

Critique, Imagination, Responsibility, and Social Change
(Never Give Up)

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In this paper I will present an analysis of a lengthy interview with one mother who lost and regained custody of her children. The mother is a participant in a pilot study the purpose of which is to understand the experience of custody loss and regain. The purpose of this paper is to show the potential of biographically-linked evidence for refinement of theoretical concepts and for formulation of child welfare practice.

The mother, a woman whom I will call Ms. A., is African American; she was 55 years of age at the time of the interview. She had her first child in her early 20s and two additional children, born about one year apart, close to fifteen years later. She became addicted to alcohol, cocaine, heroin and other drugs shortly after the birth of her first child, an addiction with which she struggled for over 20 years. Her mother took care of her children sporadically during this time, caring for them for short as well as for long (one year or more) periods of time. At times, this child-care arrangement was informal; at others, the juvenile court retained temporary custody of her children. Her life involved periods of homelessness and one of imprisonment, conditions she was able to overcome in her late 40s, when she regained custody of her two youngest children and found work. At the time of the interview, she had been sober for about eight years.

Ms. A, as well as the other women in the pilot study, was working in a peer-mentoring program designed to help other mothers who abused or neglected their children to regain custody of them. All but one of the eight mothers so employed agreed to participate in the study. I interviewed each mother, relying on what is called a depth

interview (Johnson, 2002), for approximately two hours. The primary request I made of each participant was to tell me about her experience as a mother. I asked few questions, after this initial probe. Ms. A's interview was selected for analysis because it is complex, and her age allowed a vantage point from which to examine a long period of struggle. Thus, it is ideal for a biographically-oriented analysis.

The topic of this research is of some import because although reunification of foster children with their biological parents within the first year of placement is the goal of United States child welfare policy (U. S. Public Laws 96-272; U. S. Public Laws 105-89), it is difficult to achieve. This is particularly the case in Cleveland, the city in which research participants lived. For example, in the six-month period (October 1998 through March 1999) during which Ms. A's children returned to her care, only one quarter of the children of single mothers who entered foster care for the first time returned to their parents within the first year of their placements (Wells & Guo, 2004).

The low rate of reunification may be due, in part, to the high level of poverty that characterizes Cleveland. For example, in 1999 close to half of city children were living in poverty (Annie E. Casey Foundation, 2003). Indeed, Cleveland has been among the most economically distressed big cities in the United States (Children's Defense Fund, 2005).

Prior Knowledge

Knowledge of the experience of custody loss and regain is sparse; indeed, only two studies of this issue could be identified. One investigation focused on themes that emerged from mothers' reports of what helped them to reunify with their children – themes such as “belief in oneself”, “help from others”, “drug treatment”, and

“spirituality”, for example (Marcenko & Striepe, 1997). The second investigation reported developmental problems of mothers imprisoned with their infants, problems pertaining to maternal ambivalence and reactivation of grief over loss of children other than the infants in their care (Silverman, 2005). These investigations point to domains of experience that inform the analysis undertaken in this study, though these categories fail to reveal the complexities of experience over time.

Theoretical and empirical knowledge pertaining to motherhood, child maltreatment, non-custodial mothers, and stigma are also relevant to the analysis undertaken.

Motherhood. For example, a review of the scholarly literature on motherhood shows that mothers perform the majority of the physical and emotional work of caring for children (Hochschild & Machung, 1989). This work is sheltered by the dominant motherhood ideology in North America that may be described as “intensive mothering” (Arendell, 2000): “This motherhood mandate declares that mothering is exclusive, wholly child-centered, emotionally involving, and time-consuming (p. 1194, citing Hays, 1996).” This view reinforces traditional gender roles and casts as “deviant” mothers who do not fit easily into these roles, for example, unmarried mothers or mothers with paying jobs outside the home (Phoenix, Woollett, & Lloyd, 1991).

Women’s day-to-day lives as mothers vary (Josselson, 1996); yet, the identity is powerful and salient. Mothers experience both positive and negative emotions toward their children. They receive little social support for the work that they do, and they must improvise- that is, they must find private solutions to the conflicts they experience between mothering and work. They experience more distress over parenting than do

fathers; and poverty looms large in the experience of especially African American mothers for whom the poverty rate is about 35 percent (Arendell, 2000; U. S. Census Bureau: <http://www.census.gov/prod/2001pubs>).

