



Article

Understanding a Parent's Visitation Capacity After a Care Order

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Abstract: The ability of parents to maintain visitation with their child after a care order is a complex aspect of child welfare. While visitation is widely recognized as essential for preserving family bonds and supporting potential reunification, less attention has been given to how broader life circumstances influence a parent's ability to engage in visitation. This study explores how parents describe their life situation after a care order and examines how different contextual factors may relate to their visitation capacity. The study employs thematic analysis based on interviews with 31 parents whose children were placed in public care. The findings reveal that parents face multiple barriers that affect their ability to sustain meaningful contact with their child, including emotional and psychological strain, social isolation and stigma, trust and cooperation challenges, and shifting parent–child relationship dynamics. Many parents described profound distress following the care order, marked by anxiety, grief, and loss of parental identity. Additionally, strained relationships with child welfare professionals, inconsistent expectations, and systemic barriers further complicate their efforts to remain engaged. These findings highlight that visitation capacity is not merely a matter of legal access but is shaped by broader life circumstances, emotional resilience, and institutional support structures.

Keywords: child welfare; visitation capacity; public care; parent–child relationship



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1. Introduction

This study examines how different contextual factors may relate to parents' visitation capacity when their child is living in public care following a care order within a Norwegian context. Visitation between parents and children following a care order is widely recognized as a key mechanism for maintaining family bonds and supporting the possibility of reunification (Balsells et al. 2014; Haight et al. 2001; Stang et al. 2023). Visitation is also a legal right, anchored in Article 8 of the European Convention on Human Rights and reflected in the Norwegian Child Welfare Act. The Convention is incorporated into Norwegian law and forms part of the legal basis for assessing contact between parents and children after a care order. Within this context, visitation refers to scheduled, face-to-face contact between parents and their children in foster care, serving as a primary intervention to preserve and strengthen the parent–child relationship (Haight et al. 2003). Research has shown that consistent and high-quality visitation is associated with positive outcomes, particularly for children, as it can promote emotional well-being, reduce trauma, and foster a sense of stability during out-of-home placement (Haight et al. 2003; Smariga 2007; Mallon and Hess 2005). Maintaining frequent contact has also been found to support parent–child attachment and mitigate the sense of abandonment that children often experience following removal from their home (Mallon and Hess 2005). Beyond its emotional benefits, visitation

has improved child welfare outcomes, including shorter stays in out-of-home care and an increased likelihood of reunification when it aligns with the child's best interests (Mallon and Hess 2005; Hess 2003).

However, for parents, engaging in visitation following a care order may involve multiple emotional, practical, and systemic challenges. Research has documented how parents whose children have been placed in out-of-home care often experience profound distress, including grief, shame, stigma, and loss of parental identity, which may shape how they navigate life after child removal (Eriksen 2024; Suomi et al. 2023; Tembo and Studsrød 2018; Aamodt and Olkowska 2023). Many parents describe the removal as a profoundly traumatic event, requiring them to cope with both the emotional distress of separation and the pressures of demonstrating parental capability (Lalayants and Saitadze 2025; Suomi et al. 2023; Syrstad and Slettebø 2020; Wissö et al. 2024). The loss of custody has been characterized as a form of disenfranchised grief, meaning that parents' mourning is often unrecognized or dismissed by society (Doka 2002; Janzen and Melrose 2013; Schofield et al. 2011). Some parents experience this loss as ambiguous grief, where the child is physically present but psychologically absent from their daily lives, reinforcing feelings of anxiety, guilt, and identity disruption (Memarnia et al. 2015). Parents in these situations often face social isolation and a lack of formal and informal support systems, leaving them without critical resources for coping (Haight et al. 2017; Kenny and Barrington 2018; Said-Salem and Wilde 2022). Studies have shown that some parents withdraw from social interactions due to stigma, fearing judgment from family, friends, and professionals (Kenny and Barrington 2018; Lalayants et al. 2015). Others report struggles in their relationships with child welfare professionals, describing experiences of power imbalances, inadequate communication, and a lack of emotional support from caseworkers (Memarnia et al. 2015; Syrstad and Slettebø 2020; Wissö et al. 2024). Parents have expressed frustration with child welfare interventions that feel bureaucratic and detached rather than offering meaningful guidance on maintaining their role as a parent after a care order (Schofield et al. 2011; Kenny and Barrington 2018).

