Silenced Suffering:

The Disenfranchised Grief of Birthmothers Compulsorily Separated from their Children

by

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Abstract

Few efforts have been made to understand the subjective experiences of birthparents involved in the child welfare system, especially of those who have had their parental rights permanently removed. The research undertaken seeks an initial investigation of this neglected issue, providing accounts of four birthmothers' experiences of having one or more of their children involuntarily and permanently removed from their care as a result of child neglect. Implicit in this research is the assumption that these mothers do indeed suffer tremendous grief over the loss of their children, regardless of child welfare agencies' assessments of their parenting capacities. Furthermore, the research critically evaluates how child welfare practice and policy might serve to exacerbate incumbent issues of loss, ultimately disenfranchising this already isolated and stigmatized population. Therefore, this qualitative study endeavours to assist not only child protection workers, but also the greater community in better understanding what it is like to be a "child welfare parent" who has had her parental rights terminated, and to be aware of the existing imbalance of power between child welfare agencies and the clientele they serve. The study ultimately aims to help ensure that human dignity and genuine respect are not lost in the work of child protection.

Sommaire

Peu d'efforts ont été faits pour comprendre les expériences subjectives des nouveaux parents qui sont engagés dans le système social pour les enfants, surtout ceux qui ont été dénués en permanence de leurs droits de parents. La recherche entreprise ici tente une première investigation de ce problème négligé, apportant les témoignages de quatre nouvelles mamans qui ont eu un ou plusieurs de leurs enfants involontairement et en permanence retiré de leur soin à cause de négligence envers l'enfant. Cette recherche suppose implicitement que ces mamans souffrent en effet d'énorme douleur à cause de la perte de leurs enfants, peu importe ce que disent les évaluations des agences d'assistance sociale concernant leur capacité en tant que parents. De plus, la recherche évalue sévèrement comment la pratique et la politique de l'assistance sociale des enfants peuvent aggraver les problèmes de perte qui lui appartient, en fin de compte privant de droits cette population déjà isolée et retirée. Donc, cette étude qualitative tente non seulement de venir en aide à ceux qui travaillent pour la protection des enfants mais aussi, à la communauté en générale pour développer une meilleure compréhension de ce que c'est d'être un parent d'assistance sociale d'enfants dont les droits de parents ont été terminés. Aussi, pour être conscient du déséquilibre de pouvoir qui existe entre les agences d'assistance sociale d'enfants et la clientèle qu'ils servent. Finalement, cette étude a pour but d'assurer que la dignité humaine et le sincère respect ne sont pas perdus dans le travail de la protection des enfants.

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Preface

"It is this court's decision that the child, "Johnny Doe" be permanently removed from his mother, "Jane Doe" and placed under the wardship of the Crown until an adoption order is made."

Have you ever wondered what it might be like to be told that it is in your child's best interest to be raised by someone else, that you no longer have the right to parent your little boy? Have you contemplated the pain of having only one hour to say goodbye to your child realizing that you will never be able to see him, speak to him, or hug him again? And have you imagined what it would be like to be told that it is your weaknesses, failures and bad decisions that have led to your child being taken away?

This project endeavours to take these questions seriously by giving critical attention to the words of a population largely silenced in current child welfare discourse: birthmothers forcibly separated from their children. This project explores the grief experienced by this understudied population, paying critical attention to the impact of child welfare on the grieving process. The court document immediately following this preface is intended to introduce the tensions and unresolved conflict between these mothers and child welfare agencies that will be analyzed more fully in the pages that follow. Incorporating the actual testimony of one birthmother interviewed by this researcher, the ***fictionalized*** court document places the child welfare system on trial for its abuse of power and

its failure to recognize the needs and basic human dignity of the birthmother in question. It is *not intended* as a genuine legal indictment of specific individual child welfare agencies, but rather as a means of providing questioning of the role of the child welfare system in the "disenfranchisement" of the grieving women in this study. The lawyer speaks on behalf of birthmothers mentioned above, and the accused refers to the child welfare system.

COURT FILE # 0045931

"JANE DOE VS. CHILDREN'S AID SOCIETY"

OPENING STATEMENTS:

Your Honour, and members of the Jury, ironically we have returned to the same courtroom where my client stood approximately two years ago listening to damning testimony by the Children's Aid Society (CAS) that ultimately ended her ability to be a mother to her young son. It was here that the decision was made to have "little Johnny" become a Crown Ward, so that he could eventually be adopted into a "more suitable" family, never to be in his mother's care again.

Although two years have passed, time has not healed the wounds inflicted by the CAS. Not only was this mother deprived of her son, but also throughout this battle for custody, she was stripped of her dignity and self-worth. After years of separation, this mother still deeply mourns the loss of her child. Due to her past and present failures – her inability to be a "good enough" parent – she has been deemed unworthy. Unworthy of support; unworthy of compassion; unworthy of respect. This is why we are here today; to address the overwhelming feelings of loss, sadness, and shame experienced by my client at the hands of those who are supposed to be in a helping profession. The tables have turned, and now the actions of the Children's Aid Society's are under scrutiny, and it is up to you, the

jury to decide what needs to be done to ensure that human dignity and genuine respect are not lost in the work of child protection. My client is not expecting the return of her son, nor is she looking for financial retribution. She is here to tell her "story"; her experience as a client of the CAS the way she perceives it, and not the way in which it has been conveyed by the Children's Aid Society. The testimony by my client is intended to raise awareness to all social workers, especially those in the field of child welfare about an existing imbalance of power between the CAS and the clientele they serve. The abuse of authority, whether intentional or not, has left my client feeling betrayed, emotionless and ultimately powerless. It is likely that my client is not the only one to experience this, and therefore, it is essential that this case be heard so other families do not suffer in this same way.

THE TESTIMONY:

I have come before the court in an attempt to raise awareness to the many social workers in the field of child welfare about a disconcerting contradiction to what the profession of social work warrants and what the 'clients' involved in the "System" actually experience. When you hear these words, "**weapon**", "**fight**", "**enemy**", "**torture**", what thoughts or images do you conger in your mind? I can assume that one may envision a battle or war, but one would not consider these words to be related to the social work profession. Most "social workers" strive to help others; to encourage positive change. As you will see, these are only a few of the powerful

words, phrases, and metaphors used by this mother to describe her experience as a client of the Children's Aid Society. After hearing this woman's account of her experience with the CAS, it will become apparent that there lacks a collaborative, supportive relationship between the Children's Aid Society and its clients, especially to those clients where the Society is applying for the permanent custody of their children.

Today, you will hear poignant testimony from a mother who lost her legal "right" to parent. It will become evident that there exists an imbalance of power whereby the CAS has total control, leaving my client to feel helpless in any efforts she made to have her son returned. This mother's voice will finally be heard, and you, the jury will see that through the misuse of the authority inherent in child welfare, lives are forever altered, and in many cases destroyed. Although the words spoken by my client have no longer been silenced; the loss, the suffering, and sense of shame have remained undimmed.

A LOSING BATTLE:

One of the most heart-wrenching themes to come out of my client's experience was the allusion of a battle or war between my client and the CAS in a fight to win custody of this very young child, "Johnny". This was a war in which my client felt she had little chance of winning due to the fact that the CAS's "army" was much more powerful and influential. Ms. Doe describes not standing a chance of gaining custody of her child once he was in the care of the Society. She clearly stated that it was her against the CAS, and "that was a

fight I lost before I started". Why she felt that way is not difficult to imagine seeing as the CAS required her to attend various appointments, whether it be for drug screens, psychiatric appointments or court clinic assessments. These appointments were said to have been across town and held at conflicting times. Jane did not have a vehicle or anyone she could rely on to assist her in making these appointments. She also had very limited funds and paying for taxi fare was not a feasible option.

The Children's Aid Society also has the expectation that parents must learn parenting skills by participating in a parenting course. The problem that exists is the lack of community resources, and programs to offer parenting courses to those individuals who do not have their children in their care. Therefore, obtaining useful parenting skills is difficult for people in my client's position.

Unfortunately, Ms. "Doe" did not even believe she had her lawyers trust, for she mentioned that she felt like she was turned upon by the time she got into the courtroom. Her lawyer is said to have told her to do what the CAS proposed, but again, my client describes the load, or the expectations of the CAS as being too great, for the "pile got to be too big and as much as [she] would do, they would add more to it". In retrospect, Ms. Doe feels that the CAS intended to make it difficult for her to attend required meetings and appointments so that they could strengthen their own case. The Family Service's worker himself is said to have told Ms. Doe that she is "not going to win" and that she might as well sign the papers to have her son become a Crown Ward. Jane described this attempt by

the CAS as "daggers and more daggers coming at you...".

This symbolic use of weaponry is how my client describes the tactics used by the CAS to again accomplish their own objective. I mention tactics here because my client does disclose their being a period whereby she felt that there was a mutual goal in sight; that being a reunification with her son. During this time, Ms. Doe describes becoming comfortable talking about issues with her social worker, and that it appeared as if the social worker was somebody to whom she could trust, for she was told that the goal was to keep her family together. Now that time has lapsed and my client has had the opportunity to reflect on her experience, she believes that the CAS puts on this facade that they are working with you, when in actual fact, they are gathering evidence to use against you once the time comes for trial. Here is a direct quote from Ms. Doe to describe her feelings about this:

> "I started to confide in him about certain things and then when it reached the courtroom, "BOOM", the friend I thought I had was my worst enemy... It shouldn't be that way, it should be the worker and family working together, as a team to try to bring you together, not use everything you have confided in as a weapon against you.

Ms. Doe also placed a lot of trust in the volunteers who would supervise visits, and they too recorded every word spoken. As a result of this, Ms. Doe believes that the CAS and its workers cannot be trusted, and that there is only so far one should go, because becoming too connected with the worker can cause a lot of problems.

APPEARANCE VS REALITY:

There is another theme that resonates throughout this woman's experience and that is this sense of pretence or appearance that my client believes the CAS exhibits in order to persuade its clients to comply with Society's conditions, or to make themselves look good for court or other community services. The previous issue stated is a good example of this, for my client believes that the CAS say they want to help families stay together, but in her case "it seemed like they were doing everything to look like a rosebush, but meanwhile, we were getting thorns". Related to this theme of pretence as well as trust, is the Society's lack of follow through when they promise you pictures of the children once they are made Crown Wards. This same promise was made to Ms. Doe two years ago and has never been carried out. She believes that the CAS make these promises "to paint you a pretty picture or try to make it easier for you". It has been two years since Jane saw her little boy, and for a large portion of this time she has been anticipating pictures, she said that she lives for this, yet the pictures never come.

TRUE EMOTIONS:

My client has been significantly affected emotionally through the involvement she has had with the CAS. Ms. Doe describes being made to feel that she could not show any emotion, she "couldn't show anger, tears" or get angry for any injustices she experienced. She believes that if she were to display her true emotions, the CAS would also use this against her assuming she may behave in an

uncontrollable manner in the presence of her son. She mentions that "you're supposed to be this perfect little parent that never shows any emotion... And that is not a human. Tears aren't allowed, upset isn't called for and you just can't be yourself. You can't". As a result of her experience, Ms. Doe states she is not as an emotional person anymore". In fact she describes feeling "like a stone inside".

One of the most harrowing moments Ms. Doe revisits through her interview is attending what is termed a "goodbye visit". This is a visit whereby individuals or family members are provided an opportunity to say their final goodbyes to their children. The following statement made by my client speaks for itself the pain and sadness she felt the day she said her last goodbye to her son:

> I think it's got to be the worst thing they could ever do to any parent... and it's called a goodbye visit... You can come and spend an hour with your child and say goodbye. How the heck do you tell a child "goodbye, see you later, maybe in twenty years. It's a funeral. That to me is just torture... That visit was just not a good one for me, and then you are not supposed to be emotional, because you can't work up the child. So you're supposed to be sitting there pretending you are happy at a visit when you know it's the last visit you get. That is cruel. That's abuse right there. I think that is terrible.

Although providing parents an opportunity to see their child one last time before being placed in a permanent home is necessary, Ms. Doe expresses the extreme emotional difficulty this visit posed for her and how insensitive the CAS was, for she states, "they don't really care how you are doing after. It's just alright; you're gone, Next....".

