

Ameliorating Adversity: Supporting Resilience in Low-income Lone Mothersⁱ

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Abstract Many lone mothers experience significant hardship in their lives, yet some appear resilient in the face of adversity. Understandings of lone mothers' resilience are necessary to develop effective policies and programs; however, research in this area is lacking, including understanding factors that both create hardship, and protect against it. Grounded in a feminist, participatory methodology this study addresses these gaps by engaging 38 Canadian lone mothers' in interviews and focus groups to explore their understandings and experience of resilience. Lone mothers identify a breadth of risk and protective factors organized here into a social exclusion framework so that their compounding and intersecting nature may be more readily identified. The findings shed light on important risk and protective factors in the lives of low income lone mothers and such improved understanding perhaps contests the negative and too readily made judgments about these families.

Keywords Resiliency, Risk and Protective Factors, Poverty, Lone Mothers, Social Exclusion

1. Introduction

There are 1.1 million lone mothers in Canada [1], many of whom experience significant hardship. Lone mother families have the lowest average income of all family types, which is also 30% lower than the average income of their male counterparts [2]. In addition, more than one in five (21%) lone mother households live in poverty compared to 7% of lone father households [2]. Poverty results in significant material deprivation, the impact of which is compounding with far-reaching consequences for the lives of low-income lone mothers and their children. This is substantially addressed across a range of literatures that discuss lone mothers' own health and mental health

challenges as well as the impacts of poverty and stress on their children [1,2,3,4]. Although low income lone mothers are frequently disparaged in contemporary constructions, their status as lone mothers derives too frequently as a result of fleeing abusive partners and their vulnerable economic status is closely related to their being the sole custodial parent [3,4]. This article makes several important contributions to scholarship across a range of subject areas. It contributes to our knowledge of the impacts of family poverty and does so through the employment of a social exclusion lens. Most importantly, it sheds light on the idea of resilience, suggesting it to be a non-linear, spiral-like process which can be facilitated or impeded by a wide range of factors. This research identifies the need for further exploration of these ideas with other population groups and with lone mothers and their children through a longitudinal study.

Social Exclusion

Amartya Sen's [5] work on social exclusion demonstrates how an impoverished life is more than facing material deprivation, or a lack of goods and money, but also results in a capability deprivation, which refers to a lack of freedom to choose a life that has value. Further impacts relate to one's feelings of status relative to others and sense of public worthiness which Sen [5] describes as relational deprivation. He argues that "income may be the most prominent means for a good life without deprivation, but it is not the only influence on the lives we can lead" [5,p.3]. Consequently, the impact of extreme poverty causes lone mothers to experience social exclusion in various spheres, including the economic (i.e. work, income, credit, debt, etc.), and in their sense of self or subjective construction, in the social/political realm, and in space – their neighbourhoods, homes and communities or what we refer to here as the geo-spatial sphere. Subjective exclusion reflects issues of agency and relational capability [5,6]; socio-political exclusion acknowledges what Sen [5]

describes as feelings of worthiness to be in the public realm, including personal and social well-being, education, social networks, culture, and feelings of integration; and geo-spatial exclusion recognizes the importance of housing, neighbourhood, safety, and access across communities. Thus, many lone mothers experience various forms of social exclusion as a result of poverty and these experiences are interrelated and intersecting. Thinking about poverty in terms of social exclusion began to shape social policy in a number of jurisdictions after Sen's work became recognized [7]. It is valuable as a theoretical and conceptual lens because of the way it enables a parsed view of life circumstances and their interrelationships across life realms. It also provides a more nuanced view of not only how marginalized or excluded groups are held back, but how change in one sphere could positively impact another. It is for this reason that we suggest its theoretical utility here, as a way of seeing both how risk factors compound, and how factors that ameliorate risk and adversity too, can compound and affect other spheres of life activity.

Risk & Protective Factors

Early psychological approaches to resilience tended to focus on children and adolescents [8], as well as individual or social-psychological factors that appeared to be effective in ameliorating adversity. Such factors include a sense of purpose, autonomy, social competence, ability to problem solve [9] and strong belief systems [10,11]. However, literature on children who experienced sustained adverse circumstances also recognized the influence of supportive elements in a child's environment, often described as "protective factors" or "protective processes" such as family and community [8]. The effects of these protective factors are revealed in their interaction with risk, and it is argued that this interaction plays an important role in the social and psychological development of children [8]. Understanding the association between risk and protective factors has perhaps been key to a broadening of the research on resilience, especially beyond its status as a psychological trait. The importance of environmental factors is explained by Fraser, Richman, and Galinsky [12, p.138]:

Although resilience is *ipso facto* an individual response, it is not an individual trait. It is conditioned on both individual and environmental factors. It should not be viewed as one person's heroic or tenacious efforts to overcome disadvantage. Rather it must be viewed ecologically.

