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Introduction

IT BEGAN WITH A phone call.

After Jazmine Acosta's housing case manager placed the call, there was no turning back. A few hours later, a state investigator showed up at Jazmine's apartment, knocking on her door to question her and see her two-year-old son, Gabriel.

Jazmine, a Black and Puerto Rican woman with curly hair dyed blonde, had grown up going back and forth between relatives due to her mother's addiction. Now twenty-three, she and Gabriel lived in New Haven, Connecticut, in an apartment subsidized by the nonprofit organization whose case manager made the call. (All the names of research participants in this book are pseudonyms.) When the investigator came, money was tight. After Jazmine totaled her car the month before, her boss had taken her off the schedule and given her work hours to someone else with a car. She was scrambling to find an affordable apartment before her housing subsidy ended in a couple months. But she'd been getting by and feeling hopeful. She reflected that, as Gabriel's mother, "I have a motivation and I have somebody who loves me. I have somebody who depends on me."

The investigator's visit threatened to upend that. This stranger had the power to whisk Gabriel away in an instant, separating the toddler from his home and family. Jazmine wouldn't have to agree to this; the investigator and his colleagues at Child Protective Services (CPS) could decide unilaterally and get a court to sign off later. So when the investigator arrived, telling her he'd received a report alleging that Jazmine hit Gabriel while they met with her housing case manager, Jazmine was terrified. She thought about not letting the investigator in but figured that would only give him more reason to take her son. She decided she would do whatever he asked. "Everything now is on the line," she later said. During the visit, she recalled, "all I was thinking about

was: Just answer this man's questions. If I tell this man everything now, he can see that I'm being honest and that I just want him to get the hell out."

In this spirit of openness, when the investigator sat on Jazmine's couch to inquire about the stressors in her life and any substances she used, she shared that marijuana helped her cope with stress, anxiety, and depression—"so I don't go to my dark place," she said. The investigator listened, then gently asked, "What can we do to help you?" He started explaining his interest in identifying a therapeutic program that would work for her, when Jazmine interjected.

"*This*"—she drew circles in the air with her pointer finger—"is not gonna make it any better. Imma let you know right now. It's not." She began to cry.

The investigator explained to Jazmine that he wanted to help her manage her stress so things didn't escalate to endanger Gabriel. She told me afterward that she appreciated his calm demeanor and respectful attitude. As the investigator wrapped up his questions that evening, he assured her he wouldn't be taking Gabriel with him. No one thought the toddler was in imminent danger—not Jazmine, or her new investigator, or the housing case manager who placed the call.

And yet, the investigator's visit amplified Jazmine's sense of anxiety and vulnerability. "Nobody likes CPS," she told me two days after that first meeting. "When somebody says that word, nobody says, 'Oh, yay, CPS.' No. Your stomach is dropping."¹ She compared the investigation to walking on a tight-rope—a high-wire act with ruinous consequences for the tiniest misstep.

This tightrope walk happens every day, all over the country. Each year, state CPS agencies investigate the families of more than three million U.S. children following reports of suspected child abuse and neglect, defined broadly as things caregivers do (or don't do) that place children at risk of harm. One out of every three children in the United States—and fully *half* of all Black children—can expect to have a CPS investigator come knocking at some point during childhood.² Remarkably, U.S. families' engagement with the child welfare system is comparable in scale and concentration to the high levels of criminal legal system intervention in poor communities of color. As such, CPS is essential to our understanding of contemporary families, parenthood, poverty, and racial inequality. In this single agency, we see some of our country's deepest tensions: our inclination to treat structural problems as individual deficiencies, our ongoing racism and racial stratification despite purportedly "color-blind" policies, our failure to support mothers even as we valorize motherhood.

“Child abuse” evokes horrific images of children tortured and starved. We see these headlines, we hear about children who die from abuse or neglect—nearly two thousand each year, according to federal data—and it’s human nature to want to do everything we can to rescue children from that fate.³ So we’ve empowered people like Jazmine’s housing case manager and investigator to act upon any suspicions of abuse. But as the investigator told Jazmine at his next visit, “I just see a mom who has a pretty significant trauma history, single parent, going through a lot, and could probably use some support.” To me, he summed up her situation by saying, “There’s a lot on her plate.” Likewise, a training session for new CPS investigators in Connecticut began with the instructor reframing CPS work for the group: “Some of you came to CPS, filled the application out, interviewed, and said, ‘I’m gonna stop all these people who are abusing kids.’” But, the instructor emphasized, that wasn’t what the agency primarily dealt with: “We work in large part with parents who are challenged with caring for their children for one reason or another.” Often, that reason is poverty and its associated stressors and hardships. As another mother reflected, after the agency visited, “I wasn’t a *bad* mom, but I was a *stressed* mom.”

These reflections are the starting point for this book. What does it mean that so many parents with a lot on their plate, stressed parents, parents facing challenges in caring for their children, find child abuse investigators at their doors? To find out, I spent years interviewing and spending time with more than one hundred mothers in Connecticut and Rhode Island and months shadowing some of the CPS investigators who knocked on their doors. I had the unique opportunity to accompany investigators as they visited families and then meet separately with the mothers under investigation as well as many of the frontline professionals who triggered CPS’s investigation. To look beyond the investigative moment, I spoke with low-income mothers not presently under investigation, sometimes before CPS ever got involved, other times years afterward.

