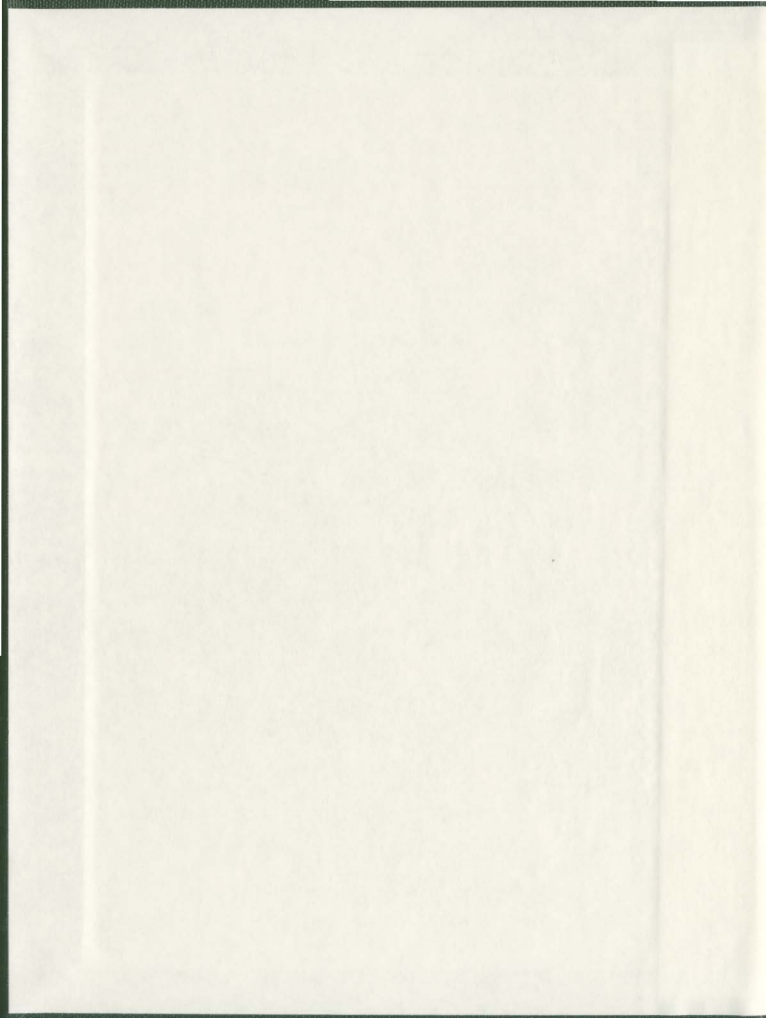# NAVIGATING MOTHERING THROUGH THE SYSTEM:
ATTENDING TO MOTHER-FRONTLINE WORKER
INTERACTIONS

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NAVIGATING MOTHERING THROUGH THE SYSTEM:

ATTENDING TO MOTHER-FRONTLINE WORKER INTERACTIONS

By

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Abstract

This research explored how mothers, who are recipients of the institutionalized social support system, felt their understandings and experiences of mothering were shaped by their interactions with system frontline workers. Using hermeneutical and critical interpretive epistemologies grounded in Feminist methodology, this research explored the negative influence mother-blaming beliefs had on mother/worker interactions. Specifically, this research found that mothers' experiences of their interactions with frontline workers were fraught with experiences of oppression and disrespect. Examples shared by the mothers, such as surveillance and living in a fish bowl; unsolicited support; trust and obey; and using personal and institutional power to disempower were all themes giving voice to mothers' experiences of mother-blame. The power differentials in worker/mother interactions were explored in this research as were the mothers' struggles between compliance and resistance to these complex dynamics. The role of frontline workers' personal values, their position as workers of the system, and the larger societal contexts within which mother/workers interactions reside were each examined. Recommendations for personal, institutional, and societal change based on the mothers' critiques of their interactions with frontline workers conclude this work.

For the mothers who participated in this research
I hope you hear your voices loud and clear

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This work would not have been possible without the unconditional support and encouragement of my thesis supervisor, Dr. Morgan Gardner. Her understanding, patience and guidance have not only developed my understanding of feminist research, it has enriched my introspection on my roles as student, researcher, mother, friend, and colleague.

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To my daughter Emma, having you in my life has been the greatest lesson of all. I now understand the extraordinary connection between a mother and child that the mothers of this research relayed. Not only has my understanding of this research enhanced since your birth, my life has been powerfully enriched . Because of you I am now emotionally charged by the injustice mother's face in our province. I love you my little miss moo.

Most importantly, I would like to thank the mothers who participated in this research. I have been enlightened, enthused, and enraged by your narratives. I thank you for sharing your stories with me and facilitating my understanding of mothering in reality. I have been inspired by you all and am thankful to have shared this time with you.

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Chapter 1: Introduction

Mothering, Mother-Blame, and Newfoundland and Labrador Society

> *[U]nderlying this rhetoric are policy choices based upon assumptions and beliefs about political priorities, human motivations, and the nature of work and family. These assumptions often receive little scrutiny by politicians and the media and therefore remain largely uncontested. In fact, the public is often told that we have 'no choice' in our public policies, which is clearly untrue. To understand the outcomes of social-program reform, it is important to analyze not only the constraints on policy making but also the implicit assumptions behind the choices that are available (Baker & Tippin, 1999 p.38).*

Have you ever stopped and wondered about the way in which you live your life? Have you ever questioned your belief systems? Or, have you ever had an experience that challenged your frame of reference? I have experienced all three of these instances throughout my journey of this thesis. Prior to my inspiration from Baker and Tippin (1999) to explore and challenge the social injustices surrounding me, I was inspired by a group of mothers. What has been interesting to me is the reaction most people have when they hear me say that I have been inspired by these women. They are not academics, engineers, or any other elite association one would link to the word "inspire." Actually, these women are typically associated with antonyms of the word "inspire."

Why is this? Because they are mothers who receive government-funded social services, such as housing and financial assistance. They are often referred to as being "in the system" in Newfoundland and Labrador. Within my earlier frame of reference, the mothers who inspired me belonged to "those people" who lived off the government because they did not want to work. People "in the system" were always shunned in my

home community. They were the ones who lived a life of luxury off the backs of the working poor (that would be everyone else in my home community).

How did these mothers inspire me? Their narratives challenged my frame of reference, causing me to stop and wonder about the way I view the world around me. Hearing stories repeatedly about the poverty they called life abolished my learned assumption that life "in the system" was luxurious. The more they disclosed, the more shocked and confused I became. Not only did they shake my understanding of their world, they also debunked my understanding of my future occupation; a frontline worker in "the system," meaning a paid professional to provide formal support to individuals and families in the community.

The mothers spoke of deeply disempowering encounters in worker-client interactions which went against all my preconceived notions. Thus I began my journey to explore these mothers' realities of the Newfoundland and Labrador institutionalized social support system, specifically their interactions with frontline workers. I wanted to know the reality of life "in the system" as well as life interacting with frontline workers. Minimally, I hoped that a better understanding would make a difference in my future interactions with people as a counsellor. From a larger scale, I hoped that maybe I could share this newfound understanding with others, beginning a larger exploration about a reality which seemed misunderstood within my frame of reference.

This research examines how mothers receiving institutionalized social support in Newfoundland and Labrador would describe its' influence on their understandings and experiences of mothering. Specifically, this research examined the understandings and experiences of mothering for members of a process group that explored intergenerational abuse. Originally, the main question for this research was "how would members of the intergenerational abuse process group describe the influence of institutionalized support on their understandings and experiences of mothering? Due to the mothers' passionate emphasis on their experiences with the frontline workers in their lives, the research question evolved to explore more specifically how members of the intergenerational abuse process group described the influence of interacting with frontline workers in their understandings and experiences of mothering? Here the mothers' interactions with frontline workers became an important landscape from which to view their experiences of the institutionalized social support system.

There are three key terms that need to be defined. First, I coined the term *institutionalized social support system* to include a variety of terms used within the literature referring to public assistance. It includes all forms of support that is external to the individual, including mental health workers (psychiatrists, psychologists, counsellors, social workers, etcetera), public sector workers (financial assistance aids, public housing officials, teachers, etc.) as well as any other sort of field that influences the daily lives of the participants and their families. Other terms such as "the system", public assistance, and welfare have the same meaning, and will be interchanged throughout this thesis. Second, the term *frontline worker* refers to professionals who work directly with the

public and are employed by the institutionalized social support system (e.g., social workers, psychologists, financial assistance workers, counsellors, doctors, educators, public officials). Finally, the term *intergenerational abuse,* also known as intergenerational transmission is defined by social learning theorists as a "cycle of violence" that is learned within the family and passed down through generations (Cappell & Heiner, 1990). It is acknowledged as a central link in the mothers association with the "bad mother" status. Further exploration of this topic will occur later in this chapter.

This research is significant and timely. First, the current provincial Conservative government has invested monies to explore and modify social policies that directly affect families who receive institutionalized social supports due to recent public criticisms of our child protection regulations. It is hoped that this research will provide a perspective to be considered during this process due to the paucity of research in this field that is based within our province. There have also been recent federal political announcements by the Conservative government stating that gender discrimination is considered a "thing of the past." This research is an indicator that it is indeed still in existence and is still affecting the daily lives of Canadian families.

Locating myself within the context of this research

There are three reasons for my interest in this topic. First, I have a personal interest in studying mothers within Newfoundland and Labrador. Throughout my life, I have watched many mothers, including my own, within my rural Newfoundland community struggle to meet the needs of their families. At a young age I observed mothers dealing with the complex issues created by the economic and social strains that were influencing our community. Many held full-time jobs in other communities, supported extended

family members, while also being the sole parent within the home due to their husbands working out of province in seasonal work. These women were not only expected to maintain the upkeep of the home, but to also balance their children's extra-curricular activities, be involved in community development, while also being a liaison between their husbands and the community. I witnessed stress and discontentment from the mothers and a great deal of judgment from the community. Each woman was criticized for the way in which they chose to balance their responsibilities. Women who expressed their feelings were considered mentally unstable and unfit mothers. It was uncommon for them to talk about the stress in their lives for fear of judgment from the community. As my mother told me many times, "women just can't win."

Second, I am a woman who was raised within an "intergenerational abusive" environment, have past experiences with formal support workers, and lived within a social community that was neither accepting nor supportive; therefore I have a personal interest in the common factors that brought the mothers of this research together in the intergenerational abuse process group. I know first-hand how significantly violence and abuse can affect a person's wellbeing and empowerment. I have experienced hardships throughout my childhood ranging from the effects of financial insecurity to child molestation, substance abuse to bullying, and peer violence. I know what it feels like to feel unsupported by social systems throughout these experiences. I have chosen to take an active part in both understanding and effecting change to better women's lives.

Finally, I have always had a great interest in being a mother. Ever since I was a teenager, I have tried to learn as much as possible about children. I particularly have been drawn towards mothers, asking questions, and trying to understand the amazing relationship between them and their children. Now that I am a mother, I have a passion to debunk limiting societal assumptions about mothering. Glorified expectations and unforgiving

judgments that are aligned with the social role of *Mother* need to be interrogated and challenged. From waitresses openly shunning me for bringing my daughter to their place of work to complete strangers readjusting my daughter in her snuggli, I have experienced the reality of women being continually constructed as not being "good enough" as mothers. For women who receive institutionalized social support, as this thesis reveals, these forms of "mother-blame" are often that much more prevalent and impeding of their lives. The concepts of mother-blame and good enough mothering will be explored in the following literature review.

Putting it into context: A literature review

The main themes presented by the mothers of this research have also been explored in academic literature. There are six themes that will be unpacked in this section. 1) the social definition of mothering; 2) mother-blame; 3) experiences of mothering and mother-blame "in the system;" 4) mothers' experiences of frontline workers; 5) the Newfoundland and Labrador context and how it relates to mothering; 6) the term "intergenerational abuse" as an example of systemic mother-blame.

1) Defining mother: An exploration of mothering

What is it like to be a mother? It seems like a very simple question; however, when trying to form an answer, it becomes difficult to clearly define. For those who are not yet mothers, conceptualizations reside with experiences of mother-figures combined with portrayals of mothering constructed within the dominant culture. Prior to this research, I would have answered this question simplistically: a mother is a woman who has given birth or adopted a child and who provides unconditional nurturance and guidance in the most gentle, loving way possible. My past belief aligns specifically with Wolf's (2001)

definition of "the American cliché 'mom and the apple pie," who stated that "[b]irth is viewed through a softened lens of pink haze: the new baby and radiant mommy in an effortless mutual embrace, proud papa nearby" (p.4). The role of mother becomes the ultimate representation of woman; kind, gentle, unconditional, white North American, heterosexual and middle class.

Understandings of mothering are not limited to physiology. Gordon (1990) stated that "[r]eproduction and motherhood are social as well as biological. The structural and cultural underpinning of the representation of women as mothers is so strong that all women are potential mothers; their *vocation* as women is defined in terms of reproduction" (p.49). Thus, there is an assumption made about the role of female, where there is an expectation that all women not only will become mothers, but yearn to become mothers as well. The celebration of *Mother* then results in the social isolation of non-mothers, either those who have been unsuccessful in conceiving, women who have chosen not to conceive, or those who live apart from their biological children (Crow & Gotell, 2000; Gordon, 1990).

Our understandings of *Woman* and *Mother* are not only socially associated, they are intertwined in the metanarrative of *Female* (Chase & Rogers, 2001). Gordon (1990) highlighted that motherhood, being a part of feminine development, is highly influenced by the stereotypes embedded in the social definition society held steadfast within Western culture. Feminist literature argues that this intertwining of social identities occur much earlier than puberty (Chase and Rogers, 2001; Gordon, 1990; Wolf, 2001). Socially,

many things associated with *Female* that reinforce a submissive ideation are introduced

in childhood (Gordon, 1990). Young girls understand their social roles as *Female* and

Mother are within this patriarchal defined context.

Based on Gordon's (1990) perspective, the world in which we raise our daughters

purposely guides their development within a social construction of their maternal side

through the environmental influences such as the sorts of gender-specific toys, television

shows and clothes. Girls who show interest in maternal activities, like playing with dolls

or beauty accessories (thus increasing their likelihood of being desirable for men in her

future) are positively reinforced (Gordon, 1990). Petite figures, long eye lashes, and shiny

hair are praised and favored within our society (Gordon, 1990).

   The complexity of mothering. According to Wolf (2001), this discrepancy between

the socially accepted fairytale and the reality is the fundamental shock for mothers

"because of the power of that image, many women feel permitted to ask few questions;

we too often blame ourselves, or turn our anger inward, into depression, when our

experience is at odds with the ideal" (p.4). Parker (1995) portrayed the constructions and

pressures placed onto women to perform such idealizations, stating:

> How a mother feels about mothering-or the meanings it has for her-are heavily
>
> determined by such cultural representations of motherhood. These, I suggest, are
>
> becoming more static and idealized as the mobility of women's lives increases.
>
> Yet- as this is important- *they are not only imposed* on mothers. We all help to
>
> maintain them. Becoming a mother inevitably entails encountering dissonances

and disjunctions between the lived experience of mothering and the sometimes contradictory yet usually prescriptive or normative ideals that mediate mothering (p.2).

Women struggle with their notions of mothering because their lived experiences do not fit the social messages they hear in everyday life. Swigart (1991) postulated that mothers feel dissonance because they know little about their role as care-giver, because of the lack of support and open communication about raising children in our society. Parker (1995) explored the concept of maternal ambivalence, stating that it stems from mothers' co-existing feelings of love and hate for their children due to the cultural restraints on open discussions about the reality of mothering. It also results in women's ill-preparation for this life change (Swigart, 1991; Parker, 1995). Women report feeling isolated, helpless, lonely, overwhelmed, depressed, and grief-stricken when they first became mothers (Hanna, 2001; Keating-Lefler & Wilson, 2004; Keating-Lefler, Hudson, Campbell-Grossman, Fleck & Westfall, 2004; Scarbrough, 2001). Single mothers also reported feeling pressured to marry so to provide a father figure after childbirth. The mothers' ability to provide a "stable home" takes priority over her happiness (Scarbrough, 2001).

Swigart (1991) also recognized mothers' struggles with the social expectation that the child's interests take precedence over the mother. Women are expected to maintain a certain level of appearance and performance regardless of the added responsibilities mothering entails (Swigart, 1991). Western society has coined the phrase "letting herself go" to describe the changes a women endures during this life change. Mothers are expected to place themselves last in their prioritizations, otherwise they are judged as being selfish; yet, they are equally judged when the effects of the lack of self-care is evident (Brown, Lumley, Small, & Astbury, 1994). This example speaks to the absence

of support, understanding, and nurturance for the primary building block of our society: family development.

Feminist literature has conveyed the message that significant social change has to occur in order to establish a supportive environment for mothering (Bashevkin, 2002; Brown et. al, 1994; Caplan, 2000; Chase & Rogers, 2001; Cooey, 1999; Parker, 1995; Swigart, 1991; Wolf, 2001). Swigart (1991) presents her argument that the current social context hinders mothering rather than empowering women:

> We must acknowledge women's competitive strivings, their desire for recognition and esteem, and their need for creative self-expression. We must be reminded that there are times when the needs of the care-giver are more important than the needs of the child. We must consider the care-giver's need for refueling-for care, nurturance, support- to counteract the insidious myth that mothers are an endless source of love and emotional sustenance. If we decide that our own goals are more important than anything else, we must know the impact this will have on ourselves and our children. Otherwise we lose the possibility of understanding and correcting errors (p. 38).

Swigart (1991) challenged the false belief that mothering is fulfilling for women, in and of itself, negating any other personal goal that a woman may have. Swigart (1991) has also given voice to mothers' necessity to recharge oneself because of the daily involvement mothering demands. In consideration of this perspective, the social pressure for mothers to place themselves last in their priorities contradicts the best interest of both the mother and child (Caplan, 2000; Chase & Rogers, 2001; Swigart, 1991).

In her exploration of the social reality of mothering, Gordon (1990) argued that there is the lack of acknowledged individualism for the mother, stating "[m]otherhood contains an ambivalent status to our society. Ideological rhetoric values women as mothers for the work they do, and mothers enjoy a certain degree of esteem, which can be experienced as positive" (p.60). Furthermore, she added "[b]ut the status is conferred to the mother as a *Mother*, not as a person, or even as a woman. The social construction of motherhood and mothers does not encapsulate the complexity of the experience of a woman who has children" (p. 60). As Gordon (1990) relayed, society struggles to define and understand *Mother*, women are esteemed from the role of *Mother*, yet women are defined and identified by this social role rather than as an individual. This realty places mothers in a vulnerable social state.

2) Mother-Blame

The term "mother-blame" is not easily defined. Caplan (2000) proposed that mother-blame is a form of sexism, paralleling it with other discriminatory phenomena such as racism, and classism; however, unlike other forms of discrimination, she claimed that it is still socially acceptable to engage in mother-blame discourse:

> In this new century, just as racism has not vanished but has taken subtler forms-
> becoming harder to pinpoint and attack- so has sexism taken subtler forms.
> Blatantly woman-hating jokes are considered inappropriate in some social circles,
> yet mother-bashing ones are not. Jokes about mothers and mothers-in-law are far

more common than jokes about fathers and fathers-in-law. It is terrible to be a
mother and know that you are expected to find them funny, that to be hurt instead
is to seem overly sensitive-or ridiculous (p.41).

Mother-blame can be viewed as a form of sexism that entails no form of social
restrictions for those who place judgment on mothers. The judgment does not limit itself
to outside bystanders; rather, mother-blame becomes embedded within the narratives and
lived experiences of mothers themselves, indicating that its' strength rests in its' efficacy
to achieve powerlessness in mothers:

Mothers in this country experience one of two kinds of powerlessness: (1) the loss
of power to influence and direct a child's life in an intimate, immediate, daily,
hourly way which subtly shapes the young child's mind and soul; and (2)
powerlessness in the outside world where ambitions can be played out instead of
lived vicariously-where action and excitement, power and money seem more
within reach, where muscle can be developed to pull one's own weight and to
influence decisions that affect both family and world (Swigart, 1991, p. 95).

This discrepancy between the idealization of mothering and lived experience has more
influence on mothers beyond self-perception. Based on Swigart's (1991) position, the
presence of mother-blame has not only resulted in mother's loss of control over their
personal preferences in their mothering style, it is a loss of personal opportunity as well.

Caplan (2000) proposed that the explicit social intention of mother-blame is to create an unequal power distribution between genders:

> First, it does so by keeping women down, ashamed, frightened; we are the judged, not the judges so insecure about our mothering behavior that we 'focus intensely on being better mothers than before-even competing with our own mothers- rather than trying to make things easier and less oppressive' for ourselves and other mothers (p.60).

Mother-blame infringes on the core of the mother-child relationship. Mothers experience mother-blame from all avenues, making the personal political, in that those types of social messages significantly impact daily living. Its presence impacts the level of security mothers have in their positioning within society, their families, as well as with themselves.

Why do women need to be subordinated as mothers? Chase and Rogers (2001) argued that the level of respect and admiration women receive because of their ability to bear children is threatening to men. They argued that it is a biological phenomenon that scientific attempts have not yet been able to duplicate; thus, men are not in a position to eliminate women from the procreation process, yet, women have had the ability for some time now to procreate without the presence of a man, as is seen in the case of artificial insemination. This is considered threatening. Caplan (2000) stated "men are afraid that if women were freed from shame, anxiety, and fear, they could wield enormous power. That frightens many people, especially men who don't want to share their power" (p. 61).

In order to keep women's strength at bay, the patriarchy must use social means to ensure security in favor of their efforts. In response to this, some feminists have chosen to refrain from using the term "motherhood" because it refers to the patriarchal definition of a mothers' experience; rather, feminists choose to use the word "mothering" because it is the actions that mothers engage with their children, that can foster women's own construction of themselves as mothers (Rich, 1986).

What is power? Because this thesis explores different forms of power differentials in the participants' lives that directly relate to their mothering through key themes of mother-blame, such as female oppression and gender power differentials, it is important to explore the meaning of power, particularly in relation to society. There is a lack of consensus in how "power" is defined. One perspective is presented by Foucault (1970) who stated, "power cannot be exercised unless a certain economy of discourses of truth functions in, on the basis of, and thanks to, that power" (p. 24). To further this point, Lyotard's (1984) concept of the grand narratives of legitimization commonly referred to as the "metanarrative" or "metadiscourse" postulates that Western civilization has created notions of being and existence that favor institutionalism, disciplinary practice, and dominating social aggressiveness, all of which reflect and favor white Western masculinity (Donovan, 2000).

According to Weedon (1987), social meaning, power, and individual consciousness are all embedded factors within language. She developed her perspective of language by illustrating how personal discourse relates to the social and political. Each discourse has a

distinctive set of criteria that determines meaning which in fact is not individually created

or controlled. Power is not a "something" that is given to a specific individual. Power is

defined by a society through the everyday discussion and language we accept and engage

in, unquestionably in everyday life (Lyotard, 1984; Weedon, 1987), including our

definition of *Mother* (Chase & Rogers, 2001).

How mothers experience mother-blame. Mother-blame is experienced by mothers

as being contradictive in nature:

> The general purpose that mother-blame serves in our society becomes evident
>
> when we start to examine the myths about motherhood and discover that even
>
> mutually exclusive myths coexist. For instance, the myth that mothers need
>
> experts' advice in order to raise healthy children coexists with the contradictory
>
> myth that mothers naturally know all they need to know about child rearing.
>
> Similarly, the myth that mothers are endlessly nurturant coexists with the
>
> contradictory myth that mothers are endlessly needy and emotionally draining.
>
> These conflicting myths serve an important function: they are all ways to justify
>
> demeaning and mistreating mothers (Caplan, 2000, p. 60).

Caplan's (2000) analysis reveals no mother can be free from mother-blame; for every

mothering choice possible that we can make, there is also an opposite belief embedded in

its' discourse to challenge that decision. Unlike other meta-narratives where social

acceptance can be gauged by following specific actions or beliefs, mothering remains

embedded in ambivalence, where every woman is left to decipher the best choice. The

social phenomena of mother-blame is complex because of the contradictions embedded in

its' discourse. Non-mothers become lost in what they believe is *Mother* and what they witness from those in mothering roles, and mothers are challenged by what society has informed them about their role and what they experience in their daily lives.

Mother-blame invokes many negative emotions in mothers when it is present in their lives. Swigart (1991) relayed the many sided dimensions of guilt mothers experience in trying to make decisions in the best interests of their children, stating:

> Guilt. Uncertainty. Trying to do it better this time around. Trying to give more. Trying to be a better mother than Mother was. In spite of such feelings or because of them, the guilt that many mothers feel is endless and tyrannical. Guilt for providing too much attention or not enough, for giving the child too much freedom or not enough, for spanking or not spanking-these feelings are common yet often hidden. The guilt of the working mother, the guilt of the mother who does not have to work, the guilt of the mother who tries to do both- work part-time and mother part-time- and feels both jobs suffer because of it; the guilt of the mother who just wants to get away from her children, but doesn't feel she has the right; the guilt of the mother who bolts, abandons her child; the guilt of the mother whose child is showing signs of disturbance, unhappiness, physical illness, the certainty you've somehow damaged your child permanently, no matter what you've done or failed to do (p.6).

Swigart (1991) acknowledged that every decision a mothering has an equally valued counterpart. This double-bind creates guilt and uncertainty for women. Swigart (1991) also portrayed mothers' resistance to the negative feelings mother-blame instills, highlighting mothers' challenge and dismissal of the idealization of *Mother* because it conflicts with their lived experience. *Mother* is also the unobtainable standard that mothers are compared with daily, resulting in resentment from mothers because of the judgment they experience based on this idealization.

Good mother/bad mother discourse. There are two concepts on either end of the mother-blame continuum: the image of the good mother and that of the bad mother. Although they are polar opposites, there is a shared thread between both discourses:

> The myth of the Bad Mother is a photographic negative of the other myth-that of the perfect, all-giving mother. These myths encourage us to believe that mothers-either loving and gratifying or completely selfish and withholding-are solely responsible for how their children turn out (Swigart, 1991, p.8).

The concepts of "good mother" and "bad mother" can be indicators of the complexity of mothering discourse. According to Swigart (1991), not only is the "bad mother" figure considered a potential danger to her child(ren), but her values are viewed as being contradictory to that of society. There are a variety of mothers who have been grouped under this category. A classic example of bad mother discourse is the American political officials' candid use of the slang term "welfare queen" (Hancock, 2003). This term is used to relay a variety of stereotypes such as "a drain on natural resources; don't work;

lazy; generally dependant; single parent family; drug user; teen mother; long duration on welfare; culture of poverty; illegitimate and an inner city resident" (p.7). They portray the message to the general public: These women are riding your coat-tails by living off of your hard- earned money.

This social image is a prime example of how patriarchal discourse influences individual livelihood, where these belief systems become the primary driving force for the social maltreatment these mothers and their children endure (Parker, 1995). The "welfare queen" is scorned in society. Social isolation and segregation are central tactics used to respond to women faced with social-economical challenges:

> 'Bad' mothers are scapegoats. By turning from them in horror, by devising laws
> to control and punish them, we can quarantine our own hurtful, neglectful
> impulses and acts. Scapegoated 'bad mothers' are also often poor, unmarried, and
> targets of racism, burdens that typically make ordinary mothering extraordinary
> difficult. But mothers in every class and social group harm their children. The
> location of 'badness' in particular races, classes, and family arrangements- or in
> female more than male parents- allows the rest of 'us' to deny the harms we have
> perpetuated as well as those we have suffered (Hanigsberg & Ruddick, 1999, p.
> x).