Over time, work in this area has expanded to other at-risk groups, including lone mothers, as well as the identification of other protective factors including housing, social support, religious affiliation [13], mentoring [14], availability of targeted material resources, and cultural

norms and expectations [9]. Current research has also questioned assumptions regarding the universality of risk and protective factors. A circumstance that might overwhelm one individual may be readily overcome by another, thereby reflecting the context of each individual's situation in terms of the availability of protective factors. Similarly, a factor that is protective for one individual, may be a risk for another. For example, research by Brodsky [15] found that family, a domain typically understood to be protective, was actually found to be a risk amongst the urban African American lone mothers who participated in her study. In addition, she found that living in a troubled neighbourhood characterized by high poverty, violence, crime, and drugs, which is generally considered a risk factor, appeared to motivate rather than deter her participants [15]. Similarly, Levine [16] found there was a noticeable disconnect between the public discourse about lone mothers with children with disabilities, and the narratives of the lone mothers involved in her study. Rather than viewing their family situation as putting them at risk, the lone mothers felt the experiences with their children were empowering, and gave them the confidence to challenge the negative expectations they often faced. Again, such research counters universal understandings of risk and protective factors, and reinforces the contextualized and individualized nature of resilience.

Resilience as a Spiral

Brodsky describes another important development in resilience research, which relates to its reconceptualization as a *process*, rather than just an *outcome* (as cited in [17]). This process is based on two key aspects: dynamic change over time and interaction with others and the environment [17]. Thus, as a dynamic process, responses to adversity can change over time depending upon the availability of protective factors in an individual's life. Williams [18] and others [19,20,21] reflect the dynamism and fluidity of the resilience process using the image of a spiral. From her work with teens in the sex trade, she asserts that findings such as hers should be understood as a spiral of harm and coping, recovery and resilience, rather than the historical way of seeing resilience in the context of a straight ascending line [18]. Borrowing from the hard sciences from whence the resilience concept came, she contests the idea of resilience as a singular, linear process, and one that involves a straightforward "bouncing back" from adversity. Accordingly, while there are developmental progressions to adaptation and survival, new strengths and new vulnerabilities may emerge as an individual's life circumstances change ([21] as cited in [18]). This means that all the elements of resilience are not necessarily captured in childhood, but are developed across the lifespan [21,23,23], an important understanding when considering resilience and adversity in the lives of lone mothers.

2. Methodology

This study builds on research conducted from a nationally funded community university research alliance (CURA) to explore adversity and resilience in the lives of lone mothers¹. The CURA study, entitled [name], involved a longitudinal panel of 104 lone mothers interviewed four times between 2005 and 2009 in three Canadian cities, Vancouver, St. John's, and Toronto. For the present study, we subsequently conducted focus groups with 18 lone mothers (five in Vancouver, six in St. John's, and seven in Toronto), most of whom were involved as peer interviewers/research assistants in the CURA study (see Table 1 for a summary of the focus group demographics). These focus groups explored the meaning of resilience as well as perceived risk and protective factors. Focus group data were used to re-code participant interview data from the CURA study where at least three of four interviews had been conducted (70 in total). The focus groups also shaped the language and interview guide used in the next phase of data collection.

After examining the 70 cases for risk and protective factors, we selected six cases from each site that evidenced resilience (18 in total) and reflected diversity in terms of age, education, Indigenous status², immigrant status, and ethnicity. We also selected six cases that did not demonstrate resilience at that time in the mother's life, for comparative and triangulation purposes, thereby enhancing trustworthiness and accuracy of the data [26]. Of these 18 cases, 15 lone mothers agreed to participate in semi-structured interviews comprising the first panel. To further triangulate the data and strengthen the study findings [27], we created a second panel comprised of five lone mothers not receiving social assistance, which we theorized might have shaped experiences of adversity and resilience (see Table 1 for a summary of the interview demographics). These participants were recruited through informal networks, a social assistance agency, and lone mothers associated with the CURA project. A similar interview guide was used for both panels, though Panel Two participants were asked additional demographic and contextual questions. All interviews lasted between 1.5 and 2 hours, were audio-recorded, and transcribed verbatim. Upon conclusion of the interviews, we coded and analyzed the data using NVivo software following the development of a common coding tree based both on emergent themes and on previously identified analytic categories.

