

Sylvia's Story: Time, Liminal Space and the Maternal Commons.

Abstract

In this article, we draw on concepts of time, liminal space and narrative therapy to explore the interactions that we, the authors, engaged in before, during and after our sessions together. New Beginnings is a project which works with parents who have children on care orders or whose children are subject to the child protection process. For a period of 6 months, women attend trauma informed sessions where together, with the support of project facilitators and each other, they explore how past trauma has not only affected their identity but has also shaped their parenting practices. The main objective of the project is to provide space for the women to create their own maternal commons; a place where they can share stories and enact transformational beginnings. In this article, we draw on reflective notes from one case which connected the project lead and a mother she worked with to one another. Using the concepts of time and liminal space theory we explore three themes that emerged: being ready, standing still and moving forwards. The contribution of this article is therefore three-fold; it argues that 'time' in the child protection process is compounded by bureaucracy and legal processes which do not take into consideration the trauma that has been experienced or how it then unfolds in present interactions between practitioner and parent; it extends the concept of liminality in social work by exploring the lived experience of a mother on the project; and it demonstrates how narrative therapy can be used as a method to elucidate the rite of passage a person can take (or not) when attempting to traverse liminal spaces.

Introduction

After I, Jadwiga Leigh, qualified as a social worker I moved into the field of child protection. It was not long before I became disillusioned with the way in which I was working with families. To understand why, I undertook doctoral research which explored how professional identity and organisational culture affected social work practice both in England and Flanders (North Belgium) (see Leigh, 2013; 2015). In September 2013, I completed my PhD and moved into university based social work education where I hoped I would use my learning to inspire new social work students and share the findings of my research. But I realised, almost

immediately, that thinking and writing about how social work could change for the better was meaningless if I was not prepared to try and implement my learning into practice.

In May 2019, therefore, inspired by Imogen Tyler's (2013a & 2013b) work on the power of maternal commons and the faith of an Operational Director in a nearby Children's Services, I officially launched a community project called New Beginnings. The main aim of the project was to carry out trauma informed work with women who found themselves in the child protection process or who had children at home on care orders. It was agreed that women could self-refer or be referred into the project by a social care professional (e.g. social worker, health professional or drugs worker) so that they could explore how previous traumatic events had affected their lives. Working with a core team* of therapeutic staff, carrying out 1:1 work with their keyworker and group work with other mothers in similar positions, it was hoped that all women would receive the support they needed in order for them to feel they could take better care of their children. At the end of the 24 week programme, parents who completed had the opportunity to become peer mentors so that they could share their insights and learning with new mothers joining the project.

An intrinsic part of New Beginnings is to deepen the mothers understanding into who they are and who they have been through the telling and sharing of personal histories. This method is rooted in the recognition that if change is to occur in parenting practices, then individuals need to be able to articulate their perspectives on what has happened to them, be heard and also listened to. Tyler (2013a; 2013b) uses the concept of the maternal commons to describe the way in which women have, in multiple historical and social contexts, worked collectively to resist their classification as 'waste populations'. The women referred into New Beginnings have often been classified as failing mothers, or mothers who struggle to parent effectively, which is why they have become subject to child protection interventions.

As a social action project which seeks to enable these mothers to support each other, New Beginnings makes common their challenges and struggles in ways which might recast and transform their relationship to state authorities, and to their families and children. The therapeutic approach we have developed to work with parents draws on narrative therapy

(Denborough, 2014; White, 1984), and is informed also by sociological theories of maternal protest and commoning (Tyler, 2013a; 2013b) along with time and liminal space theory (Adam, 1995; Douglas, 1966; Piazza, 2019; van Genneep, 1960; Turner, 1974; 1982). In order to illustrate how this works in practice, this article examines the story of one mother, Sylvia* (Author, 2). In doing so, we unpick the stages of a journey we, myself as project lead and key worker, and Sylvia, as mother, travelled together since Sylvia first engaged with New Beginnings. Our objective is to understand how experiences of liminality are negotiated between professional and parent when there is an overarching agenda and focus in social care provision on improving children's outcomes and evidencing parental change (see Juhila et al. 2014; Munro, 2011; Trowler, 2018).

It is important to make clear at this point that although I, Jadwiga, will be the main narrator, the other person involved in telling this story is a mother who has chosen to be called Sylvia. In the sections that follow, we examine how an individual who has experienced significant trauma can become trapped in liminal spaces and in turn, develop astute coping strategies to manage practitioners' expectations of change. We focus specifically on interactions that took place between us from May 2019 until December 2019. However, first, we begin by discussing the background to the project and the wider context within which social work is embedded to better understand what drives the contemporary agenda for practitioners working with "at risk" children and families in England.

Context

In 2011, *The Munro Review of Child Protection: a child-centred system*, an independent overview of the English child protection system commissioned by the Department for Education, Eileen Munro recommended that the prescribed timescales for social work assessments be removed (and revised) as they distorted practice. Munro's argument was that the child protection system had become over bureaucratized, and that there was a need to move from 'a compliance to a learning culture' (Munro, 2011: 5). Underpinning this argument, was the rationale that social workers needed more flexibility in terms of the time and space required to develop a deeper understanding of children's needs when making decisions about their welfare.