Although social workers are expected to facilitate visitation, research suggests that parents often experience a controlling rather than supportive relationship with child welfare authorities, leading to strained communication and mistrust (Otterlei and Engebretsen 2021; Revheim et al. 2025). The collaborative climate between parents, foster carers, and social workers can be decisive in shaping parents' perceptions of their role after child removal. Some studies indicate that when cooperation is constructive, parents feel more included in decisions about their child, whereas strained relationships may reinforce feelings of exclusion and hopelessness (Aamodt and Mossige 2014; Aamodt and Sommerfeldt 2022). Recent studies emphasize that social workers play a key role in preparing and supporting parents, providing emotional, logistical, and relational guidance (Bernedo and González-Pasarín 2024; Burtch et al. 2024; Fuentes et al. 2019). At the same time, parents' experiences with visitation vary significantly. Some parents describe visitation as a source of hope and connection, while others experience distress and frustration, mainly when interactions are shaped by external supervision or limited opportunities for meaningful engagement (Haight et al. 2017; McDowell et al. 2019; Van Holen et al. 2020). For some, visitation represents their only remaining connection to their child, motivating them to stay engaged with child welfare services (Kenny and Barrington 2018; Memarnia et al. 2015). However, research has also shown that when visitations are infrequent, unpredictable, or highly structured, they can contribute to additional stress and emotional strain for parents (Haight et al. 2001; McDowell et al. 2019).

While there is a growing body of research on how parents experience life after a care order, less attention has been given to how these broader life circumstances and contextual

factors shape their ability to engage in visitation. Addressing this knowledge gap, this study explores how parents describe their life situation after a care order and examines how different contextual factors may relate to their visitation capacity.

Understanding Visitation Capacity

In the context of child welfare, visitation capacity refers to parents' ability to plan, initiate, and sustain contact with their child after a care order in a way that supports the child's well-being and development. This capacity encompasses knowledge, attitudes, skills, and practical competencies that enable parents to engage in visitation constructively. It is shaped by practical and material conditions, emotional and psychological stability, relational dynamics, and access to external support systems (Koch and Walstad 2005). To ensure that visitation remains beneficial, parents must be able to navigate logistical challenges, maintain a supportive presence, and engage in interactions that foster the child's sense of security and continuity (Balsells et al. 2014; Haight et al. 2001; Stang et al. 2023). While visitation capacity is not a fixed trait, it is influenced by broader life circumstances, which may support or hinder parents' ability to engage in sustained contact with their child.

As a theoretical foundation, this study applies Antonovsky's Sense of Coherence (SOC) framework (Antonovsky 1987, 2012) to explore how parents' life circumstances after a care order shape their ability to engage in visitation. SOC offers a perspective on how individuals interpret, manage, and find meaning in their experiences, providing an analytical lens for understanding how people navigate challenging life circumstances (Lindström and Eriksson 2015; Idan et al. 2017). This framework enables a structured discussion of how various life circumstances may influence parents' ability to engage in visitation. SOC consists of three interrelated dimensions, comprehensibility, manageability, and meaningfulness, which shape how individuals experience and respond to adversity (Antonovsky 1987, 2012). These dimensions function as an integrated system, where a weakened sense of one component may influence the others, affecting an individual's overall ability to cope with challenging situations and stressors (Kristensen et al. 2021; Moksnes 2021).

Comprehensibility refers to how individuals perceive their surroundings and life events as structured, predictable, and understandable (Antonovsky 1987, 2012). When individuals can make sense of their circumstances, they are better equipped to interpret the demands placed upon them and anticipate what is expected (Lindström and Eriksson 2015). A high level of comprehensibility is associated with clarity, consistency, and transparency in the information and support systems people rely on (Moksnes 2021; Nes et al. 2021). Conversely, when events appear chaotic, arbitrary, or challenging to comprehend, individuals may struggle to establish a sense of orientation and coherence (Antonovsky 2012).

Manageability refers to individuals' perception of having adequate resources to meet life's demands, whether through internal coping abilities or external support structures (Antonovsky 1987, 2012). People with a strong sense of manageability view challenges as surmountable because they believe they have—or can access—the necessary support (Lindström and Eriksson 2015; Idan et al. 2017). This may include practical, social, financial, and institutional resources that help individuals sustain engagement in different life domains (Nes et al. 2021). When people perceive that their capacity to handle difficulties is insufficient, they may experience feelings of helplessness and disengagement (Kristensen et al. 2021; Moksnes 2021).

Meaningfulness is the motivational component of SOC and refers to the extent to which individuals perceive life's challenges as valuable and worth engaging with (Antonovsky 1987, 2012). It is closely tied to one's sense of purpose, emotional investment, and motivation to persist despite difficulties (Lindström and Eriksson 2015; Kristensen et al. 2021).