We know that mothers like Jazmine, raising children with limited socioeconomic resources, contend with precarious economic arrangements such as work, welfare, and housing.⁴ In this research, I saw how they also confront another form of precarity, one borne of the very social policy called to respond to the challenges they face. As I learned, CPS is a first-line response to family adversity that renders motherhood itself precarious for already marginalized mothers. By precarity, I mean the recognition that you can readily lose something you have, that someone else can take something you cherish. The word

originates from the Latin *precārius*, “held through the favor of another.”⁵ As Jazmine concluded, “Now it’s up to them to see if my child is worthy or not to stay with me. . . . Now I have a complete stranger in my life, and they have to evaluate to see if I’m a fit parent.” Even well before the investigator came by, she knew that her mothering could be called into question at any time. “When I was pregnant,” she told me, “everybody would say, ‘Oh, be careful what you do—somebody’ll call CPS on you.’” Growing up in “the hood,” she recalled, it seemed people had CPS “on speed dial.” For mothers like Jazmine on the margins of society, motherhood is subject to the state’s review, to be potentially (even if not actually) revoked. Moreover, it’s an entity within the state’s social welfare arm—supposedly the bulwark against insecurity—that generates this precarity.

This book examines the ramifications of responding to family adversity writ large through CPS. As in Jazmine’s case, most investigations conclude with no findings of abuse or neglect, even by CPS’s own standards.⁶ As we will see, turning so readily to an agency fundamentally oriented around parental (especially maternal) wrongdoing organizes assistance around surveilling, assessing, and correcting mothers, which affects how mothers experience this “help.” Although mothers may ultimately appreciate their investigators, as Jazmine did, investigations undermine their sense of security and shape how they marshal resources for their families. With CPS saturating poor neighborhoods, experiences of precarious motherhood extend even to mothers who haven’t (yet) been drawn in. Through seemingly routine, low-level encounters, through often well-meaning people trying to help, governments perpetuate marginality and reinforce existing inequalities.

Who and What Draws Child Protective Services Attention

Ensuring children’s basic needs are met should be a priority for every society. Jazmine recalled growing up with a mother in the throes of addiction. “My mom was always not a mom,” she said. “She would leave us for a day, then it would be a week, and then, at one point, she just didn’t come back.” After the police arrived one day to find sixth-grader Jazmine and her brother home alone, unsure if or when their mother would return, Jazmine’s grandmother took her in. This kind of childhood adversity can have long-lasting, negative effects on health and well-being.⁷ Adults enmeshed in carceral and child welfare systems have often endured lifetimes of trauma and violence, beginning in childhood family environments.⁸ When children are in unsafe situations,

few would disagree that societies should intervene to make sure they are not subjected to ongoing harm.

The idea of vulnerable children in danger creates a noteworthy exception to cherished ideals of family privacy and autonomy—a “private realm of family life which the state cannot enter,” in the words of the U.S. Supreme Court.⁹ Under the *parens patriae* doctrine (literally, “parent of the country”), we authorize the state to intervene in private life to protect children and others unable to protect themselves. And intervene it does: On any given day, foster care rates for U.S. children, at 563 per 100,000, exceed imprisonment rates for U.S. adults, at 539 per 100,000.¹⁰

These aggregate statistics mask vast disparities in exposure to CPS. In affluent White communities, CPS is virtually absent, perhaps entering parents’ awareness only when they see news reports about tragic things happening to other children. For others, the system is a common part of childhood and parenting. In Connecticut neighborhoods where over 20 percent of families live below the poverty line, one in three children will encounter CPS by their fifth birthday.¹¹ A recent California study found that children with births covered by public insurance—a proxy for low income—came to CPS’s attention during childhood at over twice the rate of those privately insured at birth (38 percent compared with 18 percent).¹² The most recent data reveal that *one in eleven* Black children and *one in nine* Native American children will enter foster care during childhood.¹³ As legal scholar Dorothy Roberts has compellingly articulated, this is a stark manifestation of historical and ongoing racial oppression, as well as a means through which this oppression persists.¹⁴

Amid this concentrated intervention in Black communities, Native American communities, and poor communities (including poor White communities), CPS investigates mothers in particular. Mothers are the primary caregivers for 80 percent of children subject to investigations, and among children deemed abused or neglected, CPS holds mothers responsible in 69 percent of cases.¹⁵ State intervention with Black women through the child welfare system thus runs parallel to state intervention with Black men through the criminal legal system.

It might seem natural to attribute this unequal intervention simply to higher rates of child abuse or neglect among particular groups.¹⁶ Research consistently finds poverty strongly associated with child maltreatment (measured in a variety of ways), as poverty often creates hardships and stress that make caregiving challenging.¹⁷ Systemic racism differentially distributes the resources parents need along racial lines, and child-rearing responsibilities

tend to fall on mothers. For mothers like Jazmine, meeting their children's needs is no simple matter in the face of material hardship, racism, exclusion, and adversity.

One view, then, sees CPS directly responding to the social problem of child maltreatment, an umbrella term encompassing physical and sexual abuse as well as neglect of a child's physical, medical, educational, or emotional needs. Yet child abuse and neglect are not objective, self-evident phenomena. Like crime, child maltreatment is socially constructed, which means that there is no discrete thing constituting "child maltreatment." Instead, societies decide what behaviors to classify as maltreatment, making moral judgments about what (and whom) they deem appropriate or inappropriate, right or wrong.

Categorizing brutal beatings and sexual abuse as child maltreatment seems relatively clear-cut. But beyond these extreme cases, it's less straightforward. The state declines to intervene in many things parents do every day that could conceivably endanger children. For instance, parents who allow their children to ride bicycles without helmets are arguably placing children at risk of harm, yet suggesting that CPS pursue such parents would surely provoke accusations of a nanny state. And although we can agree that parents shouldn't intentionally starve their children, who gets to decide whether parents' actions are intentional, and on what basis? Moreover, the same behavior may be perceived differently depending on context: Can you make the case that letting elementary-age children play outside unsupervised threatens their safety? How about if they live on a busy street or in a neighborhood with high levels of violence? Or if they have special needs?

As we see, drawing the child maltreatment line is far from a neutral, value-free determination. All kinds of behaviors can be cast—or not—as abuse or neglect, and what's considered standard or appropriate parenting has varied considerably over time and across societies. With the flexibility of the child maltreatment category, CPS intervention is a political tool that can expand (or contract) to bring more (or fewer, or different) families under its purview.

