amittia Parker ([00:37:51](#)):

Because the way that it operates right now, decisions are made behind closed doors, parents' voices, especially like if you think about parents, maybe who have intersecting disadvantages, maybe they are a person of color also in poverty, like experiencing poverty, also experiencing mental health or substance use challenge. Right. What, how often are their voices really like elevated and heard in those situations or cases right. And then people really you know, I could just think of so many examples where that's happening in those parents had, they were talking, but nobody was listening. Right. They were telling them about their experiences and struggle, but nobody was listening. And so definitely then you see the family become disempowered, right. And give up. I mean and then what are they talking about? Oh, the family is no longer interested in, in, you know, the process, right. So we should move to you know, address their rights or terminate their rights or whatnot. And I think that, you know, after seeing so many families give up in their process, it to me has made me think like there's something really wrong that's happening. If the system oppresses a person in such a way to which one, they don't think they have a right to be there to, they don't think that they have a voice and that anybody is listening or willing to hear them or help them.

Tanika Eaves Simpson ([00:39:22](#)):

That's really powerful. And I, one thing that's standing out as I'm listening to you is the humility factor that so, you know, we all have, and I find this in my work with infants and families, everybody's got an opinion about babies, right? Like we all have these really strong opinions about how we're supposed to take care of babies and what that looks like and beliefs about that. And when our expectation or beliefs are violated, you're right. The response it's like a shutdown. And so then we're not willing to ask the family, oh, what, what, well, how did you come to make that decision? Or what's the story behind this practice that I'm seeing that I don't understand. And you know, it's almost this assumption or this idea that we can't learn that families have nothing to teach us.

Tanika Eaves Simpson ([00:40:19](#)):

And then if you combine that sort of almost willful ignorance with a power differential, it can, it's pretty devastating. I mean, and it's, we've seen this happen. Like you said, it's a pattern, right? Like is not, this

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is more the norm than the exception is that this is what happens in the process. Yeah. And I also wonder too, about what needs to happen or what kind of exercise needs to take place for practitioners, but also for systems to rethink this. So that the idea of like reflection, you know, where does that come into play? When we talk about culture, because I feel like broadly speaking, our culture is not particularly reflective but how do we how do we integrate that in these considerations of, of, of culture and working with families that are already traumatized and vulnerable and do not deserve to be further traumatized by the systems that, I mean, are, you know in mission statements, say that they're there to help, but perhaps in practice and policy and in historical context have done more harm.

Dr. Amittia Parker ([00:41:40](#)):

Right. Yeah. I think that's good. And even how, like, where did we go from here? I feel like one it's acknowledging that historical context trauma in home for child welfare, as a system, you know, we can't look at child welfare in isolation, right? Like there are multiple systems actually, in fact, all systems, right? All institutions have played a role in the, you know, racism in oppression of historically marginalized and underserved communities. And I think that the first thing is to recognize is this is not happening in isolation. So child welfare, serving agencies like people who are working within this context, they definitely have an important role. But to also acknowledge that, I think about this as a ripple, right. And for me, I'm not gonna lie. I feel like child welfare has a really important role because of the how do they say it?

Dr. Amittia Parker ([00:42:51](#)):

Like just the breaking apart of family breaking up part of disrupting, the damage that's been done, right. And this damage has been done by individual people, but when you pull enough like individual decisions and it's individuals in groups and then organizations, right. That are leading to these poor outcomes. And so I think that we have to think about the change happening individually, right. And then folks gathering together in groups and then organizations doing work as an organization and then like the system as a whole. And so I think that if we think about it in that way, everybody has a role. Everybody has a part to play. I think that like on the individual level being a learner understanding that one, you don't have to know everything about families, like different types of families are different, right. To be able to really be helpful.

