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What's the story?

Sociological explorations of the life  
course narratives of adults with care  
experience

C L Hugman

PhD

What's the story?

Sociological explorations of the life  
course narratives of adults with care  
experience

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fulfilment of the requirements of the  
University of Northumbria at Newcastle  
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Faculty of Arts, Design and Social  
Sciences

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## **Abstract**

This thesis extends understandings of people who experienced care by making use of sociological approaches and concepts. This approach highlights how previous research and cultural representations of young people in care produce individualised understandings and psychological explanations of difference. This is compounded by a lack of research on care leavers over the age of 25 and the omission of the voices of people with care experience within what little research there is. These absences may contribute to the depiction of the deficit, ascribed identity of being a child in care.

To address these absences, the methodological design was exploratory, qualitative and interpretive and included 11 adults with care experience aged between 30 and 80. Data was collected by using a biographical narrative interpretive method of interviewing. Participants' stories were analysed inductively, drawing on sociological approaches and concepts, which included the sociology of youth, childhood and family and the social theories of Bourdieu and Honneth.

The results demonstrate how participants' narratives show that their identities are negotiated across the life course. Crucially, participants' identities are not reducible to their care experiences but emerge and are negotiated from diverse events across their life course. Participants are differently equipped to negotiate the deficit identity of being a child in care, depending on their life experiences and their access to material, social and emotional resources. In this research, the realisations of negative expectations of care leavers within the told stories are in part produced culturally, relationally and systematically.

It is concluded that this sociological approach to the exploration of the identity of adults with care experience is of value as it situates participants' experiences within a broader framework that discusses social, cultural and political forces. Furthermore, this finding may support others researching other groups with problematised identities. Recommendations are made for future research, highlighting in particular the ways in which the evidence base about care leavers' life courses can be further developed.

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## **Declaration**

I declare that the work in this thesis has not been submitted for any other award and that this is all of my own work. I also confirm that this work fully acknowledges the research, work, ideas, opinions and contributions from the work of others.

Any ethical clearance for the research presented in this thesis has been approved. Appropriate ethical clearance has been sought and granted by the Faculty Ethics Committee, March 2013 and August 2014.

I declare that the word count of this thesis is 91602 words.

Name:.....

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## Chapter 1. Introduction

The cultural, political and social representations of adults who grew up in state residential, foster or kinship care can be typified as the damaged victim, the exceptional, resilient hero or the delinquent. It is likely that representations are influenced by research that highlights how people with care-experience are over-represented in socially excluded populations. Such research highlights how they are over-represented in the prison population (Murray, 2012), the homeless population (Harding, 2004; Dixon, 2007; Harding et al., 2011; Reeve and Batty, 2011) and the sex-worker population (Home Office, 2004; Coy, 2008). There is also evidence that they are more likely than their peers to become teenage parents and be unemployed (Stein, 1997, 2005). The educational attainment of children in care (CiC) is poor compared to that of their peers; in 2014 12% of children in care attained five GCSEs at A\*–C, including English and maths, whilst the national average was 52% (Department for Education, 2014). At the same time, local authorities recorded that 10.8% of 16- to 17-year-olds in care were identified as having a substance misuse problem (Department for Education, 2014). In 2015 an official data release identified that over a third of statutory care leavers were not in education or employment (NEET) and only 6% went to university (Department for Education, 2015). This highlights the negative outcomes captured in the research noted above that can influence public perceptions of children in care.

There is a general acceptance amongst professionals that young people in state care face discrimination through careism in the public sphere (Lindsay, 2010; Ofsted, 2009; Who Cares? Trust, no date). A small survey carried out by The Who Cares? Trust found that 22% of the general public thought that children were in care because of their bad behaviour, 28% thought they were problematic and 26% thought children in care were associated with criminality; only 10% of those surveyed associated the word positive with children in care (Who Cares? Trust, no date). In addition, young people with care experience have said that they think the public perceive them as ‘criminals’ or assume their behaviour is problematic (Channel 4 News, 2015; Ofsted, 2009). However, at the other end of the

spectrum good outcomes are identifiable in the form of celebrities with care experience, such as John Lennon, Marilyn Monroe and Lorraine Pascal (Care Leavers' Association, 2013a). These are stories about exceptions, often portraying the looked after child who has overcome the adversity of childhood. This is epitomised in the proliferation of autobiographical accounts of childhood abuse and trauma from the late 1990s (Douglas, 2010). Publishable accounts, Douglas claims, are produced by those who are deemed "good subjects", that is, in their accounts they display "resilience and recovery"<sup>1</sup> (Douglas, 2010, p.109). These ideas intersect with the neo-liberal project and the drive for people to take responsibility for their individual failures and successes in life. Although this is a cultural narrative of the exceptional overcoming of childhood adversity, this thesis focuses on the damaged victim, or the delinquent child. Together these indicate that the experience of growing up in state care and experiencing adversity in childhood is, at times, loaded with cultural expectations, stereotypes and moral judgements. Despite this, there has been little research to further our understanding of the way in which these representations are valid.

Hare and Bullock (2006) are critical of the preconception of looked after children (LAC) as disadvantaged. They believe that retrospective studies have contributed to this perception by exaggerating "the 'failures' of the system as they are more likely to scrutinize those who develop problems" (2006, p.28). They also criticise the causal links associated with having been in care that are not properly evidenced in that difficulties may also arise from previous experiences and pre-existing conditions. Thus, Hare and Bullock are able to problematise the 'truth' depicted in homelessness, prison and prostitution studies from an angle that includes all care leavers (2006). By debunking the statistics, Hare and Bullock (2006) argue that only a minority faces such difficult experiences in adulthood. Hare and Bullock's (2006) arguments do not obviate the need for further research;

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<sup>1</sup> As an example:

*"Dave is a living testament of a self-made man, who as an optimist strongly exudes resilience, service to mankind, personal responsibility and faith in humanity... For over two decades, Dave has dedicated his life helping others ... to help themselves. While many make excuses and seem pessimistic, Dave carries the banner in a nation where opportunities are endless in what he calls 'The Greatness of America'. And through his work, you will too" (About Dave Pelzer, no date).*

rather, they suggest there is a need for research that provides a more representative presentation of care leavers' lives that does not focus purely on those experiencing social problems. A less problem-focused sample might also address their concerns that current research is complicit in continuing negative stereotypes of children who are in care (Hare and Bullock, 2006). Consequently, this thesis aims to accurately portray participants' life histories, neither amplifying nor under-reporting any difficulties stated, but placing them within the trajectory of each participant's life course. The differing representations warrant investigation into the way in which individuals negotiate these dominant narratives when telling their life story. This will be expanded upon in Chapter 3.

Such deficit understandings and expectations of children in care are not new. This will be shown later on in this chapter where historical, political and cultural representations of children in care will be charted. Next, the potential for sociology, methodologically and theoretically to widen the knowledge base is discussed. This will be developed using the idea that the stories people tell of their lives are used to reflexively (re)construct social identities (Giddens, 1991; Nelson, 2001; Bano and Pierce, 2013); they are influenced by dominant narratives (Plummer, 2002; Nelson, 2001; Bamberg, 2004; Andrews, 2004; Woodiwiss, 2014). This provides a framework for considering the sociological dimensions of the life course and identity negotiation in the later findings chapters.

### **1.1 The Case for a Sociological Approach**

The promise of a sociological imagination, argues C Wright Mills, is an intellectual journey that aims to understand how an individual's biography is shaped by the historical, social and economic contexts of their lives (1959 [2000], p.6). This perspective on what sociology can offer society shaped the early developments of this research. Moreover, the journey to this doctoral research was shaped by the author's own experience of state foster care. Through the course of an undergraduate sociology degree she became sensitive to the ways in which the experiences and effects of state care should not be reducible to individual psychology. As will become apparent in the next chapter, the challenges children in care face in life, and how they overcome or succumb to them, are often individualised in research.

A good illustration of this is the individual experiences of care leavers making the transition to adulthood comparatively earlier than their peers. The inability to successfully manage the transition to independence has often been linked, *inter alia*, to poor social support networks (Stein, 2005; Reilly, 2003; Courtney et al., 2001), unstable foster placements (Jackson and Ajayi, 2007; Stein, 2005; Reilly, 2003) and a deficit in the skills needed for adult independence (Courtney et al., 2001; Stein, 1997). Whilst these factors may suggest that the difficulties are what Mills' described as "private troubles", what has been underexplored are the social and economic contexts in which these were experienced; thus it is wise not to rule out the possibility that care leavers' difficulties are a "public issue" (1959 [2000] p.8).

The economic context for most young adults is not an even playing field. Broadly, the differentiation of minimum wage entitlements by age ensures that those under the age of 25 are entitled to less pay than their older colleagues, are excluded from financial subsidies in the form of tax credits if they receive low wages (and are not disabled or a parent) and experience the lowest levels of social mobility in 600 years (Hills, 2014). So although young adults are entitled to less pay than their older colleagues, they are generally expected to pay the same level of rent, utility bills and other essentials. The Conservative government recently proposed restricting access to housing benefits for young adults aged 18–21 (Parliament, 2015). Arguably, these formal and informal policies reflect the way in which the family, not the neo-liberal state, is expected to financially support its children into independent adulthood (Jones, 1995; Williams, 2004). Care leavers are not excluded from this; indeed their experiences intersect with those of other young people. However, care leavers are more vulnerable to the effects of these policies as they lack family support (Axford, 2008).

Furthermore, transitions to adulthood have changed (Stein, 2005; ONS, 2015; Travis, 2009). This is evidenced by the ONS (2015) data indicating that around 40% of young adults aged 15–34 lived with their parent/s in 2015. The increasing number of adult children living with their parents has been linked to changing social contexts of higher education attendance, unaffordable housing and the later age at which people may choose to start a family (Travis, 2009; ONS, 2015). But

care leavers' transitions to independence are "abrupt" and are experienced as "accelerated and compressed" compared with their peers, who have seen extended transitions to adulthood (Stein, 2005, p.18). Together these brief descriptions of economic and social contexts highlight some of the structural issues associated with wider young adulthood. They show that the individualised approaches to the life course of care leavers could be obscuring the social and economic contexts that affect care leavers' ability to achieve independence. Thus, by embarking on the intellectual journey proposed by Mills (1959 [2000]), this thesis widens understandings of how social structures may affect a care leaver's life, with a particular focus on identity.

This thesis sets out a research programme that prioritises the voices of participants with care experience aged between 31 and 79 by listening to their life stories. The research questions explored through this investigation are as follows:

In what ways are the representations of children in care realised and negotiated in participants' narratives?

How do care leavers construct identities of belonging and difference across the life course?

In what ways does a narrative approach to data collection address the production of privileged knowledge?

The aim of this research is a fusion of the four types of sociology outlined by Burawoy (2005): critical, policy, public and professional sociology. This thesis mostly aligns itself with critical and professional sociology, developing this through a reflexive approach to knowledge. Burawoy believes that these ideal types should be less segregated as their connective relationships provide "energy, meaning, and imagination" (2005, p.15). Thus, the conclusion of this thesis reflects on current policy orientation and how groups might be engaged in future research dissemination and development.

This research aims to distinctly contribute to sociological understandings of adults who experienced care as children by recruiting adults over the age of 31. Firstly, this age selection is important as it allows for more time to elapse between a



participant leaving care and being interviewed, thus allowing insight into their life course and changes to their identity. Secondly, it responds to Garrett's (2002) recommendation that future research must address the dearth of explorations of care leavers' agency. Thirdly, by using the biographical narrative interpretive method (BNIM), participants will be enabled to direct the research through open-ended life story interviews (Wengraf, 2001). Allowing interviewees to present their care experiences within their overall life experiences (Wengraf, 2001; Riessman, 2008; Holland and Crowley, 2013) contributes to countering the privileged knowledge about people who have experienced care (Stanley, 1990; Horrocks, 2001).

It is important to recognise that the causality between negative adult outcomes and being in the state's care, or being a care leaver, has never been established. It is not within the scope of this research to address this issue. Rather, the focus will be on the stories participants tell and what this has meant for their negotiation of identity across the life course. Insights into agency and critical theoretical discussion show how children's agency is structured, and how for some their ability to enact agency was bounded by structural and relational factors. The use of the BNIM method with eleven care experienced adult participants enabled them to tell their life story in their own words. The construction of the life story was directed by the interviewee; this removed the normative outcome measures that inadvertently neglect a person's psychosocial development (Dima and Skegill, 2011; Samuels and Pryce, 2008).

The very term care leaver has multiple meanings when used in connection with adults who were in state care as children. There are two main usages. Firstly, the statutory definition is that care leavers are people who have spent over 14 weeks in the care of a local authority, in either residential or foster care, between the ages of 14 and 19 and make the transition to independent living from these environments ([legislation.gov.uk](http://legislation.gov.uk)). A more loose definition has been supplied by an independent charity; it states that a care leaver is any person who was in state care as a child and has since left it (Care-Leavers' Association, 2013b). This study uses the latter definition; this is further discussed in Chapter 4.

Two other important terms are used in this thesis: looked after children (LAC) and children in care (CiC). Both are used frequently in the literature. LAC refers to the statutory definition of children in state care. It is a problematic term as it is reductionist in its presentation of young people who experience care. However, this thesis uses it in Chapter 2 to mirror, and highlight, the predominance of the term to signify children in care. Later on in the thesis, LAC is used in the theoretical discussions in the findings chapters. This is because LAC is a historically specific legislative term that was introduced in the 1989 Children Act and that may play a role in the construction of difference through dominant narratives. That is not to say that participants internalise these processes; rather, they negotiate them. This is relevant to the development of this thesis as it demonstrates the way in which language is used to distinguish particular populations, which can shape their moral worth (Sayer, 2005; Nelson, 2001; Bamberg, 2001; Andrews, 2001). This provides the basis for a discussion of the term LAC and its potential role in reproducing deficit understandings of people who experience care (Renold, 2010). The abbreviation for children in care, CiC, is used to reference research and policy whereby LAC is not specified; in this way it is used to refer to a broader time frame, range of policies and cultural representations of people who have received state care. CiC is a phrase used in research (Snow, 2006, 2008; Holland and Crowley, 2013) as well as reports and information available from local authorities. It is acknowledged that this term is also problematic. Arguably, it is less reductionist than LAC, as it also refers to the position of the child prior to their care status.

In the next section the family and childhood are discussed with reference to changing socio-historical settings. This will demonstrate the structuring of the distinct life course phase of childhood and the evolving sociological understandings of the family.

## **1.2 The Family, Childhood and State Intervention**

The socio-historical context in which care leavers grow up can in part be understood through history and the sociology of childhood and the family. Crucially, by listening to the biographical narratives elicited from care leavers, this thesis may be able to situate their experiences within wider social contexts. By

demonstrating the constructed nature of childhood and the family, sociological investigations in this area can help to locate some of the difficulties of CiC in the social construction of childhood (Winters, 2006; Wilson, 2012). This section briefly discusses the development of the family from the nineteenth century to the contemporary context. This enables an account of the historical emergence of a deficit identity for children who are looked after apart from their families.

Aries explored the development of a distinctive childhood phase of the life course in the 1960s (Pollock, 1983; Lee, 2001). This influential historical research demonstrates the instrumental way in which childhood as a life stage has emerged from the sixteenth century (Lee, 2001). It provides a different approach to children from the dominant psychological approach, which stresses the natural development of a child along pre-determined stages (Prout and James, 1997). Over the past 200 years the concept of 'childhood' emerged from the middle classes and became embedded within policy (Cunningham, 2005; Bradley, 2008). This contributed to the construction of childhood as a distinct life stage that became a justification for the abolishment of child labour and the establishment of compulsory education during the Victorian era. Consequently, children were further marginalised from public spaces and pushed back into the private sphere (Cockburn, 1995, cited in James et al., 1998). This was also the period when the family became a distinctly private sphere (Laslett, 1973). Hendrick (1997) shows how the consequences of these policies were political. They enforced family dependency on children, as they were economically inactive and perceived as undeveloped human beings (Hendrick, 1997). And for the working-class family, the consequence of these changes was the loss of a wage earner in the family (Hendrick, 1997). The needs of capitalism during the nineteenth century are central to understanding the changes and continuities in British families over the last 200 years (Hendrick, 1997). Hendrick (1997) assesses the shifts that occurred during the Enlightenment, and argues that the concept of a universal childhood emerged and that this was used to understand the perceived juvenile delinquency that threatened the social order. Crucially, the universality of childhood functioned to control children through parental discipline and education (Hendrick, 1997). It was during this time that the modernist binary of children as victims or villains emerged (Shaw, 2014; Allsop, 2012). Resulting from the

“discourse about individual rights and their endangerment”, one of the first campaigning efforts in the UK to legislatively address issues of maltreated children began and led to the Prevention of Cruelty to, and Protection of, Children Act 1889 (Allsop, 2012, p.111).

The social construction of the child in contemporary society helps us understand that in previous centuries the care of orphaned and abandoned children was subject to different dominant narratives, although arguably these are not dissimilar to contemporary understandings. State intervention in families from the era of the Poor Law 1601 until the New Poor Law 1832 was for the most part focused on moralising ideologies, and abandoned or orphaned children were apprenticed out to learn a skill with the aim that they would become self-sufficient moral beings, not vagrants (Hayden et al., 1999). It could be said that these children were perceived as a potential threat to the social order if they did not grow up to be hard workers (Hendrick, 1997).

What is recognised today as child services has evolved since the first major evacuation of young people and children during WWII and the creation of local children’s commissioners (Harris, 1993). The evacuation of children in Britain during WWII led to a greater awareness amongst middle-class families of the social deprivation experienced by some children from deprived inner cities (Philpot, 1994, cited in Hayden et al., 1999). The immediate post-war period also drew attention to the number of children unable to return to their homes and the issues many children had faced during their time as evacuees (Pinchbeck and Hewitt, 1973b; Harris, 1993). In response the Curtis Committee produced the ‘Report of the Care of Children Committee’. A number of the recommendations were implemented in the 1948 Children Act. According to Harris (1993), this led to three significant changes. Firstly, in relation to the need for appropriate accommodation for young people, there was a recommendation for the separation of victims and villains in care (Harris, 1993). Secondly, there was more emphasis on providing affection, security and warmth for children and young people (Harris, 1993). It is likely that this was influenced by Bowlby’s attachment theory (Riley, 1983). Thirdly, it proposed developing departments specifically set up to attend to the needs of young people in state and substitute care (Harris, 1993). Later,

during the 1960s, there was a shift away from seeing problematic children as 'depraved'; this was coupled with a preventative agenda that developed child protection (Hayden et al., 1999). The participants in this research grew up and entered and left care between the late 1930s and the 1990s.

Radical psychiatrists and feminists critiqued perspectives on the family and how it functioned. This work was significant in developing knowledge of the dark side of family life. Radical psychiatry claimed that the way in which the family worked could make people ill (Goldthorpe, 1987). Second-wave feminists further developed this critical approach to families and the difficulties people may experience in them (McKie and Lombard, 2005; Moulding, 2015). Feminist theorising about the dark side of the family has been more influential in its ability to challenge inequalities reproduced in families than their precursors, the radical psychiatrists (Ferree, 1990). The work of feminists in the 1970s and 1980s challenged the taken-for-granted assumption that the family is natural and benign, arguing that it is a social construction (Ferree, 1990). Despite this development, two strands remain underdeveloped. Firstly, there is a lack of research that examines maternal figures who perpetrate, or allow, maltreatment to occur. Secondly, there has been little feminist or sociological research into the perpetration and experiences of emotional abuse of children (Moulding, 2015).

Meanwhile, policy changes in the 1970s led to the establishment of integrated social services departments across England (Hayden et al., 1999). This period also saw a change in practice orientations, as there was an increased belief that focusing on securing permanency for young people in care rather than on family reunification, the previous focus, would improve outcomes (Hayden et al., 1999). This was established in the 1975 Children Act, which promoted long-term fostering and placed consideration of the child's needs into the child-protection processes (Hayden et al., 1999). This Act embodied a shift away from focusing on parental rights to raise a child to concentrating on a situation in which the needs of the child outweigh parents' rights (Hayden et al., 1999). Elsewhere, Thomson argues that during this period Bowlbyism became influential and consequently led to greater scrutiny of mothers and was used to legitimate reliance upon, and greater surveillance of, the family (2013). This affected social work practice in the

UK (Trevithick, 2000), and by the beginning of the 1980s most residential units were decommissioned, with foster care placements being seen as preferable childrearing settings (Berridge et al., 2012). The 1989 Children Act further embedded the requirement to consider the needs of a child in decisions regarding their care (Williams, 2004). This Act also focused on the continuing relationships between children and young people in care and their parents through contact orders, which were to be supported by foster carers (Hayden et al., 1999; Williams, 2004).

More contemporary analyses of social policy since the Blair government of 1997 have identified another change in the relationship between the state and the family, especially the increased legitimate interference of the state in families deemed problematic in their functioning (James and James, 2005; Gillies, 2011). According to Gillies (2011), this demonstrates how the state has coerced families historically: by problematising certain family forms to how it now problematises those families whose practices are seen as socially excluding. Good parenting in twenty-first century Britain is defined by practices such as having home-cooked meals, limiting television access and engaging in sports and cultural activities (Gillies, 2011). Arguably, what has not changed is the way in which policymakers see the family as a site for successful socialisation of children so that they become worker citizens. These understandings of the family continue to promote certain families as epitomising this, consequently marginalising other ways of 'doing family' from the agenda (Wilson, 2012). The consequences of this for individuals is their symbolic exclusion, and subsequent emotional pain (Wilson, 2012). Giddens (1991) argues that processes of late modernity have disembedded family structures and that people now have a greater freedom to choose their kin. This is supported by research suggesting that the nuclear family type is in decline and is being replaced by different, fluid constructions of family (Scott, 1997; Finch, 2007). This is exemplified by Weeks et al.'s research into "families of choice" amongst the LGBTQ community (Weeks et al., 2001). It can be argued that the historical social construction of the family is undermined by the plurality of family types in the UK today, or, perhaps, that it leads us to question how in late modernity family structures have altered to reflect the continuing necessity of family in the UK. Generally, current positions on changing family life

can be viewed positively from the democratisation theses, whilst others argue that current family formations demonstrate a moral decline within society (Williams, 2004; Gillies, 2003).

The sociology of childhood has contributed some significant new thinking over the last 20 years, particularly regarding children's capacity to affect their own social worlds (Jenks, 1996; James et al., 1998; Lee, 2001). Through critiques of the dualism of psychological research, Lee's (2001) sociological approach to childhood highlights how children, in research, policy and family practices, are perceived to be incompetent. This can be divided into two main approaches: the child as a "human becoming" in need of guidance, protection and education (Lee, 2001, p.7) and the young person as a threat because of delinquency or victimhood (Gilbert et al., 2009). These understandings, circulating in cultural and political spaces, reinforce the way adults interact with children because they view them as passive, dependent beings (Prout, 2000; Lee, 2011). Such dominant narratives limit the way in which children are allowed to be agents in the social world (Harden, 2000; Lee, 2001; Prout, 2000). In practice this can weaken children's ability to affect their environments, as their voices are deemed irrational or not fully informed from the adult perspective and thus discounted from having any effectual power (Lee, 2001). It is anticipated that the perceptions of children in state care will intersect with wider dominant narratives of children and teenagers. Clearly, then, childhood is not experienced or lived by young people outside the socio-economic and cultural context of their lived lives. This indicates that in essence the personal is political.

### **1.3 The Structure of the Thesis**

In the next chapter it will be shown that previous research has focused on the outcomes of care leavers up to the age of 25. There are no publications or records available which enable a representative overview of the care leaver population's post-25 life experiences. Thus, questions are raised about the extent to which negative outcomes are representative of the care-leaver group. It will become evident that much of this research uses deductive normative designs to understand the outcomes of young people with care experience. This includes the measurement of young people's outcomes, often focusing on criminal records and

attainment in school and training. The implication is that low attainment and/or a criminal record predict social exclusion in their adult lives. Additionally, the explanatory factors of resilience and attachment theories have been used to understand both positive and negative outcomes of care leavers. It will be shown that the consequence of applying these theories is that care leavers' outcomes are individualised. Together these develop the argument that much contemporary research is privileged and obscures lay people's knowledge of their own lives (Stanley, 1990).

There have been few sociological studies of children in care and care leavers. This is despite recommendations for research that examines care leavers' agency (Garrett, 2002) and how their experiences interact with social structures (Axford, 2008). This research is reviewed in Chapter 3, where the concepts and theories utilised show how sociology can be useful for understanding the experiences of young people in care differently. This is important for the development of sensitising concepts that can assist in inductive data analysis. A key part of this is clarifying how the concepts of personal narrative and dominant narratives are used in this research. This chapter provides the reader with an understanding of the theoretical concepts of Bourdieu and Honneth that are used in discussions of the data. The rationale for a focus on the application of Honneth's and Bourdieu's work centres around their theoretical usefulness for analysing how power is at work in the construction and negotiations of individual identities.

Chapter 4 discusses the methodology employed in this research. It presents the rationale for an inductive exploratory research design and how such an approach enables the answering of the research questions. The design includes, inter alia, mixed method sampling, the biographical narrative interpretative method, the analytical approach and the reflexive decision to use a definition of care leaver that includes all adults who experienced care as children.

The second half of this thesis centres on the findings of the research. It presents the life experiences of care leavers, situating their state care experiences within their chronological life course trajectory. With a focus on identity negotiation, the data presented indicate that within the individual story a number of shared experiences were identified, albeit with heterogeneous interpretations. Each of



these chapters includes a theoretical discussion on the relevance of Honneth's and Bourdieu's concepts. Chapter 5 contextualises the experience of state care within each participant's life course through brief biographical synopses. Following this the empirical findings are presented, these give space to participants' early life experiences that were the narrative backdrop to their entry into care. Chapter 6 focuses on state care and the intersecting experiences of school, extracurricular activities and leaving care. This chapter highlights the heterogeneous experiences of state care and discusses the ways in which participants' identities were narratively negotiated through their care experiences. Chapter 7 presents the findings that focus on the adult life course. This chapter explores the ways in which this phase of the life course often provided positive experiences; these were deployed in participants' life stories to renegotiate self-identity. It is evident that participants' agency was often differentially bounded.

Chapter 8 uses the empirical evidence to address the research questions. It demonstrates the theoretical limitations and relevance of Bourdieu and Honneth's work. Finally, the discussion situates the findings within an appraisal of the data collection method. The thesis concludes in Chapter 9 with a discussion of the relevance of sociology for producing new insights into the life course of adults with care-experience. The value of the particular research strategy is evaluated for the generation of subjective biographical data from people whose voices have previously been marginalised. This chapter also considers the limitations of this research and suggests avenues for future research.

## **Chapter 2. Understanding Care Leavers' Outcomes: A Critical Sociological Discussion**

The previous chapter presented how the representations of children in care have been constructed historically. It showed the historical representations surrounding children in care and their conceptualisation through time as victim or villains, the deprived and the depraved. At the same time it was proposed that these representations were evident in contemporary understandings of care leavers. Additionally, the startling up-to-date statistics relating to the outcomes of care leavers across the life course were noted. This chapter critically considers the evidence base for these outcomes and the factors associated with differential outcomes. These include the type of placement experienced, care leavers' financial difficulties, expectations of carers and other professionals and the subsequent internalising of these low, or high, expectations, resilience and educational attainment levels. A critique is made by discussing these in relation to sociological perspectives. Of pertinence is how youth transitions literature, youth studies literature and the sociology of childhood offer a different perspective on care leavers. These highlight how sociological research can counter individualistic understandings of people who have experienced care by offering a framework for examining how wider social forces may influence their life. Youth studies and the sociology of childhood perspectives provide an understanding of children, and young people, that recognises that children are social actors who respond to, interpret and act upon the world around them. Together these provide evidence that shows how sociological perspectives may be useful for understanding the outcomes of people with care experience. Also considered is how Stanley's (1990) understanding that the knowledge produced by professionals is privileged and can obscure the relevance of service users' perspectives, their 'invisible' knowledge, may be helpful.

### **2.1 The Evidence Base: Outcomes of Adults with Care Experience**

The unequal distribution of care leavers' life chances is integral to the rationale of this thesis. However, there is an inherent difficulty in accurately portraying care

leavers' outcomes when there is a scarcity of knowledge on later life outcomes. This is important to recognise as it could add to the problematic representations produced by some research into care leavers.

Mike Stein has made influential contributions to the understandings of young people leaving care (Stein, 2005, 2006, 2008). In seeking to explain differential outcomes, Stein suggests resilience is an important factor. He uses the following definition of resilience:

*“the quality that enables some young people to find fulfilment in their lives despite their disadvantaged backgrounds, the problems or adversity they may have undergone or the pressures they may experience ... overcoming the odds, coping and recovery” (2006, p.427).*

However, this ignores how resilience definitions are contested, multidisciplinary and heterogeneous (Mallon, 2007; Jackson and Ajayi, 2007; Guest, 2011; Honey et al., 2011). The actuality of positive outcomes associated with resilience is overplayed in Stein's analysis (2006), and it is unclear whether the presence of resilience enables a person to ameliorate or manage their issues/problems. Besides, some empirical evidence suggests that socially excluded individuals can be identified as resilient (Kidd and Shahar, 2008).

Stein argues that the life course of care leavers can be understood through three typologies, despite the limitations of the data: those who see themselves as “moving on”, the “survivors” and the “victims” (2005, p.20, 2006a, 2006b). These are indicative of an individualised approach to care leavers' difficulties. Such categories are inherently problematic and appear to foreclose any potential for changes. Indeed Jahnukainen and Jarvin (2005) argue that some problem behaviours are limited to adolescents (see also Sampson and Laub, 1990). Stein's categorisation is important as he is influential in the field; and this thesis seeks to explore whether or not representations of care leavers are valid across the life course. The critique made here of Stein's (2005) typology is made stronger by the way in which these categories of care leavers are based on samples of young people and adults, thereby preventing a more nuanced understanding of resilience across the life course.

The definitions of Stein's (2005) typologies of care leavers generate a static vision of their life, as it does not acknowledge that over the life course a person could move between categories. This is a particularly salient point as these types were based upon data relating to the first couple of years after exiting care (Stein, 2005). The danger of such typologies is that they risk essentialising the individuals in question as objects rather than as subjects. Furthermore, Stein's definition of a 'victim' frees the state and welfare services of their duty to assist this group as it is implied that they are too damaged to be helped. This highlights Stein's uncritical engagement with the literature. Indeed Mallon's (2007) research demonstrates the incompatibility of Stein's static typologies of the lived experiences of people who experienced care by demonstrating that of nine participants who completed higher education only one took a linear trajectory; the remaining eight entered as mature students. Interestingly, Stein identifies in the moving-on group a "post-care normalising identity", suggesting that there could be an in-care identity without interrogating, explaining or engaging with such a remark (2005, p.20).

The outcomes of LAC in their adult lives have been examined using panel studies in the USA (Cook-Fong, 2000) and longitudinal research in Britain (Buchanan, 1999; Viner and Taylor, 2005). These usefully provide comparative groups through their longitudinal data. This enables researchers to consider the variables associated with adult well-being and control for shared characteristics such as parental occupation and child placement at incremental ages. A direct result from these large sample sets allows for a greater confidence in the validity of and generalisations made from the findings. Both Buchanan (1999) and Cook-Fong (2000) found that adults with care experience have comparatively lower measurable levels of well-being. Viner and Taylor (2005) found that adults with care experience were more likely to be depressed at 30 years old and that this was statistically significant. They also found that care experienced adults were not over-represented in lower socio-economic groups (Viner and Taylor, 2005). Crucially, although the analyses support the hypothesis that care experienced adults are comparatively less healthy and more likely to be depressed, the majority of them are well-adjusted adults who cannot be differentiated from their peers in terms of outcomes (Buchanan, 1999; Viner and Taylor, 2005). These findings highlight the danger of *misrepresenting* care leavers as having poor outcomes

throughout the life course. Whilst the difficulties faced by some must be acknowledged, it is important to recognise that better outcomes are not scarce and that childhood traumas do not necessarily lead to social exclusion. Thus the presentation of care leavers as at risk of failing social work assessments of 'functional outcomes' on leaving care does not necessarily hold true across their life courses (Hare and Bullock, 2006). Viner and Taylor tenuously suggest that the "adverse effects of care on mental health attenuate somewhat in adult life" (2005, p.895). The limitations of these data sets for understanding influential factors are caused by the lack of qualitative data. Sampson and Laub's (1990) research into crime desistance rates over the life course suggests that social bonds (specifically employment and marriage) are explanatory factors. Similarly, Warr (1998) identifies marriage and Uggen (2000) highlights the importance of employment opportunities as important in understanding desistance and persistence of offending behaviours across the life course. Pertinently, these factors may affect the social inclusion of care leavers through their navigation of the life course. But these experiential aspects are not captured through the secondary analysis of longitudinal data sets.

Qualitative longitudinal research is able to pay attention to the details of the transitional period that leads to adult independence, particularly when the concepts to be explored have been informed by theory (Jones, 2011). Jones (2011) utilises concepts of connectedness and risks in relation to care leavers' actualisation of adult independence. This research uses an unrepresentative sample, though, as it focuses on the population of a specialist residential home whose focus was to support young people in the USA to complete high school. Although the findings are unrepresentative and cannot be generalised from, this approach to measuring risks and connections highlights social factors affecting care leavers. Five factors are identified in relation to the successful adaptation of the sample: goal orientation; access to and use of social support; commitment to education; marriage; and transitional housing (Jones, 2011). By following up a number of measurable outcomes over 3 years, Jones' study demonstrates that the young adults' trajectories were varied and often not linear.

Jones' (2011) research is useful as it captures the way in which young people were moving through their lives. It is evident from the data that the sample's life situations changed over the years. For instance, some participants reported the lessening of risks during their adulthood (Jones, 2011). Others were identified during early interviews as having few risks on leaving care, but by the final interview they had accumulated risks, e.g. one participant lost his job and consequentially his income (Jones, 2011). This demonstrates the structural vulnerability of employment within an insecure employment market, although some structural issues identified are not applicable to the UK context (e.g. health insurance). It is important to recognise, though, that this does intersect with young people's experiences and transitions being affected by precarious employment trajectories in the UK too (Jones, 1995; Shildrick et al., 2012; King, 2015). Furthermore, Jones' (2011) research shows that the transition to adult independence is not solely determined by care leavers' aspirations and is unlikely to be an instant, or linear, process. Jones' (2011) findings reaffirm that for some care leavers a linear development trajectory to independence is unhelpful, especially when it is embedded in policy (Horrocks, 2002; Stein, 2005).

Interestingly, Jones states that the most noticeable factor positively affecting her sample is resilience; she describes how the participants appeared resilient in the interviews (2011). However, resilience itself was not tested for in the research design. Jones reports that 75% of the sample aspired to finish college, yet none of them had (2011). This shows that having a goal was not in itself enough to realise it; some participants cited the need to work in order to ensure housing stability as a factor that constrained their ability to attend college after they had left the residential educational programme. This undermines the idea that resilience holds the magic formula for positive post-care outcomes. The strength of Jones' (2011) research is that it acknowledges its limitations and also attempts to engage with its participants in a way which premises itself upon a life course perspective. It intrinsically recognises that whilst a young person may be a care leaver, their life will not be the result of their care experiences alone; rather, there are a number of dynamic societal factors that affect their identity and their navigation of the life course. This contrasts with Stein's individualised typology of care leavers.

Contrasting with Stein's work are the findings of Duncalf (2010), who surveyed 300 care leavers aged 17 to 79. Some of the data challenges Stein's (2005, 2006a, 2006b) static typology, such as the finding that many care leavers returned to education as adults (Duncalf, 2010; see also Mallon, 2007). Moreover, the extent to which a post-normalising care identity contributes to a 'moving-on' typology and is wholly ameliorative of previous negative life experiences is questionable. This is particularly so in that Duncalf (2010) found that despite numerous achievements in life, many care leavers surveyed had lifelong emotional struggles originating from their pre-care time, their time in care and/or their leaving-care experiences. This work is significant because of its inclusion of people of all ages with care experience, and it shows that there is value in including older care leavers (Duncalf, 2010).

This section has clearly shown that the evidence relating to care leavers' outcomes is partial, and this may be additionally problematic because very often those in the sample were younger than 30 (except in the longitudinal panel studies). This highlights the gaping hole in the knowledge base. Furthermore, this section has highlighted just how ambiguous care leavers' outcomes may be and how they may intersect with broader social contexts.

## **2.2 Understanding Different Outcomes**

This section considers thematically the factors that have been identified in previous research that relate to the outcomes of care leavers. It begins with a review of the research that identifies the positive effects of stability and continuity whilst in care. Then attention turns to research that examines care leavers' educational attainment. Each of these sections draws on sociological research to offer alternative understandings.

### **2.2.1 Stability and Continuity: Mixed Messages**

Continuity and stability are key concepts in the research that examines the relationship between being a young person with care experience and later social and personal difficulties. Stein (2006) suggests that poor outcomes can be linked to poor attachment styles, but Tunstill (2013) argues that this is a dangerous

“seductive theory” that underpins early intervention, pathologising the effects of socio-economic inequalities. Other researchers in the field, in the area of resilience research, perceive attachment style as a protective factor (Gilligan, 2008; Mallon, 2007). Crucially, a positive correlation in quantitative analyses has been found between placement instability and poor outcomes (Del Valle et al., 2008; White et al., 2008). However, not only was the sample unrepresentative but also the positive correlation does not explain why it is an important factor.

Indeed, qualitative research demonstrates that more than just the care placement may be relevant, as it recognises stability in other realms of a looked after child’s life, such as social and professional relationships (Mallon, 2007; Aldgate, 1994; Gilligan, 2012). Mallon (2007) highlights how often instability in a placement leads to a young person having to change schools and therefore their home environment, peers, friends and teachers. This can mean “new carers, different other children, perhaps a more (or less) rigorous disciplinary regime” (Mallon, 2007, p.109). The lack of continuity in professional relationships between young people in care and their social workers has been highlighted by Aldgate (1994), who reports that this undermines the stability of children’s placements. But it is unclear how exactly stability functions to reduce risk. Indeed, the suggestion that stability and continuity provide the context for more positive outcomes ignores research in youth studies that has highlighted how the socio-economic context of place shapes young people’s transitions to adulthood (Woodman, 2013; Shildrick, et al., 2012; MacDonald et al., 2005). This reiterates the need to consider structural factors interacting with young adults’ life course.

The sociology of childhood places value on children’s and young people’s perspectives, and, as explained in the Introduction, it recognises children’s ability to shape, interpret and interact with the world around them (Lee, 2001; James and Prout, 1998; Goodyer, 2013). Utilising this sociological strand, Holland and Crowley (2013) demonstrate the active role children have in family relationships and foster placements. By using a biographical approach and an inductive approach to analysis, Holland and Crowley (2013) show how a bottom-up approach to conceptualising the experiences of CiC can help to reframe concepts through their perspectives (Holland and Crowley, 2013). Holland and Crowley



(2013) suggest that instability should be conceptually reframed as 'nomadic'. However, traditionally nomadic practices are linked to groups of people who move together, whereas CiC often move alone, without their parents or siblings. Whilst their argument is underdeveloped, Holland and Crowley (2013) identify agency within the stories of the participants and succeed in not reducing the young people to having a passive role in their life course. Agency was described in the accounts of young people by their choice to dis/identify with their birth family; by the way in which they accessed family information and the way in which some expectations the young people had compounded their difficulties (Holland and Crowley, 2013). In these accounts, young people are recognised implicitly as active agents in negotiating their life course, but this agency is tempered by their status as children.

### **2.2.2 Educational Attainment**

Educational attainment has been broadly associated with social mobility and meritocratic values, although the reality of this is questionable (Hills, 2014). Education can have a social regulation function, thus reducing the risk of social exclusion. This is mirrored in Jackson and Martin's (1998) findings into the educational attainment of care leavers. Jackson and Martin (1998) found that young people in care who achieved academically were the most likely group to not be socially excluded; they suggest that this was instrumental for regulating their lifestyles.

Jackson and Martin (1998) used two sample groups of care leavers, one deemed educationally successful and one deemed less successful, to investigate the factors that enable high achievement amongst this cohort and the distribution of in-care and pre-care risk factors. The mean age of participants in the former group was 26, and 25 in the latter. Jackson and Martin (1998) found that there were substantial differences in the outcomes of care leavers. Qualitative evidence gleaned from the interviews with both sample groups revealed some in-care risk factors concerning education, such as a lack of suitable space in which to study and the timing of placement moves (Jackson and Martin, 1998). Interestingly, some high achievers believed that they could have done better in life had they been given better support and provision for overcoming obstacles (Jackson and

Martin, 1998). This reiterates the need to move from normative understandings of success to individual, subjective accounts of what success is. It could be said that even though the participants' needs were met, their agency was bounded. These two points will be discussed later in this section in relation to sociological contributions from youth studies.

Jackson and Martin (1998) established that there are seven key protective factors that are strongly associated with educational success:

*“stability and continuity ... learning to read early and write fluently, having a parent or carer who valued education and saw it as a route to a good life, having friends outside care who did well at school, developing out of school hobbies and interests, an adult who was a mentor or role model and regular school attendance” (1998, p.578).*

One important point of this research is that the similarities between the two groups were more striking than the differences, especially their pre-care risk factors (Jackson and Martin, 1998). This brings into question the argument that pre-care factors are the most damaging ones.

More recently, Jackson and Ajayi (2007) developed a longitudinal research project focusing on care leavers in higher education. Their areas of enquiry included pre-university and in-university factors and the role of foster carers in care leavers' attendance at university. What is clear from the qualitative data is that experiences of foster care were diverse and whilst education might have been a priority of the local authority (LA), it was not always a priority for foster carers (Jackson and Ajayi, 2007). These findings contrast with Cameron's (2007) findings that most participants said that their foster carers positively affected their educational attainment, but some described how support from social workers failed to help them stay in education. Self-reliance is a factor that Cameron identifies as central to the sample of care leavers; it was defined by their motivation and initiative-taking (2007). Through in-depth interviews with care leavers the theme of self-reliance emerged in Cameron's (2007) research in response to questions about how the care leavers managed their participation in post-16 compulsory education. Cameron found evidence of self-reliance in participants' accounts describing how they navigated entry themselves by approaching institutions and attending open days alone (2007).

Cameron concludes that care leavers in this study were notably self-reliant as they organised and managed a number of aspects of their lives (2007). Yet they also tested the boundaries of the usefulness of self-reliance when it is not “valued as a normative, contextualised approach to addressing care leaver’s orientations towards formal service use, without implying that support is not needed” (2007, p.48). To illustrate the importance of this latter point it is worth describing the case of ‘Ian’, who was so overwhelmed by the benefits system he resorted to taking “out expensive personal loans to pay rent and living expenses whilst at university” (Cameron, 2007, p.45). The interviews reveal that care leavers had to juggle a number of complex issues whilst undertaking further education/higher education, including the transition to independent living, financial difficulties exacerbated by inflexible bureaucracy, family difficulties and managing change itself (Cameron, 2007).

The care leavers in Cameron’s (2007) study were found to hold an ‘education ethic’. However, this could just be rhetoric, with participants telling the researcher what they thought they wanted to hear. It may indicate a general acceptance of the status quo in which young people are led to believe in a meritocracy, which esteems individual self-reliance. This has also been suggested by Samuels and Pryce (2008). Other than mentioning that the participants were from a LA where HE participation amongst care leavers was comparatively high, no effort was made by Cameron (2007) to try and look at the factors which differentiated this LA in terms of socio-economic distribution, care-leaver and education participation schemes, social and economic supports or placement stability factors.

Jackson and Ajayi (2007) identify structural and interpersonal factors as obstacles to care leavers’ participation in further education and higher education. Similarly to Samuels and Pryce (2008), they found that determination and ability were not determinants of success if other obstacles could not be overcome (Jackson and Ajayi, 2007). Indeed, the structural constraints of limited organisational resources (financial, social and placement) are identified as having a detrimental effect upon LAC’s leaving-care experiences (Jackson and Ajayi, 2007). Jackson and Ajayi show that those with more comparatively normal transitions (such as leaving foster care to attend university) fared better than those leaving care earlier (2007).

Additionally, the informal support reportedly received from foster carers post-placement was identified as a protective factor regarding dropping out of HE (Jackson and Ajayi, 2007). Perhaps the stability of a further two years post-16 in care allows young people the opportunity to experience something more 'normal' in terms of their transition to adult independence. It may also prevent experiences of poverty associated with care leavers making the transition to adult independence (Graham, 2015).

Social support may go beyond providing ongoing support. The support and expectations of professionals working with young people can be linked in many ways to the concept of a self-fulfilling prophecy. Elliot (2002) discusses the problematic nature of teacher expectations of LAC. This research collected data from heads of years within a school but did not seek the views of young people in care (Elliot, 2002). Elliot (2002) claims that previous research identifies that a negative self-fulfilling prophecy does not lead to a polarisation of attainment in school populations. Elliot concludes that there were differences in expectations from teachers towards LAC and their school peers, but that these were "accurate" and did "not lead to falling attainment, it could be argued that they may serve to maintain ... low attainments" (2002, p.60). Furthermore, LAC were perceived by teachers as more likely to be the victims of bullying and were less likely punish LAC for not completing homework. Contrastingly, Honey et al. (2011) found little evidence of low expectations in schools.

Whilst Honey et al. (2011) found little difference in academic expectation, they did find that most LA young people felt that their teachers did treat them differently to their peers. Significant differences were found in the teachers' assessments of peer and teacher socialisation and behaviour. Honey et al.'s (2011) paper generates a perspective from teachers and allows LAC to be heard. What does it matter if a teacher claims to have the same expectations of non-LAC and LAC if a young person in care feels that they are treated differently? This question was addressed through a research strategy that encouraged young people in care to participate through letter-writing. A content analysis determined three main themes that demonstrate that young people were aware of some form of stereotyping, even if they were treated with sympathy and concern, indicating that they wanted

to be treated the same as their peers. This reiterates the value of listening to young people's experiences and interpretations in research.

Honey et al. (2011) identified differences between LAC and their peers. The team found that none of the LA young people aspired to attend university, although 10% aspired to feminised 'professional' jobs, in comparison to nearly half of their peers (Honey et al., 2011, p.42). Differential aspirations between LAC and their peers were understood by Honey et al. (2011) to result from a lack of encouragement to pursue higher education or professional careers.

Whilst the details of the career trajectories of care leavers are hazy, Johansson and Höjer (2012), as part of a European-wide project, recorded details on the few care leavers enrolled in HE and the subjects they studied. They found that the majority of this group was studying feminised professional degrees that would ultimately lead to low-paid jobs, e.g. nursing and social work (Johansson and Höjer, 2012). There are a number of possible interpretations of this. For instance, these decisions may be to do with caring professions and the possession of 'feminine' skills, or to do with choosing a redemptive vocation (Frost and Hogget, 2008), or the job and financial security such programmes offer. It should also be pointed out that very rarely in the research reviewed so far have power relationships been considered. The sociocultural roots of poor educational expectations have not been discussed either, which may well have shaped practitioner interactions with young people.

To enable thinking sociologically about differential aspirations and expectations of children in care, it is worth considering youth studies and transitions research, particularly as individualised approaches to aspirations conceal socio-economic contexts (Shildrick et al., 2012; Woodman, 2013) and the role of social and cultural capital in (re)producing successful middle-class youth transitions (Thomson et al., 2002).

The relevance of this argument is advanced by Connolly and Healy's (2004) sociological research, which found that young people's social class and geographical locations structured young people's aspirations (see also Kintrea et al., 2015; Vickerstaff, 2003). Using a framework informed by Bourdieu, Connolly

and Healy (2004) conclude that young working-class people internalise “the social structures and processes of inequality that impinge directly on their lives, they have come to develop a world-view (habitus) that contributes to the reproduction of their subordinate position” (p.28). Importantly, again exploring marginalised groups, Bottrell (2007) demonstrates that the rejection of normative educational successes in adolescence results from a complicated interplay of factors. Bottrell (2007) argues that participants were claiming their place on the margins as a means for a chosen, rather than ascribed, identity and that this often reflected marginal social norms and values. This is not dissimilar to the trajectories seen in children in care populations, such as those in Johansson and Höjer’s (2012) sample. MacDonald and Marsh (2001) argue that young people, in response to the differential social, cultural and economic capital distribution and insecurity characterising late modernity, seek ‘alternative careers’; these include, inter alia, motherhood, criminal behaviours and sex work (Abel and Fitzgerald, 2010; Kehily and Thomson, 2011; Stephen and Squires, 2013). Whilst ‘alternative careers’ highlight the normativity of positive adaptations and the rationality in subordinated social groups’ occupational choices, it is contestable that they are alternative, as they are a response to constrained choices.

The different contexts in which people’s agency is enacted provide evidence that youth transitions are shaped (but not determined) by geography, power, socio-economic status, social policy, identity, ethnicity and evolving opportunity structures (Furlong and Cartmel, 1997; Evans, 2001; Nelson, 2009; Barry, 2010; Farrugia and Coffey, 2013; Woodman, 2013; MacDonald et al., 2001; Kintrea et al., 2015; Thomson et al., 2002; France and Haddon, 2014). To account for agency there are conceptual debates in youth studies about the validity of the concept’s structured individualisation (Furlong and Cartmel, 1997) and there is also Evan’s (2001) concept of bounded agency (Nelson, 2009; Barry, 2010; Farrugia and Coffey, 2013; Woodman, 2013). It is important here to recognise that both concepts orientate researchers towards the complex interaction of structure and agency in young people’s lives and decision-making. These both provide analytical sensitivity to agency and structure, these could be useful in addressing the lack of research examining the role of agency and/or structure in care leavers’ lives (Garrett, 2002; Axford, 2008).

### **2.2.3 Resilience and Outcomes**

The recognition of resilience as a personal asset is part of a strengths-based model in social work; it is also a wider part of policy and education developments (Bottrell, 2009). Rapp et al. (2006) argue that in spite of the growth of a strengths-based approach to social work, the environment in which child welfare policies are enacted, developed and assessed is still one “shaded in the perspective and language of problem, deficit and pathology” (p.84; Harper and Speed, 2012). Resilience has been associated with neo-liberalism, which emphasises “individual responsibility for coping, competence and success” (Bottrell, 2009, p.334; Garrett, 2016).

This section first addresses contributions to the understanding and promotion of resilience in young people leaving care, including an examination of the notion of resilience and a critique of these contributions’ inadequate consideration of social and economic factors. Resilience definitions are contested, multidisciplinary and heterogeneous (Guest, 2012; Mallon, 2007; Rutter, 2012) and are not always interrogated or utilised convincingly to provide a firm foundation to prove their efficacy (Ungar, 2004). Mohaupt (2009) argues that resilience, in its contested conceptualisations, relies upon the identification of risk inputs and outputs that are judged to be either within or above expected ranges. One of the central criticisms aimed at research into personal resilience is the difficulty of isolating and differentiating the impact of each factor contributing to resilience (Mohaupt, 2009; Ungar, 2013).

The dichotomous nature of risk and protective factors associated with resilience, as shown in Stein (2005), is unsupported by Samuels and Pryce (2008) too. Their findings led them to conclude that self-reliance can be a source of resilience, but that it can lead to negative adaptations (Samuels and Pryce, 2008). Self-reliance is identified as “premature conferral of adult status and independence”, “growing up without your parents” and “survivor pride” in being independent (Samuels and Pryce, 2008, p.1202). The premature conferral of adult roles is not just evidenced in a socially comparative move to adult independence. It is also a reality in some pre-care entry experiences, when young people have to actively support their

families emotionally or practically because of difficulties such as parental substance use. Samuels and Pryce (2008) found that most of their participants “passionately rejected” (p.1203) the idea that their time in care affected who they were as people, yet all participants described feeling different to ‘normal’ children whose parents were emotionally and practically supportive. This highlights the real and symbolic nature of “growing up without your parents” for young people in care, who have either lost their parents through death or as a result of being removed from the parental home by social services, which undermines “their secured membership in a stable family” (2008, p.1204). The participants in Samuels and Pryce’s (2008) study differentiate their experience from those of other young people, speaking of how they lack the security and ongoing support of family in comparison to their peers.

International research has suggested that resilience and school performance are related (Rutter, 1998; Jackson and Martin, 1998; Stein, 2005, 2006b; Rutter, 2012). The importance of educational outcomes upon leaving care is evidenced in the literature regarding understanding the later outcomes of care experienced adults. Educational attainment is also a feature measured within social work assessments for young people in and leaving care, where it has been shown that children in care perform comparatively poorly.

