Mothers of children removed under a care order: outcomes and experiences.

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**Abstract.**

Focusing on accounts by women who have children taken into care, this paper reports on a socio-legal case study in England, investigating the life experiences of nine mothers, whose children have been made subject to care orders under the Children Act 1989. In particular it considers the women’s experiences of their relationship with their own mothers and places this within the context of the mothers’ own experiences of having their children taken into care. Drawing on free association narrative interviews, the study focuses on the mothers’ accounts of long-term harm that began in their childhoods, especially their experience of their mothers’ own difficulties and of her experiences of harm. It highlights the impact of relationship difficulties between mother and child, and questions how the legal concepts of harm and reasonable parental care are defined and deployed. In conclusion, it demonstrates a need for the legal framework to address children’s experiences of harm in a more intergenerational and intersubjective way. It highlights a new approach, suggesting that consideration of harm, reasonable parental care and welfare to involve an increased concentration on the welfare of mothers and the relationship between mother and child, akin to an intersubjective and intergenerational approach to harm.

Keywords: vulnerable mothers: care orders: reasonable parental care: harm: welfare: intergenerational harm: intersubjectivity.

**Introduction.**

Drawing on a psycho-social methodology this case study involves free association narrative interviews with nine women who have had their children taken into care; some of the mothers had lived in care themselves (Hollway and Jefferson, 2013). Based on these interviews this study focuses on the women’s reflection on events that happened in their childhood and the relevance of those reflections for their own children going into care. The strongest argument is that more prudence directed towards protecting and promoting family relationships for children in care. Furthermore, family relationships should be considered in light of this, from the point care proceedings are initially being considered. Children’s relationships with their parents can be harmed by parental difficulties that affect their ability to parent, by parental abuse and crucially by separation from their parent when they go into care. There is a question of continuing harm because the child is no longer living with the parent. It is argued that children in care would benefit from more direct work focused on trying to improve parent-child relationships while the children are in care. Additionally, parents also need help to improve their ability to relate to their children, even after children are moved into care.

This paper is unusual because it looks at mothers and their relationship with their mothers and particularly important because some of the children have greater involvement with their families and their mothers. In this study, there were a variety of placement arrangements for the children: five children were living with their mother supported by a voluntary agency; eight were adopted; four children were in long-term foster care; fourteen children were placed with relatives. Within this latter group, four were living with fathers, six with maternal grandmothers, one with a paternal grandmother, two with adoptive grandparents and one with a half-sibling’s paternal grandparent. Five of these children were on special guardianship orders (SGO), and another SGO had been applied for. Two children, living with their fathers, were subject to child arrangement orders.

Through narrative accounts the women looked back on their childhoods and they described their experience of being mothered. They highlighted why safeguarding and promoting their own welfare is important for their children. More especially, they talked their mother’s adverse life experiences, whose own needs and behavior caused them both harm.

The study includes situations where there were orders that restricted contact between mother and child. The experiences of the women, especially in terms of their attempts to be reunited after their children have been taken into care, are highlighted; as are the perceptions of their relationship with their own mother and of their experiences in childhood. Whether such relationships are sufficiently recognized by the childcare agencies is discussed. Suggestions are made about the how the nature of the harm that these women experienced is both intersubjective and intergenerational. This has bearing on how harm and welfare should be defined and deployed in the Children Act 1989. In conclusion, recommendations are made about whether the law should approach decisions on care orders by taking a more intergenerational and intersubjective view of children’s experiences of harm.

The methodology.

***The participants.***

The nine participants in this case study were women aged between 19 and 25 years. They had thirty-two children aged between 14 years and 3 months, illustrating the potential increasing scale of this problem in terms of future generations. Six of the women had lived in care themselves and/or left their mother’s care during childhood in order to live with family and friends.

 ***The role of the voluntary agency.***

A voluntary agency facilitated introductions to the participants. The voluntary agency specializes in social work with women who have had children removed from their care. In order to provide support with parenting, the agency helped the women cope with personal and social problems, many of which the women felt originated in their childhoods. The women pointed out the positive difference that the agency made to their lives, through helping them overcome life-long problems. The women’s main accounts were that the most valuable outcome of the agency’s involvement was the support provided that enabled them to look after their own children.

The women involved in this study received extensive support from their keyworkers throughout, including approaching the women about taking part in the first place, sitting in during the interviews, arranging transport and providing refreshments on the day. There were occasions when the women did not attend a pre-arranged interview with the keyworkers then supporting further arrangements. All of the women were participating in a rehabilitation plan in order to have a child permanently in their care, improve contact and /or enable them to look after any future child.

