"Do the Workers Think We Don't Have a Brain in Our Heads?"

A Qualitative Study about Mothers' and their Social Workers' Perspectives about Social Services

Mothers in poverty experience multiple stressors. Mothers frequently access support from social workers because mothers are still the primary caregivers of multiple family needs. Aboriginal mothers experience the highest rate of poverty in Manitoba and Canada. Aboriginal mothers in this research discussed their experiences with social workers in child welfare and economic assistance. They experienced the relationships with these social workers as an additional source of stress in their lives. Mothers felt judged, misunderstood, and degraded by these experiences. This study uses a Narrative Case Study methodology to explore Aboriginal mothers' experiences with social workers in a broader context of social values, funding priorities and racism. The results suggest that the Aboriginal mothers in this study frequently experienced judgement, lack of empathy and understanding, and inequitable access to resources from these agencies. Their experiences and voices were repressed. The study also examined the mandated nature of these organizations including policies and practices that workers identified in their narratives. The conclusion suggests that CFS and EIA workers need to advocate on behalf of Aboriginal mothers in their organizations. Mothers' experiences have not been told or acknowledged by CFS and EIA. Adequate support and resources are desirable over child apprehensions according to mothers and some workers. And finally, workers and agencies need to be more aware of the enormous power and influence they wield in Aboriginal families particularly given the history of social oppression in our community. The trust has been broken and must be gradually rebuilt through relationships and adequate childcare supports for caregivers.

This study explored the experiences of women who are the primary caregivers in their family situations. In particular, the study asked women to come forward to discuss their experiences with social service agencies. Aboriginal women were highly represented in the study. Aboriginal women and their dependents

have the highest rate of poverty in Manitoba and in Canada. Consequently, Aboriginal children have been overrepresented in the Manitoba child welfare system. In this study, Aboriginal mothers, their former social workers and agency files were consulted for views on mothers' social service experiences. This study combines narrative methods and case study inquiry to explore the context of women's experiences with their social workers from Child and Family Services (CFS) and Employment and Income Assistance (EIA). The results suggest that Aboriginal mother participants frequently experienced judgement, lack of empathy and understanding, and inequitable access to resources through their social workers. This led to a further investigation of the mandated nature of these organizations and the policies and practices that workers identified in their narratives. Some workers had found creative ways to advocate for mothers despite organizational barriers.

Background

Critics of the social welfare system have been calling for an overhaul of the social service delivery system for years (Ryant, 1976; Wilson, 1977, Swift, 1995). More recently, cultural competence when empowering Aboriginal families has been a source of discussion (Raphael, 2007). Economic and social structures continue to perpetuate the feminization of poverty and the marginalization of women and children (Raphael, 2007; Swift and Birmingham, 2000). Social workers may struggle with their dual role of social change advocate for the most oppressed while working within confining individualized case management mandates where they are relegated to 'policing the poor' is also well documented (Cohen, 1975; Dominelli, 2004; Piven and Cloward, 1993; Specht & Courtney, 1994).

Study Design and Methods

This study examines low-income mothers' marginalized experiences with social welfare services such as child welfare and economic security benefits. The women were recruited from the community through a poster campaign and word of mouth. Mothers that called the researcher were interviewed on a first come, first served basis. Mothers arrived at the interview prepared to discuss a particular relationship with a social worker that stood out in their experience.

The central questions in the study were: What are mothers in poverty experiencing as central stressors? What were mothers' and workers' perspectives about the social service experiences? What social service barriers exist for mothers in poverty? What, if anything, is working well in social services?

In order to facilitate an exploration of case series, permission was requested from the mothers to interview the former workers and to view former agency files. Child welfare and economic security agencies (both branches of the provincial government) gave their official sanctions to the project with permissions to view files and interview workers. However when it came to accessing

files and workers, there were some barriers in the child welfare organizations at the practical level resulting in fewer workers interviewed and fewer files reviewed than expected. Direct service managers had the final say of whether access to data would be granted and one of the directors chose to shut down data gathering despite many efforts to negotiate something that would allow the project to be completed. These structural barriers to accessing information mirrored with women's experiences with accessing information in the social welfare agencies.