When individuals find meaning in their situation, they are more likely to mobilize resources and take action to influence their circumstances (Moksnes 2021). Conversely, if people perceive their role as insignificant or their efforts as futile, their motivation to engage in challenging processes may weaken (Idan et al. 2017; Nes et al. 2021). Antonovsky (2012) highlights meaningfulness as particularly central to coping, as it determines whether individuals see adversity as worth investing effort in.

Although these three dimensions are conceptually distinct, they are interdependent and influence one another dynamically (Antonovsky 1987, 2012). A weakened sense of comprehensibility, manageability, or meaningfulness can reduce a person's overall capacity to cope, while reinforcing factors can strengthen engagement (Lindström and Eriksson 2015; Kristensen et al. 2021). In the context of visitation between parent and child, after a child is moved to public care, these dimensions provide a framework for exploring how parents' broader life experiences following a care order may relate to their visitation capacity.

2. Methods

This study explores how parents describe their life situation after an involuntary care order and examines how different aspects of this situation may influence their capacity for visitation. Information about the study and an invitation to participate were administered via a random selection of child welfare services and email outreach to various organizations that may have contact with parents with children placed in public care. Of the 34 parents who expressed interest in participating, 31 met the criteria of having at least one child in public care during the interview. The data are based on interviews with these 31 parents, who collectively have experienced the removal of 48 children aged from newborn to four years old at the time of removal into public care. Some of the children were placed in kinship care, while others were placed in regular foster homes.

The parents in the study are from different child welfare services across the country. All parents cited 'emotional neglect' as the reason for the care order. When asked follow-up questions, most parents clarified that there were no issues of substance abuse, violence, or practical caregiving deficiencies. However, some described domestic violence as contributing to their lack of care capacity. None of the parents consented to the care order. A few of the parents who had experienced involuntary care orders related to more than one child had children placed by different child welfare services due to varying municipalities at the time of the placement. As such, they received follow-ups from both municipalities.

2.1. Data Collection

This study used semi-structured interviews to explore how parents' life situation after a care order may influence their capacity for visitation. Parents were invited to reflect on their experiences, starting when their child was removed, and share how their lives have changed. The semi-structured format allowed for flexibility, with follow-up questions tailored to the themes and reflections that the parents themselves introduced. The focus was on understanding how different aspects of parents' life situations after a care order relate to their capacity for visitation. The questions aimed to explore how these experiences influenced the parents' ability to engage in visitation. The interviews ranged from 35 min to 2.5 h, with an average duration of 1 h and 45 min per interview. One interview was conducted over two sessions, as the parent reached out after the first interview to share additional reflections and insights.

2.2. Analysis

The analysis in this study is structured in two phases: (1) an empirical thematic analysis, which presents a descriptive account of parents' experiences, and (2) a theoretical

analysis, which is conducted in the Discussion section, where these descriptions are examined in relation to visitation capacity. Inspired by [Braun and Clarke \(2021\)](#), a thematic analysis explored how parents describe their life situation after a care order. The analytical process began with an in-depth review of the transcribed interviews to gain familiarity with the data. An inductive coding process focused on how parents narrated their everyday experiences following the care order. The coding aimed to capture key aspects of their lives, as well as their reflections on how these experiences had shaped their lives over time.

In the initial coding phase, key phrases and descriptions were systematically highlighted to identify recurring patterns across the interviews. These initial codes were then organized into broader categories representing central elements of the parents' narratives. The analytical process was iterative, with categories refined and reorganized through multiple rounds of analysis to ensure they accurately reflected the data. As the analysis progressed, these categories were synthesized into four overarching themes that capture essential aspects of how parents describe their life situation after a care order: (1) emotional and psychological strain, (2) social isolation and stigma, (3) trust and cooperation challenges, and (4) parent-child relationship dynamics. These themes form the foundation for the Discussion, where they are examined in relation to visitation capacity using [Antonovsky's \(2012\)](#) Sense of Coherence framework.

2.3. Ethics

This study was conducted following the ethical guidelines for research in social sciences and humanities (NESH) and was pre-approved by the Norwegian Agency for Shared Services in Education and Research (SIKT; reference numbers 387879 and 454360).

3. Results

The analysis identified different aspects of how parents describe their life situation after a care order. While the themes highlight distinct dimensions of their experiences, they often intersect and influence one another, reflecting the complexity of their everyday lives. The following sections present the analysis of each theme.

3.1. Emotional and Psychological Strain

This theme highlights the emotional burden described by parents in this study, including experiences of anxiety, grief, and psychological strain following the care order. Several parents described the care order as a profoundly disruptive event that led to a lasting sense of emotional vulnerability. Many expressed feeling as though they were living in a state of heightened vigilance and fear, shaped by their interactions with child welfare services and the perception of being under constant scrutiny.