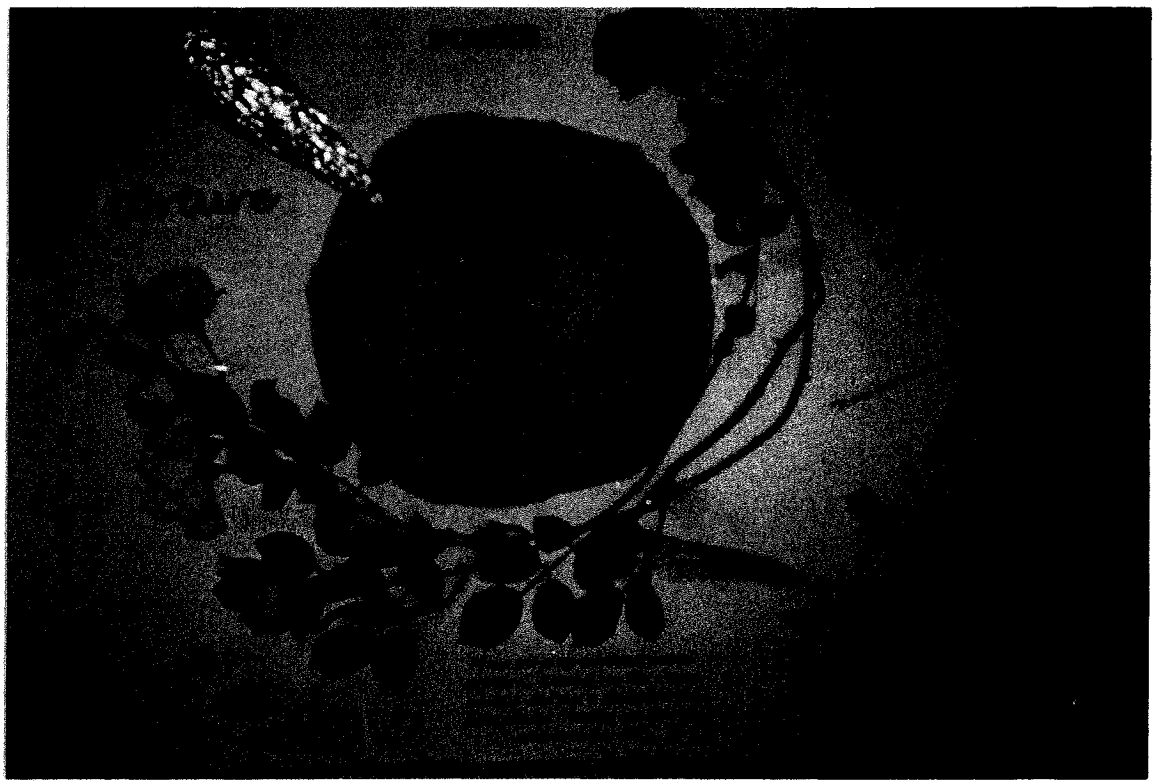
It has been two years since my client has seen her child or has had any dealings with the Children's Aid Society. You may be

wondering what her life is like now. Well, she'll tell you, "it's Empty". She feels her life is done. "That goodbye visit is like saying goodbye to your life". These are very powerful statements used by my client, yet they illustrate a profound sense of helplessness this woman encompasses as a result of losing her only son.

PROSECUTION'S REFLECTION:

Ladies and gentlemen of the Jury, the photo below is an authentic depiction of what my client has felt all these years. As can be seen, at the centre of the picture is a cracked stone that protrudes from the page. The stone symbolizes Jane's soul, which she described as being how she feels inside. The stone is being cracked or torn apart by the dagger being held by the "powerful hand" of the Children's Aid Society. It has become clear that this woman believes the CAS tore her family apart, and in order to win the war (the battle for custody of her son) they used whatever means or "artillery" to do so. The notion the CAS renders, declaring that they are working with you, wanting to keep your family together is pretence. Once you start trusting and disclosing information, that is when they take your words and manipulate everything as evidence against you in court. This is why the rosebush is placed around the stone and on the side of the CAS to signify this concept of deception, whereby the CAS appears to be helpful and supportive to its clients, when in Ms. Doe's opinion, the CAS is really like the thorns of the roses pricking and stabbing away, gradually removing any sense of value or self-worth. The person depicted in the corner hunched over

helpless and defeated is my client, and probably many others that have gone through the "system."



My client says her life is empty, that her "life's done". This woman has not grieved for her loss. She was promised she would receive pictures of her son, but they never came. She said that for many months she waited in anticipation for these pictures, and that is what she lived for. She held onto whatever she could, and again the CAS let her down by not providing her with even a photograph of her son.

Interpreting my client's words to describe her experience as "powerful" seems to be somewhat of a contradiction seeing as she has been made to feel disempowered. Perhaps, "words" are all she has left, for she describes feeling empty inside - that she is "not as

an emotional person anymore". The lack of affect is certainly not due to a lack of love and concern for her child, but due to a number of years fighting her emotions. She described not being allowed to show tears, or be upset even at the goodbye visit. She stated that "nothing can hurt [her] more than that did".

CLOSING REMARKS:

From the descriptions and examples described throughout, the Children's Aid Society has created in my client a sense of powerlessness, an overall distrust of people and the System. My client will admit to making mistakes and putting her son at risk of harm, but what she has a hard time accepting is the way in which she was treated by the Children's Aid Society. They say one thing, and then do another. They tell you that it is their goal to keep families together and help you to become a better parent, yet in the end, everything negative is reported and used against you, resulting in a family torn apart. It is this woman's belief that if the Society has a plan for Crown Wardship, they will use whatever means to make you out to be a "vicious mean mom". There is little or no opportunity provided to demonstrate positive change. "They're taking your children anyway no matter what you do."

What does this all mean, you may ask? Well, it is my impression that the Children's Aid Society is not client- focused, and as a result, many individuals involved in the "system" are disempowered. Until these voices are heard, until their stories are told, the "Society" and its workers will continue to follow the

obligations of the "regime". And for the most part, this is a "war" whereby, the birthparent will ultimately lose. So, if something can be learned from this one mother's experience, it is for child protection workers to recognize the impact their vested authority has on parents involved in the "system", and to ensure that conscious efforts are made to promote client self-determination, mutual respect, and human dignity.

Chapter I
Silenced Suffering:
An Introduction to the Research

We must begin our relationship with these parents by offering them our concern and respect, hope of disentangling themselves from the child protection web, support in the face of what is experienced as overwhelming invasion and powerlessness, and an empathic hearing of their distress. We must make space for them to tell their story; their story of their experience with professionals, and their story of the unfolding relationships within their family. (MacKinnon, 1998, p.235).

Most grief experienced by neglecting parents is not socially supported since the birth parent had placed him or herself in a position that was unacceptable to society. These parents are to blame and therefore, have no right to mourn. Because the grief these parents experience is not openly acknowledged, socially accepted or publicly mourned, it is considered disenfranchised (Doka, 1998). The concept of disenfranchised grief recognizes that in any given society there are social norms or a set of grieving rules that govern how we grieve and for how long, when we grieve and to whom we should grieve for. Most often, "policies reflect the fact that each society defines who has a legitimate right to grieve, and these definitions of right correspond to relationships, primarily familial, that are socially recognized and sanctioned"(Doka, 1989, p.4). According to Doka (1989), mourners whose grief is disenfranchised are cut off from social supports. With few opportunities to express and resolve their grief, they feel alienated from their community and tend to hold onto their grief more

tenaciously than they might if their grief was recognized. It is this researcher's opinion that the bulk of society does not acknowledge this group of people as deserving to grieve over the loss of their children. The lack of literature in this area of study can certainly attest to this. In fact, there appears to be more articles published to help foster parents cope with the loss of a child after separation, than there is about the birthparents' loss from involuntary separation.

The adoption literature has provided greater insight into the substantial loss experienced by birthparents, and these studies indicate that child surrender remains an issue of conflict and interpersonal difficulty even years after the adoption. It is said that parents continue to carry a considerable emotional burden (Deykin, Lee, & Patti, 1984), and the feelings are said to be the same whether the parent voluntarily placed the child or it was taken away by the court (Lee & Nisivoccia, 1989). In common with situations of relinquishment there may be long lasting feelings of sadness and depression which may magnify with the passage of time. There may be a yearning and a strongly perceived need to search, which are also emotional components of unresolved bereavement by death. The loss of a child either compulsorily or by relinquishment may also lead to deep-seated feelings of guilt, centering on the belief that more could have been done to have prevented the adoption. Birth parents also express feelings of anxiety about the welfare of their child, and an intense wish to know about a child's progress and development. Common too, are pervasive anxieties about how the child who has been adopted will come, in time, to view his or her birthparents.

Despite compulsory adoptions constituting a major proportion of

adoptions handled by agencies today (Ryburn, 1994), the voice of those whose children are adopted against their wishes is rarely heard in the adoption arena. Whilst there are similarities in the psychological difficulties experienced by relinquishing and non relinquishing parents, the perspective of those who do not relinquish is complicated by their disadvantage and marginalization within state intervention. The sense of powerlessness experienced by these parents in the legal context is underpinned by the loss of their children, as a consequence of their disadvantage, few are able to represent themselves, let alone have a collective voice about their need for services, or influence social policy.

Implicit in this research is the assumption that parents who have had their parental rights terminated as a result of child neglect do indeed experience tremendous grief over the loss of their children. Although the research intends to further examine this unexplored area of grief experienced by this population, its primary objective is to critically examine how child welfare practice and policy might serve to exacerbate issues of loss, ultimately disenfranchising this already isolated and stigmatized population.

The child welfare system's objective is to ultimately ensure the safety and care of children, as a result, there is often not enough attention paid to the parents of those children and no consideration as to how they feel about what is happening in their lives. The history of child welfare policy and practice in this country has been shaped by an ongoing tension between two perspectives. One perspective emphasizes protection of children and removal of children from the custody of biological parents when there is imminent risk of harm. The other

perspective focuses on the rights of biological parents and the goal of preserving the biological family. Recently, child welfare policy and practice has focused on child protection and timely permanency, with quicker termination of parental rights and placement with adoptive families (McDonald, Propp, & Murphy, 2001). With this emphasis on adoption, more and more biological parents involved in the system are receiving significantly less support by their child welfare workers, and ultimately, are left to fend for themselves during and following the decision to terminate parental custody.

Regardless of what these parents have done, they still feel pain, sadness, and anger at the loss of their child. Not only do they suffer from a significant loss; they have had to endure numerous challenges along the way. For many biological parents, the scene is complicated by other special problems, such as extreme poverty, physical or mental illness, serious struggles with family violence and abuse connected with alcoholism or drug addiction, and other exceptional circumstances. In addition, these parents were once children who may have themselves experienced abuse and lived in out-of home placements (Wattenberg, Kelley, & Kim, 2001).

Few efforts have been made to understand the subjective experiences of birthparents involved in the child welfare system, especially those who have had their children permanently removed from their care. As a result, the following qualitative study aims to assist not only child protection workers, but the greater community in having a better understanding of what it is like to be a "child welfare parent" who has had her parental rights forcibly and permanently

removed. Awareness of the existing imbalance of power between the child welfare agencies and the clientele they serve may help to ensure that human dignity and genuine respect are not lost in the work of child protection. Although treatment strategies are beyond the scope of this paper, there will be recommendations made for practitioners, especially those involved in child welfare to take into consideration when they are faced with cases that may require the termination of parental rights. Until we have walked a mile in these parents' shoes, we will never really know the obstacles they have faced. Although it may not be possible to actually experience "their reality," we as a society need to have a better understanding of what it means to be a "child welfare parent," and the impact the "system" has on a parent's overall emotional and psychological well-being.

Chapter II
Forgotten Parents:
The Unrepresented in Social Work Scholarship

Few studies have been reported concerning the experiences and perceptions birthparents have as a result of their children being involuntarily and permanently removed from their custody. Much of the scholarly literature pertaining to termination of parental rights rests in the legal sphere or in psychiatry journals (Wattenberg et al., 2001). Despite the fact that social work is the profession most intimately involved in child abuse and neglect issues, case study and practice research in the area have been somewhat limited. Studies which have sought views of parents on the care experience of their children include those by Jenkins & Norman (1972), Packman, Randall, & Jacques (1986) and Rowe, Cain, Hundleby, & Keane (1984), who noted parents' sense of powerlessness. An early, but significant study that looked at the circumstances and experience of natural parents is that of Jenkins & Norman (1972), carried out as part of a five year longitudinal investigation of children in care by the Columbia University Child Welfare Research Team. They examined the socio-economical factors associated with child placement, and explored the natural parents' experience on "filial deprivation" a concept, which has received little attention, and will be addressed below. An important contribution that has been published more recently was a study by British researchers, Charlton, Crank, & Kansara, (1998) documenting the experiences of birthparents who have had their children adopted by involuntary means. Unlike Norman and Jenkins research who

studied birthparents whose children are still in the foster care setting, their research is focused on birthparents who have had their parental rights permanently removed. The research addresses the issue of loss experienced by these individuals and offers an account of services specifically designed to undertake the problems of the birth parents of children adopted compulsorily.

Similarly, research documenting parental perceptions of the authority or "power" of child protection agencies and its workers has only recently been addressed. A qualitative study conducted by Diorio (1992) critically examines this issue of authority inherent in child welfare work, and demonstrates the need for workers and agencies to recognize the consequences of any use or abuse of their authority. Other researchers such as Pelton (1989), Swift (1995) and Fernandez (1996) have also been influential in promoting and advocating for effective service delivery to clients, recognizing the necessity of understanding the clients involved in the "system", and how they perceive child welfare intervention. Unfortunately, as Pelton (1989) has emphasized, the subjective experience of parents is often missing:

> Studies of abusive and negligent parents more often concern psychological factors thought to characterize such parents, the prior psychological development of the parents, and the sociological variables operating upon them, rather than their subjective realities. Thus, the parent is studied as object rather than as subject (Pelton, 1989, p.123-124).

