Pennsylvania Department of Human Services Racial Equity Report – Summary

On January 21, 2021, DHS will release a report detailing our focus on racial equity and anti-racism into our programs and systems. The following is a summary of this report and our ongoing work.

Diversity, Inclusion, and Equity at DHS
DHS is a large employer in the commonwealth, with nearly 16,000 employees overall. When we consider the number of organizations and Pennsylvanians that we touch every day, DHS has a tremendous opportunity to lead both internally and externally on these issues. The work we are doing to make DHS an active player in the fight against the impact of racism and focus on equity where it is needed cannot just occur through our public-facing work.

In Summer 2020, DHS leadership held a series of conversations with staff in each program to discuss experiences of employees of color in these offices, existing initiatives and work in this space, and policy opportunities that could advance equity and anti-racism. A steering committee was established in September to guide and evaluate progress and challenges as we move forward and make recommendations to improve employee engagement related to this effort.

In preliminary conversations, staff expressed concerns about a lack of diversity in executive and management roles at DHS. Among the steering committee suggestions was a mentorship program to facilitate learning and employee development opportunities. The mentorship program under consideration will have a wider reach than DHS’ current leadership program. Work is also ongoing to encourage diversity in hiring and recruitment efforts for both DHS employees and members of appointed advisory committees.

Health Equity
Like many states across the nation, Pennsylvanians experience significant health disparities by race. For example, the life expectancy of a baby born in Pennsylvania is strongly tied to zip code. According to one report, a newborn in North Philadelphia has a life expectancy of 68 years, when just five miles to the south newborns are expected to live to 88. A Black newborn in the state is almost 13 percent less likely to receive the recommended number of well-child visits within their first fifteen months of life compared to a White newborn. Black women are three times more likely to die in childbirth than White women. The uninsured rate in 2018 was 7.1 percent for Black Pennsylvanians, compared to 5 percent for White Pennsylvanians. These disparities and others are unacceptable. DHS is working closely with HealthChoices physical health, behavioral health, and long-term services and supports managed care organizations (MCOs), providers across the health care system, and community organizations to shift our approach to providing care to deliver better outcomes to underserved communities.

DHS has been focused on health equity for some time, but many of these initiatives were led by one program office and looked at specific physical health issues. We are now working under a coordinated, department-wide approach. We are moving forward with analysis of data specifically looking for gaps, opportunities and trends by race. This is happening across physical health, behavioral health, long-term services and supports, and programs serving people with intellectual disabilities and autism. As we prioritize and better centralize and coordinate efforts related to equity, DHS is looking to improve our

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1 “In Philly your zip code sets your life expectancy” *The Inquirer*  
https://www.inquirer.com/philly/health/20160418_In_Philadelphia_your_zip_code_sets_your_life_expectancy.html
data infrastructure for continuous monitoring of racial disparities. This infrastructure will facilitate better coordination and help us refine and hold to benchmark data, goals, and progress of initiatives as they are implemented. Communities of color, like those that live in the HEZ, have also been disproportionately impacted by COVID-19, a disease that has fallen on the fault lines of our society, underscoring the critical need for this focus moving forward.

**Economic Justice**

DHS serves more than 3 million low-income Pennsylvanians. Because poverty disproportionately impacts non-White people, people of color are disproportionately served by DHS-administered public assistance programs. Only 12.9 percent of White Pennsylvanians are below 125 percent of the federal poverty line, compared to 32.9 percent of Black Pennsylvanians (a poverty rate that is more than 2.5 times higher). While Black Pennsylvanians represent 13 percent of the general population, they make up 25 percent of our Medical Assistance population, 29 percent of our SNAP population and 53 percent of our TANF population. Historically there have been clear racial undertones of the federal development and administration of welfare policies, welfare reform, and continued attacks on public assistance programs, including Medicaid, SNAP or food stamps, and TANF. DHS is committed to using its reach to meaningfully help individuals and families on a path out of poverty and advocate for people served by these programs.