Table 1. Summary of Focus Group and Interview Demographics

Focus group demographics					
	Children	Education (highest level)	Immigrant	Indigenous	
Toronto focus group (n=7)	Living at home (5) Away from home (2)	No post-secondary (5) Some post-secondary (1) Completed post-secondary (1)	Yes (3) No (4)	Yes (1) No (6)	
St. John's focus group (n=6)	Living at home (6) Away from home (0)	No post-secondary (0) Some post-secondary (3) Completed post-secondary (3)	Yes (0) No (6)	Yes (0) No (6)	
Vancouver focus group (n=5)	Living at home (4) Away from home (1)	No post-secondary (3) Some post-secondary (0) Completed post-secondary (3)	Yes (2) No (3)	Yes (0) No (5)	
Interview demographics					
	Age	Children	Education (highest level)	Immigrant	Indigenous
Panel 1 (n=15)	20-30 (4) 31-40 (3) 41-50 (6) >50 (2)	1 child (4) 2 children (8) 3 children (3)	Less than high school (3) High school diploma (1) Some college (2) College diploma (4) Some university (1) Undergraduate degree (3) Graduate degree (1)	Yes (5) No (10)	Yes (5) No (10)
Panel 2 (n=5)	20-30 (1) 31-40 (2) 41-50 (2) >50 (0)	1 child (2) 2 children (2) 3 children (1)	Less than high school (0) High school diploma (0) Some college (0) College diploma (3) Some university (0) Undergraduate degree (2) Graduate degree (0)	Yes (2) No (3)	Yes (1) No (4)

Notes: 1. In Canada, there are two types of post-secondary institutions: colleges, which offer certificates, diplomas, and degrees, and focus on career training and trades programs; and universities, which offer undergraduate and graduate degrees, and focus on academic and professional programs. 2. Additional demographic information was collected in the interviews.

¹ For additional detail regarding the methodologies of this study, and the original CURA study, see Author[24].

² There are three main groups of Indigenous peoples in Canada: First Nations, Inuit, and Métis [25].

3. Findings

This study yielded a substantial data set on lone mothers' perceptions of risk and protective factors in their lives, which are summarized in Table 2 below. While some of our findings are similar with, and support those of Brodsky [15] and Levine [16], other findings add new dimensions to our understanding of risk and protective factors in the lives of the lone mothers. We frame our findings using the four spheres of social exclusion discussed above, which we suggest broaden and enrich our understanding of critical risk and protective factors and their interconnections. It is also important to note that though the factors are separated into different spheres, it is often the *interplay* of several factors together that as adversity and risk deepen exclusion, but as protective factors support resilient responses. The 'right' attitude or personal characteristic *accompanied* by a key social support at the *right time* intertwined may enable an adverse experience to be managed or overcome. This again illustrates the spiral nature of resilience as responses to adversity can change depending on the presence and utility of the right resilience-supporting factor at the right time

Table 2. Summary of Risk and Protective Factors by Spheres of Social Inclusion/Exclusion

Sphere of Social Exclusion	Factors	Risk Factor	Protective Factor
Subjectivity	Personal Qualities	Negative self-image	Sense of agency, self-esteem, pride, optimism, resistance, defiance
	Family of Origin	Abuse, neglect	Love, support, resources, modelling
	Beliefs and Values	n/a	Value of education, spirituality
	Health & well-being	Addictions, disability, illness, stress, mental illness, learning disabilities	Stamina, good health, drug card
Socio-political	Family	Children's fathers	Children
	Intimate Relationships	Abuse	Physical, emotional and financial support
	Social Networks	Support, connection	Addicted friends
	Community Organizations	Information, support, advocacy	n/a
	Social service System	Social assistance, legal system, CAS, lack of child care	Childcare, CAS, healthcare, drug card
	Education	Limits on access (either social assistance or student loans)	Learning credentials, self-esteem, literacy
	Training	Failed expectations	Networks, language training
	Work	Stress, low income, child care	Self-esteem, social networks
Geo-Spatial	Housing	Social housing, size, cost, maintenance	Stability, size, cost
	Neighbourhood	Unsafe, issues of accessibility, stigma, poverty, school quality	Resources, schools, buffering
Economic	Savings/Assets	Instability, no back up	Resources, stability, hope
	Income	Hunger, shame, insecurity, debt, isolation, precarious work, social assistance	Resources, stability, pride, dignity, social assistance

Subjectivity Sphere of Exclusion

Four factors were identified under the subjectivity sphere of exclusion: personal qualities, family of origin, beliefs and values, and health/well-being. These factors, which act as both risk and protective factors, reflect and shape the identity and subjectivity of lone mothers.