A recurring theme in parents' descriptions was the fear of being monitored and judged. Many felt they were under constant surveillance and worried their actions could be interpreted negatively. This fear extended beyond formal interactions with child welfare services and influenced their ability to navigate everyday life:

I don't dare do anything because I am afraid it will be used against me [...] every little thing I do feels like it could be held against me.

I am constantly wondering what they will catch me on next. It is exhausting. I can never just let my guard down.

You feel like everything is a test. No matter what you do, it is never good enough.

These descriptions illustrate how the sense of being watched contributed to persistent emotional distress. Several parents described feeling caught in a state of heightened alertness, which intensified their anxiety and left them mentally exhausted. Over time,

this constant sense of vulnerability became an integral part of their daily lives, making it difficult to regain a sense of emotional stability.

For some, anxiety was not just a reaction to specific events but became a recurring and intrusive thought pattern, preventing them from fully engaging in daily life, e.g., the following:

I am constantly thinking: what can they use against me now? What will they find this time? It is a recurring thought. I just cannot relax.

I always feel that anything I do could be turned against me. It is like living under constant surveillance. I can never just breathe and be myself.

I have been painted as the 'big bad wolf' who harmed my child because of my trauma [...] They never thought to help me with my trauma. I tried to be strong, but eventually, I broke.

As these reflections illustrate, several parents described how recurring thoughts of fear and self-doubt evolved into a persistent internal dialogue, leaving them mentally preoccupied and emotionally drained. Rather than a temporary reaction to stress, this emotional strain became an enduring presence, affecting their decision making, self-perception, and ability to function in daily life. Some parents described how this psychological burden led them to self-regulate their behavior excessively, fearing exposure and judgment:

I do not dare go anywhere alone. It feels like everyone is judging me.

For several parents, this emotional exhaustion narrowed their focus, making engaging in even routine tasks difficult. Many described how their preoccupation with fear and anxiety overshadowed other aspects of life, intensifying their emotional distress and further limiting their ability to move forward.

Beyond anxiety and fear, several parents also described profound feelings of helplessness, mainly when reflecting on the long-term impact of the care order on their mental well-being. These emotions accumulated over time, becoming a persistent aspect of their psychological state. In response, some parents actively sought professional psychological support as a means of coping:

Over the past year, I have been seeing a psychologist a lot because of the anxiety [...] caused by the care order.

Talking to a psychologist has been the only way I have managed to cope with everything that's happened.

I needed someone to talk to me about what I was going through. Someone who could help me understand my anger, sadness, and despair.

For several parents, professional help provided a structured space to process their experiences, but therapy was not a solution for all. Some described ongoing struggles despite receiving professional support, emphasizing that the emotional burden remained deeply ingrained.

For some, grief and powerlessness became overwhelming, making it challenging to find ways to cope. One parent likened the experience of losing custody to the death of a child, emphasizing the depth of their loss:

Losing custody is the same as your child dying. If not worse, you have to fight the child welfare services constantly.

For others, the emotional weight of the care order escalated into severe psychological distress, with one parent recounting how it led to a crisis:

I was hospitalized; I went to the emergency room because I could not cope with the pain. I just wanted to see her [the child].

These descriptions underscore how, for many parents, the psychological impact of the care order was not limited to the immediate aftermath but became an enduring struggle. Even among those who sought professional support, the path to emotional recovery was uncertain, and many described a long-term process of managing grief, anxiety, and despair. As one parent reflected:

I have repressed much from that time [...]

This reflection and many others illustrate how emotional and psychological strain did not simply fade over time but remained a persistent part of their lived experience. For some, the overwhelming emotional burden led to deep-seated distress, while others attempted to suppress or avoid confronting their emotions. The long-term effects of anxiety, grief, and self-doubt shaped how the parents perceived their ability to cope with daily life and their future prospects.

For several parents, depression and despair became an ongoing reality, making it difficult to envision a sense of stability in the future. One mother expressed this sentiment succinctly:

It is no wonder I am depressed after everything I have been through.

The emotional and psychological strain described by parents in this study was not an isolated reaction to the care order itself but an ongoing aspect of their lived experience. While some actively sought psychological help, others struggled to find adequate support or ways to cope with their emotions.