However, Munro recognised that meeting children's needs also meant ensuring the needs of the parent were met and that these dual requirements created difficult tensions in terms of decision making around risk while also providing support to parents. Munro felt that the right approach was for professionals to offer services to children and families in a voluntary capacity. She appreciated that there were some parents whose capacity to parent raised concerns and that in these cases more strenuous efforts were required so that parental cooperation could be gained. Munro acknowledged that it was this part of practice that presented social workers with the problem of deciding when to escalate their level of professional involvement as moving up 'the scale of intrusiveness' carried both gains and losses (Munro, 2011: 80).

In a more recent policy briefing carried out by the Chief Social Worker of England, Isabelle Trowler found that national understandings of 'socially acceptable parenting' had shifted, sometimes indiscernibly so, as a result of 'a heady mix' of political discourse, media interest, community scandal and personal tragedy (Trowler, 2018:1; see also Jensen, 2018). Families in the child protection process were therefore subject to thin red line decisions, where the decision to remove a child from his or her parents could go either way depending on the professional judgement of front-line workers which were often shaped by external pressures. Trowler (2018:4) argued that this had created a context in which there was a lower tolerance of diverse standards of parenting, which had led to an 'increasing emphasis on predicting what might happen, rather than [making judgements based on] what has happened'.

It is notable that between Munro's call for more time for professionals to make judgements about children's needs and assessment of risks, and Trowler's concern that wider cultural factors were impacting what constitutes acceptable standards of parents, was austerity – namely wide-spread cuts to social work provisions which placed particular operational stresses on social work practice. The era of austerity had therefore a significant effect on cuts to welfare provisions and, in turn, resource implications making potential reforms increasingly impossible (see Tyler, 2020). This raises questions about the wider political economy of social work practice which are beyond the scope of this article but are nevertheless critical for understanding how time in social work is shaped and structured by wider economic and social factors.

Both Munro (2011) and Trowler (2018) identified that a crucial part of child protection relies on two factors. First, the timescales that prescribe professional practice and second, society's expectations of what it is to be a parent and their ability to change into the parent professionals want them to be. This individual process of change has been adeptly referred to by van Gennep (1960: 1) as 'the rite of passage'; the notion that a person's life consists of a series of transitions, structured by the society one lives in, and which consist of three stages—separation from the old role, a liminal period between roles, and then the assumption of the new role. Although not often referred to as a rite of passage, one of the basic premises of social work or trauma informed practice is "change work" as practitioners are oriented towards helping clients move away from their past and into a new and better future (Juhila et al. 2014). Indeed, there are numerous models which have been developed to help social care professionals understand and support people through various stages of transition (see for example, Bridges and Bridges, 2017; Hepworth et al., 2009)

Although statutory and third sector organisations are different in their approaches to care and support, they are both underpinned by the same professional theories of helping processes, change and future orientation (Hepworth et al. 2009). In addition, both sectors have a duty to adhere to social and health legislation, administrative rules and guidelines and various institutional agendas (Juhila et al. 2014). According to the majority of the legislative, administrative and theoretical frameworks in children and families' literature, change is not something that just happens to families who are seen as being in need (see Munro, 2011; Trowler, 2018). It is a process that is supposed to emerge from a rigorous, well planned, client centred assessment; aimed at solving or reducing problems within the family so that the welfare of children is improved.

Yet, despite all of the above authors recognising that relationship based practice is an integral component of working with families if their individual situations are to be better understood, what is less acknowledged is how the concept of time, space and the margins in between, (often referred to as liminal spaces), can affect the way in which relationships between professional and parent are built. In the next section, we explore these three dimensions in more detail.

Time, Space and Liminality

In social work “time” is a concept which holds significant, but potentially implicit, importance when it comes to working with families. In face-to-face interaction between professionals and clients, periods of time such as the past, present and futures of individual clients are continuously talked into being (Hall et al. 2015). Furthermore, the current troubles that service users encounter are often seen as being the consequences of past events and experiences but are used in the present to assess future paths and decision-making options (Juhila et al. 2014). In addition to timing and time frames, temporality forms an essential component of time and time pressures in everyday social work practices and decision making. However, in contrast to timing and time frames, both of which are dominant aspects of time, temporality, which is otherwise known as ‘when time’, is a form of practice that becomes most apparent when professionals focus specifically on processes (Adam, 1995).