***Ethics.***

The free association interview method was chosen for its ethical characteristics as well as its methodological ones. The researchers, mindful of the likely vulnerability of the women concluded that other methods of inquiry, such as focus groups and structured interviews, would be less suitable (Clarke and Hoggett, 2009; Schofield et al. 2011). During the course of the interviews the women expressed sadness, anger and distress and the research team were grateful for the support the keyworkers provided in this regard. The women indicated that they tended to be private about their experiences and would not have wished to share them in a more open forum. For example, more than one participant said that some other mothers did not care enough about their children in order to make the necessary effort to look after them, and they were not like them.

The main aim of the study was to learn from the women’s accounts in a way that reflected their individual priorities and experiences. As Higgins (2019) put it, ‘Contemporary and family social work is dominated by an automatic thinking that tends not to hear the voices of actual human beings and a refocusing on ethics is needed to put humane practice back at the heart of the social work profession’ (p.44-58). The women expressed the view that it is important that childcare agencies learn from what they have to say, so future generations of mothers and children do not suffer in the way that they have.

The question of ensuring anonymity concerning the details of what the women said is a difficult ethical question, arguably going beyond legalities and raising issues about the meaning of adequately informed consent (Wengraf, 2001). The women were advised that pseudonyms would be used, together with small adjustments to the content, in order to protect the identity of the women, their children, and significant others, however given the detailed nature of this study, anonymity could not be guaranteed. Additionally, the women were provided with written information about the scope of the study before and after the interviews. At the end of the interviews they were invited to give their written consent to involvement in the study, and to give separate consent to be quoted. They were also informed that consent could be withdrawn at any time.

***The free association narrative interview.***

Free association narrative interviews place considerable emphasis upon creating conditions for the emergence of the subject, for example, by initially imposing as little structure as possible, following an opening question asking the participant to think back to their earliest memories (Clarke and Hoggett, 2009; Hollway and Jefferson, 2013).

In this study, some of the women hesitated and said that they could not remember much at all, that they had blocked out painful memories. Thereafter, however, the women talked about their childhood, teenage years, grandparents and siblings, school, and adulthood; their physical and mental health; their relationships with their mother as well as with her partners; the involvement of childcare agencies; the women’s own partners; becoming pregnant and giving birth; their children; contact with their children; and their hopes for the future. They returned to painful memories, describing abuse and neglect in childhood, their own mothers’ struggle to look after them, being removed from their mother’s care, their mother’s physical and mental ill-health, family disputes and estrangement, domestic violence, suicide, alcoholism, addiction to drugs, criminality, social isolation, poor education, unemployment, poverty and difficulties with housing. In the context of their mother’s difficulties, they described themselves as witnesses and bystanders, as perpetrators, as enablers, and as victims and survivors. In this way, they described their own agency, and/or lack of it, and their own accountability in terms of what had happened to them as a result of their mother’s own difficulties. This paper contains lengthy quotes in order to illustrate the flow, context and wholeness with each woman’s story. For example, Freya said,

*‘I do not remember much of my childhood. I tend to block it out because I was in and out of foster homes. Some of the foster homes were not very nice… There were a couple of partners that my mother had that were not exactly nice. They were doing drugs…She did not want me around them…When I was in foster care she come and visit on birthdays and stuff and I go and see her in hospital. She came for contact as well…I do not know why I was moved around so much. It was probably because of my behaviour. When I was ten my grandad got fed up with it and he got a residence order... Then when I was 13 he decided that he could not cope with my behaviour any longer and he got me in a kid’s home…I used to get hit with a belt if I did anything wrong. It was more like a violent home than a foster home…I used to run away from the kid’s home and go to my mum.’*

*‘I was 14, 15, when I finally understood, and that was only because my mum had sat down and told me exactly what happened. For several years I despised my mum and my sister, I absolutely hated them. I did not even want to see them…because I thought it was their fault. I was like why can my sister stay and I cannot?... I remember the day like it happened yesterday. The police and social workers knocked on my mum’s door. I got dragged into a car, and locked inside the car, while police were holding my mum back at the front door and the social workers drove off with me.’*

 *‘I know it sounds horrible, because losing your kids is just the worst thing that has happened but because my mum went through it with me, my mum can support me in that because she has been through it herself...I did not know how any of this affected mum when I was little, but now I know’.*

The scope of the study.

