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The Shame and Shaming of Parents in the Child Protection Process: Findings from a Case Study of an English Child Protection Service

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Abstract

Given that research identifies parental experiences of shame and humiliation in the child protection process, this paper reports on a qualitative study that investigated how and why parents experienced such emotions within the English system. This is the first study to investigate such experiences by using participant observation, which enabled the collection of data of real-time emotional experiences and practices. These experiences are analysed within the context of wider reforms of the English child protection system and identify not only the structural and systemic reasons that embed parental experiences of shame into the process, but also the societal processes that support practitioners to shame, and even humiliate, parents. These processes are detailed and the shaming of parents illustrated. Rather than such experiences being seen as outcomes of poor practice, social workers can be considered to be doing a good job at the same time as shaming a parent.

Introduction

This paper addresses a paradox that exists in social work with children and families. On the one hand the profession is founded on the values of social justice, human rights, collective responsibility, and respect for diversities. Many consider it not only a moral obligation that children and families are treated without feeling oppressed or discriminated against but also that positive experiences are a necessary component in affecting change within a family (see Thoburn et al., 1995; Lee and Ayon, 2004; de Boer & Coady, 2007). On the other hand, research has identified that many experience child and family social work practice, and in particular child protection, as intimidating, confusing, shaming, and humiliating (Cleaver and Freeman 1995; Dale, 2004; Spratt and Callan, 2004; Dumbrill, 2006; Buckley et al., 2011; Sykes, 2011; Featherstone & Fraser, 2012; Ghaffar et al., 2012; Harris, 2012; Thrana and Fauske, 2014; Gupta, 2015; Gupta and Blumhardt, 2016; Smithson and Gibson, 2017; Gupta et al., 2018). Given that social work emerged as a practice to address social issues related to the lower classes and poverty, such research demonstrates the paradox that social work can contribute to shaming and humiliating those the profession seeks to serve.
There are many who have sought to account, directly or indirectly, for this paradox through macro analyses of the profession and its role as part of the state apparatus (e.g. Specht and Courtney, 1995; Humphries 1997; Scourfield and Welsh, 2003; McLaughlin, 2005; Webb, 2006; Garrett, 2010; Rogowski, 2011; Featherstone et al., 2014; Parton, 2014). Central themes of such analyses have focused on the political of successive UK Governments from the 1980s to a neoliberal economic project. Within this project the role of the state is considered to be one of creating markets, providing greater personal freedom to engage in such markets, and managing risks to the system (Culpitt, 1999; Springer, 2012). In fulfilling such responsibilities, Governments seeking to implement neoliberal ideals have installed a system of interpretation for individual behaviour that conceptualises people primarily in terms of how they can engage in such markets (Springer, 2012). The resulting social policies have, therefore, sought to enforce new moral codes, particularly on those in receipt of welfare benefits, to change how people live their lives (McLaughlin, 2005). Some have argued that the changes to the welfare state has resulted in punishing, or disciplining, the poor for failing to live up to the new politically defined standards (e.g. Wacquant, 2010; Soss et al., 2011). Such policies have influenced social work practice, and Gupta and colleagues’ work in particular (Gupta, 2015; Gupta and Blumhardt, 2016; Gupta et al., 2018), has demonstrated how this can lead to practice evoking shame and humiliation in family members. What is not well understood, however, is what social workers actually do to shame and humiliate family members and the social and emotional processes that contribute to such practice.