When time

‘When time’ in social work could refer to a time ‘when’, for example, a mother bore a child; ‘when’ she became a victim of domestic abuse, or ‘when’ a threshold for child removal proceedings is deemed to have been reached. Contained in ‘when time’ is the fundamental awareness that an individual’s permanent transformation has (or has not) taken place but has coincided with processes which are one directional. We can, therefore, relive personal histories and rework past moments with others, but we cannot reverse past events. However social work practices often expect parents to understand, take responsibility for, and change aspects of their life, that might span from childhood to adulthood, within a specific externally enforced timeframe (Taylor and Wetherell, 1999). For example, it is widely recognised that things such as “routines” are crucial aspects of a person’s everyday sense of being and security, yet it is often the everyday routines which social work professionals want parents to radically change in order to demonstrate their effectiveness and suitability as parents. In short, dominant understandings of time as a linear and progressive movement across the lifecourse can make it difficult to approach time and timing in more creative ways (Adam, 1995). Indeed, it is a concern when the topic of time and questions of timing are not problematised or explored sufficiently in social work settings (Levine, 2003).

Timeliness

As Davis (2014: 151) argued 'timeliness is critical' in all areas of social work but what processes often do not take into account is that the meaning of time may be different for a parent than it is a professional. One area where time can be particularly problematic for parents is when professionals are guided, or governed, by timescales such as the recently introduced 26-week limit for care proceedings cases to be concluded in England and Wales (see Children and Families Act, 2014). Previously, the average time public law cases took to conclude was 53 weeks (Munro, 2011: 98). This means that parents now have a severely limited timeframe in which to prove they have met any conditions or made any changes required by the Local Authority, if it is to be agreed that their child(ren) remain or be returned to their care (Morriss, 2018). It is these kinds of institutional and professional processes that affect the construction of particular timescales in social work practices which may then either affirm or transform the way in which social workers engage with families and produce accounts of their stories (Trowler, 2018).

Space

Space on the other hand is a subject that has started to feature more regularly in social work literature (Disney et al. 2019; Ferguson, 2009; Jeyasingham, 2014; 2016). Space is often understood as a dimension which is socially produced and as a result has divergent meanings. Space can refer to a place, like rooms in a house or an organisation, but it can also include the notion of daily movement and interaction (Low and Smith, 2006). In relational activism, it can be understood as providing a common space for individuals to come together, share words, deeds and accomplish transformational beginnings (Tyler, 2013a) or materialise the *hidden* but constitutive grounds of biopolitical protest (Tyler, 2013b: author's own emphasis). Although time and space have been presented as equally important entities, geographer Henri Lefebvre (1991) has argued that time rather than space has been given more significance which can be problematic as it underestimates the importance of spatial dialectics in interactions. However, for Adam (1995) time is a dimension in which everything moves and happens in conjunction with space. People cannot move through space without time and vice versa which means, characteristically, that nothing can happen without considering time *and* space together. These are co-constituting phenomena; time produces space, and vice-versa.

Liminality

One concept which embraces both space and time has featured briefly in social work practice literature (see Christie, 2001; Warner and Gabe, 2004), is that of liminality. Social work has been described as a liminal practice, as it is conducted in the margins of public and private spaces (Christie 2001). Social work also often involves work with people who find themselves in liminal spaces, 'in-between' places in terms both of their social positionalities, and in terms of service provision (Warner and Gabe, 2004). The term liminal space originated from the Latin word 'limen' which refers to the boundary between a period of time and/or space, an 'in-between' dimension, that typically takes place during a rite of passage, for example from childhood to adulthood, or the transition involved in becoming a parent (Douglas, 1966; Turner, 1974, 1982; Van Gennep, 1960). In relational therapeutic work, liminal spaces have been identified as the places where individual transitions and transformations take place (Meyer and Land, 2003). It is impossible to dwell in the 'when time' of social work practice without simultaneously experiencing the liminal time-space of the 'what was' along with the 'what next'.

Arnold van Gennep (1960) stated that experiences of liminality are not fleeting or transient, but rather evoke deep anxiety for an individual, as they move from (or between) the known to the unknown. In her influential book, *Purity and Danger* (1966), Mary Douglas drew out theoretical implications from van Gennep's concept of liminal life-stages by emphasising the fearful and dangerous quality this state of transition invokes. Victor Turner's (1974; 1982) work developed liminal space theory further by examining the issue of identities in transition. Turner noted that in liminality individuals are in a state of 'betwixt and between' (Turner, 1974). They did not belong to the family, community or society they were once previously a part of and they were not yet incorporated into the new social collective they aimed to belong to. However, Turner also noted that liminal spaces were not necessarily anxiety provoking as previously asserted by Douglas (1966) and van Gennep (1960) primarily because these spaces are also sites of hope and new opportunities.

These theoretical understandings of thresholds and liminality are useful for understanding how transitions can occur in social work practice. However, there is a tendency for liminality to be imagined from the perspective of an individual journey. In this article we build on these

theoretical insights, to explore how time and space mattered in a relationship we formed with each other. We, the authors, will therefore reflect on the different stages of our relationship in an effort to explore how people, both professionals and those they work with, give experience and meaning to the different states they occupy and transition through when engaging in multiple activities with complex dynamics.