Gilligan (2013) identifies the under-researched area of care leavers’ participation in work and recreation as a means to explore the potential to build resilience. Although research into family and education is the area most researched, Gilligan believes that “recreational and work settings offer opportunities to acquire socially valued roles that may confer many health and social benefits” and that research into this area had been neglected (2008, p.41). Gilligan presents a total of twelve examples to support his argument, these are drawn from secondary sources of data and anecdotes collected through his professional networks. There was no systematic approach to data collection and all of the examples support his argument; it was unclear which anecdotes were not disclosed either by the researcher or to the researcher (2008). Yet Gilligan (2008) achieves a compelling argument that supports the homogeneous approach to actively encouraging carers and social workers to have recreational/occupational roles that allows for



emergence of heterogeneous experiences and achievements of young people. It highlights a need to move away from the notion of meeting children's needs primarily through a stable home and educational outcomes and demonstrates the role that carers can play. It perhaps reveals, though, that not all young people in care will be able to benefit from this because of a lack of suitable placements/carers/financial resources.

Contrasting this with pessimistic representations of care leavers' life chances, Gilligan argues for "a prudent optimism that is grounded at least in part in an appreciation of the resources that may be waiting to be tapped ... in arenas such as recreation and work" (2008, p.47). Gilligan's (2008) argument that young men may benefit more in terms of promoting resilience as they are less likely to have informal social networks; this reverberates with Buchanan's (1999) finding that male care-leavers in employment were less likely to be depressed than their unemployed counterparts.

The normative nature of resilience during adaptation to adverse circumstances is illustrated well in Guest's (2012) research; she considers the tenacious concept of resilience and outlines a number of conceptual misnomers (see also Mallon, 2007). Guest's work is situated in a psychosocial analytical framework within which she sought to examine the ways in which adults (who had previously been in foster or residential care for over 5 years as a child) made meaning from their experience of care; arguably, though, her approach submerges the social beneath the psychological. Guest (2012) engages with the conceptual ambiguity of resilience without reducing the debates to simplistic applications. This greater theoretical engagement allows the analysis to be founded upon a broader conceptual basis for identifying risk and protective factors (Guest, 2012). This moves away from a dichotomous understanding of the role of resilience to a more nuanced approach. Guest (2012) demonstrates this through a case study, showing how in Mac's story resilient, positive adaptation later became a negative adaptation: as a child, Mac reported his ability to emotionally "shut down" in response to events and feelings (Guest, 2012, p.119). However, this later emerged as a barrier for Mac when he tried to develop intimate relationships (Guest, 2012).

Having identified that the risk and protective factors relating to resilience are not experienced as continuities, Mallon (2007) uses this as a rationale for his research into the academic achievement of adults who have care experience. Most of the participants in Mallon's (2007) research who had entered HE had done so as mature students and had not achieved the necessary entry qualifications. From a small, purposive sample, Mallon (2007) concludes that these adults with care experience were academically resilient. Through unstructured interviews, Mallon (2007) found that pre-care risk factors were not as influential on educational attainment for his sample as other studies had suggested, and instead found that in-care risk factors were more influential. Furthermore, he identified that a serious in-care risk factor for low educational attainment, which sixteen of eighteen participants reported, was a general lack of educational support from or personal investment by statutory carers and social workers (Mallon, 2007).

Through utilising three distinct periods in each participant's life (pre-care, in-care and post-care), Mallon (2007) identified risks and protective factors at each stage. The post-care period is interesting as the ages in his sample ranged from 27 to 60 and only one male entered HE as a non-mature student (Mallon, 2007). Mallon (2007) identified that the protective factor of having access to a mentor in adulthood was important for the development of resilience in both sample groups. However, it is contestable that it was educational resilience that enabled HE participants to gain HE qualifications. Notably, personal meanings and enablers are excluded, beyond supportive spouses, regarding how and why a person might choose to access HE later in adulthood. It is important to question this as Mallon (2007) shows that there was no significant difference between the two groups' need to achieve in their life. Crucially, the protective factors Mallon identified emerged largely through "chance" (2007, p.115), thus demonstrating that whilst resilience can be promoted through policies it cannot be created. Mallon's (2007) study supports the observation that resilience can emerge in adulthood despite previous negative coping adaptations being present (Rutter and Warner, cited in Mallon, 2007, p.111). In addition, Mallon's (2007) findings do challenge the validity of Stein's typologies of care leavers (2005).

Researchers examining the outcomes of young adults who have been in care generally link resilience to positive adaptation. Conceptual usages of resilience are evidently interdisciplinary, but the associated risks and protective factors identified may not actually be related to resilience per se, despite their ability to affect someone's life. One relevant finding is the importance of social relationships for young people leaving care (Gilligan, 2008). One of the major hurdles facing resilience testing is the indiscriminate equal weighting given to each factor, even though it is still not clear which are the most important factors, or why they are so (Honey et al., 2011; Mallon, 2007). This has been identified by Ungar (2004) as problematic in the wider field of resilience research. Future research will need to engage with the broader field of resilience studies that aims to differentiate buffering from protective factors, particularly when considering the development of non-parental relationships (Rishel et al., 2010).

The body of literature relating to resilience tends to read as an attempt to find a magic formula to explain the disparate outcomes for care leavers. By continuing to investigate the efficacy of resilience, academics may continue to promote the validity of the concept, despite it having been criticised in wider youth studies (Bottrell, 2007; Cooper, 2011; Guo and Tsui, 2010). The use of a multi-factor perspective is far more integrated than purely individual explanations, as resilience theories recognise the importance of people's social relationships.

One of the unintended consequences of resilience studies is that they have leaned towards individualistic explanations of social problems (Harper and Speed, 2012; Bottrell, 2009; Garrett, 2015). Harper and Speed (2012) critique resilience by highlighting three central problems: firstly, that resilience is "individualistic, based on medicalised and neo-liberal notions of individual responsibility"; secondly, that whilst resilience is often linked to a strengths-based model it still relies upon "deficit-based models"; and thirdly, that structural factors are "de-emphasized within a neo-liberal informed framework of identity politics" (pp.9-10). The interrelation of resilience with neo-liberal ideologies and the masking of structural factors has been commented on by others (Garrett, 2015; Bottrell, 2009; Guo and Tsui, 2010; Gillies et al., 2016).

In its current conception, resilience can misplace the effects of enduring societal inequalities, thus contributing to the misrepresentation of the difficulties facing care leavers as private troubles rather than public issues. In turn this may diminish the quality of future research as it may lead researchers away from the societal factors, which care leavers have been said to be more vulnerable to (Axford, 2008). It is in this way that resilience can be seen to pathologise inequalities.

Duit (2010) and Brand (2007) argue that resilience is founded upon normative understandings of functioning adaptation in society. Bottrell's research on a group of marginalised young women in Australia shows how 'at-risk' behaviour may actually function as a positive adaptation for young people:

*"Young people's struggles to be, and be seen as, who they are, may be seen as struggles for chosen, and against unchosen, social identities" (2007, p.108).*

Bottrell (2007) sees resistances, performed in at-risk behaviours, as a key part of the identity work of adolescents, and Guest (2012) examined how behaviours that were previously protective, providing resilience, later become problematic.

Resilience does not protect people from social exclusion. This is shown in Sean and Kidd's (2008) findings concerning resilience amongst homeless youth: the presence of resilience can be a buffer against the most extreme symptomatic difficulties, such as suicide, loneliness and mental health problems. The evidence does not suggest, either, that resilience enables young people to overcome structural constraints, as Stein (2005, 2006) believes. The research of Jones (2011), Jackson and Martin (1998) and Samuels and Pryce (2008) demonstrates that resilience does not result in the realisation of young people's aspirations. Resilience instead allows young people with limited resources to make the best out of a bad situation. However, it must be acknowledged that reviewed research rarely interrogates the societal risk factors that may affect young people in care, perhaps because individual traits and experiences are easier to identify.

Some contentions arise because risk theory is entwined with resilience studies. Foster and Spencer (2010) believe that resilience and risk frameworks are not useful in trying to understand youth trajectories and argue that such ways of knowing are a form of symbolic violence against those to whom it is applied because the definitions of them reflect middle-class normative judgements (Axford,

2008; Cooper, 2011; Foster and Spencer, 2010). In the current context of neo-liberalism it has been argued that “moral identity [is] made contingent on the active demonstration of resilience and determination to progress, regardless of disadvantage” (Gillies et al., 2016, p.231). Resilience is more dynamic than a simple deficit model of maladaptive outcomes, but Foster and Spencer (2010) suggest that it masks the symbolic violence of those deciding which factors are interpreted as risky or protective. Guo and Tsui (2010) believe that the concept of resilience should be reframed as resistance, which could recognise the agency of young people in resisting the odds of adversity.

Perhaps overcoming the odds, instead of realising the risks, should be seen as “active resilience” (Murray, 2010, p.115). However, the ways in which resilience has been measured in much of the research forecloses the existence of the active agent. Indeed, they reduce a human being’s potential to cope with adversity in the presence, or absence, of a number of individual, social and psychological traits and are inherently a project of rationalisation (Guo and Tsui, 2010; Foster and Spencer, 2010). This can be compared to the Western medical model and enlightenment issues. Even the literal connotations differ: to overcome adversity is to be resilient, but overcoming oppression requires resistance. In many ways the importance of resilience for children in care rests on the assumption within wider culture that children are vulnerable (Lee, 2001; Jenks, 1996; James and Prout, 1998) and that those who experience adversity will not develop healthily (Daniel, 2010).

Bottrell (2007) rightly points out that risks are not always experienced as such by young people. Contextualising this, in the UK this would mean that placement instability creates a greater risk to care leavers’ outcomes. But the way in which young people experience this may be as a loss, lack of control, failure, a disappointment or a change for the better.

### **2.3 An Integrative Perspective: Social Norms of Youth Transitions and Care Leavers’ Deviations**

A key foundation for developing the sociological paradigm of care leavers’ life course navigation is our understanding of the social norms of youth transitions to

adulthood. Qualitative comparisons allude to the deviations from expected social norms enacted by care leavers in their transitions to independence, including their age, transition impetus and experiences (Biehal, 1995; White et al., 2008; Stein and Carey, 1986; Stein, 2005, 2006a; Cameron, 2007). Thus, it is clearly important to place the experiences of care leavers within the broader experiences of young people transitioning towards adult independence across England.

The sociology of childhood highlights children as actors in society, with agency to act, interpret and explain their experiences at a micro level. Importantly, it also considers the category of 'the child' and 'childhood' in society at the macro level, where childhood norms are culturally and structurally (re)produced, although this varies depending on historical context (Daniel, 2010; Edwards et al., 2015). It is important to consider this, as children who experience care have often experienced adversity, and dominant knowledge would interpret this as a threat to a child's transition to adulthood (Lee, 2001; Hendrick, 1997; Daniel, 2010). Indeed the cultural perceptions of children's vulnerability and irrationality and their need for protection has been attributed to the absence of children's voices from research and decision-making (Winters 2006; Warming, 2006; Daniel, 2010; Lee 2001; Goodyer, 2013).

One important way in which the sociological paradigm can be applied to the research question is by contextualising the social policy affecting care leavers, which recognises the historically specific conditions of the lived life. This highlights that from the 1980s the Conservative agenda reified itself with neo-liberalism and the emergence of the New Right (Lodziak, 2002). The 1980s was a period when young people's dependency upon their parents was in part engineered through practices that discriminated on the basis of age, observable in minimum wage and Job Seeker's Allowance (JSA) levels for younger adults (Jones, 1995; Aldgate, 1994). This differentiation continues in England, where it is embedded in the introduction of a 'living wage', as only those over the age of 25 are eligible (gov.uk, 2016).

Whilst somewhat dated, Jones (1995) is able to guide readers through the leaving home transition, from being a dependent child to an independent adult. Jones (1995) acknowledges that there is no single moment of transition in the UK.

Rather, Jones sees independence as emergent over a period of time for most young people, with families and the state facilitating this. Currently there is an increasing trend for people aged 20–35 to live in their parents' homes. This has been in part due to the increasing participation in HE, with young adults returning home to mitigate increasing housing costs. This suggests that nationally the transition to adult independence is not a linear trajectory (Stone et al., 2011; Travis, 2009), as embedded in UK policy (Horrocks, 2002). Young adult care leavers' difficulties may therefore be conflated by this age discrimination that undermines their social contribution and work. This affects young people generally, but those who are unable to access support from their families are disadvantaged. Care leavers are far less likely to have access to these resources that could reduce some risks (Axford, 2008). This resonates with the continued problem of youth unemployment discussed in Aldgate's research (1994). Following her qualitative investigation, she concluded that in the general employment market there are simply not enough full-time jobs for those who want them, never mind that care leavers have comparatively poor qualifications, a poor self-image and poor health, making it more difficult for them to get a job (Aldgate, 1994). Aldgate argues that these are compounding difficulties that further marginalise care leavers by limiting their ability to achieve financial independence (1994).

Resonating with this, youth transitions literature highlights how transitions in housing, career and family are shaped by broader social economic contexts of place and class (Thomson et al., 2002; MacDonald et al., 2005) and problematises linear trajectories to adulthood (MacDonald et al., 2001; Horrocks, 2002; Thomson et al., 2002). Sociological approaches to youth provide contextualisation of young people's lives, which can avoid what Woodman (2013) sees as contributing to simplistic understandings that can be misleading (see also Shildrick et al., 2012). Such sensitivity to social context, then, can help understand how aspirations and opportunity can be understood as an interplay of social class, cultural norms and institutions (Bottrell, 2007; Kintrea et al., 2015; Thomson et al., 2002).

Neo-liberal ideology is embedded within contemporary education policies, and young people continue to be divided up in schools by social class, gender and perceived ability (Dornbusch et al., 1996; Renold, 2010; Thomson et al., 2002;

Roberts and Atherton, 2011). Consequently, Roberts and Atherton (2011) argue that young people are placed into “metaphorical queues” for appropriate employment whilst in school (p.63). They (Roberts and Atherton, 2011) identify that within this, there are many choices in education, with Britain having far too many educational structures, that are leading to “successive blind alleys” (p.63). This ensures the continuation of false belief in a meritocratic system and embeds neo-liberal principles firmly within education systems (Roberts and Atherton, 2011): it peddles the false belief that it is the poor choices that an individual makes that negatively affect their life chances. It also veils the structural factors that negatively influence young people’s range of actions (Roberts and Atherton, 2011; Thomson et al., 2002; MacDonald et al., 2005) rather than acknowledging that the structures of opportunities that can be gained through employment have collapsed since the 1970s, when the youth labour market almost completely disappeared (Ashton et al., 1989, cited in Roberts and Atherton, 2011). The impact of geography and context have rarely been discussed in studies on care leavers (Axford, 2008; see Cameron, 2007 and Elliot, 2002). Yet sociologists are aware of social stratification and the unequal socio-economic and different cultural characteristics of regions, cities, towns and villages that can enable access to opportunities or fail to offer them (MacDonald et al., 2005; Shildrick et al., 2012).

Normative viewpoints about the importance of the main factors associated with resilience, educational attainment and stability run through their definitions. This thesis suggests that this may in part be an unintended consequence of the pursuit of objectivism within research and the sidelining of people’s subjective understandings. Both the sociology of youth and the sociology of childhood iterate this need to temper normative standards of success (such as educational attainment) and failure (such as teenage pregnancy and maladaptive behaviours) with subjective meanings and understandings. The sociological concepts of alternative careers and bounded agency offer conceptualisations of the interplay between agency and structure in producing outcomes. Meanwhile, sociological research teases out how behaviours and outcomes deemed unsuccessful by professionals and/or official measurements may function positively for young people (Evans, 2001; Kehily and Thomson, 2011; Stephen and Squires, 2003; Bottrell, 2007). In this way, rich contextualisation of young people’s agency



provides less individualised understandings that account for individual agency and wider social contexts. Thus, listening to the stories of adults with care experience may provide insight into their experiences, and by analysing them sociologically there is potential to counter individualised explanations (Hare and Bullock, 2006; Garrett, 2002; Duncalf, 2010).

## **2.4 Privileged and Invisible Knowledge**

The concept of privileged knowledge producing invisibilities was developed by Stanley (1990). Privileged knowledge is a concept that refers to the way in which institutions prefer particular forms of knowledge, neglecting other forms of knowledge. Stanley argues that this produces invisibilities in their knowing (1990). In society this can be seen in the many differing professional bodies that rely on particular knowledges, such as doctors' reliance on biomedical knowledge and lawyers' reliance on legal frameworks (Healy, 2014). This is a poststructuralist approach, which acknowledges that there are plural ways in which people can understand the world around them. Foucault's historical study into the development of biomedicine, and Rose's (1994) later study of its applications in public health, show how societal changes shape, and are shaped by, the particular dominant knowledge at the time.

To illustrate privileged knowledge and the invisibilities produced, Stanley (1990) uses a case study involving an older man who has recently been left incapacitated by illness and his and the wider family's experiences of health and social services. Privileged knowledge, such as statistics recording outcomes of client groups, is problematised by Stanley (1990) because of its role in producing invisibilities. These invisibilities may be produced through rejection of certain theoretical bodies of knowledge, the casual acceptance of the pertinence of concepts or simply the negation of other factors that service users or carers may deem important or influential. In her case study, Stanley critiqued the reliance on statistics and the predetermination of factors deemed important to health and social care professionals when working with a family (1990). The invisibilities identified by

Stanley (1990) in her analysis suggest that statistics<sup>2</sup> can mask other factors that shape the effectiveness and appropriateness of an intervention. Stanley (1990) argues that one invisibility produced by the data recorded by health and social care professionals does not enable researchers to track and examine the movement between three different statistics or how such events in a person's life may be interconnected. Horrocks (2002) argues that this invisibility was evident in the statistics regarding the outcome measures of young people leaving care, as the lack of contextualisation to poor statistical outcomes dislocated them from the context of the lived life. This made invisible the knowledge of participants in Horrocks' study, and their outcomes were often interlinked with their "past transitions, current circumstances and personal factors" (p.331). Moreover, Horrocks (2002, p.331) demonstrates how the language in policy of a "clear pathway" makes invisible the need for provision for young people who may need to "backtrack". This could be relevant to a young person leaving state care and being unable to manage the transition into independent accommodation, which may result in homelessness, as they are unable to move back into care or the family home.

According to Stanley (1990), the dominance of statistics in privileged knowledge obscures the knowledge of service users accessing health and social services. This resonates with the way in which the government regularly publishes statistics on looked after children, but children's perspectives are mostly absent (Garrett, 2003; Winter, 2006; Holland and Crowley, 2013; Goodyer, 2013). Methodology, particularly sampling, may contribute to the production of invisibilities too. It has been noted that most studies recruit participants up to the age of 25. This is important to recognise as it may contribute to the invisibilities in knowledge of care leavers' outcomes in that most research only investigates a short period of the life span and does not evidence the life course. There are some exceptions: Guest (2011), Viner and Taylor (2005), Buchanan (1999), Mallon (2007) and Duncalf (2010). One issue with the concept of invisible knowledge is that it does not

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<sup>2</sup> Stanley (1990) focused on statistics generated from the referral of an older adult to a social services department, the case allocation and case closure, the application of Section 2 of the 1983 Mental Health Act, which resulted in a compulsory hospital admission, and the registration of a death.

account for the process through which statistical evidence is preferred to service users' voices. This critique will be returned to in Chapter 8.

Arguably, the use of psychological explanations dominates understandings of young people in care (Goodyer, 2013) and contributes to the privileged knowledge Horrocks (2002) says is implicit in social work research. As has been discussed, an individualistic approach is problematic for failing to complete, from a sociological perspective, an 'intellectual journey', as it inadequately explores the intersection of an individual's biography in the context of wider social forces (Mills, 1959 [2000]). Such omissions negate evidence of how a person's class, gender and ethnic identity, and the societal context of the lived life, can be helpful in understanding the life course. Indeed, evidence shows that children from families with a lower socio-economic status, who have a lone parent or are from a black and minority ethnic group are disproportionately represented in the looked after population in England (Peters, 2010; Axford, 2008; Buchanan, 1999). This illustrates the need for an intersectional sociological approach to understanding care leavers' lives.

## **2.5 Conclusion**

This chapter has discussed the current body of evidence seeking to explain the differential outcomes of young people leaving care. The research reviewed has resonated with previous researchers' observations that current understandings of young people in and leaving care embodies the normative expectation of the significance of education and aspirations for future outcomes (Hare and Bullock, 2006; Bottrell, 2007; Garrett, 2002) that is frequently reliant on individualised and psychological explanations (Garrett, 2006; Goodyer, 2013; Winters, 2006). Throughout this discussion a case has been made for the application of sociology to understand the life experiences of people who have experienced care. This has shown how research and theory from the sociology of childhood, youth studies and youth transitions can offer further insights into the lived life of these young people.

It has been shown that previous research has examined how resilience, education (including aspirations and expectations), risk and protective factors are suggested

but not directly expressed in care leavers' outcomes. Some studies have also highlighted how a lack of social and/or economic support could compound difficulties care leavers experienced when transitioning to adult independence. Later on in the thesis these factors will be discussed in relation to the empirical data collected. The research reviewed in this chapter iterates how care leavers' outcomes are ambivalent and, as Hare and Bullock (2006) suggest, they may not be as negative as dominant representations imply.

What have been observed during the development of this chapter are a number of difficulties in the knowledge base that help to understand the outcomes of care leavers. The first issue is methodological and rests upon the mean age of samples of care leavers in researched populations. The lack of research on care leavers over the age of 25, especially with a qualitative design, presents a major difficulty in accurately representing the outcomes of care leavers. Furthermore, such a lack of evidence produces difficulties for social scientists and policymakers seeking insight into the life course of adults with care experience. Thus, involving older care leavers as participants in research provides an opportunity for them to contribute to understandings of their lives. The second limitation is that the invisibilities in the current research are deleterious to the representation of care leavers' outcomes. By drawing on sociological research into education and youth studies, it was evident that there may be other social factors that need to be considered. Moreover, by not situating the exclusions and difficulties faced by care leavers within larger frameworks of research, a distinct void regarding comparison with their peers is created. Thus, explanations for deviance from a norm may be related to care leavers' looked after identity rather than an appreciation of the socio-economic contexts of their lived life. Additionally, the continued use of deductive research designs limits and forecloses the possibility of other explanations. An inductive design, however, offers knowledge generation within an under-researched area and analysis is led by the data, thus opening up the possibility for new understandings. Finally, current research presents young people who are care leavers as passive vessels. If Hare and Bullock (2006) are correct, it is the exceptional cases that make the concepts of resilience and attachment theory lean towards determinism. Thus, care leavers' ability to act as autonomous citizens is undermined by neglecting to scrutinise this dynamic. Such

deterministic concepts and neo-liberal rhetoric may serve to justify the ‘treatment’ of children in care as ‘other’ and essentially different. Indeed, this is embodied in the very way in which research addresses them as exceptions rather than as young people who just happen to be in the state’s care. These factors potentially contribute to the misunderstanding of the situation. Some have suggested that these identified limitations within the current body of relevant social work research demonstrate doxa, a naturalised form of symbolic violence (Foster and Spencer, 2010; Guo and Tsui, 2010). The culmination of the evidence encountered in this chapter provides an ambiguous portrayal of the outcomes of care leavers.

Thus, the task of this thesis is to address the mean age of the sample group and to implement an inductive exploratory design that allows participants’ narratives to inform the analysis itself, thus enabling space for the production of invisible knowledge. A central part of this requires recognising that the lived life of the care leaver is connected to broader social processes. The next two chapters deepen the discussion of how sociology offers a different perspective to individualised understandings of the outcomes of care leavers. They will also develop the theoretical and methodological principles underpinning the research.

## **Chapter 3. Moving On, Building Bridges: Sociology and the ‘Looked After’ Experience**

This chapter further explores how sociological theories have influenced research into the experiences of children in care. It is these theories and conceptual applications that informed the inductive–deductive analytical approach to the data in this thesis. This chapter serves to sensitise readers to analytical concepts that inform the inductive analysis of biographical interview transcripts. Following this, attention turns to what is meant by the term narrative in this thesis: this explains and demonstrates how narrative sociology enables a socially sensitive approach to the stories people tell of their lives and the way that stories can influence social change. There is potential that stories can address privileged knowledge by providing an opportunity for invisibilities to be identified. In considering the theoretical aspects of narratives and their use as a research tool, much of what will be seen helps to develop an exploratory *Verstehen*, to use Weber’s language (Morrison, 2006), of the experiences people have of state care as children and of their life courses. Finally, the work of Honneth (1996, 2007) and Bourdieu (1990, 1996, 2008) are explained to enable the reader to understand later analysis and discussion about how people with care experiences speak of their life experiences and the way that they narratively negotiate their identity. The connection between these theorists is their understanding of how social forces and power shape interpersonal encounters and identities using the concept of recognition.

### **3.1 Moving On: Sociological Research and State Care**

Previously, this thesis examined social work outputs and argued that they could be conceptualised as a form of privileged knowledge (Stanley, 1990; Horrocks, 2002). It was argued that this privileged knowledge obscures the relevance of other influential factors. It was shown how societal influences were obscured and there was an absence of insider perspectives on state care. These were seen to contribute to the individualisation of care leavers’ outcomes. Sociologists have a certain toolkit of academic resources, values and theories at their disposal; this pre-knowledge has made it possible to be sensitive to some of the invisibilities produced through the privileged knowledge of social workers (Stanley, 1990;

Horrocks, 2002). Other researchers have remarked upon invisibilities, such as how geography, power, politics and structure have been under-examined (Axford, 2008, 2010; Winters, 2006; Garrett, 2002, 2008; Goodyer, 2013). More importantly, privileged knowledge can silence service users' perspectives and the knowledge they have of their life experiences (Stanley, 1990; Horrocks, 2002). Winters (2006) suggests that to counter this researchers must listen to the "unfettered voice" of the child in care rather than be led by their own hypotheses (p.60). Consequently, this thesis seeks to address the weaknesses previously identified.

Utilising Stanley's (1990) understanding of the invisibilities produced through privileged knowledge, which Horrocks (2002) sees as implicit within social work research outputs, is a rationale for using a biographical approach. Horrocks (2002) shows that through listening to people's accounts of their lives a sequential understanding of social problems can be found. This is illustrated through two case studies highlighting how such invisibilities in knowledge can emerge. Indeed, the narratives presented focus little on the participants' time in care (Horrocks, 2002). This is itself revealing, as it indicates that the experience of being a care leaver, and the experiences of adversity, are not the only way in which people who have experienced care see and understand their lives.

A critical paradigm has been appropriated as this thesis seeks to denaturalise understandings, conceptions and understandings of what it means to be looked after and brought up by the state. Critical theory enables researchers to look beyond the veiled everyday assumptions about the world and can help to reveal mechanisms for (re)producing social, economic and cultural inequalities (Harvey, 1990). Other researchers researching the lives of children in care have used such critical theories. Snow (2006, 2008) uses Foucault's concepts, and Warming draws on Honneth's theory of recognition (Warming, 2006, 2015). Snow (2008) analyses the social positioning of children in care through critical discourse analysis; this shows how everyday social work practice can affect their identity. Using a Foucauldian framework, Snow outlines how the interactions of young people in care with other people were shaped by their ascribed status of being in care. Snow (2008) argues that this negatively affects the moral worthiness of

many CiC.<sup>3</sup> Meanwhile, Coy (2008) uses Bourdieu's concept of habitus to define the care system and the way in which it shaped the identity of care experienced sex workers. Here, the dominant narratives and stigma in society produced stigmatised othering identities, reinforced through care experiences (Coy, 2008). Identifying themselves as marginalised and socially alienated, their routes into selling sex were often facilitated by known others with whom they could recognise a similar 'otherness' (Coy, 2008). These studies suggest an *injury* done to a person's identity or moral worth because of their time in state care (Coy, 2008; Snow, 2006, 2008; Warming, 2006, 2015). Ibrahim and Howe (2011) draw on Goffman (1963) to explore the stigmatised identity of the experience of being a looked after child. But Goffman does not provide a framework for understanding the way in which identities are constructed and mobilised for political means. The symbolic interactionist perspective is important, however, as it recognises the importance of people's micro social relations for developing a sense of self. It could be useful, though, to draw on social theory that recognises the implicit structuring of aspects of people's life worlds. This chapter will now deepen this discussion of the role that sociology could have in furthering the knowledge and understanding of adults who spent time growing up in care.

### **3.1.1 Recognition and Children in Care**

The evaluation of a participatory research project forms the basis of Warming's (2006) application of Honneth's theory of recognition to children in care. Through the differentiation of children's experiences it is clear that they experienced the meeting of the need for legal recognition the most through participation projects. Warming (2006) noted that the experience of recognition and agency the young people had in the participatory space far exceeded that in their everyday experiences.

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<sup>3</sup> Snow concludes that in her research three analytical themes were identified in care leavers' narratives: disposable lives, regulated reality and a spoiled identity (2008). The disposability of their lives was seen to be reinforced through four areas: language, interpersonal relationships, institutional relations and disciplinary practices. Each area was said to have contributed to their ability to form long-lasting, affective relationships.



Addressing all three areas of recognition, Warming (2006) argues that the limits of legal recognition were reported by participants when they talked about the extent to which they were listened to when decisions were being made about their care. Social and emotional recognition were identified as things which were dependent upon intrapersonal relationships – not legal rights – which Warming reports that foster children often lack. This lack of recognition in all three domains is ultimately caused by moral violence (Warming, 2006). This is reproduced through decisions made in the child's best interests (1989, Children's Act), the position of children in society, the status of children in care as vulnerable service users, and organisations' economic rationality (Warming, 2006, 2015). All these factors, Warming believes, might restrict the degree to which these children are permitted recognised involvement in decisions affecting their care (2006, 2015).

### **3.1.2 Space and Place**

This section looks at the body of research that is concerned mostly with space and place, beginning with the research of Holland and Crowley (2013). It will also look at how space and place can play a role in the marginalisation of young people (MacDonald et al., 2005). As will become clearer in this section, spaces of public and private life are not separate from the rest of a society. The interconnectedness of the life course of CiC will become evident, particularly where some macro societal factors have been found to shape the consciousness and self-understanding of care leavers (Axford, 2008; Ibrahim and Howe, 2011; Samuels and Pryce, 2008).

A direct application of the sociology of childhood that edifies and respects the child perspective has been developed in qualitative research by Holland and Crowley (2013). Such an operationalism within a research design allows for the expression and investigation of differing concepts. Holland and Crowley (2013) conducted interviews using the BNIM method; however, they rejected the psychoanalytical framework in their analysis. Through using an inductive approach to their research, Holland and Crowley gained insight into the lived life experience of young people making the transition to being care leavers. In particular, they draw attention to the way in which CiC can be conceptualised as nomadic (Holland and Crowley, 2013). This is important as it takes the experiences of instability and dis-

continuity and reframes them in an experiential way.

In the previous chapter, stability and continuity were identified as factors that were recurrently identified as having a positive effect upon CiC, yet the way in which this is experienced by young people has rarely been examined. Holland and Crowley (2013) address this and suggest that instability should be conceptually reframed as 'nomadic'<sup>4</sup>. Traditionally, nomadic practices are linked to groups of people who move together, but CiC often move alone, without their parents or siblings. It is clear that using the biographical approach and an inductive research design has shown how a bottom-up approach to the experiences of CiC can help to reframe concepts through their perspectives (Holland and Crowley, 2013). Drawing on developments within the sociology of childhood, Holland and Crowley demonstrate the active role CiC have in family relationships and foster placements. Whilst this is not fully developed, it is clear that Holland and Crowley identify agency within the stories of the participants and succeed in not reducing the young people to having a passive role in their life course<sup>5</sup> (2013).

In contrast to the identified conceptual hegemony amongst social work academics, Holland and Crowley point to how stability and continuity could be effectually reframed as a "nomadic childhood" by highlighting experiences of Morgan's "three types of intimacy: embodied, emotional and intimate knowledge" (2011, p.35 cited

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<sup>4</sup> They also drew on their analysis to explore "birth families and emotions" (2013, p.60), "changing family relationships" (p.61), "hidden family information" (p.62) and "siblings" (p.62). A striking finding was that none of the participants had a positive relationship with an adult whom they had known since infancy. By exploring the role of family within the narratives told by young adults in state care, the authors highlight how they experience birth families and emotions and the way in which this is a transactional process, with the 'experience' changing and developing through relationships with other people. The insight of the participants, and the recognition of their knowledge being inherent in the methodology, demonstrates their ability to understand their own experiences and the way in which family relationships are dynamic and negotiated (Finch and Mason, 1993, cited in Holland and Crowley, 2013).

<sup>5</sup> Agency was described in the accounts of young people, often through the choice to (dis)identify with their birth family, the way in which they accessed family information and the way in which some expectations the young people had compounded their difficulties. In these accounts, care leavers are recognised implicitly as active agents in negotiating their life course.

in Holland and Crowley, 2013, p.63). They note that no one in their research sample had positive experiences of intimate knowledge throughout their childhood because they had to travel alone between placements. The methodology underpinning this work affirmed the legitimacy of the individual autobiography by trusting the young adults' interview data to guide the authors' research. Most pertinently, in relation to the analysis of the experiences of placement instability, it shows that qualitative data can provide a far richer understanding of the factors often identified as positive outcome predictors. The family space and the place in which young people negotiate their life are transactional; the research by Holland and Crowley (2013) highlights the way in which space and place are important for understanding the experiences of CiC and that young people will experience these in different ways. It remains unclear, however, how previous family moves contribute to their nomadism.

The majority of research is ethnocentric, and perhaps this has led to the impact of culture upon care leavers' life chances being discounted. Ibrahim and Howe (2011) state that transitions to independence for care leavers does not take place in a "socio-cultural vacuum" and that the transition itself is

*"saturated with cultural assumptions and expectations based on religion, ideology, gender, socio-economic status, and the historical moment" (2011, p.2437).*

Ibrahim and Howe (2011) interviewed care leavers in Jordan, they found that some difficulties in the transition to independence were the same as those seen in the UK and the USA, such as low educational attainment and compressed and accelerated transitions to independence. As there is little formal support for care leavers in Jordan, in comparison to legislation seeking to support care leavers in the UK, their inability to access housing and employment may have been comparatively more difficult. Ibrahim and Howe (2011) identified notable cultural beliefs surrounding the perception of care leavers as not being orphans (who are deemed deserving of support). The consequences were not limited to an internal process but were embodied in the individualistic activities of Jordanian care leavers, which were seen to diverge from the patriarchal, collectivist social norms (Ibrahim and Howe, 2011).

A comparative perspective can reveal some of the cultural differences that affect the way in which child services are delivered. This has the potential to allow the differentiation of the impact of differing welfare ideologies on care leavers' educational outcomes. Weyts (2004) aimed to do this when she examined the diverse welfare traditions in Spain, England, Belgium and Norway. The first two countries are identified as having limited resources that are only offered to those most in need, whilst the last two provide more preventative welfare support (Weyts, 2004). Whilst there were no statistically significant differences found in educational outcomes overall, there were identifiable differences surrounding the perceptions of the need for substitute care (Weyts, 2004). This led Weyts (2004) to conclude that the differing welfare systems affected the type of placement used (foster or residential) and the rationale for entry into care. However, when grouped into family or individual need, the majority were identified as arising from the family rather than a child's behavioural or health difficulties (Weyts, 2004). Whilst there are tenuous relationships between factors, needs, placement type and welfare regime, most of them are not statistically significant. The limit of such a quantitative assessment of substitute care is revealed in Weyts' (2004) statistically significant finding that if educational needs are unmet then it is likely that a child's other needs are not being met. It is difficult to discern whether this is due to a failure of provision for a child or whether there are other complicating factors such as behavioural issues. The lack of qualitative evidence in Weyts' (2004) research brings to the fore questions about how young people experienced these differential welfare regimes.

However, the geographical impacts were identified as being supported and facilitated by local networks (MacDonald et al., 2005). For MacDonald et al., "class experiences are mediated by place" (2005, p.887), and therefore it was the structural conditions associated with deindustrialisation and deprived economies in Teesside that marginalised young people. However, the nomadic experiences of children in care (Holland and Crowley, 2013) contrast with the locally embedded biographies of the participants in MacDonald et al.'s (2005) study. Therefore, it remains to be seen whether geographical factors may similarly influence the outcomes of care leavers.

The way in which place can affect outcomes is illustrated well by the use of Bourdieu's habitus and Foucault's disciplinary techniques. Coy (2008) defines the place of state care in the UK as a habitus, suggesting that it is a space that shapes everyday practices of young people who have to navigate these dispositions, ultimately shaping their agency. Snow (2006) argues that the site of care can be conceptualised as an oppressive space. Snow (2008) utilises the oppression indicators exploitation, marginalisation, cultural imperialism, violence and powerlessness (as defined by Young, 1990) to support her discussion of the experiences of CiC. However, Snow (2008) neglects to mention positive experiences and how this fits in with her argument. Positive experiences might be expressive of not experiencing oppression, or positive experiences may seek to ameliorate experiences of oppression.

Axford (2008) questions whether or not looked after children are socially excluded, rather than basing his article on the premise that they are. He outlines some of the different ways in which researchers and policymakers have understood social exclusion (Axford, 2008). This shows that five preconditions are necessary for a person to be socially excluded, including a range of personal and social factors, some of which are not in the control of an individual, e.g. industrial restructuring. By applying Axford's dimensions of social exclusion to secondary evidence garnered through a comprehensive review of research,

*"exclusion often precedes the care experience or is an unintended consequence of well-intentioned action." (2008, p.12).*

Axford (2008) argues that LAC are more vulnerable to structural forces. He (Axford, 2008) suggests that a social exclusion–inclusion perspective would be useful for researching LAC, as it places the emphasis on structural factors. The importance of wider social contexts has been alluded to in some research into the outcomes of care leavers (Stein, 2006; Garrett, 2002; Ibrahim and Howe, 2011; Samuels and Pryce, 2009; Guest, 2011).

Ibrahim and Howe's (2011) research differentiates the independence of care leavers in their sample from that of the more collective Jordanian society. Using the framework of Goffman's (1963) stigma, Ibrahim and Howe infer that care leavers are independent in a collective society to manage a spoiled identity,

created through their ascribed status in a society which presumes family closeness and consequently isolates them from the wider community (2011). To explain the phenomenon of the majority of their participants choosing not to stay in education, Johansson and Höjer argue that

*“while many peers placed in care can rely on having accumulated both social and cultural capital, often transferrable into economic capital from birth parents, these young people ... often stand alone, and as a result choose other pathways, not including education” (2012, p.1143).*

This could be said to be an indicator of the bounded agency of care leavers across Europe. The cultural contextualisation of Samuels and Pryce’s (2008) work highlights how, and why, research should not disavow social and cultural contexts, as they are relevant to understanding young adult care leavers’ decision-making and opportunities. Samuels and Pryce’s (2008) discussion situates the survivalist self-reliance of young people within the broader societal context of the USA whereby social attitudes attribute “positive meaning to surviving hardship” by being self-reliant and “disavowing interpersonal dependence” (p.1202). Subsequently, they situate their research findings within youth culture and argue that their findings “reinforce the idea that youth are embedded within this shared sociocultural context that reveres rugged individualism and personal autonomy” (Samuels and Pryce, 2008, p.1208). Whilst the function of survivalist self-reliance may not always lead to positive adaptation, it demonstrates the way in which people use a narrative to rationalise their difficulties after leaving care. It also demonstrates again the issue of perceiving resilience as effective in combatting structural constraints on young people. The explanations that young people had for not meeting their personal goals focused on self-blame, not a lack of financial, social, cultural or emotional resources (Samuels and Pryce, 2008). Clearly, the sociocultural environment in which people are care leavers affects the way in which they navigate the life course.

### **3.1.3 Identity**

Stein (2005) assumes the historical presence of stigmatising practices and a LAC identity. The stigmatising practices, e.g. the supervised communal bathing noted by Stein (2005), are a result of the position in which children in care are placed through their ascribed identity; some young people may experience the

powerlessness of having things done to them too. What has rarely been considered in research are the unequal power relations, the legitimacy of state intervention (Sheppard, 1995; Garrett, 1998, 2002, 2008) and the role these may have in producing problematised identities. Framing this within an understanding of ascribed and chosen identity resistance may become conceptually important when considering Honey et al.'s (2011) and Jones' (2011) research. They found that many participants reported that their time in care had no impact upon their schooling and life, which may have been a way of rejecting an ascribed label and choosing their desired identity. Ibrahim and Howe (2011) found evidence of stigma within care leavers' narratives and the way in which they had to manage a spoiled identity. However, Goffman's work is a form of group psychology that does not recognise the implicit reproduction of social stigma and the way in which it functions to serve a wider society.

The legacy of care and its effect on agency is discussed by Coy, who illustrates how for the women in her research sex work was an act of agency (2008). She is critical of the circumstances that limit the extent which people can choose, and does not deny a link with material poverty and psychosocial vulnerability. A sense of an acting self was achieved through the professional prostitute identity as it enabled the women to experience being a 'somebody' when they had previously been a "nobody" (Coy, 2008, p.15). Agency clearly achieves more than instrumental rational actions; agency, enacted here, has been shaped by other forces and a search for meaning.

These studies found that damage is done to a person's identity through their time in state care, often perpetuated from earlier experiences too; this is clearly not a passive response. Studies that have engaged with care leavers as active participants in research and that have followed a more inductive approach in attempting to understand the lived experience of young people in care or after exiting care have been far more insightful than studies that have used a deductive methodology to establish relationships between variables.

### **3.2 Understanding Care Leavers through Sociology**

Crucially, the research reviewed so far in this chapter has demonstrated the differing focus of social science when studying children in care. Moving beyond the individualistic models encountered in Chapter 2 has, arguably, enabled further insights into the life course of people with care experience. It has shown that with appropriate methodology choices there is potential for identifying and disseminating participants' own knowledge that has been obscured by forms of privileged knowledge. Studies that incorporate a reflexive qualitative approach to data gathering, in particular those of Warming (2006), Snow (2008), Horrocks (2002, 2006) and Holland and Crowley (2013), provide space in which other useful conceptualisations of factors affecting care leavers can be developed. This thesis suggests that deductive approaches need to be supplemented by more inductive approaches. Previous studies have served to develop the researcher's sensitising concepts. Following data analysis, these concepts have been critically engaged with to assess their usefulness for understanding the life stories of care experienced adults. Therefore, the focus of this thesis theoretically is on the appraisal of the usefulness of recognition for exploring individual life courses sociologically.

Snow (2006, 2008) discusses how oppressive practices may damage a young person's identity. Aldgate argues that some professional practices send the message to children that they "do not matter" and that this devalues LAC and symbolises them as "underserving of services" (1994, p.259). This finding is consistent with other work on identity and stigma in care (Ibrahim and Howe, 2011; Coy, 2008; Stein, 2005; Honey et al., 2011; Jones, 2011). If Snow's statements are accepted, then the experience of children in care is partly a form of oppression (Garrett, 1998, 2008). The use of Foucauldian concepts such as disciplinary regimes and governmentality make a compelling argument about the space of state care. This radical work is challenging and well argued. However, it neglects to record and conceptualise any positive experiences that young people in care may have, which may undermine Snow's (2006) argument that state care practices are oppressive. Applications of Bourdieu (Coy, 2008; Barnes, 2009), Foucault (Snow, 2006, 2008) and Honneth (Warming, 2006, 2008) have provided



theoretical and empirical accounts of how social organisation can shape care leavers' agency and structural interactions. This unites subjective and objective understandings of the social world's influence on individuals and groups. Coy's (2008) work, and use of Bourdieu's concepts, is a good example of how sociology can help to understand the way in which agency is affected by the space-place a person grows up in and how this is not static. Warming's (2006) inductive method responded directly to concerns raised by young people that her outsider status meant she could not understand their experiences. Thus, by utilising recognition, Warming (2006) not only critiques practice and experience but is able to address the potential for change. Goffman's (1963) work on stigma has been used on several occasions to illustrate the CiC stigma, but this has been shown to be problematic.

Qualitative inductive research contributes to developing a richer knowledge of the way in which being in care is understood and experienced by young people. Thus, qualitative research can provide a greater and more insightful understanding of the effects that care may have and the feelings and reactions it may contribute to. This can be illustrated by considering identity and stigma, which have been mentioned in a number of deductive and quantitative studies in passing. However, the ascribed in-care identity is perhaps more important than suggested for young people, as examples of it are raised in a number of studies (Snow, 2008; Bluff, 2012; Samuels and Pryce, 2008; Barn, 2009; Holland and Crowley, 2013; Ibrahim and Howe, 2011; Johansson and Höjer, 2012). It should be noted that claims that a CiC identity exists do not consider other identities a young person might develop; the temporality of their ascribed identity is rarely considered. This is worth considering as criminological work has suggested that a social role that changes over the life course can be instrumental for understanding offenders' desistance from further offending (Vaughan, 2007).

### **3.2.1 Sociology, Biography and Narratives**

The use of biographical narratives for data collection can enable participants to guide the researcher's agenda through methods that enable their 'unfettered voice' (Winter, 2006). However, it is questionable how much people's voices can be 'unfettered', as sociologists have argued that the stories people tell are shaped by

wider social norms and narrative resources (Plummer, 2002; Frank, 2010; Woodiwiss, 2009; Polletta et al., 2011; May, 2013). It has been shown, though, that biographical methodologies have the potential to address the power imbalance in deductive research settings and in the researcher's agenda (Horrocks, 2002; Winter, 2006; Holland and Crowley, 2013). Together these pieces of research demonstrate how inductive, grounded theory approaches can enable different knowledge to be generated (Horrocks, 2002; Holland and Crowley, 2013), although such approaches could be accused of developing a theory of children in care, thereby reproducing their social position as exceptional, or different. Thus, it is proposed that it would be effective to situate care leavers' experiences within a pre-existing theoretical framework.

The dilemma for the inductive qualitative researcher, then, in developing a sociological account of the lives of adults that experienced care, is keeping a balance between participant voice and the researcher's analysis and application of theory. This research's journey with theory initially involved using a grounded theory approach to data analysis and theoretical paradigms (Charmaz, 2006). Key to this is the development of sensitising concepts that help to account for a researcher's previous knowledge and its potential relevance (Charmaz, 2006). Sensitising concepts are acknowledged prior to data collection; these are drawn from pre-existing knowledge held by the researcher or from other research studies (Silverman, 2006; Charmaz, 2006). One can use previous research to show potential ways of approaching the data collected and raise questions about the value of concepts and connections between concepts (Silverman, 2006; Charmaz, 2006). Hence, analysis of data does not seek to force data to fit into pre-identified concepts; however, by highlighting conceptual possibilities, a researcher is able to consider their relevance from the data. This process reflects the messy complexity of using an inductive approach to research and analysis.

In late modernity the stories that people tell in their day-to-day interactions enable them to negotiate their subjective sense of identity, this can provide insight into their reflexivity (Giddens, 1991; Archer, 2007). Narratives and stories in late modernity have been described as key to constructing individual identity (Somers and Gibson, 1993; Nelson, 2001; Bamberg, 2004; Riessman, 2008; Ezzy, 1998;

Giddens, 1991). It has been argued that in late modernity self-reflexivity must be used to construct social identity; people create, reproduce and reconstruct their identities throughout their life course (Giddens, 1991). It is important to recognise that the presented identity of the storyteller is a preferred self, not an essential self (Bano and Pierce, 2013; Riessman, 2013). The implications of this are that analysis of narrative interviews can reveal the performance of identity, a self which is chosen for that particular interview setting and is instrumental for the teller (Bano and Pierce, 2013). Whilst the data collected for this research is temporally bound and constructed with a care-leaving peer, the biographical narratives are subjective accounts of care leavers' lives. Such subjective accounts should be accepted as truth in so far as they are an objective social document of the subjectivity of the narrator at a certain point in time and space (Bertaux and Kholi, 1984).

To understand how the social world affects individuals' life stories, research has examined how dominant narratives and normative expectations of the life course influence how, and what, people tell of themselves through stories (Nelson, 2001; Bamberg, 2004; Fivush, 2010; Woodiwiss, 2014; Maynes et al., 2008). This phenomenon has been described as dominant, or master, narratives (Fivush, 2010; Bamberg, 2004; Andrews, 2004; Nelson, 2001). Crucially, dominant narratives can affect a person's sense of self, either edifying or injuring a person's moral worth in their own eyes and the eyes of others (Nelson, 2001; Bamberg, 2004). Bamberg (2004) outlines how

*“master narratives are setting up sequences of actions and events as routines and as such have a tendency to ‘normalise’ and ‘naturalise’ with the consequences that the more we as subjects become engaged in these routines, the more we become subjugated to them ... master narratives surely constrain and delineate the agency of subjects ... at the same time ... these master narratives also give guidance and direction” (p.360).*

This understanding of looked after children and young people is, arguably, produced through the privileged, institutional knowledge of academic researchers and social workers (Stanley, 1990), which may reproduce dominant narratives (Nelson, 2001; Horrocks, 2002), acting as a tool of oppression through the individualisation of their outcomes. In the Introduction it was outlined how binary concepts have arisen since the enlightenment, creating two oppositional

understandings circulating: those of the victim and the villain (Harris, 1993; Cole, 1995; Hayden et al., 1999; Renold, 2010; Shaw, 2014; Allsop, 2012). These conceptions have evolved now, reflecting more contemporary ideas emerging from advances in child development, science and the impact of secularisation (Edwards et al., 2015). It is also clear from the evidence outlined in the preceding chapters how being a child in care continues to be a problematised identity. Renold (2010) proposes that the language of practice, for instance the acronym LAC(K), plays a role in (re)producing or reinforcing people's expectations of CiC. However, it is paramount to remember that the participants in this research are likely to have encountered other dominant narratives as their lives and social identities have unfolded.

The title of this thesis refers to narratives and discussions of the findings that explore both what stories were told and how these functioned to co-construct care leavers' narrative identities. This resonates with Plummer's definition of stories as being what is told, whereas narratives focus on how a story is told (2016). This does not exclude their interconnection. Indeed Frank is cautious about the extent to which stories and narratives can be consistently treated as distinctive (2010). Thus, the use of narrative in this thesis points to what is being studied: participants' personal narratives, which were co-constructed, and the events spoken about have meaning for their identity only in relation to other events (Somers and Gibson, 1993).

When examining the contribution sociologists have made to the study of narratives, it is evident that there is little consensus on how narratives should be collected or how they should be analysed (Somers and Gibson, 1993; Frank, 2010; Ewick and Selby, 1995; Polletta et al., 2011). The use of narratives in sociological research can be referred to as a data collection strategy; narratives can be the object of an analysis and can also mean narrative analysis (Ewick and Selby, 1995; Polletta et al., 2011). There are different ways of achieving a sociological examination of narratives, such as focusing on structural aspects of the narrative (Franzosi, 1998), language and the way in which narratives are used to negotiate life experiences (Plummer, 2002; Woodiwiss, 2009; Frank, 2010; Barcelos and Gubrium, 2014), how stories function or the use of limited narrative

resources (Nelson, 2001; Woodiwiss, 2014). Some sociologists use modernist story plots to analyse narratives and how they can function politically (Plummer, 2002). Plummer (2016) refers to this array of narrative approaches as messy; this poses a challenge for researchers seeking to understand different epistemological and analytical approaches. Despite the methodological disarray, this research aligns with the following principles of a sociological study of narratives: social resources are drawn on by people to construct their personal narrative; stories can reproduce or disrupt dominant narratives; participants' voices are important; and narratives are co-constructed and constantly reworked and the interpretations offered should be exploratory, not final.