This paper fills this empirical and theoretical knowledge gap by reporting on findings from a study into the role of emotions in day-to-day child protection practice. While the emotional experiences of the social workers has been published elsewhere (Gibson, 2016, 2018), the focus of this paper is on the experiences of the parents. The study used a qualitative case study approach and identified and analysed parental experiences of shame and humiliation to understand why and how they came to experience such emotions. It is the first study to use ethnographic methods to study these experiences in practice, providing a unique view on how they are engendered. Indeed, given that child protection work is primarily a practice undertaken face-to-face, Ferguson (2016) argues it is surprising that there has been such little research undertaken into what social workers do in these encounters. Therefore, not only does this analysis contribute to the emerging recognition within the field of social work that shame is a significant experience for both those who use the service and those who work within it (Walker, 2011; Gibson, 2014, 2015; Gupta, 2015; Houston, 2016; Frost, 2016), but it develops our understanding of day-to-day practice.
This paper, firstly, provides an outline of the conceptualisation of shame and humiliation, followed by an overview of the research, before detailing the findings. The findings answer the question of how the parents experienced shame and humiliation by analysing the interactions between professionals and parents to identify the conditions for practice to shame and humiliate parents. Indeed, while some parents felt ashamed of their actions or circumstances, some felt shamed by the child protection process. Such experiences could be exacerbated by individual workers who blamed a parent for any harm to their child, prioritised organisational procedures in their work, and sought to instil feelings of shame in those considered to be ‘shameless’ for actions that were considered ‘shameful’. The aim of presenting this analysis is not to suggest that all policy responses or indeed all social work practices intend to evoke, or even result in, shame and humiliation, but simply to identify them as important analytical components for both policy and practice.

Shame and Humiliation

This paper takes a constructionist perspective of emotions. From this point of view shame and humiliation are considered a process, rather than a ‘thing’ that somehow exists in the mind or body that can be ‘triggered’ by an external stimulus. So while the common themes that run through the research on shame is that it is a highly displeasureable feeling related to a negative evaluation of the self (see Lynd, 1958; Lewis, 1971; Tangney and Dearing, 2002), it is the process through which that negative evaluation is constructed that is important. Without this process, there is no emotion (Gordon, 1981). Indeed, people feel ‘bad’, ‘inadequate’, or a ‘failure’ because certain standards and expectations are created and accepted as admirable and desirable personal and social goals and, having accepted these, do not live up to them. These standards and expectations can relate to any characteristic, behaviour, or attribute and may differ depending on the social group.

Importantly for an analysis of shame in social work, many have identified that it is those with more power and influence that are able to affect, alter, and impose certain values and standards in a social group (Elias, 1978; Goffman, 1963; Sen, 1984; Sayer, 2005; Walker, 2014), which leaves those without the necessary resources being cast as shameful for failing to live up to these standards. Indeed, Elias (1978) and Sayer (2005) argue that the social bases of respect require social and material resources to not only think, act, and feel, but also how to live, in acceptable ways. The lack of such resources simply means they are unable to adhere to the standards of the day and are, therefore, seen as legitimate targets for disrespect and contempt. Consequently, shame becomes endemic to the experience of class and people can start to feel personally inadequate and lacking in worth. Sen (1984) and Walker (2014) have developed this argument further in terms of poverty to claim the feeling of a negative judgement from others for being unable to meet societal expectations.
becomes internalised, leaving the poor to feel ashamed of being unable to fulfil their personal aspirations. Interactions with state officials, such as for welfare payments and services, can, therefore, heighten such feelings of shame by signifying their personal failure and society’s judgement of them (Walker, 2014).

Humiliation is an emotion which has strong ties to shame, yet most theorists differentiate them, arguing that there is a qualitative difference in how they are experienced (see Klein, 1991; Hartling and Luchetta, 1999). While shame is marked by feeling that there is indeed something wrong with the self, what sets humiliation apart is that this acceptance of being inadequate, or that one has transgressed a moral boundary, is not present (e.g. Jackson, 2000; Elison and Harter, 2007; Combs et al., 2010). Consequently, experiences of humiliation are usually linked to a belief that the treatment by the ‘other’ is unfair or hostile and is typically associated with feeling anger at others and a desire for revenge.