Although current work on resilience has shifted to recognize the relevance of factors beyond individual characteristics, these continue to be important. A further benefit of the social exclusion framing is that these personal or psychological characteristics are not seen as static but are deeply interwoven with and shaped by experiences in other life realms. Having a negative self-image was identified as a risk factor, while possessing a sense of agency, self-esteem, pride, optimism, resistance,

and defiance were protective. (We will return to this issue, but it is important to note that self-esteem and agency are the very personal characteristics associated with resilience and those most identified as being suppressed by the 'good client' demands of the formal social service system).

There is a strong linkage in the data between family of origin and women's sense of self or sense of agency, as many of the women experienced continual attacks on their self-esteem during childhood. Many women spoke of needing to develop their 'voice' and the ability to make things happen that were essential to their family's well-being. The experience of finding their voice acted as a counter to their low self-esteem. In addition, a sense of defiance, or resistance to being negatively categorized by the social service system and society, was described as motivating. This relates to the literature on resistance in the

lives of marginalized people [28, 29]. Further, our data confirm that although resistance can bring about its own negative consequences, it was also associated with the very personal strength and autonomy that supported resilient outcomes.

Because I discovered I had a voice...I could start advocating for myself. (Ann, Panel 1, St. John's)
So fuck 'em all, and I'll prove them all wrong, because I don't want that'. It's not what I want, it's not how I want people to see me, and I'm just going to keep going 'cause I know what I want. (Laura, Panel 1, St. John's)

Family of origin is another key factor within the subjectivity sphere. Many women experienced unhealthy home lives as children characterized by, for example, family dysfunction, alcoholism, and severe and denigrating punishment. An alarming number of women in this study, selected only by virtue of their being single mothers, experienced verbal, physical, and sexual abuse in their childhood. The effects of these experiences have been long-lasting. Nonetheless, for some, family of origin is a source of support, especially in child care, but also in housing, accessing credit, buying groceries, and a range of other supports. Underlying many of these practical supports are close relationships where significant emotional support is also provided. Even when the family of origin is not physically present, relationships and families' socio-economic status positively affect lone mothers' sense of expectation and possibility. Below, April talks about the support she receives from her immediate and extended family:

My mum would be here to help me as much as she can. She still hasn't found employment herself so, you know, and with going to school and stuff she would help me as much as she could, and my aunt too actually (April, Toronto, Panel 2)

Beliefs and values meanwhile, were only identified by the lone mothers as protective in nature, providing an important foundation in their later lives, especially amidst difficult and adverse circumstances. Such values included education and spirituality, which they had often received from family members and others.

[I had] seven [siblings], and the person who took that responsibility in my life was my grandmother...She was a great lady; she was someone with dignity, with values, with principles, so I think I took that from her... So, I think I was so proud. I was so proud and I just wanted to be like her. (Suzanne, Panel 1, Vancouver).

In contrast to lone mothers' beliefs and values, health and well-being appears to mainly act as a risk factor. A child's health could increase the demands on the lone mother and was sometimes a factor in the dissolution of partner relationships. Also, some mothers struggle with poor physical and mental health, particularly depression and addictions. There is no clear evidence to suggest

whether these were ongoing factors in these women's lives or the result of their other experiences of adversity, but they appear more often in women with a high number of risk factors already present in their lives. At issue for many women is access to counselling or therapy, which especially after experiencing abuse, appears critical to women regaining a sense of well-being. Suzanne's comment reflects such struggles and need:

And it was hard, because at the time when I came, my health wasn't that good, and I was really suffering. I was suffering for my kids, I was suffering for myself, and I didn't know anything about Vancouver, and I was French-speaking at that time (Suzanne, Panel 1, Vancouver)

Counselling and support for addiction is also crucial, however, disclosure of addiction is problematic as women reported being afraid that child protection workers will be contacted. Conversely, good health, stamina, and access to supplementary health benefits through social assistance were strongly identified as protective factors for these families. In particular, drug cards were particularly valued given the high cost of medications. Moreover, the loss of access to medication was cited as a disincentive for women to exit social assistance as most low-waged jobs in Canada do not provide supplementary health coverage.

Socio-Political Sphere of Exclusion

The socio-political sphere comprises the social world we inhabit including our social relationships as well as the structures of the state with which we interact. This includes education and training, employment, and the public discourse about lone mothers.

Contrary to some research, the presence of children appears to be the most important protective factor in these women's lives. Almost all of the women in the study identified their children as the major force driving them to improve their lives and manage adversity. The hope and motivation for a better life are reflected in the comments by Lillian and Suzie below:

Yeah, [my daughter] makes me feel life is more meaningful, hopeful. (Lillian, Panel 1, Vancouver)
My two kids are...they drive me nuts...And also they are the hope of my life, you know. Every day I think if I didn't have them I wouldn't even want to get up from my bed, you know, do anything. But I want the best future for them. I came to Canada to have a better life so I wasn't going to give up. I wanted to go towards my goals and fight... Like I said, the whole point of my life, coming to Canada, missing my whole family, is just to bring up my kids in a way that I want to. So that's what gives me the hope or gives me the initiative to try. (Suzie, Panel 1, Vancouver)

One might assume that intimate partners and fathers of their children would be protective factors by providing support and childcare. Unfortunately, however, very few

women report these relationships as positive and instead, children's fathers were frequently identified as a risk factor. Many of the lone mothers in this study experienced, or in some cases were currently experiencing, abuse by ex-partners.