There is a gap between the ideology of intensive mothering and mothers' actual experiences (Hays, 1996) thereby preparing the ground for cultural and intra-psychic conflict regarding motherhood. Contemporary psychoanalytic perspectives on motherhood (cf. Hollway & Featherstone, 1997) help clarify the nature of the conflict. Indeed, "[t]he idea of mothering...arouses anxieties which may be managed through defenses which, reproduced at a cultural level, are manifested in the idealization and denigration of mothers-neither set of images faithful to reality (Featherstone, 1997, p. 1)." Such distorted images may well make maternal ambivalence more difficult to manage (Parker, 1997).

Thus, personal and social narratives of motherhood are inevitably and inextricably linked (Riessman, 2004) and suggest how motherhood may be experienced in relation to both the dominant cultural ideology of intensive mothering and in relation to counter-narratives which extend, resist, or subvert that ideology (Andrews, 2002).

Maltreatment. The prevailing framework for understanding maltreatment of children is the ecological model (Belsky, 1980) which conceptualizes maltreatment as the product of interactions among developmental, psychological, sociological, and cultural domains. Investigations of maltreating mothers confirm this complexity: The majority of mothers with children in foster care have been found to be economically impoverished and many have psychiatric disorders, including addiction (cf., Wells & Shafran, 2005). The difficulties associated with addiction are particularly disabling because it is a

chronic, relapsing condition for which there is no cure (American Psychiatric Association, 2000). Psycho-social treatments for substance dependence hinge on reconstruction of a self-concept so that the individual has a relatively stable identity and may experience negative emotions without recourse to substance use (Denzin, 1987).

Non-custodial status. Empirical investigations of mothers who lose custody of their children post-divorce offer additional insight into the experience of the population under study (Kielty, 2006). This body of knowledge shows that non-resident status makes it difficult for parents to maintain contact with their children. Mothers, who lose custody against their will, also find it difficult to establish clear parenting roles, to feel central to their children's lives, or to maintain a positive identity as a mother. Kielty (2006) observes the later difficulty is a significant source of stress for women, "since not only are their relationships with their children less certain, their 'moral self' comes under threat as 'good mother' tends to be synonymous with 'good person' (p. 86)." Loss, grief, guilt, and shame, therefore, may be their lot.

Of the emotions highlighted in the work noted above, shame, that is the wish to "escape the eyes of the onlooker" due to social disapproval (Buss, 2001), is the most important. It is linked to a sense of humiliation regarding the public aspects of the self that are open to observation the consequences of which may include increased aggression and self-defeating behavior and decreased intelligent thought and pro-social behavior (Twenge & Baumeister, 2005). As a result, mothers who lack hope as to restoration of custody may express rage in ways that work to undermine their abilities to regain custody of their children.

Stigma. Mothers whose children are placed in temporary custody of a juvenile court meet conditions hypothesized as placing them at high risk of exposure to social stigma (Link & Phelan, 2001) the consequences of which may be broad (such as reduced opportunities to be housed, to work, to be healthy, and to have a range of social relationships) and to persist.

Stigma may also pose a significant threat to one's identity (Major & O'Brien, 2005). It has been hypothesized that individuals attempt to reduce such threats by blaming stigmatizing events on others, identifying more closely with the stigmatized group to which the individual belongs, or disengaging self-esteem from the threatened domain. It is uncertain as to whether or how abusive or neglectful mothers who lose custody might use these coping strategies over time and with what consequences for reclaiming custody of their children.

Therefore, mothers who lose custody of their children do so within a cultural context that posits they are wholly responsible for the abuse or neglect of their children despite lack of significant emotional or material support for the job. Those who regain custody must find a way to resist shame and stigma and to reconstruct identities as "good" people while ill and poor; in short.

This summative review of the bodies of knowledge relevant to understanding the experience of custody loss and regain points to the centrality of the concept of identity for this study. Contemporary philosophers such as Ricoeur (1991) provide one anchor for this view. He emphasizes that human experience is experience in time, that experience in time may be understood through narrative, that is, story involving sequence and consequence; and that identity may best be understood in terms of narratives. He argues,

for example, that human experience may be “understood only through the stories that we tell about it . . . [and that] an *examined* life . . . is a *life* recounted (p. 31).”