The process of humiliation has had a lot less theoretical and empirical attention than shame (see Collazzoni et al., 2014). Garfinkel’s (1956) classic paper on degradation ceremonies, however, links the process of humiliation to the construction and experience of shame. He argued that all societies have a process that seeks to degrade the status of those who have caused moral indignation within the wider group and identifies certain roles in such ‘degradation ceremonies’. A ‘denouncer’ tells a ‘witness’ of the social group that the actions of the ‘perpetrator’ are immoral and that these actions cannot be explained away by chance or accident and, as such, represents their true nature. Consequently, the perpetrator is seen as someone who stands outside of the community’s norms, values, and laws. The intention of degradation ceremonies is to deprive people of their place in society by degrading their former identities, which makes them more susceptible to external control. By publically humiliating them, and restricting their rights and privileges, a person can move from feeling wronged to accepting that they are wrong. While degradation ceremonies have been used to describe initiation rituals to the military (Delaney, 2008), the disciplining process of the legal system (Torres and Bergner, 2012), were incorporated into Goffman’s (1963) analysis of societal responses to stigmatised attributes and Wacquant’s (2010) analysis of how the poor are punished within neoliberal societies, the role humiliation has played in the child protection process has not been well theorised or researched.

The Study

The aim of the study was to investigate what role pride, shame, guilt, humiliation, and embarrassment play in child protection practice. A case study was chosen to investigate this specific
issue in depth (Thomas, 2011). While the findings cannot be generalised beyond the case study site, much can be learnt about a topic from a single case that can produce knowledge that is applicable to other situations and contexts (Flyvbjerg, 2006). The case was a child protection service within one local authority in England, referred to as ‘the Council’ throughout this paper, which, as discussed below, was considered to practise good child and family social work. The fieldwork was undertaken in 2014 within two child protection teams within the Council, chosen on the basis that they agreed to take part. The two teams were fully staffed and both had experienced team managers who had been the managers of their respective teams for a number of years. Overall, there were 19 social workers and 2 team managers involved in the study.

Constructivist grounded theory methods (Charmaz, 2006) were employed to collect and analyse the data in an iterative process to explore the above research question. I observed those within the teams for one to two days per week over a six month period, which totalled 246.5 hours of observations across the two teams and I wrote contemporaneous fieldnotes as advised by Emerson et al. (2011), which were typed up the same night. The collected data were coded line by line, as advised by Charmaz (2006), in Microsoft Word documents. Codes were then compared to codes, codes to data, and data to data, to ensure consistency in coding on the one hand and suggest avenues for further observation and data collection on the other. The ongoing data collection and analysis then created categories by theming the codes. The categories were then compared to each other and to the constituent codes to ensure consistency in the categorisation, while memos were written throughout the process on my developing ideas about the categories, processes, and experiences of self-conscious emotions. Further data were collected by interviewing 15 social workers and 2 team managers, which lasted between 55 and 100 minutes and were recorded and transcribed verbatim. I also asked for examples of written assessments/reports the social workers had produced and I was provided with 33 documents. These interviews and documents were also coded line by line in a Microsoft Word document and included in the overall dataset by incorporating the resulting codes into the wider categories.

The observations included 41 discrete face-to-face practice situations where a social worker was interacting with a parent and I spoke to the parent on each occasion. These interactions included home visits, office visits, formal meetings, child protection conferences, and Court hearings. Prior to such interactions the social worker would speak to the parent to ask their permission for me to observe. If they agreed, I would speak to them to discuss the research, go through a consent form, and discuss their feelings and perceptions of the situation. These discussions were unstructured and fieldnotes were taken at the time and expanded later when they were written up, as Emerson et al.
(2011) suggests. As parental experiences of shame and humiliation became a significant feature of the ongoing data collection and analysis, more specific research questions were developed relating to these experiences, namely how and why the parents experienced shame and humiliation. Discrete experiences of shame and humiliation, as identified by the language used by the parents, were first coded with terms to identify the nature of the experience and the context for such experiences. Then further experiences that were consistent with these but may not have been labelled as shame and humiliation by the parents were included in this dataset. Data were then sought to understand these experiences and the context in more depth, firstly by observing how the social workers’ practice contributed to such experiences, then discussing why the social workers were doing what they were doing in these situations, and then analysing the components of practice that played a role in such experiences. Through the iterative process of data collection and analysis, a set of categories were created that related to parental experiences of shame and humiliation, what properties these categories had, the conditions under which those categories arose and changed, together with the consequences of these categories (Charmaz, 2006).