Dr. Amittia Parker ([00:43:53](#)):

But like, how do we really practice what we preach? What we preach, like interacting with people and meeting them where they really are, not, you know, operating within like the whiteness norm in that there's only one way to raise a child. There's only one way to discipline a child. There's only one way to, like address one's mental wellness. Right. For example, there's not one way to do anything. There are in fact, many different ways. And so I think becoming a learner and also learning about how our own current practice is guided by research and theories, bodies of knowledge that also like have, for the most part been, developed and disseminated by White people and also, operating from you know, a more white mainstream perspective. So I say that intentionally, because for the change to happen, we have to be able to hear, learn from, accept, appreciate, integrate non bodies of knowledge.

Dr. Amittia Parker ([00:45:20](#)):

Non-dominant ways of doing things. And that looks like, you know, meeting people where they really are looking at theories and research that have diverse, racially, ethnically in any kind of diversity, like queer perspectives, theories and ways of being you know to recognize that because of the power

differences, right. There are issues related to dissemination of research and theory, right? And that if communities of color are not traditionally holders of wealth or positions of power, influence, then it makes sense that it would take a lot of work to find the, these gems, right. This wisdom, it takes an intentional effort to seek out non-dominant bodies of knowledge and ways of doing things. And so I would say on an individual level one, it's learning, but also being willing to dig a bit recognizing that part of the isms or the forces, right.

Dr. Amittia Parker ([00:46:42](#)):

Is silencing anything that's, not anything that does not align with the norm. And I don't want to get too political here, but I would say that, you know, there's a reason why things like critical race theory, intersectionality came up in policy as a thing they force, right. To be addressed, but it doesn't take much to find out more about those. Like non-traditional ways of thinking and understanding and making sense. Additionally, having those types of framing can help a person see and think in different ways. And if you can see a situation and think about it in a different way, then you can shift how you interact and you behave in work directly with individuals. If you can see a person, for example, and the multiple forces of oppression that are impacting them, for example, Black woman, you know, like the classism.

Dr. Amittia Parker ([00:47:45](#)):

And so like the view can see all those forces at play. Then I think that you can better understand their experience, but also like approach people with a real, just desire. The best word is culture humility. It's like just to learn and to understand, to make sense of. So the thing you can connect with a person on a real level, and then to know how to best help them through listening to them. I think that the learning piece is one, the other pieces of action and moving beyond saying something is a problem and actually creating some real strategy, like we're, we are really equipped. We are well equipped to assess problems as social workers and create treatment plans and then execute them. Right. And I think that in a similar way, we are well-equipped to assess, to learn to create a plan and execute it, and also knowing the importance of incorporating as many voices as possible. And especially those whose voices have been unheard or not heard as loudly, but who are as close in proximity to the problem as possible. We know that's the right thing to do yet. We haven't been doing it as much.

Tanika Eaves Simpson ([00:49:11](#)):

Right. And this is, you're reminding me of a brief conversation we had earlier before recording about, there's what the individual level practitioner can, and can't do. You know, there's, we've talked about multiple big forces in this conversation. But you're also getting us sort of concretely, how does one educate oneself a little? And how do we do that sort of, outside of what we are formally taught that we have to seek this information out and you're right. It's not hard to find nowadays with the internet. And then there's so many, you know, ways to access information, but having to make the time to sort of, to educate ourselves and to maybe challenge a little bit what we thought we knew, what we thought we knew, isn't really maybe perhaps what we know to be true. Are we our reality? I'm wondering, so sort of in our last few minutes, for someone for a practitioner, like what, how would they start? Like, what do you have sort of favorite resources, to get people started on that journey. And then, and what do you think are some takeaways for them to sort of hold in mind and keep with them as they do their work?