In supporting the rejection of the bad mother scapegoat, parents are ensuring their own security from being judged, including fathers. Without the "bad mother" as a distraction,

there would be a higher likelihood of all parental challenges being noticed and questioned. Of equal importance, the removal of the "bad mother" would alter social expectations of the mothering role. Having an extreme for comparison rises most mothers to a level of social safety from scrutiny because their challenges as parents are minor when comparing them to the situations the "bad mother" faces daily (Cooey, 1999).

The "good mother" image has an equally detrimental consequence for mothers as well. Chase and Rogers (2001) stated that based upon the Virgin Mary, the "good mother" is defined by her purity and altruism:

> We all know the ideal of the good mother. Above all, she is selfless. Her children come before herself and any other need or person or commitment, no matter what. She loves her children unconditionally yet she is careful not to smother them with her love and her own needs. She follows the advice of doctors and other experts and she educates herself about child development. She is ever present in her children's lives when they are young, and when they get older she is home every day to greet them as they return from school. If she works outside the home, she arranges her job around her children so she can be there for them as much a possible, certainly whenever they are sick or unhappy. The good mother's success is reflected in her children's behavior- they are well mannered and respectful of others; at the same time they have a strong sense of independence and self-esteem. They grow up to be productive citizens (p. 30).

Chase and Rogers (2001) presented the patriarchal purpose for the "good mother" idealization. The good mother discourse aligns itself with many patriarchal favored stereotypes. First, the mother takes the position of primary care-giver, releasing her male counterpart from this role. Second, she is able to solve the social patriarchal puzzle, if you will, and prove her worthiness by finding balance in the contradictory mother definition. Third, she seeks and abides by the advice given by "experts" who are the frontline workers of the patriarchy, reinforcing pathology (patriarchal-favored discourse) and power differentials between worker-recipient relations. Adding to this, she takes responsibility for her own education, embracing her individualism rather than adjoining with others for knowledge and support. Also, as an aspect of the primary care-giving role, she places her career secondary to the needs of her children, and finally, she proves her success through the success of her children rather than from personal achievement (Chase & Rogers, 2001). Thus, the purpose of the good mother image is to support the best interests of the patriarchy.

Caplan (2000) highlighted that mothers are equally fearful of the "good mother" status:

> Mothers are familiar with the Perfect Mother myths; even before their children notice, they see where they fall short and fear their children's disappointment. Mothers are as frightened of matching the Bad Mother myth as of failing to match the Perfect Mother ones; in both cases, they fear that their offspring's (and other people's) rejection and scorn. You'll notice the absence of a set of Reasonably Good Mother myths (despite a few mental health professionals' attempts to

speculate about the 'good enough' mother'). A mother is not allowed to make
many good efforts but be humanly flawed; she has to be perfect, because so much
is at stake-the physical and mental health of her children, for which she is
assumed to be totally responsible (p. 69).

To be placed upon a social pedestal is frightening for mothers, because once you have
risen to that status, the fall is detrimental. There is constant pressure to uphold this title,
continually having to prove worthiness. For some, their professionalism is directly tied to
this "good mother" status, fusing the professional and private together (Ladd-Taylor,
2004; Swigart, 1991); thus, to lose their "good mother" status within their private realm
threatens the mothers' credibility in her professional realm, making it even more
important to prove her status (Caplan, 2000).

Caplan (2000) offered another alternative by forwarding the concept of "good enough"
mothering. Here the aim is to be satisfactory not either polar opposites of the mother-
blame spectrum. Campion (1995) explored this notion in reference to institutionalized
social supports:

Parents may need help to become good enough parents; Self-knowledge, self-
esteem, and the respect of society help promote good parenting but may fluctuate
over time; Parents need to feel empowered in their own decision making
regarding their child-rearing-not undermined by the expertise of professionals
(p.284).

Caplan (2000) led us to believe that it is the institutionalized social support system who have been fronting the creation of this term. Campion (1995) asserted that the empowerment of mothering can only begin when formal supports relinquish the power differential in mother/worker interactions, promoting personal parental decision making instead. What is even more significant to this area is the level of mother-blame that is evident in formal support services. One area which has been researched in this topic has been the judicial system. Hughes Miller (2004) stated that the definition of *Mother* is based upon the perspectives of those who are considered "experts" in our society. She challenges the concept of "expert," stating that it's inclusion within our legal system results in stigmatization and disempowerment for mothers. The definitions shared by these "experts" are then used to guide judicial decisions, which in turn influence governmental belief systems as well; thus, the power behind the definition of *Mother* by "experts" influences the perspective of *Mother* within Canadian culture.

Research also portrays mother-blame embedded within the mental health field. Allen (2004) noted how current practitioner interventions still encompass traces of psychoanalytic methodologies, where mother-blame was a significant concept in Freud's theories of human dysfunctional behavior. Therefore, not only are mothers receiving formal support socially stigmatized as bad mothers, there is evidence that the services they receive to counter their "bad mothering" reinforces this social identity as well. Allen (2004) believed that "the maintenance of the mothering ideal and the way mothers are held accountable for the failure of intervention contributes on an individual level to a loss of confidence or self-esteem, encourages non-compliance with therapeutic strategies and enhances personal guilt and powerlessness about the child's situation" (p.9). She concluded that mother-blame in the therapeutic alliance "becomes a self-fulfilled

prophecy" (p.9) in that the helper and client both begin to believe in the same concept, and minimal to no improvement in the mother's life will result. These findings illustrate the commonality of mother-blame because it is embedded in the many beliefs, theories, and methodologies of our society and governments, and yet it is rarely acknowledged nor challenged.

3) Experiences of mothering and mother-blame in "the system"

Women who receive institutionalized social supports are stigmatized in varied ways (Baker, 2004; Hancock, 2003; Hanna, 2001; Ladd-Taylor & Umansky, 1998; Little, 2001; Nicolas & JeanBaptiste, 2001; Scarbrough, 2001; Swigonski, 1996). There are a variety of additional circumstances within this mothering/ mother-blame context that is specific to those who receive institutionalized social supports. These include negative stigma, social isolation, and the possible apprehension of their children if they are deemed "unfit" by formal support workers (Campion, 1995).

Mothers who receive institutionalized social supports experience having fewer familial and informal supports in their lives due to the social complexities these formal institutionalized supports create through association. Canadian, British, American, and Australian literature document that it is common for mothers who are recipients of institutionalized support to lose many of their informal social supports. There were many reasons highlighted for this disconnect. Families disconnected due to the shame that their relative was being judged by others. They reported fear that the mothers' social position could become a reflection on them. Friends disconnected because of their inability to accept changes in the new mothers' lifestyle. Partners disconnected due to their denial of responsibility for the newly formed family unit. Finally, communities disconnected from mothers because their pregnancy conflicted with accepted social norms (Hanna, 2001; Keating-Lefler, et al., 2004; Keating-Lefler & Wilson, 2004; Little, 2001).

The literature also highlighted mothers' oppressive experiences that are integrated within the formal supports they receive. The institutionalized social support system scrutinizes mothers to ensure the proper use of their services (Hanna, 2001). This scrutiny results in stigmatization and social isolation for the families. Anti-fraud enforcement and heightened professional intervention are demonstrations of the system's ideology that mothers who received institutionalized social supports are untrustworthy and potentially precarious to their children (Baker, 2004; Featherstone, 1999; Jones & Unger, 2000; Ladd-Taylor & Umansky, 1998; Little, 2001; Ortega, 2002). These forms of surveillance have a significant impact on mothers and their children (Albright & Tamis-LeMonda, 2002; Greaves et al., 2002; Raver & Leadbeater, 1999). Mothers reported having negative feelings, such as shame and guilt, along with increased stress and distress due to factors associated with the institutionalized support system, such as the loss of independence, loss of control over family, consequences of poverty, and malnutrition (Little, 2001; Nicolas & JeanBaptiste, 2001; Scarbrough, 2001; Swigonski, 1996).

A variety of radical measures have been taken by mothers receiving institutionalized social support in order to survive their dire circumstances. Little (2001) reported that mothers in Ontario took drastic measures in order to compensate for the cutbacks in social assistance such as sexual favors and revoking custody of children. Little also documented that mothers disclosed returning to abusive partners in order to ensure financial security because they were unable to support their children on the funding they had received. Scarbrough (2001) presented mothers' reasons for dishonestly within the system, concluding that saving their children from poverty and harm was of higher priority than obeying welfare regulations. Women were also expected to contact potential employers so to prevent losing their financial assistance, yet no support was provided for transportation in this process (Little, 2001). These policies do not provide leniencies for

women with exceptional circumstances, including pregnancy. Little (2001) documented one pregnant women died with heatstroke because she was walking in an Ontario heat wave in order to meet these standards. Although this tragedy occurred, social regulations and policies have not changed, indicating both the level of significance these women's lives have in "the system" as well as the level of accountability "the system" has within our society.

4) Mothers' experiences with frontline workers

A consistent message within the literature was the mothers' dissatisfaction with the rapport they had with the formal workers in their lives (Greaves et al., 2002; Hanna, 2004; Little, 2001; Keating- Lefler & Wilson, 2004; Keating-Lefler et al., 2004; Nicolas & JeanBaptiste, 2001; Ortega, 2002; Scarbrough, 2001; Swigonski, 1996). They reported feeling disrespected, misunderstood, judged, and mistreated (Nicolas & JeanBaptiste, 2001; Scarbrough, 2001). There were two main themes in the literature surrounding mothers' experiences with frontline workers. First, mothers reported experiencing a power differential with the frontline workers in their lives. Second, the literature highlights mothers' acknowledged lack of support from the formal supports in their lives.

The mother-worker power differential. There were documented incidences of mothers experiencing negative interactions with frontline workers. Hanna (2001) made note of young mothers' negative reactions to nurses who treated them as children rather than as new parents. The workers' attitude and unsolicited advice regarding child-care made the mothers angry and indifferent to receiving support from the nurses in the future (Hanna, 2001). Keating-Lefler et al. (2004) documented mothers experiencing workers' negative stigma because they received institutionalized social supports, where one women shared "[m]y son's doctor, he treated me like I was just this piece of crap on welfare" (p.393). It was also found that frontline workers purposefully humiliated

recipients of formal supports through words and interactions, reinforcing the negative stigma of being associated with "welfare" (McPhee & Bronstein, 2003). Women also felt as though they were a burden to the formal support workers in their lives. According to Ortega (2002), mothers whose support network was mainly comprised of formal supports felt that accessing these supports during a time of stress was inappropriate. The literature indicates that mothers experience workers taking a higher authority in their interactions which is insulting and disempowering.

Mothers' experiences of workers' lack of effort. The literature also highlighted incidences where mothers felt there was a lack of effort by formal workers in supporting them and their families. Keating-Lefler et al. (2004) reported a lack of informational support, where the mothers felt overwhelmed and frightened when bringing their newborn babies home because of the inadequate information sharing they experienced from frontline workers at the hospital. McPhee and Bronstein (2003) noted mothers' frustrations with formal workers who did not share information pertaining to the institutionalized social support system, forcing the mothers to be dependant on the workers for guidance "in the system." These authors also noted mothers' frustrations with the minimal efforts of formal workers, where the mothers' reported workers losing important papers, not returning messages, or remaining tentative to their disclosures.

McPhee and Bronstein (2003) also indicated that the mothers experienced a lack of leniency from frontline workers, who remained rigid in the systematic protocol regardless of the potential harm and danger the protocol would cause in the mothers' life. Little (2001) documented similar experiences of Aboriginal women in Ontario, where these women had to negotiate with their caseworkers for continued financial support because the required paperwork needed by financial assistance were either not issued (i.e. birth

certificates) or not an aspect of their culture (i.e. bank statements). Conclusively, the mothers did not feel supported or valued by frontline workers in these experiences.

5) How the personal is political: outlining the social context of mothers receiving institutionalized social support in Newfoundland and Labrador

There are many socio-political layers that are prevalent within this research. Studies have indicated that there are vast differences in women's experiences of mothering based on nationality (Baker & Tippin, 1999; Eitzen & Zinn, 2000; Kufeldt, 2002; Oakley, 1993). In their exploration of the Canadian welfare state, Baker and Tippin (1999) outlined the unique development of Canadian family values. They state that although Canada's policies are rooted in the commonwealth, where countries such as Australia, New Zealand, and Britain prioritize family development above all other socio-political issues, our country also aligns itself with the value systems of the United States. Commonly labeled as "the American dream," financial self-stability takes priority over the development of the family unit (Hancock, 2003; Jennings, 2004; Sidel, 2000). The merging of these two conflicting value systems has resulted in conflicting social policies as well. These policies directly impact the lives of mothers who receive institutionalized social supports because they guide the formal supports they receive as well as the social images portrayed about them.

Not only are there differences in values within national policy development, Canada further complicates its institutionalized social support system by decentralizing its' service agencies, giving each province its' own authority. Jenson and Thompson (1999) compared the development of family policies in six provinces. They noted vast differences in which provinces supported the family unit, yet through all the different supports implemented, they concluded that there still is a lack of support in child-care and

education nationally. Jenson and Thompson (1999) also stated that the manner in which the National Child Benefit (NCB) funding is dispersed differs provincially. These findings indicate that although there are nationally consistent experiences for mothers across this country, overall mothers in Canada do not receive the same level of support. It seems as though the messages that are sent to the country as a whole about the mothers in the lesser supported provinces is that they are not valued at the same capacity as those mothers living in provinces that are prospering.

Jenson and Thompson (1999) acknowledged Newfoundland and Labrador as one of the provinces that lacks the economic security to provide an institutionalized social support system without major contributions from the federal government. This financial struggle inhibits social development, where the provinces' financial allowances sustain a skeleton system (Jenson & Thompson). Mothers receiving these formal supports mainly experience support during crisis situations rather than the types of wellness and preventative formal supports that a flourishing institutionalized social support system would offer (Pennell, 1998). Thus, mothers are supported at a time of weakness rather than a time of strength.

Unfortunately, Newfoundland and Labrador's private average incomes can not compensate for the lack of formal support the institutionalized social support system has to offer. Families in Newfoundland receive higher government financial support than most of the other provinces, the incidence of low income among private households in 2000 was 18.8%, which is 2.6% above the national average (Statistics Canada, 2006). Also, according to Community Accounts (2006), half of the lone-parent families in Newfoundland and Labrador had an income less that $22,700 in 2004. This is significant when compared to the fact that half of the coupled families made more than $58,100 during that same period. For single-mother homes in our province, these statistics

indicate that there is a low likelihood they will be able to sustain their household at the level of a two-parent family.

The social and economic strains that accompany the "have not" status of Newfoundland and Labrador directly influence the livelihood of lone mothers and their families. According to Statistics Canada (2006), Newfoundland and Labrador has the lowest female participation rate in the labor force, where it is documented that 54.4% of females are active. When compared to the national rate of 61.8%, it is apparent that our provinces' economy lags in comparison to the country in supporting women and employment. This is reinforced by the statistic that 14.0% of women are currently unemployed in Newfoundland and Labrador (Statistics Canada, 2006). The current national unemployment rate for women is 6.5%; therefore, not only are there less women being active participants in the labor force in this province, a higher majority are not employed when compared to national standards (Statistics Canada, 2006). Thus, mothers in Newfoundland and Labrador may also struggle in obtaining and sustaining employment.

Based on these statistics, mothering in Newfoundland and Labrador has many barriers. First, the province does not have the formal support opportunities to empower mothering as do the "have" provinces in this country. The statistics also indicate that Newfoundland and Labrador women have less financial security to sustain their family, especially for lone-mothering homes. These realities are all encompassed within a province where employment opportunities for women are below national average; thus, our current social-political context is less supportive of mothers than those in other provinces. This reality makes mothering while receiving institutionalized social supports more challenging because of the extreme barriers the mothers face in their lives directly caused by these contexts.

6) Intergenerational Abuse: An example of mother-blame within the institutionalized social support system

The definition of intergenerational abuse. Based on Bowlby's (1973) attachment theory, intergenerational abuse is a concept that was explored heavily in the late 1980's and early 1990's in the mental health field (Leifer & Smith, 1990). Although there are different postulations regarding the direct transmission of abusive behaviors over generations in a family, commonly it is believed that a lack of attachment and the severity of abuse in childhood results in difficulty for an individual to connect and attune to their children's needs (Avakame, 1998; Cappell & Heiner, 1990; Douman, Margolin, & John, 1994; Markowitz, 2001; Milner, Robertson & Rogers, 1990).

The term "breaking the cycle" is commonly used throughout the literature to describe those who experienced abuse in their childhood and have proceeded to practice what is professionally deemed "healthy" parenting skills in their own parenting (Huefner, Ringle, & Chmelka, & Ingram, 2007). The focus of many social services supporting those associated with intergenerational abuse is to facilitate this "breaking of the cycle," (Rahman, 2003). This was in fact the case for the process group that brought me and the mothers together.

Relevance to the research. The mothers who participated in this research were linked with the term intergenerational abuse. . It is important to explore this topic because it directly links the participants of the research with the "bad mother" stigma. This stigma then becomes the reason for the mothers' interactions with frontline workers as well as their experiences of institutionalized mother-blame. The unfortunate reality rests in the extreme magnitude upon which these mothers experience these systemic biases.

In order to understand these topics in depth, I felt it necessary to explore these extreme occurrences. ,However, the topic of intergenerational abuse, itself, has been placed at the margins of this research. The concept of intergenerational abuse has been challenged by feminist theorists because it is victim blaming. As with other acts of violence such as molestation and rape, oftentimes the victim is held either partially or fully responsible for the act, although it is apparent that the woman has no control in the situation. (Idisis, Ben-David, & Ben-Nachum, 2007; Kleinman, Das, & Lock, 1997) Victim blaming causes a great deal of guilt and self-doubt due to the lack of social support they receive in their situation. This coincides with the emotional reaction to the violent act itself (Schiraldi, 2000).

In regards to intergenerational abuse, there is an assumption that those who experienced abuse will become abusers (Avakame, 1998; Milner, Robertson & Rogers, 1990; Lucas, 1999). This negative belief silences the victim because he/she fears being judged as a potentially abusive parent. The victim blaming supports the person's negative belief that there is something "wrong" with him/her, or somehow he/she is "broken" (Bass & Davis, 1994). According to Lucas (1999), these victim-blaming social assumptions do not have value in the majority of Canadian families' lives, where she stated that only thirty percent of those who experience abuse in childhood engage in abusive behaviors with their children. Based on these findings, the social belief exaggerates the reality. Mothers who experienced abuse as children are unjustly being associated with a "bad mother" label. My view of this topic coincides with the feminist literature; hence, my decision to shift the research's focus away from, what I would argue to be, a systemically defined form of mother-blame.

7) Relating mother-blame to the participants' context

Based on the two defining characteristics of the "good mother," --the Commonwealth's altruistic care-giver and the United State's financially independent woman (Baker & Tippin, 1999) often referred to within the concept of "republican motherhood"(Chase & Rogers, 2001), Canadian mothers can feel caught and disempowered in their mothering roles. The mothers who participated in this research who are associated with intergenerational abuse and receive institutionalized social supports are even more caught by this double-bind because their worth as a mother is not socially recognized in these narrow definitions. Being associated with intergenerational abuse contradicts the Commonwealth's construction of *Mother* as altruistic caregiver (Baker & Tippin, 1999). Furthermore, receiving institutionalized social supports contradict Chase and Roger's (2001) concept of the "republican mother." Hancock's (2003) "welfare queen," conjures perceptions of mothers being in control of their circumstance who have made conscious decisions to infringe on the rights of others to meet their own desires.

These are not images of vulnerability and inequality but rather constructions of women who are unwilling to be financially self-sufficient or to embrace the values of the "American dream". These images are not isolated to the Unites States. Little (2001) emphasized the Canadian Government's responsibility for the negative stigma Canadian mothers receiving financial support experience and challenged the government to take responsibility for this social scorn they have fronted for economic gain.

Newfoundland mothers on social assistance face another layer of social stigma which could be linked to Hancock's (2003) and Little's (2001) theories. Newfoundland and Labrador has the highest number of recipients who receive social assistance in the

country (Community Accounts, 2006) and has faced discrimination because of its' social standing with the rest of the country. To quote Wente (2005):

> "[o]ver the years, those of us not blessed to be born on the Rock have sent countless cakes its way in the form of equalization payments, pogey, and various hare-brained make-work schemes. (Who can ever forget the hydroponic cucumber farm?) In return, the surly islanders have blamed us for everything from the disappearance of the cod stocks to the destruction of the family unit, because if people had to work more than 10 weeks before they could collect EI, they might have to move away" (p. A19).

This statement illustrates that Newfoundland mothers on social assistance, like the American "welfare queens," are socially and politically identified as being a major cause of the countries' lack of financial success. To parallel the characteristics of Hancock's (2003) "welfare queen," to Newfoundlanders, including Newfoundland mothers; they are associated with being "[a]drain on natural resources; don't work; lazy; generally dependant; long duration on welfare; culture of poverty."

Canada's commonwealth view of mothering as the altruistic care-giver removes women associated with intergenerational abuse from the "good-mother" identity. Canada's modeling of the "American dream" locates mothers receiving institutionalized social supports as failures who lack economic and social responsibility. The belief that Newfoundlanders and Labradoreans choose to live off the government further confounds the challenges and burdens for women living on institutionalized social supports.

Summary thoughts

The literature presented in this chapter supports my area of investigation; thus, this research is grounded in the literature presented above. However, there were many themes that were missing in the literature. First, there was a lack of research that explored mother-blame in Newfoundland mothers' experiences. Second, there was a lack of research conducted that explored mothers' experiences within urban areas of the province. Included in this list was the lack of personal experiences from those who received institutionalized social supports in Newfoundland and Labrador. Finally, no research linked mothering in Newfoundland and Labrador, mother-blame, intergenerational abuse, and institutionalized social support

An overview of the following chapters

Chapter two is an overview of the method and methodology used to guide this research. Chapters Three, Four, and Five outline the findings of the research. Chapter Three explores central themes within the mothers' narratives pertaining to their interactions with frontline workers. Examples of these themes are power differentials in the mother/worker interactions, judgment and disrespect. Chapter Four explores the mothers' experiences of oppression and entrapment by the institutionalized social supports that they receive. Chapter Five explores the mothers' experiences of respectful interactions with frontline workers as well as their strengths in breaking free from the systemic oppression they experience daily. Chapter Six includes a discussion of the findings and explores some insights and implications highlighted in this research. An afterword has been included to outline the mothers' suggestions for positive systemic change.

Chapter 2: Method and Methodology

Introduction

The chapter examines theoretical perspectives that informed the research, details the research process, and the ethical issues faced in the research process.

1) Theoretical perspectives informing the research

This research was grounded in a qualitative feminist research paradigm. Within this feminist framework, I looked at two levels of comprehension: hermeneutical and critical interpretive epistemologies, both of which are presented in detail in this section. The research framework best reflects my values and assumptions as a researcher while also complimenting the research question I have undertaken.

Feminist research. According to Letherby (2003), feminist research incorporates academic, social, and political tenets within a research methodology that keeps the participants' wellbeing in the forefront:

Feminist researchers start with the political commitment to produce useful knowledge that will make a difference to women's lives through social and individual change. They are concerned to challenge the silences of mainstream research both in relation to the issues studied and the ways in which study is undertaken. Feminist work highlights the fact that the researcher' choice in methods, of research topic and of study group population are always political acts. Feminist research practice can be distinguishable from other forms of research.

> Feminist research practice can be distinguished by the questions feminists ask, the
> location of the researcher within the process of research and within theorizing,
> and the intended purpose of the work produced. (p. 5)

The main tenets of feminist research that were used to guide the research process are highlighted in this definition. There were four in total that were engaged in this research. First, the *research should benefit the participant*. This research was beneficial to the mothers in a number of ways. First, the research was conducted to value the mothers rather than objectify them. Hesse-Biber and Leckenby (2004) noted that "feminist researchers typically generate research that is for women, rather than about women" (p. 213). Second, it provided an avenue for their narratives to be heard. Conducting respectful research becomes the forefront of feminist research where oftentimes the purpose is to give voice to marginalized groups who have been silenced in society and in mainstream academia. Devault (2004) stated that preserving and respectfully presenting women's voices counters societal oppression. The decision to integrate hermeneutic methodology within the foundation of this research was to in fact capture and project the participants' voices, as is, to the reader. As a brief definition, hermeneutics is the act of interpretation which concentrates on meaning-making through dialogue.

Not only do feminist researchers consider giving voice to participants as a positive highlight, the literature also highlighted the potential benefits the participants themselves experienced through their participation. Stuhlmiller (2001) relayed that the experience of participating in qualitative research alone has the potential to engage in therapeutic transformation:

Telling a story about oneself can be an experience of healing and growth, and participation in narrative research can be seen as a method of telling one's story. It is the change (healing and growth) that can occur from telling a story and being heard by an interested listener that I define as therapeutic transformation in the narrative research context. (p. 66)

Hesse-Biber and Yaiser (2004) further this point by stating: "[t]here is a strong emotional component that is drawn into research when flow is achieved and listening is part of the method. Listening empowers the participant and engages the researcher to be present" (p. 217). Thus, conducting gender sensitive research; actively listening to lived experiences; and presenting the women's lived experiences, where the researcher has the participants' best interests in the forefront of her values can result in beneficial research experiences for the participant. I believe this research did in fact follow suit with these tenets of gender sensitive research.

The second tenet of feminist research used to guide this research states that *feminist research provides a way to engage social change*. This research counters the false social beliefs about the lifestyles of mothers who receive institutionalized social support by highlighting the difficulties they face and the active participation they engage in to take control back in their and their families lives. By presenting this silenced point of view, it is hoped that social awareness will counter the mother-blaming attitudes that exist in the mother's lives as well as facilitate policy changes within the institutionalized social support system itself to empower rather than oppress those who receive its' services.

Feminist researchers extend the notion of respect integrated in the research process to include a need to engage authentic social and structural change. This point was emphasized by Olesen (2005) who relayed the importance for feminist researchers to enhance the findings of the research more broadly to ensure positive life changes do occur in the participants' lives; thus being informed of social injustice becomes the beginning of the researchers' path rather than the end of the research process. Harding (1991) has named this tenet "emancipation," where increasing knowledge within society has a goal towards political change rather than paralleling with what is valued within the dominant power-holders.

According to Olesen (2005), feminist researchers must influence the understanding and creation of social policy that directly impacts the daily lives of their participants. She also highlighted feminist researchers' responsibility to raise public awareness about the governments' part in the oppression, marginalization, and extermination of participants' voice and power in society. My intention is to present the findings of this research to members of parliament who are directly responsible in creating public policy and engage in dialogue regarding the mothers' experiences. I also intend to seek further academic publications to increase awareness of this issue within academic circles.

The third tenet used in this research states that *individuals are active agents of their lives*. Kincheloe and McLaren (2005) articulated that there has been a shift in qualitative research in the way participants are understood. Post-modern approaches, which include feminist research, understand participants as being directors in their lives who

amalgamate lived experience and intellectual knowledge. Participants become the forefront of the research rather than the "subject pool" or "general population" (Hesse-Biber & Leckenby, 2004; Reinharz, 1992) or as Chase (2005) would state it "feminists approached women as subjects rather than objects" (p. 655). Rather than positioning the researcher as the person of "expertise," there is a fundamental shift in philosophy seen in feminist research where the participant becomes the knowledgeable leader guiding the researcher.