All research participants were informed and consented to being a participant in the study. While some parents did not agree for me to observe, most did and were willing to tell me about their experience. Ethical approval was granted through the University ethical review panel. The limitations of this analysis are acknowledged, indeed the resulting data and analysis can only be understood within the context of my interactions and interpretations within the teams, within the Council, at that specific time. What this study does provide, however, is an interpretive analysis of parental experiences of shame and humiliation within the Council, demonstrating how and why such experiences emerged within the child protection process.

**Context of the Case**

As discussed above, the English child protection system has undergone a transformation over the last few decades, being redesigned within the neoliberal economic project (Garrett, 2010). The logic of such a project began to challenge the efficiency of hierarchical bureaucracies, arguing they could be made more efficient and effective by using market principles and creating greater transparency and accountability (Power, 1997; Munro, 2004). Such reforms have provided the foundation for the legislative and policy context that has created statutory social work practice organised around a referral system, an assessment of need, a range of commissioned services, with set timescales and protocols (Munro, 2011; Featherstone et al., 2014). These systems are then inspected by the Office for Standards in Education (Ofsted) and monitored by the Government, with consequences for
failing to adequately comply\(^1\) (Power, 1997; Munro, 2004). The Council’s child protection service was, at the time the data were collected, graded as ‘Good’ by Ofsted, and, as such, represented a form of practice considered to be desirable by the Government.

**Analysis**

Brown (2007) argues that the judgement of one’s parenting evokes shame, particularly for women, like no other issue and the analysis of these data demonstrates how parents can not only feel ashamed of actions, events, and situations that result in child protection involvement but also feel shamed by the process. Such experiences were exacerbated by individual workers blaming parents for the harm their child had come to and if a parent did not seem sufficiently ashamed they could be seen as ‘shameless’ by practitioners, who could be seen to engage in acts of ‘shaming’ as a form of social control. This section outlines these conditions that laid the foundations for shame and humiliation in parents and practice that can be considered shaming.

**Feeling Shame and Being Shamed**

Given how child protection services are constructed within England, with social workers investigating concerns raised through a referral, the very presence of a social worker invariably brought such negative evaluations expressed within the community directly to the parents, as demonstrated in the following home visit:

“[the social worker] read out the referral and the father said none of it was true and that the school had “decided that they are bad people”. The mother said that she feels the school are checking up on her and she looked upset and seemed to be fighting back the tears” (fieldnotes)

The necessity for social workers to investigate such concerns, whether there was any validity to such concerns or not, further heightened parental feelings from this negative judgement, as the following conversation I had with a social worker showed:

“[the social worker] told me that the mother had got upset when she had asked to see the child’s bedroom and look in the cupboards and fridge. She said the mother burst into tears and said “I can’t believe you’re doing this to me”... She told me the mother said it was really embarrassing” (fieldnotes)

While many parents believed they had done nothing wrong, some felt ashamed of their past behaviour, which was usually the focus of any child protection work, as I observed in a child

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\(^1\) Ofsted provide an overall rating for the service, which is either ‘Inadequate’, ‘Requires Improvement’, ‘Good’, or ‘Outstanding’
protection core group meeting, i.e. meetings with the parents and professionals to oversee the plans put in place to keep children safe:

“The professionals discuss the history of neglect of the children when they lived with the mother before she went into prison. The mother says in the meeting she is ashamed of what she was like and how she treated the children and she has learnt now” (fieldnotes)

Some social workers sought to manage these experiences of shame by offering a hand, a soothing word, or simply allowing the parent to tell their story and taking this seriously. Such actions that I observed were always appreciated by the parents and contributed to a positive interaction. Individual workers, however, could not protect or alleviate parents from the experience of shame once in the child protection process. Following discussion of the concerns in the conference, all the professionals were then invited by the chairperson to vote on whether there needed to be a child protection plan, while the parents were not, as demonstrated in the following conference I observed:

“The Chair asks the professionals if they think there needs to be a child protection plan and one by one they all say they do under the category of neglect... The mother asks what neglect means and starts to cry and takes a tissue from the box on the table. This is then explained by the police officer who says, “you are not protecting yourself therefore you are not protecting the children”” (fieldnotes)

The process provided a very public negative evaluation of their parenting. Following the child protection conference a formal report was provided to all who attended, which was used in subsequent core group meetings to define the problem and provide a foundation for the child protection plan. The first core group meeting was chaired by the team manager, who was required by the organisation to say particular things, as I observed:

“The team manager starts the meeting by explaining the purpose of the child protection plan and says that a plan is not put in place lightly as it means people are worried about the safety and welfare of the child. He explains this will mean there will be unannounced visits, that the category for the plan is emotional abuse and that if she doesn’t “follow the plan then we would go to Court to get an Order which would give us the authority to remove your child”. The mother says “what do you mean?”, and starts to cry... The mother stops crying and the team manager says, “we need to spell this out”” (fieldnotes)

Shame may or may not have been the predominant experience for this mother, but this situation illustrated how the child protection process could be seen as ‘shaming’. By questioning one’s parenting ability, scrutinising family life through a social work assessment/investigation, exposing past actions, and creating formal processes to prevent a child being harmed while in the care of their
parent(s), a parent’s identity as a capable parent, and their right to parent their child, was threatened. The standards that a parent was considered to have to live up to were explicitly and formally outlined and the consequences for failing to adhere to such standards ‘spelled out’. While a parent may have felt many emotions while subject to child protection procedures, at its heart the process can be considered to make a parent feel ‘bad’ about their situation. This process could be seen to operate at an institutional level, with parents feeling shame as a result of the policies and procedures rather than as a result of the intentions of any specific social worker. Such experiences, however, could be exacerbated by individual workers through accepting a particular interpretive framework that shaped their practice.

Responsibilising/Blaming Parents

While social work developed to work with the poor and lower classes (see Woodroofe, 1962), many have argued that within Western societies children have come to be seen as more worthy than adults of support and protection (see Warner, 2015). Such developments have moved the focus of practice towards children (see Featherstone et al., 2014; Parton, 2014), which has been argued by some (e.g. Hall et al., 2010) to atomise the family, divorcing the child from their familial relationships. Such a development was seen within the teams in the Council through attitudes that the focus of their work was not on poverty and inequality, as explained to me by a team manager who stated that “social work doesn’t only apply to the poor; it’s a misconception” (fieldnotes), but rather on the child. Indeed, such a focus was not only explicit and deliberate but took conscious effort to achieve, as one social worker explained in her interview:

“I try very hard to focus, as is my job, to focus on the children, and not just on what the parents are telling us. Because I think there is a danger, that working in child practice, that you can get, sort of, veered more towards the parents, than you can sometimes, towards the children. And I think I do subconsciously try to make an effort to not let a parent’s views overtake the views of the children. And I think I’m quite conscious of that”

Such child-focussed practice contributed to a particular conceptualisation of parents and parenting. Of course, parents have responsibilities towards their children, and society expects a parent to care for, and meet the needs of, their child. As many have argued, however, it is easier to meet such needs with material and social resources (e.g. Wilkinson and Pickett; 2009; Featherstone et al., 2014; Morris et al., 2018) placing inequalities and poverty as significant barriers in meeting societal expectations. Indeed, it can be difficult, and at times impossible, to respond to the needs of a child without adequate resources to do so (see Featherstone, 2016; Gupta and Blumhardt, 2016). The
design of child and family social work services in England, however, has been influenced by the politics of responsibility (see Lavin, 2008; Garrett, 2010), which conceives parental responsibility as individual and absolute. Parents are considered responsible not just for the care of their child but for the care of their child irrespective of their social situation, economic circumstance, and family history. This reconceptualising of personal responsibility is referred to as ‘responsibilisation’, as help and support that were once considered as collective responsibilities and addressed through state services are transferred to citizens under the guise of providing greater personal freedom (see Springer, 2012). Lavin (2008), therefore, argues that this equates to ‘responsibility-as-blame’, as individuals can be blamed for failing to live up to politically defined responsibilities in the face of evidence that the structural web of relations that people are a part of influences, shapes, and limits opportunities, abilities, and choices. Given the wider cultural move towards ‘responsibilisation’, combined with the more social work-specific move towards child-focused practice, the dominant view within the teams was that the parents were responsible for the problems the children faced, as demonstrated by one comment to me by a social worker in her interview:

“99.9% of the time we need the parents to change, it’s not children that have got the problem is it? It’s the parents”

This dominant view of parental responsibility devoid of context was parodied by one social worker in her commentary to me about a mother who was experiencing domestic violence, as I recorded in my fieldnotes at the time:

“She said the mother was “failing to protect” her children and then that “we blame the mother, because that’s what we do” recognising that the father was the person posing the risk but they expect the mother to protect the children”

**Valorising Procedures**

Webb (2006) argues that within the neoliberal context social work services have been refashioned towards managing risk, which Munro (2004) states has resulted in social work organisations having to impose and implement new systems and practices that embed administration into practice. Within this context, the Council had a range of procedures that produced the administrative evidence that they were taking action to manage any perceived risk. The social workers had to adhere to these procedures, which affected the way they could practise, as one team manager stated to me, “we get measured on timescales not on not upsetting parents” (fieldnotes). The dominant interpretive framework for practice, however, was that such procedures and
administrative measures helped minimise the harm a child might suffer. They were, therefore, seen not only as necessary but also as beneficial, as another team manager stated in her interview:

“I mean my own personal view on both care and child protection conference is that these are tools that we shouldn’t be afraid to use if we have to... I’ve come across social workers who have said, I don’t want to put these parents through the oppressive thing of a case conference... well I don’t think it is oppressive for parents actually, certainly not oppressive for children, I view these things as positive tools”

Framing practice in such a manner negated any potential harm that such procedures could cause a parent, while casting the worker and team who have used such procedures as doing a morally important, and therefore successful, job, as one social worker demonstrated in her interview:

“at the end of the day if you get what you need, you know, you’re doing a good job, like if you put an ICO [Interim Care Order] in place or a child on a child protection or a child’s had to be removed and placed in foster care, you know at the end of the day the child’s safe and that, that for me, that’s a good job”

**Shaming the Shameless**

Given the social workers’ role was conceptualised as identifying harm to a child, in the context of politically defined parental responsibility, the social workers were constructed as protectors of the children from their parents. This created the conditions for practitioners to perceive ‘us’, the social workers, versus ‘them’, the family members, (see Sumner, 1906) as illustrated by one social worker in her interview:

“I think they [service users] think negatively of us anyway don’t they just because of who we are and what we stand for”

Indeed, by accepting the dominant discourse of individual responsibility, parental actions were seen out of any wider context. Where their actions were conceived as not prioritising the child’s needs, these were framed as incomprehensible and, therefore, different from ‘us’. This was illustrated in a supervision session between a social worker and a team manager, which I recorded in my fieldnotes as follows:

“The team manager remarked, seemingly to herself, as she made notes on the supervision form “it is hard to imagine someone choosing a dangerous man over their children but they do it all the time” and then stated to the social worker, “she is writing her own care plan””
The manager clearly considered the mother to be responsible for the plan the professionals would submit to Court to remove her child and place them in care. In the context of responsibilising/blaming parents, such incomprehensible behaviour could be framed as ‘shameful’, i.e. deserving of shame. Where a parent was not considered to be sufficiently ashamed of their actions they could be framed as ‘shameless’ and certain practice could be seen as an attempt to instil ‘appropriate’ feelings of shame. The document that was produced at the end of an assessment to outline the analysis and professional judgement of the social worker and their team manager demonstrated this process, as one comment by a team manager at the end of a social worker’s assessment report illustrates:

“The social worker asserts that [the mother] loves her children and wants the best for them. I would question whether or not this is true as the parenting portrayed here is not that of a mother who wants the best for her son... [The child] is suffering from episodic punitive parenting and living in an environment that features high criticism and low warmth... [The child] receives inconsistent care and must be in a state of high arousal never knowing whether his mother is going to be kind or cruel... It is apparent that [the children] have developed coping mechanisms to deal with their mother and have learnt not to react to her excessive shouting. [The mother] does not have the insight to see this as resilience – I suspect she will view it as defiance”

This conclusion portrays the mother’s actions as ‘shameful’, the mother as ‘shameless’, and, therefore, the narrative could be seen as ‘shaming’, i.e. seeking to make the mother feel ashamed of her actions. The wider issues that were contributing to the situation, which included the family living in a deprived area and the mother having recently ended a violent relationship, did not temper the conclusion. The mother’s responsibility towards her child not to be cruel was of course central to the aims of the work, but stripped of the social and economic issues the analysis of the problem left a dominant narrative of personal inadequacy. Such a situation left social workers often saying ‘I don’t trust him/her’ when discussing the case. A lack of trust simply led the social worker to believe they had to assert a level of control on the situation to ensure the child was safe. This could be through placing demands or restrictions on the family, or, more often, by using some administrative procedure, as explained by one social worker in the team room when I asked her why she was organising a child protection conference:

“it’s procedure. It’s what we do when we have an incident. It also sends a message”. I ask “what message?” and she says “that it is serious so he won’t do it again or he could lose his children””

Experiencing Shame and Humiliation
Given the structure of the service, the presence of a social worker represented a negative judgement of someone’s parenting. This, in itself, could evoke embarrassment and potentially shame. Where a person had done something that they felt bad about, they may have already felt ashamed. Discussing this with a stranger, who had the power define the situation in official documents and public discussions, could evoke many strong negative feelings. And where the social worker believed their role was to focus on the child, to the exclusion of the wider context and the needs of the parents, within a context of politically defined individual responsibility on the one hand and valorising organisational procedures on the other, the foundations for shame and humiliation were laid. This process can be illustrated in the following example.

This example involved a mother, who lived with her children, and was visually impaired and physically disabled. The case was being assessed by a social worker while support was being provided through coordinated multiagency meetings. The social worker told me she was concerned that the mother was not caring for her children properly and described the mother as “vile”. She said she had spoken to her GP and believed that the mother did not have disabilities. I attended a family support meeting with her, which involved 11 professionals and the mother. I spoke to the mother prior to the meeting, and I recorded what she told me in my fieldnotes as follows:

“The mother was wearing dark glasses and had crutches. She told me that she thought all social workers should be sacked and that it is a horrible experience for parents as they make you feel “stupid” and that you have “no voice” and that she had begun to “doubt myself” as a parent.”

In the meeting the social worker was duty bound to attend to the administrative matters. She, therefore, read out the minutes of the last meeting, in which she divulged that the family were in housing arrears. I recorded the mother’s response as follows:

“The mother told [the social worker] in a stern tone that she shouldn’t have read out how much she owed in arrears to the rest of the people in the room because it is embarrassing”

The mother then changed the conversation to how she felt she had been treated by the health visitor, as I recorded:

“In a stern tone, the mother said the health visitor was discriminating against her because she had said that the children were not safe in her care because she couldn’t see them. She said the health visitor was not just discriminating against her as a mother but that she was discriminating against “people like me”. The health visitor disagreed and the mother and the health visitor began to argue”

As the chair of the meeting, the social worker, as she later told me, felt that she had to take control of the situation, as I recorded:
“[The social worker] said the mother’s name loudly and firmly and asked her to leave... As she was preparing to leave, [the social worker] said in a louder than normal voice in front of everyone in the room that she had information from the GP that there was no evidence that she was blind, to which the mother said that was why they were investigating it. The mother left with the help of a teacher and I saw her standing outside the room crying”

Despite the situation being officially classified as a family in need of support, the focus on the children and the mother’s responsibilities towards them, irrespective of her social and geographical location, disabilities, and financial situation, moved the focus from providing support to investigating why the mother was not able to provide appropriate care. The process of othering, combined with a lack of trust, led to a situation where the mother’s actions, abilities, and moral character were publically questioned. Within this context, the mother’s emotional response was difficult for the social worker to understand, instead interpreting it as unacceptably hostile, requiring her to assert control by restricting her right to participate in discussions and decisions about her and her children; a process reminiscent of Garfinkel’s (1956) degradation ceremonies. While this is but one case, and not all parents experienced such public humiliation, it illustrates the processes that were ongoing where parents did experience being shamed and humiliated and, as such, represents a number of cases and experiences I observed during my time with the teams. As one team manager told me, the child protection process can be “bruising and horrible” for parents.