Method

In the spirit of co-production, this paper has been written by two people: an academic/project lead and a parent who took part in the project. Participatory research of this kind raises ethical challenges unlike those faced in other forms of research (Stabler, 2019). However, it is not altogether impossible. Wilkinson and Cardol (2018) identify that when working with service users, human relationships can develop which presents difficulties when drawing the distinction between data and conversation. But they suggest that because of the nature of participatory design, reflections can take place which ensure lines are drawn together and a shared understanding of the research practice and process emerges.

One method that works well with co-production is narrative therapy especially as this approach considers the 'story telling rights' of the person whose story is being told (Epston and Madigan, 1995). As Tyler and Baraitser (2013: 6) contend, from birth onwards we are fundamentally dependant on others for our life story and hence our changing understanding of 'who' we 'are'. Narrative therapy is a method that can be used effectively in practice as it recognises that who we are and what we do is influenced by the stories that we tell about ourselves (White, 1984). It also acknowledges that we cannot always change the stories that others tell about us and that all too often, the stories we believe about ourselves have been scripted by others (Denborough, 2014). Narrative therapy therefore is a method which is grounded in the idea that identity stories are not created in a vacuum, and if carried out appropriately can enable individuals to influence and recraft the story of themselves.

Story telling rights is a concept which Epston and Madigan (1995) developed and Denborough has extended on by creating a 'Charter of Story-telling Rights' (2014: 9). It consists of seven key articles (inspired by the Universal Declaration of Human Rights), all of which are equally important. However, Article 4 resonated with both the authors in this

paper as it states that *everyone has the right not to be left with problems caused by trauma and injustice and then treated as if they were the deficit* (Denborough, 2014). In short, it is not the person who is the problem; the problem is the problem (White, 1984; 2007). This mirrors Sylvia's own thoughts as she told me:

I like writing letters to each other because when we are together in person I don't always say what I want to say or the way I want to say it. But when I write it all down I say it the way I want to say it. I've found this helpful because it helped you understand me a bit more. And it helped me understand me a bit more too. Sometimes I don't come across how I want to come across. But writing it down to you helped me get into the right frame of mind (Sylvia, 2019)

As this extract reveals, our relationship was a process of exchange which involved speaking, talking, listening, and writing. In the following sections, the data we have used came from either the reflective notes that we kept or wrote in response to the different encounters we had with one another over the course of a year. These sometimes appear as descriptive notes or analytic memos depending on what we wanted to convey. This approach of using narrative therapy to write to one another was seen as beneficial to Sylvia because it enabled her to externalize and (re)script descriptions of the problem she was facing. Prior to this, she had always seen "herself" as the problem and found it difficult to talk in person about the issues or struggles she faced. However, by writing things down, she created a narrative distance between herself, me and the problem she wanted to talk about. This process made it easier for her to separate herself (or more crucially her sense of herself as the problem) from the specific problems she wanted to address. By writing about how she felt, she also found it more comfortable to revisit her relationship with the past (see Denborough 2014; White 1984).

Ethics

University ethical approval was requested, and granted, for using the data collected for future publications. At the start of the project parents were provided with information and consent forms so that they could agree/ disagree for their data to be used in the production of articles. In this particular context, I held further discussions with Sylvia around what the aims of this part of the research would entail and the potential benefits and risks it might have also. We agreed that if the article were to be beneficial for parents and practitioners,

then it would need to be written in an accessible language that did not exclude non-academic audience. It would also have to protect the identity of the parent who chose a different name for the purpose of this paper. In accordance with the ethics requirements, the name of the second author, Sylvia, is a pseudonym which was chosen by the parent to protect her real identity.

As the named authors of this paper, we have both contributed to its development and agree with the final submission. We both feel it represents our story of working with one another on a community project. However, this process of academic writing was not something Sylvia was initially comfortable with, especially in relation to the theoretical perspectives that have been used in this paper. Rather than be a barrier to working together, we used it as an opportunity to explore what *time* and *space* meant and how it applied to our relationship. So for example, once when Sylvia called me to tell me she missed her group of women and felt lost without them, I explained that this was because she was part of a maternal commons: a space she used to share her stories, hear the experiences of other mothers, make connections with women who she could relate to and receive the support she needed (see Tyler, 2013a). Sylvia agreed and replied “Yeah, I like that. My New Beginnings maternal commons”.

Limitations

A limitation of our co-production approach is that our narratives have not been analysed by an objective outsider who may have seen something quite different to what we did. However, Riessman (2007) has suggested that people tell stories to help organize and make sense of their lives. Narratives are often de-constructed by social scientists looking for themes, variables, and specific answers to specific questions. But in recent years, the development of narrative analysis has given life to the study of the story telling as a valid source form of information (Riessman, 2007; Leigh, 2013). By keeping the stories intact, readers of this article will be able to explore why the narratives have been constructed in the way that they are presented. Another limitation of this article is that whilst we include the term ‘family’ throughout, and indeed our work did involve Sylvia’s children at times, we focus in this context on the time and liminal spaces that both the authors transitioned. Although

we both recognise that Sylvia's children's experiences are important, there is not enough space to do justice to their views in this article.