This is a small-scale, inductive case study from which theoretical challenges to the more traditional definition and deployment of the legal tests of unreasonable parental care and welfare, [with emphasis on an objective reasonable parent and a subjective child,] are derived from the women’s accounts. The free association narrative interviews are based on Hollway and Jefferson’s application of Kleinian psychoanalytic principles which ‘sees remembering as a process in continual tension between a truthful acknowledgement of the (emotional) reality of a past event and defensive distortions of that reality in the service of psychological self-protection’ (the defended subject). Hollway and Jefferson explain that ‘Free associations follow an emotional rather than a cognitively derived logic’ (Hollway and Jefferson, 2013 p. 139 and 140) and this is what the analysis of the interviews in this study seeks to do.

As Clarke and Hoggett, put it,

‘Individually, as more and more individual cases are explored, certain themes will begin to emerge, and these emerging themes provide the building blocks of cross-case analysis, but the closure that a more thematic analysis brings to the data needs to be resisted as much as possible, for such closure reduces the element of surprise that new individual cases might otherwise provide (2009, pp 19-20 above)’.

With these points in mind, the analysis in this study does not claim to be determinative of the women’s accounts nor the wider socio-legal problems at hand. Further, the study is tentatively located in the psycho-social literature. This approach remains exploratory and iterative between these disciplines. This case study includes discussion about the (un)reasonable parental care test and the issue of rehabilitation plans and contact with the child’s mother. In the analysis, observations are made about the intersubjective, and intergenerational, nature of harmful experiences these women describe, that they say feature in their childhood and interact with their mothers’ and their children’s experiences of harm throughout each of their lives (Hollway, 2006).

Drawing on psycho-social literature the study focuses on the mother and child relationship, describing it as an intergenerational and intersubjective experience of harm that has potential to impact, negatively and positively, on the next generation of children. The main point is that the interviewed mothers’ own experience of parenting and their experience of their mothers’ difficulties throughout their lives, are psychologically present in their accounts of their ability to parent their own children. This sits alongside both their experience of the standards of reasonable parental care imposed on them by childcare agencies and their own expectations about what a reasonable parent should be. In this way, this study introduces broader subjectivity into the legal definition and deployment of the reasonable parental care test and into the tests of harm and welfare. The study documents ways in which a lack of support for parents own welfare in order that they may provide reasonable parental care to their own children, may directly result in failure to safeguard and promote the welfare of successive generations of children.

In this paper, the focal point concentrated of the analysis is the women’s extensive accounts of their own mother. These descriptions include their perception that either they never had their mother’s love or they gradually lost it, initially because of abuse and/or neglect perpetrated by her, and subsequently because of childcare agencies seeking to blame and criticise her, followed by being taken into care and contact diminishing. There are important points about the impact of their mother’s own problems, such as relationships with dangerous men and how they, as children, had tried to protect her and hide the abuse from the childcare agencies. Trying to make sense of their mother’s responsibility for the abuse and being taken into care, was a particular feature of the women’s accounts, as was their mother seemingly prioritising (even after her child had been taken into care) her own needs such as continuing relationships with men who had harmed, and/ or were believed to pose a risk to her children.

Harm, welfare and unreasonable parental care: An intersubjective approach to harm?

In this study, the main issues, that reveal the intersubjective and intergenerational nature of maternal harm, are the women’s accounts of childhood, the relationship with their own mother, the impact this had on their children; alongside the life-time impact for each other of their individual difficulties and, importantly, the way that these interact. Critically, the women described their childhood experiences becoming re-experienced throughout their lives in actual and psychological ways, such as domestic violence, substance abuse and mental health difficulties that eventually resulted in the removal of their own children. The women’s frequent references to distressing childhood experiences illustrated the ongoing harm these caused for as long as the women felt that they did not understand their mother’s part in them. They expressed an overwhelming need to find out what had happened in their own childhood, to understand more about their mothers’ role in the harm that they had suffered. They wanted to think better of their mother in order to feel better about themselves. Once this had happened, the women reported that their recovery began. For example,

Chloe said,

*‘I got adopted at the age of nine and I had 22 episodes of care before then…My biological mother committed suicide when she was 31. My mum suffered a lot of mental health issues. Her dad killed her mum and she was adopted by my nan. My mum suffered amnesia and she drank an awful lot…However we have dealt with that over the last couple of years with the keyworkers from the voluntary agency. For many years I have been on complete self-destruct because of that… I would like to have thought, growing up, I would have treated my children differently, but actually it’s hard when you don’t know what different is. I could not do it; I did not know how to do it. Social services are there to help you, but sometimes when you do ask for help, they’ll take the kid off you for the weekend, and that isn’t helping. So, a lot of the time you keep a lot of problems to yourself, because it was easier that way. And in the end, due to my children going, I suffered a complete breakdown where I lost all sense of what was real, similar to how I was when I was a child: I didn’t want to believe I’d even had kids, because it was easier to deal with the fact, that everyone was wrong, I had not got any children, than deal with actually, they’d gone…I spent so long looking for my mum. I can honestly say I loved my mum and hated her more than anybody else in the world. Those feelings are dangerous for anybody. It can swamp you to being the most nasty, vicious person there is, because of all the hatred…I wanted to know why she could have done those things. I wanted to know why she gave birth to someone just to do that’.*