Even a decade later, similar studies (MacKinnon 1998; Payne & Littlechild, 2000; Lee & Nisivoccia, 1989) documenting how child welfare parents experienced intervention by frontline workers from the child welfare system also recognized

that the views of these people were conspicuously absent from the practice and research literature, possibly because of the tendency to see parents as "less capable, articulate and objective than other human service recipients, and ... the considerable difficulties of gaining their confidence (MacKinnon, 1998). Interestingly, in a study by researchers, Marilyn Callahan and Colleen Lumb (1995), the need to highlight parental perceptions was viewed as significant. In their research, child welfare workers expressed deep appreciation for these parents' stories. "They said that although they knew about clients' difficulties in general, they didn't really feel or understand their pain..."(Callahan & Lumb, 1995, p.806). Parents who fail to raise their children safely and adequately often become objects of scorn in the community, since parenthood is considered to be a natural responsibility in our culture, and placement tends to be an admission that individuals have failed as parents. Not only do these individuals feel they have failed as parents, but the "separation trauma" may also mean failure as an individual as well (Glickman, 1954). The feelings of failure felt by many parents who have been accused of neglecting their children is not only intrinsic; these feelings have also been intensified by the practices and service delivery of child welfare authorities, and the community as a whole. Perhaps due to child welfare's preoccupation with "child saving", the emphasis has obscured a balanced consideration of the needs, rights, and interests of parents who instead are seen as having failed to provide adequate care, protection, and guidance for their children. "Consequently, their parental authority and responsibility have been replaced by the ostensibly benevolent power of the [family] court" (Diorio, 1992).

Child Welfare - A Brief History

The termination of parental rights represents the most forceful of interventions by the State into family life. Historically, in Canada, the adoption of children against the wishes of their birth parents has been invoked hesitantly and sparingly, with an emphasis on rehabilitation of families, or what has been termed "family preservation" (Bala, 1998). In the 1970s and 1980s there was a growing recognition that too many children were being taken into state care, often with harmful long term consequences. Reports have concluded that many children removed from parental care were not being placed in stable, supportive environments, but rather would "drift" through a series of unsatisfactory placements. The removal of children from parental care was also challenged based on psychological "attachment" theory. The separation of children from long-term caregivers to whom they are attached has been found to be emotionally damaging, even if the parents were far from ideal (Goldstein, Freud, & Solnit, 1996). These psychological theories were also reflected in the development of "permanency planning" policies, which, in its origins favoured "family preservation". Thus it was believed that children should remain with their parents whenever supports could be provided to minimize risks. Making decisions as early as possible in life to remove children from inadequate parents and place the child in another "permanent" home was viewed as a positive measure and would avoid children languishing in substitute care (Bala, 1998).

Unfortunately, the 1990s brought with it severe budget cuts which directly affected the ability of child welfare agencies to provide many of the preventative

and home-based services that were important and necessary for many of the families trying to retain their children or regain custody. Also, with agencies under pressure to secure children's permanence in a timely manner, the permanency planning approach did not often yield high rates of restoration to biological parents as was intended. In fact, an increase in adoptions was noted (Charleton et al., 1998). In this regard, Thoburn (1988) has implied that permanency planning has become synonymous with adoption placement. And more often than not, when decisions are made for permanent removal, there is a lower priority for the development of supportive services for parents to facilitate restoration and a tendency towards injudicious termination of parental rights (Fernandez, 1996).

Paternalist Discourse in Child Welfare

Not only has the last decade seen a push for planning children's permanence in the child welfare arena, there has also been an increasing public and political outcry in response to child abuse mortalities (Krane & Davies, 2000). This has ultimately contributed to the growing requirement for state accountability and liability in the lives and well being of children, to the extent of undermined parental rights in child protection. "The result has been an emerging system of child protection in Canada which inherently subjugates parental authority and promotes intrusive, paternalistic child protection practice" (Boisvenue, 2001, p.7). This perspective which promotes extensive and authoritarian state intervention to protect and care for children when the care of

biological parents is inadequate has been a central approach in the practice and policy of the welfare system.

Social Context of Child Welfare

Current child protection is a social construct that imposes particular standards of "mothering" and "fathering" children based on the dominant euro centric middle-class values (McMahon, 1995). Initially predicated on notions of saving children from the "undeserving poor", child welfare has traditionally reflected the dominant moral stance concerning the poor (Boisvenue, 2001). Researchers, Callahan & Lumb (1995) and Swift (1995) argue that child maltreatment, especially neglect has arisen as a legal construct, reflecting the development of capitalism in Western society and the doctrine of "parens patriae". Under this patriarchal construct, child welfare has existed primarily to ensure that the poor do not abandon their responsibilities towards their children, and to punish families that do not strive towards this "Western" ideal of what constitutes "good parenting."

Discourse of Individual Pathology

While various shifts in intervention strategies (e.g.. punitive vs. rehabilitative) have occurred in child welfare throughout the years (Howe, 1992), there have always been strong elements of social control inherent in practice. The range of traditional state sanctioned interventions such as criminal charges, apprehension of children, and family court prosecutions have tended to be both punitive and pathology based, and has had direct social consequences to child welfare families (Boivenue, 2001).

Perceiving the neglecting parent as the perpetrator presupposes actions or treatment strategies that are intended to rectify the injustices inflicted on the children (victims), while simultaneously attempting to change individual behaviour. Viewing child neglect as stemming from individual inadequacies enables the system to frame problems in terms of available solutions within the caseworker's repertoire, while detracting from the larger social context. Boisvenue (2001) exemplifies this when he states:

> there is no pragmatic solution to contextualizing neglect in terms of gender or racial inequities, because there is no available avenue to mitigate these structural issues. [Yet,] framing the issue in terms of poor parenting or budgeting skills provides the caseworker with a basis for treatment strategies within his or her repertoire (p.12).

Pelton's (1999,1989,1987,) writings are aligned with this perspective. He argues that child abuse and neglect do not occur in isolation from each other but are embedded in the context of poverty-related problems such as unemployment, limited education, health hazards, housing and other physical, psychological and social problems. He notes that the myth of "classlessness' encourages a labelling of impoverished parents as psychologically defective and ignores socio-economic factors (Pelton, 1999). Parton (1985, 1990) is another child welfare theorist whose work posits links between inadequate care and impoverished living conditions. In an attempt to offset the emphasis on individual pathology and culpability in the literature on child abuse, he argues for an alternative to the 'individual pathology model', with its emphasis on individual identification and treatment as the central response. Attempting to draw attention to the social context of parenting, Parton (1990) identifies links between inequality, poverty

and child abuse and perceives the lack of opportunities for bringing up children as major factors explaining the concentration of child abuse in deprived sections of society. Using an interactionist analysis, he argues that deprived families are most at risk of being subject to the biased responses of the state and that discourse on the nature, causes and incidence of abuse has ignored the prevalence of abuse at institutional and structural levels (Parton, 1990). The individual pathology discourse of child maltreatment thus, allows child protection workers to blame parents for the difficulties imbedded in the work of child protection, and provides little understanding of the clients' lived experience.

Social Work Practice Theories

The social, political and physical environment in which people live significantly affects their overall functioning in life. Katz's documents the characteristics of the neglecting parent while incorporating the idea that many of the problems precipitating termination of parental rights may be larger than individual inadequacies in parenting. He states,

> Neglecting parents are the disadvantaged whose lives are hollow. ... they have little to give their children, both in terms of material things and emotional strengths. This results from their own inability to participate in economic processes in society, their own feelings of inadequacy, and society's reluctance to bear the responsibility for effectively meeting their needs. Because of their plight in society and the low esteem in which the community holds them, neglecting parents have difficulty in passing on to their children the social values which the dominant culture deems desirable. And when society's expectations are not met questions of parental fitness and alternative parents may be raised (Katz, 1971, p.26-27).

Ecological Approach

Carel Germain's application of concepts from human ecology to social work provides a perspective that helps to view the transactions between people and their environments in their complexity. People are in continual transaction with the physical and social/economic/political environments all around them (Lee & Nisivoccia, 1989). In their book Permanency Planning for Children, Anthony Maluccio and his colleagues state that the ecological perspective should be adopted as a framework for working with parents and children, as well as for understanding their lives (Maluccio, 1986). As child welfare workers know all too well, the "hard services", such as adequate financial security necessary to sustain family life are, at best, unevenly provided. Affordable housing is often lacking, causing extra stress that adds to family breakdown and child placement. As well, the "soft services", such as "in-home supports, day care, and flexible, inexpensive counselling are often unavailable (Lee & Nisivoccia, 1989). Thus, the reality for many families involved in the system is that sufficient at-home services have not been provided to prevent placement. Therefore, parents who find themselves in a variety of difficult circumstances are still being punished by having their children taken from them and raised by others. It is recognized in this approach that although placement can provide safety and security to children, it is often at the expense of profound loss, severed attachments, stigma, and major painful transitions for all family members. Unlike the paternalist approach to child welfare, where parents are given low priority in the decisions concerning their

children, this ecological perspective gives rise to a more holistic approach to child welfare theory which Fox-Harding (1991) termed "the modern defence of the birth family and parental rights". Rather than solely focusing on the child which is how most current child welfare practice and policy is determined, this perspective reflects an emphasis on birth parents and their significance to children (Fox-Harding, 1991). State intervention is perceived to be legitimate, but intervention should be of a supportive nature, promoting family autonomy and integrity. Where children are separated from parents through admission to care, contact is readily encouraged to help families maintain a connection and strive for reunification. This perspective "encapsulates the notion that optimum parenting requires a materially favourable environment and inadequate child care is linked with social deprivation and oppression" (Fernandez, 1996, p.76). Biological bonds are perceived in this perspective to be synonymous with psychological ones for the most part, and are assumed to be of crucial significance to the child. These bonds are deemed significant for the parent too, as there is an acknowledgement of the sense of deprivation and loss parents experience as their children enter care.

Attachment/Separation Theory

As was mentioned above, psychological theories concerning parent-child attachment has been extremely influential in the discourse and practice of child welfare, especially important to the establishment and implementation of the permanency planning movement. From earlier studies by experimental psychologist, John Bowlby, (1984) it became apparent how important providing children with parental nurturing is, and that disruption of the continuity of the

emotional relationship with the parent seriously disrupts the normal development of a child (Bowlby, 1984). As a result, child psychiatrists interpreted the results to mean that removing children from their parents, for whatever reason, was harmful to their development (Goldstein, Freud, & Solnit, 1996). It is suggested that separating children from attachment figures is likely to engender in them acute fear and that the most frightening thing for children is simultaneously to be afraid and separated from their attachment figures. In most common separation experiences, it is expected that children will progress through recognized stages of protest, despair, and depression, yet research has proven that many placed by involuntary means were not likely to experience this latter progression (Palmer, 1995). Instead, these children would often demonstrate signs of detachment. Palmer's study found that once children were apprehended and brought to the foster carer's home, the children would lapse into a "frozen" silence with no behavioural difficulties. This was often interpreted as a sign that the child was "settling in well", when in most cases, the lack of emotional response was a premature detachment (Palmer, 1995). Not surprisingly, this detachment is said to discontinue once contact with parents resumed. In fact, Palmer states:

> With regular parental contact, the freezing would thaw and the children's underlying feelings would emerge; they would resist separating from their parents at the end of a visit or would show disturbed behaviour around the time of contact. Experience with these children, therefore, suggests that a child's apparent lack of concern about separation is likely to be a defensive reaction (Palmer, 1995, p.45).

One of the most important determinants of how well children did in foster care was parental visiting. There are a number of studies that emphasize the

importance of a link between parent and separated child and examine the impact of parental contact on different dimensions of the foster care experience. Weinstein (1960) shows that the well being of the foster child is related to the awareness of his or her origins and position as a foster child. In a study with foster children, Weinstein found that the average well being scores for children who were visited were significantly higher than those for children who were unvisited. Thorpe (1984) similarly concluded that contact with biological parents enabled the foster child to create a more satisfactory picture of their family background and reasons for their entry to care. Reinforced in Aldgate's (1980) findings is the view that greater contact between parent and child "helps the child to retain a sense of identity which is considered to be related to emotional well being and adjustment" (p.255). In a gripping film by the Infant-Parent Institute (1997) on children's views of being a child in foster care, the following collection of responses from children who have been separated from their biological parents are documented:

> Some people say that my first parents shook me until my eyeballs got loosened up, or they left me alone, or they gave me away, or they just ran away. I guess you think because of that I am supposed to not miss them? (Because if I did it would sure make me lots more cooperative with all the plans you keep making for me.
>
> ... I can't forget - even if my brain does, my body won't. I can't stop myself yearning (even though later I will get quite good at playing games about this). None of you got how I was being changed by all those losses.
>
> I wasn't going to let anybody like me, not even me.
> Are you willing to feel as powerless as I do?
>
> And as little parts of my spirit keep dying, will it surprise you that I'm not exactly going to be overjoyed when you say you have

> permanent parents for me?
>
> I was there, watching I was having deep feelings about what was happening to me and I needed someone to act as if it mattered, hugely. Second, don't imagine that I will ever stop yearning for my birth family, even though, as in other things, I will pretend otherwise. Help me find some way to keep a connection with them, even if I never see them again... (Trout, 1997).