The mothers that participated in this research were active agents in their own lives as well as the research process. I chose the research topic based on my experiences of the mothers' narratives during the intergenerational abuse process group. Because I was not yet a mother at the time of the interviews, I queried the mothers' experiences from a not-knowing stance. Finally, my experiences of formal support services within my rural home community differed drastically from the mothers' experiences of formal supports in more urban areas of the province. As with the former point, the mothers remained in the forefront of the research.

The shift in philosophy highlighted above segues into the fourth tenet which states that *feminist researchers acknowledge power issues between them and the participant.* Chase (2005) contended that feminist researchers must duly ask themselves questions such as "how does power operate in the research relationship?" and "who should get the last say" (p. 655) in order to increase awareness of potential oppressive interactions as well as the potential consequences participants might face because of their involvement. According

to Letherby (2003), feminist qualitative research embraces the development of participatory research models stating: "the best way to find out about people's lives is through non-hierarchal relationships where the interviewer is prepared to invest their own personal identity in the research relationship, answering questions and sharing knowledge" (p. 83).

From the choice in topic, themes, and questions, to the manner in which researchers choose to present participants' narratives, Chase (2005) affirmed that awareness and sensitivity is needed on the researchers' part to ensure empowering experiences for participants. Hesse-Biber and Leckenby (2004) stated that the facilitation of respectful and empowering research will result in findings that highlight the participants' personal strength and resiliency in their lives.

Participants in this research initiated the research topic through their disclosures during the intergenerational abuse process group, informing me repeatedly that the way in which formal supports are involved in their lives must change. They also made the final decision on the interview schedule, chose the location of interviews, created their pseudonym profile, edited their transcripts, and highlighted the main topics they wanted to see included in the research document. Most importantly, the mothers shifted the focus of this research from the institutionalized social support system to mother-worker interactions through their disclosures regarding how they experienced "the system" through the frontline workers in their lives.

Hermeneutical perspective. The feminist tenets guiding this research were engaged in this research through a hermeneutical perspective. Hermeneutics postulates that meaning is a mutually negotiated act of interpretation rather than a discovery of a researcher about a participant (Schwandt, 2001). Philosophical hermeneutics views understanding *as* interpretation, seeing it as the experience of human life rather than a procedure of in depth analysis and resolution (Schwandt). This methodology is relative to the most basic forms of everyday life: the conversation. According to Gardner (2003), "[h]ermeneutics is interested in uncovering the meaning people give to their experiences" where "[i]t is engaged in understanding experience from the experiencer's vantage point" (p. 34).

In order to relate hermeneutics to this research paradigm, it is important to note that it is not limited to spoken dialogue, rather a persons' engagement with written text is also a crucial element of this epistemology. Hence, the researcher's interpretation is based upon two methods of understanding, the first being her interaction in conversation with the participant, and the second being her interaction with the transcript of the researcher-participant conversation, all of which are based in a social-cultural context (Gardner, 2003). In this research I sought to understand the mothers' experiences from their own perspective. This lens was important because the mothers' voices have been silenced in relation to the larger social discourse. Therefore, in trying to understand their experiences of mothering, we need to start with these experiences as the primary point of departure. Chapters Three, Four, and Five highlight the mothers' experiences of frontline workers through this hermeneutical perspective.

Critical interpretive perspective. The feminist tenets guiding this research were also engaged in this research through a critical interpretive perspective. Critical theory provides a lens which can be used by researchers to explore and understand social structure. This epistemology is used to understand power differentials between individuals and/or groups, determining who is empowered and who is not empowered in each social circumstance (Kincheloe & McLaren, 2005). For a researcher, a critical interpretive lens integrates the socio-political perspective into the research, aiding in the postulation of how these factors shape every element of the study. In their words, Kincheloe and McLaren (2005) believed that "[a] critical social theory is concerned in particular with issues of power and justice and the ways that the economy, matters of race, class, and gender, ideologies, discourses, education, religion, and other social institutions, and cultural dynamics interact to construct a social system" (p. 281).

A critical lens therefore allowed me as the researcher to make inequalities faced by the mothers explicit and to situate them within the larger social contexts and discourses operating in and on these women's lives. This allowed me to not only examine the mothers' experiences from their own point of view, but also to examine the different forces and factors operating with these women which are shaping these very experiences and viewpoints which are articulated by the mothers. By bringing hermeneutical and critical interpretive perspectives to the research, I was able to render a better understanding of these mothers' experiences of mothering in relation to frontline workers.

2) Meet the mothers

This section will include the mothers' family pseudonym information. It will also include pertinent information from the mother's narratives that are referenced throughout the findings chapters.

The pilot mother: Nancy

Nancy is a 40-year-old woman married to a man named Chris. They have two children, a 10-year-old son named Chris and an 8-year-old daughter named Allison. They all reside in the same household in a public housing unit. Nancy only participated in the pilot interview.

Ellen

Ellen is a 37-year-old woman in a committed relationship with Adam. They have two children, Mary is their 8-year-old daughter and Jason is their 3-year-old son. They all reside in the same household in a privately rented unit, but did live in public housing for a number of years. Ellen participated in an individual interview as well as the focus group.

Kelly

Kelly is a 32-year-old woman in a committed relationship with Brian. Kelly has two children, an 11-year-old son named David and a 5-year-old daughter named Cathy. During the research process, Brian and Kelly were not living together because of the systemic financial implications co-habitation would create. Kelly and her two children live in a public housing unit. She disclosed that she had lost custody of her children at one point in her life. At the time of our interview, she did have full custody of her children with support of a foster family who provided periodic childcare. She relayed having a file with child protection services. Kelly also disclosed having a daughter when

she was a teenager, who she placed up for adoption. Kelly only participated in an individual interview.

Faye

Faye is a 30-year-old woman who is in a committed relationship with Melvin. She has three children. She has a 9-year-old daughter named Carley from a previous relationship. She shares her son 3-year old-Geoff and 1-year-old daughter Maggie with Melvin. All members of this family reside in the same household in a public housing unit. Faye disclosed that she had a file with child protection services during the research process. Faye participated in an individual interview as well as the focus group.

Annie

Annie is a 25-year-old single woman with two sons, 4-year-old Lucas and 2-year-old Michael. During the time when this research was conducted, Annie had lost custody of her sons and was working towards bringing her boys back home. Annie resides in public housing. Annie participated in two individual interviews, one which followed suit with the other mothers' individual interviews, and another that covered topics discussed in the focus group.

Sue

27-year-old Sue is a single mother of two children, 11-year-old Tom and 4-year-old Melanie. This family unit all resided in the same household in a public housing unit. During our interview, Sue disclosed that child protection services were actively in her life. Sue only participated in the focus group.

3) The intergenerational abuse process group

The intergenerational abuse process group was offered by a community health social service in the province. It was a two-year process group for parents who experienced violence in their childhood. In order to meet the criteria for the group, parents had to fill out a questionnaire that queried their experiences from childhood along with their reflections on their parenting. They also had to participate in a pre-group interview with the group's facilitators. Parents either had to be considered high-risk to abuse by formal support workers or were mandated to attend due to their acts of systemically defined child abuse. The group was structured to incorporate group counselling with psycho-educational sessions that introduced various topics pertaining to parenting. Although the program is structured for both genders, the session that the mothers and I attended only had women participants.

4) The research process

The selection of participants. There were six mothers in total who participated in this research. I recruited participation from the intergenerational abuse process group that I observed as a graduate student. In order to participate, potential participants had to meet specific criteria. First, they had to be mothers; second, they had to be members of the intergenerational abuse process group; third, they had to receive institutionalized social supports; finally, they had to give consent to participate. The population size who met these criteria was nine women. All participants were informed during the beginning of the international abuse process group that my intention was to conduct research. They also signed consent forms from the St. John's Health Region for me to observe the group

for educational purposes. Because I was no longer observing the group during my recruitment phase of this research, I asked the senior social worker facilitating the group to pass around a contact sheet during group time, requesting the mothers to provide their contact information if they were interested in participating. I then collected this sheet from the social worker at a later date.

Issues of consent and anonymity. The informed consent process of this study coincided with what was approved by the ICEHR. First, the mothers who signed the contact list mentioned above were contacted via telephone. During this conversation, I outlined my research intentions, the time frame and tasks their participation would entail, along with my contact information. During that time, I asked for permission to send an information package to the mother (See Appendix A), and discussed how they would prefer future contact. For those who requested that I contact them, I made an initial call two weeks from the date the information packages were sent. For those who chose to call me, these conversations occurred during our first interactions.

There were a number of topics discussed during our initial meeting. First, the mothers' rights to confidentiality and anonymity were explained. We both reviewed the information letter during that time, and I answered any questions that they had. I also stressed that their participation would not impact the counselling services they were receiving from the intergenerational process group, nor would anything discussed be repeated to the social workers facilitating the group. The mothers were provided with an identifying characteristics form in their information packages (See Appendix B). The

mothers were asked if they would like to create a pseudonym profile for themselves and their families. If they did not wish to do so, I informed the mothers that I would fill out the forms with pseudo information so to ensure their anonymity.

At the end of our initial meeting, the mothers and I re-explored the information letter and the consent form. For those who requested, I read these documents out loud at this time. After this process, the mothers and I explored the support action plan. Once supports were explored and the mothers' questions and comments were addressed, the mothers and I signed two consent forms. One copy was given to the mothers, and the other copy was added to the mothers' file.

Support action plan. During our initial meeting, the mothers and I discussed potential informal and formal supports that they would feel comfortable with if they felt that they needed support for issues that arose from the interview. I provided them with a handout of contact information for formal supports within our area if they did indeed feel the need to debrief. I then explored how I could be a support during this process. First, I asked the mothers if they felt comfortable if I called them two to three days after our interview to check on how they were feeling about our interactions. I also offered to help them connect with their chosen support after the interviewing process. Finally, I asked them how I could remain respectful during the interviewing process, which included an overview of the interview questions. During this time, the mothers indicated which questions they preferred to answer on the interview schedule. The mothers were given a

copy of the interview schedule for further exploration, and plans were made to solidify the support action plan before our mutually decided interviewing date.

Conducting interviews and focus group. The interviewing process consisted of semi-structured individual interviews and a focus group. All interviews were audio-taped and transcribed by me. The location for the individual interviews was selected by the mothers during our initial meeting. The three areas chosen by the mothers were their homes, my home and the St. John's Memorial University of Newfoundland campus. There was one mother who gave consent to be a pilot mother in the individual interviews. The additional piece to this role was to provide feedback about her experiences of the interviewing process so to increase my awareness of sensitive issues. Following the pilot, four other mothers were individually interviewed.

a) Individual interviews. The interviews ranged from one and a half to two hours in length with each mother taking a ten minute break mid-way. The semi-structured individual interview questions covered 5 main themes: mothering; mothering and transition; mothering and support (which included the subheadings informal and formal supports); mothering and intergenerational abuse/violence; and final questions (See Appendix C). Questions exploring these themes were engaged in a conversational manner which allowed for both flexibility and structure in the interviewing process. Wincup (2001) reflected some of these benefits that I experienced in engaging semi-structured interviews:

Straddling the divide between 'standardized' and 'reflexive' interviewing, semi-structured interviews allow women to introduce issues they would like to discuss and therefore help interviewers gain insight into the most important aspect of women's lives. The use of an interview schedule provides the Interviewer with a clear agenda, allowing particular questions to be asked to ensure comparability and to facilitate data analysis by identifying some initial themes (p.23).

Like Wincup (2001), I found this interplay between structure and flexibility supportive of my ability to maintain reflexivity in feminist research. Namely, the open-ended aspects of the semi-structured interviews allowed the women to bring forth the significance of their relationships with frontline workers across all five themes explored in this research. As such, questions across the interview became adapted to give space for the mothers to narrate the ways in which frontline workers were shaping their experiences as mothers (See Appendix D). As cited in Chapter One, it was this process of listening to the mothers' stories which led me to focus the findings of this research explicitly on these interactions. The mothers indicated that their experiences of the institutionalized social support system were most extensively experienced through their daily interactions with formal support workers; thus, the frontline workers materialized the institutionalized social support system in their lives which then became the lens for me to understand the other themes being explored in the research.

b) Focus group. One focus group was held during this research. The focus group took place at the same community center as the intergenerational abuse process group.

There were a number of reasons why this location was chosen. First, the center provided childcare for the mothers. They indicated during our initial interview that they felt most comfortable leaving their children with these professionals. They also preferred to have their children play in a familiar and comfortable environment. Second, the mothers also had pre-arranged transportation to this location. Finally, there was a two week break of the intergenerational abuse process group, so the focus group did not interfere with their counselling; rather, we were able to take advantage of the fact that all the mothers' schedules coincided for that specific timeframe. The mothers were also provided with healthy snacks and beverages.

There were three mothers who participated in the focus group. One of these three mothers chose to only participate in the group itself; therefore, we did not conduct an individual interview. The other two mothers participated in both. The focus group was 2 hours in length with a ten minute break midway.

There were a number of reasons why I decided to conduct a focus group. First, I believe in the empowerment of mutual interaction. Madriz (2000) spoke to this reality:

> Focus groups can be an important element in the advancement of an agenda of
> social justice for women, because they can serve to expose and validate women's
> everyday experiences of subjugation and their individual and collective survival
> and resistance strategies....Group interviews are particularly suited for
> uncovering women's daily experience through collective stories and resistance

narratives that are filled with cultural symbols, words, signs, and ideological representations that reflect different dimensions of power and domination that frame women's quotidian experiences (p. 836-839).

The focus group provided the mothers an opportunity to engage their context with others who shared similar experiences in their lives. I hoped that this opportunity would counter their feelings of aloneness associated with the social marginalization influencing their lives. The focus group also provided me with an opportunity to understand the institutionalized social support system through the mothers' perspectives. As a way to actively engage the mothers in the critical interpretive process, I used a semi-structured interview schedule to facilitate the mothers' critique of the institutionalized social support system (See Appendix E). As with the individual interviews, this process facilitated the mothers' discussion of their experiences with frontline workers, and additional questions were included to explore these avenues (See Appendix F). The mothers collectively examined the system and their relationship with frontline workers. The focus group provided me an alternative lens to the material shared during the individual interviews through the mothers' articulation of similarities and differences across their narratives. According to Morgan (1997), focus groups are interviews that involve interactions and responses of group members in relation to the topic being discussed. Thus, the narrative of the focus group relays information beyond the words that are spoken, where group dynamics and interactions become equally valuable. Finally, the focus group addressed power differential issues within the research.

c) **An additional layer.** During the initial interviews, one mother made the choice that she did not want to participate in the focus group; rather, she wanted to explore the topic in a second individual interview. All the mothers were given the option to participate in the research in a way which best suited their needs. I explored with all the participants the different ways in which alternative participation would look like in our initial conversations. I did not solicit this form of participation because I did not want to compromise their right to choose. Only those who initiated this form of participation became further engaged in this process.

We arranged this interview at the St. John's Memorial University of Newfoundland campus. The interview was two and a half hours in length, and the mother took one fifteen minute break. Other breaks were offered but the mother chose to proceed. This second individual interview followed the same themes as the focus group with one exception. I added the question "how important do you think it is for women to have others to vent to about similar issues?" to the interviewing schedule. My reason for doing so was to engage her perspectives on how mothers interact with one another as well as how institutionalized social supports influence these interactions.

Data analysis. The data analysis process was emergent and complex. Mauthner and Doucet (1998) gave voice to this complexity, stating "we recognize that 'data analysis' is not a discrete phase of the research process confined to the moments when we analyse interview transcripts. Rather, it is an ongoing process which takes place throughout and often extends beyond, the life of the research project" (p.124). My

experiences with the data are reflective of this perspective. In this complexity, I want to delineate some of the key strands of my research analysis.

A significant part of the analysis was the time I spent reading and reflecting on the transcripts. Here I allowed myself to sit with their experiences and words to get a sense of their narratives as a coherent whole. During this process, I jotted down notes and reflections that came to mind while also beginning to attend to the central themes that orientated the interviewing process. This emersion in the data readied me to begin reflecting on the data in a more concerted and structured manner. I now re-read the interviews by explicitly attending to the main and emergent themes relayed during the interviews. This process involved coding the mothers' narratives based on the central themes explored across the interviews. Each theme was given a color and the scripts were color coded. The purpose of this process was to examine aspects of the women's narratives which related to these themes. This allowed me to gain a richer understanding of women's experiences of these themes both individually and collectively. Relevant quotes were then compiled into respected documents by theme, preparing me for another layer of analysis.

I then chose to create visual representations of the documents. I used concept maps to further organize the themes into sub-themes based on the central points expressed by the mothers within each of the main themes of the interviewing schedule. According to Griffiths and Nakonechny (2006), this method of data organization enables the researcher to examine the inter-relations of the themes most efficiently. This visual graphic strategy

provided structure to the rich data involved in this research, and organized my understanding of mother/worker interactions. Furthermore, Francis (2006) relayed that concept maps facilitates a more intimate connection between researcher and the data because the mapping of themes allows for a more holistic interplay.

The graphing displayed tertiary branching, where the sub-themes did in fact expand to a third level depending on the topic. While the concept mapping process helps build a richer understanding of women's experiences, it also led in other ways to becoming more abstracted from women's voices. It was through this process that I understood more fully the extent to which the frontline workers represented the institutionalized social support system for the mothers. Although I explored these interactions in the interviewing process in depth, I had not understood its' significance until this stage of the data analysis process.

Following the concept map exercise, I went back to the transcripts to include the mothers' words and descriptions in the appropriate sections of this visual representation of the research. According to Birch (1998), the analysis and writing process following narrative interviews is messy for the researcher. She relays that the consolidation process of is one of great difficulty where researchers must find a balance in reflecting participants' voices in a manner that is most representative of them while also speaking to the research topic. I felt that this process would sustain the mothers' voices in the research while also recognizing and honoring the messiness that Birch is referencing.

The final layer of the data analysis process was engaging a dialogue between my analysis of the mothers' accounts and the literature. Letherby (2003) referenced the importance of this rebalancing process. Revisiting the literature enabled me to move with and beyond the women's experiences and helped me to develop a critical interpretive analysis of what the mothers were encountering.

3) Ethical issues

Informed consent. Olesen (2005) highlighted that feminist research thrives to embody empowerment and values in its' practice. Here, respectful, non-oppressive "relationships with participants lie at the heart of feminist ethical concerns" (p.255). Feminist research engages the study of social inequalities in order to challenge and change these ideologies and practices. In soliciting the voices and experiences of those facing these inequities, feminist research places concerted priority on not replicating these inequitable power dynamics within the research process (Edward & Ribbins, 1998). The informed consent process plays an important role in building respectful and empowering relationships with participants. As Smith (2005) contended, this is not easy to address. The social pressures and influences remain an equal agent in the informed consent process; where participants may in fact follow through with the motions of the informed consent process but still in fact do not wish to participate:

> [T]he consent form makes the power relations between researchers and researched concrete, and this can present challenges to researchers and researched alike, with some participants wanting to share their stories while others may feel compelled to share. The form itself can be the basis of dialogue and mediation, but the

individual person who is participating in the research still must sign it (Smith, 2005, p.99).

Because potential participants experience the researchers' need for individual participation it may be difficult for the individual to deny participation and even more difficult to withdraw from the study once the process has begun (Edwards & Ribbens, 1998; Olesen, 2005; Smith, 2005).

Ethical issues remained in the forefront of my considerations during the informed consent process. First, I included additional steps during the solicitation process to give the mothers opportunities to decline participation without experiencing my reactions or responses to their decision. Examples of these steps were the circulation of the sign-up sheet without my presence and my request for the mothers to contact me to arrange an initial meeting. Within every conversation I had with the mothers, I asked them to specify for me how they would like to engage contact for out next interaction. Some mothers chose to call me, while others requested that I would call them. If this was the case, I would ask for them to indicate a certain date and time that would be convenient for them. If I did not make contact with the mothers at that time, I would leave my contact information and indicate that they might call me. I made a rule to only conduct one follow up phone call, two weeks following the initial phone message to address the possibility that they did not receive the prior message while at the same time not exerting under pressure. Requesting for the mothers to choose an interview location was another method used to address potential coercion. Adding neutral locations such as the

university campus provided an opportunity for the mothers to decline participation without directly speaking to me about doing so.

During the informed consent process, a great deal of time was spent exploring the research topic and process. Potential consequences to participation were discussed and the meanings of informed consent were explored with participants. The support action plan was included in these discussions and participants' well-being was kept at the forefront of research process. I shared my concerns about the potential issues that may arise for them and queried how they would cope if in fact they did experience a reaction. For instance, I asked each mother for permission to contact them a few days following their interviews. I contacted those who gave verbal consent following individual interviews and the focus group to ensure that they did not have negative experiences due their participation.

Addressing my dual role. The most complex ethical concern within this research was my dual role of student observer/researcher in the mothers' lives during the intergenerational abuse process group. When the group began, the mothers were informed that my purpose was to create a research topic based on my observations and solicit their participation in the research itself. Although my main roles within the group were not therapeutic in nature, I was in fact a part of the group and my role as learner and researcher was in fact engaged within the group dynamic itself.

My central concern throughout the entirety of this research was the influence my presence and the research itself would have on the mothers' experiences of their counselling process. This ethical concern is not limited to this research study. Gilbert (2001) contended that engaging qualitative research within the helping profession blurs emotive boundaries for the researcher:

> There may be additional complications regarding boundaries for clinicians conducting qualitative research. For those trained as clinicians accustomed to working with single clients and families on an ongoing basis, the need to remain immersed in the phenomenon over time, may cause them to feel scattered and caught between roles. In addition, ethical guidelines of professional organizations advocate against dual-role relationships, and therapists may feel pulled between their role of therapist and that of researcher (p.13).

Stemming from these challenges articulated by Gilbert's (2001), myself and my supervisor made the decision to end my student observer role once I had solidified my research topic to prevent possible dual role complications. To further address the matter, I allowed over a month to pass before soliciting participation to give the mothers time to adjust to my absence within the group, as well as aid in the transition of their perception of me from observer to researcher.

I also ceased my interactions with the group facilitators during the research process. This decision was in support of the mothers' confidentiality, decreasing the likelihood of myself or the participants being queried about the research process. This decision also aided in severing the link between the research and the intergenerational abuse process

group. It was important that the mothers could participate in the research without influencing their counselling experiences. It was also equally important that the mothers felt safe in speaking freely about their experiences of the facilitators of the group because they were actively engaged in their lives during the research period. I shared all of these reasons with the mothers on my last day of participation with the intergenerational abuse process group as well as in our pre-interview conversations.

Throughout the research process, I remained conscious of the power differential between the mothers and me, and engaged various ways to support the mothers in playing an active role in the research. I provided the research questions in the information packages for the mothers to consider and revise according to their comfort levels. I also provided the mothers with the interview transcripts so they could inform me of sections that they would like to delete or revise. I always referred to the research process as a mutual project, because I did in fact believe this was the case. I also remained accessible to the mothers by sharing my beliefs and experiences and engaging in the conversation without integrating the formal support worker lingo.

4) **Reflexivity and trustworthiness**

Reflexivity. According to Mauthner (1998), "[r]eflexivity is a central tenet in feminist methodology whereby the researcher documents the production of knowledge and locates herself in the process." (p.49). The emotive component of reflexivity was outlined by Song (1998), who stated that "[b]eing reflexive for researchers includes a willingness to consider the subjective and often arbitrary positions from which we view and understand our feelings, experiences, and social interactions with others" (p.113). I

explored a variety of influences I had in the research process such as my experience with the intergenerational abuse process group, my pregnancy, and my training to become a counselor and potential future frontline worker. Each lens provided a different perspective to be considered. I believe this reflective process provided a richer understanding of the mother's narratives. Gilbert (2001) highlighted that reflexivity takes a considerable amount of time in order for the researcher to gain a strong sense of the differ components involved in the research. This research project has taken three years from beginning to end. Through my own personal life changes (the most significant being the birth of my daughter), my reflective process has engaged many different positions over this time

Trustworthiness. As defined by Kopala and Suzuki (1999), "[t]rustworthiness encompasses elements of 'good practice' that are presented throughout the research process" (p.30). Concurring with this definition, Olesen (2005) highlighted that trustworthiness in feminist qualitative research denotes a process throughout the research itself rather than involving the "validation of hard-and-fast criteria" (p.251) as do traditional positivist research. As a practical guideline, Kopala and Suzuki (1999) outlined methods used by qualitative researchers to increase the likelihood of credible findings. There were five topics relevant to this research: 1) disclosure of the researchers' orientation; 2) intensive and prolonged engagement with the material; 3) persistent observation; 4) discussion of findings and process with others; 5) member checking. Discussion pertaining to the first and second method has already been outlined

throughout previous sections of this chapter. The remaining of this section will highlight how I engaged the four remaining methods in the research process.

a) **Persistent observation.** Kopala and Suzuki (1999) stated that the importance of the researcher to cycle between "dialogue and text" (p.30) to ground oneself in the literature when understanding participants' narratives. As was highlighted in the data analysis section of this chapter, I used the literature to inform my dialogue with the mothers' narratives. This was one way I used to guide myself through the richness of the research material. When choosing the final themes, the selection process involved the strength of the themes' representation across the mothers' narratives along with its' relevance to the literature guiding the research. Kopala and Suzuki (1999) concluded that this process ensures a "higher-level theorizing" (p.30) meaning that the researchers' theoretical understanding is based on an understanding that is academically sound. I connected with this position within the data analysis process of this research.

I would like to highlight the theme "life in a fishbowl" to provide an example within the data analysis process where persistent observation was significantly helpful in my understandings of the mothers' narratives. Prior to my data collection, I explored the concept of mothers' surveillance by Little (1995). In her work, Little (1995) relayed mothers' distress with their lack of privacy as well as the negative connotations associated with the systems' level of scrutiny in their lives. Throughout my experiences of the semi-structured interviews and focus group, I heard similar experiences from the mothers of this research. I made note of this similarity at the time and revisited Little's

(1995) work during my data analysis process so to determine similarities and differences between our findings. This process not only enhanced my understanding of the topics' significance during the interviewing process, it facilitated a more in depth analysis further on in the research development.

b) **Discussion of findings and process with others.** The collaborative efforts engaged in this research have been immense. The most significant collaboration has been between my research supervisor and I. We have diligently collaborated on every step of the research process. I also engaged in many conversations with the mothers about the research process and findings. I have presented my research to academics and practitioners at a conference held by the *Association of Research on Mothering* at the York University. I also presented this research to the Memorial University Counselling Center during my practicum. Within this process, I have also discussed this research with peer student researchers who have supported the theoretical and practical aspects of this research. My informal support network has engaged the research findings in depth, especially during the development of this document. I have received perspectives from all individuals engaged in these conversations, and they have advanced my understanding of the research. These discussions further supported my ethical grounding in this research.

c) **Member checking.** The collaborative efforts between the mothers and I have also been outlined throughout this chapter; however, due to the importance of this process, I will briefly outline these interactions: 1) the mothers' disclosures during the intergenerational abuse process group guided the development of the research topic; 2) the mothers chose the location of the initial meetings and individual interviews; 3) the

mothers created their own pseudo-profiles; 4) the mothers chose which questions would be included in the interview schedule; and 5) the mothers chose which aspects of the transcripts would be included/excluded from the research write-up. This process was also to ensure that they agreed that my representation of our dialogue fitted with what they experienced. The interactions between myself and the mothers have been fluid, and I have experienced them being actively engaged in the research process.