 Freya said,

*‘My plan is to apply for custody of my youngest child…It is doing my head in… We have got another review in 4 months but I want things to start now because the longer I wait, it sounds selfish, the more settled they are going to be…I am trying to find things now like parenting classes to prove that I have changed and that I do want my child…for them it was neglect. Abuse because of the domestic violence between me and the dad. It was mainly dad, not me. I just yelled. They have got it down as mental health problems for me and their father. They have gone on suspected things, instead of actually giving me a chance…When I first started having them on my own I will admit I used to get so stressed out because I did not know how to handle them …I was ringing my mum, mum what am I doing? Mum, what do I do? …She would be just like calm down. Trust me, your instincts will kick in, you will know what to do. Now I can do everything with them. I don’t lose my temper. I never lost my temper in the first place. I just got frustrated and walked off…so I do feel victimized by social services’.*

As Hollway (2006) put it,

‘What is the capacity to care and why does it matter? Early maternal care-non-negotiable, asymmetrical- is, I have argued, a prototype for the capacity to care. This is because the experience of this care (good enough or not) creates the floor of everyone’s self and lies at the heart of all dependency and all care receiving as well as care giving. The care relationship is held in our bodily memories, known but unsymbolised; there as a resource for all future encounters. This resource derives from the intersubjectivity that characterizes the early encounters with care and remains with us throughout life…Early maternal care (by which I mean something wider than care given by mothers) is the warp on which individuality is woven and produces the themes on which later subjectivity, including capacity to care, is founded’ (p.128).

Freya and Chloe said the inadequate care given by their mother had been overwhelming for them as long as they had not come to terms with it. Their particular experiences of maternal harm had depleted their capacity to look after their own children. Chloe said it was only after she had come to the voluntary agency that she had been helped to seek out her social work file, and find out that her mother had died. The workers supported her and together they visited her mother’s grave. She said that she now knew that her mother did love her and her mother wanted to treat her well.

Freya said that her mother had spent much of Freya’s early childhood in hospital, because she had mental health problems. Freya said she had been jealous because her sister had stayed in her mother’s care throughout her childhood whilst Freya was abused in care (‘a violent home not a foster home’) and she missed her mother terribly. At the time of the interview she was reconciled with her mother and depended on her for practical and emotional support. In a far different way Chloe was reconciled with her mother too. Both had struggled with their relationships with their mothers. Both had felt neglected and unloved by her. This struggle had a deleterious impact on their welfare and on their ability to look after their own children.

Following their child’s removal, the women described that suffering increased mental health problems, depression, worsening alcoholism and substance misuse, they returned to violent partners, became more socially isolated, endured worsening relationships with the childcare agencies and with their mothers, including where their mothers were looking after their children. They were clear that both they and their children continued to suffer harm, as long as their own welfare did not improve. They described social work involvement in their childhood, and in their children’s childhoods as an intrusion and threat to the family unit, during which little progress was made: they, and their children experienced more harm.

The women outlined how they and their own mothers before them, had been abandoned by the childcare agencies prior and subsequent to the children being taken into care. They recounted trauma arising from personal experiences of sudden separation from their mother sometimes thoughtlessly on important days such as birthdays or close to Christmas. They described similar trauma caused by removal of their own children. This was compounded by the fact that there had been no realistic plans for their return to their mother’s care nor for the return of their children to their care.

Focusing on the discourse of parental-child separation, the women elucidated the importance of trying to re-build and maintain some form of positive relationship. They pointed to the consequences of unresolved difficulties in the mother-child relationship being failed relationships with partners, with childcare agencies, with their foster carers and adoptive parents, as well as conflict and fractured relationships with siblings and wider family. They described their mother having similar relationship difficulties, including examples of her anger and viciousness towards partners, agencies, relatives, as well as her children. In the context of their mothers’ relationship with her partners, they described her as a victim of unreliable and abusive men who had left her unhappy, acting stupidly, debilitated, and collusive in allowing these men to abuse her and her children.