According to Fanshel and Shinn (1978) those children who were visited more often by their parents were most likely to be restored to their parents. However, it was also documented that for those children who had little to no contact with their biological parents, it was due in large part by the poor level of social work planning and support suggesting that much of the responsibility for lack of contact between biological parents and child lay with agencies who failed to encourage contact. From their extensive research they,

> strongly support the notion that continued contact with parents, even when the functioning of the latter is marginal, is good for most foster children. [The] data suggests that total abandonment by parents is associated with evidence of emotional turmoil in the children. We can think of no more profound insult to a child's personality than evidence that the parent thinks so little of the relationship with it that there is no motivation to visit and see how he is faring. Good care in the hands of loving parents and institutional childcare staff can mitigate the insult but cannot fully compensate for it. It is our view that parents continue to have significance for the child even when they are no longer visible to him. At the same time we are saying that continued visiting by parents of children who are long-term wards of the foster care system, while beneficial is not without stress. It is not easy for the child to juggle two sets of relationships and the caseworkers report that some children show signs of strain in the process. We maintain however, that this is a healthier state of affairs than that faced by the child who must reconcile questions about his own worth as a human being with the fact of parental abandonment. In the main, children are more able to accept additional, concerned and loving parental figures in their lives with all the confusions inherent in such a situation, than to accept the loss of a meaningful figure (Fanshel & Shinn, 1978, p. 487-488).

Filial Deprivation

As mentioned earlier, filial deprivation is a concept that has received very little attention. It was researchers, Jenkins & Norman (1972, 1975) who introduced this concept and through their efforts a recognition of the feelings birth parents had as a result of being separated from their children was acknowledged. The major feelings expressed by almost all parents interviewed in their study were sadness at separation, worry about the care of their child and possible loss of his/her love or their rights. Where placement was considered to be unnecessary, as characteristically in abuse and neglect cases, the parents' predominant feelings were more likely to be anger and bitterness, and they tended to perceive agencies as usurpers of parental rights. Those who internalized their guilt and shame were less likely to take the initiative and fight for their child's return home and more likely in time, to disengage from attachment to their child, this adding to the problems of restoration. Parkes' (1971) studies of grief suggest there is some ground for believing that the feelings associated with filial deprivation have something in common with the grief of a bereavement experience. Loss through contested adoption occurs over a prolonged period of time and therefore grieving reactions can be observed in parents long before legal adoption takes place. In fact, the process of losing a child through the courts could be similar to the anticipated death of a child.

Loss Theory

An extensive range of characteristics is associated with normal reactions to loss, mourning and active grief. However, mourning becomes pathological

when adjustment to loss is not achieved. Pathological mourning has been associated with the life-long grief of relinquishing birth mothers (Charleton et al, 1998). Building on work from Bowlby's (1980) study of parental reactions to loss when children are diagnosed as terminally ill, it was found that parents begin a process of mourning when the initial diagnosis is made. He observed a phase of numbness punctuated by bouts of anger while the child was still alive. Parents often disbelieve the diagnosis and prognosis, and frantically search for information about the illness and attempt to prove the doctors wrong. Parents' anger is often directed at those responsible for making the diagnosis. Similarly, parents accused of child abuse or neglect and who learn of plans for their children to be adopted initially disbelieve the decisions of case conferences, and it is often at that time that they begin actively searching for legal information to know their rights, and to understand the train of events. Anger is mostly directed towards the workers who are planning the adoption. Following the phase of numbness, Bowlby found that parents went through a stage of anticipatory mourning during which they gradually detached themselves from their child. Similarly, a phase of anticipatory mourning can be observed in parents who are not able to keep up contact with their children when termination of contact is the eventual aim. These parents are likely to become detached from their children because they believe the fight for their child is already over. Adoption with no form of contact may be experienced as a "living death" by the bereaved parents; a permanent loss without a real death.

The research demonstrates that birth parents experience enormous

sadness, loneliness, emptiness and guilt at the loss of their children, which in Jenkins & Norman's study is said to have lasted for years, and to have only been relieved when their children returned (Jenkins & Norman, 1972). What is important in this research however is to have a better understanding of the feelings experienced by those who do not get the opportunity to have their children returned. Despite compulsory adoptions constituting a major proportion of adoptions handled by agencies today (Ryburn, 1994), the voice or experience of those whose children are adopted against their wishes is rarely heard. In some respects the problems encountered by birth parents who lose their children compulsorily parallel those where there have been adoptions by relinquishment. The documented experiences of relinquishing birth mothers in recent years (McDonald et al., 2001; De Simone, 1996; Blanton & Deschner, 1990; Berry, M., 1991; and Deykin et al. 1984, 2001) have highlighted the life-long impact of adoption and the resulting grief which is considered to be profound and often unacknowledged. Evelyn Burns Robinson, the author of Adoption and Loss: The Hidden Grief, (2001) has studied grief and the experience of mothers who have lost their children to adoption. She, too, recognized that adoption loss is socially unsupported, and found some striking similarities to what Doka termed "disenfranchised grief". She describes the special kind of grief natural mothers suffer, and explores why that grief hasn't just "gone away" with time (Burns Robinson, 2001). It is argued that when grief is never recognized, it cannot be resolved. When feelings are denied, especially when they are cemented in place by shame and fear of the disapproval of others, they actually grow in intensity. It

was documented by one researcher that,

> while all attempts to cope and resolve grief involve difficulty, the most difficult loss to support occurs when the assumption is made that people who make anomalous life choices or have deviant lifestyles do not deserve support. The social response is one of rejection, shunning, and an attitude that "they're getting what they deserve." The result of this attitude is that a person in grief is deprived of the recognition and support necessary for successful grief resolution (Meagher, 1989, p.313-314).

When the parent feels responsible for the loss, it results in feelings of shame and guilt. In one study addressing reactions to parental separation, the researcher noted that "in all cases where parents have failed to keep their children there is a tremendous sense of guilt, which can be completely paralyzing... The result of this feeling is apathy and depression or the projection of their feelings onto some external factor or person whom they seek to blame for what has happened (Britton, 1955, p.12). Parents who were questioned in a child guidance clinic about their experiences during and after separation expressed some relief from tension, but also feelings of intense loneliness, emptiness and guilt (Smith et al.,1962). In fact, in a follow up study conducted by Jenkins and Norman (1975) on filial deprivation, they found that parents' feelings of guilt, anger, shame, and emptiness stayed the same even after five years had passed, while feelings of bitterness, sadness, worry, and nervousness declined (p.47). In the "normal" grieving process, time will often help to alleviate such feelings, but as Kenneth Doka has stated, in disenfranchised grief, these feelings of powerlessness, anger, and guilt are often tremendously intensified (Doka, 1989).

Disenfranchised Grief

In the child welfare field there is no more disenfranchised group than these parents whose ties with their children have been permanently severed. There is also no better test of the worth of any profession than how it treats those who are least able to exercise a say in the services that they want and how they should be delivered. Because neglecting parents violate society's western ideal of what constitutes "good parenting", they are deemed unworthy of overtly expressing their loss. Recognized among scholars for his significant research and theorizing on a concept known as "disenfranchised grief", Kenneth Doka (1998) has provided great insight and understanding of a diverse population that has experienced and continues to experience significant losses deemed illegitimate by society's standards, and as such, are not provided the same kind of support that may be offered to someone who has faced a legitimate or sanctioned loss or death. Those experiencing disenfranchised grief are said to be from three general types of grievers. Included are those individuals whose relationships are socially unrecognized, whose loss is unrecognized and those who are thought not to be legitimate grievers (Pine, 1989). Although Doka has not applied the concept of "disenfranchised grief" to the loss experienced by birthparents who have had their children forcibly and permanently removed, it is this researcher's opinion that this population of people could be incorporated in all three types of disenfranchised grievers described above.

Unrecognized Relationship:

Taking Doka's three classifications, one can see that birthparents' relationships with their separated children are not often socially sanctioned. Research has stated that those parents who have had their parental rights terminated often have a dysfunctional attachment or lack a parental bond with their child (Wattenberg et al, 2001). More than not, the system will often sever the attachment further by limiting access between the parent and child. Therefore, despite kin-ties, the relationship is not seen as significant and the neglectful parent is not considered worthy of grieving over the loss of this relationship.

Unrecognized Loss:

The actual loss of the child is often unrecognized by many child welfare workers as a result of feeling that the child is residing in a better place. And so when the time comes for permanent custody or adoption, the worker is much more focused on the child's "bright" future in a new non-abusive home. Thus, it is often a time of celebration from the workers perspective, and the difficult needs or feelings of the parent(s) are avoided or ignored.

Unrecognized Griever:

Finally, it is the griever who is not recognized as capable of grieving. In the birthparents instance, they are viewed by the public as not being worthy or deserving to grieve for the wrongdoings they have inflicted on their child(ren). They are to blame and therefore, have no right to mourn.

Summary

It is the lack of social support that impacts greatly on these individuals. And as Doka suggests, with few opportunities to express and resolve their grief, they feel alienated from their community and tend to hold onto their grief more tenaciously than they might if their grief was recognized (Doka, 1989). In normal bereavement, rituals surround and ease the pain of the bereaved. But for cases of disenfranchised grief, there are no rituals. There is nothing to validate the loss. There is usually no public announcement by the parent of the loss of the child. There is no recognition of the child's place that the child held in society, because the child who belonged to that mother and or father became a non-existent person after adoption. Once the new birth certificate is issued, society denies that child's existence and heritage. Generally, no one assisted the parents' through the process of grief. Most parents are not allowed to express their emotions outwardly. They had to hide their feelings after the permanent separation as they had learned to hide them throughout their involvement in the "system". The community usually does not gather round the person who is grieving; in fact they often avoid them. There is no public outpouring of grief. There are usually no photographs, no mementoes. Society sees no reason for the parent to grieve so there are no allowances for a change in demeanour or behaviour as there would be in regular bereavement situations.

To feel empathy for those who have abused or neglected their own child(ren) is a very difficult task. We live in a society that holds on to a set of assumptions (Janoff-Bulman, 1992) such as the world is a benign place, bad

things happen to bad people, and people get what they deserve. As a result, those individuals who have failed to protect and nurture their children are not worthy of having a relationship with or reclaiming their children. So then what? The children are gone; they are separated from the only parent(s) they know and then are raised by foster families or adopted into new families. What happens to these childless parents during and after a long battle with the child welfare system? What happens to these human beings once their children are gone?

Chapter III
Methodology

The research undertaken is an account of birthmothers' experience of having their children involuntarily and permanently removed from their care. It was a chance for these individuals to express their thoughts and feelings about a child welfare system that found them incapable of meeting the needs of their own children. Due to great resistance and hostility of most child welfare parents towards child protection workers, and the child welfare system in general, it can be very difficult for front-line workers to appreciate these parents' perspectives and in some cases, their way of life. Fortunately, the work of child protection has not hardened this researcher's sense of empathy towards this population. In fact, this study came about as a result of my own previous direct practice experience. One family I remember vividly that raised my awareness of the significant effects separation has on a birthmother, as well as the power dynamic between client and worker, involved a young mother who had her three young children in the care of the Society as a result of her inability to properly care for and protect them from an abusive partner. I became involved after the decision was made to apply for Crown Wardship. The previous child protection worker had significant evidence to prove this mother "unfit", and regardless of any efforts on this mother's part to better her situation in order to regain custody of her children, it was considered "too little, too late" from the Society's standpoint. As the family service worker, I was obligated to get from this mother historical and present family and medical information that would assist in the adoption workers making a life book (an

album with picture, mementos and text all serving to document the child's history) for the children. Not surprisingly, this woman cried uncontrollably during the session. She said it was unfair that I ask those things when her children had not yet been legally made Crown Wards. After two years this woman presented as trying to better her situation, and had shown significant improvements. But with the permanency policies in place to not have children drift too long in care, it was considered too late. I felt that my hands were tied when it came to determining the fate of these children, and this was made more pronounced when this mother pleaded with me, stating, "you are the only one I have that can help me". She was absolutely right; I was the only one she had that could possibly advocate for her. This particular case heightened my awareness of a need by "clients of the system" to have someone who understands them, who can advocate on their behalf; someone who can assist them through their loss. It also re-emphasized how powerful the "system" is to be able to determine parental custody, and how child welfare workers' interactions with parents plays such a crucial role in the outcome of their lives.

The need for services for parents who are facing the permanent termination of their children has also been recognized by the Family court. There had been growing criticism by Kingston, Ontario's Family court justices around the lack of services and resources offered to clients involved in Child Welfare matters that are before the court. Specifically, this feedback came about after or during a trial in which the Children's Aid Society was seeking Crown Wardship of a child with no access to the birthparents. In this research study, I hope that the

stories recounted by these birthparents will help social workers, especially those working in child welfare to have a better understanding of the difficulties experienced by these individuals; to recognize the impact their vested authority has, and to ensure that conscious efforts are made to promote client self-determination, mutual respect, and dignity to the many parents involved in the "system", with an ultimate aim of deriving useful implications for formulating effective interventions and policies.