Being Ready

As mentioned previously New Beginnings works with parents who are in the pre court proceedings process, known as Public Law Outline (PLO), or those who have children on child protection plans. I first met Sylvia in May 2018, in fact, she was the first parent I met because she was the first parent to be referred when the project started. Sylvia was referred by her social worker because her children were on child protection plans for concerns relating to the category of 'neglect'. This was because of poor internal and external home conditions; Sylvia's heavy cannabis use; the lack of daily routines such as the children's school attendance; ensuring there was sufficient food in the home; rent had been paid; gas and electric on the meter; implementing boundaries so the children were safe and she knew where they were; attending children's health appointments and also meeting their emotional needs.

Sylvia's children had been known to Children's Services for a period of 20 years, intermittently. Sylvia has five children but the youngest three children have been subjected to child protection plans since 2011 (8 years). Her oldest two children are now adults. During this period of involvement Sylvia had been asked to attend a number of courses and programmes such as Incredible Years; Triple P; Freedom Programme; CBT; Counselling. Although Sylvia always attended each suggestion, her attendance would soon start to wane and she would leave after the first couple of sessions. I asked Sylvia why she did not stay and she said:

I've been on child protection for a long time and that's unusual but I say that if they were that concerned they would have took them by now. But they haven't because they haven't got a good enough reason to. 22 years later and I am still here. After my son died, I have been in child protection ever since. It's been 8 years. So I must have been doing something right because it's not me neglecting my kids it's them for leaving them there. If they were that concerned they would have took them by now and they haven't, so who's neglecting my kids? Me or them? That's how I see it. I go into

PLO (public law outline) and then I come out of it again. I sound like I don't care but of course I do. It's just that I also know that if things were that bad they would have took the kids and they haven't. If I thought I was a shit mum I would have given over my kids but I'm not. I will never give up on my kids. I don't do it for me, I do it for them (Sylvia, 2019).

Initially I was surprised to hear Sylvia's views. They were different to what I had expected to hear. I thought she would say that she could not face being in groups or talking to someone she did not know about either the past or the present challenges she faced. Or I thought she would say that she felt she had to engage because if she refused, this lack of engagement may lead to court proceedings commencing. These were the kinds of answers that the other parents I worked with gave me when I had talked to them about whether they had been ready to start with New Beginnings but then, I am not in the same position with them as I am with Sylvia. All of the other parents have completed the programme and social care intervention has ended, or is close to ending. Sylvia on the other hand is different and I realise, that if I am to learn and better understand her perspective I need to also consider the wider context.

As a social worker, from statutory child protection, I have always been accustomed to thinking about working with families in linear time frames. On New Beginnings I realised the fundamental aspects of my thought patterns had not changed. I was not naïve enough to think that this practice would be straight forward. But I did believe that if I were to create a 'maternal commons', that is a space for mothers, to come together and share experiences with one another, 'transformational beginnings' could occur (Tyler, 2013a; Tyler and Baraitser, 2013: 6). Inspired by sociologist Imogen Tyler's work on how 'abject populations', which extends from asylum-seeking mothers to those criminalised for being poor and forced by life circumstances to inhabit marginal social places, I imagined New Beginnings as a project concerned with creating a maternal commons (Tyler, 2013a; Tyler, 2013b).

As a result, the project became a space in which mothers (as it is most often women who do the work of mothering) could work together to transform their situations. Being a mother is, by definition, a relational state of being for another. The practice of commoning involves

crafting new ways of working together in partnership ‘with’ mothers to identify problems and barriers, build open and trusting relationships, nurturing the possibility of change in partnership with parents in order for social care intervention to end. In creating safe spaces, and allowing enough time for parental change to take place, the project has largely worked. For ten of the eleven families who have, to date, completed the programme, they are no longer in the child protection process and social care intervention has ended or is close to ending.

However, a factor that is not mentioned in either Munro (2011) or Trowler (2018) or any other policy, procedure or briefing is the length of time children can stay on child protection plans before the threshold is met for court proceedings to begin. This factor had not only appeared to confuse the many social workers Sylvia had been allocated over the years but also, Sylvia herself. To Sylvia, it was *normal* to be in and out of child protection and the pre-proceedings process. Sylvia acknowledged that ‘child protection’ status was serious, she also agreed with all of the concerns that professionals held, however, she did not think there was any urgency attached to her situation. If there were any imminent risk, she rationalised, then her children would have been removed but as they had not, she justified that social workers did not hold urgent concerns and there was, therefore, no impetus for her to change.

Whilst I appreciated Sylvia’s perspective, I was confused as to why she had agreed to come to New Beginnings given that she felt there was no real incentive for her to change and so I asked her:

I know in my heart of hearts things need to get better.
I know what I need to change. Good routines. Better home conditions. Better school attendance. Stop smoking so much weed. Health appointments. I know I can get things moving rather than keep sliding back to where we want to move away from, from where we are right now. I just want us all to be happy because I am not sure my kids are. What worries me is what it will feel like to, you know, be happy (Sylvia, 2019).