Case study series analysis was combined with a narrative approach. This allowed an examination of two complete cases (three data sources) in greater depth while also examining the overall data from all sources to explore patterns and exceptions. The results were also organized into a multi-layered analysis examining the interactions of many factors illustrating inequities in the conceptualization and delivery of social services to Aboriginal mothers and their children.

Participants

Mothers were eager to participate and the first 24 of the 25 participants self identified as Aboriginal. Eighty-three per cent of the women wanted to discuss their experiences with CFS workers and 17 percent of the women discussed their stress with the economic security system (also known as "welfare"). The stresses of caregiving and living in poverty were themes that women wove into every story. Only four child welfare social workers were located and interviewed prior to access to information being denied by the child welfare agency. One economic security worker was located and interviewed. He was the worker for two women in the study. Nine files were reviewed (four from economic security and five from child welfare agencies).

Analysis

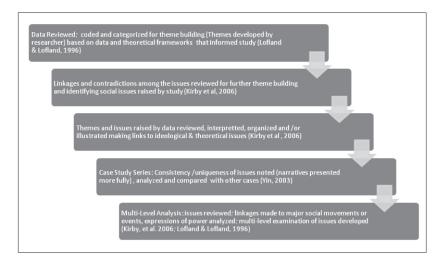
Data analysis involved a theme building process. Linkages among issues identified were analyzed in a social context of values, power inequities, and historical patterns of oppression. The case studies analyses offered further illustrations of the inequities and oppression women reported. Examining the issues in a broader context of social values, funding priorities and policy implementation offered numerous implications that require further exploration in future research. Illustration #1 offers a visual representation of the data analysis process.

Findings

The findings illustrate results from mothers' narratives, worker narratives, agency files. Excerpts from one of the case studies integrate all three data sources in a narrative to identify issues of power inequity and injustice.

Aboriginal mothers reported several central stressors in their lives in addition to the judgement and blame they experienced from social welfare agencies.

Illustration #1



Caregiving and poverty stresses were central in their lives. Seventy eight per cent of mothers reported that workers were not respectful and mothers felt misunderstood, not listened to, and judged by their social workers. Many of the mothers experienced child apprehensions as an extreme stress in their lives (87 per cent). Approximately half of the women identified a struggle that they or a close family member had with addictions as a central stressor in their lives. Parenting struggles, isolation and accessing reliable child care were identified by fewer than half of the women as central stressors.

Poverty stresses women reported centred around inadequate access to affordable housing (43 per cent of the women identified housing as a central stressor), 35 per cent reported access to money and food as a central stressor, and 25 per cent identified inadequate employment options as a central stressor. The multiple stressors tended to pile up creating crisis and the "need for a break" as illustrated by several women in their stories. Illustration #2 summarizes the central stressors mothers in this study discussed.

A high proportion of the mothers described their relationship with their social welfare workers as central stressors in their lives. Seventy eight per cent indicated that their social worker was not respectful and 83 per cent reported that they had a difficult relationship with the child welfare agency and felt misunderstood by them. One of the words mothers consistently used was "judgement." They often said they felt judged by workers. Although they didn't use these words, I started to interpret "judgement" as their experience of racism and sexism. Here are some of the women's comments about "judgement" and feeling "degraded." Italicized comments come directly from mothers' narratives.