The work of sociologists such as Plummer (1995, 2016), Frank (2010, 2016) and Woodiwiss (2009) highlight how narratives and stories are socially and culturally shaped. From this perspective, narratives are not told in a social vacuum and are influenced by wider social norms and narrative resources (Plummer, 2002; Frank, 2010; Woodiwiss, 2009; Polletta et al., 2011; May, 2013). But stories are not neutral products of the social world; instead the political aspects of storytelling are a feature in many sociologists' understandings of what narratives are and what they do (Ewick and Selby, 1995 ; Plummer, 2002; Woodiwiss, 2009; Polletta et al., 2011). The potential of stories, Plummer argues, is that they can "raise challenges, provoke change and set new agendas" (2016, p.211; Plummer, 2002; Woodiwiss, 2009). Indeed stories in this vein may have the potential to reconfigure private troubles as public issues. Plummer illustrates this with the collective identity developed through storytelling in the LGBTQ movement and rape survivor stories (1995; Polletta et al., 2011). Whilst sociologists are open to evidence that challenges, subverts or resists a particular dominant narrative, it is important to recognise that not everyone has equal power to do this (Plummer, 2002; Nelson, 2001; Polletta et al., 2011). Woodiwiss' (2009) work is an example of this, in which narratives from women are explored critically by considering the ways in which women's stories of child sexual abuse narratives drew on dominant narratives as resources for explaining who they were and their experiences. Elsewhere, Barcelos and Gubrium (2014) explore the personal narratives of young mothers and the way in which women used, or subverted, dominant narratives of teenage women; this reveals that deficit approaches undermined the positive importance

participants felt about being a young mum (Barcelos and Gubrium, 2014). The accounts in Barcelos and Gubrium's (2014) research show how participants negotiate professionals' expectations that embodied the dominant narrative. Hence, dominant narratives as a concept is useful for discussing the social nature of the stories people tell and recognising the limit to stories people can tell to make sense of life experiences (Plummer, 2002; Woodiwiss, 2009; Barcelos and Gubrium, 2014). Stories and narratives which challenge the dominant narrative can be dismissed, denied or rejected, and hence an individual may experience a loss of power and morality through being silenced (Fivush, 2010). For Woodiwiss (2014) and Fűredi (2004) this psychological gaze can mask other structural or social factors that may play a role in the production of troubling emotions and behaviours.

It is important to recognise that the personal narratives people tell are constantly being reworked (Plummer, 2002; Frank, 2010; Riessman, 2008). Dominant narratives evolve and reshape as research and knowledge is developed and society changes. It is likely, therefore, that participants' narratives would be told differently now from when they were first interviewed, as they continually experience, interpret and interact with the world around them. Moreover, a different researcher may have interpreted these narratives differently. Thus, the findings about identity negotiation are not final: the findings and discussion in the latter chapters of this thesis serve to open up a discussion about how audiences can understand the experiences of participants sociologically.

It is more appropriate to see the sociological exploration in this thesis as being achieved through a bricolage of sociological approaches: dominant narratives as a resource for individual storytelling, the sociology of childhood, family, education and social theory. The social theories are those that have attempted to explain how inequalities in social worlds are brought about, and whilst they could be accused of being meta-narratives (Somers and Gibson, 1993), they have also been shown to be sensitive to the way in which subjectivity is negotiated by an individual. Theoretically, then, the concept of dominant narrative resonates with Honneth's social misrecognition and Bourdieu's symbolic power and doxa (these are not taken as valid but are tested and critiqued through participants' accounts).

The use of social theory is not immune to ethical critique. However, it was felt that the inductive approach to theory selection and critique, based upon participants' narratives, would go some way to overcoming the symbolic violence of this act. Ultimately, this dissertation offers an ambitious but flawed approach to the sociological analysis of narrative data.

### **3.2.2 Building Bridges: Recognition, the Sensitising Concept**

The aim is that through using social theories the effect of wider social forces on an individual's narrative identity can be fruitfully theorised. As was seen in some research findings, there were wider social forces which were said to have shaped care experienced participants' accounts of their lives (Samuels and Pryce, 2008; Ibrahim and Howe, 2011; Johansson and Höjer, 2012). The value of social theory and philosophy when combined with empirical evidence is that together they can provide micro and macro understandings of the individual voices of participants. The final concepts and theories employed in the findings chapters were reached following data analysis so as to remain faithful to the inductive research process. The theoretical work of Bourdieu and Honneth utilises the concept of recognition as a key factor in the pursuit of social justice for non-dominant groups within society (Lovell, 2007). It is expected that the application of these theorists' ideas will enable another layer of discussion alongside participants' voices. This potentially enables theory to act as a weapon for understanding the ways in which power, domination and hegemonic ideas in society can marginalise some groups.

Whilst Snow's (2006, 2008) discussions are compelling, the toolkit Foucault offers is difficult to operationalise. Social justice is a shared agenda<sup>6</sup> for Honneth (1997) and Bourdieu and Passeron (1990). For this reason they are suited to understanding the experiences of people with care experience who have been marginalised (Axford, 2006), oppressed (Snow, 2006, 2008), stigmatised and labelled (Stein, 2006; Ibrahim and Howe, 2011) through their ascribed identity of being a child in (state) care. Furthermore, the application of their theoretical works to lived life experiences (see Coy, 2008 and Warming, 2015) builds on their

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<sup>6</sup> This is not to say that their understanding of the causes of oppression or of what social justice realised would look like are identical.

usefulness for critical social work (Garrett, 2007, 2010). As a concept, recognition could help to understand and explore theoretically how interactions with other people can affect a person's sense of identity. This is explored in the following sections.

### ***3.2.2.1 Honneth: Recognition and Identity***

Axel Honneth's contribution to critical theory builds on influences and critiques of Habermas' communicative action. Honneth's focus is on how unequal social and economic relations are primarily structured through social actions and moderating, hierarchical values and norms, not material bases. Crucially, Honneth's understanding of how this can be studied empirically is gained through the concept of misrecognition, which is an affective dimension of experiences in which people's justice claims are disregarded. Through the operationalising of misrecognition, Honneth's work seeks to provide an account of how social forces can impinge on people's ability to live a "good life" (2007, p.4). Honneth identifies three forms of recognition: legal, social and emotional (Honneth, 2003). These have influenced some participatory work with children in care as means for allowing them recognition (Warming, 2006, 2015; Nybell, 2013; Pinkney, 2011).

At the centre of Honneth's critical theory is the idea that the absence of appropriate recognition leads to experiences of misrecognition, or disrespect (Honneth, 1996). According to Honneth, there are three spheres in which recognition can occur: love and friendship, rights and solidarity. Recognition, or misrecognition, arises from situations of interaction between people (and/or systems) and functions differently depending on the type of recognition sought. The importance of recognition in relation to social justice for Honneth is in its relation to the distribution of economic resources and cultural value. Though the focus is on the experience of injustice through disrespect, a moral injustice has occurred when people "are denied the recognition they feel they deserve" for their achievements and their moral worth as an individual (2007, p.71). The focus of researchers then, according to Honneth, is to identify the social factors "responsible for the systematic violation of the conditions of recognition" (2007, p.72).



Honneth's perspective on recognition is that the first form of it, and arguably the most important for the development of a social identity, is love, or affective relationships. The primacy of this form of recognition is related to the ways in which Honneth perceives emotional recognition as being the blueprint for later social interactions. According to this perspective, recognition through emotional intimacies can build a positive sense of self in an individual. Meanwhile, if a person's emotional needs aren't met, or are disrespected, e.g. through abuse, maltreatment or denial of love, people experience a sense of injustice; such disrespect reduces a person's sense of identity by lowering their self-confidence and felt psychological security (Honneth, 1996; Warming, 2015).

The second sphere of recognition is legal rights. This relates to whether or not a person is able to be recognised as a morally competent actor and fully enact their rights as human beings. Here a person's sense of identity can be affected through recognition, generating "self-respect", which is a positive way of thinking about oneself (Honneth, 1996, p.129). Although predominately this sphere is about how individuals are able to secure recognition within a legislative framework, there are extensions to wider social and public spaces. Disrespect in the legal sphere can occur either when rights are denied or a person is excluded from the legal recognition they sought. The effect of legal disrespect is a threatened social integrity, as a person's sense of self is not recognised by other social actors (Honneth, 1996). Honneth's understanding of child and human development is normative and understands children as morally incompetent actors (Warming, 2015). Warming (2015) contends that researchers can reconstruct this sphere of recognition through sociological approaches to childhood, which cast children as structurally dependent social actors who can shape the world around them. They enable, for instance, the critique of the legal sphere where children are generally excluded from having formal rights, reconceptualising this as misrecognition (Warming, 2015).

The third sphere of this tripartite model is social recognition; here a person's traits and abilities are valued and esteemed by people in their organisation, community or society (Honneth, 1996). This form of intersubjective recognition can be seen to help in conceptualising how some people, because of their status, attract social

recognition, developing their sense of self-worth. Those who are not recognised for their contribution to the group (micro to macro organisations) are seen to be disrespected, and their personal sense of worth is negated. Social recognition can be attached to either individuals or groups, and, as Honneth argues, is dependent on their historical and social contexts (Honneth, 1996). Social recognition is particularly shaped by prevailing social values and norms. Honneth sought to untangle the relationships of power and legitimation at play in the public sphere, and one of his concerns was how unequal social relations are perpetuated in this area rather than it being a space in which all voices can be heard (2007). The identity of the receiver of social recognition is positively reinforced through rising self-esteem as other social actors attach value to them as contributors to the group. However, social disrespect can negatively affect a person's identity because they are not respected as equals in the social sphere. Individuals and groups who are disrespected in this sphere are subject to hierarchal values. This can lead people to denigrate other cultures and ways of living by misrecognising their contribution to a society or group (Honneth, 1996, 2007). Such experiences can threaten a person's sense of "honour" or "dignity" (Honneth, 1996, p.127).

One pertinent problem in Honneth's work is whose demands for recognition and respect should be listened to, particularly in areas where there are competing plural values and cultures. This is an area which Honneth rarely considers, but it is illuminated in his conversations with Nancy Fraser (2003), where he argues that legitimate claims to recognition are

*"demands that potentially contribute to the expansion of social relations of recognition can be considered normatively founded, since they point in the direction of a rise in the moral level of social integration" (p.187).*

Crucially, legitimate demands for recognition hinge on the effect that it would have on another group or individual and whether or not recognition would lead to the equal respect of people, e.g. far right groups' demands would be seen as illegitimate because of the effect they would have on other people/groups (Honneth, 2007). A particular issue in using Honneth's approach is that it does not consider wider societal factors that intersect in shaping inequalities.

Although Fraser (2003) accuses Honneth of ignoring, or sidelining, the need for redistributive justice caused by misrecognition, it seems more apparent that the

primary struggle from Honneth's perspective is in transforming social relations into something more egalitarian and universal. Fraser critiques Honneth for focusing too much on the affective dimension of disrespect, arguing that this detracts from the social and political dimensions (2003). Perhaps this can be challenged through Honneth's focus, the micro lived experience. It may well be that people experiencing social injustice do not always identify how structure and power might affect their life course. Furthermore, redistribution may not always be required to bring justice into previously marginalised people's lives, reframe their cultural values or include them equitably in all spheres of the life world. Praxis then is

*"how a moral culture could be so constituted as to give those who are victimised, disrespected, and ostracised the individual strength to articulate their experiences in the democratic public sphere, rather than living them out in a counterculture of violence" (2007, p.78).*

### **3.2.2.2 Bourdieu: Recognition and Identity**

Bourdieu's concept of misrecognition is only a part of his wider theory of societal reproduction. His use of misrecognition is similar to Marx's ideas about false consciousness, and suggests that societal relations dupe agents. Bourdieu defines misrecognition as people's lack of true awareness of how their lives are dominated by unequal social, economic and power relations. This occurs not through coercion, or conscious, willing compliance, but through the legitimated authority of those dominating power (Bourdieu and Passeron, 1990, p.14). Bourdieu's concept of misrecognition is quite different, then, to Honneth's understandings. As with Honneth's work, misrecognition is produced through experiences and events of social interaction; it is (inter)dependent on other people misrecognising who a person is, thereby producing effects of disrespect. Meanwhile, misrecognition for Bourdieu captures how a person misrecognises the power relations in society that shape their position in the world; this an ongoing process (James, 2015). Before Bourdieu's conception of recognition and misrecognition can be explained, it is necessary to clarify that it is mechanised through Bourdieu's concepts of symbolic violence, symbolic power, doxa and habitus.

Habitus is at the heart of Bourdieu's thesis about how people develop into socialised human beings with a role to play in the world. Crucially, habitus is the product of people's experiences, their embodied histories, and relates to the way

in which social relations shape their dispositions, beliefs and habits. Habitus is unconsciously formed and enacted. Thereby, habitus shapes an individual's agency (Bourdieu, 1984, 1996). Agency is understood by Bourdieu as being a product of a number of interrelated factors: "[habitus] (capital)]+field = practice" (1984, p.101). This formula highlights how practice is not deterministic, but a product of a number of societal forces that can affect individuals differently. Jenkins suggests that Bourdieu's habitus is helpful for bridging the agency–structure dichotomy when studying human behaviours (1992). Habitus is an individual's embodied history and, as such, it provides a way of thinking about and interacting with the world around them. This is demonstrated in Coy's (2008) use of habitus to explore how state care experiences shaped some women's habitus, demonstrating how their embodied histories influenced their agency and life choices. It is in this way that habitus can contribute to misrecognition, as processes of socialisation and domination (including symbolic power, violence and doxa) legitimate the injustice people experience. Lovell argues that Bourdieu is not deterministic but pessimistic about potential change to a person's dispositions, practices and habits (2008). Bourdieu conceptualises this as habitus cleft or transformation in his autobiography (Bourdieu, 2007).

Symbolic power works through historicised societal relations that reproduce the social position of people; some agents are dominators, whilst others are relegated to being dominated. It is these historically legitimated different social positions, which enable the dominant to judge other people in different fields according to their own values and norms (Bourdieu and Passeron, 1990; Samuel, 2013). An understanding of symbolic power is provided in Bourdieu's analysis of educational institutions and relations, whereby pedagogical authority and domination is legitimated through the educators' possession of symbolic power (Bourdieu and Passeron, 1990). Symbolic power relations for Bourdieu are the means which value some symbolic manifestations as being of higher social status than others, e.g. language and qualifications. The symbolic power legitimates their higher status and naturalises their achievements as meritocratic. Samuel (2013) explains this as follows:

*"Symbolic power exists whenever the arbitrary nature of a field's structure and rules is forgotten, misrecognized as natural and therefore preconsciously accepted*

*as the unthought premises of social interaction. In such conditions, the judgments of dominant agents are accepted—often in advance through anticipation—by dominated agents, even when those judgments are contrary to the agents' interest” (p.401).*

By masking the roots of inequality, symbolic power is able to legitimate itself and delegitimize alternatives (Samuel, 2013). Moreover, orders of symbolic power are learned in spheres where children are routinely socialised the most: the family and school. Through inculcating young people with the norms, values and rules of the pedagogic authority, they become an internalised part of a person's habitus, which will continue to shape their practices and dispositions throughout their life (Bourdieu and Passeron, 1990).

Symbolic power often results in symbolic violence (Bourdieu and Passeron, 1990). Some authors have usefully asserted the relevance of Bourdieu for understanding the affective nature of symbolic power and symbolic violence where negative portrayals of the self shape people's emotions and the resources available to them (Samuel, 2013). Ultimately, symbolic power plays an integral role in producing misrecognition and reproducing social inequalities. Skeggs (2004) illustrates how social relations are infused with moral judgements about class culture, in effect symbolic violence, describing how

*“the lack of knowledge to participate in middle-class taste culture is read back onto the working-class as an individualized moral fault, a pathology, a problem of bad-choice, bad culture, a failure to be enterprising or to be reflexive. This is why these dominant bourgeois models of the self are so dangerous; they always present the working-class as individualized moral lack” (p.91).*

Bourdieu defines doxa as naturalised knowledge, that is, knowledge that is accepted as true without critique (Bourdieu and Eagleton, 1991). Doxa are common sense understandings, beliefs and ways of interpreting the world that are taken for granted as true. This makes “the social world appear as self-evident and requiring no interpretation” (Jensen, 2014, p.21). Contemporary examples of doxic beliefs include neo-liberalism (Bourdieu and Wacquant, 1999), resilience and risk (Foster and Spencer, 2010; Cummin, 2016), prioritising children's needs within a family (Atkinson, 2013), the focus on raising young people's aspirations to improve outcomes (Roberts and Evans, 2013) and what is perceived to be in the 'best interests' of the child (Vandenbroeck and Bouverbe- De Bie, 2006). Doxa has been applied to the understandings and explanations of young people in and

leaving care. Spencer and Foster (2010) and Cummin (2016) argue that the use of resilience and risk in practice with young people in foster care is doxa. Although there is a lack of coherence about what resilience is or how it operates, it remains an accepted concept for assessing young people's needs and prospects (Cummin, 2016). This language forecloses the possibility of 'healthy' development and is an example of symbolic power (Spencer and Foster, 2010). Symbolic violence could result from the symbolic power of professionals to name through acronyms and labels, e.g. LAC or being 'at-risk', which are problematic as they have removed the subject from their own identity, replacing it with one legitimated through symbolic power. Bourdieu sees doxa as implicit within each field of practice; hence the prevailing doxa of any given field may vary (Bourdieu and Eagleton, 1991; Myles, 2004). For instance, a doctor in the field of medicine draws on the doxa of their field of practice, the biomedical model (Healy, 2014), whereas a sociologist might draw on sociological theories to examine the construction, role or experience of illness within wider society. That is to say, there are competing and contrasting ways of knowing. Thereby, Bourdieu acknowledges that sociology can only offer one point of view on the world amongst many (Lane, 2000).

The role of doxa is that it legitimates symbolic power and the effect of symbolic violence. Importantly, if individuals (who are dominated) embody doxa, it can be deployed as cultural or symbolic capital. In this sense it is practical. According to Bourdieu, doxa, self-evident 'truths', maintain relations of domination by contributing to people's compliant misrecognition of their position (Eagleton and Bourdieu, 1991; McKenzie, 2015, pp.8-9). Lane suggests (2000) that here Bourdieu's elitist attitudes towards knowing are revealed. This resonates with the critique aimed at Marxist conceptions of ideology, which is that it positions people as dupes of the system. Bourdieu argues that doxa is a better conceptual approach as it is less reductionist and that he has developed doxa to move away from ideology as it is very often an "insult" that becomes a tool of "symbolic domination" (Bourdieu and Eagleton, 1991, pp.111-112). Bourdieu is emphatic about the concept of doxa being different (Bourdieu and Eagleton, 1991; Lane, 2000; Wolfreys, 2000). He argues that doxa is embodied in practice (not just in an unconscious thought or idea that is internalised) and can be transformed to access capitals within fields (Bourdieu and Eagleton, 1991; Bourdieu, 1996; McKenzie,

2015). For Bourdieu, ideology only works at the unconsciousness level, and recognising ideology as false consciousness will not lead to collective struggles (Bourdieu and Eagleton, 1991).

Doxa is a part of the social system and is organised and produced through the unequal stratification of capitals; it is “profoundly rooted” in social relations (Lane, 2000, p.196). Doxa is knowledge that is used uncritically and in instrumental ways (Bourdieu and Eagleton, 1991; Cummins, 2016; Hughes et al., 2014; McKenzie, 2015). The dominant doxa in society are often normative positions, and the inculcation of doxa within a person’s habitus reproduces the status quo, which leads people away from resistance and towards compliance. Crossley (2016) and Jensen (2014) have discussed this in recent work on poverty and welfare in austerity Britain (Crossley, 2016; Jensen, 2014). Recent work employing the concepts of doxa, symbolic power and symbolic violence rests on the way in which doxic beliefs are “an act of governance” (p.72) that is used in “instrumental ways” (Cummin, 2016, p.81; Hughes et al., 2014) to devalue particular groups of people (Bourdieu, 1996; Myles, 2004; McKenzie, 2016). Doxa can then lead to incomplete, oversimplified understandings, which lead to individualised explanations and responses (Cummin, 2016; Hughes et al., 2014; Crossley, 2016; Jensen, 2014). This contributes to the dominators and dominated, recognising their compliance in producing misrecognition. Bourdieu does acknowledge that the beliefs that legitimate the symbolic violence, doxa, do not have to be embodied wholly, they may manifest themselves in internal suffering, pain or self-hatred (Bourdieu and Eagleton, 1991). This reveals a need to consider Bourdieu as valuing the individual subjective experience of those dominated (Bourdieu and Eagleton, 1991; Bourdieu, 1992; Bourdieu, 1999). Consequently, doxa is useful for understanding the affective suffering produced through legitimated unequal power relationships, where the dominated are devalued.

The concepts of symbolic power, violence and doxa provide an understanding of how misrecognition can affect identity through the effects it has on individuals’ habitus, ultimately meaning that they don’t recognise how social relations produce their privilege or marginalisation. Later on in this dissertation, the concept of doxa is used to discuss participants’ stories. When doxa is used, it refers to participants’

beliefs that are spoken about as naturalised knowledge concerning the way things should be or the causes relied upon to explain difference. Sometimes doxa may be challenged or disrupted by the stories people tell (Connelly, 2014).

### **3.2.2.3. *The Family, Identity and Recognition***

Axel Honneth sees the family as the key sphere for emotional recognition, that is love as interpersonal respect (1997). The experience of emotional disrespect has been analysed by Yar, who demonstrates how this could be used to understand an individual's life trajectory (2011). Yar (2011) developed a life history approach through the reading of violent offenders' biographies, analysing the ways in which experiences of misrecognition, especially that of love, can lead to deviance. Yar's (2011) analysis supports Honneth's (1997, 2007) approach to emotional disrespect, that it can produce an inability to recognise other people's rights and needs. This is not a particularly hopeful conception of human nature and its capacity for adaptation and change, and this is a common critique of Honneth's psychological determinism (McNay, 2008; Garrett, 2010; Fowler, 2009).

According to Honneth (1997, 2007), the experience of love as recognition during infancy is the foundation of a child's relation to the self, particularly their self-respect. This perspective appropriates contemporary understandings of child development, uncritically using some of the work of Bowlby and Winnicott (Honneth, 1997; McNay, 2008; Garrett, 2010). Honneth uses normative concepts, for instance "mother", to develop this (Honneth, 1997, p.100). Moreover, he argues that the family is a private sphere (Honneth, 2007; Fowler, 2007). This is a problematic understanding, as perceiving the private family sphere as a unit of reciprocal unity masks the insidious sides of contemporary domestic life (Long, 1998). Additionally, Wyness has shown (2014) that the public-private boundaries between the state and the family are permeable (p.70). The family as a private sphere, Honneth believes, is a result of how in contemporary society family relations are not based primarily on economic necessity but on individualised affective ties (2007). In the family space, emotional ties are the primary form of integration between family members. Consequently, Honneth argues, the family unit has become destabilised generally because of the way in which emotions are



a less firm basis on which to organise a social grouping, particularly when compared to the historical economic bases of family and households (2007).

As emotions are not static and are likely to change over time, Honneth perceives emotional ties as contributing to “new dangers” as families are more at risk of losing the ties that bind them together (2007, pp.148-149). Feminists have critiqued Honneth’s approach to the family as not being critical enough and even daring to romanticise the family (McNay, 2008). However, it seems that Honneth has made an effort to consider the specific positioning of children and women in a family, identifying them as more in danger of the insidious effects of domestic life (2007). Indeed Honneth identifies the family as playing the primary role in preventing female autonomy as there continues to be an unequal division of labour focused on women’s custodial and reproductive roles (2007). What is problematic about Honneth’s perspective is the basis of the unequal distribution of oppression within the family, which is not based on societal relations but primarily arises from family intimacies. This approach ignores the way in which gender expectations have historically shaped men’s and women’s positions within society.

Bourdieu takes a very different approach to understanding the family in contemporary society, arguing that the family in itself can be a form of symbolic capital (1996). This is really pertinent as the lack of hegemonic symbolic capital associated with non-normative family experiences positions the family and its individual members as worth less morally. The family, according to Bourdieu, is simultaneously an objective social structure of the life world in contemporary society and a subjective experience of group organisation (1996). Moreover, the family as a category is a social construction, although Bourdieu is keen to demonstrate the way in which it is also a reality of the life world for people in Western societies. What is understood as ‘family’, Bourdieu argues, is doxa, a naturalised understanding of how people organise their lives; it is a taken-for-granted idea of how personal lives should be organised (1996). It is in this way that the family can be said to be a “well-founded fiction” produced through socialisation and habitus en masse (1996, p.20). The family needs to be maintained, and for Bourdieu the performative aspects of family practices continually enable this through “obliged affections and affective obligations” (1996,

p.22), and even the literal connotations of family relationships, e.g. mother, brother, contribute to this.

Bourdieu identifies the role of family within society as integral for understanding social reproduction and the legitimation of inequalities, as it is the primary site of habitus structuring (Bourdieu, 1984, 1996; Samuel, 2013). The way in which individuals are affected by the development of a socially structured habitus is through their experiences and ability to deploy capitals in different social interactions. Meanwhile, privileged families, and people, are able to maintain their dominance through doxa, which legitimates the symbolic power of their available capitals (Bourdieu, 1996). In this way, habitus, capitals and power secure the reproduction of their position as dominators in the social world (Bourdieu 1984, 1996; Bourdieu and Passeron, 1990). Family functions as a field, where there is social, economic, cultural and symbolic capital and these are central to reproducing unequal social orders (Bourdieu, 1996). The extent to which a family as a unit has recourse to these capitals is dependent upon the individual family's position within the social order. The role of the state in producing differential family stratifications is central, as government policies and legislation have favoured particular family organisations over others, e.g. Clause 28 of the Local Government Act 1988 (Gillies, 2011). Arguably, today the focus is more on family practices than structures (Gillies, 2011). Therefore, family is both private and public, as it is privately experienced but at the same time infused with societal values, morals and expectations and reified by the support it receives from the state (Bourdieu, 1996). Ultimately, this legitimates the privilege of those who are able to conform to the normative family ideal (Bourdieu, 1996). This resonates with Wilson's (2012) study, which showed how normative cultural ideals of family and the associated personal moral worth of people who have non-normative family experiences are tied up with their experiences of being silenced, shamed and angry.

Families do not have equitable access to the perceived norm (Bourdieu, 1996). Those who possess the symbolic capital of the family possess symbolic power. This symbolic power can produce silence, whereby those who are marginalised are unable to perform family in the normatively privileged way, and they may even

be unable to speak of this oppression (Austin and Carpenter, 2008). Narrative data, which gives voice to aspects of non-normative family experiences and oppression, are not troubling, but an empowering individual activism (Austin and Carpenter, 2008). This can construct a counter-narrative to dominant expectations and understandings of family. As Arendt states, stories people tell can challenge doxa (Connelly, 2014). Arguably, the families of those who were looked after by the state as children have been positioned by the state as not ideal, or good enough, at a particular point in space and time. This could result in feeling shame; shame is in part a product of social learning about what is and is not ethically acceptable within society (Connelly, 2014). With regards to children in care, both Bourdieu and Honneth give a theoretical insight into feelings of shame which problematises the moral self; for Bourdieu it can be understood as symbolic violence, while for Honneth it can be understood as social disrespect.

This chapter has laid out the rationale for an inductive sociological exploration of the life course of people with care experience through the use of narrative methods. In addition, the theoretical concepts that will be used to explore participants' stories have been explained; these will be picked up in the data chapters. The following chapter explains the specific methodological approach taken in the fieldwork.

## **Chapter 4. Methodology: Inductive, Biographical Research and Fieldwork**

This chapter addresses the primary aims and objectives as identified previously. These have been shaped through the literature reviews on the life chances and outcomes of adults who have been in care. Next, this thesis connects these findings to the research questions and develops the rationale of the approach taken in the fieldwork. There is a discussion of the methodological approach, which includes the sampling design, biographical methodology, data gathering and analysis. This chapter begins with a brief overview of the research rationale and its methodological implications.

### **4.1 The Approach**

In Chapter 2 it was argued that current research contributes to the individualised understandings of the outcomes of young people in care. To encourage a different approach and address the underuse of sociology in research about people who have experienced care, it is clear that an exploratory inductive research design is appropriate (Bryman, 2012; Silverman, 2006). Inductive qualitative research designs preceded the development of grounded theory by Glaser and Strauss, and inductive social researchers reject the claims of objectivity and naturalism associated with grounded theory, even though they are similar in their approach to data collection and analysis (Silverman, 2006). Inductive qualitative research does not stress the generation of new theory; instead it allows for greater engagement with pre-existing bodies of knowledge that can support and/or challenge its assumptions (Charmaz, 2006; Silverman, 2006). This was important when researching the care-leaver population, as grounded theory was likely to generate a new theory from the sample; this would have been problematic as it could have perpetuated the exceptionalising of care experienced adults' life experiences. Moreover, to represent participants' lived life experiences, an inductive approach to biographical data collection is fitting as it allows the stories that participants tell to guide the direction of the research within the research frame (Silverman, 2006). By using biographical narrative, interviewing a participant

controls the way in which they tell their life stories. Arguably, biographical narrative methods allow previously marginalised voices that have been “flattened or silenced by an insistence on more traditional methods” to be heard (Ewick and Silbey, 1995, p.199). Thus, BNIM interviews were deemed appropriate as they invited participants to tell their life story in any way they chose, in the first interview (Wengraf, 2001, 2009). This enabled participants to contribute to the research agenda (this approach is detailed later on in this chapter). Furthermore, the age of the sample was extended to include adults with care experience over the age of 30, which addresses the need for research on care leavers over the age of 25. Thus, this research develops understandings of care leavers’ life courses. Together the research design and methodology contribute to the ethical substance of the research whereby an analytic framework does not subsume the lives of care leavers; instead, participants’ stories led the research. The research respects the told story and its teller as a whole, respecting their knowledge (Wengraf, 2009; Frank, 2010). In this way there is potential to reveal knowledge, often made invisible, about the factors that can affect a care leaver’s life course navigation.

#### **4.1.1 What Is in a Name? Life Stories, Biographical Research and Narratives**

The sociological use of biography as a method has its roots in academics’ empirical research at the beginning of the twentieth century and is strongly affiliated with the University of Chicago. This research was in part spurred by the historical recognition of societies’ oral history traditions (Atkinson, 1997; Roberts, 2002; Merrill and West, 2009). Roberts (2002) describes how life histories became unpopular during the 1930s as they were perceived to be more costly than interviews, unrepresentative, unreliable and ultimately unscientific as sociologists began to favour positivist methods (Pierce, 2003). C. Wright Mills (1959 [2000]) counter this, arguing that biography is a very useful tool for sociologists as it recognises the interdependence of the individual life story and its cultural, social, political and economic context. Becker and Berger join Mills in reasserting the usefulness of biography as an important tool in sociological research (Merrill and West, 2009).

More recently it has been said that sociology has taken a “narrative turn” (Atkinson, 1997; Roberts, 2002; Merrill and West, 2009; Pierce, 2003; Smith and

Sparkes, 2008), and the life story has been heralded as valuable in providing a special understanding of individuals' lives (De Fina and Georgakopoulou, 2008). Such approaches have received their share of criticism, including the romanticism of the method and consequently the potential "danger of recreating a new, individualised homunculus that escapes sociological or anthropological comprehension" (Atkinson, 1997, p.335). However, this is a simple overview and the use of (auto)biography, narratives and life stories has been operationalised and interpreted in a number of ways; resultantly, there are few distinctive boundaries between each type of life story collection (Riessman, 2008; Polkinhorne, 1995).

In part, Atkinson's (1997) warning is relevant to sociologists using life stories as a researching tool; however, such individualising tendencies may be avoided through the analytical approach (Denison, 2016). The chosen interview method, BNIM, is a psychosocial method but is more dependent upon the researcher's analysis and research priorities (Wengraf, 2009). In some ways, individualising experiences is easier than trying to understand the collective within such individualised accounts of life. The challenge for this research is to maintain the analytical links between individual and collective experiences. Furthermore, Atkinson's (1997) critique does not recognise the objective data collected through life stories. Bertaux (2003) believes that through life stories the subjectivity of the interviewee can be identified; he argues that the subjective recounting of experiences is objective data. This is because life stories are accounts that are socially situated, socially constructed and serve a purpose for the teller – this is the objective data of the lived life experienced (Bertaux, 2003; Maynes et al., 2008).

The connotations of a life history approach suggest the collection of objective data that could be described as 'fact'; used alone, however, it can lead to the production of a one-dimensional analysis of the lived life, consequently negating the value of recognising the nature of the co-constructed interview data, and it is essential to acknowledge the way in which data is co-produced during interviews (Nelson, 2001; Bamberg, 2004; Riessman, 2008). Another problem with such objective 'facts' is that alone they do not allow the study of agency as they often

lack insight into peoples' subjective decisions. Thus, whilst facts are helpful to include in the analysis, they must be united with the subjective told story to produce an understanding of how a person experienced structure and agency and how this may have affected their life course navigation (Wengraf, 2001, 2009). The subjective dimension provides insight into how these life events were differently experienced and negotiated across participants' life courses.

Atkinson's critique does not consider how storytelling functions in societies for individuals and the overall social organisations (Plummer, 2002; Midgley, 2003). It also neglects the way in which life stories function in individual negotiations of identity and life experiences (Giddens, 1991; Riessman, 2008). Crucially, then, life stories not only function for individuals but can also demonstrate how stories "are connected to the flow of power in the wider world" (Riessman, 2008, p.8). Biographical research can also allow "hidden histories" to be recorded, and may serve an emancipatory role for oppressed groups (Maynes et al., 2008, p.8). Nelson (2001) identifies five societal constituents of told stories: a story demonstrates current subjectivity, the interview is co-constructed, stories are aimed at an audience, and life experiences are narrative resources for narrative negotiation of identity that can generate insight into moral worthiness. Nelson's (2001) perspective resonates with sociological approaches to storytelling and narrative discussed previously.

#### **4.1.2 The Biographical Narrative Interviewing Method**

The approach to interviewing utilised in this research is the Biographical Narrative Interview Method (BNIM). This approach is founded upon a recognition of the co-creation between interviewer and interviewee of the lived life story and the requirement for the researcher to not spoil the data with their own agenda; instead they respect participants' 'gestalt' (Wengraf, 2001). Thus, a single question aimed at inducing narrative (SQUIN) and the first part of the interview are unstructured, allowing the participant to contribute to the research agenda (Wengraf, 2001, 2009).

Bertaux (2003) states that some trends of narratives and anti-realism completely reject the idea that there is no external reality. Instead, he explains how realist and

constructivist paradigms can be used fruitfully in life story analysis. He points out that to believe in only a socially constructed external reality and the subjectivism of society erodes the discipline of sociology of purpose (p.45). It will be discussed later how the constructed nature of the stories told by participants can be seen through how they tell their stories and how these are reflexively drawn on in socially situated understandings of experiences and situations.

The extent to which participants' accounts of life stories and narratives are 'true' has been questioned (Riessman, 2008; Atkinson, 2007; Merrill and West, 2009). Although there are several factors that lessen the problem that this presents, crucially, the subjective truth is in itself also objective (Bertaux, 2003). Data gathered through life story elicitation is rich and allows for the analyst's emergence in the depth of the told story. Arguably, this data is more objective, not subjective, as it provides a clearer engagement with the way a life is lived, experienced and, crucially, told (Bertaux, 2003). Life story interviews allow researchers to analyse the micro interactions around phenomena, drawing out the personal understandings and the interactive nature of societal being (Nelson, 2001; Bertaux, 2003; Wengraf, 2001, 2009). In comparison, biographical questionnaires (such as cohort studies in the UK) are rarely used by sociologists, for whilst they allow for a statistical representativeness, the trends which may be identified are not supported by qualitative data thus leaving theorisation of phenomena to the analysts, without the rich data elicited through qualitative interviews.

In relation to the identification of power differentials and the dominant narrative of care leavers, it was suggested that these homogenised their experiences as young people, thus misrepresenting their identity. Hence, BNIM is a suitable method for use as it gives participants the choice of presenting their narratives without being guided by the researcher's questions (Nelson, 2001; Riessman, 2008; Wengraf, 2009). This allows participants to choose how and to what extent their time in state care, and their subsequent leaving-care experiences, is a part of their whole life. This is important so as not to misrepresent the importance and defining factors some might link to the experience of substitute care.



### **4.1.3 Epistemology and Ontology: Critical Realism, Biography and Social Constructionism**

Schools of epistemological thought are often presented as dichotomies that disallow the coming together of research paradigms. Much like the experience of research itself, the boundaries between research philosophies are blurred and should be used appropriately and reflexively by researchers as they are a key component of the research process. This research is influenced by critical realist social constructivism.

Critical realist epistemology is widely debated, although Bryman (2012) summarises Bhaskar's work defining critical realist research as observing the reality of the natural order. Meanwhile, constructivist ontology allows for the naming of objective social structures that are apparent in the social world but also recognises the agency in people's capacity to act. This epistemology has "subjective meaning ... at the core of this knowledge" and recognises the way in which subjectivities are created by factors beyond an individual's control (Della Porter and Keating, 2008, p.24). Critical realism and social constructionism philosophies have been described as incompatible, though (Cruickshank, 2012). Elder Vass demonstrates how this may not be the case, as constructivist critical realists

*"could see language, discourse and culture as products of interacting causal powers and also, potentially, as causal forces themselves. This opens up the prospect of seeing social construction as a real causal process, or a family of such processes" (2012, p.12).*

Houston (2001) reiterates this and shows the usefulness of critical realism and social constructivism together, illustrating how constructivism gives greater insight into critical realist understandings of structure and agency interactions, as it is an individual's reflexivity that often mediates the two; the effects of these interactions have been termed emergent properties. This epistemology does not create a dichotomy between agency and structure, instead seeing them as dualistic and separate, whilst simultaneously interactive (Houston, 2001; Elder Vass, 2012). Through research, insights into the generative power of particular ways of knowing can be gained that enables researchers to challenge the status quo (Nelson, 2001; Bryman, 2012). This is an influential epistemology that can be integrated with

Honneth's and Bourdieu's theories and the analytical tracks of what was experienced, and how, thus guiding the discussion of the interactions between participants, individuals, the state, and societal and institutional factors and giving a fragmented insight into their embodied histories.

## **4.2 Fieldwork**

This section presents and discusses the development of the research from initial training to the completion of data analysis.

### **4.2.1 Ethics**

It is crucial to recognise the responsibility of the researcher in the conducting of the fieldwork and the necessity to adhere to the research ethics policies of Northumbria University and the British Sociological Association. A number of ethical areas identified necessitate further reflection and strategy development to ensure adherence to these policies; this is important to ensure the well-being of participants and maintain the research integrity of the institution and discipline.

Firstly, all participants were adults and informed consent was a necessary precursor to the commencement of interviewing; participants' right to withdraw from the research at any stage or the process was explained to them. In order to provide confidentiality to participants and to ensure the safe storage of interview transcriptions and audio recordings, strategies were implemented that complied with the university's guidelines. In order to protect participants as much as possible from being identifiable, the first step was to give each participant a pseudonym and anonymise their transcripts, changing all names of people, places and organisations.

It is important to recognise the sensitive nature of this research and that it does have the potential to make participants experience difficult feelings. This recognition is part of being a responsible researcher (Lee, 1993). Whilst interviews may be unnerving and raise distressing memories for participants, there is no intentional aim to probe these difficult personal experiences. Some participants did get upset during the interviews and this was handled similarly in each case. They were asked if they wanted the interview to stop, were offered a break, and it was

checked that they knew they could stop the research at any time. No participant chose to withdraw following these breaks; they were keen to continue telling their stories. This is a result of the free-associative method of interviewing whereby participants are in control of what they chose to disclose (Wengraf, 2001).

Each participant was telephoned after about 24 hours of the interview ending. This was to ensure their well-being, to offer any sign-posting to services if necessary and to enable them to withdraw anything they had disclosed (Lee, 1993). The researcher also distributed a leaflet for participants with a list of organisations and their contact details that may be able to support them. The sensitivity of this research may also be identified in the potentially emotionally charged and/or taboo nature of being a child in care; indeed the invisibility of care leavers may be a direct choice of theirs (Lee, 1993). Therefore, it was crucial that participants discussed only what they felt comfortable talking about; this piece of research did not focus solely on the negative experiences potentially linked with being in care as a child but rather on these as a component of the semi-structured life history interviews.

All participants were sent full transcripts of their interview; this included more accessible formats where requested. These were valuable documents that they have co-produced, often recording significant life events and experiences (Nelson, 2001; Riessman, 2008). Each participant was offered, and accepted, a copy of the final thesis following the examination.

The imperative to maintain anonymity of participants was one of the key reasons for moving away from selecting a few 'cases' in the final write-up, which has been said to be the norm in writing up BNIM research (Wengraf, 2009). Apart from the ethical dilemma of keeping participants' accounts anonymous, there is also the need to consider the value of different approaches to writing up and analysis.

Maintaining safety in the field was done through having a list of participants' details in an envelope that was to be opened by a named person only if they had not heard from the researcher within 4 hours of the interview commencing. This never had to be opened and participants' details have remained confidential.

## 4.2.2 Sampling

Snowball sampling was initially used to gain access to adults with care experience. This method of sampling has been used successfully to investigate vulnerable, hidden and stigmatised cohorts (Heckathorne, 2002, 2011; Browne, 2005; Sadler et al., 2010). These seemed the salient descriptors of the care experienced population. This group has been described as “invisible” in society (Care Leavers Foundation, no date) and represents a small part of the overall UK population.

Within social sciences, the use of probability samples has been important in establishing the degree to which research findings are valid, generalisable and reliable (Bryman, 2012). However, as there is no representative sampling frame that can be developed for adults who experienced care, because of the lack of data recorded beyond organisational discharge, snowball sampling is appropriate (Heckathorne, 2002). Baker et al. critique this concern about qualitative research, arguing that a researcher

*“can never make her/his group of interviewees representative in the sense of quantitative sociology. For one thing, there is the problem of differential morality” (2012, p.32).*

The snowball sampling was initiated through three professional gatekeepers who contacted adults with care experience. Gaining access to some care leavers was easy because of the legitimacy lent through connections with relevant professionals who have worked with care leavers. This meant that eight participants were involved in the early fieldwork. It was then necessary to try and recruit more participants (Baker et al., 2012), so a different strategy was needed and relevant charity and community organisations were approached to see if they could circulate the advertisement or approach anyone they knew who might be interested in taking part. This brought forward two potential people, who after further discussion decided that the personal nature of the interview might be too upsetting for them at that time. Discussions then took place and ethical amendment forms were submitted to approve the placement of an advertisement in a local newspaper. This brought forward another six potential participants. After a discussion of the research only three of these people decided to take part. These strategies brought the sample to eleven adults aged 31–80 who had experienced care.

Perhaps one of the most frustrating tasks when doing the fieldwork was the recruitment of eligible adults. Two substantial difficulties were encountered whilst recruiting participants. One of these was the lengthy negotiations with relevant organisations that continued for over 6 months after approval because no one had had the time to email their networks. Contact was made with one LA in the hope that it would be able to help; however, it couldn't think of anyone. It could be questioned whether agencies are able to think outside the box, as they are likely to have a people with care experience employed sessionally as part of their foster panel and a number of foster carers are motivated by their previous fostering experiences as children.

Another problem, and possibly the most important factor to bear in mind, is that as older care leavers constitute a small minority of the population, inevitably there is a limited pool from which to sample. In part this is because when children leave care and are discharged from services there is no mechanism for keeping in touch; this meant that direct recruitment through LAs was of very limited use.

It is worth reflecting on this experience as recruitment is a perennial research problem and future research into hidden populations might be aided by a less intimate interview that takes 3 hours on average (interviews ranged from 1 hour 45 minutes to over 7 hours). Perhaps the style of interview acted as a deterrent to participation, as interviews would be time-consuming and in depth. It was suggested by a professional who works with care leavers that amending the minimum age of the sample might facilitate access to young adults, but it was felt that this would be counterproductive to the research objectives.

A potential limitation of such sampling is the potential bias in evidence that may be collected in this manner; for instance, those known to and associated with some of the identified gatekeepers may present one perspective and/or may possess characteristics or identities which contribute to their involvement with these groups (Arber, 2001, p.63). This will be considered in the final thesis chapter.

What this small sample does offer is recognition of the heterogeneity of participants' life experiences, and as the sample is small, a "fine-grained analysis" of the life stories has been provided (Bryman, 2012, p.18). This enables a

recognition in the researcher's analysis of each participant's "subjectivity and individuality", an important concern of qualitative research (Baker et al., 2012, p.23). Crucially, when deciding what sample size is required, qualitative researchers should keep in mind their overall project (Baker et al., 2012).

Initially, this study sought to recruit only statutory care leavers over the age of 30. This meant that they were ineligible for financial and practical support laid out in the Children (Leaving Care) Act 2000. There are three reasons why it is deemed appropriate for participants to be over the age of 30: firstly, in order to provide control for the changes in social policy as a result of the Children (Leaving Care) Act 2000, and secondly, because of their age such participants have temporal distance from their time in the state's care and have had time to develop through their adult independence. This contributes to knowledge as there is extremely limited qualitative data on this cohort and it may provide understandings of the similarities (or not) between adolescence-related negative outcomes and the life course. Recall how criminological research into persistence–desistence across the life course suggested that people desist from offending upon entering new social roles and experiencing turning points (Laub and Sampson, 2001; Vaughan, 2007). The recruitment in this thesis also develops the current body of knowledge, addressing the age limitations in most contemporary professional studies (focused on care leavers aged up to 25).

During the early stages of the fieldwork, people came forward to be interviewed and identified themselves as relevant because they were a statutory care leaver. However, as interviews commenced it became clear that some of them did not fit the statutory definition of a care leaver. Initially, relegation to pilots and learning from the process was considered. Such misidentifications could have occurred because of the way in which snowballing was used. They could also have occurred as a reflection of personal identity, whereby participants realised they didn't fit the strict criteria but they identified themselves as a 'care leaver' or the line 'leaving care to move to adult independence without family support' resonated with their experiences. Upon discussion with the principal supervisor, it would seem that as this research has been critical of policy towards young people and those leaving care, it is appropriate to demonstrate the incompatibility of the

statutory definition with the lived experience of people who experienced care. Thus, the definition of care leaver employed in this thesis is broad and encompasses all those who have been in state care and left, as suggested by the Care Leavers' Association's definition (2013b). These factors led to the conclusion that the most appropriate place for these interviews was within the sample.

#### **4.2.2.1 Negotiating Access: Insider, Outsider**

An 'insider' status was important in negotiating contacts and support from other organisations. Some organisations were initially unwilling to support the research through either helping with recruitment or visiting relevant projects until the 'insider' status was revealed. Using an insider identity to develop this PhD was difficult personally as this was something which the researcher prefers to keep private, although she knew that she would have to declare her insider status and any potential biases that may have unconsciously emerged.

Insider status has been critiqued for being non-partisan and can lead to over-identification; however, insider status can give interviewers legitimacy and be desirable in researching marginalised groups (Gair, 2012). The extent to which anyone can know whether the participants related to the researcher as a care leaver, a researcher, a woman or a student can be questioned. Arguably, some of the researcher's characteristics could have been perceived as an indication of being an outsider, perhaps because of differing experiences of socio-economic status as a child and/or subsequent education status. During the early stages of fieldwork, some participants were aware of the researcher's history as a care leaver because of their professional relationship. During fieldwork or initial interactions that built up a rapport, some participants referred at times to how 'our' experiences of growing up might be different. It was decided that it was necessary to disclose this status during recruitment if asked. Interviewers can use self-disclosure of sameness to address potential power imbalances in the research setting; this may also enable participants to share more details of difficult parts of their lives (Abell et al., 2006). Self-disclosure revealed little beyond identification as a care leaver; other details were never shared, although Breen (2007) argues that ultimately all face-to-face interviewing can be considered insider encounters of the human kind (Gair, 2012). Breen's statement does not suitably acknowledge

the way in which human interactions are structured and affected by power dynamics. Griffith (1998) demonstrates how by removing the dichotomy of insider–outsider, researchers can move away from temporally specific categories that fail to recognise the multiple identities people may have and connect with.

#### **4.2.3 Understanding Biographical Narrative Interpretative Methods**

Below is a brief overview of the different stages of interviewing and analysis (Wengraf, 2001, 2009).

Before commencing research it was identified that relevant training on the specifics of the interviewing techniques and analysis of BNIM would be necessary as the researcher had little prior experience of conducting qualitative interviews. The course attended provided a condensed and intensive experience of practising BNIM.

When using BNIM, the main interview is conducted in two parts. In the first interview, sub-session one, participants are encouraged to speak through a single question aimed at inducing narrative (SQUIN). The SQUIN below was used in the BNIM interviews and was agreed upon at the end of training with the facilitators:

*“As you know I’m researching the lives of people who have left care as I want to understand this better.*

*So, can you please tell me the story of your life and all those events and experiences that were important for you personally?*

*I’ll listen first, I won’t interrupt.*

*I’ll be taking some notes in case I have any questions for you after you’ve finished telling me about it all. Please take your time... Begin wherever you like.*

*So please can you tell me the story of your life.”*

Whilst the interviewee is speaking, the role of the interviewer is to listen actively to the speaker and make a note of potential follow-up story items for the second interview sub-session (Wengraf, 2001). At no point during sub-session one does the interviewer interrupt, cue or ask for clarification (Wengraf, 2001, 2009). Notes are made on a topic or statement on the left-hand side of the BNIM notebook (Wengraf, 2009). The first sub-session ends after the participant has finished speaking and the interviewer repeats a coda allowing for any further elicitation by the interviewee. This was:



*“Is there anything else you'd like to tell me about?”*

Both interviewee and interviewer take a small break. This gives the interviewer time between the sub-sessions to select fifteen to twenty story items for follow-up (Wengraf, 2009). These story items are explored through a particular approach to questioning.

The second sub-session uses a building-block approach to narrative questioning, beginning with the phrase “You said —. Can you remember any more detail about that feeling/image/thought, phase/period/time, day/event, occasion/example and how it all happened?” Questions about items must be asked in the order in which the narrator mentioned them. This follows a psychological approach, ‘gestalt’ (Wengraf, 2001, 2009). In doing this the interviewer is trying to elicit from participants particular narratives about events, particular incident narratives (PINs), that are subjectively significant. Sometimes this can take some rephrasing of questions; the expectation is that the interviewer pushes for PINs (Wengraf, 2001, 2009). Stories are often told as a more generalised narrative; these are referred to as generalised incident narratives (Wengraf, 2009). Following the end of the interview, the interviewer exits the field and spends time writing up their field notes, reflecting on their initial thoughts and the interview (Wengraf, 2009).

BNIM analysis focuses on comparisons between the biographical data chronology (BDC) and the told story structure (Wengraf, 2009). These are developed from the interview transcript. The BDC is completed before a language text sort of the transcript data, and following the structural text sort the told story structure is developed. This highlights the differences between the lived and told life, and from there a case dossier and analysis are developed to reach a psychosocial understanding of the interviewee (Wengraf, 2009).

The structural text sort influenced by Labov, Chamberlyne and Wengraf’s BNIM uses a structural analysis of the text sort to support their case-by-case theorising (2001). Structural analysis is not about the social structures of the lived life; structural analysis here refers to the way in which the interviewee tells their life story. The text sort of the BNIM interview applies Wengraf’s ‘DARNE’ (description, argumentation, report, narratives and evaluation) codes to the speech (2009). These analyse the exact type of speech used by the narrator. Focusing on the

argumentation and evaluation codes and their context can show “how clauses function strategically to orientate the listener, carry the action forward, resolve it, evaluate it” (Riessman, 2008, p.19). This part of the analysis functions to enable the researcher to investigate the contemporary situated subjectivity of the interviewee (Wengraf, 2009). This is done through a line-by-line text sort of the interview transcript, identifying the style of speech with particular attention paid to evaluative statements and the coda (Wengraf, 2009). Chunking of the told story is done too. This segments the interview transcripts into particular participants’ subjective phases. These are identified in the transcript by locating changes in topic or in the speaking voice (Wengraf, 2009). These were incredibly useful in constructing overviews of participants’ lived experiences. This process was used by the researcher to immerse themselves in the stories of participants’ lived lives. This was the basis for subsequent reflexive changes to data analysis, outlined towards the end of this chapter. However, there are a number of critiques of BNIM research.

#### **4.2.4 Pilot Interviews**

Pilots were used to test the SQUIN and to revisit the concerns that participants’ words, because of their time in state care as children, may be more scripted and therefore more difficult to explore. Only one pilot interview was experienced like this, with very little emotion being transferred during the interview. The interviewee herself reflected on the ease with which she shared her story and how her story was instrumental in accessing support, services and employment opportunities. This woman stated that she was very used to sharing her story. Unexpectedly, reading the interview brief for Pilot 1, the woman launched straight into telling her life story before the SQUIN had been asked. This interview demonstrated the need to be assertive and to be prepared for participants potentially trying to test reactions to their life experiences.

The second pilot interview was incredibly useful for highlighting the way in which feelings have to be managed during fieldwork. This encounter was more emotional for the interviewer than the first pilot. This participant in particular showed that the process could be useful for the interviewee, as she reflected on the way she’d never been asked before for an account of her life. She also shared that the way in

which the positive experiences were recognised as valid during the interview and talking about them helped her remember some normal, happy family times. This was embedded in future interviews.