Sylvia’s narrative describes her relationship with herself (her “heart”) and the space she occupies as one of unhappiness: her own unhappiness and that of her children. Sylvia knows she needs to make changes if life is to improve for her and her children but there is a fear

that comes with the knowledge of what change may bring: 'happiness'. Sylvia feels secure in dwelling in a time-space of unhappiness, the unhappy relationships she has constructed and the unhappy location she occupies, a location that had been shaped by the past and prevented her from belonging to a place she needs to 'move away from' in the future. Just as being on a child protection plan has become ordinary for Sylvia, so is the unhappiness of her life, and that of her children. When Sylvia said 'what worries me is what it will feel like to, you know, be happy', she appears on the verge of entering a liminal space in which she recognises 'anything may happen' but she also acknowledges she is not sure who she will be or what it will feel like if she were to change (Turner, 1974: 13).

Standing still

Sylvia started New Beginnings and her attendance to weekly trauma informed group sessions thereafter was good. She only missed 4 sessions during the 6 month period. Whilst she was in the 'maternal commons' of the project, her contributions were valuable and appreciated by the other mothers who were in turn encouraged to share stories of their own lives (Tyler, 2013a; 2013b). Sylvia was well liked by the other women and she quickly established a mothering role towards them; she thought this was because she was older than they were but I could see that she also had a certain energy that they liked and were drawn towards. I perceived the positive effects of this group work as part of a *maternal commoning*, in which women in the project were, through peer support, able to form a community of belonging together. A dwelling through which enabled them to make transitions from previous routines and practices – in Sylvia's case from unhappiness towards happiness in her relations with others.

However, although Sylvia enjoyed the group work part of the project, she was not so keen to attend the other parts of the programme which included keywork sessions with me; counselling; self-care sessions and meetings with her drugs worker. In fact, when it came to the keywork sessions Sylvia went to great lengths to avoid me, often cancelling the sessions as I arrived or not being at home when she knew I was expected. Even though, therefore, Sylvia was making good progress in some areas, there were other parts she was clearly keen to shun. This part was frustrating for me. I was never sure whether I was coming or going. And it felt as if, although Sylvia had embraced the next stage, she was not fully immersed or

aboard. It was as if she were suspended between binary places and could not decide if she were either here or there or as Turner (1974) would say, 'betwixt and between' two assigned positions.

Question to self: How do I help Sylvia stop avoiding her feelings? Avoiding any emotion (other than anger)? Avoiding being a parent? Avoiding me?
(Keyword notes, 2019)

One day, about five weeks into the programme I visited Sylvia to find her distressed, frustrated and in pain. It was during the half term school holidays and Sylvia had hurt her back. She was also struggling with her children because they were misbehaving. Midst her frustration she got up and walked away from me. She returned with her reflective notebook in hand, the one the women receive at the start of New Beginnings. She had completed her first entry and she wanted to read it to me. She'd realised, she said, that writing was easier for her than talking:

Every day I try to keep myself busy to make life easier for me so I can block all the past out of my head. I do that because if I don't, I remember and think about it all and then my heart feels the pain all over again. My heart hurts so bad. It's broken. Just how I feel most of the time. Broken.....[Ex-partner] hurt me physically and mentally. I loved him and I lost so much through him. The whole thing has made me into the person I am today....I have no control over my emotions.....I now know this feeling does affect the way I am with my children. I feel anxious and stressed. I feel they don't like me. They definitely don't respect me. But I also know that they deserve more from me than this (Sylvia, 2019)

Something that is important to acknowledge is that Sylvia has suffered a lot of heartache and trauma in her life- more than anyone deserves to ever experience. In fact, part of the reason Sylvia appeared to find it so difficult to move forwards was because she was distinctly aware that if she were to do so it would mean experiencing the emotion she had worked hard to suppress. Liminal individuals live in the cracks or interstices of society, or stay on the 'limen', because this is the place where they have a heightened perception of themselves (Piazza, 2019). What this meant for Sylvia is that she was deeply attached to dwelling in a liminal space which had made her 'the person I am today', a 'broken' person with a 'broken' heart. Sylvia was conscious that the 'what next' space would equate to pain and so her coping strategy was to block any form of emotion before it surfaced. This meant that she would

avoid 1:1 contact with me and any other professional who tried to help her because being alone with someone meant she would have to focus on her feelings. And I had also learned from my time with Sylvia that she was very good at distracting others. She loved to tell stories about something or someone else and because her stories were told with such captivating humour, it was easy to follow her lead and lose sight of 'her'.

This part of her story however provided me with insight into what she had been thinking; it helped me connect the dots, link some of the comments she had made about the past to the way she behaved in the present, confirmed some of what I had already thought but was not sure of. This was not the part of Sylvia we often saw. There were some professionals with whom Sylvia was fierce and angry. She was certainly not frightened of confrontation and when she had a battle to fight, she would often leave the other person feeling frightened and, in some cases, worried how she cared for her children.