This approach to understanding human experience requires that the social scientist inquire as to the nature of the narratives through which we live and to acknowledge human agency, impartial, contextualized, and unstable though it may be.

Approach to the Analysis

The approach to this analysis is also informed by methodological developments in critical biography—the turn toward incorporating the biographer’s autobiography into the analysis; the turn toward treating interviews as inter-actional events; and the turn toward the assumption that stories have multiple and often times contradictory meanings (Davis, 2003).

Reflexivity of (auto)biography. It is axiomatic in depth interviewing, the form of interviewing employed in this study, that *what the interviewer is prepared to understand* is as important as *what the interviewer asks the interviewee to address*. Therefore, understanding my intellectual and personal background is as critical to study interpretation as is understanding the questions I asked in the interview. The theoretical literature reviewed here indicates the scholarly framework for the analysis. My prior quantitative studies of families with children in foster care (cf., Wells & Guo, 2004) underscore the depth of the economic impoverishment of many Cleveland, Ohio mothers, and this work provides the societal framework for the analysis.

Perhaps the most important experience that I bring to the analysis, however, is from childhood: My neglectful father lost custody of me, and my economically-impoverished mother lost custody of one of my sisters. Thus, the stance from which I

approach the analysis is informed by the stance of a child both claimed and left behind. Throughout the analysis, I have attempted to problematize these understandings in order to explore as critically as possible the experience of the interviewee.

Reflexivity of the interview. Understanding the dynamics of a research interview is complex and, perhaps, cannot be articulated fully. Two central interpersonal issues in this interview, however, were the difference between myself and the interviewee in social capital and power, a difference implied by my ethnicity (white), my position at a university, and the stigmatizing nature of the interview topic. To address the first issue, I attended, in the analysis, to the interviewee's efforts to reposition herself (or me) in relation to social status. To address the second, I employed an interviewing strategy that allows the interviewee maximum control over the interview process.

The interviewee talked easily and at great length in response to a few open-ended questions, despite her initial reluctance to tell her story to a stranger who was unlikely to have had the experiences she might recount. When asked, at the end of the interview, "What was it like to be asked these questions?", she noted, for example:

Ms. A: At first I felt like when you started as I say...oh, my gosh, she want me to tell the story, dig up these painful feelings again. But, you know, in the program [AA] it teaches you, you must...you never shut the door. You must always remember your past. It's a healing process too.

KW: Um-hum. Um-hum.

Ms. A.: At first I feel like intimidated. I said, now, I don't know where you been, but I didn't want...you know, at first (? 24:09), like I didn't want you really to, and then I said no, this is help, this is help from another deal with pain. That's the only way it works today.

Reflexivity of the analysis. In an effort to understand Ms. A's experience of custody loss and regain, the content of the words that she used, the way in which tells her story, and the multiple contexts in which the story was told were considered in the analysis.

Analytic Steps

In the analysis, I define narrative broadly as Ms. A's extended account of her experience with mothering. I first analyzed the 76-page transcript of the interview employing a thematic data analytic technique (Riessman, 2007), and I followed these steps: 1) the transcript was reduced slightly so that it included material relevant to the experience of custody loss and regain; 2) this material was placed in chronological order; 3) this text was examined as to the broad storyline, the context, the characters, and the turning points in the plot; and 4) relying on Labov's definition of story (Labov, 1972; Labov & Waletzky, 1967), specific narratives within this text were identified.

I then analyzed these stories relying on dialogic/performative analysis (Riessman, 2007), a form of analysis that examines how a story is told as well as what is said. Stories were also considered as to their significance for the experience of custody loss and regain and theoretical concepts that have been posed to explain the consequences of

stigma (Major & O'Brien, 2005).

Findings

The Narrative

Storyline. The narrative contained a broad storyline that matched that of AA (Alcoholics Anonymous) in that the narrator described the onset of drug use, followed by escalating use, “hitting” or being at “the bottom”, and finding recovery through the acquisition of a new identity, an identity that suggests the ability to experience negative emotions and to maintain boundaries in much the same way that Denzin described in his early work on recovery from substance dependence (Denzin 1987).