Mothers' comments illustrate the experience of marginalization and oppression. Despite the fact that women approached social welfare agencies

Illustration #2

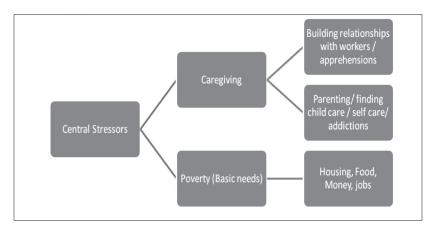


Illustration #3

Mothers felt judged by their workers:

- •Jumped to conclusions/asked for Dr. note for each of daughter's ten missed school days
- •It feels like she looks at me and thinks that I don't have a brain in my head!
 •Jumped to conclusions
- •Was negative, never said a positive thing
- •Judged me from file without even talking to me
- ·Sometimes they try and make you look bad

Mothers felt degraded:

- Talks down to me
- •Kept me waiting long periods of time
- •Checking through my stuff (on home visit)
- •Calling names, stupid, you'll never get anywhere...
- •Looks down on you
- •Told me I'd never get my kids back
- •Feels like workers try to take advantage of you
- •Sometimes it seems it's because we're just another Aboriginal; you get this ugly, uncomfortable feeling

voluntarily in many cases seeking support, they described feeling judged, degraded and investigated. Such experiences simply increased their experiences of social exclusion and invisibility.

One woman's comments inspired the title for this article:

I think the way they're looking at me as if I don't have a brain in my head. That's how they make me feel. I was a really good parent before my daughter was apprehended. I'm a better one now. Oh yeah. Well, for the bad experience that I had, I have to say that it makes you realize what you have, and don't take it for granted. Some of them are good workers. But they're fools to think that we don't know anything ... they're (CFS) pushing people around to make them realize that their kids are what, the most important thing to them? We already know that though. They think that we're stupid... Still after you do all this stuff for your child and everything to get them back, you feel really good, but you don't need people pushing you around to make you realize that. But somehow they end up doing it anyways.

Workers who were interviewed exhibited a wide range of responses. Three workers were women and two workers were men. There seemed to be a difference in the way that female and male workers in this study perceived the power of social workers' roles in social welfare services. These services are mandated services which means that clients are involuntary and do not choose to be involved with services for child welfare and poverty. However, male workers in this study were unable to comment about the power of mandated services or the marginalization mothers in poverty might be experiencing. Female workers identified these issues without prompts from the researcher. While this is a very small sample, it did create some curiosity about pursuing further research on gender differences in perceptions of power dynamics in social welfare service delivery.

Overall, workers' responses ranged from thoughtless and uninterested to empathic and understanding mirroring what mothers had described as their wide range of experiences with workers in social welfare. One worker said:

...I just never want to forget that the woman in front of me could have been me or my sister....

The empathy this worker exhibited in the principles underlying her practice illustrated a worker who advocated for mothers in poverty, understood the harsh realities women were facing, and fought hard for resources and supports for mothers.

Another worker indicated that he remembered nothing about the family we were discussing even though he did remember the young boy who later became a permanent ward. When I interviewed the worker, he said nothing about the mother's concerns about abuse in the foster home, in fact, everything was so generic and non-descript about this family for him that even after looking at the file notes, he has nothing more to say about the dynamics. As I interviewed him, I started to feel a bit like the research I was doing fell into that same non-descript and useless category in his opinion. During the interview, he looked at his watch repeatedly, asked me when the interview would be over, and took a short phone call.

The files that were viewed were so sparse that very few observations can be made except that the omission of Aboriginal women's experiences of injustice in the files illustrates another form of marginalization and invisibility.

The case study narratives were provocative and engaging. I have included a few excerpts from one of the narratives to illustrate the marginalization and thoughtlessness women reported in this study. What follows is an example of one case study narrative.

Case Study Narrative

Betty and her sister Marie arrive for their interview. The sisters asked to be interviewed together because they said they would find it supportive, they live together, and as they indicated "we know each others' stories." Betty and Marie both identify as Aboriginal women and each wants to tell me about their experiences with child welfare services. Marie is much more talkative and animated as she tells the story of addictions in the family. Their mom was an alcoholic, they have struggled with addictions, and the next generation is also battling addictions. Their dad was the one who consistently was there for them as a caregiver and provider. However, amidst the details of all the story themes, it is Betty's story about Donny's broken finger that I find so compelling. Betty almost didn't come today. She is Donny's auntie and became the legal guardian for Donny after he had been in foster care.