But there is another part to this story and that relates to the role I played. I realised that standing still and absorbing what was going on for Sylvia was uncomfortable. I had found it frustrating and confusing. I could not understand why she was resistant when she knew that this new phase could bring her and her family happiness. Who would prefer unhappiness to happiness? It just did not make sense to me. But as I listened and learned I realised that I was pushing her towards a certain kind of 'uniformity' or 'structural invisibility' that all the other parents had reached and surpassed (van Genneep, 1960: 59). Sylvia's story was as much about her life as it was mine. I recognised I felt worthwhile in the 'when time' part of the process (Adam, 1995). Our relationship therefore was not just about Sylvia succeeding in making the required changes but about me feeling I had succeeded 'when' she had.

Moving forwards

Few weeks after Sylvia gave me her story there was a slight change. With help and encouragement from her social worker, she began to attend her keywork sessions with me. I was surprised when she came to her first one because it was the day after her father had died and she was devastated. But nonetheless she came and for most of that session she cried. Although that first keywork session was painful for Sylvia, in a bizarre way it was good for me. I learned a lot about her (and me) during those few hours together. Every time Sylvia

tried to distract me, I brought her back to centre and focused on what was happening there, in that space, at that moment in time. We focused on naming the problem; investigating its influence and the operations of that problem; exploring the effects of the problem; and taking a position in relation to the problem (see Denborough, 2014: 42).

In the key work sessions that followed, I continued to use this same method. It seemed to help Sylvia focus on her thoughts and it also appeared to help her connect these thoughts to her feelings. Sylvia came up with a nick name for me- the potato masher- because her brain felt like it had been pulped after we had worked together. She told me that she dreaded our sessions but I believe she secretly liked them because she never missed another key work session again. After a couple of keywork sessions, she said she was ready to meet with her drugs worker, and she also began to attend sessions with an equine therapist. Things were going well. We attended to everyday practical issues such as housing and benefits so that Sylvia's financial situation improved. With my support Sylvia also started to attend and contribute to conference and core group meetings, so much so other professionals were starting to notice a difference.

The following week however Sylvia missed the group session which was unusual. I called her to check how she was but her phone was off and remained so for a couple of days. I was worried she was withdrawing. I knew that Sylvia found it easier to articulate herself through the written rather than the spoken word so I thought it would be helpful for her to see how our stories to one another had developed over time. I compiled a letter to Sylvia and called round to her house. I was not surprised to find that she was having another bad day so instead of asking her to read the letter amidst the chaos, I placed it under her radio and suggested she read it when she was ready.

She contacted me a few days later to tell me that she'd read the letter. She'd sorted her "head out" and she would be at our key work session on time the next day. When I arrived, she gave me this:

When you gave me the letter I was having a bad week. I'd had a run in with school and it had set me back big time so I wasn't in a good place. I didn't want to read the

letter that you'd put under my radio for when I was ready but at the same time I wanted to know what was in it. As soon as you left I read it, I knew it was about me and I got it. I get it. All of it. I don't want you to think you have failed. You've gone out of your way for me. And I don't want to let you or the girls [from group] down. You said in week 1 that we would be worried when the programme came to an end. You were right. I don't want this to end. What we have is special. The girls are special.....I want to be there for them when they're having a hard time because none of this is easy. We aren't here because life has been easy. But I have learnt some things on the way. Last year I used to shout abuse at my ex-partner whenever I saw him. I'd make phone calls at all hours of the night and do other stuff I'm not proud of. It felt good at the time but I realise now I was angry and none of that was good for my kids. It was not healthy for them to see that or to see me be like that. We've moved on recently. Me and him talk by phone now, and sometimes face to face. I'm polite to him. He's polite to me. Everything feels less volatile. I'm calmer (well, with some things). This is important for me because it's important for my kids. I want my kids to feel safe. I want them to know I love them. I know I've got to sort the school thing out but I have started changing the way I am with them. I listen to them and I hear them. I say sorry. I know that when I'm not in the right place then they know that. It's not good for them. I can have a 'blip' as you call it but I know now that I need to get back on it after it's over. It's o.k. to have bad days and then get back up and move on. And that's what I'm doing, moving on. (Sylvia, 2019)

By getting to know Sylvia I had started to understand what worked and what did not work for her. I was also beginning to appreciate that *moving forwards* was not a clear-cut process for a person like Sylvia who had made it clear that liminality was not associated with passivity and hopelessness as van Gennep (1960) had originally proposed. Rather it was a relational positionality which enabled us to reflect together and explore a range of states that oscillated between both regression and transformation. A liminal space could as Turner (1974) argued have both positive and negative features within it. It could be a space of learning but also a place to which we are deeply attached, and in Sylvia's case, in which her identity was rooted.