Characters. The characters in the text included the narrator, her mother, her three children, their fathers, social service workers and others associated with institutions with whom she interacted, along with friends and landlords.

Context. The social economic context was Cleveland, Ohio in the 1990s, a period characterized by loss of population, increasing poverty, and escalating rates of placement of children in foster care (Brock, Coulton, London, Polit, Richburg-Hayes, Scott, & Verma, 2002; Wells & Guo, 1999). During the period of time in which the interviewee did not live with her children, she moved from home to home and, on occasion, she lived on the streets. The struggles of poor single mothers everywhere formed the backdrop for her effort to regain custody of her children (Edin & Lein, 1997). She said, for example:

Ms. A: But then I either couldn't get groceries, or I couldn't get lights, or I was having the wrong type of people around my kids, and I end up losing the kids,

losing the place. Then I had..I had to call my mom to come get the children, you know.

KW: Um-hu. Um-hum.

Ms. A: Then she would take them from me.

Thus, the struggle to survive economically and emotionally also formed the backdrop for the ambivalence she shows regarding both caring for her children and her mother's rescue of them. She continued:

And I got tired of feeling like I'm not adequate, I'm not capable of being a woman-combing hair, making breakfast, going to the grocery store with the list or the coupons, coming back home on time, doing the right thing, going to work. I felt like I couldn't get it into gear. Ah, but I was (getting at it 19:58). That's the good part. I kept... I kept... something kept pushing me. I was very fearful. I thought I wanted this, sometimes I didn't want it.

Turning Points. The turning points in the narrative were evident in the well-bounded stories that she told. They reflected intense moments of disorientation in which the narrator was confronted with situations in which the wish to care for her children contrasted with her failure to do so, or in which her efforts to care for her children were foiled by her drug use, homelessness, or court-ordered separation from her children.

One moment described below served to disrupt the madness in which she lived and to assert, however fleetingly, the possibility of a different kind of life. The narrator recalls:

Ms. A.: Or, I remember what really made me feel so uncomfortable and lonely. I didn't have anyone, and I really didn't have a home. I was passing on the Fourth

of July; I was walking past someone. They were in their backyard with their (?16:15) with their children running.

KW: Um-hum.

Ms. A.: And I felt this big, I felt like I could have just walked off into the sea; or, ...you know, I felt disgusted, real yucky with myself...

KW: Okay.

Ms. A. and hurt, and I passed that house, and I looked and I said, "One day that's how my family going to be."

KW: Um-hum.

Ms. A.: One day.

KW: Hm.

Ms. A.: I never will forget that. That was the most.. And it..that, you know, I never thought that. I mean, walking up the street, that I would meet myself like that, or meet that feeling...

KW: Yeah.

Ms. A.: ..like that. You know, I'm just passing the house and then I look. This is A holiday, and I have no one, no family. I HAVE it, but I'm not doing the things That I need to do to be there with them. And that is one crazy ...

KW: Yeah.

Ms. A.: ...feeling that I never want to go back to. NEVER.

Another moment shows the potentially self-defeating rage that public humiliation may generate, but also the way in which such rage may be used to resist the devaluation of self that humiliation engenders.

Ms. A.: You know, because it started out when we went to court, and Judge [name omitted] told me, regardless of being in prison and I'm sober for a year, I needed to still be in a program. And I was so angry with him! Because I need to go to parenting; I need to go to program; I need to stay clean. And I didn't like him, because I feel like, I don't gave a year of myself: Let me be, you know..

KW: Hm.

Ms. A.: And I was angry. And the kids' father starting laughing. And he says, "She going to fail." I heard him in the back, while the Judge was talking. Because I tried to give the Judge some lip. I told him: "I been depressed, and I don't think I need ANY Twelve Step Program. I don't need that." I said, "If God is.. now I (?36:35) understanding that I'm not drinking today, let that be." And he said .. he (?36:41), he said, "Look", he told the social worker, "If she's not in treatment in 30 days [claps] file for permanent. Let permanent be wrote," you know. Kids be removed permanent and placed in foster care, because their mom... my mother didn't want them anymore. She just felt that she had rai---helped with the 33-year old. She had do the two-year... the years with the little ones, and she had lupus.