This qualitative study draws on phenomenological approach to inquiry as a way to highlight birthparents' accounts of their experience rather than the "objective realities of their case". An important phenomenological principle in qualitative research noted by Rubin & Babbie (1997) is a German term "verstehen," which means "understanding". This study involves the attempt to understand the lived experience of these parents. Before taking on this research, I had assumptions about what kind of information would be relayed in the interviews. I knew from my own previous interactions with child welfare clients some of the frustrations and outright anger they experienced. After hearing from these birthparents, a number of emotions were felt from sadness to frustration. I feel sadness because these parents no longer have their children, and as a mother, I could not bear to think of losing my own children. I feel sadness for the way in which many of the mothers describe their life now. One mother, in particular suggested that she is empty, that her "life's done". These mothers have not fully grieved. They were promised they would receive pictures of their children, but they never came. At another level, I feel frustration for reasons stated above, that

being the promises made and not followed through. But also, I find it troubling to be associated with a profession whereby people are made to feel powerless. The resources are not readily available, especially to those who do not have their children in their care. For instance, parents without their children in their care are ineligible to participate in the few parenting courses that are offered, yet they are more times than not required by the CAS to further their parenting skills. Most of the parents involved with child welfare agencies come from disadvantaged backgrounds, with lower socio-economic status, few family or community supports, and limited coping skills, as a result, it is much more difficult for these individual's to adhere to the conditions outlined in the court applications. My views about birthparents who have had, or are in the process of having their parental rights terminated coincide with the philosophy of researchers Charlton et al. (1998) who outline five basic beliefs:

> 1. Birth parents are parents for life even if they are prevented from parenting their children.
>
> 2. Birth parents have the right to be well represented and supported when there are legal conflicts to determine their children's future.
>
> 3. Adoption may be necessary for some children.
>
> 4. Adopted children have the right to form a true identity.
>
> 5. Birth parents have a role to play in their children's future and therefore openness should be mediated along a continuum; flexibility is needed to allow a child to feel secure in his or her adoptive placement but also to have access to information about his or her birth family's lifetime development, either directly or through a third party.
>
> (Charlton et.al., 1998, p.28)

Whilst it is impossible to suspend all prejudices and assumptions (Spinelli, 1989),

it is hoped this study will allow the reader to hear and accept birth parents' experiences.

Data Collection

Individual in-depth interviews were conducted with four birthmothers who have experienced the permanent removal of their children as a result of child welfare intervention. Pseudonyms were used to identify each mother throughout the analysis. The interviews were unstructured to allow the mothers to express themselves as openly and freely as they saw fit with the first question being, "Tell me about your experience as a client involved with the CAS". An interview guide was followed that addressed important areas such as the client-worker relationship, the court experience, the separation process, and finally the impact these experiences have had on their present life functioning. While flexibility was certainly provided, the research guide helped to ensure that similar material and a focus on the same predetermined topics and issues were covered for each interview. This method still allowed for the interview to remain conversational, as well as free to probe into unanticipated situations and any emotional responses.

The Research Participants

The participants for this research consist of birthparents who have lost permanent custody of at least one of their children as a result of neglect or chronic problems as determined by the Child Welfare System and (Family Court) of Frontenac County, located in and around the City of Kingston. It was important

that all participants were not former "clients" of this researcher, and were mentally and emotionally capable of discussing their experience so as not to jeopardize their overall health, as well as the safety of the researcher. Due to the delicate nature of the interview topic, and the difficulty in accessing this population, it was decided that assistance from an outside source would be necessary, as well as, beneficial in recruiting participants. Other researchers such as Magura & Moses (1984), and MacKinnon (1998) in their studies also recognized the difficulties in finding parents willing to discuss their experiences with child protection intervention. Therefore, they too, saw fit to go through someone to reach the person to be interviewed. "That someone's' relationship with the respondent is therefore critical in terms of both gaining access and affecting how the researcher is likely to be perceived by the respondent" (MacKinnon, 1998, p.238).

During this researcher's employment at the Kingston Children's Aid Society, I made the acquaintance of a woman who volunteers her time to be an advocate for the many families that the Children's Aid Society works with. This woman is not paid or supported in any way by the CAS or any other agency. For many years this woman has devoted a significant amount of time and energy to help these families understand their situation and assist them in fulfilling the expectations as imposed by the CAS. A copy of the consent form explaining the purpose of the research that the family advocate provided either verbally or through face-to-face contact with the potential participants is attached in the appendix.

The Interview

Arrangements were made in advance to meet the participants at a location that was non-threatening and comfortable to all parties. Participants were welcomed to have the family advocate with them during the interview if this made them feel more at ease. Prior to the interview commencing, all participants were verbally informed of the study, the purpose of it and any risks the questioning may pose, and all were given a consent form (attached as an appendix) that they all signed. With the participants' permission, the session was recorded on audiotape for the purpose of transcribing their statements and they were all informed that confidentiality was very important. Therefore, the tape would not be heard by anyone else and that their names would not be disclosed and identifying details would be omitted or disguised in this study. Due to the delicate nature of the topic, participants were warned that they may experience some emotional distress and so they were free to refuse to answer any question, or to end the interview when they wished. They were also provided with a list of community services that assist individuals experiencing difficulties associated with loss and separation. All participants were informed that this research would not impact on past, present or future involvement with any community social services. However, they all acknowledged that they wanted the chance to tell their story the way they perceive it, so that their experiences may help to improve services to people such as themselves in the future.

Data Analysis

Due to the necessity for subjective interpretation, the study's findings are the product of hermeneutic inquiry, and as such, are shaped by the nature of the research questions, and research sample alike. Analysis and interpretation of the interviews revealed many interrelated but conceptually distinct themes that emerged from the stories of each of the birthmothers. These themes tended to highlight the psychological impact of compulsory separation and the powerlessness birthparents felt during this process. After spending time with these individuals, it became apparent that compulsory separation involves not only the loss of children, but also a loss of self worth, impacting greatly on overall health and relationships.

Limitations of the Research

Although initially I was told that there were many individuals interested in participating, only four individuals (birthmothers) contacted this researcher directly by telephone to arrange a time to be interviewed. The lack of responses to this research is not entirely surprising, as this is a population whereby follow up can be difficult. It is assumed that some of the possible participants did not have easy access to a telephone, or a mailbox, or they may have not felt comfortable calling a stranger to discuss such private and emotional material. Also, the participants were all mothers which does not give voice to the many fathers who face permanent termination. Regardless of the small sample, the interviews revealed much insightful information from this group of birthparents concerning

their experience of losing a child permanently to the Children's Aid Society.

Ultimately, this research serves to remind us, in a child welfare world now driven by emphasis on risk, service plans and quality assurance that, in its origins social work began as a profession concerned to meet the individual and distinctive needs of those who are most isolated and socially disadvantaged. This research, however limited, offers a clear message that a strong sense of commitment to such fundamental principles could truly make a significant difference in the lives of these vulnerable people.

Chapter IV
Giving Voice to the Silenced:
Research Findings

Although the words spoken, the stories told by these survivors have no longer been silenced; the loss, the suffering, and sense of shame have remained undimmed.

Participant Demographics

Although the research did not specifically delve into the participants' demographic information like age, marital status, education, and socio-economic status, the mothers provided accounts of their life circumstances during the course of the interviews. Three of the mothers (*Jane, Karen and Barb*) had partners during the time of the child(ren)'s separation. These relationships were all described as abusive with significant drug use by both the mother and the partner. All four mothers stated that the child welfare agency initially became involved due to concerns mainly as a result of their relationships with these men. Although *Dana* did not have a partner at the time of her daughter's separation, she did disclose past sexual abuse of her daughter by an ex-partner, which ultimately instigated the child welfare involvement. It was approximately seven years later that this woman's fifteen-year-old daughter was removed from her care as a result of her inability to properly manage her daughter's difficult behaviours. This one woman's situation differs significantly from the others - first, she had her child

removed at a later age than the other mothers in this study, and secondly, she consented to Crown Wardship with access (telephone and visitation was permitted). The three other mothers had their respective children involuntarily and permanently removed at a very young age (birth to approximately age two) with no access, so as to carry out an adoption order for each child. All of the mothers have other children for whom they retain custody. Two of the mothers have older children living with relatives they can arrange to visit and the other two women have children residing in their care. One of these latter mothers (Karen) gave birth to a son only five months after permanent removal of her daughter took place. She is expecting the return of her seven-year-old son in the near future. The other mother who had her older daughter removed still has custody of her four sons.

Mother	Permanent Removal (Year)	Apprehension Reason	# of children removed	age of child at removal	# of children remaining or to be returned to mother
1 (Jane)	1998 (no access)	child neglect/ parental drug use	1 male	18 months old	9 yr. old daughter living with biological father (limited access)
2 (Dana)	1996 (access permitted)	Child behavioural problems	1 female	15 years old	4 boys ages 4, 5, 13 and 17 left in mother's custody
3 (Karen)	2001 (no access)	Parenting problems/ drug abuse	1 female	2 months old	10 mth old son 7 yr. old son in foster care and gradually returning to his mother's care. 7 yrs prior, she had 3 other children placed with relatives as a result of CAS intervention
4 (Barb)	2001(no access) 1999 (no access)	Parenting problems/ drug abuse	1 female 1 male	birth birth	6 yr. old daughter lives with paternal father (she has access at father's discretion)

Living on the Margins of Society

All of the mothers were poor, lived in lower income housing and complained of limited access to emotional and practical support. All of these mothers were dependent on welfare payments to assist them in providing for the basic necessities, and the funds provided were inadequate. Secure and suitable housing was mentioned by the mothers as being an important requirement of the child welfare agency as a step to demonstrating positive change, yet in their opinions they did not feel that the workers understood how difficult it was to afford suitable housing on welfare:

> What I tried to get through to the CAS is that I was living on general welfare. It took me this long to actually get a cheap enough place to live. The entitlement for shelter is $325.00. Some of them rooms are unbelievable. For the last two years, I was staying at a friends, then shelters. (*Barb*)

Nor did they feel that the child welfare workers understood how hard it was to accommodate their demands to move from an area deemed by social workers as less than ideal to a more appropriate location. One mother said the CAS suggested she move to a location near Better Beginnings (Family Resource Centre) so that she could utilize their services. At that point she had already secured a place and she said,

> I told them where I was moving to and I was happy about the move. They seemed happy about the move, and once I got moved in, I was a hundred feet radius away from the Better Beginnings Agency. When you are on a fixed income, you just can't up and write the cheque to move to a place that accommodates *their* needs. And if they want you to be there, than maybe they should help you more to get there, not saying this is fine and then... (*Jane*)

Child welfare requirements or "conditions" expected of parents as a way to improve their life situations are often seen by the parents as unrealistic. Many felt that the society expected too much from them. One mother stated:

> ...some of the things they did ask was beyond anything I could do. I would have an appointment here at 3:00 o'clock, and at 3:30, I would have an appointment across town. I didn't have a car, didn't have money, had no way to make it... and people that you know, the people that I know, nobody has a car. So it was really hard to get to anything. ...That made me "unreliable." (*Jane*)

Beyond having very limited resources, these women experienced an extreme lack of support; not only did they express difficulty in accessing community-based support groups, but they also noted a lack of family support to help them through the difficult times. Three of the four mothers described having little or no assistance from their immediate family. One of the mothers even blamed her own mother for the ongoing problems resulting in further child welfare intervention. She describes moving in with her mother for support because she had the four kids and she was on her own, but this only worsened matters:

> ... it was later I found out that my mother was in on tearing the kids apart from each other... [Bobby, my son] left home.. he just couldn't handle it. And then she wanted me to give her my kids because she couldn't have anymore kids, and my sister wanted me to have kids for her, and I'm like "NO, I don't have kids to give them away." (*Dana*)

A lack of familial support is not uncommon with this population. Jenkins and Norman (1975) found that one third of the parents in their study reported that others had made things worse, with relatives often being condemned. The stereotype [then,] of the extended family as a ready resource is not applicable for

most of these families (Jenkins & Norman, 1975, p.93). When asked what kind of relationship this mother has now with her own mother and siblings, she states that "it's just me and my kids, that's it". (*Dana*)

The Adversarial Relationship between CAS Workers and Mothers

These birth mothers describe significant betrayal not only by their extended family members, but also by child welfare workers. Too often, the words "*lied, threatened, turned upon*" were the descriptors used to portray the child welfare system. One mother who felt she had, at one time, established a good relationship with her worker said in retrospect,

> I trusted when I shouldn't, or I just told too much. I don't know what I did wrong, but I felt comfortable with the worker being there and it seemed like I shouldn't have felt that comfortable... I let my guard down, and that was stupid. There is only so far I think you should go and you shouldn't get too connected, because then it can cause a lot of problems, and it did. (*Jane*)

Resonating throughout these women's stories were feelings of powerlessness as a result of the adversarial nature of the child welfare process. The mothers in this study discussed at length how they tried to make sense of or retain control over what was happening to them and the lives of their children. Much of the parents' thinking was dominated, and in some instances, consumed by their preoccupation with and struggle to understand the child welfare system's power. Even a year after one mother had lost her very young daughter, she still questioned why the child protection agency took her child away; failing to understand what more she could have done:

> They told me that they had to see a change, well there was lots of changes. I ended up getting married, things were going great for Bruce and I - we had our unsupervised visits, I was doing