My son he saw his dad hit me too many times and every time he saw it he cried... and it's not a life, it's not a life like this. (Alice, Panel 1, Toronto)

He knows here you can't beat women, but back in China he beat me very often. But here, for example, he always yelling at me, threaten me, control me, say [horrible] words... (Lillian, Panel 1, Vancouver)

Consequently, women may be reluctant to disclose abuse to social assistance workers or seek support, as it leaves them open to threats by their ex-partners and the risk of losing custody of their children. Supervised visits between their children and their children's fathers were also problematic because they placed another demand on the mothers and exposed them to their ex-partners. Visits with children's fathers were also a concern due to the fathers' unsafe behaviour, or inconsistent or otherwise problematic fathering.

So, you know, they love their father, their father loves them, so I have to be the one that's sensible, to have this control, to let them, to make sure, "Okay, if you're going to spend two hours with your father, I have to go check that out first to make sure that he's sensible [not drinking] enough for that to happen." (Ann, Panel 1, St. John's)

Mostly my ex-husband is dragging me down... He plays games on the kids. He doesn't see them. Sees them. Stops visiting again. (Suzie, Panel 1, Vancouver)

[Oldest son's] dad disappeared after—after we split up he was around for a little bit, and I got sick of him breaking promises to [son], and I would have to be the one to tell this 5-year-old that it wasn't going to happen. So I said, "Be a parent, or don't bother." Well, he chose "Don't bother." So he disappeared for six years. (Karen Panel 1, Vancouver)

Moreover, the intense demands of coping with custody battles and bringing assault charges against ex-partners add significant difficulty and stress in lone mothers' lives as Susanne describes, "Oh, but it was a big fight we went through. A long, long fight, and the courts, and it was a big fight. He would sometimes kidnap them" (Panel 1, Vancouver).

In contrast, social networks and the social capital they can yield are extremely important in helping lone mothers manage adversity with only the absence of such networks identified as a risk factor. Social networks were reported to provide both emotional and instrumental support. Lone mothers positively identified the importance of close relationships with people to whom they could turn when things were bad, as well as the instrumental assistance that

connected them to housing and jobs.

I built this amazing network of women who knew exactly what I was going through, who had their own strategies for coping, had different experiences. It was someone to vent to who got it. That was important. That was really important. (Laura, Panel 1, St. John's)

It is noteworthy that these network members can be personal relationships as well as workers in a variety of capacities who likely go beyond their formal role. Of significance, lone mothers' relationships with workers in non-profit community organizations were reported as a very important protective factor. Lone mothers reported receiving effective and meaningful support from what appear to be a small number of grassroots community organizations that often operate less formally and are thus able to respond in more focused ways across a wide array of issues. In particular, shelter support workers across all three research sites were identified as an important protective factor seemingly going beyond their mandates in connecting women with necessary supports.

I was in shelter for a month, and then transition [housing], we had our own unit but we still had support, and I was there for 18 months and then they helped me to get to BC Housing. (Lillian, Panel 1, Toronto)

The people I met in Vancouver through my volunteering job, and they really helped me. They said, okay, we get you out from there, and they helped me to find another cheap BC Housing. (Suzanne, Panel 1, Vancouver)

Some non-profit organizations also offer childcare services, which are critical for lone mothers by enabling them to engage in education, training, or work. As sole caregivers, affordability and flexibility are key elements that affect lone mothers' access to childcare. Many women noted that childcare programs rarely accommodate work schedules outside the standard Monday to Friday, nine-to-five workweek. Also at issue are fluctuations in schedules, so that women report losing their subsidized childcare as soon as their post-secondary school term is complete or if they are laid off. As such, obtaining high quality, accessible, and affordable childcare is difficult for many lone mothers, especially those who have children with disabilities. Participants reported going to great lengths to maintain childcare once secured, even staying in school all year in an effort not to lose subsidized childcare, as Laura describes:

...For the first seven years I didn't even get to take a summer off because if I took a summer off I lost my daycare spot, and there's 300 people on the waiting list for the daycare where I live, so I couldn't lose my spot, and I couldn't afford to keep the spot if I didn't have OSAP, so it very much dictated how much schooling I took, everything. (Laura, Panel 1, St. John's)

It is important to note that while this approach could fast-track a degree, for Laura and other lone mothers, the stress and exhaustion of doing school continuously actually extended the duration of their undergraduate degrees due to dropped courses. Thus, the inability to purchase child care at an affordable geared-to-income rate constantly puts lone mothers' work or educational pursuits in jeopardy.