KW: Oh.

Ms. A.: And she was.. in her (?37:07), while the children was getting on her nerves...

KW: Hm.

Ms. A. ...something just rose up in me and say, " You going to do this. YOU GOING DO THIS, to show him he's ..." Because he wanted to get married for all the wrong reasons, because he wanted to be the guardian of the kids.

KW: Oh.

Ms. A.: he had talked with my mom, and he had (?38:40) his own scenario about my history and everything because he didn't know me THAT well, but he had knew OF me.

Relationships form the nexus in which she jeopardized her relationships with her children and in which she eventually cemented her bond with her two youngest children.

She relates, for example:

Ms. A.: What had happened , I connected with a guy, that I knew from the projects.

KW: Uh-huh.

Ms. A.: ...But I needed a baby-sitter, and this lady called me for the job to come and interview, and I...he was over here, spent the night with. And I asked him could he watch the kids while I go for this interview for a second job, because I had lost my job at [site omitted]...But once I lost that job, now my mind was clicking how I'm going to pay this 450 every month and buy grocery and keep my kids ... So I asked him to baby-sit and messed around with him. He was smoking marijuana. Do you know...and my son told my mother. She called and.. he [son] told them that he was coming in our home taking over and that he was smoking marijuana...

KW: Uh-huh.

Ms. A.: And my mother called the police. I ended up catching another case.... But what I am saying is that I really panicked, because I thought my kids was going to be removed again.

KW: Yeah.

Ms. A.: And I knew I had worked so hard trying to be the person I wanted to be.

THAT stuck out in my mind from then to today- you need to pick your people.

Thus, in this story Ms. A. is positioning herself as being undermined by a male acquaintance with whom she connected in a moment of economic desperation; as her mother and son acting to contain the damage posed by this involvement; and as having learned a lesson, phrased in the rhetoric of AA but perhaps one she is asserting that all need to learn: “You need to pick your people”, thereby normalizing her experience to some degree. A story relating a similar but later event in her life had a different conclusion:

Ms. A.: Because I had fell into the same state. I had let a young man move in and was a very hard worker. But my kids, I’m work the second shift, four to twelve, a drug treatment [house], I love work... And I let this young man come in. And my kids are very protective of me. And he had two sides to him, and I couldn’t see it...I should have dated and courted him before I let him move in over my children. But the children was able to call my attention to this, that he was drinking and maybe drugging, and ... (became 47:32) investigate, that wasn’t a match for me. It was a trigger for me. And when that came out of my daughter’s mouth, a resentment came over me, want to protect that man, and I hurried up and let that... I prayed and I let it went, and I got busy. That was the first time we as family came together, put our heads together...

KW: Hm.

Ms. A: ..And I got him out of my house. And we got even closer.. So I started thinking like that. You know, stop putting your feelings so up front, it's all about me, you don't know all the damage you are doing to everybody..So now I'm not using, but I'm taking you through that same thing again, but no drugs. But he was doing it, you know.

KW: Yeah.

Ms. A. So

KW: That's interesting.

Ms. A. ..by me taking that suggestion from a child..

KW: Hm.

Ms. A.: it brought me back to growing up and that you never...you NEVER (?49:37) tune a kid out or give a silent ear. You know, you need to always stay open for suggestion.

In this story, Ms. A. recounts another relationship with a drug-abusing man, but this time the relationship is in the context of having a job that she loved. As in the prior story, her children challenge the relationship and its' authority, but this time the man's removal is without the intervention of Ms. A's mother or the juvenile court. This time, she rejects a boyfriend, moves closer to her children, and begins to fashion a mothering role to which she has full access—that of “always stay[ing] open for suggestion”.

The Experience of Custody Loss and Regain

The interviewee's life-long and complex relationship her mother, the woman who raised her oldest child and cared for her two youngest children for a significant part of

their childhoods, is the relationship through which one may see the threats to her identity posed by substance dependence and custody loss.