In my research, it soon became apparent that "suspected abuse or neglect" means all kinds of things in practice. Jazmine smacked her son a few times to discipline him. Sabrina's family was staying in a rodent-infested attic. Gina, recently widowed, turned to alcohol in her grief. Imelda's toddler daughter got out of the apartment and onto the street. Nikki's partner was hitting her. As we will see, much of what's shuttled to CPS today reflects family adversity in some form, from substance use to domestic violence to unmet mental health needs. The vast majority of CPS reports allege neglect rather than abuse,

alleging parents' failure to provide adequate supervision, medical care, shelter, food, or clothing—"failures" often rooted in poverty and structural racism.¹⁸ Thus, CPS is not just in the business of responding to child maltreatment, however defined. It's in the business of managing problems of poverty and marginality.¹⁹

The Turn to Child Protective Services

Our response to families like Jazmine's reflects specific historical and political understandings about what to do with caregivers—typically mothers—who may be struggling to meet children's needs. One possible response entails shoring up motherhood. Another involves destabilizing or challenging it. In turning to CPS to manage marginality, we've chosen destabilization.²⁰ After all, it was fairly easy to send an investigator out to Jazmine's apartment: Her housing case manager just picked up the phone. Meanwhile, it felt nearly impossible to get her what she needed to support herself and Gabriel. She and her housing case manager scoured job opportunities together, but the jobs she got had variable hours and didn't pay enough to live on. They looked for apartments but couldn't find anything within her budget. They strategized to juggle bills, with Jazmine paying what she could to the electric company to prevent a shutoff. When I first met Jazmine, after she'd lost all her hours at work, her monthly welfare check totaled just \$487, a fraction of what it cost to raise a child in New Haven. With our limited public investments in children and families, U.S. children have for decades faced higher poverty rates than their peers in other, comparable nations.²¹

This arrangement wasn't inevitable.²² In the Progressive era, reformers pressed for governmental cash assistance to support single mothers (envisioned as White widows) raising children at home, declaring that "the home should not be broken up for reasons of poverty."²³ With advocates, predominantly middle-class White women, interested in boosting families' economic security to support children at home, the 1935 Social Security Act funded welfare assistance rather than foster care. Notably, however, this welfare aid disproportionately excluded Black families and other families of color.²⁴ In the late 1960s, in response to this exclusion and dovetailing with the federal War on Poverty, Black women, alongside Puerto Rican and Native American organizers, led a national movement advocating for welfare rights for poor women of color. But the backlash came swiftly: As welfare began serving more Black families, the imagined welfare recipient shifted from a White widow to an

unmarried Black mother. Racist and sexist stereotypes about Black “welfare queens” cheating the system made providing financial assistance to poor mothers politically unpopular.

Meanwhile, the issue of child abuse had burst onto the national scene. In 1962, pediatric radiologist Henry Kempe identified what he called “battered child syndrome,” based on his observations of children with severe and nonaccidental physical injuries. The issue quickly took hold, drawing substantial media and political attention.²⁵ Within five years, all fifty states placed new laws on the books requiring certain professionals to report suspected child maltreatment to state authorities, and states formalized processes for responding to these reports.

By the early 1970s, then, Nixon-era backlash to antipoverty programs stood alongside popular support for a conception of child abuse as a pathological “syndrome” and an emerging governmental infrastructure to respond to child maltreatment reports. This was the situation facing Senator Walter Mondale as he sought to improve conditions for children. Advocates like Mondale, spearheading the Child Abuse Prevention and Treatment Act (CAPTA), explicitly separated child protection efforts from antipoverty work, viewing this approach as more politically palatable.²⁶ For instance, Mondale had recently sponsored legislation to provide universal subsidized childcare, only for President Nixon to veto it.

Passed in 1974, CAPTA allocated new federal funds for child protection, contingent on states operating CPS agencies to receive and respond to child abuse reports. Reports rose precipitously, from approximately 10,000 in 1967 to 800,000 annually within a decade and 2.1 million another decade later.²⁷ These reports extended well beyond the serious physical injuries documented by Kempe. Nevertheless, the framing of child abuse as a syndrome stuck, such that CAPTA organized the governmental response around parents’ individual deficiencies. Increasingly, CPS intervened with Black families, in line with state authorities’ long-standing tendency to blame social problems on the pathology and dysfunction of Black families, especially Black mothers.²⁸ Progressive-era advocates thinking of poor White families’ needs had devised direct aid; when it came to poor Black families, social policy turned to accusations of abuse and neglect that could prompt family separation. In the 1970s, 1980s, and 1990s, foster care caseloads swelled, accelerated by the moral panic around “crack babies” that demonized poor, Black mothers.

In 1996, after promising to “end welfare as we know it,” President Bill Clinton eliminated poor families’ entitlement to cash assistance. In the decades

since, the proportion of poor families receiving welfare has plummeted, the real value of benefits has declined, and recipients are subject to substantial monitoring under threat of sanctions.²⁹ This withdrawal of welfare support leaves us with the child welfare system as our means of responding to children in need. Initially, Title IV of the 1935 Social Security Act focused solely on enabling states “to furnish financial assistance . . . to needy dependent children” living at home.³⁰ Title IV has since become the primary federal funding source for foster care, and states allocate \$2.6 billion in welfare funding to their child welfare systems each year.³¹ Child welfare system expenditures total \$33 billion annually, far exceeding spending on government assistance such as welfare benefits, at \$6.7 billion, and the Housing Choice Voucher program, at \$22 billion.³² And the Children’s Bureau, a federal agency with a lofty mission of “improv[ing] the overall health and well-being of our nation’s children and families,” took on issues such as infant mortality and child labor at its founding in 1912.³³ Today, its jurisdiction is limited to CPS. Though obstacles to child well-being could conjure a number of possible responses, the present policy and practice approach addresses such threats through CPS.