Based on Kopala and Suzuki (1999)'s practical guidelines, I do conclude that I have engaged this research in good practice by taking differing approaches that attend to its' credibility through informed and respectful methods.

Conclusion

This chapter has outlined the methodology grounding this research, the process from which it evolved, and the manner in which ethical issues were addressed. The following three chapters will present the findings of this research.

Chapter Three: Experiencing Disempowerment in Systemically-Based Mother-Worker Interactions

Throughout the mothers' narratives regarding mother-worker interactions, they highlighted three equally involved parties the frontline worker, "the system," and themselves. There were varying ways their interactions with frontline workers and the system it created disempowering experiences in their lives. This chapter will explore four themes that highlight how the mothers experience "the system" through their interactions with frontline workers.

The first theme of this chapter, titled *trust and obey*, will explore the reported ways in which frontline workers expected the mothers to remain a passive party in mother-worker interactions. Second, the theme titled *workers' use of institutional power to disempower mothers* highlights the reported ways in which frontline workers manipulate the rules of "the system" to uphold power in mother-worker interactions. The third theme, titled *dropping the ball* explores the how frontline workers' lack of advocacy resulted in disempowering experiences for the mothers. The fourth theme titled *the catch twenty-two* explores the mothers' inability to gain independence from "the system" due to the systemic oppression they experienced in their daily lives. The final theme titled *fighting for voice,* explores the mothers' conflicts with the institutionalized jargon in their lives.

It is important to note that the theme *trust and obey* is in fact the core theme throughout this entire research. This underlying assumption highlighted by the mothers in their

interactions with frontline workers relays the unequal power relations the mother's felt trapped in. These interactions will be explored in depth in the remaining themes throughout the findings chapters. Chapter four will explore the lack of relationship involved in mother-worker interactions and Chapter five will highlight the mothers' resiliency in these disempowering interactions.

Locating this chapter within the larger context of the mothers' narratives. As I begin this chapter, it is important to note that many interconnecting forms of mother-blame were experienced by the women interviewed for this study. What was revealed through these accounts was the pervasiveness the mother-blame experienced by these mothers in both implicit and explicit ways. Importantly, this chapter's discussion of mother-blame in relation to frontline workers needs to be situated in this larger context. In addition to experiences of mother-blame by frontline workers, the mothers' narratives revealed mother-blame from (a) their community due to their association with the institutionalized social support system, (b) societal mother-blame discourse which was internalized, and (c) experiences of the symbolic and structural relations of power of the institutionalized social support system which perpetrates mother-blame. This chapter addresses these areas as they intersect in the mothers' experiences with frontline workers.

Theme 1: Trust and Obey

This first theme explores the mothers' experiences of feeling pressured to comply with frontline workers' practices. The mothers shared that they felt an assumption was being made by the workers about trust within mother-worker interactions. They stated that

workers expected immediate rapport and/or compliance. Some mothers described this expectation as "nodding and grinning." When the mothers did not experience workers as trustworthy, they described experiencing a conflict within themselves in how to deal with the interaction due to the no-win situation frontline workers position them in. They also relayed experiencing an expectation from frontline workers for them to remain silent about their dissatisfactions; however, the mothers felt that doing so would be detrimental to their families' well-being. There were three different instances highlighted by the mothers of how the expectation of "trust and obey" was in their lives. First, this section will explore the mothers' accounts of how they felt pressured to trust and obey that the services they were to receive would be sufficient to meet their families' needs. Second, it will highlight the mothers' accounts of workers' expectation for them to trust and obey professional "guidance" and "expertise" in parenting. Finally, it will unpack the mothers' highlighted insistences of systematic expectations for them to trust and obey the institutionalization of their lives.

What you get is sufficient. The mothers were expected to trust and obey that the services they received were sufficient to sustain their family. One thing that became apparent when examining the mothers' stories was the fact that the mother-worker interactions were constructed as a one way process, where the frontline worker provided and the mother received. The mothers felt that there was an assumption placed on them that they wanted the services that they received. They shared that this assumption included a pressure to trust and obey that the services they received would be sufficient to meet the needs of their families, when in fact it was not the case. The most frustrating

aspect of this assumption highlighted by the mothers was the judgment placed upon them if they chose to voice their discontent for the services they received. As is highlighted in the following quote by Faye, the mothers experienced the one-way reciprocity process as being authoritative and judgmental, as if the mothers should be grateful for the services they received because they are getting them for free:

> Faye: If it's feasible to them, and it's not going to take nothing from them, then they will help us. If we are asking for money or if we are asking for something to be fixed, they want nothing to do with it. If we stay in our little cubbie holes and be quiet, then they're happy.

> Ellen: Shut up and stay down and they're happy.

This conversation is in reference to the housing workers in the mothers' lives; however, the mothers shared similar stories from other workers as well. The mothers indicated they experienced resistance from formal supports when they made requests. Elucidating this point further, Faye shared her fight to increase her amount of financial assistance which resulted in her experiencing overt judgment from her worker:

> I'm after telling the worker, when I asked for help with something, she told me that I should live off of what I get, and I said "why don't we trade shoes for a month and then you come back and tell me the same thing" Right, they are going home on Friday with their paycheck, yes they might earn it, but some people are not given the chance to get the job and not…and then, there has been times when I haven't gotten my check, and it was a Friday, I have to go that whole weekend without anything. And just the thought makes you sick that these people are going

to go on home and they are going to party it up and that, and your sitting there going what the hell am I going to feed my children. And that pretty well much happens to a lot of people.

Highlighting her frustration about her lack of control over her financial situation, Faye also shared the overt judgment she encountered from the worker in trying to resolve this problem. Ellen spoke of similar experiences with financial assistance workers. She recounted her struggle to put food on the table because of the systematic red tape:

Because you're on the low end of the totem pole, you're nothing, you're nobody. Your check don't come in the mail, you call them up, you wonders what happens to your check, you got no food in the house for the kids, "Oh, we'll have to see about that." And your waiting a week later, two weeks, still no check and no food, they don't care. So I have no respect for these people.

Both Ellen and Faye shared with me that the amount of financial support they received is minimal, which made it impossible for them to save; thus, they were living paycheque to paycheque. Because of this, they stated that they have no money to buy groceries for their children when their cheques were held. In these instances, the issues the mothers raised to frontline workers have resulted in negative experiences. When it was not the case, the mothers relayed that they were countered by frontline workers with judgment because of the assumption that their requests were out of personal greed rather than being based on their families' needs. Most importantly, the mothers highlighted that they felt a lack of empathy within their interactions with frontline workers, where they experienced

frontline workers as being lackadaisical about situations that are critical and in need of immediate attention. For Annie, she shared that this struggle made her feel as though she was a number rather than a person:

> Exactly. But it's not like that. Because I am number 42 on her case load and that's the time. Well, I'm not a number. I am a human being and I am struggling to be a mother. And to get my family back in order the way it should be, and don't treat me as a number. Right. And that's it.

Faye disclosed her frustrations with her struggle to get in touch with her case worker:

> Faye: He's alright I spose, Like when I needed the transportation when I was on bed rest, he made sure it was done. But it's like pulling teeth to get the man to answer the phone right?

> Irene: So it's more about the fact that he's busy rather than the fact that he's neglectful.

> Faye: Of course I sounded crooked with him because he wouldn't get back to me, even the head office of social services told me to contact the district manager, and I said " I don't want to do that, I don't want to get him in trouble" I am glad that I didn't contact him [district manager]. The man has over 800 clients, how can you expect someone to do that?

Faye shared that she was able to empathize with her caseworker even though she could not get in touch with him. She stated that she chose not to make a formal complaint

against him because of his large caseload but she was still upset with the fact that her family's needs were not met, and that she could not access the services she needed.

The assumed mother-worker interaction by frontline workers is an indication of how the systematic power differential forces mothers in awkward and vulnerable situations. The decision to voice their displeasure was weighed against the mother-blaming backlash they potentially would receive. Based on the social judgment that they could/would not efficiently provide or care for their children, it is inferred through social belief that thanks should be given to those who fulfill the needs that the mothers could/would not. What was missing in this assumption was the reality of the mothers' situation. The mothers of this research indicated that they either do effectively provide for their children or they fight for ways to do so. Thus, "interventions" from frontline workers that took over the caring role rather than supporting the existing provisions to the mothers provided resulted in demoralizing experiences in the mothers' lives.

Trust and obey our expertise in parenting. Another way the mothers reported feeling coerced to comply with frontline workers was through workers' use of their children's best interest in their recommendations. In their descriptions of mother-worker disagreements about parenting styles, the mothers highlighted the workers always positioned themselves within a superior position, making their views always "right" because of their educational and professional backgrounds. The mothers explained one way that workers push their authority was by referencing the Child Protection Act. They all shared that they experienced this as being disrespectful. The mothers reported that

they were expected to trust and obey government legislation even when they felt as though the policies were not in the best interest of their children. They shared their beliefs that workers used regulations and the power of their position to push their own agendas. The mothers highlighted that they were silenced by these interactions because they were unable to counter their magnitude. They disclosed feeling coerced to trust and obey in these situations, which then resulted in negative experiences for them. Sue told her narrative about child support as an example:

> Another thing that I have a problem with social services, if I receives child
> support and they takes it off dollar for dollar. I only gets $134.00 check every two
> weeks. And how is the child support helping the child. Because it's getting took
> out of my regular assistance, so you needs that money to put back into your
> regular assistance that they takes from ya. It makes people on assistance to not go
> after people for child support because they knows they are not going to benefit.

Although Sue knew her actions would create a riff between her and her ex-partner, she experienced formal workers telling her that it was her duty as a mother to fight for her children's best interest; thus, Sue was being coerced to comply. She described feeling as though she was blamed for the fathers' lack of financial responsibility and she shared that she was told by formal workers that it was her duty to correct the issue for the sake of her children, or that there would be negative repercussions for her and her children. She relayed feeling conned by the system and that she had unnecessarily compromised her rapport with her children's father, which resulted in her kids spending less time with him, giving her less time for self-care.

Frontline workers also used this same position of power to refuse services to the mothers. There were complaints made about frontline workers' refusal to assist unless it followed by their regulations. As an example, Annie described child protection and social services' specific regulations surrounding contacting her son's father:

> That's the other part of the whole system part now, is that the children have been in care, and when they are taken, they said that they had to notify their father and I said no you don't, their father has nothing to do with them. After a year, it's classified as abandonment and he can't even phone and ask you nutting right, but Lucus' starting to ask about his dad, so I asked child welfare, I said, can you write to child protection up there and see if there's anybody up there who can get a hold of him so that they can arrange a meeting because Lucus wants to meet his father and I think that's extremely important. But they says they won't help me, that they leave that up to me because he [father] doesn't have any rights. And I said wait a minute, he had rights when ye took them, but all of a sudden, he doesn't have rights now. It makes no sense. They say whatever benefits them at the time. You know, all these systems, benefits, whatever, right then and there, I don't know.

Annie shared her anger about her requests being placed secondary to the interests of the system. She disclosed that she experienced a clear power differential where the frontline worker made the final decision within the situation even though she was the primary

caregiver. For her, she expressed her lack of trust for her formal supports. Annie's worker enforced his/her own position without giving Annie a voice in the decision.

In both instances, frontline workers enforced their professional privilege which eradicated the mothers' power over themselves and their children. These overpowering experiences from workers which are considered to be "in the best interest of the child," are mother-blaming because of the assumption that the system's views of parenting are correct. These rigid systematic definitions are based on the "good mother" definition, which made them unobtainable; thus, mothers' experiences of everyday life with their children became understood within the "bad mother" context. The mothers in this research experienced the consequences of this discrepancy more intensely because of the immense role the system had in their lives. They had indicated that the system's mothering definitions were rigid, leaving no room for feedback, nor do they take individual circumstance into consideration. Thus, their personal mothering styles became silenced.

Trust and obey that the institutionalized social support system will make your life better. The mothers also disclosed that they felt pressured to trust the institutionalization of their lives. The mothers' described the front workers' presence as being justified by an "unchallenged faith," that the systematic involvement would result in their families' empowerment; however, an opposite reality was actually the case. The manner in which formal workers provided their help was relayed by the mothers as being objective and regimented. They described these methods as being more significant in the mother-worker interaction than the subjectivity of the mothers' lives. The mothers

relayed that formal workers made premature black and white decisions that directly affected their families' well-being. As an example of this experience, Ellen's stated that she felt child protection did not consider her perspective when they made the decision to force her to leave her partner because of the disagreements they were having:

> Ellen: (Strongly) Yes! It was either, if I didn't take the two kids or if Adam didn't take the two kids, they were going to take them and put them in foster care which I wasn't going to allow anyways. So I had to take the kids and where did I have to go…Kirby House for 4 months because of these people!

> Irene: So you didn't feel like you had a choice?

> Ellen: No, no, I had no choice. I didn't want to leave Adam and I sure as hell didn't want to go to Kirby House for 4 months or my kids were being taken. Which was over stupidity, I mean what couple don't argue? I mean, you have outside people butting in and telling lies and of course they believe the outside people over you, who is not in the house, raising your kids and knows what's going on. So they put...that title shouldn't even exist, those people as far as I am concerned.

Ellen described that she felt forced to follow the institutionalized social support systems' black and white method to resolve family conflict. She relayed the reasoning for this forced decision by her frontline workers was that it was in best choice for her and her

children. Ellen raised an important question in her narrative "what couple don't argue?" Ellen highlighted that the conflict in question was judged by someone outside the home and then relayed to a formal support worker who assumed that the information was valid. The decision to force Ellen to leave was based upon the assumption that Ellen would not leave if she felt her and her children's wellbeing was at risk, which is mother-blaming. She was expected to "trust and obey" the formal workers' judgment that the institutionalization of her situation would be a better choice than her and her partners' own problem-solving skills.

Summary thoughts. The mothers' reported feeling coerced to "trust and obey." There was a clear lack of consideration of the mothers' perspectives, circumstances, and personal strength in these instances. Because the mothers received institutionalized social supports, it was assumed that they were lacking something formal workers were hired to fulfill. Within the exploration of these narratives, it is evident that this is not the case. The mothers voiced their desire for formal supports to partner with them in their mothering rather than taking over their mothering role.

Theme 2: Workers' use of institutional power to disempower mothers

The mothers shared that they experienced a discrepancy in what frontline workers claimed were their intentions and the services they actually provided. Although the mothers heard frontline workers' goals towards supporting the best interests of them and their children, most mothers disclosed having disempowering experiences with one professional in their lifetime. The central point made by the mothers was that they

experienced frontline workers overstepping their professional boundaries in order to give power to their own personal beliefs which were mother-blaming.

Sue stated that "if you ask them for something, it's like they are taking it out of their pockets." Faye and Sue shared that they had experienced very similar attitudes with housing officers in their lives, who spoke down to them when they were requesting maintenance to their homes:

> Faye: And to be treated equal when you apply for housing, or if you have a housing officer coming in, don't be discriminated because your low income. They treat you like your lower than them.
>
> Sue: Yeah, they do
>
> Irene: You were saying housing officers?
>
> Faye: Housing officers
>
> Irene: Okay, what are they like?
>
> Faye: Well, the one I had was an asshole, he really was. He just acted superior like "this is what you're getting and if you don't like it, then you'll have nothing"

Sue and Faye explained that these workers were speaking to them authoritatively. They shared that they believed these workers were sending the message that they were not only inferior and bothersome, but that they were greedy and unthankful as well.

The mothers also shared examples of child protection workers who had crossed their professional boundaries. Annie described her experience with one child protection worker

who defamed her mothering by vocalizing her judgment about Annie's situation with her ex-partner:

> I remember when the boys were first taken, Kim Fowler [a pseudonym] was my worker, and she sat across the table from me, and she said 'I don't understand, I am a mother of a child the same as Michael, and I don't know how for a year, you can lie about what those children were witnessing, and I don't know how you could take a man back who not only mentally abuse you but physically abuse you. I don't know how you could put your needs as a woman in front of your needs as a mother.' Well, I nearly fell off the chair, I said to her 'you have some nerve talking to me about that, because you know what, here you are child protection.' And this is what she does, she works with families who are having issues to try and keep the families together, and work the problems in the relationship, and I said, 'you know what, how dare you sit there and talk to me from acquired privilege, when you don't know what it is mentally, what I go through and how I've kept that lie up for a year.'

Annie stated that she was angered by this experience. She disclosed that she once again was blamed for the violence in her home by a frontline worker who she felt should have understood her situation because she was supposed to be trained to understand domestic violence. Annie also disclosed experiencing the worker slandering her through the use of sexual insinuation, inferring that her sexual needs were more important to her than the welfare of her children. Annie shared that she experienced this frontline worker referring

to herself as a respectable mothering figure while diminishing Annie's mothering in the process.

Intertwined with the experience above, Annie stated that child protection falsely presented their position to her when they were discussing the court hearings surrounding the decision of her boys' custody. She shared her perspective that the worker, who was aware of the legalities of this process, coerced her to proceed without a lawyer as a strategy to keep the children in foster care for an extended period of time:

> You believe what child protection is trying to tell you. So the first time, I didn't go in with a lawyer. I said, fine, I'll agree to the three months, but after that, the boys come home. So preparing and everything, I was ready. They made me believe the kids were coming home. That morning, when the kids were supposed to return home, there they were, they gave me another court paper. See you in court in two weeks, we're taking them again for three months. Right? And it's three, depending on the age, my kids, its' three, three month periods, right, for nine months. And then if they had to, they could extend it for another three months if there was something still outstanding. They could be gone up to eighteen months for one court hearing because the courts are that backlogged. And I'm thinking, alright, I'm not only without my children, but my children are also without me.

Annie disclosed her belief that the child protection worker chose to use the power of her position and Annie's unfamiliarity with the custody process to push her own agenda. She

stated that the worker was trying to keep her boys in legal custody as long as possible instead of following procedure and allowing a judge to make the decision about the boys' custody.

The mothers highlighted that frontline workers also silenced their voices when they were making decisions about services and program implementation in their homes. Kelly disclosed that her case worker made the decision to cut her supportive services without consulting or considering Kelly's point of view:

> One did treat me differently because she said 'you're going through counselling and got all this support, you don't need anymore support' And they were trying to cut off these certain things like transportation to the group and stuff like that so...I had to tell them that this was something that I needs right now and I am starting to open up and I am finding a little bit of trust that I never had, and am feeling things that I had never felt before. It shouldn't be taken from me because I am low income. It shouldn't be taken from my children either. It's not fair.

Kelly shared her frustrations with the inconsistencies in the formal supports she received. Not only did she dislike the lack of long-term support for her personal growth, she was also angered by the fact that her denial for formal services was based on what was in the best interest of "the system." This experience was significant to Kelly's mother-worker interaction because she felt discriminated against based on her socio-economic status. Experiencing discrimination made Kelly feel as though her and her children were insignificant.

Summary thoughts. In each of these instances, the mothers described many interactions with formal workers where workers made them feel dismissed as mothers and as individuals. In each case, the mothers' sense of power was disrespected, where frontline workers crossed their lines of professionalism and procured the mothers' right to make life choices. In extreme cases as was shared by Annie, frontline workers have used their position within the state to deny their clients of equality; thus using the power given to them by the institutionalized social support system, frontline workers have been conveyed as disempowering mothers who receive their formal supports.

Theme 3: Dropping the ball

The mothers also relayed that lack of service and advocacy on their behalf was equally demoralizing. They reported that their disclosures about systemic injustice in their lives often fell on frontline workers' deaf ears. The workers' unwillingness to act as a buffer between the mothers and the system resulted in them feeling insignificant in the mother-worker interaction. The following situations presented below are situations the mothers highlighted as being ones that fell on workers' deaf ears.

Kelly's disclosed her dream of having a united family under one roof; however, in order to live common-law or marry her boyfriend, she and her partner would be put in an economic disadvantage. Under social assistance rules, they were more financially viable living apart:

> If we were financially stable, and has lots of money, it would be like winning the
> lottery. There's no problem to live together. But we have no choice but to do it
> that way because, how can you live. It is frustrating, and it takes it's toll on
> everybody. Because, we are not the only ones suffering like that, there's other
> people who can't live together because of this, and they really want to. They want
> to get married, they want to have stable life, they want to have everything
> working out but there's always something shitting them down. I says to Brian
> "Hey, we're still together. We are going around letting others come between us
> and I don't' give a shit."

Kelly stated that in this situation, she felt like her personal choices had been taken away
from her because she was unable to live her life to suit herself.

Similar to Kelly's situation, Sue relayed that she could not afford healthy food choices
based on her systemically determined financial assistance, and she had become dependant
on other formal services to meet her daughter's nutritional needs:

> Melanie is a real fruit lover, she can live off of fruit, which is good, but I can't
> afford to be buying fruit all the time, so it's good that she's in daycare because
> there's all kinds of stuff like that, but I am worried about when she's finished
> daycare, how am I going to keep up with it?

She disclosed feeling fearful of when her daughter was too old for daycare because she
would not be able to absorb the extra cost of healthy choice foods for Melanie. From her

perspective, she would like to save money so to give her children stability. Because they thought she wanted a life of luxury, Sue relayed feeling that her requests were always denied. But as Sue indicated, this was not true. From her perspective, this negative belief system denied her of her dream to give her children a happy and healthy childhood.

It was also reported that formal workers sometimes failed to follow through on initiated programs designed to support mothers in achieving their independence. Faye shared this point though her narrative about her desire for stable employment for herself and her partner:

> A lady called me and Melvin one time, it was something for social services, they paid us $50.00 bucks each, and it was how to create jobs for people on social services. And we were going to have this huge program. That was 3 years ago, that we went to that, and they were supposed to have the jobs starting the following year. Right, jobs are not going to fall out of the sky. We can look, and look, and look, and look, but if you got no experience and you have no money or childcare, how in the hell are you supposed to go to work.

Faye disclosed her frustration with workers who gave her hope for change only to then pull the rug from under her. Faye stated that her and her partner put effort in attending this vocational social program and she felt frustrated that her efforts did not end in results. She disclosed feeling that this failed attempt was on the part of the frontline worker.

Summary thoughts. The mothers voiced their belief that frontline workers were hypocritical in their client-centered approaches. They shared that workers claimed to put the needs of their clients first only to congeal with the system when clashes arose between the mothers and systematic regulations. What enraged the mothers was the one-way line of communication the frontline workers represented. The mothers relayed that frontline workers shared the institutionalized social support systems' expectations to them as recipients; however, workers refused to share their positions with those who were responsible in creating the policies that directly influenced their daily lives. Thus, the mothers recognized that their fight against being trapped "in the box" was not going to be supported by those who claimed to be in support of their efforts.

Theme 4: Caught in the catch twenty-two

This final theme highlights the systemic entrapment the mothers faced in their process to regain their independence. The mothers described the immense amount of pressure they experienced from frontline workers to work towards becoming financially stable so that they could cease their financial dependence on "the system." However, the mothers relayed what they described as the "catch twenty-two" whereby "the system" itself hindered these efforts through the lack of bridging programs to support these desired transitions.

Annie, for instance relayed that her efforts for independence were stifled by her experiences of social isolation caused by "the system" itself. She stated:

Well, when you have the system in your life for as long as I have, the system

becomes your family. Because any body else that's introduced into your life and

they find that child welfare, or some part of the system is involved with you, they

don't want to be associated. It's, it's really, you become isolated because of the

system, because then that's all that you have in you life, right. Because you have

so many meetings, and you know, they've got counselling here, and you've got

counselling, and you're doing all these different groups to try and strengthen

yourself as a single mom, but the system then becomes your only support. And if

the system is not helping you, you're isolated from the real world to go out and

meet people.

Highlighting the difficulty in having both forms of social support in her life, Annie shared

that she felt it was worth resisting formal support because it provided hope for an

opportunity to develop informal supports. Dreaming of living life without formal

supports she felt deterred by the large portion of time and stigma that are attached to

these supports.

For all mothers, a life without supports directly corresponded with financial security.

Annie indicated her plan to "break out" was to seek higher education, making herself

employable within a more secure profession. The unfortunate aspect of Annie's plan was

the oppressive circumstances caused by the systematic red tape involved in financial

assistance. Annie had not been able to find her husband to issue him divorce papers. She

was unable to apply for a student loan because her ex-partner's income had to be

considered until they were legally divorced. Annie also disclosed that the system's

regulations pertaining to educational assistance did not help her obtain her dream because she wanted to attend university rather than a community college and funding was only provided for college students. She stated that the financial risk was too costly for the lives of her children, and the time she would have to dedicate to studying in order to receive a full loan would be unrealistic for her as a single mother. She also shared that she did not want to spend that much time away from her boys because she valued being the primary care-giver in their lives.

Annie: Sure, they're not paying me to go to school. They'll cut me off. They will cut off my drug card and everything. And I said "well people are saying that your putting them through school, that they're getting money from you, they're being subsidized. They're getting a student loan and you guys are subsidizing the rest" and they say that "we will pay for you to go upgrade your high school, and we will pay for you to go to go to Academy Canada and get a trade, but that's all that we will pay you." And I'm like "hello, I'm smart, I wants to go to school, right"

Irene: And the insurance here at MUN for undergraduates is only 80%, it doesn't cover everything. But with the drug card it does. So you could be playing, in terms of Michael with his healthcare, it could be a bit of a risk, do you feel?

Annie: Well yes, because his one inhaler is not covered and I have to pay for that, and I'm on social assistance, they don't cover it, because he doesn't have a proper diagnosis for asthma. $80.00 a month for inhaler, right, and then when he gets

pneumonia, then he needs another medicine which is $130.00 that's not covered by the drug card, right. And now with his little tiny glasses. But it's, it's kind of like, do you get out, get up off my ass now, and go and do what I wants to do and pick up for what I wants to do and live my life in poverty, that's fine for me, but not for my two kids. You know, and then you have to factor in, um, in order to keep the finances going, I would have to be in school full-time busting my balls with two small boys who absolutely need me, you know, and it's not like there's….I am a single parent, it's not like there's another parent to give them, no, and I don't want my kids being reared by baby-sitters and daycare, no way.

Annie's disclosure speaks to the added barriers mothers who receive institutionalized social supports have to face when trying to attain their dreams. The personal struggle between being home with the children versus pursing a life outside the home is a struggle for most mothers. In cases like Annie's, mothers who receive institutionalized social support feel pressured to pursue a life outside the home to gain financial independence while simultaneously experiencing systematic barriers to this self-sustainability.

Annie also disclosed her belief that regardless of the financial barrier, the stigma associated with formal supports would prohibit her from being accepted into her desired faculty. She stated that she would not be accepted in the Social Work faculty because she received supports from the institutionalized social support system:

I know a woman who, I grew up with her, and she was in foster care, and she just

became a social worker, she went, she had to fight for 4 years to get into the social

work program, because when they did her interview, she said "I thinks the reason

why I'm going to make a good social worker is because I was brought up in care.

And they weren't going to let her into the program. And I said "How can you say

that? How can you say that she is not going to make the best social worker ever?