3.2. Social Isolation and Stigma

Many parents described experiencing social isolation and stigma following the care order. Relationships with family, friends, and broader social networks often changed significantly, and some parents became increasingly withdrawn from their communities. The reasons for this varied. Some described feeling ashamed and judged, while others encountered direct rejection from people they had previously relied on for support. In either case, the removal of their child was not just a private experience but something that affected how they were perceived and treated by others:

People who used to be close to me started treating me like I was dangerous. As if I had done something awful. It was like I was contagious.

I stopped being invited to family events. They do not say it is because of my child being taken, but I know that is why.

For several parents, the sense of being negatively labeled by those around them became one of the most challenging aspects of their post-care order experience. Some described how their identity as a parent was fundamentally altered in the eyes of others, reducing them to a single, stigmatized status, a person who had lost custody of their child. Whether people expressed this explicitly or subtly distanced themselves, parents often felt that they were viewed differently than before:

People do not see me as a mother anymore. They see me as someone who failed, someone who lost her child.

I feel like everyone has a version of me in their head, and it is not based on who I really am. It is based on what they have heard.

Even the people who were kind to me started treating me differently. It was like they were afraid to be too close.

The feeling of being judged and misunderstood affected how parents saw themselves and how they engaged with others. Some withdrew from social interactions, fearing being

confronted, pitied, or treated differently. Several parents described how they actively avoided certain places and social situations, not wanting to face people's reactions:

I do not go to the same places anymore. I cannot handle the way people look at me.

Everywhere I go, I feel like people are whispering about me. Even if they are not, I cannot shake the feeling.

These descriptions highlight how stigma was externally imposed and internally reinforced. The fear of judgment led some parents to withdraw voluntarily from social situations, which further deepened their sense of isolation. This process created a cycle of avoidance, where parents, in trying to protect themselves from external stigma, became more socially disconnected.

Beyond feelings of judgment, several parents experienced a tangible loss of social support after the care order. Relationships that had once provided stability, family, close friends, and even workplace connections were often disrupted or lost entirely. Some parents described how people distanced themselves, either because they disagreed with the parent's actions or because they did not know how to offer support:

I thought my family would be there for me, but they just stopped calling. It was like they did not want to be associated with me anymore.

Friends who used to be there for me disappeared. I guess they did not know what to say, or maybe they believed I deserved this.

Even my coworkers stopped talking to me about anything personal. It was like I had become a stranger overnight.

For some, the breakdown of relationships was not just about distance but blame. Some family members openly expressed that they held the parents responsible for the situation, reinforcing feelings of guilt and shame:

They told me it was my fault. I should have done better, and if I had been a good mother, none of this would have happened.

My own sister told me she was ashamed to be related to me.

Experiences of rejection or blame contributed to a deep sense of abandonment, leaving some parents feeling as though they had lost not only their children but also their broader social connections. The people they had expected to stand by them in a time of crisis had instead turned away, amplifying their isolation.

Over time, this sense of rejection and judgment led some parents to withdraw from social interactions entirely as a protective mechanism. Rather than risk unsolicited advice, painful conversations, or further disappointment, some chose to limit contact with others:

I avoid people now. I do not want to have to explain myself. I do not want their opinions or their pity.

It is easier to be alone than to feel like you constantly have to justify yourself.

For many, this self-imposed isolation became an ongoing pattern, reinforcing their feelings of being alone and disconnected from the world they were once part of. Some parents described how isolation eventually became easier than trying to rebuild relationships that felt fragile or conditional:

I stopped trying after a while. It was exhausting, and I always wondered if people were judging me.

Despite these challenges, some of the parents tried to reconnect with others over time. A few described actively seeking out new networks where they could feel understood,

mainly through support groups or spaces where they could connect with people who had similar experiences:

The only people I feel comfortable talking to are the ones who understand what it is like—other parents who have been through this.

Joining a support group was the first time in a long time I felt like I could be myself.

However, even for those who actively tried to re-establish social connections, the fear of being judged remained a persistent barrier. The stigma they had internalized made it difficult to reintegrate into their communities fully, and for some, isolation became a long-term reality rather than a temporary phase.

3.3. Trust and Cooperation Challenges

For many parents, navigating their relationship with child welfare services after a care order was a source of deep frustration and emotional strain. While some initially hoped cooperating with authorities could lead to better outcomes, many felt their involvement offered little influence over decisions affecting their lives. Rather than experiencing cooperation as a dialogue, several parents described it as a process where they were expected to comply without having their perspectives valued.

A recurring sentiment among parents was that cooperation felt one-sided, with expectations placed on them but little effort made to understand their circumstances. Some described how they had followed instructions and completed requirements, only to feel that their efforts were disregarded. This created a growing sense of futility, as the power imbalance made it difficult to believe that participation in the process could change anything:

I did everything they asked me to do, but it never seemed to matter. They had already decided what kind of parent I was.