Blame. The narrator blamed her mother for teaching her the behaviors that supported addiction, yet she noted that she was unable to meet her mother's care-taking standards; she acknowledged the burden that caring for her children posed for her mother, yet she struggled with rage at her mother's assumption of the care-taking role; she appreciated, at times, her mother's efforts to lure her into mothering, yet she remained uncertain as to whether she wanted (or could) care for her children.

The following story suggests the multi-layered nature of the experience:

Ms. A.: And when I was young, a lot of responsibility was put on me at an early age because my mom worked four to twelve, the second shift. Ah, she just was like that. She was a non-nonsense woman. She didn't care nothing about you being the only child. You know, in my mind, I thought I would have everything and be...

KW: Um-hum.

Ms. A.: ...just the kid with the .. on the block looked up to, but it wasn't. My mother was a materialistic person. She believe in a nice car and a good job, food on the table, bills paid on time. Nothing like I thought that I wanted—clothes, bring in toys all the time, you know. But that's how I thought only kids be. I don't know, I don't know. But anyway, um, my mom went in the hospital when I was 11 years old, and ..for... she had a little nod—like it was benign, and they took it out, and I know she got in charge of cooking Thanksgiving dinner. And I did pretty good for a 12-year-old.

KW: Um-hum.

Ms. A: And I always had chores. And my mother was a alcoholic. (?42:40) that. So I all...I learned how to hide things real good. I learned how to lie a very young age. And that's why I say I had to be.. I didn't know that the woman that I hated so much, is a lot of that woman in me today.

KW: Um-hum.

Ms. A.: You know. Or that woman when I was drugging or out drinking, you know, the ver—when I was a child, the very thing I said I never would do my kids, I end doing the same thing my mama did, you know. “Shut up, don't tell them we been here,” you know. [Child's name], you know. Drinking during the day, when my husband was at work, you know, little stuff like that—taking her to the liquor store or to the liquor house, you know, where there drugs and stuff. So, a lot of things, and I learned to do, when I was younger because my mother drank. My mom was the type of drinker that could work, keep a clean house, and on Mondays drink nothing and go to work.

KW: Oh.

Ms. A.: When Friday comes, she had her drink. I tried that, but it ended up being Monday through Sunday.

KW: Oh, huh.

Ms. A.: It didn't stop. And right now, today, my mother wishes it would stop for a while, because she got kidney failure, but she drink for a long time. But she always took care of business.

KW: Hm.

Ms. A.: She..you..she had everything separated, you know.

KW: Yeah.

Ms. A.: Perspective. I couldn't. I just crossed it all up and what fell apart, I left apart, and if you wanted my kids, here, there they go, because right now, I'm doing this.

Disengagement from intensive mothering ideology. In a dismissive tone, but surely a defensive posture vis-à-vis her former self and perhaps me, the narrator positions herself and her mother in an interesting manner: she portrays both as agentic. Her mother takes her children from her, and she chooses drugs and alcohol over her children.

Yet, the story concludes with a hint of triumph over her mother. Today, the narrator's mother continues to drink and her kidneys are diseased. Therefore, her ability "to take care of business" may, in the end, be less important than the narrator's current sobriety and intent to show her children love and affection. Thus, a counter-narrative, a narrative of motherhood that would allow the narrator to resist the stigma associated with failing to meet cultural expectations of motherhood for so long is suggested.

Identification with stigmatized group. Ms. A's identification with other users of drugs is evident, and it may have worked in a complex manner in her life. She recalls, for example:

I had one girlfriend [name omitted]. I never knew she was that much younger than me, because she just just so (old 19:31) on Wednesday again. And we stayed...stayed on this house on [name omitted]. And...her sister own it, but she never paid rent.... And ...I met her and she said, "You can come...go home with me," and I stayed home with her...stayed at her house, slept on her couch.

Everything was smelling like urine and.....she had six boys and they were in and out, no locks on the door. So my mom, she..my kids must have been asking to see me. I don't know how, but my mother brought them down there on [names of streets omitted]. And she [name omitted] happened to see my children. They were so pretty. You know, my mom could make you look so pretty anyway. She would have their hair braided with little ribbons...So anyway, we were getting high that night and EVERY NIGHT AFTER THAT or that day, she would...Oh, I hated her for that. But I seen how I couldn't separate myself from [name omitted]. She would say, "You need to...go home to those babies..." And right there, that just tore me up because she did me no good, she wasn't doing anything to her kids...And she couldn't manage her life, but she had the nerve to tell me how to manage my life...It was like I really did see in that world why I wasn't supposed to be there...