Referring to their own relationships, the women described themselves as sometimes physically violent; displaying and feeling anger was a feature of their relationships with their mother, wider family, friends, partners and childcare agencies. They outlined particular difficulties maintaining contact when there was open animosity, regular arguments and fallings out, and the harmful effect that this had on their child. Their children were distressed by the hostility and divided loyalties between their mother and the person who was caring for them. For example, Ann talked about how the unresolved breakdown of her relationship with her mother was affecting her relationship with her children. Ann trenchantly described her mother in derogatory terms, listed her failings, and stated that she wished she was dead. Yet she appeared conflicted in this account, indicating that her and her mother needed considerable help in resolving these relationship difficulties, in order to help each other and to help her (Ann’s) children.

Ann said,

*‘My mum phoned the police on me. It would not have been as bad as it was if she had not been stood in the window yelling, you’re not having your kids back, they don’t even love you. She was anatagonising the situation because the kids were with her at the time. And then she let me take the kids out completely slaughtered. Why would you do that? And then phone the police on me?’.*

*‘Well I can go down and see them whenever I want. But it’s got to the point now where I just don’t want to go because she just causes trouble and I end up arguing. And she pushes my buttons to where I could fight with her. So, I have to get my youngest child and I have to walk out, and then the kids are like, look, you don’t want me no more. And it’s not that. If I stayed with that woman any longer, I physically will. I will punch her in the face. She is vile’.*

*‘I didn’t hate my mum. I loved her. I just did not want to live with her. I wanted my nan and grandad…. I just wish my grandad was here. Because this would not be happening… I would not have done half of the things I did. It is just I lost my way and now I have got to deal with it’.*

Freya, Chloe and Ann’s accounts demonstrate that they are beginning to experience difficulties in the relationship with their own children as they mature, which they all need help to resolve. Within the women’s accounts of harm, important issues emerge about the very considerable intergenerational challenges that they and their children face. Their experiences from a mother’s perspective once they have their own children mirror their experiences of being mothered throughout their lives. This is what we describe as an intergenerational approach to harm. By this term we refer to a family pattern whereby a mother who was removed from her own mother’s care, subsequently loses her children to care.

Whilst literature on intergenerational harm/ transmission of harm is inconclusive as to the likelihood and predictability of the pattern of abuse being repeated (Widom et al, 2015) there are suggestions that intervention may break the cycle (Rutter, 1993; 2000; Langeland and Dijkstron, 1995). This is particularly important when children are placed with family members. The Adoption and Children Act 2002 heralded two particular changes to the legal landscape that are especially relevant to family placements, First, under section 22 the duty to provide accommodation for a looked after child, a range of possible placements are outlined. The emphasis is on preferred placements with kinship or connected persons defined as a’a relative, friend or other person connected with the child’. Secondly, the Act introduced a new order in the form of special guardianship as an option for permanence often in the alternative to adoption (Bainham, 2007; Hall, 2008). The women in this study raise reasonable questions about the women’s own experiences of harm that may or may not be attributable to the person who is caring for their child. The women described additional difficulties with their mother when looking after their children. They explained the relationship was helpful and when it became unhelpful.

This leads to the conclusion it is fundamentally important that assessments of harm and welfare explicitly recognize maternal problems, resulting in children entering the care system, are likely to continue into the child’s adulthood. Not only do children suffer harm when they are removed, that continues into adulthood and impacts on their ability to parent, but the mothers also suffer harm when their children are removed (Schofield et al. 2011; Nixon et al. 2013; Kenny et al. 2015; Elizabeth, 2019). Eronen (2012) said,

‘Child welfare practices should allow for the different possibilities concerning personal narratives about family relations and also in narrating the moral character of the mother. In child protection in particular, we should be aware of the differences in institutional vs. personal narratives of mothers and be sensitive to different moral stories about the mother, child and child protection’ (p. 73).

***The way ahead: Mother and child; becoming reconciled with harmful experiences.***

It is an important feature of this study that it highlights the women’s own experiences of harm, and indeed the morality of their mother and the childcare agencies, that the women indicated the childcare agencies silenced. The women stated that the childcare agencies caused harm to their mothers, to them and to their children when they were most in need of help. This included overlooking the psychological relationship between mother and child when their physical relationship was interrupted and mother and child could and/or would never be reconciled face to face. A particular feature of the women’s accounts is the strength of feeling the women expressed that harmful experiences of separation from their birth family, that were important to them, had been overlooked. It was evident that their own distress arising from the loss of a reliable maternal figure in childhood was of continued importance to them and at times had been completely overwhelming. Although they recognized that intervention was needed, the problem was that the childcare agencies offered the short-term protection that was necessary at the time, but in the course of this intervention they harmed family relationships and insufficient attention was given to rebuilding them. The women’s accounts describe the complexity of this task.

Clearly, the childcare agencies are led and constrained by the legal framework they find themselves in and criticism of the how the law is defined and deployed in respect of key issues such as children’s experiences of ‘harm’ and ‘reasonable parental care’ are especially pertinent.