Dr. Amittia Parker ([00:50:39](#)):

Absolutely. Yeah. There's a ton of resources I could recommend. I'll try to narrow it down, but I want to say one thing just from my own experience. I really love the cultural humility framing that emphasizes

lifelong learning and critical self-reflection, um, understanding the power imbalances and in ways of mitigating or addressing that. And then the third part of that framing on culture humility is related to institutional accountability. So it emphasizes accountability. And I would add to that, like accountability on every level. Right. And so for me, a key takeaway would be ,well before the takeaway, I always say the point in which I recognize the power that I do hold, and the privilege that I do hold as being a person who is in a position to help people have positive experiences, to help with relationship to access, to be at the table where people were asking me questions that could lead to ideas and programs and solutions, right.

Dr. Amittia Parker ([00:51:55](#)):

Getting to that place was, it was enlightening because I too walked into this and thought like, I don't have any power. You know, I don't make any decisions. I'm just out here working directly with families and all the ideas that I share with them, they shut down or say, that's above my pay grade. Right. And I finally got to a place where I learned that, just looking back, I did have power and I did have influence. And I, you know, talk about like cradle to prison pipeline. I played a part in that as a mental health consultant and being called out and noticing that most of the calls that I was getting were to address challenging behaviors in Black and Brown children. Right. I noticed those patterns. Right. But I didn't at the time make sense of that. That was a part of this larger process.

Dr. Amittia Parker ([00:52:54](#)):

And also noticing that the disciplinary action right. That was proposed, and most of those cases were harsher, right. Thin blonde haired, blue eyed, little child on the other side and doing more damage. But I did not speak to those things. Right. And so looking back now, I can see how I played a role in, you know, this process. And so I think that my first takeaway is to pause and to sit with how might I be currently used as a tool in this dynamic process of racially, different patterns of interaction or thought, for different groups, how maybe has this played a role in my past work, right. Can you reckon with that? Like I sometimes come to tears when I think about how this, the role that I played in the process. And I think that even now, as I think about it, it, it makes me all, like I could feel it bubble up and decide I'm gonna take my deep breath and calm because we have to know that for the ones who are not, our lack of awareness is impacting our capacity for change.

Dr. Amittia Parker ([00:54:22](#)):

Right. And us going through the hustle and bustle and not pausing right. Is leading to us being used in different ways. Right. Like, I think that, you know, there's some radical folks have said that like the, the reckoning comes from the awakening, right? Like you have to wake up and recognize how these things work to then be able to address it. Nope. I can't go back to every child that I help move to a better place. That I helped, or every parent that I had a discussion with about how challenging their child's behavior is. Right. And who then told their child, their child was bad, or who punished them or whatever. I can't go back there. But what I can do is talk to people now about how our biases and thoughts about child development and behavior in many ways, shaped what we judged to be not okay.

Dr. Amittia Parker ([00:55:22](#)):

What we judged to be what we judged to need to be disciplined, harshly, right. And who we think needs to experience that and how that ought to look right. And we have to stop and pause and sit with those things. So for each person is to sit and pause and reflect on what, what is their role in this process? And we all have a role in that as persons of color, persons who identify as white, white, adjacent, who

benefit from that privilege. But then it's the lifelong learning to continue to learn and grow and to be confident in this, you'll never know everything about anything and that's okay. And that if we just keep approaching every person that we interact with and in the spirit of like a wanting a want and a willingness and a curiosity to know, and a curiosity, and willingness to understand, and to be helpful in the way that they want us to be helpful, I think we'll be okay.

Dr. Amittia Parker ([00:56:30](#)):

Because if we can do that, we won't be privileging certain ways of doing things. We won't privilege a person who has formal childcare over a person who says they want their mom or their sister to care for their kids. Right. We won't privilege you know, a parent who decides that instead of going to substance use treatment, or formal setting, they want to go to the church who has a group of people, right who gather, and they feel like the spiritual connection in the relationships they have with those people will be more helpful than them going to a substance use and addiction counselor, for example. That they do not know, and who does not align with their interests or experiences. And so I think that's part of it. The other part is just like in that there's sharing of power in our listening and our learning, right.