#### **4.2.5 The Interviews**

Eleven BNIM interviews were conducted with care leavers aged between 31 and 80. Generally the interviews lasted about 2.5 hours, with the shortest being 1 hour 45 minutes and the longest 7 hours. Interviews were conducted in different locations: some took place in participants' workplaces, one in a community centre and most took place in participants' homes. Participants chose these venues as a space in which to have an in-depth life story interview. However, these differing sites may have affected the data collected (Riessman, 2008).

Most of the sub-session one and two interviews took place on one occasion; although Wengraf (2001) suggests a 15-minute break to review the key words, achieving that in practice was difficult. Only after the informed consent form had been discussed and signed did the tape recorder get switched on. A few people were hesitant and unsure where to begin; others chose to start their life story from when they entered care. These were interesting narration differences.

Often only a brief comfort break was taken; sometimes this meant that the selection of story item questions did not finish until sub-session two had begun. Questions asked by the researcher are formulated in this period and must be asked by the researcher in the order they were recalled, respecting the 'gestalt' of the participant (Wengraf, 2001). The aim of these narrative-inducing questions is to push for particular incident narratives (PINs); this is a storied answer to a question that fulfils a narrative event sequence. This could be difficult when communication was hampered by poor questioning, poor choice of the selection of story items and communication barriers. It was difficult to prompt for PINs repeatedly when an interviewee had expressed that they couldn't remember any more details.

Due to other commitments, two BNIM interviews were conducted in two parts. This seemed to allow for a more appropriate selection of questioning, as the researcher

was able to revisit the initial interview and reflect on any items inadvertently missed. Although rapport and subjectivity can flux between interviews (Nelson, 2001; Wengraf, 2001, 2009; Riessman, 2008), it may be more useful to plan such a break to prepare for the second sub-session. It was also evident that participants' second-guessing of the researcher's agenda shaped the stories that they told.

Field notes were taken after the interview; these often related to things mentioned when the audio recorder was switched off. They were also useful for revisiting initial impressions made in the interview and what emerged from the data analysis.

Following the final question, time was often spent engaging in small talk with the participants. A part of this often covered how they had felt during the interview. No participant chose to withdraw their data<sup>7</sup> or not to finish the interview. Many participants spoke about how this was the first time anyone had asked about their whole life story. Participants spoke of appreciating having time to tell their life story and having a non-judgemental listener. Many mentioned how, after telling their story, they began to remember more stories.

Data transcription took significantly longer than the proposed 3 hours per hour of recorded interview. This process further immersed the researcher in the life stories of participants and gave them further insight into their told stories. This was an intense process as it was a slow, methodical task and the difficulties faced by participants during their life course were often difficult to listen to. This resonates with the emotional work of research highlighted by others (Brannen, 1988; Dickson-Swift et al., 2007; Watts, 2008). In many ways transcription was the beginning of analysis as reflections of the interview itself were recorded, and these developed from the initial post-interview field notes.

#### **4.2.6 Data Analysis**

The limited number of sociological studies on the adult outcomes of care leavers had to be addressed by the researcher at the outset. No primary theorist was

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<sup>7</sup> One participant met to discuss their transcript and requested that a specific extract be handled sensitively.

identified as relevant. Therefore, a sensitising approach (Charmaz, 2006) to social theory was adopted. Thus, wider bodies of theories, almost a bricolage, were retrospectively applied to the analysis of the data participants generated to develop a theoretical framework inductively. These elements were clearly explained in the preceding chapter.

The relevance of storytelling about identity centres on Giddens' thesis that in late modernity self-identity is constructed through storytelling (1991). Giddens argues that identity in late modernity is something that people work on throughout their lives and is reflexively constructed and reconstructed through the stories people tell (1991; Nelson, 2001; Riessman, 2008). Together with the literature review findings, this justified the relevance of eliciting life stories for this research, thus providing a framework/orientation that respected participants' subjective selection of important life experiences.

After completing the interviews and discussing the BNIM analysis and research outputs styles, e.g. case studies (Wengraf, 2009), it was decided that only parts of the BNIM analytical methods would be followed. This served mainly to sensitise the researcher thoroughly with the different aspects of participants' told stories. Included was the biographical data chronology (BDC), which also featured in the first proposal for this research and is not unique to BNIM approaches. So too was the line-by-line text sort and participant dossier, as means for examining the presentation of identity during the interview. As discussed earlier, in order to investigate identity, the text sort of evaluation can help orientate the researcher to the "soul of the narrative" (Riessman, 1993, p.21), which is how the narrator wants to be understood, and the moral of the story they are telling to be understood too. The BNIM approach enabled consideration of the way in which the reflexivity and identity of adults with care experience were negotiated discursively during the interviews.

Anonymity has been preserved as far as the researcher is able to control this, as all names have been changed, and, where specific details are seen as risking the protection of participants' anonymity, they have been changed to a more generalised, but related, term.

Often with BNIM research a case study approach has been used to disseminate research findings (Chamberlyne et al., 2000). This presentation of cases was rejected for this research for two main reasons. The primary reason for rejecting a case study approach was issues of anonymity and the extent to which a case study approach would make it possible to identify individuals. This was especially important, as a number of participants are known to each other. Secondly, the exclusion of some life stories from the analysis is problematic. It seems antithetical to the overall research objectives to ask a person to contribute their life story to the project and then later decide to discount it, particularly when the aim of this research was to amplify the voices of care leavers in the research process.

The narratives expressed were co-constructed with the researcher; during interviews participants' narratives spoke of identity fluxes caused by a myriad of influencing factors within the contexts of their lives. These included, but were not limited to, being a son, daughter, brother, child in care, ward of court, mum, dad, friend and employee. Their stories continued to return to familial relationships at different phases throughout the fieldwork. The importance of family, the way in which family members were narratively negotiated and positioned by participants in their stories were, in part, a product of the interview.

One challenge sociologists experience when working with and analysing narratives is valuing participants' perspectives and interpretations, that is, their voice, moving beyond individualism to an appreciation of the collective (Frank, 2010; Plummer, 2002; Dension, 2016). Both Plummer (1995) and Frank (2010) reflect on the fact that the data they collected did not see the light of day for many years, as they grappled with how best to present accounts faithful to the storyteller. Getting this right was a struggle in this thesis, particularly when due regard is given to academic conventions, word counts and time limits for submitting research. Whilst Frank is critical of representing data by using small excerpts, as they do not capture the storytelling, he does concede that this does not undermine the validity of the ensuing discussions (2010). Moreover, Frank (2010) implies that the use of sound bites from interviews was in part a result of a deductive approach to applying dramaturgical theory. In contrast, theory in this thesis was inductively driven; it was reflexively chosen after the researcher

immersed themselves in the data to try to find what united participants' personal narratives (Plummer, 2002).

The focus on the life stories of adults who experienced care meant that it was pressing to not reduce participants to their care identity. Thus, whilst there are ethical issues regarding silencing parts of participants' lives, the main aim is to consider the overall life course. This was important to enable understandings of the adult outcomes of people who are care experienced and allows discussion of the way in which dominant narratives of children in care are valid. Engaging with the outcomes identified in the first chapters of this thesis opened up a discussion of the experiences participants spoke about to construct their personal narrative.

Although participants' voices are included in this thesis, the storytelling that Frank (2010) values is lost as there is a greater focus on attempting to value collectively significant life events. In contrast to a lot of narrative research in sociology that is suspicious of theory, Denison (2016) proposes that more theoretical analyses of narratives could lead to new empirical and theoretical insights. Although the representational approach, preferred by Frank (2010), fits with the ethos of this research it may not help move towards less individualised understandings (Denison, 2016).

The intact narratives (not excerpts) were reviewed iteratively for any unifying themes. This led to a focus on participants' negotiations of ascribed and chosen identities that could be seen to influence their subjective feelings of belonging, or being different. On reviewing these it was striking how participants spoke about their family and care experiences and used this to narratively negotiate difference and belonging.

Thus, it is clear how an inductive thematic approach to the analysis can be useful. This is because it situates the experiences of all participants together and pays attention to the differences and similarities in their told stories. The inductive coding software NVivo 10 was used to facilitate the organising of codes and their re-coding. Theoretical memo notes from grounded theory approaches were used to explore participants' data. Participants' shared experiences were identified in subsequent analysis, and this was supported by case comparisons (Riessman,

2008). By taking a more issue-based approach, a less individualised understanding of life stories can emerge (Roberts, 2002; Riessman, 2008; Maynes et al., 2008). The researcher then used Silverman's (2006) twin-track approach to analyse these experiences. This is done by paying attention to what was experienced and how it was subjectively experienced. This analysis provided the data for the following chapters.

The trustworthiness of the qualitative data presented and analysed has been examined through the presentation of these theoretical findings to social work academics and care experienced academics. According to Loh, this indicates the trustworthiness of the interpretation as it has been validated by both peers and care leavers (2013). This validation is also indicative of the credibility of this study's findings (Trochim, 2006). Moreover, the researcher has been keen to act with integrity regarding participants' life stories. One mechanism designed to achieve this was constant consideration of the way the analysis of one event connected with a participant's story.

### **4.3 Limitations of BNIM**

As a method of data collection BNIM offered advantages such as enabling participants to tell their story without any interruptions, or questioning, from a researcher. This enables a more naturalistic account of the life course. However, the use of BNIM did present ethical, practical and epistemological challenges. Discussing these will highlight some of the limitations of BNIM procedures and how these were managed in this research.

Practical limitations of BNIM include the very short break, 15 minutes, prescribed between the first and second interviews (Wengraf, 2009). At times this meant it was difficult to manage the task of selecting story items to ask questions about, as participants continued to make small talk. At other times there had to be a longer time (up to a week) between the first and second interview as participants had other commitments. On the one hand, this was useful as it allowed more time to be spent considering the selection of questions for the second interview. However, this is risky as the subjectivity expressed in the first interview could be reflexively altered by life events and experiences (Wengraf, 2009). This was not noted in the



interviews where there was up to a week's interval before the second interview. Participants were able to remember what they had said in the first interview; it may have been that the questioning format that mirrored participants' own phrases was able to prompt their memories. Had the time between interviews been significantly longer than a week, or if major life events had occurred between interviews, this effect may have been deleterious. An additional challenge is that BNIM interviews are time-consuming (in comparison to semi-structured interviews or survey methods) and respondents were giving time voluntarily. Consequently, this might have negatively affected the interview if participants were rushing through the first interview. It is unclear whether this occurred; however, participants indicated that they had at least three hours to take part. When a follow-up interview was arranged, participants were willing to contribute more of their time. This contributed to the other practical, time-consuming challenge of having a large amount of data to transcribe, analyse and present in a research project, as the large volumes of data collected meant that only fragments of a participant's story could be presented. These practical challenges intersect with the ethical and epistemological limitations of BNIM.

The methodological idealism and the effect of the research relationship between the interviewer and the participant were two challenges that were important when trying to understand the way in which BNIM analysis was reflexively changed in this research. Methodological idealism refers to the pure BNIM approach as outlined by Wengraf (2009). For instance, the second BNIM interview is premised on story items selected from a participant's previous interview. The task of the researcher in the second half of a BNIM interview is to push for PINs (Wengraf, 2001, 2009). During BNIM training this interview technique was experienced, and it was troubling to experience BNIM questioning that was used to elicit the recall of a concrete memory when none was forthcoming, or it was an event I did not want to speak about. During data collection, participants sometimes appeared frustrated when probed about a particular instance, using the BNIM interview notepad (Wengraf, 2009), when they could not recall, or communicate, a particular incidence. Others declined to answer some questions. It is apt, then, that this aspect of BNIM has been described as interrogative (Bamberg, 2005). Rephrasing the question so as to elicit a particular incident narrative may be indicative of poor

interviewer skills, and more experienced BNIM interviewers may not need to revisit a story item with participants (Wengraf, 2001, 2009). When conducting research, the theoretical basis behind the free-associative method, and the level of an interviewer's experience, does not free the researcher from their ethical responsibilities (Ross and Moore, 2016). This ethical dilemma was managed during the interviews by taking a signal from participants and moving on to another question.

Another consideration was the effect of the research relationship on data collection. This is a long-standing debate in social sciences research (May, 2011). A good rapport between researcher and respondent can produce more accurate data. However, the building of a good rapport between an interviewer and a participant by a well-meaning researcher could lead to interviewees disclosing more information than if they had 'kept their guard up', thereby unintentionally over-exposing themselves (Duncombe and Jessop, 2002; Gabb, 2010). It is important to consider this ethically as it may have unintentionally shaped the extent to which informed consent could be gained because it might have affected a participant's perception of the interview as a way of collecting research data.

Another ethical concern regarding BNIM interviews, and other in-depth interview methods, when researching sensitive topics is that it may harm participants to speak about experiences they found emotionally difficult (Lee, 1993; Gabb, 2010). This could have led to deviation from the BSA's (2002) ethical guidelines, which state that research should not harm participants' well-being. Contrary to this concern, many participants who recounted difficult experiences during interviews reflected that it had been useful for them. This is similar to other researchers' experiences, whereby participants speaking about difficult life events is experienced as cathartic (Gabb, 2010; Holloway and Jefferson, 2008). Throughout the fieldwork, a number of people interviewed spoke of the positive, and challenging, experience of being able to tell their life story and have someone listen non-judgementally to them. This indicates that the trust felt by participants may have been empowering because a researcher valued their individual experiences and sought to listen to a voice that was previously silenced (Edwards and Holland, 2013). It is important to discuss these ethical limitations of the BNIM

method, particularly as it was selected as the method that would enable participants to contribute directly to the research agenda. One effective way of addressing this was to approach ethics as an ongoing process, with consent “subject to renegotiation over time” (BSA, 2002, [www.https://www.britsoc.co.uk/media/23902/statementofethicalpractice.pdf](http://www.britsoc.co.uk/media/23902/statementofethicalpractice.pdf)). To enable this, each participant was sent a verbatim transcript of the interview; they were advised that they had one month to contact the researcher to withdraw all, or some, of their data. Only one participant decided to withdraw some of their data. Similar to researchers’ concerns about the effect of rapport on the research relationship is the worry that participants may reveal more information because of the researcher and not because of the research itself (Duncombe and Jessop, 2002; Clark and Sharf, 2007; Edwards and Holland, 2013). This indicates that whilst BNIM may be experienced therapeutically, this is problematic as it is not intended to be therapy. This problem was managed by clearly explaining, as a part of gaining informed consent, how the interview may work, how the participant may experience it (distress or catharsis) and that they had the right to choose to withdraw at any point. It was reiterated to participants that the purpose of the interview was to collect data, not to be therapy, and therefore the information gathered would be used in the research and its outputs.

Epistemological limitations of BNIM crucially shape how the data collected should be viewed, by the researcher and when disseminated. The free-associative principles embedded in BNIM methodologies stories told by participants are subjectively chosen and reveal unconscious processes (Jefferson and Holloway, 2008). This is a limitation for two reasons: primarily because this is not longitudinal and also because the data collected is likely to be affected by their current subjectivity (Wengraf, 2001, 2009; Giddens, 1991). This limits the extent to which conclusions about a participant’s situated subjectivity should be made by researchers, and ethical problems arise if it is assumed that a sociologist can be more of an expert in who a participant is than the participant themselves (Gabb, 2010). This limitation was a central part of reflexively discarding the analysis of subjectivity changes and when, and hypothesising why, and when, they occurred in this thesis. For instance, the use of biographical data chronology was retained as a way of understanding the temporal objective life experiences and changes

participants experienced, but this is not a method exclusive to BNIM. The line-by-line text sort and chunking of transcripts was used to condense the data prior to analysis. Ultimately, BNIM procedures amplify the individual's perspective. However, creating eleven individual participant dossiers and analysis led to huge amounts of rich data but little overall coherence. The lack of similarity of times in the way in which participants understood and talked about their lives overall meant that comparisons between told stories were not useful. The foundational steps were used to provide deeper immersion into the data. This was time-consuming but not irrelevant as it provided the basis for moving to Silverman's twin-track approach to considering "What" experiences happened and "How" they were individually experienced (2006).

There are questionable principles behind the free-associative 'gestalt' of the first interview, especially when trying to elicit the 'unfettered' voices of adults with care experienced. BNIM, in its approach to identity negotiation through storytelling, arguably allows insight into the role of cultural schemas in shaping the stories people tell (Wengraf, 2006; Jefferson and Holloway, 2008). This understanding is reflected in the use of the term 'dominant narrative' in this thesis. Crucially, acknowledging this epistemological position calls into question the validity of Winter's (2006) call for the 'unfettered voices' of care leavers as they will be influenced by dominant narratives and representations. Arguably, it is difficult to disentangle the self from society, especially when researchers take a social constructivist position. This knotty issue will be picked up again in Chapter 8. The value placed on individual subjectivity in BNIM research is a worthy one, but it does not negate the usefulness of objective data (Rossi and Moore, 2006; Wengraf, 2001, 2009; Ross and Moore, 2016). Some feminists have criticised the use of theory to analyse life stories (Gabb, 2010; Edwards and Holland, 2013). Amplifying participants' subjective perspectives can be problematic as it may misleadingly frame some life experiences as individual phenomena when they are actually a collective experience (Ross and Moore, 2016). Indeed social theory used when offering an analytical framework can serve as the objective dimensions of society (Denison, 2016; Costa and Murphy, 2015). This addresses the double bind of the dichotomous approach to the individual or theory-driven research that Bourdieu critiqued (Costa and Murphy, 2015).

This thesis now turns to the research findings. The following chapter presents brief introductory biographies of each participant. Discussion is then focused on the experiential factors that participants spoke of as preceding their entry into state care.

## **Chapter 5. Setting the Scene: Contextualising the Care Journey**

The purpose of this chapter is twofold. Firstly, it provides an overview of participants' lives. The material presented in this section has been developed from the biographical data chronologies developed for each participant and aims to provide a holistic understanding of each participant's past and present subjective and objective realities. Secondly, this chapter reveals participants' early life experiences prior to entering state care. The data in this chapter presents participants' accounts of their birth families and how they relate to their later journey into state care. For the vast majority of participants, telling stories about their early life experiences provided an understanding of what they experienced and how this was related to their subsequent entry into care. The excerpts provide the basis of discussions about participants, who as children negotiated the contexts of their lives. Consideration is also given to how experiences of family exclusion are used to narratively negotiate or construct an identity of difference or similarity. Together these parts enable the researcher to begin to answer the research questions, and these will be returned to in the discussion section at the end of this chapter. This culminates in a discussion of how the theoretical work of Bourdieu and Honneth can be applied to the data.

### **5.1 Biographical Sketches**

These are presented chronologically from each participant's year of birth. They have been developed from the biographical data chronology developed for each participant. The presentation of these short introductory biographies means that the reader will be able to situate later discussions and analysis within these biographical frames. As will become evident, although there are shared events amongst this cohort, they had heterogeneous experiences of state care, family, education and work across the life course.

**Tommy** was in his late seventies at the time of interview. He was born in London shortly before World War II and lived with his mum, dad and siblings until he was 6 years old. Tommy lives with his partner and has two grown-up daughters. His wife passed away just over 10 years ago. Tommy entered state care as a result of

being evacuated from inner London in 1939. First, he was sent to live with a family on a farm, and was then sent to two residential establishments for young people. Tommy was 11 years old when he and his older sister were reunited with their mother for the first time in many years. Tommy's mum had a new husband whose surname he was given as soon as he moved in with them and his two younger half-brothers. As a young man, Tommy enjoyed playing sports, particularly cricket, and he has continued to have involvement with the sport throughout his life. Tommy left school at 14 and started working down the local coal mining pit; he did this until he was 18, when he decided to join the army. This was a turning point in Tommy's life, and he spoke fondly of the camaraderie and how much he loved his work. Unfortunately, Tommy's wife became ill and he had to leave the army to support her and their two daughters. After relocating to Northern England, Tommy struggled to make the transition from the army to everyday life until he secured work in an opencast mine for a few years. He was then made redundant. Using the gardening skills he had developed in his own time, he secured work as head gardener on a large estate and continued this role in other places until he retired, shortly after his wife died. Tommy enjoys spending his time at the local cricket club and gardening.

**Harry** was born towards the end of World War II and was in his late sixties at the time of interview. In his early years he lived with his grandma and granddad before being sent to a children's home when he was about 4 years old. Harry stayed in this home for 6 months before being placed in kinship care with his aunt, her husband and their two sons in North East England. He stayed with them until he got married and moved in with his new wife, near her parents. As a young man Harry remembers working before and after school in various jobs, although his aunt would take his wages from him straight away. Living in kinship care for over 10 years, Harry was able to make friends locally; he spoke of how a youth club was supportive throughout his teens, giving him space to be with other young men socially. Leaving school at 15 years old, he went straight into work at a local furniture factory, where he met his first wife. His marriage to this young woman enabled Harry to leave the place where he was living. Harry and his first wife had two sons, but the breakdown of this marriage ultimately made it very difficult for him to continue to see his sons and at the time of interview he hadn't seen them

for nearly 40 years. Harry spoke of his working life and the intersections with meeting his second wife, particularly beginning to work for the local council's social housing department, first as a caretaker and then later as a security guard. He and his second wife had two daughters. Harry demonstrated the way in which he and his wife tried to do their best for their two daughters by enabling them to have experiences they never had, although there was a financial burden attached to this for them. Harry is enjoying his retirement and looks forward to going on holidays with his wife and to visits from his grown-up daughters.

**Jack** was in his late forties at the time of interview and is employed researching and teaching in a university. Jack spent his early years in Europe with his birth parents and younger brothers. Jack's family moved to the UK when he was 5 years old. Shortly afterwards, his mum left Jack's father as he was violent towards her, and she took her three sons with her. Subsequently, his mum tried to take her own life. It was at this point that Jack and his younger siblings stayed in residential state care for about 6 months. They were then reunited with their mum permanently, and at that time they had very little money and were given charity housing. Shortly afterwards, Jack's mum met and married another man, who was in the military, and he legally adopted Jack and his two brothers. The material conditions of Jack and his family improved significantly at this time. Jack's mum and adoptive dad had a son together, so Jack now had a half-brother. Over the course of the next 15 years, Jack and his family moved frequently (locally and internationally). During this time, Jack's mum retrained and became qualified to work in healthcare but had come to rely upon alcohol too much. When Jack was 16, his adoptive dad had another posting and the family migrated abroad again, shortly before he was scheduled to sit exams, and this had a negative impact on his attainment. Following this, Jack was offered a place on a Youth Opportunities Scheme to train to be a chef. After working as a chef for several years, he started doing access courses that would enable him to enrol on a university course. It was around this time that he fell in love with a young woman, who moved in with him, into his college accommodation, and would later become his wife. At the end of his undergraduate course he achieved a first-class degree and was encouraged by people to apply for a master's, and then later a PhD. Jack has two children now



and lives with his wife; his wife's family live nearby and offer support, which he and his wife reciprocate.

**Rachel** was in her mid-forties and working for a local authority as a social care professional at the time of interview. She was living with her partner and had two children: the youngest was still at home whilst the eldest child was at university. Rachel was the youngest child in her family and had four older siblings. At the age of 3, a family bereavement triggered her mother's mental health problems and she and her siblings went to foster placements and then a residential home. Issues surrounding mental health diagnosis are important in Rachel's story, as historically mental health was more stigmatised then than it is now. The family were, mostly, reunited after this and the three girls moved with their parents to the North of England. However, Rachel's two brothers remained in care. Shortly after this, Rachel and her sisters went into residential care in the North after her mother had another episode. During this time her parents' relationship ended. There were a few moves between residential care placements for Rachel. During her time in state care she maintained regular contact with both her parents despite contact with her mother not being facilitated by social workers. When Rachel was about 16, she and her sister moved in with their dad. Rachel struggled with a move from a caring, warm home to one where independence was promoted. Rachel reported doing a lot of menial, low-paid jobs during the first 15 years of her working life. She then applied to do a social work qualification, completed it and later returned for further study. Rachel reports how her previous experiences, being in care and her husband's extramarital affair, have eroded her abilities to trust and to feel secure.

**Lauren** was in her forties at the time of interview. She lived with her husband and two teenage daughters and was working part time for a university where she leads, teaches and researches. At the beginning of Lauren's life, she lived with her mum, dad and younger brother. A few months after her brother was born her father passed away, the details of which were hidden from her for many years. The impact of this bereavement on her mother's mental health was significant and Lauren's mum was hospitalised. This is when Lauren and her younger brother entered state care. They experienced a brief placement in a residential home before a more long-term foster placement in their home town was identified.

Lauren resided with foster carers for a number of years whilst continuing to have contact with her mother. When she was 6 years old, Lauren, along with her brother, were returned to permanently live with their mother and her new husband. Subsequently, Lauren and her brother were adopted by their stepfather. Recalling her childhood, Lauren speaks of the way in which this was a turning point for herself and the family as material circumstances improved. Contact with her birth father's relations continued for a few years. This was fraught with tensions, and Lauren wondered why they weren't more keen to continue a relationship with her, their granddaughter and niece. Lauren lived at home until she left home at 18 to move to a college to complete her A levels, prior to entering university. Throughout her time in school, she received support and encouragement from her mum and adopted dad. As an adult, Lauren continues to have a close relationship with her family. More recently, her dad has needed the family's support as he was struggling with mental health difficulties, and Lauren herself has only recently recovered from a life-threatening illness. Lauren worked hard to manage all of her competing commitments and this, at times, affected her self-perception of her ability to be a good mother.

**Carrie-Anne** was in her mid-thirties at the time of interview and was employed supporting young people; she was living with her dog. She was born in Northumberland and started her early life living with her mum, dad and older brother. She reports entering foster care during her infancy and being returned to her mum a few times before she was 5 years old. There are a number of family changes during her early life, with stepfathers and new brothers entering her life. At one point, Carrie-Anne was given the chance to move in with her dad and older brother but she describes declining this offer so as to stay and look after her younger brothers. During Carrie-Anne's teens, her mother experienced mental health difficulties that triggered another move into care for Carrie-Anne and her siblings. Carrie-Anne experienced state care a number of times in foster or residential placements, and by the time she moved in with her boyfriend's sister at the age of 16 she had already moved over fifteen times. Intimate relationships developed in her teenage years were abusive and controlling until, she said, she began to realise her own value. During her twenties Carrie-Anne travelled for work and experienced different cultures and family experiences which jarred with her

own. This affected her mental health, so she returned to England to live with her stepdad. Carrie-Anne now manages her mental health and is reflexive about her symptoms and diagnosis and the possibility of having a family.

**Vanessa** was in her mid-thirties at the time of interview and was working as a manager within welfare services; she lived with her two sons. Vanessa is the eldest of three siblings, and she describes the rejection she experienced during her childhood from her mother. As a child, Vanessa was very close to her maternal grandparents and spent as much time with them as she was allowed to. Around the age of 9, Vanessa decided that she couldn't live at home anymore and instigated the process of leaving, which led her into state care. After a brief spell in a residential unit, she had a few different foster placements. Vanessa was keen to be independent and moved into rented accommodation when she was 16 years old. During her teenage years she formed a significant intimate relationship with a young man, and the experiences of this relationship and his family remained a source of support for her many years after the relationship ended. Vanessa returned to school after taking her GCSEs but described having few friends, as many had left. The loss of support, in combination with her need to financially support herself and make a nice home, led to her decision to leave education and work in a number of jobs. After working for a few years, Vanessa decided to return to college and get her A levels so she could go to university. Although she did go to university, she found managing the demands of travelling for university and her full-time job were untenable, so she left. After leaving, she reapplied to study for a professional diploma, which she completed. She maintains contact with one brother. At the time of the interview she was considering the long-term prospects of her work in welfare services, in part because of perceived job insecurity and the emotional labour of being a practitioner.

**Yvonne** was in her mid-thirties at the time of interview. She had three children and was about to start a new job in welfare services. Yvonne grew up in Northumberland at the end of the 1970s with her older sisters and younger brother, and during her childhood she moved home several times, with her mum and her different partners over the years, before entering state care. Yvonne's early life was quite chaotic, and a number of changes to her family experience

were related to her parents' changing relationships. Yvonne recalls periods of abandonment during which her older sisters looked after her. The community in which she grew up was supportive and helped her escape her experiences at home, although this was disrupted by family moves. Yvonne witnessed domestic violence between her mum and stepdad. She felt alienated from her family after social services became involved with it because there was a sense that she was to blame for their interference. In her early teens Yvonne entered state care. She made a number of moves over the next few years of her life between residential, foster and family care, and risks to her safety were highlighted, although subsequent safeguarding failed. She left care at 16 and went to live in a bedsit, where she struggled to cope emotionally and financially. Yvonne has tried to make the most of opportunities for education and work during her adult life after returning to college following the birth of her first child during her late teens. She has used the pursuit of education to change her horizons during her adult life. Subsequently, Yvonne has graduated from university and she is returning to work.

**Nicole** was in her mid-thirties at the time of interview; she was living with her long-term partner and children and worked in management. Nicole grew up in Northern England with her mum, dad and brother. She reported that she didn't want for anything materially whilst growing up, but her dad's temper was difficult to manage. After an incident with her father that left her with a black eye, Nicole was taken into care at the age of 12 after it all got too much at home. She had moved over 15 times before the age of 16, mostly with her family, and had several foster placements. Whilst she didn't concentrate in school, Nicole was active in pursuing her own interests. Leaving care was a difficult time for Nicole because she entered a shared supported living scheme, where she was assaulted. During this time she was enrolled in a youth training scheme. After the culmination of a series of events, Nicole was moved to another place to live. Intimate relationships developed during this time and Nicole became pregnant. She was then moved into a mother and baby foster placement before asking to be moved into her own flat. Over a number of years, Nicole has worked in various social care, retail and event settings. She has a big family and talked about the types of activities she does with her children. Nicole described herself as very organised and family focused; she had masses of enthusiasm and lent her skills to local charities. Nicole is now

reconciled with her parents and describes them as being good grandparents to her children.

**Sally** was born in the early 1980s and at the time of interview she was living with her daughter in Northumberland. Sally spent the early months of her life living with her grandparents whilst her mum recovered from a traumatic birth. Sally's dad emigrated whilst she was still a baby. Sally moved home frequently with her mother and later with her stepdad too. Her mum and stepfather married when Sally was about 5 years old. It was around this time that Sally's stepfather started sexually abusing her. Sally's childhood was very controlled and she was prevented from making friends at school by her parents' refusal to let her go out and play with other children. Once a month, Sally was able to have visits to her grandparents' house, and she remembers these fondly. At the age of 11, Sally disclosed to a cousin the abuse she was subjected to at home. The cousin reported this to her mother, Sally's aunt, and the police and social services became involved. Ultimately this led to her entering state care. After entering state care, Sally's relationship with her mum was disrupted and she has had very little contact with either her mum or stepdad since. Sally first lived in kinship care placements twice before they broke down; this led to her living in two foster placements. Sally left state care at 15 after the breakdown of her final placement. Reporting on her education, Sally described how she passed her GCSEs and then secured an apprenticeship. After her apprenticeship ended prematurely, Sally gained work in a large, growing organisation, where she was able to move from administration roles to human resources in a short space of time. She became pregnant at the age of 19, and after a difficult pregnancy gave birth to a daughter when she was 20 years old. Keen to give her daughter a good start in life, Sally has worked hard and sought to secure better, less 'rough' areas to live in and has moved away from her older boyfriend. Sally spoke about having had a range of office jobs from leaving school until she was in her late twenties. Sally described how there was then a significant turning point in her life as she experienced a breakdown. She subsequently received emotional support and appropriate medication from NHS services and said that she has been able to start living, where before, she said, she was in survival mode. This was a turning point in her life and led her to return to college to complete a university access course. At the time of interview Sally

was entering her final university year and spoke about how her new career enabled her to care for others.

**Richard** was in his early thirties at the time of interview and was living with his partner and child in Northumberland. Richard had a number of older brothers and an older sister and spent his early years with them and their mother. Around the age of 5, he, along with his siblings, entered care. Richard was not separated from his older sister and together they experienced a variety of different short-term foster placements. Richard talked about how it was not until he was 10 years old that he and his sister were found a suitable long-term placement. Richard was introduced to local children and he made friends before he started at the local school. These friendships have continued throughout his adult life. These new connections encouraged Richard to take part in different activities, and he enjoyed different sports and travelled during his time at the local high school. Richard found that playing sports helped him to channel his energy usefully, and he became passionate about playing and coaching sports. These long-term foster carers became his family. Richard stayed living with his foster family until he was 26 as they had a good relationship and all of them recognised that in many ways he was not ready to live alone. Supported by his foster family, Richard did his A levels and then a qualification in coaching at college. Over the years, Richard's opportunities to play sports professionally grew and he toured around the world. His sports career was constrained by the lack of opportunities he had to demonstrate his skills as well as by organisational politics, and hence his contract expired. At the time of interview, Richard was working and his family lived nearby. He hoped he would work in the emergency services in the future.

## **5.2 Beginning with Family: Contextualising Care**

This section enables a consideration of the context of state intervention and the ways in which participants were able, as adults, to understand their childhoods. Key to this was often the family background, which enabled participants to provide accounts of the reasons they came to live in state care settings. The point of this is not to problematise participants' families but to shed light on their non-normative family experiences as a part of their life stories, as many spoke of how these ways of doing everyday life was, as a child, their 'normal'.

### 5.2.1 Maternal Mental Health

More than half of those who were interviewed for this research reported that their biological mother experienced health difficulties that affected the level of care they received during their childhood. This was often key to their individual understanding of their entry into state care. In some of these narratives, participants told of how their mother's mental health difficulties were triggered by the loss of a family member, through death or abandonment. Some recalled more chronic incidences of maternal mental health distress, whilst some participants' mothers recovered.

Where participants spoke about these times in their family life, there was a sense of unpredictability and chaos within the household. This is encapsulated in Vanessa's story, where she describes how "*home was horrible, home was full of my mother's madness*". Similarly, Rachel described how as a child

*"the worst fear with my mum was you just didn't know what she was going to be like and that was like the biggest anxiety, you know? She could've been like okay, and then the next time total opposite. You know what I mean? But you literally knew within 5 minutes of being with her, you knew how it was going to pan out. And on the times when she wasn't feeling well you would just be left feeling dreadful."*

The behaviours associated with mental illness were problematised in the told stories as, inter alia, manic, paranoid and catatonic behaviours. The inter-relationship between participants' experiences of their mother's mental health difficulties and abuse was not consistent. Participants' narratives suggest that their parents' mental health difficulties intersected with a wide range of factors, including financial and employment factors, 'chosen' behaviours, joblessness and their parents' own personal history, which affected their ability to parent at that moment in time.

Participants expressed an awareness of some of the differences between their own experiences of family life and the perceived norm (Andrews, 2004; Wilson, 2012). Rachel described thinking as a child, "*How can you not be like other mums, and just be okay?*" Furthering this differentiation, one woman described how she was frustrated by her mother's behaviours, because

*“it was more that she wasn’t playing the part. She wasn’t doing what she was supposed to be doing, she wasn’t doing the same as everyone else’s mam, and I saw her as letting the family down.” Carrie-Anne*

This indicates a gendered maternal expectation of the mother role within a family (Andrews, 2004). There are differences here too, as Carrie-Anne seems to be speaking of the mothering role that her mother wasn’t performing, but Rachel spoke about wanting her mother to be better. Arguably, these comments indicate how participants drew on cultural norms of what mothers do, and who they are; but these were experiences that many participants suggested they were excluded from. It was striking to hear stories that problematised a mother’s behaviour but very few which problematised a father’s role in the family, even when they were absent. This may indicate how the dominant narratives of the importance of the mother, gendered expectations of parents and what childhood should be are resources that participants were able to use to narrate their lives. Arguably, the way in which dominant narratives are taken-for-granted, dominant knowledge indicates their doxic nature. However, these dominant narratives of the effects of adversity in childhood might lead to the inference that participants’ adulthood is threatened by ‘symptoms’ of abandonment, abuse and/or harm (Füredi, 2004; Woodiwiss, 2009, 2014; Plummer, 2002; Daniel, 2010). It is worth paying attention to how participants negotiated their lives narratively, as this may open up opportunities to understand disruptions to dominant narratives about harm and negative representations of children in care.

As children, participants were able to interpret these experiences, but not within medical understandings. Vanessa described her child self’s interpretation of what was going on around her; she recalled how, as a child experiencing rejection, she tried to understand it:

*“[Y]ou do that whole trying to work out why she didn’t love you and think ‘It must be about me so I mustn’t be doing things right’.” Vanessa*

Rachel suggested that this perception was a result of not understanding or having any knowledge of the effects of *“the mental health type of thing”* as a child. This suggests that children’s access to knowledge is structured by adults’ perceptions of them. Thus, where an explanation hadn’t been forthcoming, some participants as children interpreted their mother’s difficulties as indicative of their own failures.



The importance of mental health in the stories of participants centred primarily on the emotional impact of the unpredictable behaviours associated with mental health difficulties. A key part of the narration of maternal mental health was the reliance on dominant narratives of 'good mothering'; this was deployed by most participants in their interviews. The expectation that mothers should nurture, care for and be protective of their children is subverted in these stories. Instead mothers were often complicit in producing the negative experiences and atmospheres which are, according to dominant understandings of child development, detrimental to a person's ability to successfully adapt during the life course (Lee, 2001; Hendrick, 1997). Moreover, this was highly gendered; a physically present mother who was poor, worked and struggled to parent to the ideal standard was often positioned as a problematic influence on participants' childhood, even if their birth father was completely absent. Such dominant narratives about these gendered expectations are examples of symbolic violence (Austin and Carpenter, 2008). According to Bourdieu, these ideal understandings of family roles, doxa, are inculcated into people's habitus (1996), legitimating the intervention of a dominant group, in this instance social services (Eagleton and Bourdieu, 1991). This will be returned to in this chapter when consideration is given to how a lack of social support available to some families resulted in the need for substitute care. Crucially, this also intersected with their mothers' life experiences of, inter alia, substance misuse, domestic violence and child sexual abuse.

Theoretically, Bourdieu and Honneth identify the family as a primary site of individual socialisation and identity development. The experiences of differential family treatment could be conceptualised as Honneth's emotional disrespect (1996). This relates to both framing family difficulties and excluding family practices. The effect of such experiences, according to Honneth, is that if children are misrecognised emotionally by their mothers then they will not be able to develop a capacity to emotionally, legally and socially recognise other people (1996; Yar, 2011). As regards people's experiences of maternal mental health difficulties, the evidence suggests that in some instances it produces individual subjectivities which problematise the self (*what have I done wrong?*). Honneth's work enables a consideration of participants' accounts of a felt sense of injustice

as a valid claim for recognition (1996, 2007). Parents, particularly mothers, who did not provide the anticipated socially expected level of emotional and practical care and did not prioritise their children's needs were narratively implicated in contributing to their premature engagement with adult activities (sex and child care) within the family. This is useful for beginning to unravel some of the normative claims for justice highlighted through participants' accounts. These normative expectations, which are understood by Honneth as legitimate, are arguably a form of doxa in Bourdieu's work (1996). This is an interesting theoretical divide.

### **5.2.2 Maltreatment and Abuse**

Over half of the participants told stories of experiencing abuse (physical, sexual, emotional, or neglect) prior to entering care. In many families this also meant that young people were taking on some caring responsibilities for their siblings, ensuring that they were clean, fed and supervised. A number of the examples given during interviews of sibling care highlighted the dangers of poorly supervised children who responded by attempting to provide for themselves.

*"There was an electric cut and my brothers had candles and the candle did actually catch fire on, it was like a blanket or something, on the bed, and it got put out.... Mum was in the house but not there in sort of like emotionally or in any caring capacity. Me dad wasn't in the house – he'll've been at work." Rachel*

The use of such examples is useful for highlighting the vulnerability produced through structured dependency. In addition, as the told stories are recalled from the adult perspective, they enable the narrator to demonstrate experiencing a non-normative childhood and family. This continues to emerge as a factor for participants' identity negotiations of belonging, and difference, across the life course.

A significant number of participants spoke of how they were subject to abuse or maltreatment by adults whom they lived with as a family, whilst they were a child. Mothers were most often reported as being involved in perpetrating this abuse.

The childhood experiences of a few women were affected by their mother's new partner living in the household; on occasion, this led to their home lives being characterised by domestic violence, chaos and sexual abuse. Sally and Carrie-

Anne explained how they were put at risk of abuse because of their mother's relationships with men who had a history of abusing children. There is a sense of disbelief that their mothers could have knowingly allowed abuse to occur. To understand this, they engaged with the dominant narrative of intergenerational risk. Sally described having "*broken the cycle*" by speaking out about the abuse. In this way, Sally subverts the dominant narrative of intergenerational transmission.

There is also an injustice described in these stories that sexual abuse occurred in spite of mothers' knowledge and their failure to protect them. However, the use of this dominant narrative transmission to construct a life story individualises the mothers' experiences, and consequently their own experiences too (Warner, 2009; Moulding, 2016).

The experience of being put into situations where sexual abuse was likely to be perpetrated made Sally feel like she was "*the toy, for like, everybody*". This metaphor indicates the way in which adults construct feelings in children, and how, in particular, their structural position and lack of power to change their situation is complicated by their status as a child (Harden, 2000; Lee, 2001; Warner, 2009).

Within the told stories of those who spoke of abuse there was a general sense that as children they were relatively powerless to stop their mistreatment at the hands of others. Richard described it as "*one of those situations that you kinda try to hide from but you couldn't*". Later in this chapter it will be shown how participants tried to adapt to and manage these experiences, albeit in a bounded capacity.

According to Füredi, contemporary Western cultures are characterised by therapeutic approaches to social problems and individual life chances (2004). Within this culture, "contemporary depictions of childhood send out a powerful message that psychological damage will continue to haunt adulthood" (Füredi, 2004, p.111). Such beliefs can be seen to be reified in policy, such as in the recent 'Early Intervention: The Next Steps' (Allen, 2011). This approach is evident in some participants' evaluations of their life experiences.

*"I think when you're young you just kinda sail through it, I don't think you realise the impact that its building up, all the different things that are going to come out at some point somewhere." Yvonne*

Although it could be said that such deterministic narratives are doxa, they function for participants by making sense of the difficult experiences in their lives and how these have affected them psychologically.

In many of the stories, the material or social circumstances that might have been related to the perpetration of maltreatment of the participants as young children did not feature strongly. Instead, the focus was most often on the abusive practices themselves and how they indicated deficit parenting practices (Gillies, 2011). This suggests that individualised understandings of abuse in childhood could contribute towards the construction of difference in social identities as, in contrast, participants who framed their experiences of physical and emotional abuse through sociocultural contextualisation were able to negotiate an identity of similarity. For instance, both Jack (1970s) and Yvonne (1980s) talked about the way in which the historical and working-class communities to which they belonged legitimated the physical abuse they experienced. Jack described how the violence in his life

*“was just normal, you got beat in the house, you got beat in the school. You know I remember getting the cane – slippered at school.”*

Similarly, Yvonne evaluated how the local context legitimated what could be deemed to be physical abuse, saying that *“beating the shit out of your kids wasn’t really a frowned upon thing like it is now”*. This presents an interesting paradox, because despite class and locality explaining the physical punishment – although it was interpreted by 1980s social workers as abuse in Yvonne’s story – the blamelessness of victims is undermined within these stories. Yvonne’s and Jack’s interpretation of their experiences connect them to wider experiences of family life located in working-class communities.

Some participants framed physical punishment as a classed norm of acceptable parental discipline strategies. Here the production of family difference was moderated through the recognition of historical and social class contexts of physical abuse and family support. Where participants were able to draw wider connections between their individual experiences and wider society, there was evidence that this physical punishment was contextualised through the class community as normal, but positioned as a deviant parenting practice by social

workers. This resonates with Honneth's conception of social disrespect, in which cultures and social practices that are seen as different from those of another group are denigrated by that group (1996). However, Honneth's conceptualisation of social recognition does not provide much insight into the way in which power relations might operate in such events. Bourdieu's does. His view that people's acknowledgement of the role that wider social norms play in their experiences suggests that to some extent some participants were able to resist an individualised account of these experiences (Bourdieu and Eagleton, 1991).

### **5.2.3 Support and Survival Strategies**

It has been evidenced that participants, as children, experienced maltreatment and/or abuse. The focus now turns to the strategies employed by participants when they were children to negotiate these difficulties. This section focuses on how adaptation and support enabled the family unit to remain intact and participants' own strategies for coping with the difficulties they experienced. This develops the evidence that can be used to question representations of children in wider society as being passive, irrational and lacking agency (Lee, 2001; Jenks, 2005; Prout, 2000).

For Vanessa, Sally and Nicole, being able to access emotional and practical support from extended family was a factor that helped them from coming to the attention of social services. These times spent in other caring environments were valued in the narratives of those interviewed; some spoke of how they experienced these times as 'escapes' from the harsher reality of their home life.

Vanessa's and Nicole's grandparents knew some of what they were experiencing and offered them a nurturing and safe environment, which removed them from the difficulties of their parents' home. For Nicole and Vanessa this was for extended periods of time.

*"They used to take me in the 6 weeks' holiday to kind of keep us separate and on every weekend I'd stay there as well. So I more or less lived at my grandma and my granddad's and they used to take me to the woods, but anyway long story short... my granddad died when I was about 10 and then over the course of a few years things between me and my dad just deteriorated." Nicole*

These women valued the change in environment, as their grandparents were able to offer them respite from their difficulties. The focus in their stories of these visits was the practical and emotional experiences that their grandparents were able to offer. As Vanessa said:

*“It was just very normal. My granddad would take me to school, my gran would go to work, me granddad taught me how to swim, he taught me how to ride my bike. Me gran would ask us every night what I wanted for tea and every night I'd tell her 'Mince and potatoes with ketchup, please.' She still tells me that now. And just, normal, they just loved me and I think that was what I got more than anything else was that I was safe and they loved me.”*

The practical experiences whilst staying with grandparents that were reported often concerned the time spent together doing things, visiting places and learning to swim. Sally argued that through these kind of experiences and time spent together, her visits to her grandparents *“gave me my childhood”*.

Yvonne described how the role of the community and the relationships she developed enabled her to escape the realities of her home life; she described the relationships as a *“saving grace”*. Such accounts suggest that other adults, instead of parents, provided appropriate care that was experienced as safe and loving. For some participants this was instrumental in enabling the construction of a sense of family belonging, because a space was offered in which these relational practices and childhoods could be realised through alternative relationships (McKie and Lombard, 2005; Gillies, 2011).

In contrast to these women's experiences are the experiences of those whose grandparents, and other extended family and community, were not forthcoming with practical and emotional support. The unsatisfying relationship with extended family is understood in the stories Rachel and Lauren told to be compounded by geographical, relational ruptures and secrecy. This is returned to later in this chapter.

Rachel's paternal grandparents knew about her mother's mental health difficulties and the negative impact they had on her capacity to practice mothering. Recalling visiting her grandparents biannually, Rachel recalled how they seemed unaware that she was in residential care, and argued:

*“I think my dad’ll have probably seen it as a criticism on his parenting, that he didn’t look after us.”*

This could be interpreted as meaning that Rachel perceived her dad’s choice not to tell his parents that his children were ‘in care’ as it would reflect negatively on his moral worth. This raises the possibility that the shame of non-normative experiences of being a parent might prevent disclosure of experiences (Castleman, 2014; Connelly, 2014) and, consequently, mean receiving no support.

A lack of financial, emotional and practical support were said to be factors in Lauren’s and Jack’s narratives of entering care.

*“[M]um was 24, a widow with a 2-year-old and a 6-month-old, living somewhere with a really poor bus route that she hadn’t lived in very long, didn’t know that many people, two children, with no – you didn’t have life insurance, you didn’t have house insurance, she didn’t work.” Lauren*

According to such stories, a family’s geographical dislocation undermined the potential to receive familial support in a crisis. Although this evaluation of the situation was told from the adult perspective, it highlights the way in which the social relationships and networks available to people differ.

Possession of economic capital permitted the purchasing of alternative care arrangements privately. This was a strategy used by Vanessa’s father, who sent her to boarding school so she was not at home. Here Vanessa evaluates her time at boarding school:

*“I felt safe I suppose. I felt safe there wasn’t any shouting, arguing. I suppose I felt that we were all kind of equally valued. We were all children together and they were just looking after us and, you know, we were all away from our parents in that sense so actually I wasn’t any different.”*

This family, through their economic capital, tried to ameliorate Vanessa’s experience of maternal rejection through paying for boarding school; but as the money ran out, so too did this support mechanism. The support available to participants could be conceptualised as offering opportunities for them to experience emotional recognition.

There were limits to the practical and social support offered too. This is demonstrated in Richard’s told story. He sought his neighbour’s help (they regularly looked after him and his siblings during the day) when they had been abandoned by their mother and locked out of their home.

*"[B]asically we went back to the family friend and said 'Mum's not there, can we stay here?' and were pretty much refused."*

And the care Nicole received from her grandparents inevitably ended on their passing. Clearly the support available to families, and children, during challenging times was not evenly distributed.

Whilst some young people received a lot of support from their extended family, it was also clear that there were other environments that supported the participants in their childhood, for instance the wider community, boarding school or grandparents. Their stories demonstrate the way in which various forms of support could be a "saving grace" in what in retrospect was a turbulent period of their childhood, but these were differentially available.

Some of the women told how, as they grew older, girls in their family took on roles more often associated with a mothering role. Participants spoke of cleaning, maintaining the house and caring for younger siblings as their mother was unable, or unwilling, to provide the necessary level of care.

*"My mother having long periods, months and months and months in bed, and me looking after my brother." Vanessa*

Responding to this reality, Vanessa described how she had actively responded to her mother's emotional and physical absence by caring for her younger brother. Such examples suggest that children are able to, to some extent, respond to and negotiate poor parental mental health (Lee, 2001; Winter, 2006).

The caring role that Carrie-Anne took upon herself constrained her choices, as she said:

*"I chose not to go though, to stay with my dad ... but I chose to stay with my mum simply because I didn't want to leave my younger brothers behind."*

Carrie-Anne 'chose' to stay because she didn't want to be separated from her younger siblings, whose welfare she took care of. Vanessa explained how after choosing not to stay in the family home with her parents and younger brother she "carried a lot of guilt... about leaving him at home". This shows the way in which relationships, and other people's needs, could shape participants' agency and affect their subjectivity.



Some people described how being treated differently from their siblings, such as having responsibility placed upon them for housework and/or childcare, could lead to resentment. One woman commented on how these differential expectations had made her “*feel like the servant in the house*”. The older siblings of some participants at times took on caring and practical roles that are often assumed to be the duties of a mother, whilst some participants provided this care themselves. Such differential gendered birth positions had affected the ways in which participants experienced their family.

A few people described how they engaged with what might be described as ‘survival crime’, where deviant acts are carried out to meet a person’s basic needs. One man stated that he “*never got enough to eat*”. Stealing was a key way for some children to respond to their unmet needs.

*“We were extremely poor. It was difficult to make ends meet and have food in the house. We – like, I’ve got two brothers and two sisters, I’m the youngest one in the family so, and we would go to the shops, look through the skips for food, take whatever we could away ... I remember very early on sort of being picked up by police for stealing potatoes from a farmer’s field.” Richard*

Most of the stories told suggested rather than explicitly stated that the narrator was a deviant child. In these stories, the participants argue that although they were children they did know that the behaviour they were enacting was morally ‘wrong’; however, their material circumstances and social context enable us to see that as young children there was little alternative other than to starve. This highlights the bounded agency of participants as children, and they could be seen as subverting the image of the passive child as it highlights, as sociologists of childhood have argued, that children do respond and act in the world around them. This goes some way to contextualising what is considered deviant behaviour, as by recognising the adaptive function of behaviours young people can be perceived as resourceful.

The ways in which sibling care, survival crime and community relationships were actively engaged in by children challenges the false dichotomy of the delinquent or victim model of the child in care. These excerpts from narratives provide evidence that participants as children experienced challenging times, but they were resourceful and responsive in trying to actively manage their material and emotional difficulties.

With respect to the evidence regarding the support and survival strategies deployed by the participants as children, Honneth's spheres of emotional and social recognition are relevant. In particular, they can help to understand the affective significance of these relationships and experiences in forming participants' social identity. Even if emotional respect did not come from a primary caregiver, it could be provided through the ways in which relatives and siblings were able to respond to other family members' needs. Whilst often time limited, these experiences may have provided relationships that develop a person's self-confidence (Honneth, 1996). Moreover, there is a sense that some relationships which were developed in the community with caring adults may be indicative of social respect. Here the individual abilities of the young person were recognised as of value, producing a sense of identity, which has the effect of improving self-esteem (Honneth, 1996). This community and extended family support could also be conceptualised using Bourdieu's ideas of the different fields in which people are active. As the practices in such fields differed from those in the participants' home lives, they were exposed to alternative practices that could become embodied and a part of their habitus.