West said:

'What is the “point” of law? According to at least one prominent jurisprudential understanding, law is essentially an *instrument*. It is a human creation, designed to minimise the harms we suffer in social life. If that is right, and surely to some degree it is, then it would seem that an understanding of what constitutes a *harm* would be central to jurisprudence. If it is true, as instrumentalists hold, that the primary instrumental function of law is to deter harms or compensate for them through legal means, then surely, we need to know what harms us, and how much' (West, 1997, page 94).

For example, in the context of a study of holocaust survival and suffering Bar-On (2004) said certain facts are silenced by society, including the helpful professions.

Returning to this study, the success of a project such as this is reliant on the un-silencing of the accounts of the women who took part. As we have indicated our experience was of a powerful and revealing encounter with them, and that the free association narrative interviews facilitated the women’s accounts of their own experiences of harm, and how this impacted on their ability to care for their children. Like West (1997) our position is that without listening to individual’s own accounts of their lives and experiences, the danger is that legal intervention, however well intentioned, may harm those it has set out to protect, (West called this ‘double harm’), because harmful experiences are insufficiently understood. As West put it, ‘the goal is completion of the story, and the story in turn is not a story of or about emerging legal doctrine. It is a story of the life and lives of individuals and communities, and of conflicts and of resolutions. Judging, on this view, is a practical art, not a literary one – but it is a practical art with narrativity at its ethical core’ (p.206). The women in this study give voice to matters that we may find difficult to hear and/or act upon but it is important that we do hear and we do act.

 The test of reasonable parental care.

Turning to the legal framework, the parental care test is one of objective reasonableness. This was originally viewed as an important safeguard for parents, in order to prevent their children being taken away without proper scrutiny (Curtis Committee, 1946). There is a fundamental difficulty with an objective test of reasonable parental care, because parents of children who are subject to care proceedings have significant difficulties of their own and each child is different and will experience their parents’ difficulties in an entirely unique way. This study highlights the women’s accounts of long-term impact of separation, for mother and child, separations that happened in their own childhoods, and have happened to their children. In a newspaper article in 2019, commemorating the Children Act 1989 thirty years on, a social worker and adoptive parent said, ‘There is still an assumption that when you remove children from chaotic homes where parents are in difficulty, you are moving them on to a better life. However, that does not always happen for children in care…I adopted two siblings who I think would not have needed to be adopted if their birth mother had been supported’ (Ferguson, 2019). Experiences such as hers are echoed in this study. As Barbara put it,

*‘They [social services] were labelling me. It was like I was being stuck in a corner, I suppose, with a load of Post-Its coming off me, like you know, indication like, you know, abused…everyone looking at me and poking and prodding and having an opinion but there was no resolution…Because when I was a child, I was a victim of abuse and I didn’t grow up deliberately parenting wrong or putting my kids at risk in a deliberate way. I did it because it was embedded in me to be normal.*

*We write every year… I struggle because you’re not allowed to be mum. You’ve got to be flat. I call it my robotic letter. It’s got to be emotionless…You cannot say how much you love them or miss them… What I do every now and again, every other year, I’ll write a loving letter and they’ll just put it in the system for me…Because I don’t want them to go to their file and always find half-hearted letters, I want them to go there and know that I fought for them and I love them and I miss them.*

*I was abusive…I was dysfunctional…So part of me thinks I deserved the removal, it needed to happen to make me the way I am today but I don’t think my children deserved to be adopted because I was workable…. My eldest needed 18 months, nearly two years of separation therapy to break their attachment with me, to make them adoptable in the first place. And then when they did get adopted, it took them another couple of years to settle. You know, they still aren’t settled now and part of me thinks why would you put them through that to punish me? Why would you not just find a way of fixing me so the child can be with their birth family?’*

It is a central tenet of the Children Act 1989, that there should be support for families in order to keep them together, and recognition of the harm caused by separation. There are services, such as the voluntary agency involved in this study, designed to support mothers who have had children removed from their care ([www.pause.org.uk](http://www.pause.org.uk); Cox et al., 2017; Harwin et al. 2018). This ambition, these projects, and this study, highlight two things, first that the amount of support and therapeutic effort required to support the women is considerable and second that it is possible to do more for mothers, within the current legal framework. The definition of harm need never be closed (Bainham called it ‘the Russian doll’ provision (1998, p.381) and it is a long-standing purpose of policy and practice under the 1989 Act, based on attachment theory, to provide the child with an emotionally secure relationship with a main giver; a ‘precondition of development’ (Klein, 1981, p.419 and 428), to best enable children who have suffered significant harm, to go on to have emotionally healthy and fulfilling lives (Fahlberg, 1991; Bowlby, 2005; Howe, 2005). Attachment theory tells us when the mother has considerable difficulties of her own, the child takes extraordinary psychological steps in order to keep their mother emotionally available to them. As Minsky explained, ‘This essentially amounts to the baby trying to mother the mother as if she were the child in order to keep the mother emotionally alive’ (Minsky, 1998, p.56).