Identification with a stigmatized group afforded some protection, but it engendered anger and, ultimately, perspective. Following Goffman (1963), a full understanding of stigma may require a language of relationships rather than of attributes (cited in Link & Phelan, 2001).

Theoretical and Practice Implications

My analysis of Ms. A's narrative of her experience mothering depends on concepts drawn from knowledge of motherhood, maltreatment, non-custodial mothers, and stigma. It illustrates how the processes through which individuals are believed to resist threats to identity posed by social stigma -- blaming others (her mother), disengaging self-esteem from a threatened domain (motherhood), and identifying with

the stigmatized group (other substance users)- - operate over time in a far more nuanced way than is suggested in the literature.

The turning points in her narrative illustrate this point. She not only blamed her mother for modeling dependence on substances, she also suffered deep emotional pain and used rage to resist humiliation and to marshal effort. She not only disengaged her self-esteem from the intensive mothering ideology, she also fashioned a new maternal role that she could claim. The role emerged slowly over time and in the context of the unending search for love and affirmation and repeated setbacks that marked her journey toward family reunification. She not only identified with a stigmatized group (others who had been dependent on substances), but her relationships with other mothers who were addicted provided the context in which she was able to see her own problems and limitations.

My analysis also challenges simplistic notions of social support, ones that consider support in relation to source, type, quantity, or duration, for example, by showing how hard indeed it is to accept help, contingent as it is on personal failing. It also shows the active role that children may play in seeking over time a relationship with a mother and in helping her to stay “on course”.

It suggests, too, the importance of acknowledging and normalizing maternal ambivalence and allowing flexibility in definition as to what “good” mothers should do. Ms. A., for example, became over time an equal member of an incomplete family group (her oldest child seemed to exist mostly outside the narrative in this account) as well as someone to be protected by her adolescent children. Perhaps building on her own

mother's tenacity, she accomplished a family reunification of a sort. Perhaps, there is no other kind.

I also read Ms. A.'s experience of custody loss and regain as a story of moral transformation (Kleinman, 2006). Comparable to Arthur Kleinman's "anti-heroes" in his recent volume, *What really matters* (Kleinman, 2006), she has come to terms with loss, threat, and uncertainty among conditions of danger: The requirement, he feels, for development of a truly moral life.

She understands "the inevitability of defeated aspirations" and the things that cannot be controlled for these children such as the failure of public schools to provide the structure she feels they need to learn and her inability to make enough money to send them to private religious schools.

In reflecting on her recent life with her two youngest children (and perhaps my advanced degrees), she notes:

They're trustwor—they're not out here on the streets; they're not interested in drugs or alcohol, but they got a lot of knowledge now. Not saying that, because all that knowledge can make you one of the biggest fools out there too, not saying what their life going consist of, but they're not saying that they don't have the information.

She evaluates herself critically and accepts responsibility. In reflecting on Wednesday evenings, the day and time of the week on which her mother would call and she would talk to her young children on the phone, she notes: "because every Wednesday night was hell for me. I would lay in my bed and cry, because I say, "You pay...you made this like this.

You made your bed like this. You caused all this pain. Now you have to find a way to get out of it.”

She resists the negative societal forces that undermine moral life such as narcissism: Against all odds, she survived and works now to help other mothers to do the same.

I'm work the second shift, from four to twelve, a drug treatment [house]..., and I worked at ... eight years. I love work. When I get something I like because it was giving back and helping women just like myself, kept me with a good foundation. And I was at meetings. I loved being a part of something. I feel completed, and my children felt secure and safe, because they knew where I was, and they knew I was in a good environment.

It is premature, of course, to suggest implications for practice based on an narrative analysis of one case. Nonetheless, it might be useful to note that the analysis places in high relief the problematic nature of assumptions underlying contemporary United States child welfare policy especially the hope placed in skill-based interventions and the insistence on rapid personal change.

Author Note

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