#### **5.2.4 Rejected: Excluding Family Practices**

For the majority of participants, differential treatment within the family home is a part of their told story, both prior and after leaving care. As the home is a site of primary socialisation, the identification of difference within the family home can influence a person's sense of difference (Honneth, 1996; Bourdieu, 1996; McKie and Lombard, 2005). This section examines the relationships between family members and the way in which exclusionary practices were symbolically indicative of identities of difference.

Where differential treatment of siblings is noticed in the told stories this is symbolically indicative of the construction of difference.

*"It was very clear that my mother was rejecting me and wasn't rejecting my brother. And who knows what that's about? For example, we would have tea and I would see my brother snuggle up with my mum and dad on the couch and I would be told to go through and do the dishes." Vanessa*

A number of interviewees described how the maltreatment they experienced was different from the experience of their siblings. Nicole's father was physically

abusive towards her but not her brother, and in order to understand this difference she evaluated her father's attitude as being that he "*hated women*".

Earlier it was highlighted how many participants experienced caring for their siblings or being cared for by their siblings. The gendered performance of Carrie-Anne's experience may have been important, as she had an older brother who wasn't expected to take responsibility for the younger siblings. There was an expectation that Carrie-Anne would perform a nurturing, caring role within the family home, but there was no such expectation of her older brother. Carrie-Anne had to do

*"the housework and things, supervising my younger brothers when they were playing. It was always my responsibility. If they broke something it was my fault, you know because I wasn't looking after them properly."*

Differential treatment was also linked to position within the family, either as the youngest or eldest sibling, or produced through the structural and symbolic position associated with not being biologically related to their mother's new partner.

The embodied ways of doing family go beyond definitions of legal and biological ties. Tommy, who was adopted by his stepfather, drew on the expectations of a father and the way he is meant to act on the ideal motivations of a nurturing relationship, not because of financial motivation gained from Tommy's earnings. The symbolism of differential treatment is indicative of his exclusion from the family:

*"As I say I never got any toys but they [half-brothers] got toys. And he wasn't close, you know what I mean? He was like standoffish to us... I wouldn't say he was cruel you know. Not cruel, but he wasn't – he wasn't like a father."* Tommy

There are ambiguities surrounding fathering in Tommy's story, as although his adopted father was not forthcoming in a nurturing role, he did work hard and supported the family financially. For Tommy the latter action is indicative of fulfilling some part of the father breadwinning role, in contrast to the complete absence of Tommy's biological father, who he said "*wasn't like a father at all*".

Lauren "*could never understand why*" she was rejected by her extended family – they were absent from her life despite her trying to maintain contact with them. The difficulty of this exclusion from these relationships led her to wonder:

*“Why don’t they want us? Why didn’t they fight for us? Why am I not enough to fight for?” Lauren*

This denial of opportunity is caused by the more powerful position of adults to construct family by actively excluding some people.

Many people interviewed talked about their experiences of rejection. Understanding this differential and exclusionary treatment through Bourdieu’s framework would suggest that these formative family experiences as a field are primary experiences for the development of a habitus, through symbolic power (1984, 1996). These exclusionary practices are also related to the displaying of family and the way in which lived experiences transcend the expected “obliged affections and affective obligations”, thereby undermining the reproduction of some normative family relationships (1996, p.22). Symbolic power and violence can help to theorise how differential treatment in the family was performed, subjectively experienced and negotiated and how it is indicative of individual difference (Reay, 2015). As a concept, symbolic violence can help to understand the affective dimensions of negative experiences, the pain which can arise from the dissonance between the family with which we live and the ideal family we measure it against. As symbolic violence is seen to play a role in the development of a person’s enduring cognitive structures, such experiences could be understood, theoretically, to be complicit in the production of an identity of difference (Bourdieu and Passeron, 1990; Skeggs, 2004). Rejection is a theme that will be returned to later in this thesis, in Chapter 7. As will become evident, whilst often occurring first in family relationships, rejection is something that can become a part of someone’s internal dialogue, thereby continuing to affect subjectivity long after the initial experience. This section has demonstrated the way in which the family experiences of the participants are narrative resources for constructing, or negotiating, difference and not belonging.

Maltreatment, neglect, abuse and different treatment within the family are explained by Honneth as emotional misrecognition, or disrespect. Honneth sees emotional disrespect as especially damaging to a person’s selfhood (1996; Yar, 2011). However, emotional disrespect may not be as long-lasting as Honneth suggests. This is illustrated in Vanessa’s reflection:

*"[I]t mattered [mother's rejection] when I was that age, every child wants their mother to love them and you do that whole trying to work out why she didn't love you and think 'It must be about me so I mustn't be doing things right', and I kind of want to give you all of that raw stuff, but, I kind of can't because it's not raw any more. Because I've worked it out."*

Vanessa's account suggests that aspects of pain could be 'worked on' so that they had less effect on her adult cognitive structures. It is noticeable that some participants spoke about experiences outside their immediate family that helped them to construct narratives that drew on normative family expectations. By drawing on these life experiences to construct their life story, participants showed that they did experience some emotional recognition, but also negotiated their experiences. Theoretically, this could help to understand the ambiguity within the personal narratives and account for how other experiences could have an ameliorating affect. This journey from maternal rejection, emotional pain and its impact on a person's agency could also be understood, in part, as Bourdieu's embodied history. Although Bourdieu is pessimistic, he is not deterministic and his theory could account for changes in selfhood (Lovell, 2008).

The ideal family, and its associated practices, is socially constructed and simultaneously realised in the way it has become a central part of internal cognitive structures (Bourdieu, 1996). It is also associated with higher levels of symbolic capital; this has consequences for moral worth (Bourdieu, 1996; Wilson, 2012). For Bourdieu, an individual's family connections indicate their social identity to others; it is those from whom we come that indicate some measure of our worth as human beings (1996). So the converse would also hold, that is, if you are raised in a less than ideal family, you have less symbolic capital and subsequently less moral and personal worth to utilise in social interactions (Wilson, 2012). This conceptualisation of the social value of the family is important for understanding the construction of an identity of difference through family when it has been a space for social differentiation. For example:

*"[S]he deserved to have it mentioned that, you know, that she was always drinking 'cause that was what she was doing, but it was awful, you know, hearing people talk about your mam like that, 'cause you just want to belong to a family that's got like parents that've always got nice things being said about them."* Carrie-Anne

For a number of participants, the narrative construction of difference through family histories/experiences is created through the contrast between their own

family and other people's families. The feelings generated from these observable variations from the normative ideal could be shame or anger or lead to the silencing of these differences (Wilson, 2013; Austin and Carpenter, 2008). It is useful to consider the role of shame in producing secrecy and silence, perhaps contributing to individualised understandings of people's life courses (Brown, 2006; Scheff, 2003; Austin and Carpenter, 2008). Additionally, it is useful to consider the role of shame in silencing to understand how emotions can prevent disclosure and receiving support. Bourdieu's work towards the end of his career paid more attention to the structure of people's individual cognition. Reay (2015) articulates how Bourdieu's work can be used to understand how the affective dimensions of shame are a product of "the learning that comes through inhabiting pathologised spaces", which in turn become a part of a person's embodied history, their habitus (p.12). This approach has the potential to unite the objective social structures with the subjective lived position.

### **5.3 Discussion**

This chapter has begun to explore how early childhood experiences were instrumental for many participants' construction of their life stories and identities. It is emerging that the experiential aspects of identity co-constructed in the interviews resonate with McKie and Lombard's argument that the family is "critical to the creation of belonging or being excluded" (McKie and Lombard, 2005, p.171). Some participants were excluded from their own family through adults' differentiating practices or explicit rejection. Others spoke of experiences that differentiated them from their siblings.

Earlier, the (re)production of dominant narratives of children in care as those of the victim or delinquent were discussed. In some ways, much of the evidence in this chapter about early life experiences supports the realisation of victim narratives because participants spoke of abuse and maltreatment perpetrated against them. On the other hand, it is also clear that many participants were actively responding to their family environments and developed strategies for managing this (or their elder siblings did); these ranged from doing child care and housework to screaming, rejecting food and engaging in survival crimes. Whilst these criminal actions could be perceived as 'deviant' when compared with normative ideas, it is

more helpful to consider these acts as resistance to the conditions surrounding the participants – a way, albeit illegally, of securing their basic needs. These ways of resisting may also reflect the structured dependency of childhood and the lack of alternate means to escape household practices. Therefore, perhaps dominant narratives of childhood, mothering and harm could be doxa and indicative of Bourdieu's misrecognition produced through symbolic power. But these labels veil structural influences on participant's early lives, the structured dependency of childhood as a life stage and the sheer physical power of adults over younger children, constraining their agency. Accepting the dominant narratives of CiC as a collective identity could be said to be a form of Honneth's social disrespect. However, understanding the way in which power relations might shape these and hence individual identities is difficult to ascertain with Honneth's approach as it focuses on the interrelational nature of identity. These are themes that will be further explored in the following data chapters.

The next chapter focuses on experiences of entering and being in state care, returning to the themes of birth family and education. Honneth addresses shame as an affect of interpersonal disrespect (in any of the three spheres) and as a leading motivator for social struggles (1996). He validates this through the phenomenon of emancipatory political movements, such as the suffragettes and disability rights groups, and the work of other groups, such as some organised by LGBTQ people. The work of such groups is usually rooted in disparaged identities that produce shame; their political mobilisation indicates the struggle for interpersonal respect. Houston (2015) contends that this is too naïve as many who suffer shame do not go on to engage in emancipatory praxis. Perhaps more pertinent to this thesis is the critique that the focus by Honneth on interpersonal encounters, regarding respect or disrespect, doesn't provide a basis for understanding the effect of non-direct productions of disrespect. Carrie-Anne's account of the view other people in her community had of her mother is a good example of this.

Many participants spoke of experiences of what could be defined as abuse under statutory definitions of sexual, emotional and physical abuse and neglect within the family home. Without treating people's individual experiences as identical, it is

helpful to explore the relevance of the concept of misrecognition for theorising the effects of these events. Any conceptual application needs to account for the differences in identity negotiations and the individual meanings attached to these by participants. What is demonstrated through the majority of accounts of maltreatment is the way in which participants' experiences of family are inconsistent with the normative expectations of childhood. It was in this negotiation between the ideal and reality where many adults with care experience began to construct an identity of difference. This was particularly pertinent when associated with individualised understandings of poor maternal mental health, substance misuse or abuse. According to Bourdieu, this is an example of misrecognition as people are unable to identify the wider social relations that contribute to their parents' mental health difficulties and subsequent struggles to do family (1996). However, although this is a critical stance, the evidence from participants' narratives of the importance of structural factors undermines this. This may be a result of the way in which the stories people tell, and how they tell them, are shaped by wider social and cultural norms. From this perspective, the dominant narratives of a good family were used by participants as resources for narrative co-construction. This explains the limits to the resources available for constructing individualised explanations of family 'problems'. To understand social workers' position it is necessary to identify them as agents of the state (Sheppard, 1995; Bourdieu, 1999). Such structural power is complicit in the reproduction of the symbolic order (Bourdieu and Passeron, 1990; Bourdieu, 1984, 1996). For example, the symbolic power of a social worker to label a family's practices as in need of intervention suggests that they observed deficiencies in prescribed parenting practices. Generally, though, Bourdieu's concept of misrecognition can be applied to many participants' told stories, where often the lack of economic or social capital is presented but is not reported to have any effect on their parents' ability to parent. This produces individualised accounts of socio-economic circumstances, disregarding the reproduction of inequalities in society as an important factor.

Interestingly, the data presented in this chapter challenge some of the simplistic notions of Honneth's recognition. Many participants gave accounts of emotional misrecognition during early childhood, and there is a theoretical assumption that



this would have led to an inability to recognise the needs and rights of others. This is countered by the evidence, though, which shows how those participants who endured emotional disrespect were able to respond to the needs and rights of their siblings, who were also disrespected, providing them with love, care and respect.

## **Chapter 6. Becoming and Being a Child of the State: Care and Identity in Childhood**

Having situated the experiences of adults with care experience within the context of their birth families, attention is now given to participants' narratives of going into state care. These highlighted the intersecting experiences of entering care and experiencing care, and negotiating family relationships and attending school. These experiences will be discussed in relation to the theoretical perspectives and the research into the factors that were identified as affecting the life course outcomes of care leavers. This will show how structure, agency and their interrelationship with stories of care are simultaneously institutional and relational.

### **6.1 Becoming 'Looked After'**

The ability to access memories about entering care varied widely amongst those who participated in this research. Those who reported entering state care for the first time after the age of 5 had more complete memories of events relating to entering care. Therefore, the experiences of participants are presented here according to their age of entry into state care.

#### **6.1.1 Restricted Memories**

The stories of Jack, Harry, Lauren and Carrie-Anne suggest that they entered state care whilst they were under the age of 4. They had very little recall of their emotional state or the circumstances surrounding their entry into care. It is difficult to ascertain whether this was caused by memory recall or a way of dissociating from past traumas. Carrie-Anne presented her first experiences of state care as a vague account, saying:

*"[A]fter I was born there was problems and I was placed in foster care ... I don't know how long. I don't know much more other than – you know, it was just short term, and then we were allowed to go back to my mum. I don't know at this point if my mum and dad were still together or not." Carrie-Anne*

Similarly, Harry said:

*"I must have been happy, I can't remember crying or nothing like that, just took it, I didn't know what was happening."*

Whilst the absence of clear memories is not abnormal for the age at which Carrie-Anne and Harry entered care, it highlights the way in which the knowledge they gleaned about their childhood experiences was a resource for narrating their life experiences in a meaningful way to them. However, an inability to recall memories about a past event did not protect Jack against a perceived impact; drawing on dominant narratives of child development and harm enabled him to infer causal links (Lee, 2001; Füredi, 2004; Daniel, 2010):

*“I remember very little about it. I have absolutely no doubt it had some lasting psychological and emotional impact on all three of us because this stuff’s well known.”*

Here Jack’s, Carrie-Anne’s and Harry’s experiences do not fit with Honneth’s work as it requires a felt sense of injustice, which is missing in these accounts of lived experience.

Harry had little access to his family history through which he could make sense of his journey into care. During the interview he said:

*“[B]iggest thing, that’s all I’d like to know, is who I am. Or why – what happened, you know?” Harry*

This demonstrates the way in which Harry expressed that his entire family history, not just the history of events taking place in his lifetime, were important for understanding himself. Bearing in mind he was over 60 years old, this sense of unknowing was startling. Harry’s experience of this absence of knowledge may be seen as a deprivation brought about through family secrets, or the loss of statutory files by an agency. Harry’s lack of this knowledge and his perception of its impact on his identity could be influenced by dominant narratives of intergenerational traits (habit or hereditary), and consequently his self-identity has been deprived of an opportunity to be fully realised (Horrocks, 2006). In the absence of clear memories, participants’ stories may have been restricted in their telling, as details were not remembered. This may explain why the cultural, social and political resource of dominant narratives were used in their personal narratives. The instrumentality of family history and identity negotiation is returned to in Chapter 7. Bourdieu’s concept of doxa is useful for understanding the naturalised beliefs in participants’ accounts (Eagleton and Bourdieu, 1991), particularly dominant

narratives of intergenerational traits and child attachment difficulties that were used to signify the effect on participants' sense of identity and infer effect.

### **6.1.2 Becoming Recognised**

Most of the participants in this study reported entering care for the first time between the ages of 5 and 13 and described it as something that was done to them. Often, it was a response to adults' assessment of their need to be removed from the family home. For a few, this was coupled with determinism regarding their particular circumstances, whereby the only legitimate response was to be looked after by the state. Describing an evacuation in 1939 London, Tommy said:

*"Everybody was, you know, really in danger ... I had to leave, you know, I remember standing at the station with me gas mask on around me neck."*

Meanwhile, Richard described the way in which he and his sister were found living outside in the back garden:

*"So basically we went back to the family friend and said, 'Mum's not there, can we stay here?' And were pretty much refused. So, we pretty much went back home and sorta lived in the garden for two days in the middle of winter. It was cold. Pyjamas and more or less a bin bag to sort of keep the weather off. The next-door neighbour found us on the second day. In the back garden, in bin bags, like sort of cuddled up together, for as much warmth as what we could get. So then from there the police sort of took us in, sort of asked us questions and – as they do to investigate what – what's gone on and it ... came out that we – basically my mum couldn't look after us and that was her option rather than handing us – handing us in somewhere was to semi-run away. Then that was, like, more or less the whole procedure, sort of being in care sort of came from that."*

These excerpts demonstrate the participants' passive responses to going into care. This does not mean that these participants had no agency; rather, it was bounded and dependent on adults' decisions. This suggests that they may have experienced entering care as something that was done to them. Perhaps their young age (they were 5 and 6 years old, respectively) structured their power and agency, as did their culturally perceived competencies. This resonates with Lee's (2001) and Prout's (2000) sociological work on childhood. Despite their similar age when entering care, Tommy related his experience of entering state care to structural factors; this contrasts with the indicated individual failings of Richard's mum and her decisions.

There was a sense within some stories that entering state care was a result of various factors concerning participants' home lives, culminating in the involvement of social services. These stories illustrate how children are active but are also dependent in negotiating their life course. This is evidenced in participants' narratives where the precursor to entering care was their active revealing, or confirmation, of family difficulties. Thus, Sally, Yvonne, Nicole and Vanessa were in part agents in their journey into state care.

*"So one night my dad chucked me out. I went to the flats where my granddad lives and I had to sleep under there. And the person there obviously knew who I was and told my granddad about it, so my granddad went and told social services, but then they never – social service didn't come when my granddad had told them. And it happened three or four times. Me dad used to hit us, he used to put TVs out windows, smacked with shoes and belts. Stuff like that. Dad was very bad tempered. But he was very good in an aspect, I had horses... But that didn't change him being angry all the time, didn't stop him putting me out. Then one day it just got too much, and social services put me into a foster home." Nicole*

*"Well I was never ever allowed to sleep out. I wasn't allowed to sleep out anywhere, you know. I wasn't allowed to go to friend's houses for tea and I think it was just that control they wanted to keep in case I ever spoke out, but because it was his family he was like, 'Oh, yes.' You know 'Tha– that's fine.' So I went off with this cousin, to her house and I remember it was at night time 'cause I was sitting on the side of the bath and she said, 'Oh, do you never wonder why we've never met each other before and seen each other?' And I said, 'Oh, no.' And she said, 'Oh, because.' Me stepfather's dad had abused her mum so she didn't have anything to do with the family and it was the first time I'd ever had someone sit in front of me and talk about abuse and it just came out. So I remember telling – telling her briefly what was going on and I begged her, I said, 'Please don't tell anybody.' 'Cause I was terrified and plus I didn't really know these people either. So I remember we went to bed and the next thing we woke up – I always remember it was a Sunday 'cause we were going to beach, that had been the plan... I remember sitting on the beach and my cousin came up to me and sat next to me and said, 'Sally, I'm really sorry but I've told my mum what you've told me.' And she said "Police are going to be waiting in the house when we get back." Well, I was like, 'Oh my God!' So I remember going back – it's all a bit of a blur, but I remember going back to the house, the police were there, my mum was there, my stepfather wasn't, but her mum and dad were there and they were just shouting and calling me a liar – all of this stuff, so the police took me to hospital with my mum and asked to interview me, but they interviewed me in front of her. So what they said to me was, 'Right, your mum's going to go into this room and she can see you, but you can't see her.' So, and I had a female police officer and they said, you know, 'Just talk as much as you can.' But I knew my mum was there and I knew she was watching and even though she was as much involved as what my stepfather was I still loved her, I couldn't, like, tell on her, does that make sense? So I give the interview and then I remember they sent me back to this house with this cousin 'cause they didn't have anywhere else to put me." Sally*

In both Sally's and Nicole's narratives it could be said that there is evidence of the way in which dominant narratives of family are subverted by their experiences as

they are not protected from harm. These stories reveal the dark side of the family. In wider society, experiences are often framed within understandings of abuse and harm (Füredi, 2004; Daniel, 2010). The hesitancy in the way these stories were narrated may reflect the ambivalence that these participants felt about their family relationships, or how difficult it was to speak openly about these experiences. Sally and Nicole both struggled to understand their parents' negative actions towards them. Nicole spoke about how her dad bought her horses. Sally, meanwhile, was torn between her feelings of love towards her mother and the abuse she took a role in. Sally's account also directs attention to the provisional nature of stories, and how they are told differently according to their audience and what the story is to be used for. It is notable that neither of these women spoke of wanting to go into care or expressed their feelings about the subsequent decision that they should go into care. In both of these narrative excerpts, there is a lot that could have been explored in analysis, including discussing under what circumstances recognition was brought to Nicole's life, the wider culture that contributes to violence against women and children, the imbalances of power in Sally's police interview or her family's response to the disclosure of abuse.

It is particularly pertinent that for many of the adults interviewed for this research there was a recurrent sense that entering care was experienced as entering the unknown, in some cases fearfully. This is demonstrated in the account given below:

*"I remember they sent me back to this house with this cousin 'cause they didn't have anywhere else to put me... I still remember the living room, I still remember the suitcase, I still remember the teddy and I remember watching her walk out the door and I just remember thinking, 'Oh my God,' like, 'What the hell, like, happens here?'" Sally*

In Sally's recollections it is clear that she had some insight into the effect of constraints on resources on a service and how this shaped her time in state care. The sense of being put somewhere illustrates the way in which she may have felt objectified as a child, as, again, this was a decision made by an adult in a position of power. A sense of abandonment and fear is also present in Yvonne's story. She described how her

*"mother basically said, 'Just take her away! Just take her away!' So I had to go and put all my stuff in black bags and get into this car. I was absolutely heartbroken and distraught, not knowing – I mean I had visions of something like St. Trinian's."*

Both of these experiences took place in the 1980s. Tommy had entered care several decades earlier, during a mass evacuation of children in late 1939.

*“[W]e had, like, identification numbers. With our names and where we’re going... when we stopped at the station numbers such-and-such and such-and-such, they went round looking for us... and we got thrown off the train.”*

Entering care was a turning point in many narratives, particularly when the child remained there until adulthood. In the excerpt below, Richard explains how the experience of entering care disrupted his childhood.

*“I mean in some ways our childhood was torn apart, you know, taken from your mum... it were a tough time, but for young people to be taken away and to be put into like boarding – like schools and houses and stuff with lots of other kids and stuff, it was very daunting.” Richard*

Here it can be seen how Richard used child development knowledge to communicate the difficult feelings and experiences that he had to cope with. The rupturing of this relationship with his mum is theorised by Richard himself: his account implies an effect on him. Whilst his relationship with his mother had not been an easy one and his mother did not always offer protection, she had been a constant familiar presence in his life.

This section has evidenced how adult decision-making, fear and disruption characterise these accounts of entering care. This illustrates a dissonance between social workers’ intentions and the way in which their actions were experienced. The sense of a lack of ‘care’ experienced during the transition into the state’s substitute family care may be associated by the participants with their lack of power to affect the changes happening in their lives. It should be acknowledged that the process of going into care was time limited, and this fear of the unknown soon became the known. Many participants spoke of being agents in this process through disclosures of abuse or neglect which instigated statutory agencies’ involvement and participants’ subsequent entry into state care. Such stories disrupt the dominant narratives of being a victim by demonstrating varying degrees of agency that existed in the process, thus challenging the idea of children as victims, or as passive. In addition, participants’ stories about the experience of entering care centre on the negative effect upon their emotions, security and identity. This is where it is useful to employ Honneth’s account of emotional misrecognition and its negative effect on a person’s basic self-

confidence. Interestingly, this emotional disrespect is in many instances a product of the legal recognition that a young person's needs were not being met through interpersonal familial recognition. Thus, legal frameworks were the recourse that prioritised participants' needs (Honneth, 2007). However, Honneth states that abuse only occurs when affective ties have been dissolved and love is no longer the basis of the family relationship (2007). This does not account for the varying quality of people's relationships with different family members and their affective ties with different family members.

Vanessa's experience contrasts with other participants' stories of entering care as something that was done to them, as in her story there is a sense that a) she wanted to live apart from her mum, b) that she was listened to and believed by social workers, and c) she did not speak of entering state care as traumatic. Moreover, she was the only participant who spoke explicitly about wanting to move out of the family home. Vanessa remembered how this had become an option for her after watching television one day.

*"There was a character in Home and Away who must've been in foster care or must've lived with alternative people, anyway, and I remember in my little head thinking, 'You know, that's just what I need. I need to just not be here and I need to – you know, I don't want another family. I just kind of need someone to put a roof over my head until I'm old enough to fend for myself.'" Vanessa*

Following this, Vanessa spoke about the morning on which she planned to leave home. This included talking to a teacher about the difficulties with her home life. This teacher had then

*"gone to talk to my form teacher... and she came and got us out of our first lesson and took us into the staff room, made us a cup of tea, sat me down and said... 'The teacher's told me what you've said. You know, I do believe you. Can you kind of tell me what I need to know?' I told her and then obviously she'd set the ball in motion and phoned social services and stuff." Vanessa*

Vanessa was able to enact agency in her own life. However, this agency was still dependent on professionals believing her account of her home life.

Only Vanessa spoke of wanting to move out of the family home. This challenges the cultural and moral expectation of enduring family ties (Bourdieu, 1996; Wilson, 2012) and might silence accounts similar to Vanessa's in which young people want to move away from their family home (Nelson, 2001; Woodiwiss, 2014).



## 6.2 Experiencing Foster, Residential and Kinship Care

Trajectories of care differed for the participants. Of the eleven participants, Jack, Lauren and Tommy entered care and subsequently returned to live with their birth mothers and new partners; Carrie-Anne, Rachel and Yvonne were returned home for a period of time before being placed back in state care; and five participants remained in care until they reached adulthood: Harry, Vanessa, Richard, Sally and Nicole.

The experiences of care told by participants reveal different understandings of their time in care. People were keen to share the positive memories they had of care during the interviews, and none of them said that going into care was an unmitigated disaster that should never have happened. Despite this, many participants had negative experiences of the care system in England. For instance, Tommy reflected on his experiences in three different placements and said, “[T]hat’s what happened to us, it was just one bad thing after another.” For other participants it was clearly a positive intervention. For instance, Jack evaluated the decision for him to be placed into care as the better option; had he been placed with relatives he believes “*the rot would have set in*”.

This chapter will now focus on the construction of belonging and difference within these caring spaces, the transitory nature of state care and experiences of contact with the birth family.

### 6.2.1 Quality and Care: Participants’ Relational Experiences of Relationships in Care. Treated like Family?

The relational aspect of care was integral to understanding participants’ experiences of care. It is these relationships that formed the conduit for the state care they received. Relationships between the participants and the people they met and lived with during their childhood played some role in developing their individual subjectivities as young people.

Being treated “*like family*”, as Richard said, was seen as a positive experience by a number of participants. For Lauren and Richard this was narratively produced through inclusive practices and enduring relationships. These experiences were

used in their stories to construct an identity of belonging. In this way, participants were enabled to negotiate an identity of belonging. Placements that nurtured these feelings were premised on good-quality relationships and care situations in which participants were able to develop connecting identities. One example of this was their inclusion in age-appropriate play and activities.

*“So from going in there, from the minute we were in that family, it was fun. And it was always – you were playing hide and seek behind the sofa, you were chasing the cat around, taking the dog out for a walk ... there was just always something and it was always full of other people. So Jade and Eddie’s friends were always in and out the house and other people there.” Lauren*

The importance of being treated the same as other children in the household was shared by Richard:

*“[V]ery much we were part of that family ... we were always included in what was going on, and it wasn’t , where sorta you hear stories where it’s sorta like, ‘Oh well, we’ve put them in respite so we can go away on holiday’.*

Some participants who had been in foster placements spoke of how they felt included and were treated fairly in their foster family. These provided participants with resources through which to negotiate meaningful relationships through state care. In turn this provided opportunities to negotiate a sense of belonging in and to their foster family.

Prior to moving in with his final set of foster parents, Richard experienced a number of state care placements. After living with these carers long term for several years, he felt a sense of belonging to a family because their commitment, longevity and unwavering support became *“more than just being a foster family”*. This realisation of family was a significant turning point for Richard:

*“it was sort of one of those things that you always wanted from being taken away from your family, to have a family who treat you like their own, and sort of provide.”*

Similarly, the relationship between Lauren, her family and foster family developed over time, beginning whilst she was a young child. Although Lauren returned to live with her birth family, she considers her previous foster carers as family, continuing to call them Aunty and Uncle, and their children *“became a brother and sister, and still are like that in my family”*. Both Lauren’s and Richard’s experiences of creating family through foster care was linked with the development of enduring relational intimacy; this was central to enabling them to construct a sense of belonging. Honneth’s account can be employed to understand aspects of the

relational experiences of being in state care in that those who spoke of realising new family members through their foster families, and those developing positive relationships with their peers, experienced emotional respect through these relationships, thus improving their self-confidence. Perhaps emotional respect trumps the social disrespect of the collective label of CiC.

Some participants were less able, or willing, to use these practices to negotiate a sense of belonging within a foster family. Vanessa spoke of how in her first foster placement,

*"I always knew that I was the foster child. But I don't think that was anything that they did."*

This ambivalence in negotiating, or resisting, belonging is further illustrated below.

*Carrie-Anne: "I just thought, 'Just wanna be back my place, wanna be where my friends are', you know? But they were nice people. I remember it being Easter time and George grating some Easter egg onto our ice cream; that was nice: 'Never had this experience before.' So, that was one of the good things about being in foster care, you know there was this family that'd be doing all the really, like, family things, whereas we never had that, so the experiences that occurred were really quite good, you know? All nice clean clothes that didn't smell of smoke, you know? And, you know, the family was sitting downstairs watching TV and they weren't sitting getting drunk and so it was nice, but still not quite your own place and your own circle of friends and stuff. So awkward at the same time."*

*Interviewer: "Can you remember a particular example of it being awkward?"*

*Carrie-Anne: "It's like not your house, you know? Is it? It's when it's your house when there's a spider, you can come downstairs saying 'Raaaaagh! There's a spider!' Whereas somebody else's house you don't know quite how you're supposed to deal with that, you know? And you tend just to sit pushed up against the corner of the bedroom staring at the spider, terrified because you haven't really got the confidence to go down and say 'Will you get the spider for us?'"*

Carrie-Anne's story illuminates the importance of peer friendships for her sense of where she belonged, and that the changing household norms and rules between placements and her mother's home affected her confidence to seek support. This suggests that whilst some foster placements were able to provide inclusive rituals and practices that are indicative of 'good' family practices, the participants did not always interpret these as indicative of their belonging. These placements were time limited and this may have had an impact on participants' abilities to develop enduring relationships. At times, this also reinforced differences between a foster family and the birth family, which in itself may have sustained a sense of not belonging.

One key way in which practices in state care contributed to many participants' construction of a narrative identity of not belonging was by being treated differently. This was highlighted through examples of exclusion from certain household rituals and practices:

*"[W]e used to sit on the stairs while their family had their meal and we had what was left, and things like that." Tommy*

*"[T]hey were me cousins but I was never, I always felt out of it, you know I knew I wasn't one of them." Harry*

*"I lived with these people for God knows how long, but I remember I slept on the floor 'cause the cousin, she wasn't very nice for all she'd been lovely, now that I was living with them she was an only child and it was awful. She wasn't very nice to me." Sally*

The stories of Harry, Yvonne, Rachel, Richard, Lauren and Sally highlighted the importance of the foster family as a whole for negotiating identities of belonging or difference. Yvonne demonstrates that although there was nothing wrong with her foster carers, their daughter's behaviour is highlighted as being of particular relevance to understanding the ending of that placement.

*"[Y]ou'd just have to look up and she'd [foster carers' daughter] be threatening to put your face in your dinner and all this, that and the other. Horrible. And as soon as I mentioned it to my social worker basically I was called a liar and the foster parents kinda turned after that." Yvonne*

These experiences of differential treatment in state care were negotiated as symbolically differentiating between family and non-family household members. Thus, household practices could be complicit in reinforcing an identity of difference within the household.

Care was not always safe for participants. Some stories exposed how, as a result of decisions adults made, some care placements placed participants at risk from abuse and/or maltreatment. One woman, at the age of 15, was thrown out of her foster home after the following incident occurred:

*"He [foster carer's adult son] rang me this day and he said he was at this park across the road, and he's crying on the phone ... I went over; he was sitting on the swing – bear in mind he was a 20-year old man – and I sat next to him, and of course me being me, I was, 'Are you all right?', and caring, and he said, 'Can I have a cuddle?' So I give him a cuddle and he kissed me and then he made me have sex with him outside and I got pregnant and his mum found out and threw me out." Sally*

Being seen as *"the odd one out"* because of personal habits, lifestyle choice or gender was a means through which participants constructed difference between

themselves and other looked after people in the same accommodation. This was most often associated with residential care settings.

*“I was the only girl, so, you know, I used to get targeted quite a lot.” Carrie-Anne*

This could have significant repercussions as young people were susceptible to bullying, interpersonal violence, rape and assault.

*“I was 13, there was five 17-year-olds there. So I was extremely vulnerable, begged them to move us. The staff told social they couldn’t keep us safe and I ended up being raped. So I was sharp shot out of there, big cover up, sent all the way to residential, took out of school ’cause of course they didn’t want us to tell anybody.” Yvonne*

Responses from social workers, carers and support staff further affected how participants’ experiences shaped their identity. The consequences of other people’s behaviour led to participants who experienced violence in state care settings being removed. This was further complicated when participants were teenagers, as they may have been seen as able to fend for themselves and able to consent to sex with older men despite being underage. In many cases the police were not involved. An accumulation of difficult life experiences reinforced Sally’s feelings of being *“very isolated and just worthless”*. These experiences could shape participants’ adult subjectivities and orientations towards the world. For instance, Yvonne spoke of her sense of self and her interpretation that she *“must’ve been a right bad bugger”* to have experienced so many difficulties throughout her life, including whilst in state care. Despite the legal recognition of being looked after, it has been shown that some participants experienced excluding practices and/or were put at risk of abuse and neglect during their time in state care. These experiences whilst in care could be understood theoretically as emotional, legal and social disrespect. Conversely, Vanessa spoke of how her social worker believed her when she asked to move placement and responded, which constituted emotional and legal respect.

Understandably, perhaps, residential care homes did not result in experiences that symbolically differentiated the participants from other young people with whom they were living because of their status of being in care. Some participants who spent time in residential care settings were keen to stress in the interviews that they had *“just loads of brilliant memories from there, like. Staff and kids, both of them”*. The quality of experiences outside the home varied. Yvonne said she and

the other young people “*were always out and about doing things*” as an organised group. She described how

*“we all got on right well, like a little family. We used to, we went out camping. Went swimming most nights... it worked – we had a whale of a time.”*

This contrasts with Harry’s, Tommy’s and Rachel’s recollections that group trips outside residential care were rare treats and the care received was described as “*very cold*”, with carers who were not nurturing or who were “*cruel*”. The differing historical and institutional contexts of participants’ lives could help to understand contrasting experiences (Hayden, 1999; Berridge et al., 2012).

*“But they never fed us much. I used to eat raw cabbages out the fields, you know, ’cause we – they never – I don’t know why but we never got enough to eat. And I know that’s wrong, like, but when I used to go to school I used to pinch milk bottles off the steps.” Tommy*

The construction of belonging to a foster family may have been unrealised in the told stories. But participants spoke of other spaces, such as school and clubs, which were key to developing peer relationships when they were younger. For example:

*“ [What] we used to do was, we’d, finish school four o’clock. And straight to YMCA for table tennis, darts, snooker. Anything. Sit in a café ’til eight, nine at night, walk home. We all did, quite a lot we did. I could see I’d done that all the time, every day, finished school – YM. Simple as that and then come home, bed, up for the paper round then when I finished – when I finished school I was straight onto the veg – delivering that, then after that back home, changed, out, straight to YM. And then back home late at night, late as I could.” Harry*

Such spaces, and experiences, provided narrative resources for participants’ further identity negotiations. For some participants such opportunities to develop peer friendships enabled them to build a peer support network, and some of these relationships have continued into adulthood.

State care could be a barrier to participants’ development of peer friendships.

*“[State care] had quite a reputation for itself so everyone sort of, they would sort of tell the kids, ‘Oh, don’t knock ’round with anybody from there.” Rachel*

The local context of residential homes, as can be seen in Rachel’s story, shaped her social identity, as in the new group home there was a greater salience placed on her ‘looked after’ identity locally because of assumptions about deviance and fears of contamination. Although residential homes may be more visible spaces in which children can be looked after by the state, Sally spoke of how in foster care

she and her foster brother experienced bullying by local children when returning from school, as “*everybody knew it was the foster kids’ house*”.

## 6.2.2 Transitory Experiences

The instability of some state care placements has been identified as a factor that negatively influences the outcomes of care leavers (Jackson and Martin, 1998; Mallon, 2006; Jackson and Ajayi, 2007; Gilligan, 2012). As seen previously, Holland and Crowley have inductively conceptualised this aspect of the child in care’s experience as nomadic (2013). Listening to the told stories of adults with care experiences for this study provides greater qualitative evidence about the effect of multiple placement moves and the specific interpretations and understandings of people who experienced this as children.

Many of the described transitions between state care placements in the narratives were not a result of a placement breaking down; often they were to do with the systematic temporality of placements. Richard argued that when a child is moved from one placement to another they lose the structures in their life, and therefore have to “*rebuild those structures, those bridges, that you sorta have in everyday life*”. Overall, the transitory experience could affect a person’s sense of belonging, as such nomadic moving makes it potentially difficult to maintain relationships that develop and the changes to personal disposition that might occur.

There was little evidence that younger children were able to voice an opinion on their placement moves. Richard linked this to the developmental stage of a young child and care givers’ perception of their inability to understand or comprehend.

*“Like I say, thrown in the deep end – ’cause that’s what it felt like with other moves. It was like, ‘Oh well, you’re moving and this is when you’re moving and this is where you’re going.’ It was like so much mix-up in that process, that there was just – like I said, extremely daunting, like, especially at a young age. As you grow older and you look back, you think, ‘Uh that was a weird way of doing it.’ But I suppose in some ways it was the only way to do it when you’re so little.”*

Alongside this transience, Nicole, Sally, Yvonne, Richard and Vanessa were vocal about their awareness of resources and how this affected their experience of state care.

*“There was nowhere to stay and there was nowhere for them to put us, because nobody wanted us. I was 15. No one wanted a 15-year-old, they want a cute little*

*baby. Do you know where they placed me? Placed me at Halfway House. Homeless unit for battered women and men and stuff. And there was druggies in there, you know, not nice people.” Nicole*

Other participants told stories of how, as teenagers (under 16 years old), a lack of suitable foster or residential placements meant they too were offered accommodation in hostels or bed and breakfasts. For young people this environment was alien and threatening, and consequently some declined this support. As Sally said, *“I refused to go to the hostel, I was so scared.”*

The choice to move placements was often bounded. Vanessa described the constraints on being able to decide as a young teenager about the suitability of a new foster placement: *“It might not be ideal, but, I know there’s nowhere else for me”*. She went on to explain this further:

*“I think from a social worker’s point of view it looked fabulous; however, it wasn’t. It was kind of pulling me from everything I knew and loved and so I came from a big and busy house so close to the city, all of my friendship groups... and then they picked me up and put me in The Burn. And that was interesting ’cause it was living in a village for the first time, and, obviously I landed with my Doctor Martin boots and my black hair and my long coat and I think within a week I was the local, I was a local drug dealer who had moved up from the city and was bringing drugs into the village and small towns – unbelievable. But anyway I just got on with it, as I do, and started a new school, made loads of friends, kind of built my life there. That placement, I asked to be removed from that placement. He was – how would I word it? He was, I think, grooming me.” Vanessa*

No participants blame a social worker for a negative experience; however, there was a sense of injustice resulting from having no power to meaningfully shape his or her living arrangements. This could suggest that people were aware of the constraints of the system they were living in; this made their experiences understandable within an organisational context. However, these experiences indicate that although justifiable organisationally, there were consequences for the well-being and security of looked after young people. This may mean that the transient nature of some people’s experiences of care contributed to their sense of being different.

A number of placements were ended as a result of malpractice by foster and residential carers, a foster carer’s own children or other young people accessing spaces of care. A placement move was triggered in Tommy’s life story of residential care through the recognition by the police of the neglect of the young boys.



*"[I]n this big house, in there were I think, there was ten boys including myself in the home and two Irish people who ran the home and they used to lock us in at night while they went out drinking and then in summer they used to lock us in the garden in the red hot – we had to pull the toilet chain to get a drink of water, things like that, you know? Very, very – very, very cruel. And, anyway, one night there was a boy there called Kenny Walkers, I always remember his name, till the day I die. And he'd been suffering whooping cough, and he was in bed this night. I heard him calling so I went to him and he looked in me eyes and died in my arms – a bit sad... Anyway, the police came and they closed that home straight away, so we all got taken to another home."*

Meanwhile, some participants experienced being positioned by their foster carers as deviant; the foster carers perceived and responded to the children in their care homogeneously.

*"[E]verything in the kitchen was locked, so every cupboard was locked, the fridge was locked, the freezer was locked. We couldn't have any food, you couldn't have any access to food unless they unlocked it. And it was me and my foster brother, you know it was just locked all the time. So in the end, I had started to buy my own little boxes of cereal so that I could just keep them, like, in my room, in my wardrobe, and they found them and then accused me of stealing. So my social worker came, went through the whole thing with them – you know – they couldn't deny that everything was locked and they just said it was their way of – you know, they'd had children that had just stolen duh-duh-duh and that if we wanted something we just had to ask, but they weren't there half the time, so I got took off them."* Sally

These accounts show how despite being in different care settings, these young people had to move out as a result of adults' behaviours. Sally's account shows how some state-approved foster carers were complicit in reproducing dominant narratives of the young people they looked after as deviant. This was reinforced in other participants' account too:

*"[W]hen I left... I remember him shouting out the door as I was walking down the drive, 'You'll be pregnant by the time you're 15!'"* Vanessa

The relevancy of Honneth's critical theory can be applied to many of the participants who spoke of being put at risk; they were both socially and emotionally disrespected by their carers. The former is particularly applicable to the positioning of young people as deviant in accounts of placement breakdown; the dominant narrative of the CiC as deviant was reproduced through foster carers' and social workers' positioning of participants. This could also be understood as Bourdieu's doxa, but the way in which participants, as young people, resisted this expectation, developing a counter-narrative, suggests they recognise aspects of their oppression (Nelson, 2001). These interpersonal events are indicative of some foster carers' social disrespect of the children and young people in their care

(Honneth, 1996). This relegates their individual abilities, skills and needs, and instead results in an interaction with them that is based on the dominant narratives of the CiC group.

Rachel's experiences of moving between residential homes could have been structured by the national changes taking place across England in which local authorities had been closing a large proportion of their children's homes since the 1970s, in favour of placing more children in foster placements (Hayden, 1999; Berridge et al., 2012). This could be implied when trying to understand the multiple transitions Rachel described:

*"I can sort of remember feeling very different there. I felt more different there than I did at the other home, I think I felt that since we had spent so long there that people didn't think 'Oh, you're the kids from the home' as opposed to the new one... so it was quite difficult. Didn't settle into that school at all, didn't like it."*

Transience, between foster and residential care settings, brought similar challenges for participants. As children, they had to leave one school and begin another, adapt to a change in the people with whom and where they were living, adapt to new rules and develop new relationships.

This section has highlighted how the end of a care placement was not often initiated by delinquent behaviours often associated with the dominant narratives of children in care. Indeed the last two excerpts demonstrate how some relationships with foster carers were shaped by their attitudes towards children in care and the subsequent positioning of them as deviant.

Richard identified good practice and what he had perceived as helpful in transitions between placements.

*"We sort of spent a few days coming over here, spending the time getting to know them a little bit more. And it would go from a couple of days to spending a couple of days plus a couple of nights to see exactly what we thought. Overall it was down to ourselves – whether we were happy to go there or whether they'd have to find someone else."*

Vanessa and Richard were the only participants who spoke of being able to have some influence on their placements and the agency to accept or reject a placement. Vanessa thinks she was just lucky in that she had social workers who listened to her. It was identified earlier that placement instability was a predictor of poor outcomes for care leavers. Many participants in this study experienced the

transience of state care. Holland and Crawley (2013) conceptualise these experiences as nomadism, which is associated with planned, group movements. This contrasts with the often unplanned, solitary journeys experienced by participants in this thesis, which could be reconceptualised through Bourdieu's theory as being exemplars of symbolic violence, particularly as at times the lack of suitable placements and short-term planning could detrimentally impact on participants' sense of identity and belonging.

Although participants spoke of how they were active in managing difficulties in their foster placements, it was also very clear that very few people recalled having agency in relation to their moves. In Richard's narrative, the lack of agency was naturalised through doxic child development knowledge, which focused on his age and his immaturity at the time, the latter meaning that he was unable to understand what was happening to him. This suggests that doxic beliefs were at work, that is, understandings that naturalise and legitimate inequalities, producing a misrecognition of the social forces around them (Eagleton and Bourdieu, 1991). Arguably, misrecognition is in the participants' focus on themselves as the hindrance, rather than the policy and resource context within which social workers act. Nicole's account suggests that she was not misrecognising her position within the care system as a teenager; because of her dominated position she was unable to challenge these decisions (Bourdieu and Passeron, 1991). Vanessa reflected she was "*lucky*" because she was listened to by the professionals in her life and they responded to her concerns, but not all participants had this response to risk or discontent in a care placement. Participants' agency was bounded by their dependent status as minors and the lack of suitable resources and foster placements for young people.

Some participants described how their accommodation, particularly their bedrooms, weren't "*warm*", suggesting that the minimal furniture of a bed, wardrobe, chest of drawers and television was not conducive to feeling at home. Such aesthetics could contribute symbolically to a sense of transience. Sally described how the neutral, bare bedroom she was given fostered this feeling of transience, as it "*just felt like I was staying there*". As Nicole argued, "*[Y]ou're a foster kid, you're not allowed to call it your home.*" In contrast, Yvonne, who was

unsure of what she was going to encounter in care, found the residential home “*lovely*” when she arrived. Such differential ways in which physical space can help create atmospheres draw attention to how it could contribute to feelings of impermanence or to a sense of belonging within a care setting.

Crucially, the transitory nature of state care undermined participants’ ability to establish and maintain connected identities or a sense of belonging. This aspect of state-crafted systems that affect the lives of young people could be said to indicate the power enacted upon the participants in this study. The frequent renegotiations of everyday life affected participants, producing psychosocial effects of feeling tired, angry and losing trust in other people. Transience was primarily caused by the decisions that adults made about the living arrangements of participants. Such decisions were primarily those of social workers, but in some instances parental rights also triggered them, and their requests for their child to be returned home were granted. Thus, transience in participants’ accounts was in part a product of their comparative lack of power within systems and relationships; this limited their ability to affect stability and agency in their lives. Here, the work of sociologists of childhood contributes to denaturalising the positioning of children within wider social relationships as powerless, irrational and in need of protection (Lee, 2001; Jenks, 2005; Prout, 2000)

### **6.2.3 Family Connections**

Being in state care, participants said, affected the quality of their relationships with their families.

Tommy’s relationship with his birth family was affected by the state’s actions. In some ways, the manner in which he was removed from his mother’s care is tricky to unpick as his own recall of this time was fragmented after 70 years. The way in which Tommy and his sister were separated from their eldest sibling was described by him as follows:

*“[O]ne minute she was there, the next minute she wasn’t, and I said, ‘Where’s she gone?’ She [mum] says, ‘She’s gone to Australia.’ But whether that was when me mother and father broke up, when – they used to think that – parents didn’t use to want their children so they sent them off to Australia was – wasn’t true, like, people were put on the boat and that was it... I don’t know what happened to her.”*

The emigration of children to Australia was legal and was promoted following the Empire Settlement Act 1922, which provided financial assistance to organisations and individuals seeking to emigrate from the UK to its Dominions (Sherington, 2003; Constantine, 2008). Although the rhetoric focused on the Act's philanthropic motivation to rescue children in need (Sherington, 2003), this policy also sought to reinforce Britain's imperialism (Constantine, 2008). It was intended that this would be achieved through boosting the receiving country's labour force and encouraging population growth (Constantine, 2008). This demonstrates how state policies were one way through which the state removed the agency from a participant to manage their own family relationships.

In the 1980s, child protection, parental rights and the family as a private space were a key rhetoric (Parton, 1991; Pilcher, 1996; Harden, 1999). For the majority of participants, the way in which their birth family was different to others was also secured politically and socially through their being a child in state care. The assumption was that their parents were unable or unwilling to care for them as expected by society and assessed by social workers. When intervening in the sphere of the family, there is a presumption that a child's legal guardians have not appropriately cared for a child or young person. It is in regard to these factors that Garrett (2013) shows that Bourdieu's theory can be drawn on to conceptualise how young people in care have symbolic power enacted on them by the left hand of the state, that is, social workers, to categorise them as CiC (Garrett, 2013). This is, in effect, the state symbolically naming some children as different from the wider child population in England: they are 'at risk' of harm or maladaptive development (Daniel, 2010). The result of this symbolic power causing participants to be categorised as a LAC affected them emotionally; they spoke of the powerlessness of being put into care. This, according to Bourdieu (1991), is evidence of symbolic violence. Together these factors also demonstrate that deviation from the idealised, normative family, indicate for Bourdieu a deficit in symbolic capital (1996). Such categorisation also relates to Honneth's social disrespect, whereby young people become identified and treated according to their status as a LAC rather than their individual traits, talents or abilities, thus disparaging their individual identities (1996). The way in which social services became involved with Yvonne and her family arguably ruptured their relationships.

*“My mother thought that social services were just undermining her authority and it just caused more friction in the house because I used to get, ‘Oh! You’re a battered child!’, and I was outcast, black sheep, all the family hated us.” Yvonne*

The state, through intervening via social services, contributed to the displacement of Yvonne’s family identity, as she subsequently became positioned within her birth family as the “*black sheep*”. There were mixed experiences of family contact whilst in state care. Only a minority of participants who returned to live with their parents experienced long periods without family contact. Tommy said:

*“[M]e mother never came to see me for what, 8 years? Just forgot about us, you know.”*

The lack of contact with parents was individualised, and such significant periods of time for children were framed as mysterious and indicative of their lack of worth. Tommy interpreted this as meaning “*she [mother] only wanted us out when were ready for work*”. Tommy experienced care in the 1940s, and at that time social workers had no statutory duty to maintain and promote birth family connections; this only became law via the 1989 Children’s Act (Hayden, 1999). However, Vanessa and Robert were critical of this one-size-fits-all policy (Hayden, 1999). This is illustrated below:

*“I felt like I was being told, by adults that I trusted, that it was ‘probably best to maintain some contacts because things might change and you never know’... I do remember going along with it more because logically, kind of, but emotionally, my emotions were screaming ‘No! Stay away!’” Vanessa*

Although care enabled Vanessa space in which to grow up away from her parents, she still wanted to be able to have a relationship with her father and brother. However, this was limited as her father was unwilling to have family contact without Vanessa’s mother being present. Contact between parents and children could be managed well, though, and thoughtful social workers were identified as facilitating personalised contact that worked for participants.

*“it was [social worker] who made sure that I got away from them, far enough that I could have a relationship with my dad – far enough so we couldn’t go a couple of hours or a couple of days without seeing each other.” Nicole*

But for some participants, being located close to birth family enabled ongoing contact and relationships with birth families. Despite the pleasure of time spent with family members, leaving them could be troubling. Robert described his experience: “[Y]ou’re also then taken away, it was quite difficult.” Meanwhile,

Rachel hints at the emotional work of living in two very different places every week – spending weekdays in the residential home and weekends with her dad.

*“[T]hen I used to remember thinking on a Sunday, getting that sinking feeling, like in the pit of your stomach, that like, ‘Oh, I’m going back, back to reality now.’ So it were almost as if you were running two parallel lives. You had one box where you were at home, you know, for the weekend, and it was very different to your experiences of when you were in the residential home... You almost had to put two hats on.”*

There were clearly difficulties for some participants as children when they visited their parents. This was compounded for some participants by their mother’s mental illness and the unpredictability of her behaviours. Reflecting on this, Rachel said that in contrast to her weekend visits to her dad’s house,

*“[t]here was never ever any sort of discussion about it [visiting mum] with any sort of adult. It was almost like – I felt – that it was swept under the carpet a little bit. I think that probably the residential workers didn’t feel comfortable, mental health was still a sort of big taboo.”*

By the age of 18, despite policies to maintain contact, some participants chose to terminate their relationship with their birth mother. Such reflexivity was based on seeing how these relationships could be toxic to their new living circumstances. In Richard’s words, *“[W]e thought it was better to cut ties and sort of go our own way.”*

### **6.3 Returning to the Family of Origin**

The lack of participants’ influence on where they were living suggests that, similarly to entering care, the majority had little agency regarding returning to live with their birth family. The move home from residential care was often understood to have been at their parents’ request.