The Trajectory of a Child Protective Services Case

As a primary path we’ve forged to respond to children and families in need, CPS has become a central part of our social welfare state. Each state operates its own child welfare system, with a few states operating county-administered systems; federal legislation provides guidance and some funding. The contours of the child welfare system—which encompasses state CPS agencies as well as courts overseeing child protection cases and private organizations providing foster care and other services—are broadly consistent nationwide, though state policies vary somewhat: A state (or county) agency receives and investigates reports of suspected child maltreatment and then continues oversight in selected cases, sometimes removing children from home to place them in foster care. (See Figure 1.) I refer to these agencies as “CPS,” though their specific names vary by locale; Connecticut has the Department of Children and Families, for instance, and New York City, the Administration for Children’s Services.

Families come to CPS’s attention through a diffuse array of third parties. Jazmine’s case began not with an investigator stopping her on the street or identifying her from video surveillance but with her housing case manager calling the state’s CPS hotline to file a report. Every state requires certain professionals,

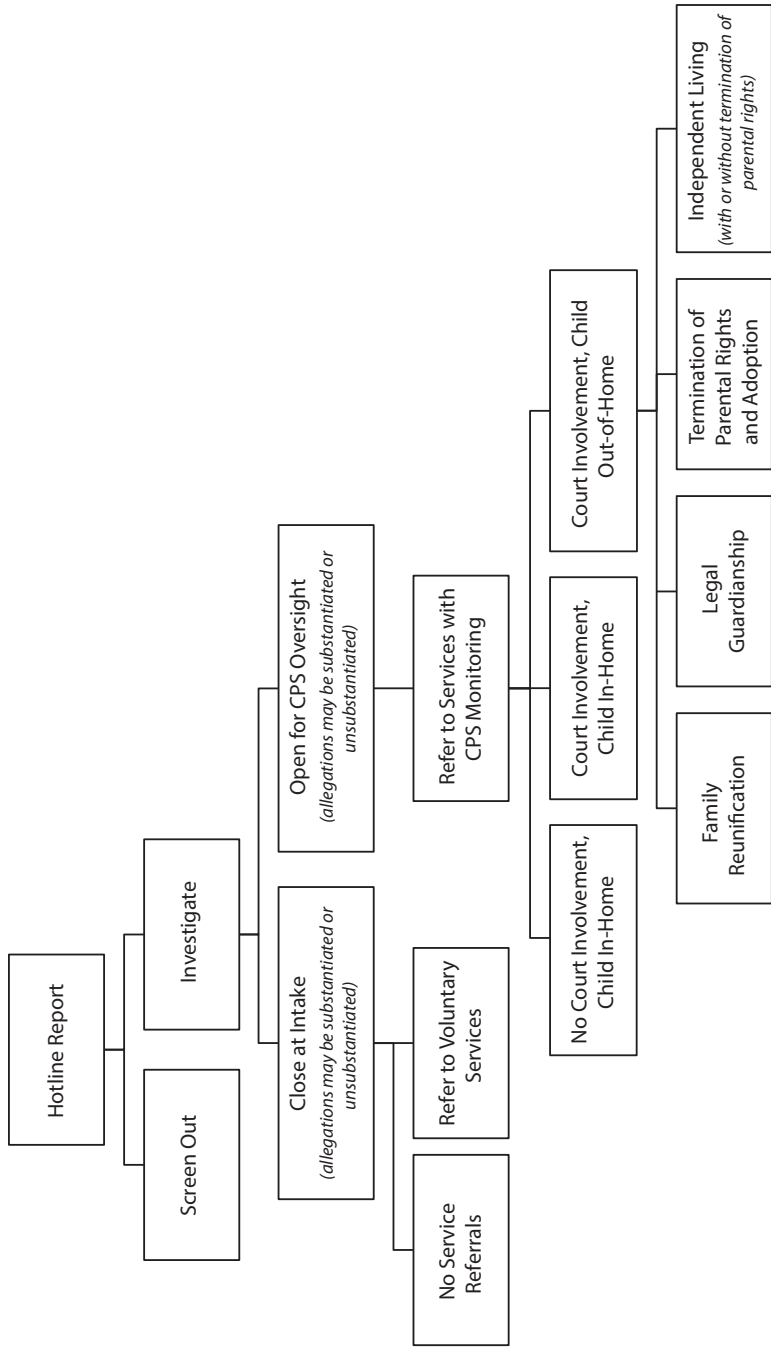


FIGURE 1. Child Protective Services Case Flow.

such as doctors, police officers, teachers, mental health clinicians, and childcare providers, to report suspected maltreatment. Most reports, approximately two-thirds, originate from these professionals mandated to report.³⁴ But anyone can file a report—friends, neighbors, relatives, and strangers—meaning that everyone a parent meets could, potentially, turn them in to CPS.

CPS screens incoming calls to decide whether to respond. So in Jazmine's case, hotline staff at the agency's central office in Hartford listened to her case manager recount the incident. Upon determining that the allegations fell within Connecticut's definitions of maltreatment, specified in civil statute, staff sent the case to the New Haven office to investigate. (Some CPS agencies, including Connecticut's, assign reports to different types of responses, but as I will discuss, this may be a distinction without much of a difference for families.) If hotline staff instead "screened out" the case, Jazmine wouldn't hear from CPS.

Jazmine's case, like other incoming reports, was assigned to a CPS staff member to investigate.³⁵ This investigator would visit Jazmine and her son at home multiple times during the investigation, interviewing household members and others involved with the family. Had Jazmine's case involved allegations of severe maltreatment constituting violations of criminal law, CPS might work alongside police investigators. In any event, the investigator could refer Jazmine to social services based on what he learned; he might also offer advice on things like alternative discipline techniques. Throughout the investigation—in Connecticut, approximately six weeks—the investigator would document his notes in the case record and discuss the case with his supervisor. If at any time they felt that Gabriel was unsafe at home, they could take custody of him on an emergency basis, until the local family court decided whether to return Gabriel home or keep him in foster care.