I tried to cooperate—I really did—but no matter what I said, my words were meaningless.

I wanted to prove I was a good parent, but they had already judged me before I spoke.

For some, this perceived lack of reciprocity made maintaining trust in the system complex. When communication felt one-sided, cooperation often felt like an obligation rather than a meaningful dialogue. Some parents described attending meetings or following directives not because they believed it would improve their situation but because they feared that non-compliance would be held against them:

If I don't show up or say the right things, they will use that against me. However, when I do show up, I feel like it does not make a difference anyway.

Cooperation is not really cooperation when you have no choice.

They tell you to work with them, but it is just about proving that you agree with what they already decided.

In addition to feeling unheard, several parents struggled with conflicting information and unclear expectations. Some described being given contradictory advice or unrealistic goals, which left them feeling set up to fail. This uncertainty made it difficult for them to understand what was expected of them, reinforcing their sense of frustration:

One person tells me one thing, and another tells me something completely different. How am I supposed to know what to do?

They said I needed to show that I was capable. But what does that even mean? How do I prove I am 'good enough' when I do not know what they want?

For many, the breakdown in trust extended beyond communication; it shaped their entire perception of child welfare services. Some parents initially believed that social workers were there to help them, only to feel later that the system was working against them rather than with them. This shift often occurred when parents felt that decisions had already been made about them, regardless of their actions or engagement:

I used to believe they wanted to help. Now, I see they do what they think is best, and nothing I say will change that.

I feel like they had already written my story before they even met me.

The lack of transparency in decision making further eroded trust for many parents. Some described feeling excluded from discussions about their situation, only learning about decisions after they had already been made:

They talk about my case but not to me. I find things out afterward, as if my opinion does not matter.

I am expected to cooperate but not even be part of the conversations.

For some, the sense of being powerless in the face of the system led to a complete withdrawal from attempts at cooperation. A few parents described how they eventually stopped trying to engage, believing that nothing they did would make a difference:

I gave up. I stopped fighting because no one was listening anyway.

I went to meetings because I had to. But at some point, I stopped believing anything would change.

Despite these experiences, some parents still held onto a degree of hope that cooperation could be meaningful—but only if it were based on mutual respect and open dialogue. They emphasized the importance of being treated as a participant in the process rather than a passive subject:

Things might have been different if they had listened and worked with me instead of against me.

I did not need them to agree with me. I just needed to feel like my voice mattered.

For many, however, trust had already been too deeply fractured, making cooperation feel like a formal requirement rather than a genuine opportunity for engagement. The expectation to comply remained, but for several parents, any belief in a constructive partnership had long since faded.

As trust in the system weakened, many parents found themselves feeling increasingly disconnected, not only from child welfare services but also from their social surroundings. For some, the experience of being excluded from decision making extended beyond professional encounters and into their relationships with family, friends, and the broader community. The emotional toll of feeling unheard and powerless often deepened their sense of social isolation, reinforcing feelings of stigma and disconnection from others.

3.4. Parent–Child Relationship Dynamics

For many parents, maintaining a meaningful relationship with their child after a care order was one of the most emotionally complex and challenging aspects of their new reality. While some parents described efforts to preserve their bond despite the restrictions imposed by the care order, others struggled with limited contact, shifting dynamics, and the emotional distance that developed over time. The transition from being a primary caregiver to a visiting parent often required a complete redefinition of their parental role, leaving many parents feeling uncertain about how to remain present in their child's life.

A central challenge for many parents was the structured and time-limited nature of visitation, which fundamentally altered how they could interact with their children. Several parents expressed frustration that their once-natural and spontaneous relationship had been reduced to scheduled meetings, often in unfamiliar or supervised settings. The presence of professionals during visits contributed to a sense of being observed and evaluated rather than allowing for a free-flowing connection between parent and child:

Before, we would just be together, like any parent and child. Now, it feels like every meeting is staged, as if we are playing roles instead of just being ourselves.

I want to be there for them like I used to, but how do you parent in two-hour sessions once a month, with someone sitting there taking notes?

These accounts highlight how visitation under formalized conditions removed the casual, everyday interactions that typically define a parent–child bond. Instead of comforting a child during a difficult moment, sharing small joys, or engaging in routine caregiving, visits often felt like isolated events that lacked the organic closeness of family life. The restrictions made it difficult for some parents to express their parental role in ways they were accustomed to, creating a sense of distance between them and their children.