*“[M]y dad had just decided that he would actually look after us, like full time.”*  
Rachel

*“[T]hey [social services] made us go home ‘cause that was what she [mam] wanted. So of course I was just a nightmare after that, full of anger.”* Yvonne

Many people found the structure of their family had changed when they returned. Stories were told of mothers having established new relationships with men who were now a part of their family, and other parents had become separated or divorced and younger siblings had been born. These changes significantly transformed the economic conditions of the families of Jack and Lauren. Participants did not always embrace new family members perhaps partly as they

had had little control over their changing lives. Such threats to previous ways of doing everyday life had to be negotiated by participants as children. Below, Lauren recalls how she reacted to her mother's new husband, her adoptive dad.

*"I guess if we'd been older we probably wouldn't of accepted that and got to say I was probably a right cow to him for a long time. He was this man who was sat on the couch with my mum, not me, do you know?... If we sat on the sofa I would squeeze right in so there was always – everybody always used to call me 'The Elbow Kid'... it was like I was fighting for me place."*

Such strategies could be used by young people to resist change and enact their agency. For some participants there were striking differences between the experiences they had whilst in state care and the quality of care they received and the care they had on their return home. This is illustrated in Carrie-Anne's account of returning home as a young child.

*"[W]e were not happy at all that we had to go back to live with mam, weren't too fond of the stepdad either. Didn't much like the differences between the families we'd been staying with and the family which we actually had."* Carrie-Anne

Foster care had shaped Carrie-Anne's view of what she felt her family could be like and the reality of what it was like. Furthermore, other reflexive interpretations told by participants illustrated the power that social workers had in influencing decisions. This was seen as a positive intervention in Rachel's and Jack's narratives, whereby a social worker's recognition that returning them to their birth family was in their best interests was *"instrumental"* in their reunification.

In order to enact agency, participants employed different strategies to resist these changes. In some cases this was embodied in purposive opposition to parents. Often, 'problem' behaviours, for instance Yvonne's evaluation that she was *"full of anger"*, were strategies used for responding to changes in participants' lives, over which they had little control. This may also have been a way of disconnecting from, or resistance to, belonging to the new environment.

Some participants, as teenagers, were given some agency regarding their living arrangements. Carrie-Anne explained her choice, whilst staying in residential care, to move back in with her mother and younger brothers:

*"I was beaten up off all the lads, I was the only girl, and then I was allowed back to stay with my mum. I thought, 'At least there it's better than being over there.' You know?"* Carrie-Anne



It is clear that although Carrie-Anne was given the choice about where to live, this was influenced, and constrained, by the extent of the choices. Carrie-Anne was not happy living at home. But when substitute care settings were not conducive to her well-being either, she opted for the family home, where her younger brothers, and friends, were.

#### **6.4 School: A Site of Social Learning**

Outside the care environment, schools were key sites of socialisation and learning and places to develop peer relationships. Schools gave participants opportunities for new experiences that they could draw on to negotiate their narrative identity. This was often a dynamic process, from being cast as an outsider (through markers such as when a child joined a new school, their academic level, accent or dialect) to becoming included by peers. Thus, the told stories indicate that the majority of participants experienced being socially constructed as different through social markers. Some participants were able to manage this by developing inclusive social identities, such as being a friend or performing for the team as a sportsperson, which in turn enabled the construction of a sense of connection or belonging.

What is revealed in the told stories is that for young people the experience of school is not focused on assessment outcomes. Yet research and policy focuses on the educational attainment of looked after children to predict their life chances. Instead, the participants most frequently narrated the sociality of the school rather than the difficulties that affected their educational engagement. This suggests a dissonance between people's life experiences and the focus of official data.

Some participants described how changing school as a result of moving home was just something they had to cope with. As Vanessa said, "*I just got on with it, as I do*", and participants were able to form friendships. But for Nicole, Robert and Yvonne, the experiences of disruption affected their ability to focus on education and make friends. Nicole described how it left her "*tired*" and unable to concentrate. Frequent moves between the birth family's home and placements in some instances compounded difficulties of creating a sense of inclusion and sameness. However, most participants recounted less static accounts of friendship

at school, reporting some initial difficulties in making friends; later they were able to develop friendships with their peers. Joining a new school could be difficult; Rachel described how she found it

*“quite difficult to fit in, you know, 'cause everyone's already established their friendships.”*

Developing local friendships could aid the transition to a new school. As will be demonstrated, Richard's foster family played an enabling role in this by introducing him to local boys around the same age as him with whom he was able to construct friendships prior to him starting a new, bigger school.

*“[T]hey were joining a new school as well. So I think it helped massively that I think we were, like, sort of best buddies. They were, like, going up into a big school and I was going up into a big school. So that took the pressure off me, a lot, on me first day because I knew that when we got the bus home they would be feeling the exact same as what I was, like, feeling.” Richard*

In Rachel's story, the attainment difference between herself and her peers provoked feelings of not being as clever as them; in addition, the travelling distance meant she struggled to make friends. A subsequent move to a less academically driven school closer to where she was living enabled her to feel more at ease with her social identity and develop friendships. It is clear that changing schools did not always have a negative impact on participants' educational biographies.

The construction of a sense of belonging in school was mostly dependent upon meeting people with shared interests and making friends at school, often through gendered behaviour. This was a process that young people had to complete, moving from being an outsider to an insider. In the excerpt below Tommy reflects on how he fitted into a Northumberland school with a Cockney accent.

*“Then they came to like me in the end and in the end I was all right, you know, in the end, but you had to stick up for yourself otherwise they took the mickey, you know, they would. Kept on your back all the time, but I love me sport and played for the cricket team, I played for the football team and I did everything sports wise you know? And they got to like me like that 'cause I'd captained the teams.”*

This suggests that the performance of relevant behaviours and skills could be integral to forming friendships that enabled participants to construct an inclusive social identity in their told stories.

Difference, in some participant's stories, was demonstrated through the way in

which being in state care structured their ability to learn. This was most often linked to placement moves. Additionally, school units based in residential homes were felt to have had a negative impact on individual attainment. Yvonne described how *“the teachers were fantastic but the work was just far too easy”*, and on return to mainstream education she was kept back a year as a result of missing parts of the core curriculum.

For some participants, school offered opportunities to develop other enduring social, cultural and emotional resources. Harry’s experiences encapsulate this. He lived with his aunt, uncle and cousins in the North East and was treated differently at home to his cousins; he was aware that his relationship status in the family differed. For Harry entering secondary school was when he recalled *“finding his feet”*, describing how he developed and established a circle of friends with whom he went to the YMCA daily after school.

Perceptions of young people who are living in state substitute care can be negative; research has shown, for example, that young people in care perceive that their teachers treat them differently (Honey et al., 2011). Contrasting with this are the few cases in which participants recalled how their teachers were more kind to them because they were in care, such as Tommy’s experience of being given sweets. The participants as young people were astute at identifying differences in their social interactions and being aware of their ascribed status. This is particularly clear in situations where the teacher was seen to be complicit in the construction of difference. Lauren recalled how when she started school she was made to stand in front of her peers and the teacher said, *“This is Lauren. She’s different, she doesn’t have a dad,”* with the result being that curious children asking her *“lots of questions”*. Classroom activities orientated around annual rituals associated with parenting and family (Mother’s and Father’s Day, Christmas Day) could be spaces for reinforcing a participant’s personal and social difference. One woman was expected by her teachers to leave the classroom at these times. This too reinforced the socially constructed difference between herself and her peers. Participants spoke of the emotional and social difficulties that these activities could lead to.

*"[A]ctivities which were anything – you know, like Mother's Day – that were linked to that or making Christmas cards for your parents, sort of things like that, 'cause you'd just think 'Urgh' ... they won't have suddenly thought, 'Oh, Rachel's making that, I wonder how she feels?', but at the same time I used to be sort of, like, 'Oh, what are they going to be thinking?' type of thing. That was difficult as a child, definitely." Rachel*

There were ramifications at school arising from other people's knowledge, and perceptions, of a participant's non-normative identity:

*"not that I was tret different, people just thought I must of done something wrong to be in care, as opposed to something was done to me... wasn't like I was a leper but it was like I wasn't normal like everybody else." Sally*

It can be seen here how for some participants school was a key way of becoming aware of social difference caused by their looked after identity, and this could be compounded by influential, dominant narratives of CiC as deviant. What is also clear within this discussion of school as a site of belonging or difference is that it is not static. In many ways what is evident is the dynamic interactions between family, teachers, peers, geography and social policy that heterogeneously shaped participants' identities of belonging or being different. For example, Carrie-Anne recalled the feeling of fear she experienced when telling her friend about being in foster care, because it was "*a dark secret*" and how this created an identity of difference, as if she were an "*alien*". This highlights how even when socially constructed belonging has been achieved, it is perceived to be fragile and is threatened by revelations of difference.

The ways in which difference was constructed varied in the told stories. Some described being treated differently but others felt different because of their family circumstances. What is masked in these accounts is the way in which ideal family is a social construction and how not everyone can achieve this (Bourdieu, 1996).

Schools' organisational environment itself contributed to a person's sense of inclusion. Boarding school was recounted by Vanessa as enabling her to construct sameness because all of the children there were also living away from their parents. In Jack's story, problematic behaviours were not understood to be a product of substitute care experiences, but rather, retrospectively, seen to be indicative of the wider working-class culture to which he belonged, where it was "*just normal to be like that*".

In some cases, narratives of educational success functioned to construct a sense of moral worth and demonstrate young people's agency. Some participants linked this to their child self enjoying learning, but for most of those who described achieving at school, it was something to be worked on, either individually or with supportive adults.

*"Terry [adoptive dad] was really educationally driven so he pushed and the educational psychologist came out and said – when I was about 7, I was living back at home then, we'd moved house so I must've been 7 – 'Don't get her to do any exams, she won't pass, O levels'll be beyond her.'" The whole bit, you know, 'write her off'. And I think he just turned around, marched this man out of the house and just said, 'Fuck off, we're not listening to that rubbish. Get lost.' And got me an English tutor... and I got me GCSEs." Lauren*

Some of the adults working with participants contributed to their personal expectations of their achievement. In this way, some professionals (or relatives) were instrumental in the development of counter-narratives, which disrupt the dominant narratives of children in care. The development of such counter-stories was linked to the recognition by carers of the dominant expectations of children placed with them, and an awareness of their difficult start in life, which may have negatively affected their educational attainment.

*"When I did my GCSEs and we called Yvonne and Brian to let them know how we got on. I remember she cried when I gave her my results and she was like, 'Robbie, you've done better than what my own children have done.' Considering the massive mix-up in my life and me sister's life that, we'd managed to concentrate and get good results from, like, GCSEs." Richard*

Implicit in Richard's account was the risk that he may not have done well in his GCSEs because of his difficult life experiences. This shows how expectations and aspirations for looked after children can be shaped by other people's perceptions of the impact of their previous experiences.

Achievement in these stories is used to demonstrate a more positive social identity and to edify moral worth. However, these intersect with other bounded choices and identities, particularly that of the 'child in care', that might indicate a deficit of moral worth.

*"I've always worked so hard. I always kept myself on the straight and narrow, like I never turned to drugs, I didn't turn to drink, I didn't – all in my head from the age of 11 was survival, I just had to survive, I just had to make sure there was a roof over my head and, like, do the best I could." Sally*

Through having 'worked hard', a sense of moral worth was developed. This could have functioned personally and socially to manage the deficit dominant narratives of the child in care, just as educational success in participants' narratives functioned to counter the expectations of CiC. For Sally, Richard and Lauren, success at school was used to edify the self-worth in their stories. This might function narratively to build moral worth from living a story that challenges the representation of the deviant or victim CiC who does not achieve. Such stories indicate experiencing social respect and thereby building an individual's self-esteem (Honneth, 1996). Bourdieu's work can be applied too to understand educational attainment: habitus and having a feel for the game mean that an individual's outcomes challenge the dominant narratives of CiC because the individual is able to develop appropriate practices for getting by in a pedagogic system (1984; Bourdieu and Passeron, 1990). For instance, Lauren's family facilitated her educational achievement through their economic, social and cultural capital, which enabled them to hire a private tutor. Similar support was not mentioned in the stories of other participants' who spoke of educational difficulties.

A deficit in aspirational thinking has been linked to the poor educational achievement of children in care. Aspirations were shared in only a few stories. Yvonne, Nicole and Vanessa all recounted feminised ambitions related to childcare or 'being a good mum', whilst Sally wanted to "*be everything that could put bad people, like, away*", either through becoming a lawyer or a police officer. Richard focused on having a professional sports career. These childhood aspirations led to a reflexive engagement with learning and orientated their post-compulsory education choices. The realisation of feminised aspirations of some of the women were not dependent on successful engagement at school. Similarly to Johansson and Höjer's (2012) findings, none of the participants in this study spoke of having aspirations during childhood for jobs which required higher education qualifications. The two older members of the sample did not describe having aspirations at all. However, it was common practice during the 1940s and 1950s not to give young working-class pupils any guidance about options for employment after school (Vickerstaff, 2003). Therefore, for the oldest participants in this sample, the lack of aspirations cannot be attributed to their status as previously

looked after children. Moreover, in Chapter 2 it was noted that sociologists have shown that wider social norms, culture and social class also bound aspirations.

The educational attainment of many participants could also be explained as structured by their status as a LAC; as such, their ability to realise their potential was restricted in four ways. First, they went to schools attached to a residential school that had a limited curriculum. Second, placements were disrupted, or not long term, meaning that these young people had to change school and lifestyle. Third, they faced difficulties in pursuing education once they had made the transition to independent living at an earlier age than their peers. Fourth, which relates to the dominant narratives of CiC, they were at risk of poor educational attainment. The expectations of and aspirations for some looked after children were contextualised and structured according to the early challenges they had faced in life. This is problematic as it individualises them and fails to address the structural mechanisms that contributed to the disruption in their childhoods and the social context within which attainment occurs. Invisibilities were produced in the narratives of Carrie-Anne and Yvonne, who did not speak about their final attainment at school. This could have been deliberately left out of their personal narratives. What is evident is that the period when they would have been expected to take GCSE exams intersected with other challenging life experiences.

## **6.5 Discussion**

The experiences presented in this chapter have shown that although many participants shared the experience of having been in state care, there were a variety of different subjective meanings and understandings in people's accounts.

It is useful to consider the construction of the LAC identity through both interactions and macro social structures. Since the Children Act 1948, relevant decisions should be made in the best interests of the child's welfare (Hayden, 1999). The state intervenes in the hope of providing a better standard of care for children at risk of neglect, maltreatment and/or abuse (Sheppard, 1995; Garrett, 1999, 2013). Stein talks about the presence of a LAC identity (2005, 2006a, 2006b) and associated stigmatising practices. The state is the agent in the production of the ascribed 'looked after child' identity, which is embedded within

legislation and policy (Sheppard, 1995). Stigmatising practices of care might include different treatment and exclusion from being a part of a normative family, which, as previously shown, can reinforce this identity of difference within domestic and educational spaces. But these different ways of treating people are not necessarily only internalised by those in care; studies have shown that there are negative perceptions of CiC in wider society (Ofsted, 2009; Who Cares? Trust, no date; Channel 4 News, 2015).

It is important to note that whilst participants shared the ascribed identity of being a child in care, it was negotiated differently by participants in their narratives: some spoke of resisting the changes to their lives brought about through adults' decisions, whilst others were able to develop affectionate relationships with their new carers. As already revealed in some stories, there is a sense that despite the intentions of foster carers, some participants were unable to feel at home in state care settings. Perhaps it is in the naming of family as 'foster' that leads young people to resist belonging. Thus, the symbolic power of naming children CiC, the precursor to symbolic violence, positions a young person within a field as an outsider. According to Bourdieu, such experiences can shape a person's identity by structuring their habitus (1984, 1991), particularly with respect to a sense of belonging or difference (Skeggs, 2004). Experiences between peers are also relevant to understanding identity negotiation in this thesis. Participants' narratives have shown how, in state care and schools, peer relationships could develop that allowed for the expression and conferment of social respect. Where such relationships were attainable via the demonstration of sporting skills or specific characteristics of the individual, there is evidence that they could lead to some amelioration and management of difficulties at home. Moreover, emotional respect could be achieved despite transience, through the development of peer friendships. It is clear that spaces other than private domestic spheres of the family, foster or residential home were able to offer opportunities for the development of other narrative identities. These spaces, though, could also reinforce social and personal difference whereby participants' looked after status, or non-normative family, became the primary signifier in their contact with other people. Next, the focus will turn to participants' accounts of their adulthood.



## **Chapter 7. Adult Identities: A Break from the Past?**

This chapter focuses on the adult phase of the life course. Continuing from previous chapters, where it was shown how some interpretations of experiences were instrumental in constructing 'problem' identities, this chapter explores how in adulthood participants' identities were not static. The chapter begins by exploring participants' transitions to independence. Next the role of employment and training as potential spaces for the construction of new social identities is considered. The third section focuses on the continuing role of family in reconstructing and negotiating identity across the life course. Through these sections it will become evident that the care-leaver or child-in-care identity is not the only force affecting participants' narrative identity negotiation.

### **7.1 Transitional Spaces: Journeys to Adult Independence**

There were three experiential narratives of participants' stories of their transitions to adulthood. The first of these was one in which the journey to independence offered opportunities for disconnection and new connections through work and training. The second narrative focused on the challenging contexts that related to participants' journeys that moved them away from state care and birth family. Finally, the narratives of 'not being ready' for adult independence are explored.

#### **7.1.1 Independence as an Opportunity**

The participants whose experiences are presented here include both statutory care leavers and those who had been reunited with their family earlier. These transitions were discursively presented as planned and anticipated and often preceded by stable state or family care. Predominantly, they had linear transitions to independence, beginning with leaving school and securing employment or training and then moving away from where participants had been living as dependents.

Wider contexts are useful for situating experiences of transitions to adulthood. This is shown in the stories of Harry and Tommy, who made the transition to work from school immediately. Both of them reported that their transitions were normal at the time, but also indicated that their opportunities were structured.

*“Went straight to pit. Most of the lads did it in them days yeah, you know, it’s the only job going then.” Tommy*

This suggests that belonging can be constructed through the inclusion of wider macro structural forces in a told story. It also indicates a collective rather than an individualised understanding of the life course. As accounts of school-to-work transitions were embedded within the participants’ respective local working-class communities, they were not reported as a result of their care experiences.

The anticipation of the transition to adult independence brought to the fore a desire to earn money. As Harry said, “[A]ll I wanted to do was finish school and go to work and earn some moola.” Earning money was a means for some participants to build an independent adult identity, particularly as work enabled them to move out of their accommodation.

*“[A] year or so after when me wages started get better ’cause I was working overtime and all that, I went on board, and it was three pound ten shillings a week board. And I used to have a couple of quid, two or three pound for meself. So I could gan out and buy me suits and all the stuff, you know. Independent.” Harry*

Other participants, to explain choices they made about their education, also used economic rationality. Below, Vanessa recounts how decisions she made were shaped by her desire to maintain security of her new home.

*“I knew, it would kind of be easier, obviously, keeping the flat and making it nice. I knew it would be easier if I was working full time, than getting my 40 quid a week to go to school.” Vanessa*

Moreover, their insistence on working and earning money suggests that not only did it provide opportunities for leisure, security and accommodation but was also a means for articulating their moral worth to themselves and others. This also highlights the difficulties of unrealistic expectations, embedded in policy, of care leavers being able to live independently on a small allowance whilst continuing their education.

Where available, utilising relationships with other people provided a means for ameliorating the lack of familial support.

*“And while it was really tough in lots of ways, in silly ways I think, in like practical ways I remember deciding I was going to cook a Sunday dinner one day and buying this chicken and then thinking, ‘What on Earth do I do with this chicken?’ and having to ring someone and say, ‘I’ve got a chicken, what do I do?’ So kind of that stuff... but I suppose emotionally it wasn’t tricky because Eddy’s [boyfriend]*

*mum and dad live, like, three miles outside of Ambridge so they were... on the doorstep.” Vanessa*

Family reunification was not a guarantee that practical or emotional support might be available to participants at this time in their lives.

*“Once college had come to an end that was it. Couldn’t find anywhere, desperate ... a friend had a cottage on a farm and were sleeping on the floorboards in there upstairs. It was freezing. It was so cold. There was snow on the ground. It was absolutely bitter cold, had to wear layers and layers of clothes. No jobs, nothing, nothing, and had to sign on, that didn’t go very far at all.” Jack*

This demonstrates how it is crucial to remain mindful that statutory care leavers are not unique in not being able to garner social, emotional or financial support from their families.

Whilst these transitions and the subsequent identity negotiations were structured by local economics and job markets, they were individually interpreted and negotiated. Economic rationality was particularly acute within these stories because it motivated participants to work and created opportunities, such as independent living, employment and a move away from spaces of care that reinforced identities of difference. However, their ability to achieve independence was shaped by wider structural factors regarding opportunities, such as employment and state support. This suggests a need to be sensitive to the social structures interacting with care leavers’ decision-making. Participants’ individual embodied histories intersected with their construction of identity; many of those who framed their stories this way indicated a preference for moving away from living as dependents, and had worked prior to leaving school. This was a process in which participants were able to feel as if they had exerted agency during the progression of their life course. Emotional and practical management was a concern, but some participants were able to negotiate this using emotional and practical support which was based on either pre-established or new networks. These networks were differentially able and willing to help participants. These aspects resonate with Bourdieu’s concept of social capital and habitus. Honneth’s concepts of emotional and social recognition illuminate the positive efficacy of these support systems.

### 7.1.2 Challenging Contexts

In this group there was a prevalence of unstable state care placements, or family disruptions, immediately prior to the participants' transitions to independent living. These narratives provide an insight into their challenging transitions to independence, a time described as "*traumatic*". They demonstrate the affective contexts of their transitions; often participants' difficulties accumulated during this time. Challenges faced by participants included family changes, abusive relationships, homelessness, financial insecurity, lack of emotional support, continued housing instability, assault and domestic violence.

A lack of suitable placements was cited as a reason for young women under the age of 16 being placed in a hostel. Here is one woman's account of her placement breakdown and subsequent transition away from state care.

*"I was 15 and pregnant. My social worker came and said that I had – I still remember I didn't even get to pack my stuff, she'd packed – my foster mum had packed all my stuff into black bags and threw them ... down the stairs into the garden and I wasn't allowed into the house... so my social worker said to me, 'Right, you've got a choice. You can either go and live in the hostel in the West End, or you can make your own way.' ... I refused to go to the hostel, I was so scared," Sally*

The father of Sally's unborn child was Len, her foster mum's son. Sally's narrative highlights how she was abruptly rejected by her foster mum for something which Len, her foster brother, did. This was a very frightening period of Sally's life, during which her circumstances changed. The consequence of Len's relationship with Sally led her to be positioned as the actor who had to take responsibility for what had happened. In telling her story, Sally opened up the possibility of discussing the injustice she felt at the response of the adults in her life.

Theoretically, Honneth's concept of emotional misrecognition is pertinent to understanding Sally's experiences. It is worth noting that there is evidence that Sally also experienced social and legal misrecognition in her foster carer's and social worker's responses. Honneth predicted that the effect of disrespect, such as emotional disrespect, leads to lowered self-esteem. Sally's narrative could also be seen to imply legal misrecognition, that is, intersubjectively interpreted as indicative of a lack of moral competence and a waiving of her legal right not to be abused; social misrecognition leads to devaluation of an individual's worth that is

based on their group membership. Such misrecognition could be a result of how social workers and foster carers did not treat Sally as a child but as a 'knowing' adult. Although Sally's experiences of sexual violence whilst in state care may be seen as constituting her victimhood, they do not account for how Sally perceived other people's responses. Perhaps because Sally went into care following her disclosure of sexual abuse, she was not, despite her age, seen as vulnerable and in need of protection. Despite her age indicating that legally she was a child at the time these incidents happened, they could be seen to position her as responsible and knowing. This resonates with sexual abuse literature, in which it is reported that children who have been abused transgress societal expectations of what a good childhood is. Moreover, the experience and its deviation from the perceived norm may have influenced how other people, such as social workers and foster carers, interpreted and responded to Sally.

The concepts of symbolic power, symbolic violence and doxa could also be applied to Sally's story. Symbolic power can be identified in the excerpt when Sally's foster carer no longer wanted to support Sally, and threw out her belongings. The symbolic violence of the carer's power meant Sally had to leave her placement (not for her own protection but at her foster carer's request). Her status of teenager is likely to have made her be seen as less in need of a safe space, or what is deemed a suitable space. For Sally at the age of 15 the symbolic violence of her status and the resource offered to her were inadequate to secure her well-being. Indeed the only resource offered did not make Sally feel safe. Doxa can be seen to legitimate this: social services only have finite resources and these need to be managed for the benefit of all young people at risk. Moreover, the doxa of family and its affective obligations may help to understand Sally's foster carer's reaction that 'blood is thicker than water'. There may also be other interpretations of the foster mum's reaction, such as her denying the role her son played in Sally's pregnancy so as to protect him from legal charges, or being upset at what had happened. There is no clear indication of why adults responded as they did to Sally's pregnancy. Here Bourdieu's attention to wider social mechanisms is not as important to understanding Sally's experiences and social relationships as it is theoretically dense and requires an objective identification of the social mechanisms at work. In comparison, the attention Honneth gives to social

relationships and subjective experiences is a more respectful approach to participants' narratives of the life course.

Sally described how she did not feel safe as her friend's mother misused substances and there were incidences of domestic violence. Sally said of this move that

*"it was kind of going from one awful situation to another, but at least I had a roof over my head. So I stayed there for a bit and then Len ... came, like, snooping up – not snooping around, but anyway, came back and he was like, 'I'm so sorry.' And, you know, 'I wasn't there for you.' And things like that and one thing led to another and ended up sleeping together again and I just didn't have anywhere else to go so I ended up going and living with him and raising his daughter, from the age of ... 16."*

Lack of support from social workers led Sally into precarious, informal living arrangements with a friend's mum for a few months. What Sally speaks about here is the limits to her bounded agency, as the options for housing seemed limited. Sally's narrative shows how the experience of leaving care and the lack of agency she had led her to move in with Len.

Yvonne, Carrie-Anne and Nicole also spoke of how the lack of support available to them as they made the transition to independence influenced the sexual relationships they entered into. Nicole recalled how she got into a relationship with her eldest son's biological father. She spoke of how she didn't love him but how this relationship helped her emotionally as *"he was the only one that showed any compassion at the time"*. Although participants chose these relationships, their opportunities were bounded and embedded in the areas in which they were living. Inadequate emotional support and material resources led to Yvonne, Carrie-Anne and Sally being in abusive relationships and experiencing domestic violence. As Yvonne said:

*"I was probably in relationships I didn't want to be in because I didn't have anywhere else to go."*

Such relationships could shape their personal identity negatively.

*"He used to tell us that I belonged in the abortion bucket, made me feel like really invaluable, really worthless and awful and, like, forever in his debt for saving us from that awful family." Carrie-Anne*

Nicole and Yvonne spoke of how their transition from state foster care to independent living was a stressful and differentiating experience for them as young adults.

*"I found managing financially really difficult and obviously all of my friends were kind of starting to go out and I barely had a pair of socks... Just stresses that you shouldn't really have to deal with at that age." Yvonne*

Here identities of difference were constructed symbolically through a contrast with their normative expectations of what "stresses" a young person should have. Participants claimed support was limited and of little value:

*"I got my own flat and social services didn't even visit me once in my new flat. But they did provide me with some curtains for it! But that was it." Nicole*

*"I went to them [social services] with problems. Was I falling behind in rent? I was falling behind in something and basically you've just got to get on with it. They just record that you're not managing but they don't offer you any help." Yvonne*

Whilst symbolic power and symbolic violence can be related to participants' experiences of leaving care and moving towards adult independence, they also help to theorise the way in which participants' transitions were structured by their earlier looked after status. Again, Honneth's tripartite approach to disrespect is more relevant to respecting the felt injustice of these experiences.

Access to a flat or bedsit was a symbolic and material indicator of difference between participants and their peers and friends at this point in their life course.

*"It was like party central, everyone come and party at Yvonne's 'cause Yvonne's actually got somewhere. Do you know what I mean? I didn't see it like that at the time but obviously now as an adult you see it's like everyone just taking mickey for somewhere to hang out, so everyone would come round to mine. My God, I had the council in monitoring the noise, we were just wild when we were 16, what do you expect? Smoked quite a bit of pot in them days, made some good friends who I'm still friends with now..." Yvonne*

Their associations could affect the security of participants' housing, particularly when other people's behaviour breached their tenancy agreement. The housing and employment trajectories of participants intersected with the personal resources they had to manage materially and emotionally, which were bounded by their age, other people's behaviour and their care-leaver status.

Participants were able to narratively construct other identities co-occurring with leaving care, through employment, training, friendships and motherhood. But opportunities were tempered by the contexts within which they lived, and other

people's behaviours. For instance, Nicole was enrolled on a youth training scheme (YTS) when she left care; however, because of a serious assault she had to move out of her accommodation. This meant that she could no longer continue the YTS she had found "rewarding". Sally spoke about how her relationship with Len led to her career being affected:

*"So I did my apprenticeship and I was a month off finishing and Alice's father was arrested for stealing. And the flat got raided where I lived and of course I was there, so they warrant checked me, which I was fine, but then it came back that I worked for emergency services so they said to me, these two men... 'You can't associate with a criminal. So you either leave him or you stay and you lose your job.' But the next day when I went to work I was sacked so they didn't – I didn't even have a chance to make a decision... I went to an agency straight away and I got a job." Sally*

Theoretically, the experiences of those participants who spoke of much more complex, challenging transitions can be conceptualised as indicative of Honneth's social and emotional disrespect. The affective experiences of legal recognition, related to an ascribed identity of being a statutory care leaver, were limited as they were structured by the resources and policies used to implement them. This produced a lack of emotional recognition. This introduces an interesting puzzle to the pursuit of democratised recognition within these spheres, as in many ways the legal recognition of difference attached to participants statutory care-leaver status reinforced individual differences through the conditions surrounding being a statutory care leaver. Clearly there was symbolic and material differentiation of resources available to this group compared to those available to their peers; this was expressed as an injustice at the affective level. Participants were astute at identifying how emotional disrespect at this time culminated in their individual sexual vulnerability. This emotional disrespect was partially produced by social disrespect attributed through their ascribed care-leaver identity. Bourdieu's theory also enables a more theoretical account of societal forces and how these are mechanised as systems of domination (1990). This can be applied to experiences of complex transitions to independence, particularly symbolic power and its violent effects. Many of the experiences could be linked to participants' status as a looked after child or care leaver, and to a rationalised account of the lack of suitable resources available to them, the latter reinforcing feelings of worthlessness in those difficult times. According to Bourdieu's theoretical work, these experiences would have affected the embodied history of participants, thus structuring their



habitus. Participants did not make connections between their own and other care leavers' experiences, again indicating misrecognition and individualisation.

This section has shown how participants experienced more complicated journeys to adult independence. Their transitions were affected by their care-leaver status, their bounded agency, their age, their relationships, their (human) need for emotional and material support, and other people's behaviours. An identity of difference was constructed through a lack of normatively anticipated support and experiences which diverged from more 'extended transitions' to independence. Problem identities are also seen to be constructed through participants' interactions with professionals and intimate partners. This was considered theoretically by referring to the work of Bourdieu and Honneth. Later in this chapter, participants' narratives of the life course show how they drew on other roles available through work, training and motherhood to negotiate their identity.

### **7.1.3 'Not Being Ready'**

This section focuses on the experiences of those whose transition to independence was something which they perceived they were not ready for. Expectations of responsibility, self-care, emotional independence and geographical relocation were highlighted by participants as factors they were not ready for. The different responses of adults to participants as young people and how these experiences were used to shape participants' identities are explored in this section.

Subjective accounts of not being ready for the journey to independence demonstrate that this journey was problematic for some participants. Rachel described how she left care at the age of 12 to live with her father. It was an experience where "*basically we're left to get on with it*" indicating an unanticipated move towards adult self-sufficiency.

*"I can still remember that, thinking I had a better life. I felt more secure in the [residential] home, you know? My dad just didn't have a clue at all and in terms of what he thought we should be able to do at the ages were – they were totally sort of out of sync, you know what I mean? Here's one example out of me being poorly, had chronic sickness and diarrhoea and this was probably like a few months after leaving the home and me dad said – he went out to work so I was by myself and he said, 'I'll pop back and see you at lunchtime.' So the worst food you would ever buy a child who had sickness and diarrhoea he actually ended up getting, like,*

*Chinese chicken curry. I can remember it, absolutely like it was yesterday. And, like, I was like so excited 'cause I'd never had this food before so ate it, but you can imagine sickness and diarrhoea and bearing in mind that this place had an outside toilet, it didn't even have the proper bathroom or anything. And I spent the rest of the afternoon, like, literally on the toilet, couldn't get off it was dreadful."*  
Rachel

Rachel's experiences of insecure parental income led her to seek work to supplement her income so she could buy necessities as a young teenager. For Rachel, 'not being ready' meant that she had to prematurely become independent.

Richard and Lauren were the only participants who spoke about extended transitions to independence. These were enabled by supportive relationships with adults who recognised and responded to their needs. For Richard, the expectation that he would move out of state care at 16 was a threat to his sense of well-being.

*"I remember when after the care worker went I broke down in tears 'cause I wasn't ready and I thought that because my sister moved out at 16 that I would then have to move out. And, Anne an' Rory, they were like, 'Oh no, no, like, you can stay here as long as you need to...' I was like, 'Oh well, it's just like being with your mum and dad.'"*

The personalised response from his foster parents which recognised his individual needs and their affections towards him enabled Richard to cement a sense of family belonging after several years of living with them. This sentiment of 'not being ready' and his carers' response was integral to constructing a sense of belonging in Richard's told story, particularly as his relationship with his foster family as family was made even more firm through their commitment to continue to support Richard. Reflecting on his reluctance to be independent, Richard said:

*"the reason why I wasn't ready, I think in me head, I was still really young. I enjoyed, like, having cuddles and being nurtured... and like I knew that I wasn't ready because if I was put out there I would probably've gone back to what I did when I was younger, I would sorta be a bit of a rebel and sorta steal ... it is difficult to sorta, to say goodbye in the sense of – when someone's been so supportive."*

The importance of relationships featured in Lauren's narrative about extended, supported transitions, in which she evaluated her educational decisions prior to entering university.

*"I wasn't really ready for leaving my mum if I'm honest. And more importantly my mum wasn't ready for me going."*

Family ties shed light on some of the decisions taken by young adults about their futures. The fear of a loss of quality relationships in these accounts perhaps helps to understand how identity, family and resources are intertwined and how one

person's choices/agency can be dependent upon other people's choices, emotions and agency. Crucially, acknowledgement by close adults of participants 'not being ready', and their appropriate responses, enabled the construction of identities of belonging. This resonates with the notion of performing family through enduring ties and meaningful practices (Bourdieu, 1996; Gillies, 2011).

In the stories of not being ready for independent living, the responses of parents or foster carers to participants were crucial to understanding how these experiences shaped individual identity. Some of these accounts reveal emotional misrecognition, illustrating the affective level of participants' social experiences. This was not necessarily born out of a lack of love (Honneth, 2007), but misrecognition of participants' needs through policies, linked to age and adults' dispositions. Evidently, emotional recognition received at this time cemented affective ties of family and what it means to do family. But these ties could also bind participants' agency, affecting the choices participants made about their careers and education as they sought to maintain the quality of these relationships. Indeed the way in which parents and carers responded positively to the felt needs of participants also relates to the way in which these encounters (re)produced family through doxic accounts of what a family is, through its practices (Bourdieu, 1996).

## **7.2 Work, Employment and Adult Education**

This section explores the experiences of work and training opportunities in adulthood and considers the way in which education and employment were central to participants' identity negotiation. Narratives and trajectories of work varied amongst this cohort, but the vast majority secured employment when they left school. A few participants enrolled on a YTS, or apprenticeship, when they left education. This section will present the findings concerning the ways in which work and training can both be spaces in which new social identities can be constructed and new interpersonal connections developed. This will be explored theoretically later on, where there will be consideration of how accumulation of social respect could shape participants' embodied histories.

### 7.2.1 New Opportunities?

The opportunities that emerged for employment, education and training post-schooling enabled many participants to renegotiate their social identities, particularly through positive feedback, mastery of skills and being able to provide themselves with the resources they needed to become financially independent.

*“It’s that self-esteem, and you know, I know I’m good for other – ‘cause I’ve proved that with my nursing, I feel that I see how I am with my patients and so I know I can be good for other people. It’s just learning to be good enough for myself.” Sally*

This suggests that there can be limits to the affective construction of positive identities through social roles, and that there are limits to this transformation. Meanwhile, some of the men described how the discipline and the camaraderie of being in the military had helped them to construct identities of belonging:

*“if an officer or sergeant or corporal said to do something you had to do it. No turning back... you had to do it when you’re in the army. No, ‘I don’t want to do that.’ You had to do it. That learns you discipline, you know, and everybody looked after each other. All good. And they were really – got on well in the army, got on a lots and lots o’ good mates.” Tommy*

However, wider contexts of family and self, illness, marital and relationship disruptions, previous employers and geographical movement were all influential on participants’ abilities to act autonomously and maintain employment. This suggests that social identities, other than having been in care, and wider social contexts intersect and shape agency too.

*“I really enjoyed the army but as I say, come out because me wife was ill.” Tommy*

One difficulty regarding participants’ relationships was that they could reinforce an identity of difference.

*“When other people I worked with used to talk about their families, their ma and dads, I used to feel out of it... I would love to have some family, other than my family. Like brothers or sisters or something, you know? ‘Cause I’ve got nobody.” Harry*

Such encounters reiterated Harry’s awareness of being excluded from the norm of having relationships with biologically related people. This made it difficult for him to relate to his colleagues’ accounts of family. One strategy used by others was to draw on their wider experiences from foster care:

*“I would talk about the family stories that I had from foster care, but I would give the impression that that was my family home without being specific.” Carrie-Anne*

But these experiences of having a normative family life through substitute arrangements were not available to all participants.

One of the difficulties of sharing family stories was linked to how non-normative family and state care experiences might threaten participants' professional identities. Employers reinforced identities of difference as problematic in more concrete ways. When working in welfare services, Vanessa described how her employer expected her to remain silent about her own experiences of state care:

*"I've always had to hide, at the local authority's request, actually, the fact that I was looked after and it would always be brought up when I got a new job or a new manager. It would always be, 'You don't share that with people, do you?' Almost as if it was something to be ashamed of, and I'm not ashamed of it, it's part of who I am."*

It could be said that such personal disclosure should be discouraged so as to protect a worker's personal life and to maintain some professional, emotional distance from clients; this is often the practice in child and adult social care. However, Vanessa interpreted this differently. She resisted the imposed silence through a personal policy of not lying to the young people she was working with, so if a young person asked her if she had been in care she would tell them the truth. Counter to expectations, Vanessa said that

*"those young people that knew, they never ever told anybody else and they never threw it back at me."*

As highlighted at the outset of this thesis, some negative judgements of care experienced adults are reinforced within official statistics and theoretical understandings of child development. For some participants, encountering these at work negatively affected their identity, undermining their ability to maintain a professional identity.

*"So I'm sitting in training courses and they're saying, you know, 'People who've not had, like, a care giver, you know, attachment problems' and all the problems they would have and people who've been in children's homes and care and the percentage of them failing in life. You know, it's just massive ... all these statistics were just thrown at us and I was just sat there in the chair thinking... 'What's the fucking point of trying? 'Cause I'm doomed, this is me, they're talking about me, why am I even sat here? I'm a fraud, I shouldn't be here.' So all these thoughts and that, were really playing havoc with my head. And I just remember sitting in this training course, and I just remember being sat on this seat in this auditorium full of other people with a spotlight shining on me, and it was just awful, really, really distressing... And just thinking, 'Well that's my destiny, that's my future. You're always going to have these problems.'" Carrie-Anne*

Carrie-Anne interpreted her experiences through a dominant narrative and saw herself as “doomed”. Other participants expressed their reluctance to disclose to people their care experiences, as “once you’ve been in care you get labelled”. And you get “treat differently”. Nicole recalls an encounter between herself and her boss, Teresa:

*“You were fostered?” and I went ‘Uh huh.’ She says, ‘In this town?’. ‘Yeah,’ I says... the next day again I was meant to be on the tills and Teresa says, ‘It’s all right you don’t need to do that, you can just work in the kitchens.’ And I went, ‘All right.’ And I says, ‘When am I back out front?’ She was, ‘Oh, I think I might get somebody else in to cover that now.’ But I think I kind of know why, ‘cause you know I coulda been a thief or anything, couldn’t I? But up until then, working with her for almost 3 years, everything was fine... So yeah, it does stay with you. You are judged on it. Wrong assumptions are made.”*

Similarly, colleagues’ responses to disclosures of troubling family backgrounds could reinforce difference.

*“I was once at a conference and my mate, who was my PhD supervisor, sat around with these eminent professors ... and they’re talking about what their dads have done and this, that and the other. ‘Oh, he was this.’ And ‘He was that.’ I could see my mate sat there with me and he was looking at me like that, he goes ‘Doctor Lyons, tell ‘em what your granddad used to be.’ And they’re expecting this great statesman or world leader, Nobel peace prize. I says ‘He was a tramp.’ And they looked and they were waiting for the laughter and ‘He really was a tramp.’ ‘Where did he live, then, this tramp granddad of yours, Jack?’ I said, ‘He lived in the public toilets.’ They were like that [impersonates shocked face].” Jack*

This highlights how, although he is a qualified academic, Jack’s upbringing and family circumstances marked him as different. Wider contexts of the life course, and not solely his experiences of care, enabled the identification of Jack’s family background as indicative of social difference between himself and his colleagues.

Moreover, problematic identities arising from other experiences (not from a child-in-care identity) intersected with periods of unemployment. Stories about unemployment worked on the social identity of participants through an active disavowal of being welfare dependent or unwilling to work.

*“I never thought about going to the Nash and asking for some money or something, ‘cause I’d just got paid off one of the jobs. I’d only been out of work for 6 weeks and never before that.” Harry*

Meanwhile, Yvonne’s account of being a single mother in 2014 in receipt of welfare benefits and affected by the bedroom tax shows how the effect on a

person's sense of worth and social identity amid the current rhetoric of strivers versus skivers can be managed.

*"[T]o be honest with you, when I go back to work I'll not be that much better off, but at least I'll be working."*

The role of work in constructing a positive identity is captured in Tommy's reflection: *"I retired in 1999 – come to the end of my story haven't I?"* Participants' accounts of employment counter expectations of poor employment prospects for care leavers.

Work environments were central to the way participants' experienced negative messages about themselves. These messages reinforced feelings of personal difference and, more importantly, problematised their biographies. This was particularly acute in employment associated with welfare provision as there were more frequent encounters with the negative expectations of young people in care. Although it is difficult to discern whether this was a purely individual interpretation of employers' motives, the important consideration in this thesis is what this meant to participants themselves. An absence of normative family experiences was related to emotional and social disrespect produced through some participants' interactions with colleagues. Negative connotations of the self produced in the workplace intersected with their non-normative family and state care experiences, often resulting in social disrespect. The normative standards through which social disrespect occurred only reinforced the notion of the idealised family, offering little potential for critique. As previously explained, Bourdieu's theory links multiple concepts to provide a theoretical account for understanding social domination; within this the family has been described as a doxa of social organisation (1996). The difficulties arising from family difference indicate that Bourdieu's understanding of family as a source of symbolic (and economic, cultural and social) capital (1996) can enable an understanding of how family, even when absent, can affect a participant's social identity. For some participants, a lack of symbolic family capital viscerally reinforced social and personal difference. The effect of this is symbolic violence, in that it negatively affected participants' identities through processes that devalued their self, family and childhood.

## 7.2.2 Higher Education

Accounts of transitions between school, employment and higher education featured in many of the told stories analysed. Only one participant made a normative linear transition from A levels to HE: Lauren. In many ways this echoes the findings of previous research (Stein, 2005, 2006a, 2006b; Jackson and Ajayi, 2007; Cameron, 2007; Garrett, 2002). However, many other participants attended university as mature students. Nearly half of the participants have an undergraduate degree or higher; this is a similar trajectory to that noted in other research (Mallon, 2007; Duncalf, 2010).

Moving into HE was an active decision; it was very often a process. This section starts by looking at decisions to go into HE and the ways in which these intersected with participants' identity negotiation.

*"[T]he fact that I've got qualifications is because of you [adoptive father], 'cause you made me do me homework, you were the strict one that checked it saying, 'That's shit, do it again, get on with it.' You know? You were the one that came to look at universities with me, not my mum. You were the one that said that I had to push to go there when people didn't think I could." Lauren*

When it was offered support and belief in a participant's potential to achieve and do well in life were powerful enablers for constructing a sense of self-worth and could cement familial bonds.

Social work staff were also identified as instrumental in participants' journeys into HE, because by seeing potential and encouraging participants they provided motivation. This was the case even where a significant length of time had developed between the relationships and actual engagement with HE.

*"[W]hen I was at a residential home my key worker's just fantastic. She's a very old lady now, but I was her last key child 'cause she was going to retire and she made me promise her that I would be her success story, and that I would go on and I would go to university and all the rest of it and I promised." Yvonne*

Despite the good intentions of this professional, this excerpt also reinforces dominant stories of care leavers, in which a successful outcome and university education are exceptional. Messages like the one given in this excerpt by the key worker, however, could be a resource for children in care to use to differentiate themselves from these dominant narratives.



Reflexive accounts of the decision to enter into an HE programme reveal differing motivations. Some were motivated by the prospect of increased wages and improving earning potential. The decision to pursue a new profession through HE could be prompted by doing something for 'me' and moving away from unsatisfying work.

*"I think that I just sort of felt I needed some time for myself because, I did want to do things for others, but at the time I wanted to do something for me as well, you know? Like something that I was really interested in 'cause previously I'd just done jobs that I did not like whatsoever... I just wanted to have something that I enjoyed."* Rachel

For others, pursuing qualifications enabled them to help people. This could be a means of redeeming very challenging times in a person's life.

*"I was just going to turn all the pain and misery into something positive 'cause I was going to use my experiences to try and help other people."* Yvonne

Very few participants remarked on their decision to attend local universities, although two people did speak of their impressions of Russell Group universities. Vanessa, despite securing a place at one of these universities, described how she decided that *"it wasn't for me"*. The stark differences in life experiences between traditional and non-traditional student groups, including social class, were factors to be negotiated. Jack enrolled in a Russell Group institution; he was *"like a fish out of water"* because

*"it was really posh upper-class- – upper-middle-class kids and absolutely nothing in common with me whatsoever, different lives altogether. There was three of us<sup>8</sup> got taken – four of us actually got taken on, and only two of us lasted the duration."* Jack

Difference between participants and their peers, during time in HE, was often linked to class and age differences. These characteristics set them apart from their university peers. Often this difference was something that had to be managed.

*"I remember one of the posh girls in a seminar group saying, 'How did you get here?' I was just, 'Well probably the same way you got here. I've qualified to get here.' [laugh] Had to bite my tongue not to do the normal working-class response, that would be to be respond, 'Why don't you fuck off?' But I never, because that would be wrong and it would probably just reinforce her opinion of me."* Jack

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<sup>8</sup> Jack is referring to working-class students as 'us'.

It was common amongst mature students within this sample to comment on how their mature identity and their other identities of employee and parent could be a challenge to their attendance. This wasn't always easily accommodated.

*"[T]hey're looking for placements for you ... I had put on, I have got my daughter to look after. In terms of placements you're going to have to be careful about where you're sending us 'cause of school. I'm not in a position where I can pay for a child minder." Rachel*

Managing competing responsibilities whilst in HE was perceived to have a negative impact on some participants' attainment. Despite this, attending HE as a mature student resulted in more motivation, compared with their younger peers. This difference in attitude was summed up by Sally:

*"while yous are out drinking and doing stuff I'm sitting, preparing for my next one ... this is not a job, this is my life."*

This is one example of a journey that moves from experiencing learning as constructing an identity of difference to one that transforms understandings of a person's experiences. At college, when she was completing access qualifications, Yvonne struggled with the way in which her sense of difference was magnified by studying sociology.

*"[L]ike I said, they kept talking 'cause I was still so vulnerable with family and it was talking about 'Your role in the family'. And there was this woman who was just talking about what she does and her family and that and I was just dead emotional. I couldn't go back, I just wasn't ready." Yvonne*

However, over time, Yvonne was able to manage her family and study commitments and could also learn about new ways of thinking about her experiences and identity; this was the same for other participants.

*"[T]he more that I learned about different things the more I was starting to understand and be able to put into boxes about my kind of life and different things and looking at things in different ways. I suppose I was in a way able to counsel myself a little – not necessarily counsel myself but just understand things a bit broader." Yvonne*

Although identities of difference were frequently constructed in accounts of participants' time in HE, these were not static understandings of their value and identity. The journey through HE climaxed with the pursuit of new careers in professional jobs and increased wage potential that five participants out of the six that attended HE would have been unable to secure without an undergraduate degree.

Experiences of going to university were also used to shape participants' identities. The majority of those in this research who attended HE did so as mature students, which resonates with Mallon's conclusions that educational success may come later in life for people with care experience (2007). Moreover, the construction of different learner identities to those of their younger peers was related to their interpretations of being in HE and their social class. The majority chose vocational degree programmes. This resonates with Johansson and Höjer's (2012) finding that disadvantaged youth tend to pursue vocational degrees with trajectories into low-paid, low-status, feminised employment. Many participants spoke of wanting to do something for themselves or wanting to do something good with their bad life experiences. Thus, the extent to which this was a free choice is debatable, as their choices were affected by their previous life experiences. This suggests that participants' previous life experiences associated with state care, gender and employment insecurity may have structured their agency. These decisions are exemplars of Bourdieu's embodied history – participants' life experiences have shaped their dispositions and their imagined possibilities.

The experience of participants in FE/HE can be understood through Bourdieu and Passeron's work (1990). The difference constructed in the narratives between self, peers and institutions is affected by an institution's habitus (Reay et al., 2010). With regard to how theory can shed light on the construction of identity in HE, there is evidence that different social and cultural capitals were apparent in elite universities; for participants at undergraduate level this was a part of constructing identities of difference. This also occurred in class narratives in which others were aware of participants' cultural background; this had structured their upbringing and they sought to change this for their children. This suggests habitus, and hence identity, transformation. Similarly, Honneth's social disrespect can be used to explain how these social interactions disparaged participants' previous life experiences.

Most participants who attended FE/HE as mature students also had caring and financial responsibilities to juggle alongside their studies. Research has highlighted how widely in the UK mature students, particularly women, face a "double life load", taking responsibility for their learning and domestic lives (Kevern

and Webb, 2003, p.8). Many described how this affected their ability to socialise with their peers and to find time to study. Although difference was noticed and constructed by participants, these findings resonate with other work on higher education experiences of mature and/or working-class students (Kevern and Webb, 2003; Reay et al., 2010). This suggests that in FE/HE, identities of difference were not reducible to care experiences. The institutional organisation of FE/HE assumes that all students are single and devoid of extra non-student responsibilities (Kevern and Webb, 2003). In the context of widening participation, this indicates institutional barriers to equality of opportunity. It is proposed that these accounts amount to Bourdieusian misrecognition in which participants related their difficulties to their commitments, not the FE/HE institution's organisation. To understand this theoretically, symbolic power is useful. The identity work of achieving through attending and completing FE/HE for many participants was symbolic of their self- and social worth. Learning in institutions reproduces normative values of what is deemed acceptable and respectable, as defined by the dominators (Bourdieu and Passeron, 1990). This epitomises the way in which those who are dominated in society are complicit in their domination. The application of Honneth's social disrespect is limited here as it accounts for interpersonal encounters, not systems. This is exemplified in Yvonne's account about studying the family as a part of her sociology course. Although this incident is indicative of Honneth's emotional and social disrespect, it does not account for the way in which dominant narratives and expectations of families may impinge negatively on those unable to access them. Thus, Bourdieu's approach is more salient as it is indicative of doxa, symbolic power and its effect as symbolic violence, which affected Yvonne emotionally and led to self-exclusion.