Donny was in foster care for a short period while Betty was caring for him and one time when she came to pick Donny up for a visit, he showed her his sore and bruised finger. Donny was about eight years old. Betty was aghast when she saw the finger. She knew that this had occurred while he was in foster care. She thought perhaps his finger had been hurt in the foster home. She tried to comfort Donny but clearly it was painful for him. She asked the CFS case worker about the finger and he said, "oh he probably bumped himself" and she could take him to the doctor if she was concerned about it. Betty had already had her own concerns about the foster home where he was staying, but now she was very worried. The worker's dismissive response to the sore finger did not reassure her.

So Betty took Donny to the doctor who wrote a letter to CFS saying that Donny's finger had been broken. Betty looks at me, leans forward and says in her most animated voice yet, "and he has that crooked finger to this day because it was never fixed properly; it's a reminder of what he's been through." Later I discover that the letter from the doctor about the broken finger is on file, that

the worker documented the 'sore finger' but did not indicate how it occurred or that Betty was very concerned about the finger.

Whenever she came for a visit while he was in foster care, she felt they were finding ways to build a case against her and the family so that CFS could have him as a permanent ward. 'They didn't trust me to begin with" ... that line stays with me and later when I look at the file, Betty's perception is confirmed by this agency file documentation:

Intervention: on July 7, I met with Betty and they said they had been trying to get Donny back since July 5 and not thought to call missing persons. Worker did not believe story although it was plausible and we had no reason to keep Donny in care. I am a bit suspicious of family and I therefore decided to keep file open and monitor, Signed, a worker

When CFS had gone for permanent guardianship, Betty spoke with Donny's father (her brother), and said "let's fight this thing in court. I kept the cast from the hospital from the broken finger, the doctor wrote them (CFS) a letter saying it was a broken finger, let's see if we can keep Donny with his family and with his people (Aboriginal community)." But Betty says that her brother was scared. He thought that CFS had too much power and they might even retaliate in some other way by limiting visits or making life difficult for Donny. Betty was unsure whether she could fight CFS on her own, but she looks me right in the eye and slowly says: "that's the one thing I would do differently; I'd fight for him and I know we could win!" In the end, CFS not only got permanent guardianship but cut off visits immediately and completely with the family. The family didn't lose contact with Donny, CFS documented in the file that they did not believe it was in Donny's best interests to see his family again and they cut off any visits.

The worker does not remember Betty but remembers Donny. The worker has little to say about the situation. Later when I review the fileI learn that Betty did not develop a relationship with anyone at CFS. There are seven contacts documented in Donny's entire file, the notes that are signed are all signed by different workers, while some notes aren't signed at all. No one seemed to see themselves as the primary case worker and no one developed a relationship with Betty or the family. Betty's regret is that her and her brother did not fight harder for custody of Donny, but they were afraid of a system that they felt was enormous and they felt they wouldn't have a chance against CFS.

Discussion

A multi-layered power analysis examined power inequities and mothers' needs that are going unnoticed as illustrated in the case study narratives. Issues that contribute to mothers' oppression are the involuntary dynamics of social welfare agencies, the contradictory roles of workers, agencies that offer different resources to Aboriginal mothers than non-Aboriginal moth-

ers, and funders or directors who seem oblivious to mothers' experiences when in poverty.

The social discourse about neglecting dependents frequently overlooks women's experiences of poverty and women's experiences with violence or other oppressive actions by others (Kline, 1993; Swift, 1995, 1998). The multiple stressors in women's lives were missing from agency files and mothers felt many workers had judged them. The entire context of women's lives seemed to be missing until they told their stories and described their lived experiences.