Dr. Amittia Parker ([00:57:26](#)):

There's ways that we can think about sharing and building power. And it may be to think about how can you involve more parents in decision-making? How could you, how can you literally like take a survey of the folks you're interacting with and ask them what they desire or want, and then like, use your position at the table to amplify their voices or encourage folks to seek, to hear from people who are as close to whatever is the issue, or the problem is possible. That's using power. That's thinking about building power folks have amazing ideas. Like in my research, I interviewed black mothers about mental health and the ideas that they gave me were practical. They were easy to do, and they actually don't cost that much money. And so it's one of those things that like in this, in this place where we value efficiency and we value effectiveness, why are we not asking the folks who are the most well-resourced?

Dr. Amittia Parker ([00:58:26](#)):

And like, that is a skill that a lot of people in underserved, under-resourced communities have is how to make a little go along way. Right? And so there are some ideas I know that folks can share with us. And then lastly, the accountability piece, reflective supervision groups, reflective supervision can be helpful, but also spaces where, folks can join together to create plans and hold each other accountable would be helpful and less ,let these institutions like let's hold them more accountable. We see these problems and there's a beautiful, rigorous data out there to help us know what some of the issues are. Let's, let's use this data and start holding these institutions or the organizations that we working in more accountable for creating more positive experiences, equitable, equitable opportunities and access for these communities.

Tanika Eaves Simpson ([00:59:26](#)):

So that there's so much I could sort of take from that, but that, so what I'm getting for you, and I, I sort of made a little summary myself of what you've said, because this, is really empowering to me from a practitioner perspective. This idea of first, we have to do some self-reflection and introspection about how perhaps how have I participated in the current system and the current dynamics, which I think is really painful and really difficult. And, you know, it takes a degree of courage really, to look back on that. But I also think what an amazing opportunity for repair, you know, we always talk in sort of

psychodynamic worlds about, you can always make repair on the rupture. Or for parents, you don't have to get it right every time, because there's, it's about the repair.

Tanika Eaves Simpson ([01:00:24](#)):

You mentioned sort of educating ourselves, you know, and educating ourselves and elevating voices that have been suppressed and seeking that out, seeking out alternative viewpoints and learning to take on different perspectives, which is also part of that's what we have to learn, how to do as, as reflective practitioners. Right. Listening to the families that you know, we have not, because people are under-resourced and living on the margins doesn't mean that they are not the experts on their lives and their realities and their children. And that needs to be heard and recognized and acknowledged. And so for a practitioner who might be in a situation where, like you said, they're at a table, they have an opportunity to contribute something or talk about to represent the voice of the families, you know, how can using those opportunities to do that, you know, like these are the realities that our families are facing, because oftentimes the people in power making the decisions don't know. I remember being a part of the randomized clinical trial through my work.

Tanika Eaves Simpson ([01:01:37](#)):

And you know, we had brilliant researchers and investigators leading this charge, but they didn't know a whole lot about walking into someone's home. And how do you make sense of what's happening and how do you inhabit that environment and situate yourself so that you can build a relationship so that they will ask you to come back. And needs to be at that decision-making table conversation, right. Those realities. And then you talk about sort of the, the accountability, the checking in with one another, the holding our organizations, institutions, our profession accountable, you know, what are we doing in social work, what are we doing in infant mental health or early care and education, to replicate the inequity, and then how do we make repair? How do we think about that as a system? And that comes with, with advocacy as well? So I mean, it feels to me like these are, these are tangible, real things, concrete things that we, what we, like, like I said, are, we can't eradicate poverty or change the system today, but these are all incremental steps. If every practitioner began to adopt these habits, you know, what would that look like in terms of change? I think it just holds a lot of promise.