At the conclusion of the investigation, Jazmine's investigator and his supervisor would determine whether they had found sufficient evidence to substantiate (i.e., confirm) the allegations of abuse or neglect.³⁶ They would also decide whether to close Jazmine's case or keep it open for ongoing oversight. If the case closed, CPS would stop visiting unless another report came in; CPS could still make service referrals but would not monitor the family's participation.

In cases kept open after investigation, CPS may take custody of children or children may remain home. Either way, CPS devises a "service plan," directing family members to participate in services such as drug treatment and family therapy, usually through private providers that contract with the state to

provide these services. The service plan is not restricted to services pertinent to the initial maltreatment allegations, and CPS can modify it at any time. A CPS caseworker visits regularly, usually at least monthly, to oversee parents' compliance with this plan.³⁷ Participation in services is voluntary only in the most technical sense. As CPS wants parents to address the agency's concerns, the agency escalates (or winds down) its involvement based on parents' compliance. In other words, to get children home or to keep children at home, parents must do what CPS says.

To get a court order requiring that parents participate in services or to take custody of children, CPS files a petition in family court. There, a judge determines whether the agency has shown sufficient evidence of child maltreatment, as defined by state statute. Judges can order children's removal from home (or continued placement out-of-home) as well as children's return home. In these civil child protection cases, judges have wide latitude—much more so than in criminal court—to impose all manner of additional conditions as they review case progress, from ordering parents to participate in a particular service to requiring that CPS visit the family more frequently.³⁸

For children removed from home, CPS arranges for their placement with relative caregivers, with foster families, or in group care. These cases can stretch out for years, until courts ultimately order reunification with parents, adoption, or another permanent living arrangement. In some instances, courts—petitioned by CPS—permanently and involuntarily terminate parental rights, among the most substantial ways the government reshapes families.

Precarious Motherhood

Jazmine's home health aide job was supposed to be full-time, but in the month before CPS came by, she worked only intermittently as her client went in and out of the hospital. After losing that job, she cobbled together short-term hourly jobs in the months that followed. With the rise of these unstable, temporary labor arrangements offering few protections for workers, Pierre Bourdieu declared in 1998 that "precarity is everywhere today" (*précarité est aujourd'hui partout*).³⁹

With respect to employment, scholars argue, not only has widespread precarity transformed the nature of work, but it has also engendered an affective experience of insecurity that shapes personal, familial, and social life more broadly.⁴⁰ This insecurity extends beyond those put out of a job. As

Bourdieu contends, “Through the fear it arouses,” precarity conveys to all workers that “their work, their jobs, are in some way a privilege, a fragile, threatened privilege. . . . Objective insecurity gives rise to a generalized subjective insecurity.”⁴¹

For Jazmine and others like her, precarity characterizes *motherhood* as well. Just as precarious workers cannot feel completely secure in employment, precarious mothers cannot feel completely secure as parents. State agents can take their children, and there isn’t much they can do to stop it.⁴²

Recognizing this precarity shifts our attention from family separation to the looming *threat* of separation. When people think of the child welfare system, it’s typically the system’s most extreme intervention that comes to mind: taking children. The titles of Dorothy Roberts’s landmark books on the system—*Shattered Bonds*, *Torn Apart*—evinced this emphasis. Ethnographic research by Jennifer Reich and Tina Lee has powerfully illuminated the perspectives of parents working to reunify with their children.⁴³ As in the realm of work, though, loss is only part of the story. Just under 6 percent of children subject to CPS investigations enter foster care in the period following the investigation.⁴⁴ Six percent isn’t trivial; it represents hundreds of thousands of children. But foster care isn’t the typical experience.

Instead, lower-level investigative contacts are increasingly the face of CPS. At the turn of the twenty-first century, approximately 300,000 children entered foster care annually. Two decades later, that number dropped to 250,000, a decline of 18 percent.⁴⁵ In some cities, such as New York, foster care populations shrank even more dramatically: The number of New York City children in foster care fell from 40,000 in the mid-1990s to 8,000 in 2019.⁴⁶ Yet foster care declines have not been met with a concomitant decline in investigations. In New York City, the number of investigations fluctuated between 50,000 and 60,000 during the same period. Nationwide, as Figure 2 shows, investigation rates have actually increased in recent decades.⁴⁷ In 1996, 3.6 percent of children experienced a CPS investigation. By 2019, this stood at 4.7 percent.⁴⁸

All these investigations don’t mean that millions of parents are abusing their children. Recall that child maltreatment is a subjective designation, one easily applied to manifestations of poverty, adversity, and racism. Even in CPS’s own estimation, a substantial majority of investigations conclude with no findings of maltreatment: Over 80 percent of children subject to investigations are not deemed victims of abuse or neglect following CPS’s investigation.⁴⁹ These cases aren’t necessarily false reports; CPS might have insufficient evidence to

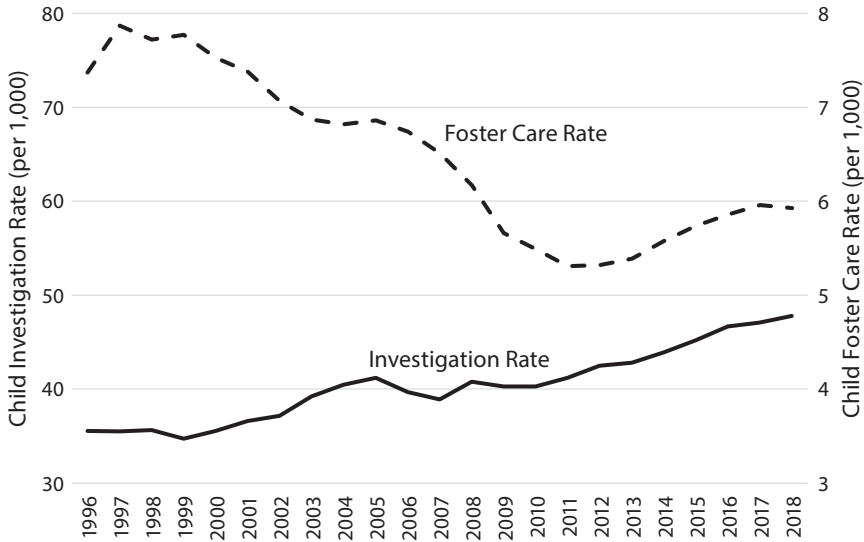


FIGURE 2. Rates of U.S. Children Subject to Child Protective Services Investigations and Foster Care, 1996–2018. Sources: Investigation rates come from the Administration for Children and Families’ *Child Maltreatment* reports (e.g., HHS 2006b). Foster care rates come from Roehrkasse 2021.