Kline (1992, 1993) raises the importance of opportunities for self-determination and positive connections to Indigenous culture as strategies for challenging social oppression. This can occur by supporting women to parent their own children, having an understanding of cultural values included in child welfare policies and practices, and by broadening society's notions of caregiving. "The best interests of the child" has often been used to highlight certain needs of children while overlooking the importance of attachment to family and culture. Caregiving can include a variety of models so that women are not solely burdened with responsibility for their children, particularly when they live in poverty or struggle with health issues. The effects of colonization can be linked to the high rates of Aboriginal children in foster care, poverty, and the high rates of addictions in Aboriginal communities. When women's experiences are part of the social discourse of funding priorities and supports for mothers in poverty, the existing services could be dismantled so that judgement and socially policing would no longer be central tenets of social welfare services. Workers and agencies need to be more aware of the enormous power and influence they wield in Aboriginal families particularly given the history of social oppression in our communities.

The contradictory role of workers in social welfare agencies can be summed up in the words of Ronald Rooney (2009) who illustrates that how to support mothers is entangled with a power that is frequently invisible to those who have it in social welfare agencies. Employees in organizations often operate as if they do not recognize their own power. And once they have that power, on a daily basis, they develop ways of justifying their decisions. Ideological beliefs create rationales for creating individualized, intrusive processes that coerce clients rather than support them to be more self-determined. Community based models of child welfare and family support that involve Aboriginal communities in their own governance are gradually developing (Brubacher, 2006). Organizations must take regular inventory of the power dynamics and consumer experiences in order to not abuse their power or lose sight of their intrusiveness and lack of support (Rooney, 2009).

Marlee Kline (1994) blames the underlying current of racism in structures like child welfare for inequitable distribution of resources and exclusionary practices that leave Aboriginal and other marginalized women feeling judged and oppressed. Recently, the child welfare system in Manitoba reorganized its

agency structure as identified by Marlyn Bennett (2008). Indications are that Aboriginal families receive fewer resources for prevention and family support than non-Aboriginal families, while Aboriginal families receive apprehension services (Blackstock and Trocme, 2004; Bennett, 2008). Resources for prevention and family support are important when emphasizing community development rather than an individualized model of social policing which often resorts to apprehending children after crises have occurred. Rooney (2009) and Dennis Raphael (2007) indicate that by individualizing services to mothers, we contribute to mothers' stress and caregiving burden, and we further alienate and exclude women and children in poverty by essentially blaming them for their circumstances.

Conclusion

In summary, this study explored the lived experiences of Aboriginal mother-led families with multiple stresses in relation to their social workers. The perspectives of mothers and their workers were invaluable when analyzing study cases to illustrate the power social welfare agencies have over mothers in poverty.

The case studies raised numerous concerns about the current mandated organizations' practices and procedures. Some of these concerns include: individualized case management models which tend to blame and individualize responsibility for parenting and family wellbeing; fewer resources for Aboriginal families; judgement and inequity in the investigation and relationship building processes with Aboriginal mothers; little choice and involvement from Aboriginal mothers in the case planning processes; and a gate keeping or policing role which protects society more than prioritizing cultural values and family relationships. Therefore, workers must advocate for Aboriginal mothers in their organizations. There is also evidence from other research that resources are inequitable distributed between Aboriginal and non-Aboriginal families in social welfare agencies (Blackstock and Trocme, 2004).

The organizational structures have many barriers for mothers and workers that can inhibit positive relationship building. High caseloads, lack of supervision, and inadequate family support resources are some of those barriers. Some argue that "tinkering" with mandated agencies is another way of contributing to an ongoing need to regulate the poor and supporting social structures to reinvent themselves in an oppressive fashion only to continue marginalizing mothers in poverty (Bennett, 2008).

The key findings in this study indicate that Aboriginal mothers in poverty experience the oppression of judgement and degradation from institutions like child welfare and economic security organizations. Individualizing services and inevitably blame for their experiences of poverty and multiple stressors contributes further to their social exclusion. These power dynamics that seem invisible to those who hold the power are tenets of racism which need to be exposed and eradicated.

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