Yet, since the Children Act 1989, it has been argued that the legal framework in the 1989 Act falls short because the needs and rights of parents are not on an equal footing with the needs and rights of their children, causing both parent and child more harm (Freeman, 1992; Cleaver *et al*., 1999; Booth et *al*., 2005; Munro and Ward, 2008; Featherstone *et al.*,2018). From this it can be concluded that it is important for assessments of harm and welfare to explicitly recognize that mothers’ own problems resulting in children entering the care system are likely to continue and become more complicated by new experiences of harm not least because they have had to endure experiences of loss that must be almost impossible to bear (Schofield et al. 2011; Nixon et al. 2013; Kenny et al. 2015; Elizabeth, 2019). And this study illustrates how much more work needs to be done. Efforts to continue to increase understanding about outcomes for mothers and the impact of their childhood experiences of harm, in a pre- and post- care proceedings context, is important because the long-term welfare outcomes arising from the removal of children from their mothers’ care, may be insufficiently thought through. Mothers’ own experiences of harm are often brought into sharp focus when children are placed with family members, and there will be a need for considerable time and resources in order to understand these problems and resolve them. The interim guidance on special guardianship from the Family Justice Council (2019) suggesting that the assessment of the ‘proposed carers’ relationship with the child’ must include the carers’ attitude to and ability to manage contact with parents, both now and in the future, is another requirement to do this.

Attachment theory (Bowlby, 1988; Fahlberg, 1991; Howe, 2005) describes that children who experience abuse in early life are likely to suffer profound long-term psychological harm, not only because of the abuse but also because they have been unable to form a secure attachment to their main care giver. The women in this study describe this in their relationships with their mothers and with their children. This study particularly illustrates that the intervention of the childcare agencies, through failing to support the mother’s relationship with her own mother, caused harm to her child, and the future generation of children continues to suffer. The women in this study give vivid accounts of how mother and child’s experiences of harm interact, akin to an intersubjective experience of harm described in attachment theory and explicated from a mothers’ perspective in psycho-social literature. The power of this approach is that its position about the centrality of the mother and child relationship does not apportion blame. It supports each individual in their own right.

From a psycho-social perspective, the effect of vulnerable mothers’ difficulties on the welfare of their child has been described as an intersubjective experience of harm such as in a case of domestic violence (Hollway, 2006; Radford and Hestor, 2006). If such an approach were adopted in the terms of the Children Act 1989 this would mean that the definition and deployment of reasonable parental care should include much greater subjectivity in terms of what is reasonable for a particular parent and what is reasonable for a particular child. The concept of harm will be broader to include relationship difficulties that have the capacity to deteriorate and improve. It will be important to understand how mother and child’s experiences of harm impact on each other over time. For example, studies of domestic violence reveal that when mother and child suffer domestic violence together, it is important to understand the effect on each, as individuals, and on the relationship between them. Children may be experienced by their mothers in a number of different ways, as victims and as perpetrators. As victims, when the mother is trying to protect them and as perpetrators if the child becomes violent themselves and /or the child is so distressed that the mother no longer has the emotional capacity to care for them. Once this is understood it is more possible to repair this relationship in a way that is sustainable for them both in the long-term (Callaghan *et al*., 2015). Similarly, care leavers give accounts of enduring difficulties in their relationship with their mother, the main issues being why they were taken into care, why they stayed in care and their mothers’ responsibility for this (Holland et al. 2010; Holland and Crowley, 2013; Richardson, 2015; Richardson *et al.*, 2017; D f E, 2017).

**Conclusion**.

Participants in studies such as this are likely to re-visit their memories and re-work them in the context of later life experiences. Memories are lost and memories change. And the researcher will come to the study similarly hampered by their own experiences and perspectives (Jervis, 2009). For reasons such as these, any account should be viewed by the researcher as highly situational and masked by intangible matters such as rationalisation, lack of awareness, over and under blown story-telling, fear of being shown up and wanting to appear polite in the interview setting (Oakley, 1990; Stanley and Wise, 1993). The researcher making ‘wild claims’ about what they have concluded about what the participant has said is said to be a particular risk in psycho-social research (Clarke and Hoggett, 2009, p. 18). But these accounts and claims and apparent idiosyncrasies are important because they are at the heart of what this method is about. On another day with another researcher things may have been different. As Hollway and Jefferson put it, ‘The telling is a product of a unique moment and relationship (another time it would come out differently) and, at the same time, it bears a relationship to actual events which, sing the principles of defended subjects and their variable relationships to reality, can be deciphered (Hollway and Jefferson, 2013, p. 140).