confirm allegations or might determine that a situation does not rise to the level of maltreatment as defined in state statute. Nevertheless, the state is investigating a large and growing share of parents who—according to the investigating agency itself—do not pose a clear and present danger to their children.⁵⁰

Yet even low-level contacts can have far-reaching effects. We see this in research on the consequences of policing: People who have been arrested—even if never convicted or incarcerated—are less likely to participate in political, labor market, educational, financial, and medical institutions; even those just stopped by police for questioning report lower levels of trust in the government.⁵¹ In marginalized communities, especially Black communities, ubiquitous policing has reconfigured social relationships and heightened residents’ experiences of exclusion and injustice.⁵² Just as our understanding of the penal state would be incomplete if we overlooked policing and arrests to focus exclusively on incarceration, earlier-stage contacts are essential to our understanding of CPS. Examining what’s happening in these initial encounters brings into focus the broader threats that investigative contacts represent.⁵³ Mothers may have

what they cherish—the ability to raise their children—but this hold is tenuous and provisional.

The precarity that permeates motherhood on the margins isn't inevitable—it's actively cultivated and negotiated. As scholars have done with precarious work, we can trace the public policy logics and routine practices undergirding widespread insecurity. We can also examine people's reactions to this arrangement to understand how precarity shapes subjective experiences and social life.

A Threatening Institution

It might seem counterintuitive that an agency touting *protection* and *services* could generate widespread precarity. But this is neither accidental nor incidental; threatening parenthood, especially motherhood, is fundamental to CPS. The agency may aim to assist children and families, but it does so with the authority to separate families and with a focus on parental faults.

Those without much exposure to CPS may not think of it as a threatening institution. After all, the agency sends out social workers, not law enforcement officers. Jazmine's investigator didn't arrive with handcuffs or a gun but, rather, a neon accordion folder stuffed with brochures about safe sleep and child development. He wore not a uniform but a polo shirt with khakis and a lanyard around his neck. He wasn't looking to lock anyone up but, instead, to connect Jazmine to social services. From frontline staff up to leaders at the highest level, CPS envisions itself as supporting child and family well-being. "Strengthening families and preventing child abuse and neglect" stands atop the mission statement of the Children's Bureau, the federal entity overseeing state and county CPS agencies.⁵⁴ Connecticut's Department of Children and Families, likewise, identifies its mission as "partnering with communities and empowering families to raise resilient children who thrive."⁵⁵ To CPS, investigations are opportunities to provide guidance, information, and social service referrals so that family challenges do not escalate. With these aspirations, CPS weaves itself into the U.S. social safety net.

Indeed, the investigator saw himself as assisting, rather than punishing, Jazmine. In line with his training, he hoped to identify and build on her family's strengths. He wanted to do what he could to help her manage her stress and improve conditions for little Gabriel. Even before Jazmine met him, though, she knew she didn't want him in her life. As she understood, CPS social workers are not just friendly visitors, serving at the pleasure of parents.

Families rarely initiate CPS contact voluntarily, and CPS's involvement ends when the agency says it does. The agency can forcibly remove children at any time and petition the court to keep them and place them wherever it likes. Thus, no matter how helpful individual CPS staff may want to be, their assistance occurs under the perpetual threat of family separation.

Alongside its power to split families up, CPS is organized around remedying wrongdoing—specifically, the wrongdoing of individual parents. It is not simply a social service agency; its intervention requires an allegation of abuse or neglect. And legal definitions of child maltreatment, which are limited to the harm inflicted by *caregivers'* actions or inactions, overlook the corporations, the elected officials, and the broader social, political, and economic structures endangering children.⁵⁶ CPS has no answer to societal neglect, as when children go hungry because wages and food assistance benefits are insufficient to cover family meals. But CPS *can* tell parents what to do differently and send them to therapeutic programs focused on things like parenting and substance use. Fixing what's wrong with parents falls squarely within CPS's domain; meanwhile, the agency can do little to fix what's wrong with the conditions under which parents are raising children.⁵⁷

These two aspects of the agency—its ability to forcibly separate families and its focus on parental faults—are immutable and inescapable. This doesn't mean that CPS never helps families or that its assistance is always disingenuous. But any help provided by CPS specifically hinges on precarity, on jeopardizing the parenting of (predominantly) marginalized mothers. As such, scholars and advocates are increasingly conceptualizing CPS as an institution of social control pursuing “family policing,” rather than “child welfare.”⁵⁸

In providing “help” through scrutiny, blame, and coercive threats, CPS epitomizes our response to poverty and adversity more broadly.⁵⁹ In recent decades, the U.S. approach to managing poverty has become particularly disciplinary and paternalistic.⁶⁰ Accessing support, such as welfare assistance, requires subjecting oneself to surveillance, monitoring, and the risk of punishment. Such practices follow from a long history of government agents evaluating mothers seeking public aid.⁶¹ What distinguishes CPS, then, is not that it scrutinizes marginalized mothers but that it puts their motherhood itself on the line in doing so. Here, mothers must meet government agents' standards not as a condition of receiving aid but as a condition of raising their children. CPS reveals a profoundly intimate side of our response to children and families in need.⁶² Threatening parenting—and mothering in particular—has become central to governmental efforts to assuage family adversity.