Discussion

In a culture dominated by time activities such as timescales, pre proceedings and court hearings (Davis, 2014; Morriss, 2018; Munro, 2011; Trowler, 2018), it is understandable why the social order of processes in child protection dominate and why professionals focus more on the 'when time' than the spatial elements of relationship based practice (Adam, 1995). However, in this context, it is evident that time held a different meaning for Sylvia than it did the social workers involved. Whilst both parties recognised that the statuses of 'child protection' and 'PLO' were important points in the family's life in terms of 'social standards'

and 'expectancy', what I had not expected was how it would be perceived by Sylvia (Adam, 1995: 3). Sylvia interpreted professionals' concerns as not as serious as they were made out to be. Her misinterpretation of professionals' motives contributed, in part, to Sylvia resisting change and staying on 'the limen' of transformation for 8 years (van Gennep, 1974). Always doing just enough to drop out of the pre-proceedings process but not enough to end her involvement with the child protection process altogether.

Liminality is the setting against which identity is analysed in relation to space (Turner, 1974; Piazza, 2019) and in Sylvia's case, she was resistant to moving from where she was to where she, and others, wanted her to be for several reasons. First, she felt there was no impetus for her to change and as our relationship matured, it was revealed that this rationale acted as a useful coping strategy as it prevented her from discussing the trauma she had previously experienced. Sylvia's revelation taught me a few things about myself too. I learned that although liminal spaces were 'uncomfortable' to work in with a parent (see Douglas, 1966; van Gennep, 1960) they were places which provided us with an opportunity to reflect on 'the taken for granted aspects of time' in relationship-based practice (Adam, 1995; Turner, 1974; 1982). Rather than reasoning that Sylvia was simply stuck in an unhappy liminal space, we spent time explicitly focusing on why.

With the help of narrative therapy, we learned that whilst I may have been able to help Sylvia identify and externalise problems in order for them to be imagined as separate from herself, I was not able to make her effect change. That is, externalizing problems may have enabled Sylvia to distance herself a little from the struggles she faced, but she continued to participate 'in the survival of the problem' (Denborough, 2014:36). Her identity as a person was fundamentally entangled with, and deeply attached to, a state of unresolved unhappiness. Participating in New Beginnings did lead Sylvia to take more responsibility for her problems and it also increased her 'response-ability' in that she was more able to respond and deal with the past so she had more agency in terms of making a choice (or not) to move towards a different future.

Conclusion

I would have liked to conclude this article by telling the reader that Sylvia and her family did eventually move out of the child protection process. However, that is not what happened. In October 2019, the family moved out of the PLO process only to move back into it later in the year. It had emerged that during my time of working with Sylvia she had been charged for a criminal activity that could result in a custodial sentence. This event had happened in May, not long after Sylvia had begun to move forwards and professionals had started to notice a difference. Sylvia had not told anyone about the arrest and charge as she had hoped it would 'go away'. We only learned about the incident when her court hearing date was released.

In December, whilst Sylvia and I completed the revisions of this article together, I asked Sylvia why we were now sat in the waiting area of a Crown Court. She replied with:

It's a funny thing. Who is to say how much time you can put on grief because everyone is different. I don't think I'll ever resolve the grief I feel. Everyone's grief is different. This isn't an excuse, it's just how it is. There are certain things in life that make you fall back. And as we both know, I don't find it easy to move forwards. Maybe it's because I attract negativity; maybe I am someone who likes to sabotage herself when she's doing well. I don't know.

Trowler (2018: 4) recently argued that there needed to be a stronger family focus in practice, better decision making and the provision of more sophisticated and tailored support services in order that there be 'clear blue water' between children brought into care proceedings and other children considered to be at risk of significant harm. I felt that New Beginnings was one such project that could help both parents and professionals meet these objectives. However, Sylvia's story has demonstrated that liminal spaces can obfuscate the normative linear aspects of the child protection process when the parent is deeply affected by unresolved grief.

By exploring the lived experience of a parent who has encountered significant trauma we have been able to elucidate the rite of passage a person can take when attempting to traverse the margins between being ready; standing still and moving forwards. By using narrative therapy as a tool so that Sylvia could tell her story, we have learned that perhaps

not all liminals who are pushed towards 'uniformity' will always embrace transformation (van Genep, 1960:59). Some will choose to revolt against the system which attempts to change them; some will choose to leave the maternal commons we provide for them and return to their previous life because that is where they feel secure. In Sylvia's case, at the time of writing this article, she felt she belonged to a place of unhappiness in which she was too deeply attached and rooted in to remove herself from.

Notes

Sylvia is not Author 2's real name.

The core team of New Beginnings consists of two social workers (programme lead and programme coordinator); two programme facilitators and three peer mentors. Therapeutic support is provided by a counsellor; an artist; an energy healer and a holistic therapist. We would like to thank Lisa Morriss for encouraging us to write this article and Imogen Tyler for reviewing our work and teaching us about the power of maternal commons.

During the second round of revisions for this paper, Sylvia, who was given a suspended sentence, returned to New Beginnings because she missed being a part of a group that she felt lost without as it had provided her with so much support. She said she was also determined, this time, to end her involvement with social care "once and for all".

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