That's crazy. Your going to penalize her because her parents were wignuts."

Once again, Annie disclosed feeling that her association with formal supports could

become an obstacle in her life. In her perspective, although her friend did become a social

worker, it would be a battle to prove her worthiness of that position. Thus, from Annie's

perspective, in order for her to obtain her goal of becoming a frontline worker who

empowers clients by "being true" in a helping relationship, she must face the challenge of

securing herself in registering for university then possibly fighting for acceptance in her

desired program. Annie disclosed her hope that these educational efforts would give her

voice value within "the system," especially regarding social policies that affected the

lives of "low-income mothers."

Summary of thoughts. As was highlighted by the mothers, the struggle to gain

independence from the system was stifled by the system itself, which contradicted the

main message frontline workers were trying to implement (check spelling) in mother-

worker interactions. The mothers shared experiencing a false assumption by frontline

workers that they wanted to remain in their current position. They highlighted a desire for

space from the negativity instilled by frontline workers and "the system," preferring for support to attain the goal they mutually desire, which is the mothers' self-sustainability.

Theme 5: Fighting for voice

The mothers sought independence from the institutionalized social support system and struggled with being expected to cooperate with frontline workers in order to achieve independence. Moreover, the mothers shared that while the workers consistently spoke about their path to independence, they feel trapped by the circumstances created by the formal supports they received. The mothers felt like their wings have been clipped and their voices silenced. The mothers highlighted a clear distinction between their voices and those of the frontline workers. They shared frontline workers' perceptions of mothering as being "good" while their perceptions were "bad." Because of this, the mother's incorporated frontline workers' lingo in their mothering narratives. Annie highlighted this point best when she talked about the impact formal supports have on mothers' voices:

Annie: Yep, and I think even if they are able to pull together and have that strong connection for their network, the professional, the formal, still has an influence on that, because "that's not what my doctor said" and it can't be just the women working something out, there always has to be an influence from the outside.

Irene: So you find that even when it's two women working together, you haul in all the professional voices?

Annie: Yep, 'cause it's, that's who you look up to. I mean, unfortunately, there's....the formal people they're paid to educate us, and it influences a lot. If people could just stick to, well, you know what, this person, this is what she went through and this is how she learned from it, not, well, she only learned that because of what the professional said. Life is experiences all linked together, and that's all it is.

Annie believed formal supports' messages overshadowed others and end up embedded in the mothers' own narratives. She shared her frustrations with this distinction throughout the entirety of our conversations.

Nancy's narrative also shared a similar theme of losing voice. She highlighted an example of how formal workers' narratives become embedded in her beliefs about her son Brent and her husband Chris:

Um, because of his [Brent] ADD he's, he already has a label that society has chosen to put on him although he doesn't really fit that label. Um (pause), or I let him have the chance to be who he wants to be, right, which is a funny, um, kind hearted young man. I am sure that Chris suffers from ADD but I am also sure that he [Chris] suffers from depression and Obsessive Compulsive Disorder, um, mildly.

This was not the first time Nancy shared her beliefs about mental health issues in her family. I would like to refer back to a discussion within the last chapter that relates to this theme. When exploring Nancy's experiences in institutionalized social supports, Nancy disclosed that she would like to keep formal supports in her life because, from her perspective, Allison was a lot like her, and she was afraid that Allison was going to inherit depression. I would like to share this quote once again as a reference of Nancy's narrative:

> I think Allison could be prone to depression, because I see so much of me in her at the same age. Um, can cry very quickly, gets very sad, very lonely, um, and unlike with my parents, I don't tell her "don't be so silly." I cuddle her and rock her and tell her that it's okay and that we can fix it and whatever, but I, I, want keep those supports around me so that either one of them need the supports that they are not afraid to look. Cause that's the big thing today, everyday, everybody thinks, all they can think about is the stigma, if you suffer from depression and you need help, that your nuts, your wrong, you've failed, you, right, and that's not necessarily true so.

Nancy's narratives highlight the internalization of dominant deficient-based narratives that is prominent in the frontline workers' medical model definitions. Nancy has shared her continued efforts to break away from the institutionalized social support system for the sake of her children, such as her extensive counselling and her various community volunteer projects which she hoped would lead to an employment opportunity. However, regardless of her success in physically breaking away from the institutionalized social

support system, its' influences could remain in Nancy's family if they are unrecognized and unchallenged within her belief systems.

Summary thoughts. The mothers' fight for voice signifies the oppression prevalent within the institutionalized social support system. Grounded in the "them vs. us" perspective, the mothers indicate a dismissal of their personal values and beliefs in mothering by frontline workers. They experience workers challenging or "correcting" them about the "right" way to mother, justifying their positions with their credentials and power positions. The mothers are then forced into a position to accept the frontline workers in their lives and adopt what is "right" which results in their internalization of the systems' beliefs. The mothers' second choice is to resist the pressures from frontline workers which leave them vulnerable to the "bad mother" label. According to Annie, many mothers she has interacted with have internalized the systems' lingo without question because it has become a significant, daily occurrence in their lives. Thus, breaking out of the box becomes a more complex endeavor because the experiences and influences of the system cannot be erased.

Conclusion

The difficulties the mothers experienced in their interactions with frontline workers and "the system" were grounded in the systemic assumption for passivity in mother-worker interactions. Keeping with the "expert" modality of social services, the mothers experienced frontline workers negating their strengths by emphasizing their weaknesses in their interactions. The mothers reported experiencing praise from workers when they

succumbed to the power differential, regardless of the personal costs this decision had in the mother's lives. Attempts to resist were met with systemic consequences. Most importantly, the discrepancies in what was discussed and what occurred created a great deal of frustration and ill-will towards the frontline workers and the policies they uphold.

Chapter 4: Reconsidering Mother-Worker Relationships

Throughout the mothers' narratives, they expressed many negative experiences with specific frontline workers. Unlike the last chapter where "the system" was recognized, the themes in this chapter directly relate to the ways in which the mothers viewed the frontline workers themselves in their interactions. Academic literature has explored in depth the development of worker-client relationships (Geldard, 2005; McLeod, 2003; Nelson-Jones, 2002). A significant concept within these explorations is the mutual development of rapport between worker and client. According to the mothers, they experienced a lack of control over the development of the relationship with these frontline workers. This was experienced as a lack of mutuality between the mothers and workers, which were reported by the mothers as being disempowering. This chapter will examine the accounted mother-blame with frontline workers, highlighting the profound power differential between the two which resulted in a lack of relationship development. In this context, the term relationship represents a mutually engaged and respectful interaction.

Specifically, three central themes which relay mothers' experiences by frontline workers will be explored. First, the theme *point of privilege* will identify frontline workers' approaches which facilitated their holding of a position of power within mother/worker interactions from the role of "expert." Second, the theme *left out of the loop* will highlight the mothers' reactions to frontline workers implementing supports without their knowledge. Finally, the theme *life in a fishbowl* will investigate the mothers' experiences of surveillance caused by their association with the formal supports they received.

Theme 1: Point of Privilege

The term "point of privilege" is one Annie used to describe her understanding of most frontline workers in her life. In her view, frontline workers were in a position of power and often used this power in ways she experienced as being oppressive to her as a woman and mother. She stated:

> And how…you can't…no matter how strong you are, if you have someone constantly pressing down on you, you become emotionally drained, and once you become emotionally drained, everything else just slips away.

This theme will explore the mothers' experiences of frontline workers when they take on their point of privilege through their ascribed role of being "the expert." One way the mothers indicated experiencing workers was through their use of academic jargon and through workers withholding personal information about their lives. Annie described using humor to contest her child protection workers' use of academic jargon:

> She's so by the book that it makes me laugh, because she stopped by the house the other day because I had to sign a new parent coach report, and she was going over all these terms and I said 'Bertha, I am not your professor, I am not an assignment number' and she kind of just looked at me 'what do you mean', right. So, she kept going on, and then she said something about the way documents have to be handled in the system of child welfare right, and I said 'what page and what chapter is that in the psych book' and she started laughing because she figured out what I was trying to do. And I said 'you've got to ease up woman' You know, I

said 'you go to school to learn something, but the idea is when you learn something, you need to apply it, you need to apply what you've spent all that money on.

In her disclosure, Annie explained that her workers' use of academic jargon made her feel like an assignment or "project" rather than a person. This kind of objectification of Annie's life as a woman and mother was a part and parcel of the mothers' feeling blamed (as mothers) by frontline workers. Annie explained that she used the term "point of privilege" to address the unequal expectation of self-disclosure in her experience of mother-worker interactions. Annie stated:

It's very fake. I think that the professional world is very, very fake. Because when they leave at 5:00, they're lives are just like ours. But it's not brought, it's not brought, and you get some people who tell you about their lives outside of work, the struggles that they're going through, you know, if it would be in relationships, or raising their kids, or you know, their renting an apartment and the landlord is not doing things, but it's not the norm, because it's all from a point of privilege.

Being expected to disclose personal information so her workers could help her and her family while having her queries about frontline workers' lives ignored made Annie feel distance in her interactions with them.

Another example the mothers shared of workers' point of privilege were differences in the "set of rules" workers' used in their own parenting versus the mothers' parenting. Differing from the mothers' experiences of workers withholding information, in these instances the mothers disclosed workers repeatedly using their own parenting practices as being the "right" way to handle difficult parenting situations. The mothers disclosed feeling oppressed by these experiences, and expressed their disbelief of the workers' "good mothering" practices:

Faye: Or ones [workers] who do have children, it backfires just as much because they are sitting there going "I wouldn't do that, that's not how you do it" and it's like, you're not me.

Irene: So it's like the super mom thing.

Faye: Yes.

Ellen: Don't tell me they don't raise their voices to their kids if they've got them, because everyone does.

Faye: The worker that I had did that, she said "do you yell" and I said "yeah, don't you" Like every now and then…there's not one person on this earth who has not yelled at their child.

Ellen: It's only how they makes themselves out to be, you shouldn't yell, you shouldn't do this, you shouldn't do that. Don't tell me because you do it yourself.

Irene: So, it's like a judgment.

Sue: Sometimes you don't mean to yell sometimes, sometimes, you know, people got stress in their lives, you know, you don't mean to.

Faye: And there's some kids who don't listen until you do yell, and that is true. I

can tell my children to stop that, stop that, stop that, and they're looking at you

laughing, and then you raise your voice saying "Stop that" and then…

Ellen: They knows you're being serious, right?

Because the mothers experienced frontline workers as portraying themselves as "super

moms" or "having it all under control" they did not believe workers were realistic in their

advice giving. They felt they were being told to adhere to a standard of perfection which

was inauthentic and unrealistic for any mom. Thereby, when they experienced workers

correcting their mothering and giving them advice, which made them feel they were

being judged and looked down upon, the mothers felt they were being blamed unfairly.

This inequitable power differential experienced by the mothers can also be seen through

the non-verbal messages communicated by formal support workers. Annie, for example,

told me that she preferred interacting with me in casual rather than formal, professional

attire which gave off messages of a "holier than thou" attitude:

It's like if I come for an interview with you, if you were there all prissy, prissy,

"oh, I'm going to do my master's thesis" and you were right high and mighty, I

wouldn't feel comfortable talking with you. Same with the counsellors, I wouldn't

feel comfortable talking with my counsellor if she was all high and mighty with

me. That's it, life happens, you know what I mean.

Based on Annie's perspective, formal workers' presentation of power was an aversion for

collaboration. As an initial judgment, the mothers assumed that they would be judged and

oppressed by workers who fit this prestigious stereotype; therefore, they refrained from fully disclosing in their interactions with frontline workers to protect themselves from further systematically-based repercussions.

Summary thoughts. Annie's feedback helped me understand how she and other mothers experienced frontline workers when they dressed and acted from a "point of privilege" and the barriers it constructed for these mothers in how they felt seen, supported, and viewed with equal respect. It was through Annie's reflection where the mother-blame in this theme became explicit. The power differential between the "good mother" social worker and the "bad mother" recipient of the social workers' services was immense. Because the interaction was grounded by these stereotypes, the mothers experienced frontline workers treating them as being less knowledgeable and less competent in mothering which results in disrespectful interactions like advice giving. The barriers created by the "good mother/bad mother" discourse negated mother-worker interactions that were equally open and honest; therefore the mothers will forevermore be treated as being of lower-class and of lower importance within the system as well as within society.

Theme 2: Left out of the loop

The mothers reported feeling "left out of the loop" by frontline workers. Similar to the previous theme, here again they disclosed that their voices and positions were not considered. Left unaware of services frontline workers were conducting in their and their

children's lives, the mothers shared with me their experiences and reactions to being "left out of the loop" by frontline workers.

Specifically, when child protection spoke to their children during school hours about potential child abuse without informing them, the mothers indicated they were very upset by these secretive actions. During the focus group, the mothers stated that they felt that being left out of the loop was destructive to their relationship with their children and not respectful to them as mothers. Referring to such incidences, Sue, Ellen, and Faye shared:

> Sue: They'll go to the school and haul your kid out of the classroom and go off with them.
>
> Irene: And talk to them in private.
>
> Sue: Yep.
>
> Irene: Without you knowing?
>
> Ellen: Without my consent.
>
> Sue: And then that makes it look bad for the kid in school, because she has to walk up the hall with a child protection worker.
>
> Faye: They are allowed to take your child out and question them whenever they want without your permission. You are not notified until after the meeting has taken place. So we can be here right now, and if our kids are in school, they could have our kids off in a room alone.
>
> Ellen: They called her out of her class and took her out into another room, and she called me two days later and told me that she had done it, and Mary never

mentioned it to me. And I asked her "are you allowed to do that" and she was like "oh yes."

Faye: They take them in the room alone and god only knows what they can say to them.

Irene: And what was it like for you to know that it happened?

Ellen: I was mad....really mad, and a bit nervous. I don't have no time for. I really don't. They can do more harm than good. Because once they talks to them, we can't look at our kids the wrong way, and they'll be like "well, I'm going to call this one, you can't do this."

Faye: Carley said that to me the other day. Do you know what I said when Carley said that to me. She called me the other day, and I said to her "if you don't stop, your going up to your room and stay there for the night" and she said "you can't do that" and I said "what do you mean I can't do that" and she said "I'll call child protection."

In recounting their disturbance about these experiences, Faye, Ellen and Sue relayed that they experienced child protections' actions as being disrespectful and counterproductive to the unity of their families. The mothers shared that they had already been exploring the topic of parenting and discipline in the intergenerational abuse process group they all attended weekly. They felt that child protection's talks with their children undermined the positive changes they were making at home based on their experiences in the intergenerational abuse progress group. As shown, because of the resulting disrespect they experienced from their children plus the accompanying rift it caused in their

relationship, these women felt these private meetings which left them out of the loop were not in the best interest of their children.

Annie, who also experienced having her children threaten "child protection" on her as a result of child protection's private talks, reflected how the institutionalized social support system was affecting her life and the lives of her children. She felt, for instance, that her son's threat exemplified his reaction to being a part of the "chaos" that the institutionalized social support system had created in their lives. Her son, she stated, had threatened to call child protection as a way to counter her discipline when he was misbehaving. In being left out of the loop her children witnessed frontline workers' disrespect her as a parent which in turn resulted in her children being disrespectful to her. As kids, her children could see this as an opportunity to gain control over her rather than act respectfully towards her. Annie indicated that such formal "supports" did not provide her and her sons with an opportunity to grow as a family nor did they allow her children to see the real her because she was always having to deal with frontline workers and the system they represented which disrupted their cohesion as a family.

The mothers in this research shared their experiences of systematic mother-blame by their children following child protections' private talks with them about child abuse. They recognized that the formal workers were using their children to gain control over their behaviors rather than speaking directly with them. The mothers also indicated that formal workers were infringing on their children's innocence through these secretive talks, especially since their kids were singled out while at school. In this sense, the mothers

recognized that the frontline workers were crossing the boundaries of both themselves and their children. Formalized supports carried out by frontline workers which were rooted in secretive actions, in boundary crossings, and in creating division between mothers and their children are forms of mother-blame identified by these women.

Summary thoughts. The mothers' disclosures of child protection leaving them out of the loop are examples of a larger norm of frontline workers who represent the institutionalized social support system. Another incident acknowledged by the mothers was the inaccessibility of "their file" meaning all documents kept by formal workers. They shared that in legal incidences these documents have been used against them, including in situations pertaining to child custody. Here, the mothers were left out of the loop not only in what information was being added to the file, but also in the manner in which this information was used within the institutionalized social support system.

Theme 3: Life in a fishbowl

This theme explores the mother's experience of surveillance as recipients of institutionalized social supports. For some mothers who participated in this research, this level of surveillance was increased due to their association with intergenerational abuse. First, this section will explore the lack of privacy mothers' have in their lives because they receive formal supports. Second, there will be an exploration of the mothers' reactions to life in a fishbowl. Finally, there will be an exploration of the mothers' battle for personal boundaries with the institutionalized social support system.

The mothers interviewed felt constantly watched and monitored by frontline workers. They felt they were living in a fishbowl without privacy and anonymity because they received institutionalized social supports. "Drop-in" visits were a prime example of this fishbowl experience. Faye and Ellen stated:

> Faye: You gotta be afraid to have your house messy. I am here with 3 kids, and many times right now that my house is up to my ass, but that's it. And you have to feel uncomfortable, going "my god what if they drop in."
>
> Irene: So, it's always like you've got to be on your toes. There' no time for you to just rest.
>
> Ellen: Well, in the night time you can.

The unwanted presence of the frontline workers entering their homes unannounced made the mothers feel like they lived in fishbowls in their own homes. The lack of privacy and their frontline workers' surprise visits to evaluate them at any moment was experienced by the mothers as being invasive and disrespectful. Annie shared she had so many workers in her life monitoring her mothering, even her young son understood that they live in a fishbowl. Annie stated:

> They said that it's not about me, it's about the children. And I said "But the children understand what is going on" And they were like "No they don't, they're only 3 and 5." But I said this is 3 and 5 who is very, very intelligent for their age, um. And it's pretty bad when you go out and someone is like "Oh, is that your Aunt" and Lucus is like, no, this is one of my many workers. And he's 5, you know.

As a part of life in a fishbowl, Annie and her sons experienced a parenting coach documenting their day-to day activities in their home. In her words, she stated that "[i]f I takes the kids to the bathroom and I washes their hands, it's written in the report. I mean 6 page reports go in every single day of what I do with those children." The documentations are a result of the system inquiry of Annie's mothering abilities. Annie shared her inability to be herself with her children in fear that one "inappropriate" interaction would be documented and then legally used against her to take her children from her custody. Furthermore, Annie shared that these experiences were disrespectful to her because the documentation institutionalizes her family's life, negating her attempts to lead a normal life with her children.

The mothers also highlighted aversion towards frontline workers who lobbied for assistance from neighbors in public housing courts. Both Ellen and Sue stated that they have refrained from creating informal social supports in their public housing court because of the potential connections to the system:

> Sue: I don't like socializing with other people on the street.
>
> Ellen: That's the only way to live in housing…keep to yourself.
>
> Irene: So why is that?
>
> Sue: Well, then you're getting involved with whatever they're involved with, and you have people dropping by bumming you all the time and….
>
> Faye: And their nosey.
>
> Irene: A lot of gossip?
>
> Sue: Yeah

The mothers stated that child protection used this close knit community within the public housing courts to their own advantage when investigating families. Gossip within the courts allowed child protection to find out information about the mothers' lives. Annie shared "[y]eah, and then Child Welfare going and knocking on the neighbors' doors when I'm not home, leaving Child Protection cards, 'if you see her will you tell her that I stopped off?' I said, 'oh, what happened to privacy?'" Annie felt that child protection asked her neighbors about her visitors in order to determine if her ex-partner was still a part of her life.

As did Sue and Ellen, Annie indicated that she had cut off ties to her neighbors because of their potential connection with child protection. Feeling unable to seek informal supports from their communities because of the link these supports had with the formal supports means that these mothers are experiencing further social isolation in their lives. Once again, the institutionalized social support systems' need to survey the lives of the mothers became more important than the consequences the formal supports' actions had on those that received support. Thus, "life in a fishbowl" equated to barriers of social support for these mothers as a final resort to regain control over their family, their mothering image, and their personal power.

The surveillance by frontline workers was experienced as being above and beyond the professional boundaries of their position. Annie indicated that frontline workers expected her to provide contact information for men that she has been spending time with when her children were removed from her care. She shared that her worker explained this request

as being a "preventative measure" for her children, because the frontline worker believed
Annie was attracted to violent men, thus her dating again could potentially lead to further
domestic violence in her sons' lives. Annie shared that did not provide child protection
with the information requested because it was in reference to her private life and it
crossed her personal boundary within mother-worker interactions. Annie expressed her
disgust towards this request, stating:

> I started….not that I was dating, but I was just going out for coffee with a certain
> individual. And they were like, well you needs to give us their numbers because
> we would like to talk to them. And I was like oh no I don't. I said, if I finds
> somebody that I am ready to settle down with and ye people are still involved in
> my life, I will let you meet them, and I said you can do whatever background
> check that you likes. But you cannot stop and you cannot interfere with my social
> life. When my children are not with me and I am not caring for my children, I
> don't have to answer to anybody what I do. They wanted the phone numbers so
> they can phone these people that I am talking to, because they need to make sure
> that I am not into old habits because that would hinder the children coming home.

Annie disclosed that the boundary between her and the formal support worker had been
violated based on the workers' mother-blaming beliefs. Following suit with the belief that
the "bad mother" is incapable of making positive decisions for her and her family, the
formal support worker flexed her professional position for information that she could use
to facilitate "better" choices. Overstepping this boundary was oppressive and

demoralizing for Annie because it insinuated that she was not only incapable of fitting within the "good mother" role by placing her children's needs first; she was also responsible for the domestic violence she has experienced in the past.

Shame by association. In reference to being monitored by the formal supports in her life, Annie shared experiencing shame because she was associated with the institutionalized social support system:

> But when you've got to be always looking over, and you have people setting expectations of the 'should be," it's just when you, you mess up and you make that mistake, it feels like 50 pounds on your shoulder. And every time, and every time, and you just can't get it off until someone comes to you and says "it's alright, it's alright" you know, your not able to free yourself from your guilt, and your life, it's not…Sarah explained it to me, it's not guilt, it's shame. When you have to try and meet someone's thing, its shame, right. It's self-esteem. It becomes a self-esteem issue. You don't feel like your good enough.

Annie disclosed that she felt weighed down by the mistakes in her past because they had resulted in her mothering being constantly monitored. She experienced formal workers' presence in her life as daily reminders of this mistake, which resulted in her feeling, what she initially believed was guilt; however, she disclosed that she was able to re-label her emotions when exploring them with Sarah who's interactions with her have been positive. It is important to note that Sarah is a formal support worker who Annie has had

positive, respectful interactions with Annie since the removal of her children. Annie has acknowledged Sarah as being an "exception to the rule" in regards to the formal support workers in her life. Annie and Sarah's interaction will be explored further in the next chapter.

Also highlighted by the mothers was the negative social stigma attached to the institutionalized social support system and its' workers; where they felt society frowned upon them because they received formal services. Certain formal supports, such as public housing, were disclosed as being indicators within the community that defused their anonymity. All mothers disclosed their efforts to protect their children from the negative social consequences that the association with the institutionalized social support system creates in their lives.

The mothers experienced frontline workers as being the human face for the institutionalized social support system. They disclosed that their connection to these workers made them feel as though there was a spotlight on them, projecting to their communities that they had personal problems. Rather than being a support against "the system," the mothers relayed that they experienced an additional layer of oppression from frontline workers because their association with these workers further encroached and compromised their privacy and independence.

They described many ways in which they and their families hid these connections to protect themselves from the negative perceptions that coincide with being a part of "the

system." Nancy had made choices to ensure that her children experience life in the same way children without formal supports do, such as enrolling them in highly reputed schools and extra-curricular activities. Nancy's children were able to attend these schools because she fought for public housing within the school's region (Based on their residences, Newfoundland and Labrador children attend schools which are within the government determined zones). Attending these schools brought a differing issue for Nancy's children, where they also had to hide their low-income status from their peers in fear of rejection:

> I probably receive some challenges from my children, especially Brent in the fact that we are living in public housing. He would much rather not be living here. (Pause) He doesn't say anything, he doesn't come out and say it, but, if the subject comes up and we are discussing it then he'll say "yeah mom I hate it down here" or "I wish we didn't have to live in those houses" or you know, that kind of stuff. Um, and that's influencing because as soon as we can see our way clear we're moving and going to a neighborhood where his friends are, he can have his friends in and stuff like that, because he doesn't have his friends in now, I think he's embarrassed.

Nancy stated that her son refrained from inviting his friends' home for visits to protect himself from judgment. She experienced him wishing he could live in the same neighborhood as his friends. Nancy stated that she was influenced by her son's disclosures, and was motivated to move out of pubic housing. Other mothers stated that their children did not have the privilege of this social camouflage. The mothers

participating in the focus group disclosed experiencing their children being teased because they are unable to afford brand named snacks:

> Ellen: You have to have the brand name foods
>
> Faye: Because they get teased for that
>
> Sue: If they goes to school with something with a yellow wrapper or no name, they will be teased for it.

The mothers explained that their children not only wanted brand-named snacks so that they won't be teased, they also asked for more than one to prove to their friends that money was not an issue in their lives. Furthering this point, Sue described Tom's pressure on her to provide him with the similar material things as his friends:

> Well, I finds that there's a lot of rich kids there, and I don't really feel comfortable volunteering or participating in that school because I feel like they are looking down on me, because I am low income. Like I said, they don't have a school lunch program, but they do have a cafeteria program which is $5.00 a day, and there's no way that anybody that's low income can come up with $25.00 a week. And, I don't know, a lot of kids in that school have name brand clothes and name brand sneakers, and he's coming home and he wants name brand clothes and name brand sneakers, he complains to me all the time that he's the only kid in his class that don't have a computer. But it's like, I can't afford that, and it seems like I have to be constantly try to keep up with everybody else.

Sue stated that she was reminded of the social status associated with low-income families through her son. She explained that there was no financial leeway for frivolous additions, like brand name clothes when receiving financial assistance. Sue also disclosed that her son acknowledged that his family did not have the same items as his friends, such as a computer, and she shared that she has felt pressured by him to provide him with these items. Sue was not the only mother disclosing this experience with their children. The desire to protect her children from teasing was so great; Faye disclosed that she bought stolen brand-name items for her daughter:

> Personally, myself, I wouldn't be able to actually do the steal. But if somebody were to come to me tomorrow, and like you said, to each their own, and come to me and say a pair of Old Navy jeans for 5 bucks, I'd buy them if they were something that my daughter would fit in. I would do it. And as horrible as it sounds....

Faye stated that she wanted to protect her daughter from the social stigma associated with receiving institutionalized social supports. One way to do this was to provide her daughter with clothing that other children were wearing which removed the indicator of her families' social status and helped her socially blend in with her peers. Faye shared that she did not like the methods she had to take to provide this anonymity for her daughter; however, she disclosed her belief that it was the only way she was able to financially afford these items for her daughter.