With these points in mind, psycho-social research has evolved as a distinct methodology that includes more explicitly psychoanalytical elements such as consideration of intersubjectivity and has its own free association narrative interview method. Frosh said,

‘The idea that law can provide answers to everything leads to repressive states, using that term to reference both social orders and states of mind; it is also ‘regressive’ in the sense of aspiring to something imagined to be early and utopian, a state of narcissistic oneness in which there is no contradiction, in which nothing disturbs the surface of bliss’ (Frosh, 2010, p.27).

Like Freya, Chloe, Ann and Barbara the women in this study placed considerable investment in addressing their experiences of childhood, describing needing to come to terms with experiences of harm, in order to safeguard and promote the wellbeing of their child. The stories that they tell are of their potential as a parent being repressed by the current legal framework, because they do not have access to the help that they need. Additionally, they found the legal framework regressive because it perpetuates and adds to a problem rather than halting and diminishing it.

In practice, the time when a process is underway to remove a child from their parent’s care is probably not the most propitious for collaborating with that parent about the sort of support they will need after the order is made. Within the current legal framework, this needs to be negotiated as it cannot be mandated on parents. However, there can be a commitment to try. The care plan for the child, given to the court by the local authority, should include a more detailed statement about how the child’s relationships with their family members will be promoted while the child is in care.

There is certainly scope for exploring the lack of attention paid to supporting positive parent-child relationships for children in care, as well as for support for children and their parents after they return home from care. This study adds to the body of literature that discusses the benefit of care orders that seek to address the needs of vulnerable mothers, in order to safeguard and promote the welfare of their children. This may involve offering parents much more support after care proceedings end. Nevertheless, this cannot be part of the care plan for the child in care proceedings; the court does not have the jurisdiction to impose it on either the parents or the local authority. The general principle is the court may not intrude into the local authority’s plans for the child (Bainham, 1998; Re S and Ors: Re W and Ors sub nom Re W and B (Children): W (Child) (Care Plan) 2002 UKHL 10. The way ahead, however, for therapeutic reasons, is to recognize the separate subjectivity of both the mother and the child’s experiences of harm, and how these interact.

The conclusion of this study is supportive in practical terms of Broadhurst and Mason’s (2017) view that there should be a ‘fundamental reappraisal’ of services available to parents. This would be backed up by a statutory duty to assist parents following the conclusion of legal proceedings (p.45 and 54). This is perfectly possible within a re-imagination of the current legal framework. It is consistent with most recent permanence provisions about the impact of harm, the child’s current and future needs (including needs arising out of that impact); and the way in which the long-term plan for the upbringing of the child would meet those current and future needs, contained in the Children and Social Work Act 2017 (Children Act 1989, section 31(3)(B)). Within these permanence provisions as well as in the arrangements for contact, the relationship between mother and child should be safeguarded and promoted. There needs to be joined-up thinking across adult and children’s social care, within the provisions of the Care Act 2014, if we are going to look seriously at the needs of mothers that may cut across adult social care, alongside duties to children leaving care.

The particular problem in terms of the life experiences of vulnerable mothers needs to be recognised so that therapeutic support for the mother and child, in terms of their relationship and how their experiences of harm interact, is included in the care plan for the child. This would focus on mother and child’s shared and ongoing experience of harm, and aim to achieve safe and mutually rewarding involvement in each other’s lives. Such provision may be included in the ongoing statutory reviews, as well as plans for the child leaving care and become part of a new safeguarding approach to vulnerable mothers within adult services. It is the identification of this particularly desirable outcome for both current mothers and crucially for the next generation of mothers as well who are currently the children being taken into care, that is a fundamental finding in this study.

In less practical terms, however, the main barrier to improvements such as these is that at the heart of the current legal framework lies an expectation that highly vulnerable mothers meet the needs of their highly vulnerable child. It is only through understanding more about the way that these vulnerabilities interact that improvements may be made. Alongside a change in the legal framework providing a statutory duty to support mothers, an additionally desirable way ahead is to explicitly introduce intersubjectivity into the parental standards that are applied in the ongoing decisions about parental care. At the very least, a long-term therapeutic approach to improve the relationship between mother and child should be central to decision making about children’s welfare in care.

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