At first glance, such threats might seem empty and thereby inconsequential. Most CPS encounters, all told, turn out to be relatively mundane. The agency's wide reach places many families under investigation whose children will *not* be removed, whose cases will promptly close. These cases make up the bulk of CPS investigators' work; in most child welfare scholarship, they are little more than data points added to a mounting total. For mothers, though, the experience can't be pushed aside so easily, precisely because CPS represents the agency poised to brand them bad mothers, to take what they treasure most. Her investigator may have wanted to help, but Jazmine was clear: The investigation wasn't making things better. This book analyzes the implications of passing so many families like Jazmine's through an agency that polices parenting and threatens family separation.

Studying Child Protective Services

To learn how CPS intervention unfolds and how mothers experience it, I conducted multimethod, multiperspective qualitative research in Rhode Island and Connecticut. The fieldwork offers complementary data rather than a cross-state comparison: The Connecticut research provides an in-depth account of the investigation, and the Rhode Island study extends the investigative moment to understand mothers' perceptions and experiences more broadly, before and after CPS's investigation. (The appendix provides additional information and reflections on the research.)

I did not previously have any personal experience with CPS, nor had I grown up or raised children in communities where CPS involvement was common. Thus, I first wanted to listen to parents likely to be exposed to CPS so I could learn from their perspectives. In 2015, I began interviewing low-income mothers in Providence, ultimately sitting down with eighty-three mothers. Typically, they invited me into their homes, where I began by asking them to tell me the story of their lives. I followed their lead from there, generally over the course of a couple hours, probing their experiences with systems such as schools, welfare, and health care. At the end, I raised the topic of CPS, though nearly two-thirds brought it up spontaneously. We talked about what they thought of the agency and any experiences they or others they knew had had with CPS. The extent of their involvement with CPS ranged widely, from those with no personal experience to those whose parental rights had been legally terminated.

Over the next several years, I reached out to mothers periodically to follow up. I interviewed most of the Rhode Island mothers at least twice, with some

sitting down for four, five, or even more interviews. I spent additional time with some mothers, doing things like running errands together, accompanying them to court hearings and CPS meetings, and tagging along to doctors' visits. I also accessed the CPS records (or lack thereof) of over two-thirds of the Rhode Island mothers, with their permission. This follow-up enabled me to reflect with mothers on what I was learning and keep up with their lives and CPS cases. I met their new babies and visited them at new homes across the state and beyond. Some had kids removed and returned. One was shot and seriously injured outside her home. At least five, I learned, passed away.

The Rhode Island mothers' accounts of CPS investigations—especially their aversion to CPS intervention, even if CPS closed out their case—made me want to learn more about this experience. To connect with mothers during an investigation, I had to go through a CPS agency. As the appendix details, I ultimately went to Connecticut, conducting research in two field offices of the Connecticut Department of Children and Families from February to August 2018, following four months of weekly informal observations.

To understand multiple perspectives on the CPS investigation, I organized the research around focal cases. For each of thirty-seven investigations, I observed a CPS visit with the family—usually the first visit, when the investigator met the family and conducted an initial assessment—and briefly interviewed the investigator, typically on the drive back to the office. To see how mothers learned about the agency, I prioritized cases where mothers had no prior CPS history as parents. I interviewed twenty-seven of the mothers, almost all during the investigative period, and conducted follow-up interviews and/or additional observations with some of them. All but one of the mothers interviewed granted me access to their CPS records. I also interviewed thirty-eight local professionals required to report suspected maltreatment to CPS; most had reported one of the focal cases, and others were recruited separately.

When I wasn't doing the case-specific fieldwork, I spent time with investigators at the two offices: one covering the city of New Haven and the other covering twenty small towns in Connecticut's "Northeast Corner." In both places, CPS occupied two floors of a larger building—a towering box of an office building by the harbor in New Haven and a former nineteenth-century cotton mill in the Northeast Corner. At the public entrances, guarded by security staff with metal detector wands, visitors arrived to rooms set up for parents to spend time with children placed out-of-home. In the staff-only area, each division—investigations, ongoing cases, foster care and adoption,

trainees, adolescent cases—had its own section of the office where frontline staff worked in cubicles, with supervisors and managers in offices nearby. Frontline staff spent their office time doing administrative work like typing up notes and making phone calls. Sitting beside them, I did the same, writing field notes and trying to schedule interviews. I shadowed investigators on visits with dozens of other families and chatted informally with them in the car and in the office. I also attended training sessions, staff meetings, and office celebrations. Finally, in both states, I reviewed relevant documents, including policies, practice guides, watchdog reports, and press.

The Connecticut and Rhode Island studies both include Latina, White, and Black mothers in similar proportions. Due to my study eligibility criteria, all Rhode Island mothers had incomes qualifying them for the Supplemental Nutrition Assistance Program (SNAP). Most Connecticut mothers had low incomes as well, consistent with what we know about poverty and CPS involvement. Still, I met mothers in a range of situations. Some were experiencing substantial adversity, cycling through homeless shelters, addiction treatment, mental health services, and jail; others were relatively stable. In Connecticut, a few of the Northeast Corner mothers owned homes.

Although this book does not focus on differences across the research locations, the sites reflect some of the demographic variation in the region. Two research sites, Providence and New Haven, are higher-poverty urban areas with substantial shares of Black and Latinx residents. The Northeast Corner, nicknamed the “Quiet Corner,” consists of predominantly White small towns and rural areas with pockets of poverty—many former mill towns that supported Barack Obama and then Donald Trump.