The social stigma associated with receiving support from frontline workers and the institutionalized social support system was also experienced in the mothers' social interactions. The mothers experienced shame and guilt because of their association with frontline workers and "the system" itself, which limited their social interactions with other parents. Sue disclosed two examples in her narrative above that highlighted this point. She stated that "I don't really feel comfortable volunteering or participating in that school because I feel like they are looking down on me, because I am low income;" thus, she shared her belief that she stood out from the parents in the school community, so much so she was intimidated to volunteer. Sue also disclosed during the focus group that she withheld telling her friends where she lives in order to ensure their friendship, stating "I have friends who don't know that I am on social services because I'm too embarrassed to tell them;" thus, Sue experienced shame due to their association with formal supports, including her connections to frontline workers.

Within these examples of surveillance, the mothers have shared instances where they and their children have experienced negative social repercussions because of the social stigma linked to the formal supports in their lives. They have also highlighted that they have taken different ways (e.g., isolating themselves from peers, disassociating from their communities which are associated with the system) to disassociate themselves from these supports as a means to decrease the effects these negative experiences have in their families' lives.

What do you expect? They are how they're raised. Another way in which the mothers experienced "life in a fishbowl" was through the social scrutiny of their children's behaviors. The mothers shared that they felt an added pressure to ensure that their children behaved within social settings because of the potential consequences that could result if formal support workers became "alarmed" by what they sew or heard. They also stated that unpleasant children's behavior also added to the perception that they were "bad mothers."

Frontline workers in the mothers' lives relayed judgment and blame. For instance, Annie stated that she experienced a frontline worker concluding that her sons' fighting and banter is due to their upbringing, without considering other alternatives. She shared her belief that the worker exaggerated the severity of the situation because of their history. Annie also shared that she felt that her perception was dismissed by the frontline worker:

> Like this whole fighting thing between two kids. Like child protection is like "oh, that's because there is violence in the home" Go away! Go away! They're brothers, and they are fighting over a toy, right. And when I say that to them, "you know what, that's just sibling rivalry" they're like "well, this is the thing, you don't see that as a problem." I'm like "certain things yes, like they shouldn't be cracking each other on the head and giving each other stitches" but they are going to fight.

In Annie's experience, frontline workers' mother-blame was explicit, stating that her children's behaviors were a direct result of their experiences in the home. In other

instances, mother-blaming messages were more implicit as was disclosed by Nancy in her belief that her daughter will inherit her mental health issues. In response to this, Nancy disclosed that she and her daughter would always have to be monitored and that receiving this support was more important than the stigma that comes with it. Nancy stated:

> I think Allison could be prone to depression, because I see so much of me in her at the same age. Um, can cry very quickly, gets very sad, very lonely, um, and unlike with my parents, I don't tell her "don't be so silly." I cuddle her and rock her and tell her that it's okay and that we can fix it and whatever, but I, I, want to keep those supports around me so that either one of them need the supports that they are not afraid to look. Cause that's the big thing today, everyday, everybody thinks, all they can think about is the stigma, if you suffer from depression and you need help, that you're nuts, your wrong, you've failed, you, right, and that's not necessarily true so.

Because mothers with mental health issues are associated with the "bad mother" status, Nancy had experienced implicit messages that she might not be "enough" to support her daughter. In this instance, Nancy shared that she has made the decision to remain living in the fishbowl for the sake of her daughters' well-being because these formal supports were viewed as having a higher standard of support than her own, "filling in" where she would be "lacking." Annie and Nancy's narratives are examples of the larger unified messages shared by the mothers about being judged because of their children's behaviors. The overlying pressure for their children to be "good" rested in the fact that childcare was

their only socially valued role and to be judged negatively in this role meant that they had no personal value.

Forever in the fishbowl. The mothers experienced the institutionalized social support system as being categorically unforgiving. They shared a simple but shocking reality: They felt as though they will forevermore be living in a fishbowl because the institutionalized social support system provided no second chances to its recipients. All mothers shared their dream of "closing their file," meaning that their formal support workers would regard them as being secure enough to end the mother-worker interaction. Although all mothers spoke of it, not one mother saw this as being a reality in their near future. They explained that frontline workers justified long-term surveillance in their lives by referencing past mistakes. Faye shared that she felt as though she will have formal supports watching her for her entire lifetime:

> There's always someone watching over, right, like, in my opinion they should be there when you need them and either than that, let you live your own life. Because it's almost like, if you do something once to screw up a little bit, you have them hanging over your head forever.

Faye highlighted that she was forced to relive her mistakes from her past and was unable to live life freely because of the constant presence of formal supports. Annie shared that she also experienced this ongoing interaction with frontline workers, resulting in her feeling shame. During our conversation Annie disclosed that she felt that the level of

scrutiny in her life infringed on her right to learn from her past and move forward with her sons. Annie stated:

> It's....you can't be you. You can't, can't make a mistake and learn from your mistake. You know, like, I tries to put a funny spin on it. I said it's like the first day that you wear brown and red together, it's no go, but you realize that it looks horrible and you're not going to do it again. And it's like that with anything in life because everything is a learning process. Being a parent is a learning process, being a young woman in the system and dating....everybody has dated a jerk I'm sure.

Annie highlighted her belief in the normalcy of human mistakes; however, she experienced her mistakes differently than someone who did not receive institutionalized social supports because she did not have the opportunity to put them behind her and move on. Thus, instead of "closing her file," Annie experienced her file as chasing her, having her past mistakes used repeatedly by workers to justify their continued surveillance in her life.

Summary thoughts. The mothers' narratives indicate that they felt overpowered and overwhelmed by the formal supports in their lives. Both Faye and Annie shared that they were unable to live life on their own accord due to the supports they receive. They also stated that they were unable to heal from past mistakes because they were forced to relive them through the explicit and implicit influences of the frontline workers in their lives.

The examples in this theme speak to the overall experience of the mothers feeling

supervised and monitored because they receive formal supports. The mothers shared

feeling disrespected because of these experiences, and unsettled within their daily living

due to the fear of being analyzed by an unexpected frontline worker arriving on their

doorstep. The mothers disclosed workers' justifications for the surveillance as being a

need to "check on the kids." The mothers heard doubts from these workers about their

mothering abilities which were mother-blaming. They also spoke to the repercussions of

their association to frontline workers, resulting in a negative social stigma that directly

effected their and their children's social interactions. The mothers shared that these

experiences directly affected their relationship with their children, especially when their

behaviors were used as a direct assessment of their mothering.

Conclusion

Within all of the themes presented in this chapter there were common themes shared by

the mothers: feelings of oppression, disrespect, disregard, silencing, and conflict. All

these negative experiences were grounded in the lack of equality within the mother-

worker interaction, where formal workers' power position was backed by the power the

institutionalized social support system instilled. The mothers indicated that they did not

feel like an active participant in these interactions; they did not consider themselves in a

mutual relationship with the frontline workers in their lives. All the mothers relayed

painful experiences as a result of their association with formal support workers. The

mothers also shared different ways in which they tried to protect themselves and their

families from the formal supports they received. More importantly, all mothers yearned

for more control in the mother-worker interaction. The consequences of systematic mother-blame were destructive in the mothers' lives, directly influencing their relationships with their communities, friends, relatives, partners, and their children. The mothers felt entrapped by the institutionalized social support services that they received.

Chapter 5: Glimpses outside the box

The last chapter explored the mothers' experiences of frontline workers in their lives, specifically the lack of mutual agreement and trust that occurred in these interactions. The mothers used the phrase "living in a box" to describe the limitations they experienced in daily living because of their interactions with frontline workers. The mothers felt as though they were confined for observation, with no way out. They highlighted that they were provided with the minimum amount of necessities to survive, where their needs were never considered.

One common characteristic across these narratives were the mothers' consistent fight to break free from these confinements. They highlighted ways they resisted oppression. This chapter will highlight the specific ways the mothers resisted this systemic confinement and found ways to create their own glimpses outside "the box". It also includes the mothers' experiences of mother-worker interactions that were empowering, where frontline workers worked collaboratively with the mothers to help them get out of the box. This chapter will explore four themes: life without workers; fighting for freedom; finding a way out of the corner; and exception to the rule.

Theme 1: Life without workers

In this section, the mothers shared their experiences of winning a fight towards their independence. Although these mothers did not win the battle, meaning that they still had forms of formal supports in their lives, the glimpses of freedom from the entrapment portrayed their positive emotions toward this accomplishment. Both Ellen and Faye

disclosed experiencing a period of time in their mothering where they lived with the absence of a service in their lives. In Ellen's narrative, she shared her positive experiences in renting a home away from public housing:

> Ellen: Yep, that's right, I am glad that I am out of housing
>
> Irene: And how about the kids, how are they reacting to...
>
> Ellen: They love it. They love it.

Ellen also described an additional layer to public versus rental housing:

> Irene: What is so different about not living in housing with your kids?
>
> Ellen: Well, if you want something done, you just phone the landlord and he's there. I have experienced it already. The stove went, the element in the stove was gone, so Adam called him, and he was there the next day. He came in and fixed it, and asked if there was anything else that needed to be done, and I said yeah I'll get the list. And he'll do it. With housing, my stove broke, I was using my neighbors stove for a week, cause I couldn't cook, my stove wouldn't work and then finally when they came in I had to ah, they had to send a contractor in instead of their own workers putting the element in the stove. Excuse me! They are just not dependable so it's a big big difference being out in, renting from somewhere private living than living in housing.
>
> Irene: It sounds like so much less stress.
>
> Ellen: Much so, so much more peaceful. You got no worries about someone above or someone below ya, knocking on your walls, side by side, because the

walls are paper thin in housing, you can hear everybody and every sound. I don't have to worry about that.

Ellen disclosed appreciating a respectful response to her requests with maintenance as well as the space and privacy that a rental home provides. In our visit, Ellen also shared her joy in finally being able to have a family dog in her home. This was another positive aspect of her accommodations away from public housing.

Faye relayed that she and Melvin were able to withdraw from receiving financial assistance for a month. According to Faye, her family life was substantially different during that time because she could afford healthy food and not worry about going without:

Irene: And what was it like?

Faye: It was wonderful to be honest with ya. It was really nice not going, well, if I have this glass of juice, I won't have it next week. Right, it was nice to eat healthy. We ate healthy. Like we actually had the proper meats, you know on social services, a lot of ground beef, a lot of chicken. Like there's only so much you can do with ground beef.

Faye shared her happiness about the positive changes financial freedom provided for her family. Not only was she able to have choice in the food items, she was able to provide these items herself, rather than depending on food banks or government assistance. For Faye, removing the system's association from a simple, everyday task like grocery shopping was liberating to her as a mother.

Summary thoughts. Ellen and Faye's narratives are examples of the mothers' shared sense of peace from times when the institutionalized social support system were not penetrating their lives. Each mother shared their contentment about these periods of time in their lives, where all stated that they yearn to return to that freedom in the future.

Theme 2: Fighting for freedom

There were also threads within the mothers' narratives where they expressed their resistance to the confinement of the institutionalized social support system; thus, the mothers disclosed their battle towards making their own glimpses outside the box by seeking or creating open spaces and using them to better their lives. I would like to highlight some examples of the mothers' resistance already shared in the previous chapter. For example, in "point of privilege," Annie disclosed her experience of challenging the frontline worker who used academic jargon during their interactions to speak to her like a normal person. Also, in "life in a fishbowl" the mothers who participated in the focus group stated that they choose not to spend time with neighbors as a way to protect them and their families from being reported to child protection. In these examples, the mothers are relaying how they expressed their personal strength in situations that were disrespectful towards them. This theme will build on these examples by exploring how the mothers find strength to assert themselves against the larger systemic oppression they experience in their daily lives.

The mothers highlighted different ways they fought for glimpses outside the box. Faye stated that she was a determined and resourceful woman. She disclosed that she was knowledgeable about the resources available, stating that "I am not well off and my kids can't….I try to do just as much for my kids as someone that would be rich. I am not afraid to use resources;" thus, Faye stated a determination to provide her children with a lifestyle she wanted for them. Faye also highlighted a resistance to the social messages and judgments about her accessing these resources:

> The women's center, um, it depends, like, they have a great big clothing room, and it depends what's there, because I got some clothes for Carley for the summer there, but it depends on when I go, you can go once a month and….a lot of people are embarrassed to use places like that but it doesn't bother me at all. I went down to the Salvation Army yesterday and I got a kick start gym for her crib. You normally pay $40.00 for that at Toys r' Us, and I got it for $10.00. They wanted more than that but I said "There's no batteries for it and I can't tell if it works.

Faye shared her self-appreciation for her ability to barter. She disclosed that she was the person in the family who managed the families' income. She shared that this income was minimal so one way she was able to save money was with her strong bartering skills.

One significant attribute of resistance Faye described in her narrative was her refusal to take no for an answer. Referring to her struggle to get more appropriate housing, Faye stated:

I had to call them 15 times a day for 3 weeks straight in order to get an answer for my transfer. I waited 14 months with 2 children in a 2 bedroom house. And that's why they gave me that unit, it was to shut me up.

Faye relayed that she lived in a neighborhood where her financial status is unknown; thus, unlike the other mothers where their housing signifies their association with the institutionalized social support system, her and her family were socially camouflaged. According to Faye, it was her strong-willed approach that resulted in her being chosen for her home.

Faye also stated that she refused to pay for services that she believed should have been covered by financial assistance. She highlighted this point during the focus group where she shared her experience with Carley's school fees:

Faye: I haven't paid my school fees in 3 years. I know it's terrible but I don't have the money. And it costs me this much money to send her back to school so…I won't pay. What are they going to do, hold her books back?

Ellen: They will at St. Peter's. They will send notes, and notes, and notes, and notes.

Faye: Oh yeah, they call me once a week, and I kept saying next week, next week. Right I said….If they worked something out for low income, say $5.00 dollars a month or something like that, I know it sounds ridiculous, but…

Faye disclosed that she had drawn her boundaries with the institutionalized social support system. She acknowledged the contradictions in the formals supports she received, such as the expectation for recipients to pay for school fees with their financial support that barely paid for the necessities like food and clothing. Faye had sheathed her fear of the "bad mother" label associated with mothers "in the system" to vocalize her dissatisfaction with their services. She has also shared her navigation through the system to ensure that her children's needs were met.

Annie had also challenged the restrictions that the institutionalized social support system submitted in her life. Annie informed me that she had challenged frontline workers on their practices within her home:

> If your going to come into my house and be like "listen, these are the issues, and these are the issues we need to work on to make your family stronger" I'm like who are you? That's my attitude to half of them, "who are you to tell me what I need to do in my house?" My kids are clean, they're fed, they has what they needs to play with, I don't beat them, who are you? Right?

She also shared that she had challenged frontline workers to take responsibility for their wrong-doings in their interactions with her family. Annie disclosed that she had protested child protections' choice to leave sensitive messages on her answering machine during the boys' home visits with her:

At times, that's what it feels like, they don't let me have my voice, right. And I said "no way." Because there was one time they used to phone me and leave messages on the machine when the children was home for a visit. And that was really hard because they were worried that something was going to happen, there's going to be a knock on the door, and they were going to be taken, um, and they would leave messages for the children to hear, right, because I don't have it on the phone. And they are like "well, you shouldn't listen to your messages while they're there", or "you should turn the volume down on your answering machine" And I said "well you should not be leaving messages like that about the children when you know that the children are in the house." Number 1, that could upset me if I take it and that effects my visit. Number 2, what happens if they hear it?

Annie stated that she experienced unrealistic expectations from frontline workers in regards to parental control of her children's lives experiences. Annie also stated that she had also challenged their blame and judgments of her mothering:

I said, 'you guys have taken my children all because I'm a product of your system, and you don't like what the outcome is.' And their mouths just dropped, and I said 'that's true, I am a product of your system, so who do you blame, don't blame me, blame you guys, because you guys are the ones who created this right.' And they're like, 'oh that's not true, that's not true,' and I said 'but it is.'

To further this point, Annie also relayed challenging frontline workers' dismissal of her voice, stating that she experienced frontline workers in the same way as she experienced her abusive partner:

> [Y]ou might judge me because of the situation I was in, but you're talking to me and treating me no different. Right. You're limiting me, you're limiting what I have to say, my opinions, you're belittling me. And I said "how are you any different? I mean, you guys are paid to protect my children and they are still subjected to the same thing.

She also described her journey to take back her own voice within the formal supports she received. She also shared that she had stopped listening to all the advice and opinions of the frontline workers in her life, and had focused on trying to regain her own voice in her mothering. She said this started with her exploring her values:

> I had to be forced to go ask the question "why" about every aspect of my life until I couldn't ask why anymore. So I can be…I think that my fundamentals aren't any different, but I think my power behind those fundamentals is a lot stronger now, because I am able to say "this is what I want for me, and this is what I want for my kids and I'm not backing down until I do get it." No matter what anyone else says their values are, these are my values and I'm the one who's important to those boys. Whatever my gut feeling says, I will advocate for myself, and I will grow strong, and even advocate for other people even when they don't want me

to. But, because I thinks everybody needs to be comfortable with who they are, right and our voices need to be heard, right. We are living in this world too.

Because frontline workers refused to respect her boundaries with her children, Annie shared that she had told workers what role they would have in her and her children's lives:

I said this is a professional relationship and it stays within a professional relationship, 'cause you're not paid to come at my kitchen and get me stressed out. Right, but me having a tongue, that's got me as far as it has. And I can be quite saucy sometimes.

Annie defused the frontline workers' mother-blaming messages by fighting for her rights as the boys' mother. In our last conversation together, Annie disclosed to me that she had won her battle because the boys would be returning to her within the next couple of weeks.

Summary thoughts. Faye and Annie's narratives are examples of the mothers' ability to find personal voice against the overpowering pressures of the institutionalized social support system. In opposition to the social pressures outlined in Chapter Three's *trust and obey*, both mothers had found their personal strength against the expectation to "shut up and put up," and challenged the formal supports in their lives to take responsibility for the injustices they project on the mothers' lives. Although neither Faye nor Annie had broken free from the institutionalized social support system itself, they did

in fact find freedom from the oppressive guilt and shame that was equated with the systematic mother-blame in their lives.

Theme 3: Finding a way out of the box

The mothers' descriptions of being "boxed in" and "backed into a corner" by frontline workers illustrated how they felt bullied by frontline workers and disempowered by the systemic regulations that backed the workers' actions. They shared that they found themselves in "no win" situations and had to find a way around the pressures and expectations forced on them in order to avoid judgment of their mothering which would risk the security of their family unit. Although in some instances the mothers were able to vocalize their positions and stand their ground, in most others, the power differential between them and the frontline workers made personal expression not an option. As a response to being "backed into a corner," the mothers explained that they edited the presentation of their mothering to frontline workers as a way of protecting themselves from the consequences of false understanding, interpretation, and analyses. The mothers disclosed two ways that they altered themselves. First, they "shape shifted," meaning they altered the ways in which they interacted with their children when frontline workers were present. Second, they disclosed "filtering their words" or "stretching the truth," to provide frontline workers with minimal information about their lives.

Shape shifting. The mothers disclosed that they constantly changed their parenting to coincide with the expectations frontline workers inflicted upon them. I have coined the term "shape shifting" to describe the mothers' change in behaviors to appease

the frontline workers in their lives, which they disclosed doing to protect themselves and their children from the consequences of being negatively perceived by frontline workers. This was important to the mothers because negative worker perceptions directly impacted the level of involvement and length of time workers would be involved in their lives. It also jeopardized the mothers' custody of their children. The mothers shared that they did not have an opportunity to mother by their own accord due to the formal supports in their lives. They explained that each frontline worker brought with them their own set of rules, values, and beliefs about mothering. This section will explore the mothers' experiences as shape-shifters.

Annie shared that she shape shifted in order to please the frontline workers in her life:

> Please everybody, yep, please everybody, right, because that's what you want to do, it's its like you have to put on this show, right, and eventually you can't keep putting on that show because you're drained, right. You can't please anybody in this world. You've got to please yourself.

Shape shifting was draining for Annie. Her sons experienced a different mother depending on which worker was at her house that day. She shared that her goal when the boys returned home was to regain her own sense of mothering and keep the influence of formal supports at bay.

The mothers also indicated that it was significant to prove their "good mother status" to the frontline workers to protect themselves from negative perceptions. In order to project

the "good mother" status, the mothers explained that they were unable to share the ups and downs of mothering because any negative comment, experience, or emotion shared could be interpreted within a "bad mother" context. They felt the need to create positive facades to hide the reality of their lives. Kelly shared that her façade involved always putting on a positive face:

> About it, right? How, you know, like, mothers can have experience to me, right? Because it's something I did not have and I could not show something I didn't have, right? But I knew how to do it, but it's just the problem is, is just getting around to doing it. And I, I learned to just show my children that a smile comes a long way, right? That if you smile, you brightens up other people's day. So if you're having a hard day, and you go around grumpy all the time, your buddies is gonna feel that way. And they'll be thinking, what happened here? So if you goes around with a smile and say hi, how are you doing, you know, right friendly, and that's the way I want to show my children.

Hiding her negative emotions when around other people, Kelly presented herself as overly friendly and positive. For some mothers, the choice to put on a happy face amidst unpleasant experiences of mothering was not an option due to the level of surveillance formal supports have in their lives. Annie, for instance, felt pressured to always have positive experiences with her children to lessen the level of scrutiny she received:

> [B]ut, if there's one thing that I want now for the children to return home is let me live an ordinary life. Stop institutionalizing me, stop picking me apart. Stop

wanting someone to constantly be there because the children are so used to being
in a taxi twice a day, someone being there with mom… let me mess up! Single
moms mess up. You have to miss appointments and forget the soccer game…let
me be normal 'cause I've never been normal." Never. The system has always
been overlooking me.

Annie's narrative highlights the immense pressure that she experienced to shape shift,
thus highlighting an added layer to the mother-worker dynamic. The alterations in the
mothers' parenting were not solely based on their fears of the system. Experiencing
pressure from frontline workers was an indication of workers' mother-blame, where the
mothers did not feel their relationships with their children was valued by the formal
supports in their lives; rather, "good" interactions were something different, something
only known by the former support worker him/herself.

Filtering their words. The mothers referred to the editing of their narratives as
"filtering their words" and "stretching the truth." They disclosed that they would edit
specific details of their lives in their discussion with frontline workers, omitting parts that
did not feel safe to disclose. They relayed that they would also add embellishments to
these narratives that aligned with their understanding of workers' values, opinions, and
beliefs of mothering. The mothers disclosed that "stretching the truth" was not a choice;
rather it was a forced reality of their situations. In Annie's narrative, she disclosed that
she had to filter her conversations with frontline workers because the workers'
assessment of their conversations felt manipulative to her:

Yeah. And be 100 percent honest about everything. But you can't, you can't be honest with them because you, you're afraid that they're going to take it the wrong way, right? And then if you phones them and says, well, you know I'm really worried, they're like, if you think that we've taken something the wrong way then just phone us and tell us that you're worried, but then now, what are they doing? Telling us a lie? Are they keeping a secret? Are they afraid that we're going to find out a secret? You know? You can't win for losing with them, because it's been, it's them manipulating the moment. They really do. It's all about manipulation.

Annie shared that her distrust for frontline workers was based on negative past experiences that were once again repeating themselves in her life. She shared that she was forced to take psychological tests when she was a teenager which results had been used against her during the custody hearing. In the following narrative, Annie expressed her nervousness about having to take a mandatory psychological test which results would be used to determine if the boys would return home. She disclosed that she wanted to tell the examiner how she felt, but she was afraid that being honest would result in her being diagnosed:

Yep. But now when I goes to see the shrink person, Supposingly she's a really nice doctor, Mary was the one who told me about her, she's the new one accepting patients. But I am thinking to myself, it's one thing to sit down and ask somebody a bunch of questions. Question, answer, question, answer, you know. But until you really get to know somebody then you can really understand what

they're answering, and their compassion that they have with their answers. And

now I am going for this psycho testing with someone who doesn't know me, that

never heard my name before in her life. And she's going to do all these test stuff,

and then oh my goodness what happens if I answer something and she takes the

wrong interpretation of what I've said and she sticks me with a label.

Annie was trying to determine what route she had to take to get herself out of the corner.
Her narrative highlighted the intense work that she had to do to figure out what was
expected of her and what were the values and beliefs of her assessor. She questioned
being honest, expressing her concern that honesty had not been favorable in the past. She
shared her frustration that she could not trust her assessor with her concerns about this
testing. She had been told by workers that a diagnosis would result in her children
remaining in foster care. She also shared her fear that her children would also be
diagnosed. Considering the fact that she disclosed to me earlier that she had already
fought against her children being assessed within the past year, this was an immediate
concern for her. She highlighted feeling as though her concerns and fears were muted.

Annie was not the only mother who expressed fear in being honest with frontline
workers. In further exploration of this topic with the focus group, they told me that they
felt as though all frontline workers had to be kept on a need to know basis:

Ellen: It's like the ones that come to you as parenting coach. They writes

everything down and then takes it to social workers, are they allowed to do that? I

mean, if I says something I didn't mean to say it, you will come after me, the social workers. It shouldn't be like that.

Faye: When child protection comes to talk to me, I lies right through my teeth, "oh how are you doing" "oh perfect" mind you, I'm on a real low.....

Sue: You gets discriminate against if you has depression or something like that too, if you need mental health [care]....

Faye: And with the social workers, you have to watch your P's and Q's because they say if you have to talk to them about something, but if you go to them about the wrong thing, they call child protection. You keep your things to yourself. You know, this Tuesday group now, you have to watch what your saying, you have to watch your P's and Q's, because if you say the wrong thing, it's supposed to be able to come here...

Because of past negative consequences with formal support workers, the mothers had indicated that they have "learned their lesson" in trusting people who get paid to help them. The mothers also shared that they were able to recognize when others were editing their narratives for frontline workers as well. Faye shared that she questioned the authenticity of the narratives shared during the intergenerational abuse process group, stating, "[h]ow many times when people tell their problems, most of it is bullshit because they have to cover up what they are really feeling, because if they say what they really are feeling..." At this point, Faye chose not to finish her sentence.

Throughout my discussions with the other mothers, I discovered that Faye was correct in her observations. Kelly disclosed that she did in fact edit what she said in the intergenerational abuse process group. In order to determine what was safe to disclose, she shared that she chose to pass on check-ins so she could gauge the formal workers' reactions to the other mothers' narratives:

> Yeah, and then I knows what to be saying, right. 'Cause certain things that's on
> your mind, you don't want to be saying at all but you wants to say something in
> order to keep something goin' right. So you either say "pass" or "I'll talk
> afterwards" then when other people talks I says "Well, I am having a shitty day, I
> was just wondering if bla bla bla". Because I knows what everyone else is feeling,
> then I feels it, right. Instead of being the first one talking, like "I am having a
> really fucked up day" and "This is happening to me" or you know "The cops
> came to my door."

For Kelly, she stated that she did not feel safe in check-in because the focus was on her, disclosing that she did not have any way of scrutinizing what was safe conversation around the social workers; therefore, she relayed that her decision to intercept on other people's check-ins allowed her to talk about her issues in a way which was safe for her. Kelly also disclosed that she did edit what she said to other frontline workers, saying that "you can't always say everything to the counsellor, sometimes, you know, you have to keep your opinions to yourself but ah, until you get to know the person a lot better right?" In her experience, she disclosed that the development of rapport had been associated with a less likelihood in being misunderstood and reported to child protection.

One negative aspect of "stretching the truth" was the blurred lines between protecting the family and setting a moral president for the children. Ellen acknowledged her struggle between staying moral and having her family go without, or lying and receiving needed services by using methods that set an unfavorable example for her children. Faye stated that she felt as though she was not in a position to make a choice in these circumstances because lying was the only way she could obtain the support her family needed at that time, and Ellen shared a reiteration of this belief by stating that mothers do what they have to do in order to survive, because from her position, it was a situation of survival rather than a way of life.