This emotional distance was noticeable for some parents in their child’s behavior during visits. They described subtle but painful changes in how their child responded to them, often interpreting these shifts as signs of growing detachment or confusion. Children who had once sought comfort from their parents now hesitated, uncertain of how to behave in the structured visitation setting:

She used to run into my arms, but now she stands there, waiting. It is like she does not know how to act around me anymore.

I see that he is holding back. He is polite, but it is different now, like there is a wall between us.

These moments reinforced a deep-seated fear that their bond with their child was weakening. Some parents worried that the longer they spent apart, the more their child would begin to see them as a distant figure rather than a parent. The slow transformation from an everyday caregiver to an occasional visitor left some feeling powerless in maintaining their role in their child’s emotional world:

I used to be ‘Mommy.’ Now, I feel like I am slowly becoming someone they visit sometimes.

The long intervals between visits also made maintaining a sense of connection difficult. Some parents described feeling like they were constantly reintroducing themselves to their child, as though they were struggling to stay relevant in their everyday lives. The inability to share in routine moments, help with homework, be present for bedtime, and celebrate small achievements made them feel disconnected from their child’s evolving world:

I do not know what they like anymore, what games they play, or who their friends are. I feel like a stranger asking about their life instead of a mother knowing it.

Every time I see them, they have grown; they have changed. I was not there for those little moments, which hurt the most.

This sense of being an outsider in their child’s life was further compounded by how their child’s perception of them was shaped by what they were told outside of visits. Some parents expressed concern that their children were being influenced by narratives about them from caregivers, social workers, or even extended family members. When children repeated statements that seemed to reflect a negative framing of their parenting, it deepened parents’ anxiety that external voices were reshaping their connection:

He asked me, ‘Mom, why didn’t you care for me properly?’ And I just froze. Someone told him that. Someone gave him that idea.

She sometimes says things with little comments, and I can hear that they are not her words; they are someone else’s opinion about me.

These experiences left some parents feeling their identity was being rewritten in their absence. The idea that their child was forming a perception of them not based on their time together but on what others said about them was profoundly painful. Some feared that their child’s emotional connection to them would be shaped more by external narratives than by their lived relationship over time.

Despite these challenges, some parents found ways to preserve their connection, focusing on small but meaningful moments during visits. For some, even the simplest gestures, a shared joke, a moment of eye contact, or a hug at the end of the visit, became important reminders that their bond was still present, even if altered:

At the end of the visit, he hugged me tight and whispered, ‘I love you, Mom.’ That is what keeps me going.

However, the emotional toll of feeling distant from their child became overwhelming for others. The experience of being physically present but emotionally disconnected led some to question whether continuing visits was more painful than beneficial:

I ask myself, am I holding on for them or me? Am I making this more challenging by not letting go?

For many, the parent–child relationship after a care order remained an uncertain space, filled with moments of love, loss, and longing. While some parents fought tirelessly to sustain their bond, others wrestled with the painful reality that time, distance, and circumstances were reshaping their role in their child’s life in ways they could not fully control.

4. Discussion

The findings of this study illustrate how parents’ life situations after a care order pose a range of risks that may influence their visitation capacity. While visitation capacity is often discussed concerning legal access and procedural arrangements, this study demonstrates how emotional, social, and systemic factors create conditions that may weaken or threaten parents’ ability to engage in and sustain visitation over time. The experiences of emotional and psychological strain, social isolation and stigma, trust and cooperation challenges, and shifting parent–child dynamics highlight that visitation is not solely a question of access but also of whether parents have the capacity to engage in and benefit from the visitation process. Rather than viewing visitation capacity as a fixed trait, these findings suggest that certain life circumstances increase the risk of withdrawal or disengagement. In contrast, others necessitate structured support to sustain engagement. To analyze how these risk factors influence visitation capacity, Antonovsky’s Sense of Coherence (SOC) framework ([Antonovsky 1987, 2012](#)) provides a structured approach for examining how parents’ post-care order experiences may pose a risk to their visitation capacity.