### **7.2.3 Achievement**

One key way in which many participants negotiated their narrative identity during the interviews was through achievements, often related to work. Achievement enabled interpersonal recognition of the qualities of participants, either through overcoming the past or realising an ambition. At times these experiences usurped a participant's embodied history and challenged the associated dominant narratives.

Such troubling connections to participants' own embodied histories were not static; over time participants were able to reflexively rewrite their life stories. This interlinks with something that was identified previously, which is that some participants were worried about repeating cycles of maladaptive behaviours. Through the course of their adult lives many participants were able, through their agency, to distance themselves from the sense of being 'doomed' to repeat history.

*"So I've got a lot to be proud of, how much I've achieved and stuff. But I do talk about it a bit more, and people say, 'What?! What?! What?!' Like really, really gobsmacked and I'm just like, 'Well that's my normal, that was my normal.' You know? Having shoes where my toes were curled at the front, that was my normal, I didn't ever have a life where I had clothes that fitted us all the time." Carrie-Anne*

By countering the dominant narrative of the likelihood of failing, Carrie-Anne has been able to negotiate a positive identity for herself. Moreover, the dominant narrative of intergenerational transmission of disadvantage is captured in her colleagues' reactions. In some accounts, narratives of having overcome a deprived family background could be used to reclaim a positive identity.

Work achievements also intersected with the establishment of family investment, belonging and connection.

*"I got it and I remember sorta mum and dad coming to me first [professional] game... I came on and dad cried and mum cried, it was just that massive. I had goosebumps like all over and it was like, 'This is my chance to show what I was about' ... just getting that, like, that first step into it was, like, an amazing feeling." Richard*

Such points in the told stories signify affirming, caring, affectionate relationships through a manifest demonstration of how participants' achievements were dependent on the people around them.

*"I've probably spent my whole life going, 'Look-look! I've done it, I've passed my exams! I've done this, I've done that.' I felt like he'd [adoptive dad] invested so much in me 'cause I had dyslexia but people didn't really realise what it was so I was told that I was a stupid kid that was put at the back." Lauren*

Family support could reproduce binding ties between family members. As seen above, there is also a sense of obligation towards family members who had provided practical and emotional support.

But the achievement and continuation of aspirations was clearly not equitable. One participant said that one of the reasons for taking part in this research was to

show that if a child in care has dreams and works hard, they can achieve it. However, his own experience of not being able to continue developing his career was mostly “*down to politics and, like, who people know... I had failed really, the way I saw it in me head*”. This contradictory interpretation highlights the competing thoughts and understandings people often had of their life experiences.

It has been shown that achievement was also relationally constructed. But achievement was not meritocratic and the opportunities for realising ambitions were bounded by social connections. Achievements through employment was more tenuous and risky for the management of a personal identity.

The effect of achievement on identity was positive. It is clear that achievements in adulthood were seen as indicators of participants’ personal worth and a result of their hard work. Thus, achievements can be conceptualised, using Honneth’s work, as social respect. For some participants, achievement occurred in the context of secure, caring, lasting relationships, and this added to the positive identity negotiation conducted through its convergence with emotional respect. Achievements at work or in HE could also demonstrate a counter-narrative to how participants had previously been labelled, for example as having low expectations associated with social class, learning ability or being in state care. What emerged from the data is how dominant narratives could be disrupted through relationships with supportive adults. This had the effect of enabling participants to resist the negative expectation of them associated with such labels.

The effect of achievement wasn’t static, and over time participants had to deal with personal and employment difficulties. Narratives of failure and difficulties at work were individualised, which is evidence that supports Bourdieu’s view that there is misrecognition of other factors that affect attainment. Where the focus is on the deficit self as being the cause, it could be said that this is indicative of meritocracy being a doxa. Although participants spoke of broader forces than themselves influencing their life course, this was frequently interpreted as indicative of their personal failures. Crucially, the discussion of achievement and identity negotiation in this chapter demonstrates how the worlds of employment, education and parenting offered opportunities for reflexive decision-making and the development of new identities.

### 7.3 Recalibrations: Family and Agency in Adulthood

This section explores the family experiences of the participants during their adulthood. It focuses on three discrete areas: family history and knowledge, birth family relationship negotiations, and being a parent. It will explore how adult family experiences were drawn on in participants' narratives to negotiate identities of belonging or difference.

#### 7.3.1 Piecing the Story Together

A theme running throughout all of the narratives was how the participants' family history was key to their construction of identity. There were two ways through which participants were able to access this information, either through speaking with family members or accessing their official records. Those who have accessed their records and/or family history described their experiences of the process as *"really upsetting, really quite distressing as well"*, whilst others said it was *"too scary"*. Often the information helped participants understand the factors that triggered changes in their lives. It also provoked feelings of anger as the extent of their maltreatment was revealed.

The relevancy of the information disclosed to participants who accessed their care records and the potential to use this information were limited. Below is Vanessa's account of accessing her records and how they proved to be of little use to her because they were censored.

*"I remember going along to the office, sitting in a room and reading them and he [social worker] was absolutely right. The answers that I want are under that Tippex and I know you're not going to kind of let me see them."*

Furthermore, the crass depersonalised, decontextualised records were painful for some to read as they obscured the full extent of situations. Recalling a particularly traumatic time in her teenage years, Yvonne described how her care records stated the following:

*"'Found Yvonne in her room, bite marks and writing all over herself, looks very pathetic.' So that was kind of the empathy that was available and I'd tried contacting the social workers and they just kept saying that they were on holiday or they were on the sick or whatever, so eventually I just kind of gave up. So I think I tried to kill myself."*

These comments were recorded in the context of an unrecorded, but reported,

recent sexual assault and placement move. The point here is that record-keeping did not always include key events of participants' lives. This creates two issues, one with regard to the information handed over to staff, and the second relates to the ways this recording-keeping produces invisibilities concerning the factors which Yvonne identified as important to her. This is evidence of silencing through a refusal to believe there were reasons for Yvonne's presented self (Fivush, 2010). The effect on self is captured in the above excerpt from Yvonne's interview, in which her sense of self as valued was weakened by the lack of support.

This is an important point for those in care, as these excerpts show how official documentation and data protection produces institutional invisibilities. Obscuring subjectively important parts of a person's biography could affect their sense of identity.

For the older cohort, accessing their care files was more difficult as the recording and maintaining of such notes has been patchy historically. Tommy described how his attempts to access his records through one organisation were "*blocked*" because of a lack of information. The relatives of some participants refused to tell them anything about their family histories. It is difficult to know why families were reluctant to disclose information, although this could be linked to a community's social norms and values. Pertinent to this aspect is the reaction of the local Catholic community to the suicide of Lauren's dad, which she described as being

*"the ultimate sin. Nobody in the family wanted that stigma, my grandparents, his parents, you know? So there had to be a, he'd ceased to exist in every sense, so nobody had a picture of my dad anywhere."*

Linking her family's experiences to the religious community enabled Lauren to have a more socially and culturally sensitive understanding of the silence around her father's death.

To understand this, Bourdieu's concept of symbolic power and violence can be applied. It can be utilised to understand the process through which care records had been constructed and recorded and were dependent upon other people. Participants saw this as having structured their access to their history as adults and as being indicative of the way in which institutional recording excluded meaningful parts of their stories. The effect of this is symbolic violence. Where the



family blocked access to an oral family history, this can be conceptualised as symbolical power too. The effect of this is it stifles the construction of an identity of belonging, thus it can reproduce embodied experiences of difference. According to Bourdieu's conceptualisation of embodied history, however, this subjective interpretation may be predicated upon participants' experiences of symbolic exclusion in childhood. Embodied history helps to account for how different power and family experiences continue to intersect with individual identity negotiation in adulthood.

Crucially, participants' identities were not singular in adulthood. This is illustrated clearly by Carrie-Anne, who described how as a young adult her thoughts were "*all warped*" by the process of disallowing any similarity to her mother.

*"I didn't want to do anything the same as her because I was so scared. Well, I was so convinced in my brain that history was repeating itself."* Carrie-Anne

Instead she constructed an identity that was the opposite of her mother's. This process was particularly salient in stories concerning parental mental illness, where there was a degree of denying any similarity to their parents by participants.

*"I would never have a nervous breakdown. It's not in my psyche and I would never do that around the children."* Vanessa

This denial of connection was a response to their own parents' experiences of poor mental health and the associated dominant narratives of intergenerational transmission of traits and poor parenting (Boursnell, 2014). Constructed differences could be challenged by the events and fluxes of participants' lives. The arrival or realisation of sameness was a threat to a carefully constructed oppositional identity; such a connection was expressed by Carrie-Anne as "*really distressing*".

The intergenerational understanding of mental health issues was reinforced in Carrie-Anne's first encounter with a locum psychiatrist, who said, minutes after meeting her:

*"Your mother has mental health problems; you're going to have mental health problems. For as long as you're not taking the medication you will always have problems."*

The construction of sameness between participant and parent could be problematic, but sameness focused on dysfunctions could be resisted or

overcome. This was important for identity development in the told stories, as it was a performance of difference in behaviour/response to situations. Sally's discursive performance helped to situate her own experiences within a family history of intergenerational sexual abuse but to construct difference, through her response: "*I was the one to break the cycle so to speak 'cause I spoke up.*" This reflexive reframing of dominant narratives, through the enactment of agency and thus the realisation of a counter-story, enabled participants to transform their embodied histories.

Biological notions of family could reinforce intergenerational understandings of the family. For example, Lauren recounted a medical assessment which highlighted to her the lack of knowledge she possessed about her biological father.

*"[H]e [doctor] kept asking me if there's any hereditary illnesses. Well nobody had ever asked me about hereditary illnesses before then and if they did me mum would've answered, do you know? And I had to fill in all these forms about on your maternal side, then about your paternal. I said, 'I can tell you about me stepdad.' And he kept going, 'That's not your paternal.' I thought, 'I don't know, I've got a whole side of my family I don't know anything about.'" Lauren*

Thus, Lauren's lived experience was undermined by the professional medical terminology of 'paternal' and the associated connotations of biological parenthood, which positioned her experiences as different. Here the social interaction demonstrates ruptures between actual knowledge and the normatively assumed knowledge. This is telling regarding Lauren's constructed relationship with her adopted father and the central role he had played in her life, which is marginalised by normative understandings of the family as biologically connected.

Some participants continued to wrestle emotionally throughout adulthood with their parents' absence. One way of constructing relational ties with absent parents was through identifying shared tastes and life events. Harry constructed sameness and understanding of his father by referring to their mutual like of "*a drink*"; Sally was the same age as her mam when she gave birth to her daughter, and described how "*it made me feel a connection to her from sharing something*". In this way, tenuous connectedness could be constructed through similarities.

As shown, family history was a way of accessing a sense of relational belonging; it could anchor participants' personal self-understandings. Primarily, by accessing

the past through oral family accounts or official records, participants were able to understand their own history and experiences, by “*piecing bits of jigsaw together*”. The positioning within the told stories of the narrator in opposition to or agreement with others was a key way through which participants were able to subvert, resist or realise these dominant narratives. Accessing family history through state care records is a form of Honneth’s legal respect. However, because of data protection laws, participants’ relatives’ legal recognition (to have their confidentiality protected) intersected with their own. Some families were reluctant to disclose information to participants about their family history. This prevented some participants’ ability to actualise their identity, which is indicative of emotional misrecognition. Over time, some families have disclosed what were regarded as secrets, as they threatened social and cultural community norms. Disclosure was perceived as threatening the social respect of a family and its constituent members.

### **7.3.2 Being a Parent: Reflexivity and the Search to Be a Better Parent**

Experiences of being a parent were gendered. Although most men spoke of being fathers, the space and time given to narrating this part of their life course was significantly less than that of the women participants. This reflects the culturally dominant narratives of different parental roles. In this section it is also related to how performing good parenting practices can edify participants’ moral worth and sense of identity.

A few of the female participants reported becoming mothers as teenagers. Only one woman explicitly discussed the choice of becoming a mother at 17 years old.

*“But Ty’s not planned, Ty’s ‘If it happened it happened.’ I knew what I was doing. I knew full well what I was doing. I wanted Tyrone, whether he was a girl or a boy doesn’t matter. I wanted Ty, I knew exactly what I was doing and his dad knew exactly what I was doing whether he was on the same or not. That’s appalling isn’t it? ... Yeah. Sounds really bad doesn’t it? I’ve done a lot of good things as well.”*  
Nicole

This contrasts with other research on teenage pregnancy that has empirically found that teenage mothers tell stories of accidental pregnancy (Neiterman, 2012; Harlow, 2009). One of the difficulties associated with teenage parenthood is the conceptions of them as uneducated and being welfare dependent (Neiterman,

2012). Yvonne reinforced these conceptions but then resisted them through demonstrating her bounded agency:

*“I marched into the job centre and demanded they did something with me, because I had baby brain and I just needed to be doing something else. So I started... New Deal for Lone Parents, it was. And I started a training course, doing business admin and I started working at one of the pubs in the village on the weekend.”*

By engaging with the dominant narrative of the unmotivated, welfare-dependent single teenage mother, Yvonne is able to construct a counter-story through the telling of an incident that demonstrates her agency and desire to be employable. Notably, those participants who became mothers as teenagers experienced complex transitions to adult independence. This could be seen as an example of how participants felt that their decisions might reflect negatively on their character, through social misrecognition, and was challenged in their story, e.g. by seeking employment. Being able to perform paid work and good, effective parenting within neo-liberal economies can be understood as a form of symbolic capital (Bourdieu, 1996; Neiterman, 2012; Austin and Carpenter, 2008).

The told stories of becoming a mother were marked as turning points that had emotional importance for participants. Vanessa said that *“having the kids has been the most amazing and significant”* thing she had done; Rachel described how she felt her *“life was complete”*; and Sally described how her daughter *“consumed”* her. Such positive, meaningful personal responses to motherhood were noted in Barn and Mantovani’s (2007) study of care experienced teen mothers. Motherhood for many of the women interviewed was used to negotiate identity, as they demonstrated discursively how they practised being a ‘good mother’. This was also reflexively linked to their own experiences of being parented and their non-normative family experiences:

*“I think you feel even more protective. I think when you’ve experienced the sort of, you know, childhood that I had as opposed to a regular upbringing.” Rachel*

This reflexive imperative to provide a qualitatively different experience of childhood was central in participants’ stories of parenting collected during fieldwork. Most participants were able to discursively differentiate their own parenting identity from their own parents’ practices:

*"I just knew I wanted to be the type of mum that I wanted myself so that's why I'm very affectionate with Alice, you know. I give her loads of cuddles, talk." Sally*

*"I don't want my children brought up the way I was brought up. I want them to be settled." Nicole*

*"So my kids have never been smacked. No, no I'm not going to put them through that, not putting them through that." Jack*

The realisation of being a 'good mum' involved an ongoing negotiation of other life factors, such as employment, health, education, sexual partners, biological fathers and the gender of participants' children. Women's approach to parenting interlinked with their own history, their family's history and often a fear of repeating the past. As Vanessa said, *"I was really concerned that I would be repeating some kind of cycle."* The fear of being unable to parent differently was also a feature in the narratives of women who were yet to have children:

*"he really wanted to get married and have kids, but I was so, so convinced that I wouldn't be able to manage being a wife and being a mam, so terrified that I would make the same mistakes as my mam that I just had to bolt in the opposite direction... I kind of sabotaged it because I really thought that I could really, really muck up in life if I was to have kids." Carrie-Anne*

Such reflexive approaches to mothering led to increased pressure on some of the women to control and manage their children's experiences. This became problematic for the maintenance of their constructed identity as their ability to perform 'good mothering' could be undermined by other factors such as work.

*"I've had periods in my life where I've been very poorly with depression and anxiety, and it's always about being a good parent I get terrified about not being a good parent, and not – everything's got to be perfect for my kids." Lauren*

Another factor influencing participants' ability to provide different parenting practices was relationship breakdown. Vanessa recalled the impact on her mental health caused by the dissonance between the experience she wanted to provide her children and what she was able to deliver.

*"I did have a complete meltdown, trying to manage the kids, really, and their emotional needs. Because I knew, you know, God, 'cause after what my childhood was like... I wanted it to be so different for them and it wasn't and I felt so guilty ... I wanted it to be, you know, perfect, and I had an idea in my head of, I wanted to parent as a couple. I wanted that togetherness, if you like, I wanted that family experience for my children, everything that I didn't have I wanted for my children." Vanessa*

The responsabilisation women experienced because they offered their children a different childhood indicates an individualisation of balancing work and personal life, even when parenting as a couple.

*“[S]o if they got ill [I thought] is that my fault because I’ve not given them the right diet?” Lauren*

The individualisation of mothering and the responsabilisation of mothers for children’s outcomes veils eternal barriers to achieving intended parenting practices; such maternal responsabilisation and risk management techniques were able to mask the wider contexts in which mothering occurred. It could be said that although participants felt that their adverse childhood experiences motivated them to do motherhood differently, there were parallels with wider cultural ideas that women ‘can have it all’. Participants’ mothering aspirations were rarely told to have been influenced by wider social forces. However, the intense expectations noted in participants’ accounts are similar to those noted in other research (Guendouzi, 2006; Christopher, 2012). These intensified practices and expectations of some participants’ self as mother of controlling and cultivating their children’s childhoods resulted in participants putting vast amounts of pressure on themselves. Perhaps such individualised, reflexive parenting accounts also embody wider neo-liberal parenting ideas. Thus, through the internalisation of wider neo-liberal norms and values, participants could be seen to position themselves as problematic during challenging times. The symbolic violence of not fulfilling the contemporary, neo-liberal doxa of childrearing could result in tensions surfacing as psychological difficulties. The connotations of this, then, are that participants misrecognised the wider social forces shaping their mothering practices.

Through demonstrating subversion of the dominant narratives of intergenerational transmission, participants were able to reconstruct their identity reflexively, thus countering professional and cultural beliefs about the intergenerational transmission of mental health issues and/or maladaptive parenting practices.

When there was deviation from cultural norms of good parenting practice, participants managed this in their stories. In the few instances that revealed some reproduction of experiences, e.g. an absent father or a child in care, participants drew on evidence that rationalised these factors as in the best interests of their children. Constructing these experiences as reproduction veils the wider context of their lived life (e.g. unsociable working hours) and the effect of embodied histories. More importantly, it may allude to a perceived threat to their identity that must be managed (Nelson, 2001; Riessman, 2008).

### 7.3.3 Family (and Identity) Negotiation

Across the life course, participants spoke of how their relationships with birth family had changed over time. Strikingly, kinship practice played an important role within the told stories in influencing whom they thought of as family and how they negotiated relationships with their birth parents.

As a result of accessing family history and the reflexive reframing of their childhood experiences, participants were able to construct more fluid forms of family that went beyond biological relationships and to differentially frame their parents' experiences. These ranged from legal adoption to continuing a relationship with a mother's ex-partner to the construction of family through state foster care. Family was constructed most often through the enactment of practices that recognised both the emotional and the practical needs of participants. These relationships that over time emerged as family relationships were rooted in reciprocal practices of support.

In these negotiations of family, a sense of belonging could be constructed through a shared history, valued experiences and kinship practices: family ties. Recurrent in all of these accounts is the extent to which these relationships were supportive and were a source of practical or emotional support:

*"the third husband of my mam's, he's one of the most significant people in my family now. He's my stepdad but I regard him as my dad. He's been in my life ... 26 year or something now. A long time, you know? I was 8, 9 year old when my mam got with him... he's quite special as well, my dad, he really, really is, but yeah, he's the one who's always been there for us. When I came back from abroad if it wasn't for him I wouldn't've had anywhere to live." Carrie-Anne*

New family configurations also emerged across the life course as participants entered into long-term relationships with partners. Often the men described how there was a distinct closeness between their wives and in-laws that challenged their previous experiences of family.

*"Uncomfortably close I find sometimes. I've got used to it. 'Cause it's all-encompassing... But you put up with it and it – it's worth putting up with, you know, so, and that's something I never had seen, none of that, with that closeness." Jack*

These accounts illustrate how reflexive understandings of the past enabled participants to understand how their past affects their current experiences of family. Crucially, this demonstrates something about the construction of an identity

of belonging. Simultaneously, the unfamiliarity of these family experiences reproduced a sense of difference in their belonging.

Some participants were in touch with at least one of their birth parents at the time of interview. Such narratives frequently used discursive strategies to come to a rationalised understanding of a parent's difficulties, often attributing their parents' poor parenting practices to their upbringing.

*"[W]ith my mum, I feel for her 'cause hers is through no fault of her own, whatsoever of her own and like, you know, I do feel sad for her 'cause she did have a horrendous childhood as well like, I know, and, she was basically scapegoated totally by her mum, you know? Like, horrendous abuse by her mum and I think obviously when her dad died that was like a mega effect 'cause he was the main person in her life type of thing. But no, like I said with my mum I've got more sort of compassion and empathy for my mum whereas my dad I just think 'You're a selfish shit.'" Rachel*

Through reflexive understanding and observing parental change, some participants spoke of how they were able to 'fix' aspects of relationships that had been impaired in the past.

*"[N]ow he just kind of – my kids, he can sit and watch the football and my kids will skate through and he doesn't flicker. If we were kids we would've been smacked for it... Which shows the change that he made. And it was kind of after that I was kind of, 'Well, do you know, the things that happened to me happened to me, didn't happen to my kids. And they have a granddad'... You cannot hold past grudges, you cannot hold your past, otherwise it just makes me sad if I was to hold it in and you know? Say, 'Well you did that!', then that upsets my kids and it upsets me. So I'm not going to do that to my family." Nicole*

It is evident that even established non-normative family dynamics could be threatened by family history and social norms. Some non-normative family configurations were purposely veiled because of a perceived threat to perceptions of 'real' family.

*"I said, 'Look, girls, I need to talk to you about something.' I said, 'I'm not sure whether you know, but do you know granddad's not my dad?' Said, 'He is, you know, he's – grandma was married before.' And they went, 'No.' Said, 'Yeah, she is, she's been married before.' And I explained to them what had happened before, my dad had been killed in a car accident (they didn't need to know any more details than that, didn't think it was fair) 'and then she met granddad and they got married again, had auntie Lizzie'. And they both just went, 'God, that really explains things though doesn't it? 'Cause you look nothing like him' ... The complete non-event after I'd spent years thinking, 'How will I ever tell the kids?'" Lauren*

In contrast to these experiences are those who were unable to develop positive parental adult-child relationships that endured into their adult lives. Marginalisation



from family practices and support in adulthood emerged in participants' comparisons with other families, and they subsequently felt a sense of loss and difference from not being able to access the same experiences:

*"I hear people talk about theirs all the time at uni and they're going home... it's not jealous, it's not that, it's just – I'd love to know what it feels like even just for a week or for months ... there's a good percentage which do love their kids and raise them and I just want to know what it's like. I just wanna feel it, just for like a little bit. So then it might give me some self-worth." Sally*

These excerpts highlight how symbolic exclusion from normative family relationships can require ongoing emotional negotiation for those who are unable to access them. It also shows how this negatively affects a person's identity by reducing their sense of self-worth.

Some participants spoke of how they have actively sought disconnection from particular family members. These accounts were described as a 'choice' which attempted to limit family members' involvement in their life because of the threat they posed to participants' negotiated identity.

*"So I just sort of think it's really sad, but sometimes you've got to detach yourself from that, you know, as well, 'cause otherwise you're running the risk of getting pulled down." Rachel*

These narratives subvert social and political expectations of intergenerational familial care, and, as Vanessa said, "[I]t may seem awful to other people" to suggest that master narratives of family disguise the real potential for harm within family relationships and that there is a need to manage this impact.

*"[S]he'd [mam] had some sort of Section placed over her. She needed those Guardianships, because she was deemed not to be able to make decisions for herself... I decided soon after that I really couldn't, you know, pick up that role of guardian, because mentally and emotionally it was really heavy."*

Carrie-Anne's experience demonstrates that the expectation embedded within policy of intergenerational family care, advocacy and support is problematic for some. The doxa discernible in some participants' narratives about the importance of family relationships could be said to legitimate their experience of symbolic violence, such as the internal pain they spoke about regarding the absence of real family. For some this was subjectively experienced as devaluing their identity. But participants who chose to stop contact with birth family disrupted the doxa of family as enduring and important. This account allows participants to conceptually challenge understandings or offer alternative ones. Even during adulthood the

grief and emotional hole left by their affective family ties remained. This produces a critique, then, of the normative claim for justice. According to Honneth, normative expectations, and their transgression, indicate injustice; but in doing so this only serves to reinforce the hegemony of normative family relationships and how this marginalises those who are unable to, or choose not to, maintain these.

Participants were not as free to construct identity as they may have wanted to be. For some of the women, negotiating family and identity in adulthood also intersected with the continuation of relationships with their abusive ex-partners who were the fathers of their children. The rights of the children of these women and the children's needs for affective ties with birth relatives trumped their own needs. This was the case even when these relationships continued to negatively affect participants' sense of self through constant criticism and the undermining of their relationships with their children. By trying to respect their children's needs and rights, participants deprioritised their own needs to gain interpersonal recognition. In these relationships, the onus of maintaining contact is described as wanting the best for their children and providing them with a family that includes aunts, uncles and grandparents. This could be seen to indicate the practical power of the doxa of families and participants' awareness of the experiential, symbolic, social and emotional resources 'family' can bring; participants themselves had often been unable to access these. This shows the way in which for some participants idealised notions of family and their access to it shaped their agency. Doxa is also practical, and for Sally, Yvonne and Nicole, maintaining links between their children and their families was done for the children, even if this meant that ongoing contact with abusive or difficult family members affected their own identity. Meanwhile, some participants were active in dissociating themselves from some blood family relationships. This was a way of managing threats to their adult identity. But as others commented, this is not understood within dominant narratives of the family, where relationships endure throughout the life course, embedded in the adage 'blood is thicker than water'. Adulthood enabled this process of disassociation as there was less structural dependency on the family. For participants who were categorised as statutory care leavers, leaving care for adult independence meant that they could reject contact with birth family. The Children Act 1989 made the maintenance of birth family relationships a duty for

professionals (Parton, 1991; Hayden, 1999). For some participants, renegotiating family through legal ties of marriage and practices of support was difficult as this was juxtaposed with their previous experiences of family. This led to ambivalent feelings about reciprocal support and care in the family. This is in part a result of participants' embodied histories; the affected part of their internal landscape and Bourdieu's concept of *habitus clivé* is important to an understanding of this ambivalence.

#### **7.4 Discussion**

Data in this chapter has shown how participants' identities were shaped by their state care experiences during adulthood, and by other experiences that were differently drawn on in the interviews to negotiate and co-construct their narrative identity. These included social categories such as work, class, community, personal history and social roles. This chapter now returns to the theoretical work and the exploration of how these could be used to make sense of how social forces can intersect to affect individual identity negotiation.

It was demonstrated that there were different narratives about the transition to independence. Crucially, the family and state care backgrounds of the majority of participants intersected with their decisions about, opportunities for and experiences of financial independence. Clearly, some participants were able to frame this transitional period as opening up opportunities for them to negotiate their identities. Arguably, participants' accounts demonstrate how their agency was bounded. This chapter has shown that this was often based on class, geography and care-leaver status. These identities shaped their transitions as they frequently curtailed access to financial and social resources. These are important for enabling the development of a positive social identity and for providing resources to help deal with the daily ebb and flow of life. This can be understood theoretically as it is indicative of Honneth's social disrespect, where a social group's opportunities are structured by their group characteristics, which denigrate their social worth and bounded opportunities for self-actualisation. The structured aspect of these transitions related to class, but care-leaver and geographical identities were present in the stories told. As there is little evidence of consistent awareness of the wider social processes that shaped individual participants' life

experiences, this could be seen to indicate Bourdieu's conceptualisation of misrecognition.

Moreover, it has been shown how for some participants the dominant narrative of children in care as victims or delinquents continues to shape some of their interactions. Evidently, when encountering these expectations, many participants used them to negotiate identities of being differentiated from others, but they could challenge these too through their decisions. The negative connotations of the terms child in care and non-normative family were a threat to their professional working roles, contributing to the production of shame and thus the silencing of their life experiences. There were differential abilities to manage the effects of these, and such management was predicated on the extent to which participants had been able to construct countering identities. Those with less support emotionally, financially and symbolically told more affective stories of the ways in which their identities were more tenuous. Bourdieu's theory offers a more useful framework, in comparison to Honneth, for exploring these differential identity experiences. A number of intersecting social forces such as social class, occupational status, poverty and other non-normative family experiences (inter alia social class, adoption, step-parenting, poverty) aside from state care were seen to have been factors to be negotiated in participants' narratives of their lives.

Whilst exploring the ways in which participants spoke about work, employment and adult education, a range of potential effects on identity were evident. Both negative and positive identity negotiation were apparent as a product of interpersonal communication. This supports Honneth's conceptualisation of the human agent whose identity is developed and defined relationally (Honneth, 1996, 2007). Through Honneth's paradigm, the opportunities which arose for positive identity development were linked with encounters which demonstrated, most often, social respect. However, it was also clear that there were limits to the effectiveness of these for their self-actualisation for some people. In many ways social respect did have a positive effect on a person's perception of their value socially, but this did not completely ameliorate previous influences of emotional disrespect.

In the intimate space of family identity, negotiation continued through participants' adulthoods. This has been evidenced through participants' reflexive reframing of who was considered family, and how they practised these relationships. Central to the production of a coherent story of participants' identity was family history. The ability to produce this was affected by participants' differing ability to access their state care records and oral family history. For participants able to access their family history, as other research has highlighted, it was a resource for understanding their identity (Horrocks and Goddard, 2006; Holland and Crowley, 2013). However, this process was fraught for participants as often their access to the information they sought was censored or not forthcoming. This again reiterates the interrelational nature of participants' life course and identity negotiation. For many participants, what made family in adulthood were the shared memories, reciprocal caring practices and the affective ties that were performed. This meant that some people were able to reconstruct their notion of family beyond the biological norm. Moreover, these renegotiated relationships were a source of support during times of illness, major life change and unemployment, and when they were bringing up their children. But they also bounded participants' agency, as they wanted to stay close to (emotionally and geographically) and receive support from their family. Positive encounters were often based on shared events and practices of significance; in this way, achievement was relationally produced.

This chapter, and the previous two, have explored the lived experiences of participants across the life course and discussed how this has shaped participants' identities. One key question that has emerged from the theoretical discussions is which of the two theoretical stances that can be applied is the most useful for analysing the social forces within the stories told? The next chapter turns to specifically address the research questions posed.

## **Chapter 8. What's the Story? A Discussion of the Research Questions**

This chapter draws together the research findings and the theoretical discussions to address each research question in turn.

### **8.1 In What Ways Are the Representations of Children in Care Realised and Negotiated in Participants' Narratives?**

To address this question, certain aspects of this thesis need to be focused on. Of particular interest is the binary of CiC as victims or delinquents and the problematising of maladaptive behaviours.

#### **8.1.1 Questioning 'Victims and Villains'**

The ascribed identity of the looked-after-child status has been shown to intersect with victim and villain representations historically embedded within culture. These dominant representations were used, differently, by participants to narrate their life story and (re)negotiate their identity. Identities were not always chosen, and participants' ascribed identities were shaped by how other people interacted with them. Bourdieu's symbolic power of the state was captured in the process of becoming and being a child-in-care. The symbolic violence emerging from this status was associated with negative expectations. These representations could be deployed in interactions with other, more powerful, people. At times these interactions reinforced participants' identity as different. Participants told stories that often undermined the validity and usefulness of the dominant representations of children in care. Many participants spoke about how this misrepresentation affected their encounters with peers and adults during childhood. At times this made it more difficult for young people to settle into a new school and make friends. This resonates with participants' argument that once you've been in care "*you get labelled*". The findings show that these representations were reinforced in some social contexts even after participants left state care. This was particularly acute during adulthood for participants who were working in social care professions. The emotional disrespect experienced by participants in their early

lives indicates that Honneth's concept is in some way fitting. However, the determinism of the psychological aspect of this and the way in which it is predictive of participants' inability to respect other people is challenged by the data. First, many participants spoke of having emotional ties with and respect for other children during their childhood. Second, in adulthood the ability to care for their own children and other people through work was often a feature of participants' employment fields.

Whilst the narratives of participants' early years did resonate with the conceptualisation of them as victims of life experiences, it is clear that through their resourcefulness they traversed the definition of being passive and helpless (Spalek, 2006; Leisenrig, 2006). Dominant narratives of healthy child development and harm (Plummer, 2002; Lee, 2001; Woodiwiss, 2009; Fűredi, 2004; Moulding, 2015) seem to have influenced how participants negotiated their identity narratively. Psychological understandings of the negative effects of difficult experiences were useful for participants. But ideas such as child development are, arguably, indicative of Bourdieu's doxa, a key mechanism in the reproduction of misrecognition. However, this disregards the narrative function of harm narratives and the need for talking therapies, which were, when based on a constructive therapeutic relationship, described by participants as helpful. Fűredi proposes that therapy is one way of shifting interpersonal difficulties firmly back into the private sphere and away from critiques suggesting that they have social causes (2004). Some participants were able to place their life experiences within a collective of working-class culture. Thus, recognition of the social causes of negative emotions is a possibility. However, Fűredi (2004) fails to acknowledge the knotty problem of the positive effect of therapeutic relationships in dealing with oppressive experiences constituting victimhood. Perhaps the relationship itself is a resource through which emotional respect can be produced.

It was clear that some participants used this knowledge to frame how their adult self was affected by their childhood experiences. Victim-labelling and the framing of participants' maladaptive behaviours as symptomatic of abuse and maltreatment at times denied them a different perspective of themselves. This perspective, when recognising the structural dependency and bounded agency of

children, acknowledges the resourcefulness and relative functionality of these behaviours. Participants showed how they had been resourceful; many of them spoke about finding ways to act that reduced the likelihood of continued abuse, or finding strategies for managing threats to their physical, sexual and emotional integrity. This challenges the conception of children as passive in response to the world around them. Dominant representations masked the way in which participants adapted and sought to manage the maltreatment they experienced as children. Participants' narratives, wider culture and research do not tend to recognise this overtly as their resourcefulness in dealing with challenging difficulties. This exclusion instead shows a tendency to pathologise such behaviours as indicative of the damaged or delinquent self; this is indicative of Bourdieu's symbolic violence (Skeggs, 2004).

### **8.1.2 Negotiating Deficit Identities**

In addition to the victim and villain representations, dominant narratives of child development can be seen to intersect with the meanings attached to being care experienced. Earlier in this thesis it was argued that some research continues to reproduce deficit representations of care leavers. Poor educational attainment, lack of resilience, placement moves and a lack of support networks are often linked to care leavers' poor outcomes, which include, inter alia, homelessness, substance misuse, criminality and becoming teenage parents. Additionally, Stein's (2006) typology of statutory care leavers was questioned. The discussion here focuses on the way these deficit representations have been realised and negotiated.

In a minority of stories, foster carers repeated the negative expectations of CiC aloud to participants, predicting teenage pregnancy and low educational achievement. This suggests that participants became aware of the dominant narratives associated with their CiC identity through their carers. Such experiences may well form a part of a participant's embodied habitus. But the dominant narratives do not necessitate their realisation within a person's biography. Such interactions, which differentiated an individual participant from the wider CiC population, could reinforce generalised low expectations of CiC. This was evident when the opposite happened and social workers or foster carers had high



expectations of participants as young people. This may have been useful for participants with regard to raising their personal aspirations and bestowing some emotional recognition.

In contrast to what is shown in research, the effect upon education of moving placement was rarely narrated as causal. Placement moves were associated with a change in schools, friends and routine. Disengagement from education at the age of 16 was frequent in this sample, but so too was returning to FE and HE as adults. Half of the participants resumed their education later on in their life course. There was an instrumentality to these decisions for them. Moreover, whilst educational attainment at age 15/16 has been seen as indicative of future employment prospects, the inference that without this care leavers will remain unemployed and are “*destined for the dole queue*” was subverted in all of the stories collected.

Some might suggest that participants who became mothers as teenagers signify the realisation of the representations of people who are care experienced. However, this denies the significance of teenage parenthood for participants in this study, and that this may overlap with the experiences of other teenage mothers; teenage mother is an additional putative identity (Kortewe, 2003). Their stories challenged the representations of the welfare-dependent teenage mother noting how they chose to be engaged in training programmes and/or employment. Those who became mothers as teenagers were able to reflexively consider this experience as, in part, being a teenage mother is an additional putative identity a consequence of the inadequate support given by social workers and family members during the transition to adulthood. In this way, participants were able to demonstrate agency and the functionality of their choices within the context of their life story. The instrumentalism of mother–child relationships for negotiating identities was not described as different from that of participants who became mothers later on.

These shared experiences and individual interpretations provided participants with experiences through which they could begin to construct a counter-narrative of what it means to be an adult who experienced care.

The existence of systemic careism that Lindsay (2010) identifies and stigmatising practices (Stein, 2006) in the delivery of children's services for CiC is supported by this research. It is clear that most participants experienced a number of placements in residential and/or foster care over which they rarely had control. One way in which participants negotiated this oppressive practice was by rationalising it, either through an awareness of a lack of suitable resources, thus limiting the efficacy of children's services' practice, or through accounts of their own immaturity. Dominant narratives of care, such as being bad, damaged or at risk of poor outcomes, were sometimes reinforced in interpersonal interactions. These could be with social workers, teachers or professionals, or with friends, colleagues or the community. This positioning was reinforced in some participants' narratives as they described how, when disclosing maltreatment in care, they were the ones who were moved, or disbelieved, and they spoke of how little agency they had in regard to this. Such stories communicate a feeling of injustice and disrespect (Honneth, 1997). Both of these feelings also resonate with Bourdieu's doxa and the experience of being dominated through symbolic power and symbolic violence.

This research reveals that resistance was being enacted in the stereotypes of deviant or damaged young people. Running away, emotional distancing or flouting rules were ways through which participants performed resistance to the lack of control they had whilst in state care, such as deciding who they had contact with or where they lived. These strategies reiterate children's relative powerlessness, but demonstrate participants' tenacity and active resistance to adult decision-making.

In addition to discussions in the literature about deficit understandings of children in care, there is also consideration of the way in which the protection and care of children in need has been historically motivated in part through a recognition that such children will one day be a part of the country's workforce (Sheppard, 1995; Garrett, 1999). Periods of unemployment and state dependence were rare in the told stories; where present they were time limited and followed by re-employment.

Resilience is the other concept identified in the literature as a factor for understanding the management and overcoming of adversity. This understanding of the life course was never mentioned in the interviews. Resilience is also

problematic as participants who might be considered comparatively less successful and thus less resilient were also those who spoke of mental health difficulties and a lack of sources of financial and emotional support. Many participants who had been rejected by their family and/or experienced maltreatment during their childhood spoke of how these often affected them at an individual cognitive level. Arguably, the long-standing nature of this emotional pain indicates not so much an overcoming of adversity but a way of being able to manage and live with that pain. Moreover, the conceptualisation of overcoming adversity fails to acknowledge how life events become internalised as apart of participants' embodied histories.

This section briefly explores Stein's typology of statutory care leavers as moving on, survivors or victims in relation to the findings of this research (Stein, 2006a, 2006b). The most well-adapted care leavers are described as those who are 'moving on', which is marked by normalising identity, employment or training and more staggered transitions to independence. This was certainly the case with Richard; however, this research suggests that many participants, through the development of relationships with peers and adults outside the family and state care, developed opportunities to be recognised. Victim care leavers, and their transitions to adulthood, are marked, according to Stein (2006a, p.277), by homelessness, loneliness, isolation, emotional difficulties and poor family relationships. These markers, compared to those in the narratives of transitions to adulthood, intersect somewhat with the experiences of those with the most challenging contexts when leaving care. But in exploring the saliency of these labels for the participants in this research, it is clear that many participants' experiences of family, state care and transitions could not be so easily categorised as they often exhibited features of more than one typology. The support identified by Stein in these categories refers mostly to emotional and social support as an ameliorative factor (2006a). There is no recognition of the financial difficulties some participants experienced when making the transition to independence. Nor does Stein (2006a) account for how access to these resources can change across the life course. Thus, this research suggests that the temporally static, generalising nature of these labels is unsound.

Where representations of care leavers were realised, the told stories revealed that often a lack of support to alleviate financial challenges intersected with having insufficient support regarding emotional challenges. The way in which participants adapted to these circumstances, particularly as young care leavers living independently, often meant putting their housing at risk, becoming a teenage parent, disengaging from education and using drugs. Although these suggest the realisation of some of the representations of care leavers, the interpretations and stories participants reported demonstrate the way in which these intersected with the limited emotional, practical and support available. This highlights how these representations can reinforce the position of being dominated. These narratives in contemporary society, as noted earlier, often individualise group experiences, and thus they can play a role in problematising the self. The construction and negotiation of a problematised identity constructed through state care was not homogeneous. Indeed problematised identities constructed in participants' narratives often intersected with other dominant narratives related to intergenerational transmission of behaviours or vulnerabilities, normative child development, social class, family as social identity and the loss of a primary care giver whilst very young.

### **8.1.3 Discursive and Material Realisations: A Case of Misrecognition**

Deficit understandings deprive young people in care of a more positive future orientation, and this pessimism is reified in policies relating to moving some of the most vulnerable young people in society into adult independence comparatively earlier than their peers. Whilst the findings have shown the presence of some of these deficit understandings, the missing context of these negates participants' experiences and their bounded agency. This study supports other research that has highlighted how the positioning of CiC can produce a problematic identity that is effectively devalued by others and the self (Lindsay, 2010; Who Cares? Trust, no date; Stein, 2006a; Coy, 2008).

To understand this theoretically, Honneth's social disrespect could be applied to individual experiences, but it does not enable a collective understanding of the systematic careism identified. Instead, applying Bourdieu's concepts of symbolic violence and structural violence is more apt to understand these shared

experiences. Symbolic violence enables understandings of how deficit representations are embodied through policies, and the lack of sufficient funding and provision of services that have negatively affected participants' is indicative of structural violence (Bourdieu and Passeron, 1990; Eagleton and Bourdieu, 1991; Bourdieu, 1999). The stories of complex transitions that were previously explained and analysed using Bourdieu's theoretical framework also demonstrated the way in which policy can act to produce representations of CiC. It is clear that systems and policies for placing young adults contributed to the reproduction of the dominant narratives. This was epitomised by Yvonne's story, in which a number of circumstances at work and in her study and home life intersected throughout her adult life, affecting her ability to achieve her goals. A lack of access to financial resources and appropriate emotional support led her to be more dependent on other people; she had to share private rented accommodation and faced subsequent eviction because her flatmates were not paying their way, leading her to choose unhealthy relationships. Throughout her adult life, her story brought together numerous challenges, including, *inter alia*, a lack of financial resources continually undermined by low pay, precarious work, managing childcare, domestic violence and difficult relationships. Rather than being indicative of someone being a helpless victim, this demonstrates that without access to resources, agency is bounded; this is symbolic violence.

The concept of embodied history particularly resonated in relation to understanding how the representations are realised in participants' accounts because it suggested sources of experience through which participants could interpret and predict the world around them. Crucially, these can be altered or managed through other life experiences and reflexivity. This is known as habitus transformation, or *cleft*, in which there are ambivalences (Bourdieu, 2007). This indicates the theoretical possibility of a changed self, dispositions and identity. Perhaps changes to the fields in which young people live when leaving home, entering care and engaging in new family relationships enable the development of more normatively accepted behaviours and practices, which became inculcated in their embodied history. Thus, embodied history is a useful concept for understanding how competing identities and a sense of self arise, creating ambivalences in the participants' accounts of the effect their experiences have had

on their lives. Positive experiences do not extinguish the embodiment of previously negative life events; rather, they provide an internal resource for a more positive orientation. Although experiences of these representations, when they do not harmonise with participants' sense of self, are experienced as social disrespect, this is often realised through the positioning of themselves as different. But Honneth's work gives us little insight into how the affective dimensions of such experiences across the life course can accumulate.

## **8.2 How Do Care Leavers Construct an Identity of Belonging and Difference across the Life Course?**

This research demonstrates that participants' identities of belonging and difference are relationally shaped and that their diverse experiences are represented in the varied stories they tell of themselves. It is evident from the data that subjective meanings and social identities have been dynamic and have altered across the life course. It is important to notice the way in which identities were not passively received but negotiated narratively through drawing on life experiences and relationships: hence identities could be resisted as well as constructed. Most participants have co-constructed and negotiated an identity of difference through their stories of family, abuse and state care during childhood. Spaces that provided opportunities for identity negotiation across the life course ranged from state spaces for education and substitute care to geographical communities, the workplace and the family. The relational nature of the construction of identities of belonging and difference by participants in this study was diverse. To construct identities of belonging and difference, participants often had to negotiate three overlapping dominant narratives: the primacy and healthiness of birth family relationships; understandings of child development which argue that what constitutes an unhealthy childhood is a risk to a person's future (Plummer, 2002; Furedi, 2004; Hendricks, 1997; Lee, 2001; Jenks, 2005); and deficit conceptions of children in state care.

### **8.2.1 Family across the Life Course**

Participants often began their life stories by contextualising their entry into state care. Many highlighted the low socio-economic status of their mothers and/or

family, but this was not used as a mediating factor in most participants' subsequent entry into state care. How gender norms may have shaped expectations of parenthood, particularly being a mother, was discussed. Participants' narratives of their mothers often problematised them for not providing the expected level of care, even when other factors intersected. This suggests that mental illness, poverty, domestic violence and substance misuse were understood as being indicative of individual failings. Often these led participants to individualised understandings of their life courses that problematised the self and family. Only a few participants resisted individualised understandings by situating their experiences within wider society: inter alia, physical abuse, transitions into employment, and secrecy and shame around taboo topics all intersected with wider community values and norms.

Feeling different in a family was constructed through experiences of differential treatment. In many ways this shows that children were active in interpreting the world around them and shows how household practices had the symbolic power to emotionally and practically exclude, or include, some participants. Such experiences and events effectively shaped participants' identities as they interpreted these encounters as indicative of their difference. These can be understood conceptually as both Bourdieu's symbolic violence and Honneth's emotional disrespect. The emotional significance of these experiences is captured by Honneth's concept of disrespect, which Bourdieu's tools of misrecognition, doxa, symbolic power and violence do not capture.

Identities of family belonging were constructed in an ongoing manner, individually negotiated and at times enforced. Some participants had been able to construct a sense of belonging to a family with older adults (parents, carers, and step-parents). These were realised in participants' adult lives through an ongoing relational commitment to them and often resulted in practical and emotional family support. The additional resources available contrast with other participants' lack of such support. Framing this as emotional respect, Honneth conceptualises how these relationships could be ameliorative. Identities of belonging could be problematic for participants' individual identity negotiation when they intersected with deficit master narratives. Of pertinence to the latter were ideas about

intergenerational transmission of maladaptive behaviours, cycles of abuse and genetically inherited characteristics that might make someone more likely to engage in substance misuse or to have mental health problems. At times professionals reinforced these ideas. Some participants also spoke about how they resisted a sense of belonging to their birth mother, or family. Here identity negotiation often involved rejecting the behavioural practices and influences of biological relatives, which were seen as a threat to their continued well-being.

Many participants narratively positioned themselves as 'different' by evaluating how they were not the same as some family members. Such reflexivity demonstrates how in late modernity the life course and family practices are negotiated. Moreover, it demonstrates the reflexive agency of participants, illustrating a more optimistic perspective of adults with care experience. Arguably, this indicates agency and a critique of intergenerational transmission (Casey, 2012). The ability to enact agency was often bounded by geography, class, employment and social networks. Participants recalled times in their life when they had been unable to control their environment and how this undermined their personal and physical security; the identity dissonance produced here could lead to mental health crises.

The social dimension of family also provided a means for understanding this need for distancing in which family members' deviant actions are interpreted as threatening a participant's social identity. Both participants and members of their families showed how secrecy was important in negotiating identity and maintaining a sense of moral worth where deviant family living arrangements, behaviours and histories were concealed. Such family experiences indicate a lack of symbolic capital. Although some critiques of Honneth have addressed the importance of relationships for social differentiation, he has asserted that economic inequalities are a result of relationships of disrespect. This reinforces his view that the family is in a private sphere, but this is unable to help us unpick how emotional disrespect in families results in the comparative under resourcing of some adults with care experience across their lives. Bourdieu acknowledges that families are differentially able and willing to offer economic and social capital to their members. This normative expectation is socially constructed and political (Bourdieu, 1996) in



that resources are stratified in society in a way that rewards normative families with symbolic, economic, cultural and social resources.

Family history was a way of both connecting and developing the identities of adults who are care experienced. Access to personal and family history was gained through oral storytelling and official care records. Although accessing such information helped participants to understand their own histories by piecing bits of the jigsaw together, the experience of unearthing family secrets was also threatening and/or difficult. The search for belonging through family history was particularly difficult for those who were unable to access it via archival material or informal conversations with extended kin; some care records were missing. Moreover, the way in which official records were censored, unavailable or written led to the obscuring of information perceived to be important for understanding their identities. Negotiation of identities of belonging through ancestral links is not limited to care leavers; it is now a common feature of how people make sense of who they are in an increasingly insecure world (Hauskeller et al., 2013; Bottero, 2015). Where family absence in adulthood continued to be a source of emotional pain for participants, many imagined connections with their family and shared likes, dislikes and life events. These were ways through which they could construct ambivalent identities of belonging and difference with respect to birth family.

The relational dynamism of identities of belonging was evident in accounts of the construction of family outside definitions of the 'traditional' nuclear family. Some participants' stories support the argument that family is something which is performed: the doing of 'family' (Morgan, 2011; Gillies, 2011) was integral for the negotiation of a sense of belonging (McKie and Lombard, 2005). One aspect of constructing family belonging seen in the data collected was the accrual of shared memories and traditions that were interpreted as indicative of affective ties, thus enabling the narrative work needed to create a sense of belonging. Moreover, parent-child relationships, which had been troublesome for participants as children, could change over time. Honneth's emotional and social disrespect captures the affective dimension of these experiences, but provides little theorisation of the processes which produce and legitimate them. Bourdieu's concept of symbolic violence offers a more coherent consideration, providing

theoretical insight into how unequal power relationships are central to the construction of identities of belonging or difference through family history. Participants thus constructed an identity of difference, as they interpreted such absence of information about their lives to be indicative of their dependency on state and third sector organisations to narrate their childhoods.

It is evident that participants were not passive in constructing their identities, as they could react to, and resist, the (negative) expectations placed upon them because of their family origins or looked-after-child status. It is useful here to return to dominant narratives as providing resources for identifying societal influences on biographical storytelling. Clearly, though, such outcomes were achieved over time and should not debase the suffering participants experienced during their life course.<sup>9</sup>

### **8.2.2 State Care and Identity across the Life Course**

Spaces of state care (foster, residential and kinship placements) were primarily experienced as indicative of participants' identity of difference where their self and social identities were focused on their being deficit, damaged, troubled young people. The evidence shows that this was often reinforced by the ways in which some participants were positioned in interactions between adult carers, parents and/or professionals, and also in school and adult employment. The construction of an identity of a 'looked after' child was rarely instigated by young people themselves, and as seen in the data, it was experienced initially as an event over which they had little, or no, control. Sometimes the entry into care disrupted relationships between participants and their families; such exclusionary experiences would have reinforced an identity of difference too.

As previously discussed, the state constructs the ascribed identity of being a child in care. The label 'looked after child' alone suggests a reductionist approach to

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<sup>9</sup> What emerges from the data is that the additional challenges participants experienced in adult life were not always associated with being care experienced; rather, issues of divorce, parental illness, domestic violence and troubling social networks continued to be negotiated during adulthood. Many of these experiences could be considered to be common but were frequently understood by participants to be related to their experiences of non-normative, difficult, family relationships.

young people which indicates that they lack certain material or emotional resources (Warham, 2011; Renold, 2010). In relation to the participants, the state's intervention was also related to dominant understandings of what constitutes healthy experiences of child development and the way in which participants were at risk of poor outcomes without intervention. Participants' experiences of childhood and family were therefore situated outside the norm and perceived as threats.

An identity of difference was often relationally co-constructed in state care through interpersonal encounters. Most often there was a differentiation of children in care's outcomes compared to other young people's, especially regarding not achieving academically and predictions of teenage pregnancy. Some participants actively resisted such expectations. This also enabled them to differentiate themselves from other children in care or care leavers. Through such counter-stories, participants were able to negotiate an identity of difference from other care leavers and edify their moral worth through demonstrating agency. The role of the state in constructing an identity of difference previously discussed using the theoretical perspectives also enables an understanding of how an ascribed identity can be simultaneously constructed, negotiated and resisted. Resisting a label and certain conditions could be performed through oppositional behaviour, unapproved family contact and running away from difficult living arrangements. Instances such as these were related to the narrative construction of a difference between the self and others living in the home.