Of course, no two states can stand in for the nation. Both Connecticut and Rhode Island are small, politically liberal states that have expanded Medicaid, offer relatively robust social services, and provide higher welfare benefits than most others. Thus, although the cost of living in these places is also relatively high, the study sites may represent a best-case scenario for low-income families. CPS report rates in Connecticut and Rhode Island are reasonably comparable to national rates, perhaps slightly higher.⁶³ The two states operate similar reporting and investigative processes, though some specific policies vary. (Most notably, since 2012 Connecticut has sent reports deemed lower-risk to a “family assessment” track intended to focus more on families’ service needs; Rhode Island added a similar track in 2018, after most of my interviews there.) Foster care rates are similar to national rates in Connecticut and higher in Rhode Island.⁶⁴ In both states, as nationwide, children of color are

disproportionately represented in the child welfare system, even as agencies intervene with many White families as well.

Consistent with national patterns, most cases in the Connecticut study closed after investigation, with maltreatment allegations unsubstantiated and children remaining home. And most of the Rhode Island mothers had never lost custody of their children. So although chapter 6 turns to mothers' experiences with child removal, this is not primarily a book about severe maltreatment or foster care. Instead, it is a book focused on the *threat* of foster care and child removal that low-income mothers navigate.

Additionally, though the research included some observations and conversations with other family members, I focus on mothers, typically the primary emphasis of CPS's investigation. This is not a book about children but, rather, about their caregivers, whose experiences with CPS matter for child well-being because nearly all children remain home after CPS investigates and even those removed usually return home. Fathers likely have different experiences, given the gendered nature of CPS intervention,⁶⁵ and many children are raised by extended family or community members whose perspectives on CPS might differ. My focus on mothers does not imply that these other actors are unimportant. But I begin with mothers as those whose behavior is most often subject to CPS investigation, whose situations are most often constructed as suspected maltreatment.

Overview of the Book

How do families like Jazmine's come to CPS's attention? What happens during the ensuing investigative encounters? And how does CPS intervention ultimately affect mothers, from those who haven't been investigated at all to those whose children CPS removes? This book takes readers through mothers' experiences with the agency, beginning outside of CPS intervention, through the report and investigation, and finally, deeper into the system. Although the chapters incorporate analysis and examples from both states, chapters 1 and 6 draw primarily on data from Rhode Island, while chapters 2–5 are based largely on the Connecticut research.

Beginning in Rhode Island, chapter 1 demonstrates how the specter, the possibility, of CPS renders mothering in the context of poverty and adversity precarious. Even self-identified "good mothers" worry about CPS, given their attachment to motherhood and what they have heard about the system. As I

show, the prospect of CPS intervention shapes mothers' engagement with children, social relations, and social service providers in ways that can undermine the social and institutional connections that are so critical to child and family well-being.

Chapter 2 examines how so many marginalized families get shuttled to CPS. Reports to the agency typically center on family adversity in some form or perhaps a family straying from professionals' expectations. But CPS reports are not automatic or inevitable responses to these conditions. Shifting to Connecticut, the chapter traces the social production of CPS reports, showing how reports emerge because people see CPS as a tool to address social problems. Callers, usually frontline service professionals, rarely think that children are in grave danger but summon CPS hoping that the agency can rehabilitate and regulate families. Individual, organizational, and systemic racism and classism structure the reporting process to bring marginalized families in particular under investigation.

Calls to the CPS hotline launch a bureaucratic process organized around abuse and neglect. Like a machine programmed to respond a certain way, CPS's fundamental role and capacities structure how it proceeds and how mothers react, regardless of whether the agency finds evidence of maltreatment. The following three chapters trace how—even as the agency may aspire to partner with families to promote child well-being—the ensuing response organizes “help” around surveilling, evaluating, and correcting mothers, making motherhood precarious.

Chapter 3 takes us to CPS's arrival at the door—a terrifying moment for mothers, given CPS's power to separate their families. During investigations, CPS leans on its role spanning care and coercion to probe all aspects of mothers' personal lives. Chapter 4 examines how CPS uses the information it gathers to assess mothers. Attuned to how parents' past and present situations may predict future harms to children, CPS casts family needs as risks, shifting the most marginalized families deeper into the system. Social and economic precarity thus begets motherhood precarity.

And yet, CPS hopes to help families in need. Chapter 5 considers the assistance on offer. Many investigated mothers appreciate CPS's efforts to help them, but the agency's focus on parental wrongdoing makes it ill-suited to address families' chronic material needs, and any aid offered comes with the possibility of coercive intervention. Furthermore, even when mothers appreciate their investigators' assistance, investigations threaten mothers' privacy,

their autonomy, and their very identity as mothers. As such, mothers come to distrust whoever they believe called CPS in the first place. In these ways, even as CPS may offer the promise of help, it ends up perpetuating marginality.

Mothers drawn more deeply into the child welfare system find the experience especially traumatizing. Here, precarity turns to loss and grief. Chapter 6 returns to Rhode Island to follow mothers as they lose custody of children, work toward reunification, go to court, and try to stave off the termination of their parental rights. Even with zealous advocacy, mothers' experiences with the system usually leave them feeling increasingly cynical and disempowered, reinforcing their marginal social status.

The book concludes by drawing out what these mothers' experiences mean for scholarship and public policy. I imagine few of us would want to leave Jazmine and Gabriel alone to fend for themselves. We want Gabriel to have a safe, healthy childhood. As it stands, we send state investigators into the home in pursuit of this goal, targeting motherhood itself. This means that in addition to navigating economic and social precarity, mothers on the margins of society must also reckon with their precarious motherhood. Ultimately, relying on an entity organized around parents' faults and imbued with coercive authority as our first-line response to family adversity has profound implications for mothers and, by extension, their families. Once we recognize this, we can ask whether protecting Gabriel requires destabilizing Jazmine's motherhood or how we could, instead, better support it. Reflecting on what the women I met shared with me highlights fundamental limitations of CPS as a response to family adversity. The present child welfare system undoubtedly helps some families, but the question is at what cost—and whether we can do better.

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