Firstly, a significant challenge for many parents was the lack of clarity and predictability in their interactions with child welfare services. Parents frequently described conflicting information, shifting expectations, and unclear decision-making processes, which made it difficult to understand what was required of them and what role they were expected to play in their child’s life. This aligns with [Antonovsky’s \(1987, 2012\)](#) concept of comprehensibility, which emphasizes that individuals cope better when they perceive their circumstances as structured, transparent, and predictable. Parents who struggled to make

sense of systemic requirements and visitation expectations often experienced powerlessness and frustration, weakening their ability to engage constructively in the visitation process. Some parents reported being told to demonstrate parental capability, yet they lacked clarity on the assessed criteria or how their efforts would influence visitation arrangements. Others described feeling excluded from decision-making processes, reinforcing the perception that visitation-related decisions were made without their input (Lindström and Eriksson 2015). When parents experienced child welfare services as opaque and unpredictable, their ability to sustain visitation was at risk (Moksnes 2021). These findings suggest that unclear expectations and unpredictable interactions increase the risk of disengagement. Parents struggling to comprehend their role in visitation may find it challenging to prepare for and participate meaningfully. Enhancing communication and transparency within child welfare services could strengthen parents' sense of comprehensibility, increasing their capacity to remain engaged in visitation (Nes et al. 2021). Providing clear guidelines, structured feedback, and opportunities for direct dialogue may help parents navigate the visitation process with greater confidence and predictability (Kristensen et al. 2021).

Secondly, parents' ability to sustain visitation was also shaped by their perceived capacity to cope with its emotional and practical demands. Antonovsky (1987, 2012) describes manageability as an individual's belief that they have access to the resources needed to meet life's demands. In this study, parents' experiences of emotional strain, social isolation, and lack of support significantly influenced their sense of manageability, which in turn affected their visitation capacity. For many, the emotional toll of the care order led to persistent anxiety, grief, and feelings of helplessness, making it challenging to remain engaged in visitation (Idan et al. 2017). Some parents sought psychological support, while others lacked access to adequate mental health resources, leaving them overwhelmed (Kristensen et al. 2021). Additionally, social isolation and stigma further weakened parents' sense of manageability. Many parents reported losing meaningful social connections after the care order due to direct rejection from their communities or self-imposed withdrawal to avoid judgment (Lindström and Eriksson 2015). As external support networks play a critical role in reinforcing resilience, losing these connections left many parents without the necessary emotional and practical resources to sustain visitation engagement (Nes et al. 2021). As such, low manageability increases the risk that parents may struggle to maintain consistent visitation patterns and affects the quality of interactions during visitation. Parents experiencing high levels of stress or emotional exhaustion may find it difficult to engage meaningfully and consistently, leading to irregular visitation, missed appointments, or strained, overly structured interactions (Moksnes 2021). Providing parents with mental health support, peer networks, and structured guidance may help strengthen their sense of manageability, making it easier for them to engage in visitation both practically and emotionally (Idan et al. 2017).

Thirdly, while comprehensibility and manageability influence whether parents can engage in visitation, meaningfulness determines whether they perceive visitation as worth engaging in (Antonovsky 2012). This study found that visitation remained a powerful source of purpose for some parents. In contrast, for others, the emotional cost of maintaining contact led them to question whether continuing was beneficial. Many parents described emotional distance developing between themselves and their child, either due to limited contact, external narratives shaping their child's perception of them, or their struggle to maintain a parental identity. Some feared that their child gradually saw them as visitors rather than caregivers, a shift that directly affected their sense of purpose in continuing visitation. As Kristensen et al. (2021) note, when individuals perceive their role as insignificant or their efforts as futile, their capacity to persist weakens. For some, moments of closeness, such as a child expressing love at the end of a visitation, reinforced

their ability to continue, even in the face of systemic and emotional challenges (Lindström and Eriksson 2015). However, others described deep ambivalence, questioning whether maintaining visitation was truly beneficial for their child or if it was prolonging their emotional pain. This reflects Antonovsky's (1987) argument that meaningfulness is the most critical dimension of SOC, as it determines whether individuals will invest effort in navigating adversity. To strengthen parents' sense of meaningfulness, child welfare services may need to support parents in maintaining a clear and active role in their child's life rather than positioning them as passive visitors. This could involve structured opportunities for meaningful interactions, recognition of parental efforts, and ensuring that children receive balanced narratives about their parents (Lindström and Eriksson 2015).

In conclusion, this study highlights how parents describe their life situations after a care order as being shaped by emotional, social, and systemic challenges and how these circumstances pose risks to their visitation capacity. By applying Antonovsky's (2012) SOC framework, it becomes clear that parents who struggle with comprehensibility, manageability, or meaningfulness have an increased risk of challenges in sustaining their visitation capacity. These findings emphasize the need for systemic changes that enhance transparency, provide structured support, and acknowledge the emotional complexity of maintaining a parent–child bond under restrictive conditions. While this study provides valuable insights, future research should explore longitudinal developments in parents' visitation engagement, as well as the perspectives of children in these situations. Additionally, further inquiry into interventions that enhance parents' sense of coherence may provide a stronger foundation for policies that support continued parent–child relationships after a care order.

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