Research participants also reported accessing services through the formally mandated social service system, including social assistance and child protection. Bureaucratic or inflexible responses appear to be the risks associated with this system. For example, policies restricting lone mothers' ability to save or keep assets were viewed as short-sighted as mothers wanted to save for their children's education or keep the home in which their children were raised. Of particular concern, as mentioned briefly in the discussion of agency above, were these mothers' experiences of feeling put down or denigrated by the system and by their workers? Learning to be quiet and compliant in spite of seeming injustice was a coping strategy employed by some that runs counter to the sense of agency and mastery strongly associated with resilience. Some lone mothers, especially immigrant women, expressed appreciation for the available benefits and services provided through the social service system. They noted being both surprised and grateful for support that would have been unavailable in their home countries. Surprisingly, child protection services were seen by some mothers as a protective factor despite the associated fear and stigma of their involvement. It would seem likely that this difference derives from the differing social expectations of immigrant versus Canadian-born lone mothers as the latter are more likely see such benefits as a right of citizenship, although this small data set makes such generalization difficult. Women's positive experiences with the child welfare system often related to a particular worker who perhaps went beyond their role, as Erika describes below:

And Child Protection, they helped me get into [a program] and get me a counsellor and get me set up with Addiction Services and I had a great counsellor. (Erika, Panel 1, St. John's).

Nonetheless, for many lone mothers, the social assistance system was a risk factor associated with insufficient funding and minimal, and at times degrading, access to training and education. Among Canadian provinces, only Newfoundland regularly allows social assistance recipients to pursue a post-secondary education. More usually, social assistance programs provide access to short-term training that many women reported to be a waste of time, damaging self-esteem, and raising false expectations because such programs failed to yield opportunities for sustainable employment. Below, Karen reflects on her experience in different training programs:

I've done the Job Action Workshop, I've done the Building Bridges Program for Battered Women.

You know, I've done all the programs and job searches they've thrown me through all the years – and they don't ever [seem to enable you to get a job], you know? The Building Bridges one was actually—was a 6-month program—and that was a self-esteem building...And, you know, I mean, it really made you look at yourself. They cut that program a long time ago. (Karen, Panel 1, Vancouver)

Consequently, many women identify the absence of adequate education prior to lone motherhood as a risk factor for adversity. This situation tended not to apply to the immigrant lone mothers who had education and skills, but faced a lack of foreign credential recognition by employers and professional bodies. These women also reported experiencing significant racism and discrimination in the labour market. Thus, given these various educational/training challenges, non-profit organizations that focus on helping women by providing referrals to programs, useful training, and assistance with career plans were seen as strong protective factors.

Unfortunately, both those who were employed, and those accessing social assistance, did not regard employment as a significant benefit. The lone mothers struggled with childcare and transportation issues, as well as the stress of juggling work and home, with typically a low income. April speaks of such challenges below:

I feel like I'm getting beaten at my own game, although I [am] still working. But working three jobs and three kids is exhausting. (April, Panel 2, Toronto).

Work was viewed as key to escaping poverty and the stigma associated with receiving social assistance, however many women found it to be unsustainable because of low wages, the absence of benefits, irregular or part-time hours and jobs being vulnerable to lay-offs without sufficient hours to qualify for employment insurance³. As such, many lone mothers hoped to qualify for disability benefits as these usually provide more income with minimal, if any, job search demands. While understandable, this goal might be seen to be highly problematic as it ultimately forces women out of the labour market and into the disability benefits system when, with adequate supports, this might have been avoided.

Lastly, the socio-political sphere of exclusion includes a consideration of the discursive constructions of lone mothers. This prevailing and negative discourse is a risk factor as women feel stigmatized and denigrated in both their individual encounters with people, and in how they

³ The federally-administered Employment Insurance program in Canada typically provides more generous benefits than provincially-administered social assistance programs; however, for the former, applicants must work a minimum number of hours in a certain time period to qualify for benefits.

are portrayed in the media. They question why social assistance provides benefits in a manner that identifies recipients through, for example, conspicuously-coloured cheques or distinct drug cards, which results in feeling negatively judged. Madison touches on this below:

I get my cheque direct deposit now because I find it embarrassing going to a grocery store with a big blue cheque, and everybody knows what the blue cheques are because they're social assistance... When I'm at my doctor's appointments with my child I have to make sure that, you know, the medication is covered on my drug card, and I feel embarrassed. Totally embarrassed to be on social assistance. (Madison, Panel 1, St. John's)

Such experiences appear to have a cumulative effect on lone mothers' subjectivity as negative perceptions and attitudes become internalized. The majority of the research participants questioned the basis of the negative perception of single moms given their assumption of the parenting responsibility after a relationship break-up. This is especially painful given its stark contrast with the positive social approbation bestowed on lone fathers. Many of the lone mothers felt that there is a widespread belief that receiving social assistance benefits equates to bad parenting, even though it may allow more time to be with one's children; while in contrast, working or attending school full-time is considered responsible and therefore good parenting, despite it taking time away from being with one's children.

Geospatial sphere of exclusion

The stigma experienced by lone mothers extends beyond receipt of social assistance to include experiences in their neighbourhoods and housing situations. Many lone mothers who had subsidized housing were appreciative of the low cost and economic security it affords. April describes how the fear of losing her job is lessened while living in subsidized housing because her rent would be adjusted immediately:

...housing is a godsend, okay. I mean, no matter what I'm doing and—I could lose my job and know that I can still afford my rent because they're going to drop my rent to \$89 with no income until I figure out. (April, Toronto, Panel 1).

Although this reflects the significant financial benefit of subsidized housing, few lone mothers identify housing as a protective factor due to its too frequent association with troubled neighbourhoods. Madison captures this sense of such neighbourhoods below:

Can't stand it. It looks like something from out of the movies, like *The Projects*. It's a sight for sore eyes. Like, it's—I don't like it, I don't trust anybody around here, I don't feel comfortable most times. (Madison, Panel 1, St. John's).

As another example, one lone mother's neighbourhood

undermines her addiction recovery efforts as she lives next door to a drug dealer and often finds people doing drugs in her backyard. Despite numerous requests to move elsewhere, she has been denied on the grounds that she is adequately housed. In addition, such troubled neighbourhoods, and the individuals living therein are often perceived negatively by the public, schools, and employers. Despite the economic hardships faced by the lone mothers in this study, several chose to seek alternate housing despite the obvious and tangible benefits of social housing. They made this decision so that their children would grow up around "better neighbours", have "better influences", and would not "become stereotypes". This included Celina, who found a roommate so that she could move into a larger apartment in an upper class neighbourhood where she felt safer, even though this involved living with a virtual stranger. Similarly, of those lone mothers who have lived in subsidized housing, many state that their main goal is, or was, to get out of social housing so that their children are safe and live without stigma. This finding contrasts with some other research that found in spite of the above noted problems and issues, some lone mothers found public housing to be a protective factor as they felt that they escaped negative social judgements because everyone around them was in the same situation [30]. Congruent with August's [30] findings, the Indigenous lone mothers we interviewed in Vancouver lived in the Downtown Eastside⁴, and although they recognized the problems associated with the neighbourhood, they also reported feeling comfortable and not judged.

Economic sphere of exclusion

Finally, this study explored protective and risk factors associated with the economic sphere of exclusion. Most of the lone mothers report significant, daily economic insecurity due to limited savings/assets and income. It is important to note that although the lone mothers frequently identify limited income as a risk factor, more often comments regarding risk pertain to economic insecurity. Part of the insecurity derives from cobbling together income from different sources, and the frequency of 'held' social assistance cheques, a technique frequently employed by workers to ensure compliance with the system. Lone mothers' resourcefulness is often critical to their ability to manage on very low income, which includes accessing programs and services like food banks. These programs are critical to some families' food security, particularly those who pay very high rents; however, lone mothers express concerns regarding the lack of fresh food, expired or damaged products, and food that is overly refined and

⁴ This is an impoverished neighbourhood in Vancouver with high rates of drug use.

processed. Karen conveys these concerns below:

Eating healthy has been a really big challenge because the food bank provides things like pasta and stuff... for the most part of my kids' life, they've, I mean, they're not used to eating fresh vegetables or meats and stuff like that simply because that was definitely on the not-afford list. (Karen, Panel 1, Vancouver)

Importantly, some lone mothers identified family and their social networks as important buttresses against hunger and destitution.

4. Discussion

The breadth of risk and protective factors that lone mothers identify speaks to the complexity of a resiliency process that is both dynamic and individualized. Reflecting its spiral-like nature, lone mothers may manifest resilience to varying degrees based on the availability and suitability of resiliency-supporting resources at a given time. Further, the individualized and contextualized aspect of this social process is reflected by factors that may be perceived as a risk by one lone mother, but protective by another (e.g. family of origin). Yet in spite of this variability, some protective factors stand out as highly significant.