DHS has spent the last three years planning a redesign of our employment and training programs, which primarily serve TANF beneficiaries, to focus on how to better support this population and assist them in moving out of poverty. For many, education is directly tied to economic mobility and unequal opportunities in education mean many TANF beneficiaries are limited in their chance for upward mobility. We are also focused on remediating barriers that too often hold TANF beneficiaries back. This is one way we are hoping to mitigate the impact of poverty and trauma on our clients, which are exacerbated when coupled with experiences of systemic racism. DHS is also working with a number of other commonwealth agencies to develop a statewide resource and referral tool, RISE PA, to connect people to services and supports that can help improve their health and well-being and address barriers in their lives. These barriers disproportionately impact non-White people and may include access to food, transportation, education, employment, child care, and housing. A more intentional focus on employment coaching, job training and education, and barrier remediation will be critical in helping economically disadvantaged communities recover from the pandemic and economic insecurity.

**Early Childhood Education**

Racial disparities in the earliest years come at a crucial time for an infant’s development and can affect children across their lifespan. Child Care Works (CCW) is Pennsylvania’s subsidized child care program that helps low-income families pay their child care tuition and fees. To be eligible, families must earn 200 percent or less of the federal poverty guidelines at application and meet work or job training requirements. Eligible families are able to choose to enroll at any participating child care provider, which can be impacted by convenience, transportation, cost and working hours. More than 50 percent of families enrolled in CCW are Black, despite making up 13 percent of the population in the state.

Previous efforts focused on quality improvement were broad, and support was provided to programs who expressed interest in moving up in Keystone STARS – Pennsylvania’s child care quality rating program – versus programs with lower quality service. The data that demonstrates that the majority of families enrolled in CCW are served by lower STAR providers and underscores the importance of using a more targeted approach to prioritize these providers to promote quality and access for all families regardless
of income. Child care is also an economic mobilizer because it allows parents to work knowing their children are safe and cared for. Beyond supporting quality improvements, improving access beyond traditional care hours is important to ensure all parents can access care, even if they work beyond the conventional 8:30 a.m. to 5 p.m. workday. Availability of safe, reliable child care will be critical to helping Pennsylvania recover from COVID-19.

**Child Welfare**
Nationally, the overrepresentation of Black children in the child welfare system has been well documented across numerous research studies. Black children make up 14 percent of the total child population in Pennsylvania but represent 21 percent of potential victims of abuse in child protective service reports. Once Black children become known to the child welfare system, they are more likely to enter foster care and stay in foster care longer than White children. Currently, 35 percent of children in foster care are Black, and Black children represent 42 percent of children who have been in foster care for two years or more. Given the trauma that children can experience when separated from their families and the impact such trauma can have on social, economic and health outcomes, racial disparities in placement rates can have long lasting effects that are detrimental to the well-being of Black children and their families.

Pennsylvania has a state-supervised, county-administered child welfare system. To achieve success, practice changes will need to be implemented in coordination with county agencies and staff, and private provider partners. Case workers directly supporting families must have an understanding of the interrelation of racism, trauma, and inherent bias that can arise in their work. Due to the connection between child welfare and local courts, these conversations must also extend beyond child welfare agencies to the other partners and systems that interact with these families.

**Juvenile Justice**
DHS’ work is closely and significantly intertwined with the criminal justice system, partially through the juvenile justice system. It is difficult to address systemic racism without talking about policing and the court system and how many youth first enter this system. Two-thirds of youth served in DHS’ youth development centers and youth forestry camps (YDCs/YFCs) in the past year are Black. This is clearly significantly disproportionate to the general population and is reflective of biases that operate on multiple levels throughout the entire juvenile court system. While placements in YDC/YFC settings are court-ordered, and DHS does not have the ability to refuse placements, we see similar data throughout our juvenile justice system. According to the data analyses conducted by the Pennsylvania Juvenile Justice Task Force, youth of color, especially boys, are more likely to be removed from home even for identical offenses, than other youth.

As in the child welfare system, youth in the juvenile justice system interact with multiple sectors and there are many opportunities and angles to address how youth are treated. The key points of decision-making and case level information need to be reviewed to see where and how targeted change can occur. This includes from the time police become involved, to the involvement of the juvenile justice system, district attorney’s office, public defender’s office, decision-making by the judge, those providing placement or treatment services and after-care. Additionally, specific diversionary programs and processes must be implemented to avoid arrest whenever possible and support youth and families in their communities. There needs to be focused partnerships and strategies with the Chief Juvenile Probation Offices and the Juvenile Court Judges’ Commission to collect data and process flow information to address the stark racial disparities of our juvenile justice system.