> everything CAS wanted me to. I went to groups down at Streethealth, so I was pretty much doing everything I was supposed to, but it still wasn't good enough. You know what I mean? To me the system sucks. And the worst part is they took Sarah in October and I had David in April - that's like what, six months and I was able to keep him? And my other son, my twelve year old was coming home. So they adopt my daughter out and six months later its okay for me to keep this one. I had a letter before I even went into the hospital from CAS letting the hospital staff know that they don't need to call CAS when the baby is born because there are no issues. Like, to me there is no sense in that. What difference does five months make? Because Bruce and I hadn't been married long enough and we didn't have enough time being married together? So, why didn't they extend the adoption to see how things worked out with Barry and I and the baby and the other kids? Instead they went out and adopted her out. (*Karen*)

Many child protection workers attempt to offer support to birthparents who are opposed to the actions of the child welfare system. This is extremely problematic, however, because of the conflictual relationship and the way the child welfare system separates the child's best interests from the needs of parents. Not surprisingly, the mothers interviewed spoke quite negatively about their relationship with their workers and the investigatory process in general. A great deal of responses reflected significant anger and resentment. One of the mothers who most recently lost her infant daughter said:

> As far as I'm concerned they don't provide you with anything unless you already know what you want and you ask them... They don't give you anything. They will tell you that you need parenting, you need this, you need that. They don't tell you where to hook up to any of it. They want you to get all this stuff, but they sure don't go out of their way to help you out. I'm not a good person to talk to over this... when it comes to him (CAS worker), I know I have to grin and bear it. That is the way it is. His time will come as far as I'm concerned. I have a lot of hatred for him and it will come public when I get my kids back and where they're back where he can't touch them. (*Karen*)

Another mother who had her parental right terminated over seven years ago echoed similar sentiments:

> As far as I'm concerned the CAS lied to me, lied to my kids. They never followed through with nothin. They tried to tear my family apart, rather than keep them together. I still can't stand the CAS. I can't comprehend why they would do this to people. They say they are there to help. Why don't they help instead of taking kids out of the home? ...They're supposed to be trying to stop the abuse, and yet where are they stopping it? You know, in some cases I feel like they are causing it. (*Barb*)

One might think that with time, the bitterness felt by these individuals would pass. However, as mentioned earlier in the finding of their follow-up study on filial deprivation, Jenkins and Norman (1973) found that parents' feeling of guilt, anger, shame, and emptiness stayed the same even after five years had passed. Anger can be interpreted in these situations as underlying grief experienced by these birth mothers. Bowlby (1980) refers to the pain of grieving in terms of reproach and anger where the pain associated with grieving is perceived to be an unjust punishment, the anger and blame are directed towards anyone who may have caused the separation or loss. One mother (Karen) in particular feels she was so unjustly treated that she plans to take her story public when she feels her family and situation are safe from further child welfare intervention.

The feeling of anger and resentment resulting from this adversarial process led most of these mothers to feel as if they were going crazy:

> It got to the point where I knew I couldn't make any of their [CAS] demands and I was just getting crazy, and when they would see me getting stressed out, they would say, "How do we know that you aren't going to get all stressed out when your child is home, or how do we know you are not going to lose it with your child home? If you are doing it now, you will do it then...." (*Jane*)

The mother who felt pressured into giving up her parental rights of her fifteen year old said,

> If they wanted to give me help with anger management for her, counselling for the whole family, I wouldn't care, I would have done it. But this walking in my house, and threatening and the ultimatums, you know, it's like aahhh, it sends you into a friggin' state... (*Dana*)

This woman eventually felt she needed to seek out a therapist as a result of CAS intervention:

> I was going through psychiatry because I just couldn't cope with all the emotions and that; I was so stressed out and on the verge of a breakdown of my own... I was talking to my doctor or anyone that would listen. I was getting to the point where my doctor even said, if I wasn't careful, it will be me they will be admitting to the hospital.

The birthmothers spoke about being increasingly suspicious, to the point of becoming paranoid about everyone and everything. As *Jane* put it: "it turns you into a paranoid nut, I turned into a paranoid person for a while. I thought everybody was the CAS". Another birth mother confirmed her paranoia when she made this claim;

> The fact is, the CAS, they watch you like a hawk - they don't just have CAS workers watching, they have others that aren't from CAS because I know, they drive around and watch people that have had their children taken away, I know.... (*Barb*)

Not only did the mothers experience moments of paranoia; it was suggested by Dana that her other children were also very frightened and paranoid that they too may be taken away like their sister was.

The Adversarial Court Process

Charlton et al. argues that the "adversarial processes exacerbate the original trauma and consequently birthparents are from the outset ill equipped to participate in such a process."(Charlton et al, 1998, p.12) When one mother felt that the expectations required of her were too much, she was deemed unreliable by the CAS in it submission to the court. As she stated,

> "when you go to court, 'unreliable' doesn't stand very good with anybody and so I didn't stand a chance there... So it was just me against the CAS, and that's a fight I lost before I started". (*Jane*)

Court is considered to be a traumatic experience, which the parents interviewed, described as resulting in feelings of humiliation and a further sense of betrayal. The mother who commented about letting her guard down with the worker concluded her statement by saying:

> I started to confide in him about certain things and then when it reached the courtroom - Boom, the friend (social worker) I thought I had was my worst enemy. And it shouldn't be that way, it should be the worker and family working together, as a team to try to bring you together, not use everything you have confided in as a weapon against you. (*Jane*)

Further humiliation was caused when the child welfare agency made a public portrayal of *Jane*'s own childhood experience in the care of the Children's Aid society.

> They made sure that they brought up everything I did and did not do since I was sixteen months old myself...They even gave me the same court clinic assessor who was my child psychologist when I was a kid. He didn't even really listen to me when he came to my home because he said that I was the same way as I was when I was twelve years old. They made me sound like a mother who was a swinger and they lied... Once it reached the courtroom, it was all about what they did to help me, and how I didn't do anything with what was offered to me. Well, without explaining that there was no

> way I could be on the North end and the East end at the same time. It would just be "mom didn't do this and mom didn't make that, and not ever stating why. (*Jane*)

Rather than being focused on the welfare of her child, this court experience was considered to be unfair and primarily concerned with a defamation of her character.

These birthparents in this study felt unable to prevent what was happening in court and despaired, sensing that everything had already been decided. *Karen* who resented the fact that her daughter was adopted out after she was able to have unsupervised access said, "as far as I'm concerned the decision was already made... her adoption was all a set-up through the CAS". *Jane* made similar comments when she said, "It's like they planned these things. We are going to get this child, and they go after you."

The devastating impact of the courtroom is intensified by the isolation and lack of support felt by these parents. Ryburn (1994) states that birthparents have little understanding of the legal process and their choice of solicitor is often ill informed. Most often parents do not have a choice of lawyer because they are at the mercy of Legal Aid and whoever is available to represent them. Parents perceive the outcome of the Court as a foregone conclusion over which the lawyer assigned to them has little influence. These feelings are reflected in the following comments from two of the mothers concerning their experience with the lawyers representing their cases:

> I had a lawyer, but in my opinion he pretty much... I would never use him again. Like he said, he came out with, "she did too little, too late", like hello, you're my lawyer. You don't say that, the CAS can say that, but you don't say that. (*Karen*)

> My lawyer should have stayed home. At first I thought he was a great lawyer, but I found once he reached the courtroom, when he should have stood up and said things, he didn't do anything. He danced around with his cape I found more than he did anything. I felt like I was turned upon by the time I got into the courtroom with him. I think I would have been better off standing up for myself ... Maybe I should have talked to him more, but he was telling me to do what the CAS was asking. (*Jane*)

The overwhelming power and authority that the child welfare agency exerts is confirmed by the action of solicitors as well as community professionals who tended to persuade the birthmothers to "give in" and do what the child welfare agency required of them regardless of how the mothers felt about the conditions. *Dana* stated she was given an ultimatum of signing over custody of her daughter or the child welfare agency would take her two younger boys. The advice she was given by her psychiatrist regarding the situation was, "the only way you're gonna clear this is you are going to have to make a choice". As a result, this mother felt she had to consent to Crown Wardship of her fifteen year-old daughter because she knew that her daughter could be out of the agency's care in one year, whereas, her boys were only four and five years old, and she did not want to risk losing them permanently. Another birthmother reflecting on her court experience stated,

> when I went to court in October... I had to... the judge had me go out and talk to the CAS worker and make an agreement on [Matty] cause if I lost I would lose [Matty] and [Sara], they'd both be adopted. So, me not knowing what was going on, I went and signed that [Matty]- they said that [Matty] would be eventually returned home. So I signed that and went into trial strictly for [Sara] and lost. (*Karen*)

All mothers interviewed displayed strong reaction to the issue of solicitors and social workers attempting to have parents sign consent to have their children

permanently removed prior to trial. The following statements bear witness to the emotional difficulties these mothers faced leading up to the trial:

> It was a no win before it started, and he told me. 'I wouldn't even bother going to court, you are not going to win. You should just sign the paper.' They called me just before the trial to come down and they had all these papers sitting there... Of course I told him what I thought of his papers... and went to the trial anyway, which I did lose, but I mean to ask a parent to sign these papers… they shouldn't be doing that. (*Jane*)

> The CAS worker said to me that I was not being consistent with visits and that [Sandy] is used to this foster home, and you might as well not get her back because you basically have a bad reputation within the courts because you haven't shown up for visits". (*Barb*)

> "why are you even doing this, why don't you just sign these papers, because you are going to lose anyway, and why put yourself through a whole bunch of stress. But I just wouldn't hand my son over, and sign him away without a fight. (*Karen*)

It is not surprising that birthparents find it hard to come to terms with giving up a child in a "no win" situation. One of the mothers looking back at her situation said,

> I had no family here, and the so-called friends or people I associated with, most have their kids in the care. But [there was] nothing... now that I look back, I could have done all those things and it would not have mattered. I mean having my child in the adoptive home already, him calling me [by my name] instead of mommy should have told me right there. That's not right. He should have never ever called me [by my name] (*Jane*)

Feelings of having been excluded from plans for their children were common and reflect the adversarial nature of the child custody process. In these cases, many of the children were already placed or settled with prospective adopters without the birthmothers' knowledge and prior to any court ruling. Sadly, according to the mothers, this often precipitated decisions by the court to endorse the plans that

had already been made by the CAS and acted upon in the "best interests of the child." Consent is usually sought at a late stage when adoption is almost a "fait accompli", the battle to secure the child's future by adoption has been essentially won, but for the birth parent the issue of having to fight and lose remains.

Saying Goodbye

When the birthmothers were asked to describe how they felt about being separated from their children, they tended to recall very similar feelings, although the intensity of emotional affect varied. The three mothers who had been separated from their children for a longer period tended to describe their thoughts and feelings about their loss in matter of fact terms and with less emotion, whereas, *Karen* who had more recently lost custody of her daughter seemed to experience much more emotions and was reticent to verbally expressing her feelings. For example, when asked about her feelings she said, "Since the adoption, I pretty much try not to think about it". She said this with tears streaming down her face, and stated, "I deal with it [separation] just fine as long as I don't think about it. I pretty much put it out of my mind". A similar response was provided by *Barb* who described feeling hurt and depressed by the loss of her children, yet she went on to say,

> I don't let it really bother me too much because I don't want to make myself upset too much wondering how they are doing. Are they okay, are they getting hurt? I don't let that linger on in my mind you see, with myself, I don't want to, you know, get myself nerved up and end up in the hospital with a nervous breakdown, you know, because I figure I want to live my life. I have to live my life day by day.

As hard as *Barb* and some of the others tried to not think about their loss, they all

acknowledged that there are times when little things set them off. *Jane,* one of the mothers who no longer has any children in her care stated that she still finds it hard to be around little kids. She went on to say that the separation "changes your whole way of thinking, it makes you like a stone inside after. And that is what I feel like now, a stone." Although this woman used incredibly powerful words to describe her feelings, the researcher noted that she did not show a great deal of emotion. She herself even commented that she is "not as an emotional person anymore," a condition she attributed to child welfare intervention: "I wasn't allowed to be upset, I couldn't show anger, tears, I wasn't allowed to get mad because I might be this way with my child."

Even during her final visit with her son she was advised by the agency to keep herself together for the child's sake. This mother recalls her goodbye visit as being the most horrendous, abusive action by the child welfare system that could possibly take place, for she states;

> I think it's got to be the worst thing they could do to any parent I've ever seen and it's called a goodbye visit. that has to be the worst thing I have ever heard of. You can come and spend an hour with your child and say goodbye. How the heck do you tell a child "goodbye, see you in later, maybe in twenty years." It's a funeral. That to me is just torture, I think they need to do it another way. That visit was just not a good one for me, and then you're not supposed to be emotional, because you can't work up the child. So you're supposed to sit there pretending you are happy at a visit when you know it's the last visit you get. That is cruel. That's abuse right there. (*Jane*)

The final separation was described by two of the parents as not only "a funeral, [but] a live funeral". *Jane* went on to say that "it's really hard, and I have dealt with it, but I'm sure there are people out there that really can't deal with it...."