Annie also disclosed that she had "stretched the truth" in order to get services; however, for Annie, this choice came with a consequence. She shared that her decision to "stretch the truth" became a factor in child protection's decision to remove her children as well the decision for the psychological assessment. When talking about her experiences during these times, she disclosed that maintaining the lies were exhausting because she always had to watch what she were saying; however, based on her shared perspective, the lies were necessary in order to get the level of support she needed.

Annie described in an earlier conversation that this interaction is due to being in "crisis mode," where families begin living constantly in crisis because that was the only lifestyle that received attention from formal supports. She stated that the system was only responsive to crisis, thus, families become adjusted to this form of being because its' influence was so prominent in their lives. In the following quote, Annie highlighted her

belief as to why the institutionalized social support system fostered a state of crisis,

furthering her point by discussing the complications the institutionalized social support

system created due to the lack of consistency families have with frontline workers:

> Well, if you go there, they are supposed to be getting involved as crisis
>
> intervention, before crisis happens. But child welfare is that backlogged, that they
>
> cannot get involved before the crisis happens, they get involved when the crisis is
>
> occurring, right. And once a family is spinning out of control, until that family
>
> hits rock bottom, there's no talking to that mother. I don't care what you say. You
>
> can't stop it when it's spiraling like that. Once it starts to go, you have to wait
>
> until things calm down and then you have to rebuild it.

Annie shared her belief that the crisis was directly linked with frontline workers immense

caseloads because workers were unable to maintain a preventative stance, rather, they

only had the time and resources to respond to crisis.

Summary thoughts. The mothers' experiences of being "backed into a corner" by

frontline workers gauged a magnitude of emotional responses which conflicted with their

moral values. Because there were potential consequences for standing their ground

against the formal supports they received, the mothers felt cornered into making choices

that might not have been morally sound, but in their opinion, protected their families

from the wrath of the institutionalized social support system. The mothers identified a

cycle of mother-blame in their experiences. The frontline workers' actions that "backed

them into a corner" treated them as "bad mothers." The decisions they made to counter

these "no win" situations conflicted with their morals, and as Annie illustrated, with those of the institutionalized social support system as well. Frontline workers' discovery of the mothers' "shape shifting," "filtering their words," and "stretching the truth" further validated workers' "bad mother" beliefs which then resulted in an increase in the mother-blaming actions that began the cycle. As was indicated by the mothers, the navigation around the values and beliefs of frontline workers did take a lot of time, thought, and effort; however, being able to do so enabled them to take back some control and power over the wellbeing of themselves and their families.

Theme 4: Exception to the rule

One personally uplifting theme that the mothers relayed was the fact that they did indeed have positive interactions with frontline workers. Although most mothers only identified one worker as being positive amongst the numerous that were involved in their lives, the mothers did acknowledge frontline workers as mutual, respectful collaborators with them in their battles to get out of the box. The mothers shared a variety of experiences where they appreciated the formal support workers in their lives. They relayed feeling mutual respect, understanding, and open dialogue in these interactions. These narratives provided a significant perspective of the formal supports within the institutionalized social support system because the mothers indicated what approaches were authentically supportive of their mothering.

Kelly disclosed a positive interaction with a child protection worker, saying "the one that I got now and she's perfect. And we goes 50/50. We can talk, you know, like she sees my

guard and I sees hers, you know, I sees her boundaries and she sees my boundaries"; thus, for her, having a worker respect her privacy as well as understand her limits on self-disclosure was the foundation to a good mother-worker interaction.

For Faye, she disclosed an appreciation for her family doctor:

> He's an excellent doctor. He's patient with the kids, he's thorough, he's very supportive. If you have any questions or problems… When I had trouble with my blood pressure during my pregnancy, every time I go in, it doesn't matter who the appointment's for, he checks my blood pressure, right. And where a lot of medications like cough medicines and Tylenol costs money, every time I go in he gives me some. He gives us the samples…we don't buy the children's medications, because you are paying over $15.00 a bottle, we get ours for free from him. We have never had a problem. Anything that we ever needed he's there.

Faye stated that her doctor understood her financial constrictions and because of that she did not have to fight for the services she needed. Ellen stated an appreciation for the understanding she received from a clinical social worker: "she's a big help. Really big help, she's understanding. Where she's a mom herself, she knows what it's like being a mom, and she can relate." Ellen described her relationship with this worker as having mutual respect. In Ellen's experience, the worker would disclose her own struggles and achievements with her children. Ellen disclosed that the worker did not present herself as knowing all the answers in parenting. Ellen stated that she appreciated this form of

interaction, and that she felt she could be open with the worker because of her

disclosures. Nancy stated how her positive interactions with the same worker resulted in

positive changes in her perception of her mothering:

> Well, it, it (pause) when I do things right, it makes me feel good about the way
>
> that I treat my children and if I do things wrong, it's not a slap on the wrist. It's
>
> um, I can see that whatever I've done as, as much as I think it's detrimental to
>
> them that there's ways to rectify it and pick up the pieces and give 'em back their
>
> poker chips and stuff like that. So they don't see um, the little bump as a big life
>
> altering situation. And I've learned that ah, that if I do or say anything, then I can
>
> apologize for it and it's done. And it's not festering with them, so. Um, it's just
>
> that it gives me the tools to be able to say that I made a mistake and let's start
>
> over again and talk about it whereas a year ago I probably wouldn't have done
>
> that, right.

For Nancy, she stated that her interaction with this frontline worker had facilitated a

decrease in the mother-blame discourse that she had internalized. Annie also experienced

a positive interaction with a social worker:

> Sarah is awesome. Sarah knows what my abilities are so....I meets with her every
>
> week and she sees how much in 9 months how I resolved my thought processes
>
> with my children. Um, and I have never been mad at the system, I have been
>
> disappointed with the system. But, um, no, she's talking to housing for me
>
> because they're just...I don't know what's wrong with them, and child protection,

she calls child protection and she says "here I am, I am a social worker too, right, I don't want to work in the child protection field, I would rather work like this and help families get stronger and whatever" But she calls child welfare on their stuff, guaranteed.

She also stated:

I have been really, really fortunate with Sarah because Sarah is very woman power she is. Very, very woman power. I think it's, if it's successful counselling, it's someone who keeps you grounded. It's someone who you can vent to, and as long as you don't tell them that your going to kill somebody, you know, your able to be true, you know, and bounce something off and have someone say "you know, that sounds absolutely ridiculous, you know." And if your struggling with a certain issue, then…I know mine and Sarah, Sarah doesn't give me an answer to anything, she just keeps asking me questions, over and over and over and over and once I give and answer, she questions me again, if it's… she helps me with that. That's why the whole "why" thing is so important to me, because Sarah gets me to constantly answer a question until I'm like "that's it, this is the answer. I can't answer no more" right.

When talking about Sarah, Annie stated an appreciation for feeling understood. She also shared feeling supported by Sarah when she advocated on her behalf. Finally, as was stated in the second quote, Annie experienced Sarah brainstorming with her to help her find her own ideas and answers rather than taking the expert role and telling Annie what she thought was best for her.

Annie also stated experiencing Sarah supporting her voice within the institutionalized
social support system. Annie disclosed hearing this from Sarah in a meeting they
attended that was to determine if Annie's sons were going to be returned to her care.
Annie stated that Sarah said to her, "Annie, you're going to speak, and they're going to
listen, and if they interrupt, we will, we're the ones that are there. We are their colleagues
in this system, right, and it forces them to listen." Thus, Annie experienced Sarah wanting
to support her voice within the situation rather than representing her voice by talking for
her. As Annie described to me, she had experienced frontline workers talking for her in
the past and she also have had her voice discounted in prior meetings regarding the boys'
custody when she presented her side of the story; thus, Annie disclosed that she felt Sarah
tried to ensure this experience did not happen to her again.

Summary thoughts. The mothers highlighted in their narratives that they had positive
responses to a decrease in power differentials within the mother-worker interaction. In
these experiences, the mothers shared that they appreciated having a voice in how the
interaction developed. They also indicated responding positively to the experience of
having their boundaries respected and their narratives heard through non-judgmental ears.
Finally, there was value placed on mutual self-disclosure about mothering.

Conclusion

This chapter highlights the mothers' narratives of resistance in how they navigate their
way through the institutionalized social support system. By providing glimpses outside

the box, the mothers portrayed their experiences of freedom from the pressures of formal supports, institutionalized mother-blame as well as the complacency of receiving formal supports. The mothers have indicated their methods to take back control over their lives, and the rewards they experienced when they were successful in doing so. Most importantly, the mothers indicated that not all glimpses outside the box were disconnected from their interactions with frontline workers; rather, they indicated that glimpses could occur when interactions were respectful and empowering. Thus, the mothers' glimpses outside the box signify their perseverance in breaking free from the systematic oppression associated with the social stigmatization of being "in the system."

Chapter 6: Discussion

This research examined how the mothers who participated in the intergenerational abuse process group experienced the influence of the institutionalized social support system on their understandings and experiences of mothering. A central finding of this research acknowledges that the mothers' experience "the system" through their interactions with frontline workers. The previous three chapters relayed the mothers' perspectives of their experiences with frontline workers. These interactions were complex. They described experiences of oppression and disrespect as well as forms of their resistance and assertiveness with the formal workers in their lives. They shared their acknowledgment of systemic constraints influencing these interactions. They also expressed their anger towards workers for their involvement in the varied forms of discrimination against them. In this chapter, I examine the complexity of the mothers' narratives in relation to current research and literature on mothering and mother-blame. My understanding of the mothers' narratives was enhanced by exploring the literature, and in turn, the literature will be enhanced by the mothers' narratives. Exploration of these links has been divided into three sections: life within the institutionalized social support system, the power "tug-of-war", and final thoughts.

1) Life within the Institutionalized Social Support System

The research highlights the vast and multiple ways the mothers in this study are constantly navigating the impact of the system on their lives by tracking their interactions with frontline workers. It presents how mother-blame becomes enacted within the system and the effects this has on the mothers' understandings and experiences of mothering. Many of the mothers' experiences related with the lives of mothers discussed in the research literature. The focus of this section is to connect the findings of this research with the academic literature. This section gives a summary of mother-blame within

mother-worker interactions outlined in the previous chapters. It equally summarizes the mothers' experiences of "the system" outside of these formal support interactions Connections between women's experiences of the Newfoundland and Labrador institutionalized social support system, the institutionalized social support systems of other Canadian provinces and the United States are highlighted where possible.

Formal support workers had a negative impact on their development and maintenance of informal supports. The mothers highlighted that their struggles to make and maintain connections with others in their community were negatively impacted by having formal supports workers in their lives. These experiences coincided with those found by Hanna (2001), Keating-Lefler et al. (2004), Little (2001) and Ortega (2002) who highlighted how a disconnect occurs between those who receive formal supports and their communities because of the negative stigma associated with receiving institutionalized supports. This research stresses that the mothers concerns are real. It shows how they are aware of the judgment of their mothering and they act accordingly to counter it. The mothers' experiences of social isolation are examples of how "the system" links mothers to mother-blaming discourse.

Surveillance and unsolicited support by frontline workers narrows and complicates the mothers' lives. The mothers placed a great deal of emphasis on their experiences of surveillance and unsolicited support by frontline workers. They stated that these experiences made them feel like bad mothers. The mothers shared that they have altered their lives because of frontline workers' surveillance and unsolicited support. For instance, the mothers altered some of their activities if they knew child protection workers were on duty. For some mothers, these experiences directly influenced their parenting styles. Annie shared that she altered the ways she interacted with her boys

depending on which formal worker was with them at that time. Faye disclosed that she did not discipline her children in front of frontline workers in fear of judgment and consequence. Lastly, Faye relayed that she did not disclose negative emotions about her mothering to frontline workers to ensure they did not have "ammunition" against her.

The mothers also disclosed struggles in making key family decisions because of the surveillance. Little (2001) and Scarbrough (2001) made similar observations about the of disruption and challenge experienced by mothers in their research. They stated that the mothers remained cognizant of how much time a visitor spent in their home, especially men, in fear that they would be accused of having an unregistered partner living with them; thus, they would be engaged in welfare fraud. My research supports findings that mother-worker interactions place mothers in very oppressive positions when raising their children. The mothers live in constant fear of the systemic consequences regarding the difficult decisions that have to be made in mothering. While the literature highlights child protection as the formal support of main concern for mothers, this research highlights that mothers have to alter themselves in order to protect them and their children from all the varied services in the institutionalized social support system, not just child protection. Specifically, housing, financial services, and law enforcement also curtailed their voices and actions. Awareness of the pervasiveness of the systems' intrusions of the mothers' lives is an important finding which supports the need for future research on this issue.

As an aspect of the unwanted surveillance, the mothers highlighted that there is a level of entitlement from the system over the private information about their family. In turn, frontline workers assert their right to information regarding the mothers' lives, which justifies their intrusive monitoring actions. There is a heightened level of intrusion experienced by the mothers as a result of this scrutiny. This theme is also relayed in the literature. Little (2001) stated that the Ontario institutionalized social support system had

mandated a compulsory questionnaire for those living within a home that receives institutionalized social supports. She cited examples of questions the mothers were expected to answer such as "Does your co-resident attend your children's birthday parties" (p. 27). A common theme between the literature and the mothers' lived experiences is their loss of independence and privacy as mothers and women.

Formal supports create negative feelings for the mothers. Feelings such as frustration, anger and shame were also expressed by the mothers in response to them receiving supports. The literature also reported these emotions from other recipients of formal supports. Little (2001), Nicolas and JeanBaptiste (2001), Scarbrough (2001) and Swigonski (1996) highlighted that negative emotions were disclosed due to circumstances such as the loss of control and independence. As an example, Little (2001) relayed one mothers' shock and anger towards being falsely accused of welfare fraud, leading to her name and her "crime" being published in her rural local paper. According to Little (2001), the mother had no control over slander and her reputation. Although she was found innocent and the charges were dropped, she expressed her negative reactions towards the formal support worker laying the charges against her because the worker assumed her guilt and treated her unjustly because of this assumption. Both the literature and this research highlight workers' lack of respect and the mothers' loss of control causing these referenced negative emotions.

The mothers are misunderstood by society because of the no-win situations they are forced into by the formal supports in their lives. The mothers also disclosed that they felt forced to edit their narratives with formal support workers and driven to disregard rules and regulations at times. As a result, mothers have been labeled as living a "cunning" lifestyle, where they will say or do anything necessary to receive support from the government. Little (2001) described this societal belief:

Many believe that single mothers are lazy-watching soaps and drinking beer-rather than providing important care to the future generation of citizens. As well, it is popularly believed that single mothers have children to receive more welfare money, and that they are a "drag" on the welfare system, remaining on welfare for their entire adult lives (p. 15).

While actions do occur which could be perceived as "dishonest," these decisions are based on mothers' need for survival rather than a desire to be fraudulent. As Scarbrough (2001) indicated, poverty positions mothers in a no-win situation. They either conducted acts against regulations which would protect their children from harm or follow regulations and suffer adverse conditions. Little (2001) relayed that mothers receiving financial formal supports have returned to abusive relationships against the advisement of formal workers in order to ensure stable shelter for her children. She also highlighted that mothers have admitted to engaging in underground employment so to enhance their monthly income.

Mothers are discontent with their interactions with formal support workers. The final and most significant theme linking my research and the literature was the mothers' discontent with their experiences of frontline workers. There were varying degrees of disrespect highlighted by the mothers within mother-worker interactions. On one level, the mothers disclosed feeling annoyed by frontline workers' attitudes, behaviors, and actions. Mothers shared that the workers did not consider their needs or reactions. The literature conveyed mother-worker interactions as not being supportive nor authentic (Greaves et al., 2002; Hanna, 2004; Little, 2001; Keating- Lefler & Wilson, 2004; Keating-Lefler et al., 2004; Nicolas & JeanBaptiste, 2001; Ortega, 2002; Scarbrough, 2001; Swigonski, 1996).

Formal supports in the mothers' lives made experiences of mother-blame more pervasive, complicated, and intrusive. Because the institutionalized social support system is grounded within patriarchal values and beliefs, mother-blaming meta-narratives are the core of the predominant support services it provides. Baker and Tippin, (1999), Hancock (2003), Jennings (2004), and Sidel (2000) have all highlighted how government favorability of corporate enhancement has overrode priority towards the sustainability of our country's social infrastructure. Davies, McKinnin, Rains, and Mastronardi (1999) highlight this social situation best:

> Coupled with this increasing managerial control over child protection, severe cuts in state spending on social welfare in Canada, as elsewhere, have exacerbated the already strained relationship between social workers and their clients. Rising demand for social services, declining resources, and challenges to social work expertise provide the context within which administrators face critical decisions regarding service priorities and modes of service delivery (p.104).

The challenges caused by the lack of political prioritization for our country's social system are paramount, leaving minimal support for those who need it which forces them to try and make ends meet on their own. Because of this, mothers who struggle to be financially self-sufficient or who are unable to balance all the responsibilities expected of them are seen as being "not enough" of a woman/mother. The reality is that she does not have the support from the larger social context to help her reach her potential in these roles (Hancock, 2003; Jennings, 2004; Sidel, 2000).

The literature highlighted how the institutionalized social support system punishes recipients rather than support their journey towards independence. Little (2001) described this dynamic best in a concluding statement:

> This is a highly intrusive, punitive welfare state which does not begin to treat its citizens with dignity nor recognize their real needs. This results in a loss of both material and moral power for poor single mothers. Not only has the state taken food out of their mouths but it has also restricted the arena upon which they can make claims upon the state. Single mothers, in particular, have been targeted as poor role models, undeserving of state help. The age-old truth that welfare is inadequate and that those living on welfare live in poverty is now questioned and even considered improbable by many in our society. Now people firmly believe that poor single mothers are lazy, criminals and should not share the same basic rights to food and shelter that all other citizens enjoy. This is a fundamental shift in the way we think about poor single mothers. This not only affects single mothers, it affects all women. When welfare programs are miserly punitive and demeaning in nature it affects the choices all women can make about their lives. It discourages women from leaving abusive partners and harassing employers, attempting to create new and brighter futures. Until all women have the ability to feed, clothe, and shelter themselves and their children without fear or reprisal we do not have a real democracy where its citizens are truly free to exercise their civil, political, and social rights (p.32).

Little (2001) boldly presented the magnitude of the institutionalized social support systems' failure to mothers. Within her statement, she highlighted poverty, stigma, and oppression within the realities of the mothers she researched living in Ontario. It is important to note that Ontario regards itself to be the leader in proactive formal support providers amongst Canadian provinces. When you think about it, Canada considers itself to be a socially tolerant and supportive society; however, the reality of these women's narratives indicate that there are human right issues occurring within the heart of our communities, and not only does the government ignore them, they facilitate further oppression and stigmatization through the lack of acknowledgement and priority of this topic in parliament. The current research depicts women's lived experiences of these invasions and their struggles to maintain their autonomy.

2) **The power "tug-of-war": discussing the findings of this research**

The previous section explored the themes throughout this research that directly related to topics discussed in the academic literature. This section will now discuss and analyze the findings of this research that adds to this knowledge base. In this chapter I will make valuable links between mothering, mother-blame in the institutionalized social support system and mother-worker interactions. This section will also identify ways this research extends the body of knowledge regarding these topics through three key areas: 1) mother-blame within mother-worker interactions 2) the negative influence institutionalized good mother/bad mother discourse has on mother-worker interactions 3) and the effects of institutionalized social supports on mother-child relationships. These topics outline the differing power differentials involved in mother-worker interactions.

Mother-blame within mother-worker interactions

In this section, I examine the literature on frontline workers' experiences of the institutionalized social support system and connect these experiences to the mothers' narratives of frontline workers in order to explore the role of mother-blame in mother-worker interactions. Frontline workers' primary role is to implement the regulations of the institutionalized social support system; however, Barter (2000) and Dallaire, Chamberland, Cameron and Hebert (1995) portrayed a major shift in what these supports entail, where political priority has made fundamental shifts in the way frontline supports are conducted, resulting in many frontline workers losing the ideologies of social work theory within the positions they hold. As a part of this shift from being client- focused to system-focused, Morrow, Hankivsky, and Varcoe (2004) reported a loss of adequate resources, which from their perspective is dismantling the Canadian social welfare state. Kufeldt, (2002) stated that the resources of the Canadian institutionalized social support system are granted mainly for procedures that are in benefit to it (e.g., investigations and risk assessments) rather than those receiving its' services. Frontline workers interactions with families are now working with a minimal support system and mothers are experiencing these supports as inadequate.

The mothers understood the compromised positions of the frontline workers in their lives. Workers had to obey the rules and realities of their positions. They experienced formal workers being torn between legislation and their own personal beliefs. The mothers had to navigate the complex terrain between understanding the constraints faced by frontline workers and feeling angry, frustrated, and helpless at their inadequate supports which

compromised their empowerment as mothers and further blamed them as mothers. Appreciation paralleled frustration and empathy congealed with contempt. For instance, mothers voiced their anger and frustration with housing officials, yet shared their acknowledgment of housings' lack of funding and support from the government.

How do we distinguish systematic mother-blame from the frontline workers' personal mother-blaming beliefs? In answering this question it is important to attend to each mothers' experience of specific frontline workers on a case-by-case basis. As an example, the mothers of the focus group experienced financial assistance workers making disrespectful and belittling statements such as: "this is what you're getting and if you don't like it, then you'll have nothing." Again, the mothers are experiencing mother-blame within these interactions, but it is based from the formal workers' belief systems. Within these instances, it seems as though the power the frontline workers receive in the positions they hold (hence the institutionalized social support system) shelters them from being challenged when they are disrespecting clients.

The mother-blaming comments presented above differ substantially to comments grounded in systemic mother-blame. Sue and Ellen highlighted housing officials' reasons for not repairing their units was due to the lack of workers. Kelly's service worker missed her transportation renewal due to her lack of time caused by large caseload. Another point of frustration for the mothers was the unavailability of formal support workers after hours. In these instances, it was often difficult for the mothers to determine which party was responsible for the disrespect and disregard they experienced: the formal worker

him/herself, and/or the institutionalized social support system. These responsibilities were not always clear in their daily interactions. For instance, when the government made false promises to expand social supports to low income families, at times the mothers experienced this injustice as coming from frontline workers themselves. As messengers representative of "the system," it can be difficult to separate the frontline worker from "the system" within which they work.

These distinctions are important because, as was stated by Caplan (2000), mother-blaming discourse has been difficult to challenge due to its' whisperings in the everyday discourse of our society. This research has shown in a visceral way how dominant mother-blaming ideologies are enacted within the mothers' lives. For example, Little (2001) stated that:

> Welfare rate cuts and workfare encourage the belief that all welfare recipients are gender neutral- equally able to 'top up' miserly welfare cheques and equally available for employment. Consequently these welfare changes virtually ignore the different child care and familial responsibilities of women, and therefore remain gender blind to how these legislative reforms have a profoundly negative impact on poor single mothers' lives. The introduction of new anti-fraud measures have explicitly targeted poor single mothers, encouraging the belief that they are morally suspect and require constant and diligent scrutiny (p. 15).

The government does not acknowledge mothers who receive institutionalized social supports as individuals with a unique set of needs; rather they treat these mothers as regular people who choose social delinquency. The belief that low-income children are in higher risk of being abused than those in other socio-economic classes rises from this misconception (Swigart, 1991). The governments' fueling of unannounced visits aligns with Hancock's (2003) recognition of society's viewpoint of "bad mother" based on class. Also, the mothers' outrage towards child protection workers talking to their children about abuse without being informed is more complex than their anger towards the individual workers themselves. Although the mothers shared that workers' personal mother-blaming beliefs were present in their interactions, they also recognized that the workers were mandated by law to proceed in the ways which blamed them as mothers.

Frontline workers also experience anger and frustration with the institutionalized social support system. Barter (2000) reported that frontline workers are caught between two positions where they must stay objective to abide by the rules while simultaneously providing a subjective lens; thus, workers are caught playing a professional guessing game, where each worker must make a decision about the stance he/she will take in each case (Barter, 2000). This decision then guides the way in which formal support workers interact with their clients. In her exploration of the social work profession, Barter (2000) gave perspective to this point:

Social workers see the impact of injustices on citizens who lack opportunity, resources, and power. They experience the frustration, anxiety, conflict, and

dilemmas associated with being involved in public systems that are not necessarily friendly to professional autonomy in practice or that may not accept the integration of professional codes of conduct in policies and procedures. Social justice, advocacy, client participation in decision-making and individual empowerment are not principles or values generally supported with public government bureaucracies. Social workers who remain true to these values and principles are not seen as loyal to the organization. Instead, they are viewed as problematic and frequently blamed, labeled, and judged on how well they uphold the norms and values of those in positions of power as opposed to their professional and creative competencies. The stress, value conflicts, and dilemmas stemming from such judgments create tensions for many workers. They often find their work not rewarding or comfortable. Morale becomes an issue and interferes with embracing change. Burn-out, illness, and turnover are common (p. 8-9).

Workers face hardship and stress particularly those who seek justice and empowerment for the mothers they work with. This stress faced by workers further impacts the quality and continuity of support the mother receives. An example that seems fitting to mention is Annie's run-in with her child protection worker who was pregnant at the time of their interaction. In her narrative, Annie stated that her child protection workers decision to take stress leave interfered with her battle to get her boys back in her custody. This meant another three months without her sons. Annie reacted to this injustice by indirectly and directly criticizing her frontline worker for allowing this to happen to her and her sons. In not having her case addressed as planned, Annie felt blamed as a mother

by her worker. She received the message that her relationship with her kids was not deemed important enough to her worker. The system's lack of continuity in resources and support to both the mothers and workers creates a complexity of emotion and entanglement between mothers and frontline workers supporting an individualizing of blame rather than often a strong critique of systemic institutional injustices which perpetrate mother-blame. As Morrow et al. (2004) stated, government cutbacks affect the time and quality of supports workers can provide.

The impact these forms of mother-blame had in women's lives was significant. In exploration of mother-blame, Swigart (1991) recognized a sense of powerlessness. She argued that mothers internalize the loss of power due to their inability to either influence or direct their children's life experience. Mothers come to understand themselves, as mothers, within the negative stigma associated with receiving institutionalized social supports. The social and systematic failures can become internalized by mothers, so that they understand their mothering struggles as being caused by their own personal-social failures side stepping the magnitude of barriers they face as mothers who receive institutionalized social supports.

The struggle for power: How systemic mother-blame discourse limits mother-worker interactions.

Mother-blame within the mother-worker interactions is important to explore in context. Literature on worker/client interactions tend to focus on the inequitable power relations between the formal worker, who holds more authority/power than the client (Caplan, 2000; Donovan, 2000). This research also highlights the larger context of material and

symbolic power of the institutionalized social support system and its impacts on mother-worker interactions. The institutionalized social support system sets the context for mother-worker interactions. Its rules, procedures, assumptions, and beliefs both perpetuate and produce good mother/bad mother discourse which enters and impacts mother-worker interactions.