Dr. Amittia Parker ([01:03:08](#)):

Totally. I think so, too. I think they're just keeping all of these things in mind, all though they are, they are like, it's a lot, right? There's multiple parts to it, but if I would emphasize one last thing is like, this is not simple. We will, there will be no quick fixes. There will be no band-aids that actually help address some of these issues. And so, you know, shifting our minds in our capacity, maybe that requires self-regulation right, like getting into a place where we get access to our brilliant being brilliance, being calm, being regulated. However, that looks, when you think about doing the, this kind of work, which is heavy, but getting into those spaces will allow us to hold so many things in mind at once. And I think doing it in relationship with one another, you know, for most or many people we learn in relationship with others, and for us to create this culture, a culture, right, or a space in which we do this work with different values and beliefs and conduct in customs, if you will, or norms, right.

Dr. Amittia Parker ([01:04:26](#)):

We have to do it together. And I think that doing it together will make it more enjoyable and give us the capacity to not get burnt out. Right. Cause you can get burnt out in this kind of work because this is like definitely the kind of stuff that can blow your mind. But that we can stay connected and we can do more

than just survive. But to really facilitate and see the change that needs to happen happen I think we do need to stay connected to each other and then that can help, you know, maybe open our minds up as well to the complexity.

Tanika Eaves Simpson ([01:05:09](#)):

Yeah, absolutely. And which the lifelong learning, right. Is that and I think that's true beyond, at all levels that none of us ever has arrived. Right. We're always constantly learning. We always have much to learn from others. And like you said from our relationships. And we, I think we have much to learn from others. We have not heard, and we have not traditionally listened to.

Dr. Amittia Parker ([01:05:40](#)):

Right and that's why I like the piece around, like, think about whose perspective or voices that you are listening to. Right. And whose are not present. Right? Like, have we heard from people who, you know, identify as Native American, right. Or Asian American. There are some groups of people, LGBTQ perspectives, right? Like there are some perspectives that we just do not hear enough of or from that are really important for us to learn from, and to listen to. I do think that, you know, this is another conversation, but a lot of times when we're talking about racism and culture, we are talking in Black, White binaries, and that's a struggle cause like the issues don't just impact Black people while in this country, there is a distinct story among black people in their experiences with racism.

Dr. Amittia Parker ([01:06:38](#)):

But, you know, like thinking about the intersection and folks who identify in different ways, I think that it's important to hold the varied, diverse experiences in mind, and to really continue to seek out resources and seek out relationships and seek out opportunities to engage, to expand our understanding and our knowledge and ultimately our practice. I think like a lot of people don't recognize the importance of having real relationships with people. And I always hear, oh, I have one friend who's Black, or I have one friend who's Native and I have one like, no, stop, just stop, stop doing that. Really just try to expand and get outside of your comfort zone so you can listen and learn from as many people as possible.

Tanika Eaves Simpson ([01:07:33](#)):

Right. It's about more than one relationship. Men can be a man can be married to a woman and still be sexist. So we have, we have to think broader.

Dr. Amittia Parker ([01:07:42](#)):

Right. Yeah, definitely. Yeah. This has been such a good conversation. I, you know, I really am excited about, you know, the work that everybody who's listening is doing. And even just having this opportunity has been wonderful. Child welfare practitioners in particular have such a huge role in shaping how families interact with all the, they call them adjacent services and systems. And I think that while it can be daunting at times, thinking about how one interacts with each family at a time, is really important because literally in communities of color people talk. And so if, you know, a person can have a good interaction with this entity, they may be more likely to talk to their healthcare provider. They may be more likely to talk to the people at the school. We don't know the real influence, right, that each one of you has, but just to know that your reach is broad. And so just being really intentional and thoughtful.

Tanika Eaves Simpson ([01:08:55](#)):

I think that's a fantastic note to end this conversation on. So this has been a joy and an honor. Thank you, Dr. Amittia Parker.

Dr. Amittia Parker ([01:09:03](#)):

Igualmente! Equally it's been great. Thank you.

Stacy Gehringer ([01:09:14](#)):

Thank you for listening to the Early Development and Child Welfare podcast series. This podcast was supported in part by the Minnesota Department of Human Service Children and Family Services Division.