Karen stated that the loss of her daughter is worse than a death because, "death you can deal with". Speaking from his own experience on losing a child to death, the new partner of this birthmother spoke out during our interview saying,

> when my son passed away, I felt like everything in my life got ripped right away from me, and then after a while you get used to it, you have to because he's dead, he's not coming back. I mean, her child's alive and she's not allowed to see her... (*Karen's current partner*)

Keeping a connection to their children, whether through visits, pictures or the exchange of letters or gifts was described as extremely important to each of the mothers interviewed. One mother at her child's trial even requested to the court that if the adoption order was granted, she would like "communication by sending letters, pictures, gifts":

> And the courts said okay that is fine. After trial was over, my worker made an appointment with me, and turned around and told me that the court case was closed and that I don't have any communication with [Sandy], So, I asked her "in other words, I can't have any communication with her - no gifts, no letter, nothing for Christmas, birthdays, or Valentines Day. I can't send nothing to her?" She said "yes, that's right." (*Barb*)

Broken Promises, Broken Hearts

Each of the mothers interviewed described being promised that she would receive pictures of her child(ren) after the order for Crown Wardship was made. The following statements convey the range of emotions felt when these promises were not fulfilled:

> And then they also promise you when the child is gone that you will receive pictures and if you want to bring gifts that you can bring them to the CAS office. I have brought a few gifts, and when I pass by to say hi to the secretary, she says, "they are still here, take them home" I have called many times, which I have stopped now because it is only putting myself through it for pictures. I

> haven't received anything and [Johnny] has been gone for over three years. So the promises they say they are going to keep, they don't keep. It's to paint you a pretty picture or try to make it easier for you which it doesn't... That contact is broken the day the judge says no more. (*Jane*)

The mother who more recently lost her child was also told that she would receive pictures and a film of her last visit with her daughter. However, she describes not being contacted yet, and said in tears that she believes it is as much her fault as theirs for she "is in no big rush to get them". Even the goodbye visit with her child was put off to a later date which she said she did because she did not want to be upset and have this affect her visit with her other son in foster care coming home for Halloween. This women is the same mother who also attempts to put the loss of her daughter out of her mind, so that her intense feelings of grief can be concealed. Some of the other mothers were more expressive in describing their feelings of loss, and how the experience has affected their lives as well as the lives of those around them. When asked what their life was like now after the child(ren) have been taken away, the mothers stated:

> Your life's done. That goodbye visit is like saying goodbye to your life. (*Jane*)

> And then they don't really care how you are doing after. It's just alright your gone, next... They don't follow up to see if you are alright, and the picture thing, that is a big thing when your child is gone. You live for that, and it doesn't come. (Jane)

> I had nobody, no support. My psychiatrist I saw a few times, and then when I went back and told him that I gave her up, he said, "you don't need me anymore". (*Dana*)

> And then the parents are supposed to go home and life goes on. It's awful. (*Jane*)

> They should have pushed him (her partner) for anger management

> course or helped both of us, not try to tear us apart, and that is what they have done. I live somewhere else away from my partner and it causes, (after the baby is gone), it still causes problems in your life. You know, 'you should have done this' or 'you should have done that.' He did, she didn't, you know? And it goes on... It's a mess before it starts and it's even worse after.
>
> If you were a drug addict before, you're definitely still going to be one. You know it's really hard, and if you've got other children to deal with, that causes more problems. I didn't have anymore at home that I could feed off of or yell at or even hug more. It was just no more, he's gone". (*Jane*)

For the mothers that still have other children living with them, the separation can cause significant strain amongst all the family members. The mother who gave up her fifteen-year-old daughter said,

> They didn't tell her, they didn't write it down anywhere that I was given an ultimatum, so she thinks I lied, that I gave her away and she still holds this over my head. And she will still if in an argument, or with the boys, it's always, 'well you got rid of me'. Matthew is mad because Amanda is still throwing it in my face, so they get into it... Denny will turn around and say "well, why don't you get rid of me like you did my sister. They use it against you. Just like the CAS gives them something else to throw at the parents to help try and manipulate them... all it did taking her out of the home was to cause stress between me and her even to this day. (*Dana*)

It became clear to me after hearing these birthmothers' stories how genuinely concerned they were for the welfare of their children. They recognized how difficult the separation has been and will continue to be for the children left in their care, as well as for the children who were taken away from the only family they knew. For instance the birthmothers made statements like;

> This is not only affecting me, but it affects my other kids, they know Sara is out there.
>
> My kids, Sara and Matty were together in foster care, and [now that Sara is adopted] they don't even see each other. How could

they (CAS) do that? (*Karen*)

..That may have been the best interest for Sara in their minds was to be adopted out. But to cut all ties with her siblings?

... I wouldn't have been upset or as upset if I could have at least had some contact. Like, for sixteen years I'm going to be wondering where she is, how she is.... I don't know why they couldn't have adopted her out with me still having visits. What if something ever happens to them (adoptive parents) Where does my kid wind up then - in another foster home?(*Karen*)

... I worry about how he [my son] is affected by this. What is he going to think of me? There's got to be somebody that intervenes there and makes it a little bit easier. (*Jane*)

Discussion & Recommendations

The process of losing children through the child welfare system has ultimately left these birth mothers feeling completely powerless. The nature of social workers' interventions in their families exacerbated these feelings. Every birthmother interviewed spoke of intense anger they felt about the role child welfare services had played in the removal of their children and in the plans to place them for adoption. They talked of social workers betraying their trust, of workers who disregarded their feelings, and of a system that overall abuses its authority. All of these factors contributed to their feelings of frustration, disempowerment and injustice.

What can be done then - from the parents' perspective to improve the practice of child welfare workers and the system in general? The following are suggestions provided by the mothers themselves, which they believe, could have been beneficial and better met the needs of their respective families.

> I think that they need to make parents aware of what services there are. If they want parents to get help for whatever - drugs, parenting... there are no parenting courses whatsoever other than at the high school, or the one way out on Woodbine - an hour and thirty minute bus ride. They have nothing for parenting. They suggest certain groups whether it be for anger management or abuse counselling, but they don't realize that it's hard enough for someone to go into one of those groups. It's hard for someone to open up in a group, you know? They don't want to help. They don't. ...They took my kids like six years ago, and it was in 2000 that I found out where resources were and done what I was supposed to do kind of thing, enough that I got my kids back, and I'm slowly getting my kids back, but that doesn't help - I'll never get [Sara] back. (*Karen*)

> That parenting group is a big thing when you go to court, and if you don't attend that parenting group they [the CAS] think that you just aren't focused and into it. And if you're not into that, "what makes us think that you are into your child?" There were other programs where you needed to have your child with you, and it's hard for the parent too because you go there and sit there and see the other parents with their children, and it's really hard to try to concentrate on something when your child isn't there. It's painful, I found it a really painful thing. I was just not into it.(*Jane*)

> Well I think they should have a parenting course, but I think the CAS should be a little more lenient and like they do at 'Better Beginnings' where they bring the child and the parent would have a visit,... and maybe try to have a parenting group itself for parents with children in care, so they can all work together, and do things together. I think they should focus more on something like that than try to get you to do all these things you can't without a child. How are you supposed to bond together and work things out together if you are here and the child is there? (*Jane*)

> I think the way they, they have no compassion for the parents - even though they are looking out for the best interests of the kids which is good, depending... sure at the time, it was the best interest that they took my kids, but you know, I made the changes, and in the long run it didn't matter.(*Karen*)

> They don't spend enough time and money in the right spots; keeping the families together. (*Jane*)

The preceding statements not only provide insight into the practical services that

the mothers believe are necessary, but they also reflect the social stigma attached to being mothers who have lost their children and how more attention and money is required to help keep the families together, not tear them apart. These birth mothers have spoken with intensity of the loss they are left to carry on their own, and the overall degradation felt as a result of the adversarial nature of the child welfare intervention.

Whose best interests are being served?

The documentation of birthmothers' views presented here leads to the question: Who is actually looking out for the best interests of the children? For a system whose paramount mandate is to ensure the welfare of children, permanently severing the connections between these children and their blood relations seems cruel and unnatural. For example, how will young Matty come to view his infant sister whom he knew and loved, a sister he grew up with in foster care for her first two years of life? He will have to attempt to make sense of "why is his sister Sara gone, and why is he allowed to be back with his mother, but Sara is not?

And then what will Sara think of this? Perhaps the thinking of the child welfare system is that once she is adopted into a good home and the bonding occurs with another caregiver, she will not question her past for she was too young and would not likely remember her family? Research however, suggests that children who have been adopted through contested or uncontested procedures often have questions about where they came from, often want a better understanding as to why they were relinquished. Some children do understand

what is happening to them. The sense of loss is certainly made explicit from the few statements by the foster children in the documentary film developed by Trout, (1997):

> ... when in the process of being moved all over the place, you lost some of your brothers and sisters and a particular pair of shoes that felt just right ... Kids like me see don't have families of our own because there's something wrong about us (I guess) or because there aren't enough to go around. Or something...
>
> So I want to talk to you "big people" about these things, even though I am not sure you are real interested. Are you the same Big People who keep doing these things to me? ... And as little parts of my spirit keep dying, will it surprise you that I'm not exactly going to be overjoyed when you say you have permanent parents for me?...
>
> I was there watching, I was having deep feelings about what was happening to me and I needed someone to act as if it mattered, hugely... I will never stop yearning for my birth family even though, as in other things, I will pretend otherwise, Help me find some way to keep a connection with them, even if I never see them again. Someday see, I will be "big people".

Adoptions handled poorly - with little insight into the importance of biological ties are a terrible insult to children who must leave their birth families. What these children hear is that who they are is not important. Their heritage, their identity, their history, their life's experiences up to that point - none of those things matter. Most children have grandparents, aunts, uncles, cousins and often siblings. Closed adoption as is the practice in most Canadian Child welfare agencies denies that those relationships exist. Murray Ryburn, a respected adoption researcher strongly argues that continued contact is in the interest of many children, post adoption. Adoption is premised upon major life losses for all parties of the adoption triangle and in particular for birth parents and their children. The mothers in this study

implied that it would have been helpful to them if the agency could have explored and negotiated open adoption arrangements:

> ... I wouldn't have been upset or as upset if I could have at least had some contact. Like, for sixteen years I'm going to be wondering where she is, how she is.... I don't know why they couldn't have adopted her out with me still having visits. (*Karen*)

This would require a very different approach to adoption, an approach that recognizes the necessity for permanent substitute care of children, but also accepts the importance of organizing, supporting and maintaining openness and contact with biological families within permanency. Unfortunately, the current adoption policies involving most Canadian child welfare agencies have not given this perspective serious regard. In fact, Ryburn's research findings (1994) regarding the importance of openness in adoptions made no impact on the thinking of judges. His only success was reported to be on a rare occasion when he persuaded the listening prospective adopters to change their views about this. The decisions of adopters, seen as 'good' parents, about children they wish to parent are always taken as unchallengeable as against what natural, "bad" parents might wish for their own children.

There appears to be a significant gap in child welfare - a gap created by society's failure to really understand the experiences of parents caught within a system they experience as oppressive and unfair. To fill this gap, researcher Laurie MacKinnon (1998) emphasizes that social workers and society at large must come to terms with how issues of class and gender permeate child welfare with respect to most of the parents who are clients of the child welfare system (MacKinnon, 1998). It is important that relatively privileged child protection

workers acknowledge and control the professional and personal biases that lead them to undervalue or disregard the reaction of parents to investigation or the use or abuse of authority during this process. As Pelton argues,

> No one advocates for the allegedly abusive or neglectful parent. No one investigates and collects evidence on her behalf, presents her side of the story, presents results of psychological tests commissioned by her rather than the government, nor bears witness on her behalf. Pathologized by psychiatrists and victimized through her interaction with the agency, she stands isolated and alone. As cruel as her actions towards her children might appear, she deserves an advocate. Her hostility, which has often been observed within the context of her interaction with the agency, may stem at least in part from her utter powerlessness within the situation, having no advocate. (Pelton, 1989, p.123)

As in all types of loss, for healing to occur it is encouraged that people communicate their feelings to someone the mourner trusts, "...sharing the grief with a supportive understanding person helps the [parent] feel less isolated and deserted (NACAC, 1989). Williscroft (in Payne & Littlechild, 2000) argues that local authorities should have a statutory duty to provide advice and counselling by a social worker who is not involved in the birth plan if the birth parent so wishes. There are potential pitfalls however, for example, it would be a hard task to "counsel' someone whose child your own department has just taken away. In any case, social workers should be able to find and provide private counselling to parents in this situation. It is interesting to note that now social workers have clear duties to provide counselling when mothers at birth wish to give up their infants, but not to parents whose children are taken forcibly through the court. (Payne & Littlechild, 2000). This plea for support was reiterated by the birth mothers throughout the interviews. As *Jane* stated, "there's got to be somebody

that intervenes there, and makes it a little bit easier." Not only did this mother feel the need for a supportive person to talk to, but also someone who would have followed-up after the order for adoption had been made. In one mother's words, "...and then they don't really care how you are doing after. It's just alright your gone, next... They don't follow up to see if you are alright." And even an outside support - that of a psychiatrist for another mother said that since she made the decision to hand over custody of her daughter, the psychiatrist involved with her for a significant amount of time is reported as saying, "you don't need me anymore". They spoke of promised pictures, never received. This represented another experience of loss once the children are gone. One mother commented, "You live for that, and it doesn't come."