Swigart (1991) recognized the independent relationship between the good mother/bad mother constructions of mothering. In listening to the mothers' accounts I saw the ways in which they became constructed by "the system," by workers, and at times by themselves as the "bad mothers" and the workers, in contrast, were positioned as the "good mothers" within the oppositional binaries of the martyr and the menace: pure versus scarred; selfless versus selfish; independent versus dependant; role model versus scapegoat (Chase & Rogers, 2001; Hancock, 2003; Swigart, 1991). In fact, Caplan (2000) argued that these additional dualisms are embedded in the social constructions of the "good and bad mother".

The literature highlights that the title of the "good mother" is equally oppressive to mothers as is the title of "bad mother." According to Chase and Rogers (2001) the "good mother" role represents the mothering characteristics valued by patriarchal idealisms which do not concur with the reality of mothering. Although these mothers experience contradictions between their lived realities and those associated with their esteemed mothering status, they remain silent in fear of social judgment and scrutiny (Chase & Rogers, 2001). Swigart (1991) argued that this disjuncture is in fact more prevalent in the

lives of formal support workers because of the personal and professional repercussions this fall from grace would entail. I understood many of the interaction barriers described by the mothers as being created by workers' lived façade of mothering. The mothers described experiencing workers "not practice[ing] what they preach." They vocalized that parenting advice they received from frontline workers did not coincide with that of their lived experiences of mothering and they were perplexed how the frontline workers could not "be real"/ realistic about mothering. This led the mothers to challenge frontline workers on their "good mother" discourse to, moreover, dismiss the support workers were providing altogether.

The findings of this research also highlight the negative impact "bad mother" discourse has on mothers' lives as well. Bad mothers are treated as though they are not good enough (Caplan, 2000), trustworthy (Swigart, 1991), or valuable (Chase & Rogers, 2001). The mothers in this study experienced these negative "bad mother judgments by workers and felt the expectations by workers to be the "good mother." They stated that the supports they received were attempts to reform or remold them into "good mothers." Caplan (2000) recognized the impact "good mother" formal support advice giving had on mothers' sense of self:

> Ironically, many real mistakes that mothers make are based on bad advice from 'experts' or on the misguided attempts to follow that advice. Yet there's no shortage of experts willing to condemn anything a mother does, and she herself often feels woefully inadequate. Plagued by impossibly high expectations for their

behavior and/or trying to follow "expert" advice, mothers develop intense anxiety and guilt (p. 106).

Enforcing "good mother" expectations felt oppressive to mothers in this research. Not only did formal support workers engage these negative messages in their interactions with mothers, they also use them to justify uncaring actions towards them. Examples of these were relayed in "trust and obey" where the workers' notions of "good mothering" overrode the mothers' right to make decisions for them and their children. The institutionalized social support system though the actions of the frontline workers can be seen to force the mothers to prove their merit as mothers against the patriarchal definition of motherhood described by Caplan (2000) and Wolf (2001).

Another way in which the mothers experience the stigma of "bad mother" by frontline workers is through workers' disregard for them as women. The mothers disclosed experiencing the frontline workers' locking them into a fixed identity of *Mother*, rather than considering the many other aspects of their self-identity. In being perceived as "inadequate mothers," the mothers felt that their own personal growth as women was not considered to be a valued concern of formal support workers. Mothers often felt as though workers believed them to be a "lost cause," thereby placing full emphasis on the welfare of their children and ignoring their personal needs. Little (2001) emphasized the severity of this systemic neglect in her exploration of mothers' malnutrition, where the lack of sufficient government funding resulted in mothers' inability to provide food for themselves. Similar results were found in this research where the mothers disclosed

eating fewer meals and less healthy choices so to ensure that their children would be adequately nourished. Not only are mothers' immediate needs ignored, their emotional needs hold minimal value in these interactions as well (Kufeldt, 2002).

In listening to the mothers' narratives about the complexities of their interactions with frontline workers, I saw varied reflections of these kinds of layered oppositional constructions. I heard the systemic mother-blaming messages weighing more heavily on the mothers' notions of self than their lived experiences. The mothers associated themselves more with the mother-blame than with their strengths and resiliency as mothers. The mothers' inability to claim their own mothering strengths is an area in need of further exploration

This research supports Caplan's (2000) argument that mothers can not be defined within these dualistic constructions of mothering. She argued that every mother embodies strengths and challenges daily in their experiences of mothering:

> Nearly everyone who has taken care of children has sometimes felt so frustrated, exhausted, and helpless that they have used some sort of physical punishment or abused a child outright (then felt horribly guilty for doing so) (Caplan, 2000 p. 48).

All mothers struggle with raising children. Caplan (2000) also relayed that the behaviors of the "bad mother" are caused by larger social issues rather than the flawed personality of the mother herself:

Although child abuse is wrong and damaging to children, my own work in this area has shown that the misrepresentation of research findings takes the focus off important issues that contribute to the abuse, like the mothers' lack of support and their sometimes desperate circumstances. It feeds the fear that mothers are dangerous especially compared to fathers, and can create a self-fulfilling prophecy: when a woman believes that she is a horrible mother, her self esteem plunges and her sense of isolation grows, increasing the likelihood that she will be abusive (p. 48).

Mothers who experience the social injustices of being labeled and socially isolated often internalize "bad mother" social constructions which leave them blaming themselves. In this research, the mothers both internalized these mother-blame messages and fought against them. One of the strengths of this research is its illustration, via women's voices, of this complexity. The glorified atrocity of the "bad mother," such as her inability to control her piths of anger, somehow becomes associated with the frustrations of everyday child-rearing (Swigart, 1991). This results in guilt, shame, and fear in mothers' lives (Caplan, 2000). Mothers then, according to Caplan (2000), struggle to explore these experiences of mothering in fear of unveiling the "bad mother" side of themselves to the public eye. Thus, the exploration of mothering in mother-worker interactions is fragile for both parties, where frontline workers tread lightly about their experiences due to their fear of losing the "good mother" title (Davies et al., 1999), and mothers receiving institutionalized social supports edit their words in fear of losing custody of their children. In effect, the good mother/bad mother discourse has created a barrier for

mothers and workers to explore their commonalities of the messiness in mothering. This research highlights the importance of exploring these complexities and intersections.

Baker and Tippin (1999) argued that these false notions of mothering in our social institutions impede mother-worker interactions. The taboos of exploring the challenging aspects of mothering are magnified by the institutional policies that guide these interactions. Because there is a negative social narrative about the ways in which formal workers and mothers interact with one another, the mother's and workers' perspectives are skewed about the ways in which they should work together (Baker & Tippin, 1999; Davies, Krane, McKinnon, Rains, & Mastronardi, 2002). Equally so, the social meta-narrative about the ways in which the two are expected to interact impedes the development of positive rapport and interactions between mothers and workers (Davies et al., 1999). Importantly, there is hope. The findings in the "exception to the rule" (see pg 131) revealed the positive and powerful interactions mothers and formal workers could have when "good mother/bad mother" discourses were detached from the institutions' frame of reference. Further research is needed to explore how the formal workers and the mothers were able to break free from these negatively-impacting discourses. Changes in mothering discourse will also have to co-inside with changes to structure, practices, and policies as well.

Introducing the fourth party: The children

Consistent with the literature, this research also relayed the ways in which the institutionalized social support system, formal support workers and mothers justify their

actions/decisions by stating that "it was in the best interest" of the children (Baker &

Tippin, 1999, Davies et al., 1999, Kufeldt, 2002, Little, 2001). Across their perspectives,

what is considered "in the best interest" of the children vary, creating a dynamic of each

party trying to protect the children from the other (Baker & Tippen, 1999; Child Youth

and Family Services Act, 1998, Cleveland & Hyatt, 2003, Davies, et al., 2002, Little,

2001).

Davies et al. (2002) stated that the mothers' countering actions were viewed by formal

support workers and policy creators as being resistant to services. The mothers of this

research expressed feeling personally attacked by workers and "the system". They stated

that workers' were sabotaging their relationship with their children. Some examples

shared were blatant, such as correcting their mothering in front of their children. Others

were more subtle in nature such as the mother-blaming messages of "not being enough."

These actions affected the mothers' relationships with their children. Annie's sons

repeated mother-blaming discourse to her in their interactions; and all mothers relayed

that their children threatened to call child protection and report them for child abuse.

In these disclosures, the mothers' relayed feeling overwhelmed by their efforts to counter

the powerful influence "the system" has in their daily lives. They shared witnessing their

children being affected by the same negative consequences that they experienced due to

their interactions with these formal support workers. The literature acknowledged that

formal services provided to families were child-focused, neglecting the mothers'

empowerment from the equation (Davies et al., 2002; Little, 2001). It is, moreover,

recognized that the disempowerment of mothers consequentially results in the disempowerment of their children as well (Caplan, 2000; Chase & Rogers, 2001; Kufeldt, 2002; Little, 2001; Swigart, 1991).

3) Final reflections

A final layer of exploration about mother-blame in mother-worker interactions looks beyond the institutionalized social support system to the larger social context. The literature indicated that there is indeed a social purpose for the mothers' experiences (Baker & Tippin, 1999; Caplan, 2000; Chase & Rogers, 2001; Kufeldt, 2002). The purpose of oppressing women is for the gain of patriarchal values (Baker & Tippin, 1999). Akin to the women who were feathered, tarred, and trapped in stocks in Elizabethan times, the "bad mother" is a shock value social example to keep the masses aligned. Caplan (2000) noted the powerful influence these examples have on mothering within our society, where "the bad mother" enables dominating male powers to keep women at bay:

> Mother-blaming perpetuates the unequal distribution of power between men and women in other ways as well. First, it does so by keeping women down, ashamed, frightened; we are the judged, not the judges so insecure about our mothering behavior that we 'focus intensely on being better mothers than before-even competing with our own mothers- rather than trying to make things easier and less oppressive' for ourselves and other mothers. The anger towards us that our sons and daughters are encouraged by society to feel adds further to our powerlessness, as does the seemingly endless task of defending ourselves (and mothers in

general) against the attribution of all society's ills- delinquency, divorce, drug use, and the like-to mothers (Caplan, 2000 p. 60).

Caplan (2000) indicated that one main method of oppressing women is to point the finger towards mothers for causing social malice. Chase and Rogers (2001) acknowledged a similar social scorn for single teen mothers:

It is poor, single teen mothers who are castigated in the popular imagination as bad mothers, as women who should not be allowed to be mothers at all. Politicians, the media, and the public blame these mothers for a host of social ills: poverty, crime, violence, drugs, family breakdown, and the disintegration of social values (p. 36).

Baker and Tippen (1999) stated that the purpose for this shift in social responsibility is the governments' need to hide the consequences caused by its' prioritization for economic growth over family and community development. This message was also referenced by Chase and Rogers (2001):

The stinginess of the welfare system in this country-the below-poverty-level support- goes back to the assumptions embedded in the initial creation of the federal system in the 1930's. While unemployment compensation and old age insurance were both conceived as entitlements earned by and replacing a make wage and as subject to neither means nor moral tests, support to poor mothers were deemed an unearned benefit subject to both tests. Unlike most European

countries, where support for parenting is perceived as a communal responsibility and as promoting the welfare of the entire society, the United States has a tradition of treating children as a private, individual responsibility (p. 37).

Canada has been following suit with American policy reform where mothers are seen as unworthy of support and children are viewed as a "private, individual responsibility" (Chase & Rogers, 2001).

The socially constructed negative stigma associated with mothering within "the system" gives the government leeway to condemn recipients to unjust living conditions (Chase and Rogers, 2001). By creating a meta-narrative that these mothers are undeserving, government is able to neglect its moral and ethical responsibilities to Canadian families- to women and their children. The use of mother-blame also enables government to create divisions which maintain their power. For instance, children turn on their mothers (Caplan, 2000); mothers turn on each other rather than uniting together to affect social change (Linn, 2002). Similarly, mother-blaming meta-narratives magnify mothers' ambivalence and isolation, which decreases the likelihood of mothers' individual and collective resistance. For instance, in this research the negative stigma with being associated with the institutionalized social support system created among some mothers a "them vs. us" attitude amongst themselves. The mothers judged others similarly to how they are judged. This speaks to the power of mother-blame and how it becomes embedded in the mothers' narratives. Swigart (1991) theorized that the mothering world has turned on itself, without knowing that it in fact has done so, because of the guilt and

uncertainty patriarchal values have instilled on *Mother*. One can argue that strikes against mothering will continue until there is a clear and full acknowledgment of these injustices accompanied by a united front to change sexist, oppressive values, regulations, and policies of the institutionalized social support system.

This research is timely. Mothers who do not fit the patriarchal definition of "motherhood" continue to be socially scorned. Government continues to enact and strengthen its' demoralization of women. Within the last year the federal Conservative government announced that it would no longer fund women's groups that advocate, lobby, or research women's rights. Furthering this, Prime Minister Stephen Harper also announced that he was changing the mandate and operation of the Status of Women, where the word "equality" was to be dropped from the listings of the agencies' goals. (Keller, 2006). This action clearly shows indication that as a nation we are moving away from expanding women's rights and empowerment which directly affects mothers.

How will this change affect mothers who receive institutionalized social supports? The likelihood of significant changes to better the mothers' lives, such as an increase in financial assistance, or repairs to public housing units, seems doubtful. The formal support workers highlighted in this research seemed destined to work from an even smaller skeleton of resources. Mother-worker interactions are likely to continue to be contentious and disempowering for mothers. And finally, how does this research support the need for social change? An afterword has been written to offer some suggestions.

Afterword

The mothers who participated in this research provided a valuable insight about mother-worker interactions in Newfoundland and Labrador. Through their descriptions of these interactions, they also provided a powerful critique of the institutionalized social support system. This section identifies five key areas of needed change felt by the mothers and myself as the researcher.

1) Mother-blame undermines the solidarity of Newfoundland and Labrador's communities

This research has explored how patriarchal values have clouded societal empathy. Mothers and children who are struggling socially, economically, culturally, etcetera are being ignored and shunned because they do not meet these idealistic standards we project onto their lives. Rather than supporting those in need and sustaining those who are surviving, our culture has somehow shifted focus, supporting families who have strength and scapegoating those needing support to find strength. This reality was explored by Caplan (2000):

> Like the members of any undervalued or oppressed group, women sometimes do
> need extra support, because in addition to dealing with the ordinary problems of
> daily life, they have to cope with extra stresses and wounds. Our culture increases
> women's real needs for support and then use those needs to "prove" that we are
> simply overemotional. This does not prove, however, that women inevitably have
> a huge emotional needs (p. 109).

The African proverb "it takes a village to raise a child" does apply to North American families. All forms of family structures and circumstances need to be embraced in order to regain a sense of community support, where all members of our communities are valued; thus, eliminating mother-blame and classism from our social interactions and bringing a caring humanity to the forefront.

2) Political figures support the cessation of mother-blame by altering social value systems

In order for this social shift to occur, public officials need to lead by example. The mothers of this research disclosed that political officials did not recognize them or their families needs, which made them feel like second class citizens. They also stated that they felt silenced when voicing concerns. To take these experiences a step further, the messages that these public officials sent to low-income families were also heard by the community as a whole. If those in public office do not value or support **ALL** members of the community, the community itself will follow suit and disvalue these same community members; hence the development of marginalized groups. The message is simple but profound: our governments must stop punishing its people for social gain.

3) Explore mother-blame in the helping field

The exploration of mother-blame is not limited to political figures. People working within any public or helping profession also influence the lives of these mothers when imposing mother-blaming beliefs. The mothers have disclosed stories of mother-blaming experiences from all avenues of the institutionalized social support system. From

financial aid to housing staff; from doctors to psychiatrists, professionals have embedded their beliefs about mothering into their interactions with these mothers. What is unfortunate about these experiences is the lack of awareness workers' have about their mother-blaming actions:

> The most distressing characteristic of mother-blaming among mental health
> professionals is how few of them seem to be aware they do it. Even when
> therapists are alerted to mother-blaming attitudes and comments, they usually
> deny that they themselves could do such a thing" (Caplan, 2000, p. 5).

Although there is a lack of awareness, there is still a professional accountability for one's actions when working in the helping field. In order for professionals to address mother-blaming actions, minimally an exploration of the topic in reference to their work will provide insight; however, a pro-active, no tolerance approach within the profession may be more effective in addressing the issue. Based on the position that mother-blame is a sexist act, its' inclusion within sexism protocol will provide context and value to this topic within the professional setting.

4) Ensure sufficient support for families to live humanely

When exploring the quality of life associated with receiving institutionalized social supports, the mothers had minimal positive comments to share. These families' realities are unimaginable and inhumane. An interesting point: The Newfoundland and Labrador governments closed schools in the past year due to health and safety concerns (CBC News, 2006); however, they show minimal concern about the fact that they send children

home to live in these same conditions. The mothers are making their positions clear: government subsidized housing is in desperate need of analysis from health and safety inspectors, and funding is needed to execute the recommendations provided to bring each unit up to code. The mothers have also indicated that an exploration of client services is needed within the housing corporation as well. They have also shared concerns about the social factors that have evolved within subsidized housing courts. The mothers would like their neighborhoods to return to a family friendly environment.

5) Create legislation that is respectful of mothers as individuals

Continuing with the exploration of legislation that influences mother-worker interactions, the mothers highlighted the necessity to restructure the theoretical framework in which the institutionalized social support system perceives mothers. Throughout their narratives, the mothers shared their inabilities to celebrate their multiple identities and subjectivities. Caplan's (2000) highlighted the necessity for our society to debunk false beliefs about mothering by exploring them within our own frames of reference. This will enable us to create beliefs that are based in reality.

This realism must also be the foundation of legislation pertaining to mothers and their families, as well as the points of view of frontline workers when working with these mothers. Supporting mothers as whole women, which includes their hopes, fears, aspirations, and personalities will make them feel valued, facilitating their empowerment. Removing the pressure of *Mother* will in fact create strength in their mothering.

The mothers of this research all shared that they wanted to receive institutionalized social supports as a temporary solution to their life struggles; not as a long-term lifestyle that it has become in their lives. They have shared their opinion that effective, efficient support that embraces their strengths is what they want from their mother-worker interactions. They view this authentic support as a crucial step in their journey to self-reliance and empowerment. The provinces' economic advancement along with effective, efficient family initiatives such as affordable child-care and family programming is crucial to making formal supports shift from long-term to short-term solutions in these mothers' lives.

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Appendix A

Information Letter

The purpose of this study is to gain an understanding of the experiences and perceptions of being a mother while receiving institutionalized support (i.e. social assistance, public housing, support from mental health workers, support from community organizations etc.).

There are two parts to this study. The first part is an interview between you and me. I will ask you questions about your experiences as a mother while receiving institutionalized support. Scheduling for this interview will be at your convenience. It will take between one to two hours. The second part of the study is a focus group discussion with other participants in the study. Here, I will be asking questions about your opinions of the institutionalized support system of Newfoundland and Labrador. This meeting will take one to two hours as well and will be scheduled at a later time.

There is a potential risk that some issues discussed in the interview and focus group processes may be of a sensitive nature to you. I am requesting that you and I talk about how you would like to be supported during this time. Before we begin interviewing, I am asking that we both determine ways to put any supports in place you feel you may need.

Your signature on the consent form provided with this information letter indicates that you have understood to your satisfaction the information regarding your participation in the research project and agree to being a participant.

During the interviewing procedures, I will ensure that your confidentiality is maintained at all times. I will ask you to choose a pseudonym that will be used to identify you as a participant. Myself and my university supervisor will be the only individuals

who will have access to your true identity. In no way will you be identifiable in the research document. I will provide you with a sheet outlining identifiable information. I would like you to take a few minutes to outline what aspects of your identity you would like changed and choose the pseudo information that will be used to identify you instead. Information that you share will not be shared with any other professionals. All information will be kept in a locked cabinet in my office. The information from the study will be used solely by me for my master's thesis and future academic publications. Following the completion of my Master's thesis and possible academic publishing, all data collected will be destroyed.

If you have additional questions or concerns during the course of this study about the research or your rights as a research participant, you may contact me, Irene Barrett, at home (579-1765) or at Memorial University, Department of Education (737- 8587), or you may contact my research supervisor (Dr. Morgan Gardner, 737- 7614) the Associate Dean of Graduate Studies (Dr. Roberta Hammett, 737-3402) or the Interdisciplinary Committee on Ethics in Human Research (ICEHR, icehr@mun.ca).

Your participation in this study is voluntary. You may refuse to participate or you may withdraw from the study at any time and this will in no way affect any services you receive. You will be provided with a copy of the signed consent form. It is my intention to present this research to those responsible for Newfoundland and Labrador's social policies. You will be provided with a copy of the signed consent forms, a copy of your interview transcript, as well as the final research document.

Respectfully,
Irene A. Barrett

Consent Form

It has been explained to me that the research is being carried out through the Department of Education of Memorial University of Newfoundland by a Master's student, Irene Barrett. I understand that the purpose of this research is to study the experiences of being a mother who receives institutionalized social support.

I give permission for Irene Barrett to interview and collect information for the purposes of her research. I understand that all information gathered in this study is private/confidential. **I know that I am participating on my own free will and I may leave the study at any time if I choose to no longer participate.**

Any questions I had have been answered and I understand what is involved in the study. I understand that there is no guarantee that I will benefit from my involvement. I acknowledge that a copy of this form has been given to me.

_____   _____

(Signature of Participant)   (Date)

_____   _____

(Witness)   (Date)

To be signed by investigator

To the best of my ability I have fully explained to the participant the nature of this study. I have invited questions and provided answers. I believe that the participant fully understands the implications and voluntary nature of the study.

_____   _____

(Signature of Investigator)   (Date)

Appendix B

Identifying Characteristics

Please fill out all true information about yourself. On the opposite side of this sheet,

please indicate which characteristics that you would like altered and fill in the pseudo

information in the space provided.

- Name:_____

- Age:_____

- Town:_____

- Address:_____

- Workplace:_____

- Number of Children:_____

  Names:_____

  _____

- Age of Children:_____

- Names of Community

  Groups/Organizations:_____

  _____

☐   Name:_____

☐   Age:_____

☐ Town:_____

☐ Address:_____

☐ Workplace:_____

☐ Number of Children:_____

☐ Names:_____

☐ Age of Children:_____

☐ Names of Community Groups/Organizations:_____

Appendix C

Questions: Individual Interviews

Mothering

- I am interested in learning about mothering and what it means to you.

- What do you appreciate about yourself as a mother?

- What do your child(ren) appreciate about you?

- Tell me about an experience(s) that highlights these appreciations.

- How would you describe yourself as a mother?

- How is mothering rewarding?

- What is your greatest strength as a mother?

Mothering & Transition

- How did your life change when you became a mother?

- How did you react emotionally to this life change?

- What are some challenges that you faced when becoming a mother?

- What are some challenges you face now because you are a mother?

- You mentioned that you were (_____) earlier, how did these characteristics help you face these challenges?

Mothering & Support

Informal

- Who are the people that support you as a mother?
  - Community
  - Friends
  - Family
  - Spouse
  - Other

- On a scale from 1-10, one being the lowest and 10 being the highest, how would you rank the level of support you receive from these people listed above?

- Which supports are working? Which ones are not working?

- Has the informal support in your life influenced how you interact with your children? If so, how does it influence you?

- Has the informal support in your life influenced the way that you view yourself as a mother? If so how has it influenced you?

- Has the informal support in your life impacted the way in which you view your children? If so, how has it impacted your view?

- Has your supports changed since you have become a mother? If yes, how did they change?

Formal

- On a scale from 1-10, one being the lowest and 10 being the highest, how would you rank the level of support you receive from these people outlined in the diagram?

- What are the benefits of receiving institutionalized social support? How is institutionalized social support useful/helpful to you?

- Has the formal support in your life influenced how you interact with your children? If so, how has it influenced you?

- Has receiving institutionalized support impacted the way in which you view yourself as a mother? If so, how has it impacted your view?

- Has receiving institutionalized support impacted the way in which you view your children? If so, how has it impacted your view?

- Have your workers' influenced the decisions you make as a mother? Your judgment about situations as a mother? If so, how have they influenced you?

- Are there challenges that you face because you are a mother who receives institutionalized social support? If yes, what are they?

- How do you address these challenges in your life?

- What strengths help you address these challenges?

- Which group would you prefer to receive support from, informal (friends, family, spouse, etc.) or formal (social workers, psychologists, doctors, etc.) supports? Why?

Mothering & Intergenerational Abuse/ Violence

- What does the term "intergenerational abuse" mean to you?

- Has the term changed in meaning for you since becoming a member of the process group? If yes, how so?

- Do you feel as though you are associated with the term "intergenerational abuse" If yes, what does it feel like to have this association?

- Has the term changed in meaning for you since becoming a member of the process group? If yes, how so?

- Does the term "intergenerational abuse" influence how you view yourself as a mother? If yes, how does it influence your view?

- Does being associated with intergenerational abuse and violence influence the way in which your worker(s) treat you? If so, how?

- What sorts of messages do you receive from your worker(s) about yourself as a mother who is associated with intergenerational abuse and/or violence?

- Which of your characteristics have kept you strong and grounded within yourself when facing these sorts of negative messages/experiences?

Final Questions

- Imagine yourself in a place where you were completely fulfilled as a mother. How would you feel inside and what would your surroundings look like? And now, where does, if any, institutionalized social support fit into this picture?

- Do you have any questions/comments that we have not covered?

Appendix D

Examples of Additional Individual Interview Questions

1. Have your workers influenced the decisions you make as a mom?

2. What is it about your interactions with child protection workers that makes you feel that they are so abrasive to who you are?

3. Have you noticed a difference in your relationship with your children because of them [child protection]?

4. How about when you're calling them up? Do you find that when you call and requesting things that they are they polite to you?

5. Does your worker hear your needs and work effectively to meet them?

6. What is different about not living in housing with your kids?

7. What sorts of messages do you receive from your workers about yourself as a mom who is a part of this group with intergenerational abuse or violence attached to it?

8. Do you feel as though since the group you can't do what you want to do with your children?

9. Do you feel that your workers treat you differently because you are in this group?

10. Do you think that any workers treat you differently?

Appendix E

Focus Group Questions

1. On a scale from 1-10, one being the lowest and ten being the highest, how important is it for you to have informal support in your life?

2. What are the outside barriers that get in women's way of making informal supports?

3. What has been your experience with the following services?
   a. Housing
   b. Social Services (finances)
   c. Child Protection
   d. Food Banks
   e. Counselling/Social Work
   f. Medical Support
   g. Education System/Child Care

4. Do you have any specific stories that you would like to share about these services?

5. What are the positive aspects of these services?

6. What areas would you like to see changed to make them more useful?

7. Did you deal with these issues alone in the past? If yes, what was it like to deal with these issues?

8. What would a "useful system" look like?

9. As a whole, do you think that all the services in "the system" work well with one another in providing services? If yes, how so, and if no, what makes the system messy?

10. Are there any other services that you receive that you would wish to make comment about at this time?

Appendix F

Examples of Additional Focus Group Questions

1. How did she [your worker] find out?

2. You have experienced your worker as being discriminatory against you?

3. Do you find that you have to be strong armed with a lot of these professionals?

4. Do you have to be more stern than what you normally are to get what you need?

5. So you find that it's mostly the new social workers [who treat you like a case number?]

6. Strictly from a support point of view, do you find that they [child protection workers] are supportive unconditionally or kind of?

7. What was it like for you to know that it happened?

8. Do you find that you're constantly checking yourself, not because you're questioning your parenting skills, but because your questioning what other people are thinking when looking at your parenting skills when you come through the door?