Notable factors identified in this study are children, education, and non-profit organizations. Children are often viewed in the literature as a risk factor for adversity because they define and shape the trajectories of lone mothers' lives. Yet, despite the stress of lone motherhood, women identify their children as the motivation to survive and thrive. Being a mother is also a significant and positive part of lone mothers' identity and subjectivity, despite the negative perceptions of lone mothers in Canadian society. Thus, similar to Levine's [16] findings, lone mothers' children can be a source of strength and empowerment.

Education is one of the most important protective factors identified by the 20 lone mothers interviewed for this work. It was seen to be important in terms of the women's own job getting and retention, but equally important for the messages communicated to their children as the mothers secured a post-secondary education. One lone mother explained "Even if I don't get a job, I have taught my kids how important education is – and knowing that will help ensure they never end up on assistance" (Ann, Panel 1, St John's). Suzie similarly claimed "My [eldest daughter] and I sit and do our homework together. She's seen me work hard, accomplish something and move forward in my life. I'll have a good job, my kids know firsthand that education pays off" (Panel 1, Vancouver).

Elements of the social service system were viewed positively by many lone mothers. In addition to the material support, it is oftentimes the relationship with a particular worker that lone mothers identify as protective in nature. Some such workers go above and beyond their role,

exceeding lone mothers' expectations, and ultimately helping them better cope with adversity. This finding is important for policy makers given the trend away from traditional casework in the social service system. In this study, shelter workers were seen to undertake critical roles in connecting lone mothers with resources, and ensuring they and their children's needs are met. This key role of personnel in organizations confirms Schilling's [14] finding regarding the importance of mentoring, which the lone mothers identified as "guides" or "connector pieces". In particular, non-profit community organizations that provide mentorship and targeted, gender-specific programs for women appear to be of the utmost importance in enhancing self-esteem, competence in career planning, and advocacy in other systems. Further, some community organizations played a key role in education and training.

The findings from this study reinforce the complexity of the resiliency process, and contribute to an expanded understanding of risk and protective factors. The nature and utility of such factors depend upon the contextual and temporal conditions of a lone mothers' life and thus systems must enable this flexibility and adaptiveness. Our common understandings of what is a risk for, or a protective factor against, adversity must be broadened to recognize these situational and personal dimensions; although, the importance of substantive post-secondary educational opportunities, women-centred non-profit organizations, mentors, economic security, and social benefits were all of noteworthy importance.

This study makes significant contributions to knowledge in the areas of family poverty and resilience and importantly points the way to the need for further research that continues to investigate resilience and how it can be supported in vulnerable populations.

Concluding Thoughts

Lone mothers identify many factors in their lives that either increase their risk of hardship and adversity, or protect against it. These factors are framed using Sen's [5] social exclusion framework. An essential aspect of this framing is that it illustrates how deprivation and adversity are compounding. Early shaping of the women's subjectivities began with their family of origin, and those who had secure, middle class upbringings were more likely to fare better across other spheres. This finding was especially notable for the continued strength of social networks and social capital, educational attainment, and income security. Thus, we see this one protective factor play out positively across all the spheres. Similarly, a dedicated shelter worker acts not only in the socio-political realm in providing services and as a conduit to secure housing, but also provides both instrumental and affective support – an expansion of the lone mother's social network and access to social capital. All of these protective factors then further compound in changing a mother's sense of self,

helping her reclaim agency. If social exclusion is compounding in a troubling way, social inclusion might be seen to be positively compounding. As the illustration of the shelter worker makes clear, a meaningful and substantive intervention that is purposeful, well-timed, and individualized can support real change.

A social exclusion framework also enables us to understand the multiple spheres in which poverty affects lone mothers' lives and to see, as Sen[5] argues we must, that poverty causes material deprivation but also relational and capability deprivations. These impacts affect not only the lone mothers in this study but their children as well, deprived as they are of the means to healthy food, safe neighbourhoods, and the range of opportunities that lead children to fully develop their capabilities. These costs are significant, not only to these families, but more broadly. An understanding and appreciation of the resilience demonstrated by the lone mothers in this study begs a commitment to strengthening the protective factors that support it. Even more fundamentally, changes that reduced the many types of adversity experienced by these mothers would lead us to worrying less about how to support recovery. Experiences of abuse, as one powerful example, have shaped these lives with little widespread effort to combat it. Thus, we must try to ameliorate adversity through public policy interventions that support the development of resilience. Providing adequate funding to non-profit organizations, modifying income support to ensure more income and economic security, and facilitating real education and training programs that enable sustainable employment are critical areas of required policy change. Lone mothers will do the rest.

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