Discussion

It is recognised that the case study presented here is not representative of all child protection services within England. What this case does provide, however, is an example of how shame and humiliation can be experienced within the child protection system and the processes that support such experiences. Indeed, these data demonstrate that some social work involvement can evoke embarrassment in a parent, focus on their shame or seek to make parents feel ashamed of certain actions, and even humiliate a parent in the process. Of course, not all practice exacerbated and evoked shame and humiliation. Yet these findings not only support the extant research on negative parental experiences but develops our understanding of the systems, mechanisms, and practices that support and engender such emotions.

This study provides an important link between analyses that locates the practice of social work within a neoliberal context in contrast to the ideals and values as espoused within the profession. We know that social work services have been shaped by reforms intended to create greater efficiency, effectiveness, and value for money for the taxpayer (Munro, 2004). We know that this has included refashioning social work within the ‘risk’ paradigm (Webb, 2006). And we know that
parents can feel shamed and humiliated by such new service structures and practices (Gupta, 2015). What this study has identified are the mechanisms through which shame becomes a standard institutional product for those at the end of these new services. Those who work within the system are held to account for the work they do. Social workers and managers are, therefore, required to perform certain tasks in certain ways, and the experiences of the parents are irrelevant to such practices. Given such tasks become a major focus within this system, not only are such tasks valorised but they become a marker for success. Social workers can be considered to be doing a good job at the same time as shaming a parent.

While some social workers may not want to shame others, they are not immune to the wider social and cultural processes that construct some thoughts, feelings, and actions as shameful, and concomitantly some people as shameless. This is particularly the case for people who are poor and living in poverty. In a culture where individual responsibility has been refashioned to essentially mean every person is responsible for their situation, irrespective of their context, poverty is seen as personally shameful. Of course, one aspect of the role of social work is to understand and work with the personal agency of the parents to help them improve their situation and ensure their children are safe and well. Devoid of wider structural and systemic issues, however, social workers can accept the dominant view of responsibility and blame parents for actions and circumstances that are more complex and complicated than such a view affords. Given that there is strong evidence that poverty contributes to the risk of harm (see Morris et al., 2018), by shaming and humiliating parents for such harm we expand and deepen the theories of how state services and state agents punish and discipline the poor (Wacquant, 2010; Soss et al., 2011). Indeed, within the case study site, the system and practices, at times, resembled Garfinkel’s notion of a degradation ceremony. To escape such degradation, parents have to accept the spoiled identity that is provided for them and do as they are asked. Yet, while compliance may result in the reinstatement of certain privileges, from not having someone visit you to having your child placed back in your care, such compliance is difficult if you do not accept the negative evaluation painted of you. Instead of such practices creating compliance, they were more likely to lead to upset, withdrawal, or hostility towards practitioners. Reducing shaming practices may, therefore, not only be a moral obligation but also a very practical endeavour that ultimately means social workers can better help children remain safe.

Of course, social work services do not have to be organised and structured in such a manner, and individual practitioners do not have to accept the dominant, politically defined, discourses of the day that hide the reality of parents’ lived experience. Given the possibility for the shaming and humiliation of parents and family members within the current system, this study serves as a signpost
to place parental experience at the forefront of systems and practices. Even within the current child protection system, practitioners can integrate the ideas of inequality, outline the structural barriers a family faces, and foreground the poverty they experience in formal definitions of the problem. Such acknowledgement is more likely to engage parents in the sensitive discussions about their parenting.
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