Chapter V
Enfranchising the Disenfranchised

Innovative techniques, based on a clearer understanding of the magnitude of losing a child, its difficult resolution, and its possible long range consequences need to be developed. Since grief over a surrendered child appears to remain undiminished and ongoing, present knowledge of the dynamics of mourning may only partially apply to this situation (Deykin et al.1984).

It is clear that parents experiencing the contested, forcible removal of their children will have tremendous difficulty achieving any or all of the four tasks described by Warden (1982) for resolving grief. Worden claims that parents must first accept the reality of the loss. In many cases, where a child was to be eventually adopted, deliberate efforts are made to prevent bonding, and in cases where attachment has been made, it is reported that the loss that is experienced is the loss of an unknown and undefined future relationship. Therefore there is no finality to the parents' loss. Secondly, mourners are to experience the pain of grief. Yet for these parents there is not usually an appropriate opportunity to express this grief safely. This was certainly clearly described by one mother who said she couldn't express how she truly felt about her son being with the adoptive parents and how difficult it was to hear her son call the adoptive parent

"mommy". Worden found that when the pain of grief is avoided or suppressed then depression often follows. Or it could be that the apparent absence of grief could actually be a sign of acute grief, which has been repressed or delayed. Adjusting to the environment from which the lost person is missing is the third task. For these families, the environment has changed irrevocably. As one mother put it plainly, the separation "changes your whole way of thinking, it makes you like a stone inside after." Nothing is the same. Worden's fourth task is to withdraw emotional energy from the relationship and reinvest it in another relationship. For many, the relationship is not believed to be over because the child still exists.

Similarly, the adoption literature suggests that relinquishing parents need to acknowledge and validate the loss in order to address their grief. It is believed that reuniting with the child is the best way to start this process (Robinson, 2001). Unfortunately, reunion for the parents who have lost permanent custody and have no access must wait until the child, who has to be at least eighteen years of age makes the effort to locate his or her birth family. In working with foster families who have to deal with separation, they are encouraged to do the grief work necessary to separate themselves from the loss and to reinvest their energies and feelings elsewhere. The thousands of memories associated with the lost person must be experienced, lived through and transcended. Only after absorption of the pain can the parent begin to let go and reinvest in the present and future (Edelstein, 1981). How can this be applied to the birth parents? As this study documents, the pain and hurt suffered by the parents are much deeper then in

losses from death suggesting therefore, in-depth grief work is most often necessary. It is further suggested that birth parents can benefit from re-experiencing the memories of their child. That is why it is extremely important for parents to receive a "life-book" similar to the one that is made up for the children upon entering their adopted home. These books typically resemble a photo album, with pictures, mementos, and text all serving to document the child's history. Instead, a birth parents' book would entail pictures of their child(ren) in their different foster homes, pictures and writings of visits with their birth family. The parents themselves may feel the need to make up a book of their own, or one that they want to give to the child. This will give them some sense of closure, or at least a ritual in honour of their loss. An alternative to the traditional life-book is what authors Clegg and Toll (1999) termed a "living life-book" - this is a videotape which allows the biological parent to personally communicate his or her perceptions of the child's family of origin, including the positive anecdotes about the family that would otherwise be lost in the adoption process. Family rituals and traditions can also be conveyed, in the hope of preserving the family's unique character. These tools provide a wealth of information for adopted children, which could not easily be recorded in life-story books. Allowing the child to actually see and hear the biological parents facilitates the communication of nonverbal characteristics as well facial similarities, gestures, speech patterns, and other mannerisms. The child is always the focus of a life-book, but it also has advantages for the adoptive family. The videotape may be the first opportunity for the adoptive parent to witness the biological parent performing a positive act for

the child. A living life-book allows both adoptive parent and adoptee to view the same person, and form a real, rather than fantasy, depiction of that person. Birthparents could also find the process therapeutic and empowering as they could talk to their children of their feelings about the adoption and their perception of the events leading up to it. Making a video gave siblings who had remained within their family a chance to face their loss and feelings about relationships that had been disrupted by adoption. In the project conducted by Charlton et al. they found that parents who took part in producing a video for their children spoke frankly about the mistakes they felt they had made. They often tell their children what should have been different, and begin working through years of guilt. Charlton et al. also found that the parents in these recordings would speak of their grief and tell their children about the impact adoption has had on their lives, the guilt they experience being able to care for subsequent children, and ultimately how much they are still thought of and loved. This work allows parents to believe that they still have a role to play in their children's lives.

Conclusion

Social work has numerous agendas, the most powerful being that of "child protection", where there are complex multi-agency mandates and procedures. Social workers are responsible for assessing the needs of the child and for accessing resources to improve the functioning of the family. When a decision is made to permanently remove a child, social workers gather evidence to prove to the court why that child should not return home. This method of assessing risk is

viewed by the authors, Charlton et al. (1998) as,

> serving to alienate parents and families from their support systems... This is a dehumanizing approach which discourages respect for the individual, discounts the psychological effects of loss and trauma, promotes inequality and disadvantage and results in humiliation and stigmatization (p.29).

There is certainly difficulty for the worker in the responsibility of protecting children in this system. How do workers straddle two different philosophies - one intent on working in partnership with clients, the other dedicated to investigating and charging them? It is not surprising that even the most competent social workers find it difficult to work in partnership and to be supportive of birth parents, when such conflicting demands are made of them. An important implication of this study's findings is that an approach to parents which focuses only on children's needs and ignores parental needs may not be effective. An empowerment orientation (Hegar & Hunzekar, 1988) which recognizes that children can be best helped by supporting their parents should be stressed. With this thinking, workers are considered to be the "crucial instrumentality through which parents can achieve coalition building, collective organization and advocate as consumers for better service delivery" (Fernandez, 1998, p.265). The lack of real help and support for mothers involved with child welfare is confirmed in research by Callahan and Lumb (1995). Their innovative research highlights the crucial role child protection workers play in their own and their clients' empowerment. Workers are said to have regained their sense of self-respect and competence in the process of trying out new approaches to practice that included learning from and valuing the client's knowledge, repositioning themselves as

client advocates, beginning with the clients' definition of the problems and finding effective and realistic goals/solutions based on the clients' particular strengths and resources. Some of the feedback from the workers in this study demonstrates the importance of taking the time to truly listen to these parents. One worker commented by saying:

> The meeting with the single-parent women were powerful. Hearing from them reminded me of the impact a social worker has on the client. It reminded me how cautiously you have to treat clients, rather than just going through the motions... to be sensitive to the client's needs (Callahan & Lumb, 1995, p.806).

Not only did the workers gain an understanding for this population, but through the "Empowering Women" groups, mothers who had their children removed from their care were better able to understand why they had lost their children by recognizing that,

> social life circumstances, violent men, inadequate parenting, and the workings of public authorities had conspired against them and yet [they] had always blamed themselves. Through this multifaceted analysis, members gained respect for themselves as survivors and energy to tackle some of the structural problems that contributed to their private grief (Callahan & Lumb, 1995, p.808).

As this study and others suggest, one may question how client-focused the current child protection system really is, and more importantly, how dedicated the profession is to upholding its social work ethics. Despite changes to child welfare policy and practice, few agencies take an interest into the experiences of those birthparents who form the main recipients of social services. They are for the most part committed to the protection of their own children, but are struggling in the face of poverty, poor housing and limited access to community resources. This is not to deny the necessity for child protection. Children have the least power in

society and must be protected from harm whether it occurs within their own families or within society. However, child protection services should take account of the family situation in the wider social context and further seek to change it. Family support services and community support systems need to be developed in neighbourhoods to safeguard children as well as meet the needs of families.

Parents who have had their children permanently removed from their care as a result of abuse or neglect continue to face serious difficulties, especially in their ability to grieve. Society does not acknowledge these debilitating feelings, and certainly does not see the need to treat, or provide support services to better meet the needs of these parents. This inability to outwardly express their sorrow leaves these parents disenfranchised. When grief is not recognized it cannot be resolved. Due to the myriad challenges faced by this group of people, the effects of their losses are amplified such that they become too complex to treat using traditional grief work strategies. While treatment strategies for these individuals should be devised, there are ways that social workers can immediately help to relieve some of the emotional hurt. Firstly, child welfare workers must understand the impact loss has on the parents with whom they work. They need to empathize with the parents and acknowledge their pain. They need to allow them to express their deepest emotions (in a safe environment), providing them counselling if they so choose. Parents should be encouraged to find a ritual that will help them with their loss and follow-up services upon termination of custody should be made available. Regardless of what these parents have done, they are human beings that deserve to be respected. Too many suffer, and many suffer silently.

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Appendix B

Preliminary Consent Form

Sherrie McKegney is a student working on completion of her Master's in Social Work at McGill University. As a previous Family Service worker for the Children's Aid Society, she has recognized through her experience that many of the families who are facing the possibility of having their child(ren) permanently removed are not necessarily provided adequate supports and services necessary to improve their overall life situation. She has also recognized that in the process of making permanent plans for the child's placement, many of the birthparents' feelings and thoughts about the decisions made by the CAS go unnoticed, or they are ignored. Therefore, providing supports to help these individuals deal with difficulties associated with the loss and separation of the child are not seen as a priority. And once the decision by the court has been made to have the child permanently removed, their is often no follow-up services offered.

What Sherrie would like is to talk to you about your experience as a client of the CAS, and discuss how the loss of your child has affected you. She has appreciated my involvement with the many families who have had to live through the "system", and she has requested my assistance in finding individuals, such as yourself to help her in this research.

The interview will take no longer than one hour, and I can be there with you during the discussion. There will be an audio-tape used for the purposes of transcribing your statements and ensuring that all the information is collected accurately. The tape will not be heard by anyone else and will be erased promptly. Please take note that your name will not be disclosed in this study and identifying details will be omitted or disguised. You can decline from being audio-taped if you choose.

If you are interested in participating in this research or would like to know more about the study, please contact Sherrie McKegney directly at (613) 546- 6258, or send your request for participation to her by mail with the stamped envelope enclosed. Once telephone contact and consent has been provided by you to become a potential participant, Sherrie will arrange an interview time and location best suited to your needs and preference.

There is not likely to be any particular benefit to you, although some people appreciate the chance to tell their story the way they perceive it, or it may be that this contribution will help to improve services to people such as yourself in the future.

Thank-you,

Diane Carter-Robb

Appendix C

Consent Form

Dear Study Participant:

I am conducting research that focuses on the grief of birthparents who have been permanently separated from their children as a result of Child Welfare intervention. The purpose of this study is to collect information that will raise societal awareness of a population whose voices are never heard, whose losses are unrecognized and whose lives have been permanently altered. Hearing your story, the experiences you had and continue to face as a result of losing your child(ren) to the Children's Aid Society will assist in this effort to raise awareness and possibly promote more effective service to families who may be experiencing a similar situation.

Though you are in no way required to take part in this study, your contribution would be most helpful. The information provided will be used for the completion of my Master's thesis in Social Work at McGill University. The supervisor for this research is Dr. Linda Davies who is a professor in the Social Work department at McGill University. She can be reached at (514) 398-7064.

The session will be recorded on an audio-tape for the purpose of transcribing your statements, the tape will not be heard by anyone else and will be erased promptly. Please take note that your name will not be disclosed in this study and identifying details will be omitted or disguised.

Due to the delicate nature of this subject, you may experience some emotional distress. You are always free to refuse to answer any question, or to end the interview when you would like. I will also provide you with a list of community services that assist individuals experiencing difficulties associated with loss and separation. It is important to be aware that your participation in this study will not impact on past, present or future involvement with any community social services. However, some people appreciate the chance to tell their story the way they perceive it, or it may be that this contribution will help to improve services to people such as yourself in the future.

If you agree to participate, please sign at the bottom of this letter.
Sincerely,

Sherrie McKegney, Social Work Student,
McGill University, (613) 546-6258

I have received a copy of this letter and agree to participate in the study under the conditions outlined above. I agree to be audio-taped Yes___ No ___

Signature: _____ Date:_____

Appendix C

Community Services

Kingston Community Counselling Centre - 417 Bagot Street, Kingston. (613) 549 -7850

- Offers individual, partner, parental, youth and family counselling.
A United Way Agency.

Kin Family Centre - 115 Wiley Street, Kingston. (613) 549-5777

- Skilled counselling and psychotherapy for children, teens, adults, couple and families by qualified professionals in a relaxed home-like setting
Issues:

* loss
* change
* separation
* family conflict
* depression
* addictions
* stress
* trauma
* anger management
* abuse

Jan Worsley - 186 Victoria Street, Kingston, (613) 542 - 2496

- Individual, couple and family counselling and psychotherapy:
  * stress, anxiety, depression
  * self-esteem, grief, loss
  * women's issues
  * communication and relationship issues
  * transition & growth

Men's Counselling Services - 131 Johnson Street, Kingston, (613) 544-8335

* separation, divorce
* family crisis
* grief, loss
* stress, tension, depression
* self-esteem
* anger management