Over half of the participants spoke about experiences of maltreatment, abuse and relational exclusion during their time in state care; these were added to previous difficult life experiences. The way in which such experiences can be understood to relate to identity negotiation is through the othering of who participants are, because the treatment they received from carers and other young people in the same accommodation as themselves was interpreted as indicating their lack of individual worth. Difference in identity was produced here through these experiences, where the rationale for understanding why they were targeted by other young people, carers or carers' relatives centred more on participants' vulnerability, not the systematic way in which many participants experienced being

placed at risk. This dark side of substitute family care has become a part of many participants' embodied histories. Moreover, the responses of adults to these difficult experiences did not always indicate that participants were believed. Indeed maltreatment in care was not always interpreted as such by social workers; this was particularly apparent in the experiences of teenage girls at risk of physical and sexual abuse. These examples of maltreatment in care are indicative of social, emotional and legal disrespect. State care for many was a place where they experienced re-victimisation; parenting that was not 'good enough' was provided but contributed to the further embodiment of difficult or traumatic experiences. The experience of being placed at risk indicates the position of intersecting factors of previous parental maltreatment and state care. As has been shown, professional responses to disclosures varied, and these interpersonal encounters may have been shaped by professionals' perceptions of participants. The data from this study resonates with Coy's findings, in which a large proportion of participants experienced being positioned as 'other' during their time in state care (2008). This is evident in the way in which they were relatively powerless and were judged on the basis of their CiC identity as deviant or victims. Lastly, the data shows that frequent placement moves undermined many participants' ability to maintain established friendship with peers at school or in the community. Whilst the decision to move a participant may have been made by adults in children's best interests, moving placements often disrupted participants' friendships and thus affected their opportunities to negotiate identities of belonging. Sometimes these moves were systematically produced through planned short placements, a lack of suitable placements, a shift from residential to foster care provision, or a lack of voice.

Ultimately, participants continued to negotiate the ascribed and systematically produced identity of being looked after by the state throughout their life course. Although their ascribed identity ended when participants left care, it was clearly a part of their embodied history.

### **8.2.3 Peers and Identity Negotiation across the Life Course**

In the data findings chapters it was shown that many participants as children developed relationships outside the immediate family, which provided

opportunities for the development of a positive identity. Participants felt that they belonged relationally with peers, family and community members, and this feeling was developed throughout the life course, although it was often disrupted during childhood as families moved around.

Friendships between participants and adults in the local community were identified as providing early opportunities for escaping and managing their feelings, and/or difficult home lives. Strikingly, the activities of men, especially in sports, provided long-term activities that were interpreted as enabling participants to funnel their anger or escape; they have continued to engage in these activities as adults. Honneth's social respect is useful for understanding this and the positive effects it had on participants' sense of self. Team sports and youth groups and friendships were also a way of negotiating a sense of belonging. However, not all participants had the resources to negotiate a sense of belonging at school because frequent school moves undermined their ability to make friends and concentrate on their schoolwork. Some of those who experienced such a lack of belonging at school perceived this to have affected their adult support networks negatively, leading to feeling lonely. Although some participants continued at the same school following a placement change, the large geographical distance undermined the ongoing efficacy of these friendships as participants were unable to spend time with school friends outside school hours. Only a minority of participants have enduring friendships from their childhood; these are often a source of practical and emotional support.

Whilst school did enable some opportunities for positive renegotiation of participants' identities, it was also a space in which the difference between the self and peers could be reinforced. Treating children differently was one way in which adults in schools could reinforce differences; sometimes this was linked to teachers' aims of supporting a young person, either by advising them or dealing with them more sensitively. Sometimes difference was constructed through family, a lack of normatively expected mothering or through participants' child-in-care status. But more frequently problematic for participants was the negotiation of their child-in-care identity, which for those growing up in the 1970s, 1980s and 1990s led to other children and their parents inferring that they were deviant. This

apparent lack of understanding of the reality of participants' lives could be indicative of Honneth's social disrespect. However, Bourdieu's concept of symbolic power – which labels participants as children in care – and his concept of doxa help to acknowledge the interactions of cultural and social spheres and how they contribute to the co-construction of the participants' identity (Warham, 2011; Taylor, 2006).

Adulthood offered some participants new ways of understanding their life experiences and new experiences that could be used to reflexively renegotiate their identities. Such findings resonate with Vaughan's (2007) work on criminological desistance, whereby new social roles provided new opportunities for reflexive identity negotiation.

Participants were not free to develop identities; instead they were negotiated in the social, economic and emotional contexts of their childhood and were frequently not of their own choosing. All participants reported that their previously ascribed identity of being a child in care was no longer applicable; however, their time in state care continued to shape the adult identities of many participants. In spite of this, though, participants demonstrated the way in which their biographical identity changed during adulthood as they became independent and had more agency. For some, their negative experiences continued to be a part of their present and their future, differentiating them from others. However, adulthood provided opportunities through which participants could negotiate a sense of belonging to family or a professional identity and could, through what were presented as choices, reclaim their moral worth.

Stories told of non-normative families and state care were shown, in many instances, to indicate a negative identity of difference that distinguished participants from other people they met during childhood and adulthood. Other people's reaction to this negative identity', anticipated or actual, was generally seen to be a denigration of the participants by them. This could have arisen from a number of cultural sources, including non-normative family experiences, state care, abuse, poor decision-making and social class. Participants reported how they actively managed these threats to their social identity by remaining silent about their experiences in conversations with employers, clients, colleagues and

those with whom they were in intimate relationships. In turn, this could produce feelings of shame. This resonates with the observation of Lemn Sissay, a poet who grew up in care, that many adults who grew up in care

*“grow into their adult lives in fear of speaking of their background, as if it may somehow weaken their standing in the foreground, as if it were somehow Kryptonite” (2012).*

It is argued that the dominant narratives, as discussed, problematise participants' identities and individualise their collective heterogeneous experiences.

This is not to say that identity negotiation or the effect of state care on later life and personal subjectivities is straightforward. Instead, there are often competing presentations of self that have been negotiated and co-constructed during the life course. Identities of difference could be positive for identity negotiation, as participants sought to distance themselves from dominant narratives of poverty, familial influences, being a care leaver and social class. Such an action could be a way of negotiating the political economy of neo-liberalism and the latent myth of meritocracy. In the data collected, participants very rarely commented on how their childhood experiences (deviating from the ideal) might have shaped their lives positively. For instance, the grit and determination needed to live in difficult family and state care environments focused on the negative legacy rather than on the positive outcomes of learning problem-solving skills, how to manage conflict and developing care-giving skills early in life.

### **8.3 In What Ways Has the Biographical Narrative Approach Addressed the Production of Privileged Knowledge?**

The second chapter of this thesis considered the privileged knowledge inherent in much of the research seeking to expand understandings of people with care experiences. This was done by identifying the dearth of care experienced voices and the lack of the use of sociological perspectives and individualised explanations in previous research. It was also suggested that the use of normative, 'objective' quantitative measures to assess this cohort's experiences contributes to the production of privileged knowledge (Stanley, 1990; Horrocks, 2001; Garrett, 2001). Thus, it was hoped that this research could provide

mechanisms for adults who had experienced care to disseminate previously invisible knowledge. The success of this is considered next.

### **8.3.1 Contextualising Quantitative Normative Measurements**

The invisible knowledge seen in this research has shown that an approach that privileges the service user perspective is productive. This research has highlighted why the missing contextualisation of the normative, objective quantitative measures that the government collects and publishes is troublesome. This is important as it could shift practitioners' and academics' gazes from a deficit perspective to one which considers the effects of wider social and economic contexts. A particularly resonant example is the comparative educational underachievement recorded at school-leaving age. Not all participants spoke about their educational attainment at school-leaving age; instead they spoke of other circumstances in their lives at that time. These included domestic violence, mental health difficulties, temporary accommodation and the emotional and financial pressures of the transition to independent living. It was also evident that some experiences also intersected with structural processes associated with participants' leaving-care status. The financial imperative resonated in the decision-making processes of some of those who did 'achieve' but subsequently chose not to pursue education. In this way, the BNIM method used during interviews and the absence of this contextual information from government statistics and research show that these wider life experiences were important for understanding the individual life course. Conversely, Harry's and Tommy's accounts of their school-to-work trajectories highlighted intersections with the local economy and their socio-economic positions. Thus, through such contextualising, educational underachievement is not framed as an individual deficit but reflects the way in which participants' efforts were affected by broader life experiences. The above illustrates that by excluding contextual factors from governmental measures of LAC's outcomes, privileged knowledge obscures the way in which their wider life experiences affect their outcomes.

Privileged knowledge identifies placement stability, supportive relationships and foster carers' aspirations as playing a role in attainment. Contrary to the overall findings of Jackson and Ajayi (2007), only a minority of participants spoke of



family's or foster carers' emotional and practical support for their attendance at an HE institution. However, those with this support were able to make a normative transition to enrolling in FE/HE programmes, rather than enrolling as mature students. Many of those who 'achieved' did not have this support, though, and their stories focused more on their individual motivations and engagements with school. This finding reflects Cameron's research into the educational achievement of LAC (2007) in which self-reliance and an interest in education were more critical than support from foster carers. Cameron (2007) suggests that their self-reliance was influenced by neo-liberal rhetoric about aspiration and achievement. Arguably, internalising neo-liberal ideologies may have spurred participants to pursue educational attainment to edify their moral worth. Meanwhile, those who chose not to engage educationally may have acted to resist the lack of agency and control they experienced in other areas of their life. Many participants negotiated rather than avoided barriers to educational success. When interviewing older adults it also became apparent that, importantly, educational achievement later on in the care experienced young person's life course is a real possibility. This resonates with Mallon's (2007) findings and indicates a need for optimism in terms of people's ability to negotiate and enact agency across the life course. Mallon describes this as educational resilience; however, accessing education was only one way in which participants enacted agency. Neither this research, nor Mallon's, has effectively investigated the facilitating factors of these decisions (2007).

Clearly, participants who had childhoods that could be considered, normatively, to be dysfunctional enacted a range of behaviours. They often framed these as indicative of their maladjustment. However, in the narrative interviews it was apparent that these were ways of managing difficult home lives despite having little agency, power or resources. These contexts led to, inter alia, hunger, neglect and emotional distress. In essence, participants were not passive in response to the world around them but responded to it. Thus, the invisible knowledge co-produced suggests it might be appropriate to frame this as indicative of their resourcefulness as children.

Finally, in some ways, the findings from this research support some of the privileged knowledge. This is apparent in the stories of stable, good-quality foster

placements. Good-quality relationships in foster placements and stability were identified by participants as a source of positive support, and these functioned as narrative resources for Lauren's and Robert's negotiation of belonging. In addition, the sense of belonging to a foster family during time in state care enabled gradual integration into the local community. The relational dynamism of such relationships is not just dependent on a good relationship but also on its enduring nature. Such factors identified as constructive in placement stability are not presented in official statistics. The current recording of placement moves would not illuminate participants' experiences of how systematic factors (e.g. short-term or long-term foster carers), maltreatment in care or foster carers' resignation from their job may have caused placement moves. This is important as some narratives suggest that in the relational dynamic of placement breakdowns, participants were often positioned, sometimes unfairly, as the instigator of this change by foster carers and social workers. This often had negative effects on participants' identities and led to the production of emotional and material vulnerability. Such narratives illustrate how normative measures can individualise outcomes and may conceal how wider factors relate to the context of the lived life. The knowledge of participants was valued as an integral part of the methodological approach.

When listening to participants' stories it was evident that their experiences and understandings provided in-depth understandings of the way in which their life experiences and subjective identity were interlinked. This showed how privileged knowledge of care leavers' outcomes made invisible the interrelation of life events that intersected to shape outcomes. This is because it provides a deeper qualitative insight into how these relationships and meaningful life events are constructed and negotiated over time. It is notable that the concept of invisible knowledge does not account for the way in which service users' knowledge is made invisible. Other knowledge is made invisible, and thus invisible knowledge should be reconceptualised as subordinated knowledge. This signifies how wider social and cultural values are implied in the production of invisible knowledge. In this way, narrative methods provide an insight into the complex experience of the individual lived life and may provide a much-needed context for differential outcomes. There may be a range of reasons for the invisibilities produced through subordinated knowledge. It would be worthwhile examining the relevant social

conditions that may play a role in subordinating knowledge, including, inter alia, how positivistic methods are more generally valued, the role that social emotions such as guilt and shame may have in silencing some stories, or how certain stories aren't heard. Participants' stories reveal that their access to knowledge was sometimes blocked by the destruction of care records, or that their records did not reflect their interpretation of their lives.

### **8.3.2 Moving beyond Individualised Accounts?**

This research has indicated a need for a balance to be struck between recognition of participants' heterogeneous life experiences and the way in which some of these were shared. So whilst the interview provided individualised accounts, through constant comparison it is also evident that many of these experiences and explanations were shared, e.g. circle of abuse, economic hardship whilst transitioning to adulthood, and that these are not individual problems. Indeed it could be observed that these experiences intersected with wider social problems (e.g. domestic violence, family difficulties), structural factors (e.g. war, poverty, unemployment) and/or dominant narratives (e.g. victimhood, intergenerational transmission and child development), which reiterates the problem with individualised approaches. Moreover, when looking at constructions and negotiations of identities of belonging and difference, it was evident that participants' experiences intersected with their other social identities, such as class. One difficulty was how the subjective accounts produced few explicit material understandings of resources available to participants' families. Thus, it is argued that the tendency to individualise and/or pathologise vulnerabilities and poverty may act to depoliticise participants' experiences.

It is evident that the state adopts a time-limited approach to the status of LAC or care leaver ascribed according to statutory definitions. The interview data collected suggests, though, that after leaving state care this part of participants' embodied history prevailed in their personal subjectivities. This is not to say that participants were necessarily 'damaged' by state care, but were affected differently. This suggests that there is a need for the state to acknowledge that temporally limited state care can affect the ontological well-being of participants during adulthood.

Only a minority of the narratives supported the privileged knowledge of the potential positive effects of good foster placements. This contrasts with the narratives of many other participants who experienced poor-quality placements that effectively placed many of them at real risk of sexual or emotional abuse and neglect. If these experiences are considered as much a part of participants' embodied history as their pre-care experiences with family, what emerges is that state care did not ameliorate their previous difficulties but at times exacerbated them. Moreover, some participants' voices were believed more when it came to reporting maltreatment in care. This suggests that some participants experienced limited agency because professionals undermined the validity of their subjective experiences. The reasons for this are unclear; however, it may be that some participants, when they were children, embodied more normative understandings of what a victim is or were able to articulate themselves in a way which enabled recognition. Other participants may have been sexually active and thus seen as complicit in their vulnerability or were less able to articulate the maltreatment to adult professionals.

As previously discussed, it was difficult to categorise participants in this study according to Stein's typology. However, those who told stories of difficult and challenging times during their adult lives were better able to manage these times when they had emotional, social, practical and/or financial support from their networks. In stories in which these difficulties could not be effectively managed, it could be said that state care had real relational, financial and emotional effects limiting participants' ability to successfully manage these. Participants were differently able to draw on support to manage challenges they faced in adulthood. Thus, there is a risk of considering those who were normatively more successful, with a higher status and secure, waged employment, as more resilient than participants who had lower-skilled, precarious jobs, thereby further locating adult difficulties in the individual rather than the wider context, which requires adopting a more nuanced, contextualised approach to the life course.

Family relationships were important and featured in all of the narratives. It is evident that many participants' sense of emotional well-being and identity could be secured, or threatened, by their relational ties. There were echoes of the past in

what this meant and how it was performed. For men this was often identified as difficulties in relating to others and adapting to their partner's family, whereas women often spoke about a lack of trust in their partner's commitment and a pervasive need for forms of intensive mothering and responsibility. In many ways such individual life experiences intersected with broader social and cultural gendered expectations and norms of parenting (Guendouzi, 2006; Williams, 2008; Austin and Carpenter, 2008; Christopher, 2012). Furthermore, although the effects of childhood adversity were reported differently, the way in which these acted to form a part of a participant's adult subjectivity and identities suggests that there is a collective dimension. Estranged family members and difficult family relationships seemed to produce 'psychic pain' or suffering. Some participants were able to distance themselves from such feelings as adults. It was also clear that the severing of some family ties was a necessary step for participants in adulthood to give them space from troubling relationships. For others the enduring loss of good-quality, affectionate ties and socially expected levels of maternal care were interpreted as indicating a deficit in self- and social worth.

The previous ascription of a CiC status remained a part of many participants' social identity in adulthood, shaping their interactions professionally, personally and socially. This suggests that the problem identity is not located solely in the individual but in cultural representations and dominant narratives which can be reproduced by other non-care-experienced people. But there are a number of other problematic symbolic identity markers that shaped participants' social interactions, including elements of being working class, previous vocations and age. In this way, Bourdieu's concept of embodied history is helpful for conceptualising how life experiences accumulate and interact over the life course. Although this research shows that state care can have a lasting effect on an individual's subjectivity and identity, participants' stories show how their life experiences were not determined by their care experiences.

### **8.3.3 Producing the 'Unfettered Voice' in Research?**

Taking a life course approach to data collection, and interviewing older adults, enabled invisible knowledge to be brought into view that has made visible the flow of life and the potential for change. This in itself has provided evidence which

problematizes some of the static, negative representations of children in care and their futures. During each participants' life course there were opportunities to renegotiate identity through friendship, employment and parenthood; for many this also meant opportunities to develop new social and financial support networks. More frequently, these led to positive identity experiences, but for some these new ties were difficult to sever and had negative effects. Moreover, these opportunities were at times shown to intersect with class, geography and generation. But this finding needs to be tempered by the recognition that for some, state care and disrupted family ties were interpreted to have left echoes of affect that undermined participants' social, financial and emotional security in adulthood.

Collecting data that did not restrict participants' accounts of their own lives has brought into focus the processes through which individuals attach to and interpret meanings from the world around them. This affected emotional, social and material dimensions of the life course. Through this conferral of power during the interview, participants have been able to challenge the problematized conceptions of CiC individually. Collectively it has been shown that this sample's experiences challenge Stein's typologies of care leavers. Despite the participants' difficulties in childhood, their life stories have shown that there is reason to remain optimistic about the long-term prospects of CiC as they grow up, adapt and have new opportunities.

Throughout the data chapters, identification of dominant narratives suggests that privileged knowledge contributes to a relationally constructed problematized identity. This could be negated in different ways, such as resisting expectations, positioning the self discursively as not like that of other care leavers, or by participants differentiating themselves from their family members. Despite the advantages of this approach, there are limits to this unfettered voice. Whilst the data collection supports the significance of participants' experiences and agendas, this final thesis does not present unedited, verbatim accounts of the life course. The production of the thesis has obscured important aspects of the life course of participants, e.g. cancer or the death of a spouse. The analytical approach that was data led rather than theory driven, was an iterative process that aimed to bring together shared aspects of the life course and their differential meanings.

This approach has to some extent continued the prioritisation of participants' voices in this research, but has focused on the most-shared experiences across the life course, and therefore not all aspects of their life stories have been discussed. They are unfettered, however, in so far as participants were given the opportunity to speak about their lives without being guided by an interviewers' interview schedule. The production of accounts of the life courses will have been co-constructed by participants' own knowledge and their inferences of the focus of this research. Although Pinkerton (2014) states that BNIM is a naturalistic approach, this consideration neglects to take account of the way in which interactions of gender, class and power played out in the different interview settings. It also obscures the way in which biographical narrative data is co-constructed (Riessman, 2008). The benefit of BNIM in the pursuit of invisible knowledge is that it captured data that showed that there was far more to the lives of adults who had experienced care than their time in state care. This is an important finding in Holland and Crowley's work with young people in care (2013).

Using BNIM interviews reveals that there are differences in accounts, but it is unclear what has led to these. The extent to which comparable data has been produced is questionable. There is a myriad of factors, such as age range, generational differences, social class and/or gender, which may explain some of the differences in narration. It is also difficult to determine how and why some participants drew on dominant narratives of CiC more than others. Nor is it clear how, if at all, changes to the political economy since the 1940s, including neo-liberalism, may have shaped participants' subjectivities. Stories were pervaded by dominant narratives and representations: adverse experiences in childhood will lead to maladaptation later on in life; children in care are, or threaten to be, problems; maladaptive behaviours are reproduced intergenerationally; and family is biologically heteronormative. These were both reinforced and challenged at different times in the told stories. Arguably, the power of a dominant narrative is that it provides a framework for storytelling (Plummer, 2002; Nelson, 2001, Bamberg, 2004; Andrews, 2004). However, as Woodiwiss (2014) has shown, it can foreclose alternative stories. Thus, there is a possibility that the stories participants told were limited by dominant narratives and representations of child development and dominant narratives of children in care and/or those from non-

normative family backgrounds. It has already been discussed how privileged knowledge contributes to the dominant narrative of care leavers in academic and public spheres and how this intersects with the construction of a problem identity that is often interrelated with assumptions about what a good family is and does. What this highlights is the credence given by participants to normative family experiences. Perhaps dominant narratives of childhood adversity prevent participants from seeing their childhood misbehaviour less problematically as indicative of their own resourcefulness, toughness and ability to adapt to their surroundings.

The use of sociological theory to understand participants' accounts may in itself be a form of symbolic violence, with the researcher as a dominator continuing to oppress participants. However, the methodological approach ensured that engagement with theory was led by the data. This was a deductive process that was sensitive to the whole stories participants told. What has been shown is that participants' lives are not exceptional, even though they have experienced non-normative childhoods and families, but can be understood more thoroughly by applying sociological theory and using toolkits. Whilst neither Bourdieu's nor Honneth's work is a perfect fit for the data, what it does provide is a way of approaching individual stories. Their work has enabled an exploration of the way in which societal factors have affected the discursive and material experiences of participants' identity negotiations.

#### **8.4 Assessing the Relevance of Bourdieu's and Honneth's approach to Misrecognition**

Social theory has been utilised in this thesis to provide an additional layer of analysis of the life course beyond the narration. In this way it has been shown that both perspectives can be used to understand how participants' life experiences have shaped their personal and communal sense of identity.

The work of Honneth and Bourdieu has been used to explore how social theory may be used to consider how sociology could open up critical discussion of the life course of those who had experienced care. This enabled an additional dimension of analysis to understand some of the social forces at play in the life course of



participants. It has been explained why it was necessary to extend Bourdieu's and Honneth's work using the sociology of childhood to counter some of their normative conceptions of childhood. This thesis has focused particularly on experiences that participants could use to construct identity, heterogeneously, through their subjective interpretations. Through participants' shared childhood experiences, it became apparent that there was a particular need to consider power mechanisms active in the lived experience. The ways in which Bourdieu and Honneth help to understand subjective life experiences have been shown through discussions of how cultural, social and political norms influence individuals' cognitive landscapes. Whilst neither theories are psychosocial theories per se, they both aim to understand how the individual is shaped by the world around them and how individuals react differentially to this. Clearly there are limits to the extent of what can be extrapolated from the data collected and any subsequent theorising to the care-leaver population (see Conclusion).

#### **8.4.1 Misrecognition or Disrespect?**

Here the central concept of misrecognition and its applicability for understanding participants' experiences are addressed. Following this is a brief discussion of Honneth's and Bourdieu's analysis of the family and then there is a focus on their theorisation of power. Honneth's focus on the affective dimension makes his theory more relatable to participants' experiences. It can be said to amplify and legitimate participants' perspectives. Through providing a tripartite system for identifying respect and disrespect, there is a continual focus on the relational aspects, yet few tools are provided to analyse the wider social forces which shape the norms and values of individuals in interactions. Honneth's focus on the affective dimension within the family, work, school and transitions was found to be of limited use when considering wider society. Therefore, Honneth's ideas cannot be employed in the same manner as Bourdieu's, where insights are gleaned into how power is deployed through institutions and systems to affect identity. Furthermore, examples of disrespect and respect, whilst frequently appealing to normative claims, reproduce their dominance. Honneth's approach has been most suited to enabling some insight into the affective nature of disrespect and respect in social interactions. What is helpful is that by having a tripartite system, the

nuances of experiences of respect and how one form of respect may lead to disrespect in another dimension can be identified. One example of this is the legal recognition bestowed upon participants who sought some protection from difficult, often abusive, practices of family but who subsequently experienced emotional misrecognition in their state care placements. Whereas Honneth provides little theoretical consideration of the cumulative effect of recognition and misrecognition, the Bourdieusian concept of embodied history has been helpful when considering how differential subjectivities were co-constructed by participants. According to Bourdieu, this concept relates to an integral component in a person's habitus, and in part affects how people interact with the world. In this thesis, embodied history usefully applies to participants' narratives of their past and how it shapes their present social identities.

In contrast to Honneth's focus on the felt injustices is Bourdieu's conceptualisation of misrecognition. Here misrecognition is done by participants themselves, to themselves. Consequently, using Bourdieu's theory and identifying aspects of doxa in participants' accounts leads to the assumption that participants are unable to see the oppressive forces in their lives. For Bourdieu, these are often based upon doxic knowledge and can be a tool of domination. The concept of doxa was useful for critically approaching the dominant narratives apparent in participants' stories, e.g. about child development and intergenerational transmission of cultures of maladaptation. Some participants continued to accumulate negative life events in adulthood, narrating an increased vulnerability linked to a lack of emotional and practical support. Although many participants spoke of being fiercely independent and hard working as a result of their early life experiences, the reality of securing their livelihood led them to make, in hindsight, poor relationship choices. Such cumulative setbacks were tough and participants struggled emotionally and financially without family support (which they may have imagined in an idealised way). This, as with Bourdieu's misrecognition, is indicative of the way in which socially constructed categories become realised in everyday life, whereby participants were unable to critically think about the stratification inherent in these affective ties. However, the lived experience of emotional pain is better conceptualised using emotional respect, as it denotes a felt injustice.

This leads to a knotty problem. On the one hand, a critique can be made of the normative expectations of family and the power inherent in doxa, but the inference is that participants are misrecognising themselves. Misrecognition may help us to understand how, or why, the doxa of, inter alia, attachment, child development or intergenerational transmission function positively for participants' reflexivity. It also helps to understand how, and according to whom, participants legitimated their domination.

#### **8.4.2 Appraising Theoretical Approaches to the Family**

Bourdieu's analysis of the family as a social category, and the subsequent inequitably stratified symbolic capital associated with less hegemonic family forms, resonates with the findings of this thesis. Although Bourdieu (1996) does not specifically interrogate the material and social intersections producing less hegemonic family, he does acknowledge that not all families are able to realise idealised family forms.

A lack of what Bourdieu conceptualises as symbolic capital related to participants' families helps to understand its social significance and the ramifications for individual identities. However, unlike in Honneth's approach, the significance for individuals at the affective level emerges as symbolic violence, within which participants themselves are complicit (Bourdieu and Passeron, 1990; Jenkins, 1992). Often these experiences can be conceptualised as Honneth's emotional disrespect, which affects self-confidence and denigrates a person's moral and self-worth. Both of these concepts are useful, but Bourdieu's leans towards a theoretical perspective that positions the dominated as culpable in their own oppression. This is why the concept of emotional or social disrespect is seen as more relevant for understanding the affective dimension of participants' experiences. Symbolic power and violence can be used to analyse the power deployed in the interaction or event, but its effect is better framed as disrespect, which avoids positioning participants as contributing to their own domination.

In some ways this thesis has highlighted the politics of this personal domain. The way in which non-normative families and childhood experiences were often silenced in participants' social interaction is symptomatic of the symbolic capital of

families. Meanwhile, Honneth argues that the family is a private sphere and that legal recognition is only sought if there is an absence of love. This does not sit comfortably with many participants' feelings of affection towards their family; it also doesn't account for feelings towards different family members. Moreover, Honneth's theoretical discussion doesn't explore how family is itself socially constructed or the micro politics at play in this space. The gendered dimensions of the family and how they are differently performed is an issue that is sidelined by these theorists. The findings of this research highlight gendered expectations, particularly of maternal figures and the way in which there were some differences in participants' narratives of parenting, and its personal significance for them. This is not to say that male participants felt less emotional affect from becoming a parent; it may be that dominant narrative of fathering and mothering shaped the stories they told (Andrews, 2004).

It is also surprising that there is little critical potential in Honneth's and Bourdieu's approaches to, or in participants' own narratives of, family. These were introduced in Chapter 3. One way of understanding the lack of criticism in participants' stories is through Honneth's approach to identifying experiences of disrespect as identifiable through people's felt injustices. Thus, the felt injustices (not experiencing family as caring, safe and loving) communicated in participants' accounts of their families only reinforces the idealised family. Whilst some might say that participants did to some extent choose their families as adults, the evidence suggests that they were in some ways more attached to the performance of an idealised, heteronormative, functional family. This contrasts with the families of choice literature (Weeks et al., 2001).

As a consequence of seeking to understand the social forces which reproduce people's life chances inequitably, Bourdieu's theory offers a more detailed argument and mechanisation of his concepts. Throughout Chapters 5 and 6, discussions identified how with regard to child development both theorists place importance on primary socialisation in the family home, the bedrock of the adult self. Both theorists take a rather deterministic stance towards the effect of maltreatment in childhood. Although there is more determinism built into the concept of emotional disrespect during childhood, there is also an identified effect

on self and the life course (Honneth, 1997; Yar, 2011). Whilst the data supports the former, the latter is unrealised in that participants readily identified throughout their narratives the needs of other children around them.

Lovell comments on how Bourdieu was pessimistic not deterministic about people's inability to change (Lovell, 2008). Indeed Bourdieu's own socio-autobiography discusses this and demonstrates that habitus is not static and that changes can be assimilated or antagonistic, constructing a "cleft habitus" (2007, p.100; see also Gilbert et al., 2014). This highlights the potential for change and also enables a recognition that power is not a zero-sum interaction. Each participant demonstrated reflexivity in considering aspects of their behaviour, often describing their embodied history and reflecting on how the past echoes in their present and future. Resistance to dominant representations of care-leavers and transformation of the self over time was something which all participants accounted for in their stories, – that their identity and who they were did change over the life course. This is illustrated by Vanessa when she said:

*"obviously when I was younger the looked after part of me was a massive part of me and as an adult the looked after part of me is much smaller because I'm a mother and, you know, the boys are the biggest part of me."*

To address some of the normativity embodied in Honneth's and Bourdieu's social theories, it was necessary to draw on other theorists regarding the social nature of stories, the sociology of childhood and its examination of the ideology, agency and power of children, and feminist approaches to knowledge production. This enabled a critique of the normative approaches embedded in the professional research and in Honneth's and Bourdieu's approaches to childhood. It also enabled an approach to the life course which does not link participants' outcomes with state care alone. Instead this thesis has demonstrated that a sociological gaze can provide a more intersectional approach.

#### **8.4.3 Theorising Power, Agency and Identity**

When attempting to theorise how identities fluctuated over the life course and how particular interpersonal encounters shaped participants' sense of who they were, and are, socially, it was evident that Honneth's understanding of recognition as respect could be used to help understand the effects of experiences on

participants. In many instances, respect, emotional and social, could have ameliorating effects on previously negative understandings of self-identity. Moreover, the focus on the felt injustices did not help to reveal wider societal mechanisms through which disrespect was produced. And whilst Honneth claims to account for economic injustice through interpersonal injustices (2007), there is insufficient detail to explore how state care, or any other negative attribute, might lead to economic injustice (Fraser, 2003).

Bourdieu's work compares favourably as his ideas and concepts provide an insight into how a person's embodied history, their habitus, may shape their dispositions, capitals and life choices. For instance, could it be that participants' life experiences, including where they grew up, influenced the employment they subsequently entered? The usefulness of Bourdieu's concept of embodied history has been illustrated. Affective dimensions as expressions of the bounded agency of childhood may be indicative of domination within the family. Moreover, the doxic labelling of maladaptive behaviours and normative approaches to childhood adversity has been problematised. Adopting such a deficit approach veils how such experiences could be usefully reframed as indicative of participants' agency and resourcefulness as children. This is where identifying evidence of doxa in participants' narratives may help to understand the limits to the stories that participants were able to tell.

Theoretical approaches used in this research have provided a means for identifying how power and social interactions shaped identity in the stories told and considering the processes through which identity is constructed. The dynamism of Honneth's tripartite approach is especially useful for understanding the effect of events and experiences and their role in shaping, at the affective level, identities across the life course. It provides a theoretical account of both positive and negative life experiences. Situating these within Bourdieu's understanding of embodied history, symbolic capital provides a framework which can analyse how power is deployed in social, political and cultural spheres. Doing this provides an approach to theorising participants' construction, negotiation and negation of identities across the life course. This was achieved through the identification of dominant narratives, social interactions and system practices. This appraisal of

the usefulness of sociology for understanding participants' life courses continues in the next chapter. The conclusion also draws together the main findings of this research, considers the limitations of the study and offers some reflection on the potential avenues for future research.

## Chapter 9. Conclusion

At the outset of this thesis it was argued that contemporary problematised constructions of children in care as deviant or victims are not new. These dominant narratives and concerns about social order continue to be relevant for understanding social policy and developments of cultural representations. It was suggested that a lack of care experienced voices, deductive methodologies and age-limited samples perpetuated the production of privileged knowledge and troubling representations. This reiterated the rationale for inductive exploratory work; as Holland and Crowley (2013) and Horrocks (2002, 2006) show, BNIM has the potential to enable researchers to identify knowledge previously omitted from published data. This was supported by the findings of this research in providing contextual details surrounding participants' life experiences, decisions and changes during their life course.

What a consideration of the narratives in this research has achieved is a more nuanced understanding of participants' experiences of the life course and negotiation of dominant narratives. This has been done through examining the way in which their stories depart from, and borrow from, dominant narratives to make sense of their life experiences and identities. This indicates that the methodology employed did enable the co-production of some resistance narratives of people with experience of care (Nelson, 2001; Fivush, 2010). It can be concluded that there is value in enabling hidden voices to be heard (Winters, 2006; Fivush, 2010). Although invisible knowledge was co-constructed, this was tempered by the way in which many participants drew on dominant narratives to do so (Nelson, 2001; Woodiwiss, 2014). This resonates with Woodiwiss' (2014) argument that a consequence of the limited dominant narratives available for understanding human adversity, and its impact, shape the stories that can be told and received by audiences as truth. By collecting data from older participants with care experience, this thesis has deepened academic research into their life courses. Moreover, the findings suggest that some adults with care experience encountered symbolic, emotional and financial exclusion and denial of socially expected, reciprocal intra-family support. It is clear from interviewing older service



users that there is reason to be optimistic about the potential for adaptation over time, as opportunities for positive identity development were available.

The data in this thesis has problematised the dichotomy of the dominant narratives of CiC as victims or villains. This was achieved by drawing in part on the sociology of childhood literature to overcome some of the normative approaches to children in Honneth's (1996, 2007) and Bourdieu's work (1990). This worked to sensitise normative conceptions of children as passive, dependent, helpless beings and as a potential future threat. These conceptions have been critiqued as social constructions. The establishment of children's agency (Winters, 2006; Jenks, 1996; Lee, 2001; Garrett, 2002; James and James, 2004) for exploring participants' childhoods challenged the perspective that they were helpless and passive. This sensitisation enabled the discernment of how participants' agency was evident but was bounded by their relative powerlessness and structured dependency. Clearly, in this study, participants' identities and outcomes during their lives should not be understood solely by focusing on their ascribed CiC status, as over the life course opportunities emerged which could be used as resources for the renegotiation of identity. Overall, the deficit representations were not accurate for the adults who had experienced care in this research; rather, they could be problematic for identity negotiations as they positioned participants as different. It is important to see that across the life course participants' identities were affected by other experiences and dominant narratives surrounding the family, social class and education. This shows that there is a need for a less reductionist approach to needs and measures in future when researching care experienced populations.

Moreover, the individualised approach has been challenged because the findings of this research suggest that the negative representations were often relationally and systematically produced. These experiences, in educational, state and social spaces, were narrative resources deployed to reinforce or challenge negative representations. It was shown how lower levels of financial, emotional and social resources, and family ties, bounded participants' agency. For some, this was especially acute where their absence undermined a participant's ability to effectively manage challenges in adulthood. Moreover, the findings highlighted the

systematic way in which state care systems and policies could be complicit in producing the unmet needs of participants. This thesis has shown that a looked-after-child identity is constructed and negotiated relationally by participants and was often reinforced through systematic careism. Thus, employing an individualised approach to this ascribed identity is not useful as it is not located solely in individuals with care experience. The findings of this thesis suggest that Hare and Bullock's (2006) analysis and critique of the problematised identity and their pessimistic stance towards care leavers' outcomes is valid.

This thesis now turns to consider the central aim of this research, which was to assess how the discipline of sociology could offer insights into the life course of people who are care experienced.

### **9.1 How Has Sociology Helped Us to Understand the Life Course of Adults Who Have Experienced Care?**

At the outset of this thesis it was established that the work of C. Wright Mills (Mills, 1959 [2000]) had influenced the data collection and research aims. Furthermore, the described approach was established as appropriate for furthering our understanding of people with care experiences following the review of social work research in the area. This approach means that the sociological imagination enables individuals' biographies to be understood as a reflection of agency, which has been shaped by broader social forces. Greater precedence overall was given to participants' internal landscapes. This brought to the fore how their identity negotiation depended on the social construction of idealised families, understandings of child development and state practices; the subsequent impact on resource distribution was often implicit in their narratives but was made explicit through the analysis. What emerged was how participants' troubling identities structured their entitlement to support from agencies. It is in these insights that the individual biography can be connected to wider society. By attempting to amplify participants' stories, this thesis has drawn on broader social theories to help establish the context in which participants' lives have been conducted. Sociology has been able to address some of the difficulties identified in previous approaches to knowledge production about those who are care experienced. A grounded approach to data collection and analysis was central but it would have been

unwise to make theoretical claims on the basis of this limited sample; this was discussed in Chapter 4. Instead, the theoretical work of Bourdieu (1996, 2007; Bourdieu and Passeron, 1990) and Honneth (1996, 2007) enabled a perspective that does not differentiate adults who are care experienced from other adults in society.

Crucially, sociology was useful for understanding the lives of adults who experienced care because it provided a wider tapestry of knowledge on the social world in which their lives are lived. Thus, sociology has demonstrated that participants' life courses are not entirely different from those of the rest of the population. This was evidenced in the findings showing a number of intersecting social forces, such as gender, power and social norms, and experiences, such as illness, domestic violence and work, and how these affected participants' identities differently. The findings showed that some aspects were often interpreted as individual problems. These included, but were not limited to, state care, abuse, non-normative families, caring roles and mental health difficulties. It was evident that many participants shared these experiences. This suggests that individualised understandings are troubling as they contribute to the problematising of the self. Such deflection limits the way in which social forces can be identified as intersecting with participants' life experiences and identity. Thus, this sociological approach has averted the exceptionalising life course people with experiences of care.

### **9.1.1 Theoretical Relevance and Limitations**

Theory was used as an analytical tool. It was shown that this was useful for considering unequal power relationships and how these shaped identities across the life course. The bricolage of theories brought together a diverse selection of social theories, which enabled a multifaceted approach to understanding the life course. To be able to view these often very different, contrasting interpretations, social theory was useful. It is evident that both Bourdieu (1996, 2007; Bourdieu and Passeron, 1990) and Honneth (1996, 2007) provided conceptual tools for deeper analysis. Both enabled some insight into power and how this may have affected participants. It was argued that the attention given to the affective level by Honneth (1996, 2007) is far more conducive to theoretical analyses that do not

completely abstract from the lived experience as his approach assumes a validity of the subjective lived experience.

Whilst an understanding of how individuals are affected by social interactions was gained through a tripartite approach to recognition, Honneth helped to highlight how moral worth and social identities were negotiated and constructed at an individual level. But Honneth perceives almost any normative claim as just means that there is little potential for reconceptualising socially constructed inequalities, for instance the injustice experienced by participants who were troubled by their non-normative family and childhood experiences. As has been discussed, this contributed to the reproduction of the idea of the idealised family.

Although Bourdieu is pessimistic about the potential for change, he doesn't exclude it as a possibility (2007; Lovell, 2007). Such changes are conceptualised by Bourdieu as *habitus clivé* (2007, p.100). This concept is one that Bourdieu speaks of when he is trying to understand his different life experiences and how they have shaped him (2007). This illustrates his sensitivity to people's dispositions including the potential to change. Combining Honneth's tripartite approach to recognition with Bourdieu's concept of embodied history is particularly useful for understanding individual subjectivities and how they were differently shaped by a range of factors. One of the central difficulties of Bourdieu's theories is the idea that those who are dominated are complicit in the violence they experience (Jenkins, 2002; Bourdieu and Passeron, 1900). Bourdieu contends that a major force in this continued reproduction of social injustices is the misrecognition of self (Bourdieu and Passeron, 1990). This raises questions about who is the expert on other people's life experiences and how they have shaped their lives, and it certainly raises an issue about who Bourdieu deems suitably qualified to recognise all the social forces simultaneously shaping people's lives. Moreover, both Honneth and Bourdieu seem gender blind in their analyses and discussions. This had been overcome in this thesis by drawing on Winters (2006, 2015), McNay (2008) and Skeggs (2004), as they offer less deficit applications of theory to subordinated people. Lastly, Bourdieu's (1984, 1990, 1996) work was more useful than Honneth's when seeking to explore the societal mechanisms that produced the conditions for social, emotional or legal disrespect. A range of social

identities have been identified in participants' narratives. However, the analysis of these has not examined the way in which not all identities are equally esteemed.

This sociological approach has enabled a broader insight into care leavers' experiences and how in many ways participants' stories often intersect with what are common experiences and adversities, such as loss, relationship breakdown, violence against women and unemployment. This thesis has shed light on the affective experiences of deviation from idealised representations of the family. It has also been argued that the inferred privileged knowledge that has been used to predict the outcomes of adults and children who have experienced care is problematic. Firstly, it individualises their experiences by decontextualising outcomes. Secondly, this deficit approach does not acknowledge how participants were active agents in their life course. It was also shown how the concept of resilience can be said to neglect humans' capacity to deal with adversity and trauma. Resilience can blur the way in which policymakers and practitioners do, or do not, address wider social and cultural forces.

Sociologists are not immune to producing privileged knowledge; the data in this thesis challenges Honneth's and Bourdieu's normative approaches to childhood and development. On the one hand, participants might have pathologised the effects of childhood adversity because it was a useful way for them to construct their life story. Knowledge that was used by other participants drew on more social models of inequality, rights and class culture, as well as attachment theory. However, these were deficit perspectives implied in denigrating the self, family or the class community. Moreover, Füredi's (2004) approach is problematic as it devalues participants' accounts. This could be said to be indicative of symbolic power and suggestive of a weakness in succumbing to therapy culture and individualisation. However, generally in this study, participants who spoke of having sought talking therapies had the weakest ties with living family members. Thus, it is inferred that emotional social support is an inequitably distributed resource. This thesis has highlighted how experiences in social systems and relationships can produce psychological challenges. It has been argued that these affective dimensions, and how emotional support can ameliorate some of these difficulties, could be usefully understood as examples of how emotional recognition

can be produced through professional relationships. Moreover, talking therapies were often spoken about in ways that resisted medicalised understandings of the self.

### **9.1.2 Family: Social Theory and Dominant Narratives**

The evidence from participants' stories suggests that whilst on some superficial level comparisons might be made between participants' experiences of doing family and 'families of choice' (Week et al., 2001). However, this research also shows that participants were not conducting conscious experiments in living out egalitarian ideals outside a heterosexual ideal (Week et al., 2001). In many ways the ideals of family life performed resonate with more hegemonic normative, understandings of the need for gender binaries in childrearing, the primacy of the couple and how family is performed. In this way, Morgan's work on family practices and the changing political focus on practices, not structures, is reflected in participants' accounts (Gillies, 2011). The absence of these practices reduces symbolic capital. In addition this affects a participant's embodied history. Many participants spoke of wanting to parent differently and attributed this to their challenging childhoods. However, this mirrors reflexive parenting practices (Williams, 2004) and intensive mothering practices and maternal guilt, which are also seen in studies on contemporary motherhood (Guendouzi, 2006; Christopher, 2012).

It is clear that not being able to attain the normative ideal could have repercussions on social identity. Thus, the symbolic dimension of family (Bourdieu, 1996) is useful for understanding how participants' family experiences have affected their social identity. Unlike Honneth's approach to the family in modern societies (1996, 2007), Bourdieu's work is more relevant to understanding the experience of family of the participants in this study (1996). The role of the symbolic capital associated with a normative family in social interactions was apparent. A child in the family entering state care further diminished the symbolic capital of the family. It was seen when participants were recollecting their childhood that this was particularly pertinent to educational experiences and interactions with peers and the wider community in producing identities of difference. The importance of normative family, what Gillis (1997, cited in Wilson,

2012) describes as the family we live with, resonates with the real psychic suffering noted in Wilson's work (2012). This symbolic dimension persists within sociology, contributing to the reproduction of the dominance of 'normal' families (Wilson, 2012). One recent example of this is the journal *Families and Relationships in Society*, which published five open access journal articles to celebrate Mother's Day in the UK (<https://policypress.wordpress.com/2016/03/04/5-free-articles-all-about-mum-mothersday/>). A scan of the titles suggests that they focus on the normative ideas of mother-child relationships. This reflects the underlying suggestions in the goods marketed for Mother's Day. The absence of articles on non-normative mothering experiences may marginalise alternative experiences, as arguably in wider society they are seen to have little cultural value, and thus difference is silenced. In a society in which there is, arguably, significant family diversity, the dominant narrative of family neglects to account for different experiences that many people encounter in their lives.

### **9.1.3 Theoretical Insight into Praxis**

When those who are oppressed by social factors are able to name these, there is hope for individual and then collective liberation (Mills, 1959 [2000]). However, being aware of oppression may not make it any easier to live with. Burawoy has said that such knowledge "is just as likely to paralyse as to mobilise" (2008, p.369). However, it is clear that knowledge enabled some participants to reflexively renegotiate their life story (Giddens, 1991), placing some of their difficulties within the context of wider society. It is thus proposed that the liberation of adults with care experience must occur at three levels: the individual, the organisational and the societal.

At the individual level, being able to ascertain how life experiences are connected to broader social processes and inequalities could alleviate the burden of individualised understandings of participants' lives. This would also provide a broader awareness that there are many shared experiences of state care and thus these should be approached as a collective, not an individual, issue. There are some organisations that have emerged from the care-leaver population. But, in comparison to other identity politics groups, e.g. relating to disability and LGBTQ

people, their efficacy to date has been limited. For the care experienced population, organisations are one way through which, as a collective, it could secure social respect.

At the organisational level it has been ascertained that systematic careism has played a role in structuring the life experiences of many participants. Were this aspect of state care to be challenged, some aspects of children's and young people's experiences of services could be improved. Done correctly, this could alleviate the negative consequences of having a troubling ascribed identity of being a child in care. Both Honneth's social disrespect and Bourdieu's concept of symbolic power can be used to understand the production and effect of a deficit identity. Bourdieu's approach indicates on a macro level that this identity is produced through symbolic power and domination. There is a greater potential for effecting change when using Bourdieu's theoretical toolkit as he addresses these broader structures that are often internalised. The symbolic power associated with the representations of children in care is not based on valid, representative, generalisable knowledge, though. There is, arguably, an emancipatory potential in being able to construct social respect for care leavers.

At the societal level it has been established that dominant narratives should be addressed. Praxis could emerge through a widening of cultural, sociological and political conversations about the experiences of people in society who are estranged or experience challenging family circumstances. Potentially a strengths-based approach to contesting dominant narratives of family may be fruitful in widening the available scripts for narrating the life story. Together these could contribute to the reconstruction of the dominant narratives of people who have experienced care (and others excluded from idealised families) and prevent the systematic way in which young people in care are constructed as different from being continued.

Together these factors could enhance the forms of agency available to people who have experienced state care and the associated oppressions that emerge from unequal power relations.



## 9.2 Limitations

It must be acknowledged that the policies that shaped participants' experiences differed, and they have altered significantly over the past 16 years. This does not make the findings of this research redundant; rather, it offers researchers and practitioners insights into how experiences in care, in school, within the family and during leisure time can positively shape participants' identity at different points across the life course. The policy context of state care continues to evolve. It is acknowledged here that the state care policy contexts of participants are varied as they experienced state care between the 1940s and the late 1990s. The range of ex-service user perspectives makes it difficult to establish any explicit links between particular policies and their impacts on participants. It is notable that participants' access to financial support and emotional support during transitions to adulthood were not equitable. In the context of leaving state care for adult independence, these types of support were identified by participants as shaping their agency and ability to manage.

Furthermore, although financial, cultural and social capitals weren't explored analytically in this research, there is some indication that the low levels of capitals available to the participants as children may have had a negative impact on the capitals available to them as adults. However, this was not clear in all participants' stories and made any comparison difficult. Future research in this area would benefit from a more materially sensitive approach more akin to traditional sociological concerns in the research design.

The methodological choice has shaped how sociology is relevant, and vice versa. Much of the data collected focused on the individual life course and participants' personal interpretations of these. As such, there are few findings that are relevant to sociologists interested in materialist approaches to social behaviours.

This also links to methodical limitations and the way in which participants selected different events and experiences to share during the interviews. It is unclear why the narration differs. It may be because of gender and/or the way in which some experiences were seen as 'threatening' to participants' presented identity. Nor is it clear how social change may be a part of explaining these differences, e.g. neo-

liberalism. A larger, more stratified, sample may have provided greater insight into how socio-economic, gender and generational factors shaped the stories told.

As BNIM interviews are unstructured and the second part of the interview respects participants' 'gestalt', probing questions are incredibly limited. For instance, a few participants revealed little during the interview about their educational outcomes. Meanwhile, many others never mentioned social class. Thus, they were unable to be probed during the BNIM interview. Additionally, this meant that direct comparison between participants' experiences could not be made. It is difficult to ascertain the effect that the researcher had on participants and the stories that they told. There were also different reasons why participants chose to tell their story; this too will have affected participants' selection of events and experiences to share (Riessman, 2008). Many participants reflected at the end of the interviews on how it had been helpful to them personally to tell their life stories, as no one had ever listened before. Whilst this was never an aim of the interviews, it was reassuring to hear that they had found the process helpful and reduced anxieties about the impact of participation.

Crucially, caution should be exercised regarding extrapolating from this small-scale qualitative study. This research cannot be representative of all people who have been in care. The validity of this research and its findings are limited to the told story itself. To ensure internal validity when analysing data, due consideration was given to how a particular data extract fitted with a participant's told story. Moreover, the biographical narratives have been positioned using critical realism and social constructionist approaches. This meant that biographies, when they were analysed, were seen as social facts, co-produced in particular contexts; ultimately, this recognises how the stories people tell of their lives and themselves can change. Thus, the insights gleaned here may only be segments of participants' life courses.

Arguably, the power of a dominant narrative is that it provides a social script for life storytelling (Plummer, 2002; Bamberg, 2004; Andrews, 2004; Nelson, 2001). However, the stories represented in this thesis may be limited to those which can be told, and listened to. Some stories are silenced, or people chose to be silent (Fivush, 2010; Andrews, 2004). It was highlighted in the methodology chapter how

during recruitment a number of adults with care experiences decided not to participate. Conversations highlighted that these men and women feared not being believed and/or the emotional impact on themselves of telling their story. It was evident that the family and care experiences of those who did participate were important in their narrative negotiation of identity. Agency was also exercised in choosing whether or not to take part in this research. Perhaps an embodied history and its legacy made it more difficult for some people with care experience to take part in the research.

### **9.3 Reflexivity**

Having an insider status because they had experienced state care was what spurred the researcher's initial interest in this area, as without it they would probably not have thought sociologically about the care-leaver experience and its intersection with wider societal factors. However, the insider status should not be inflated, as participants' gender and socio-economic status and their experiences of care, family and employment were often dissimilar.

Throughout the planning, conducting and analysis of data, the process was continually reflected on. This led to this final thesis, one which has somewhat departed from the original PhD proposal. One pertinent example of this is that in the initial plan it was proposed that social work practitioners would be interviewed. This choice began to emerge as problematic following the literature review; it was suggested that previous research epitomised privileged knowledge production and that service users themselves are likely to have their knowledge made invisible by dominant ways of collecting and valuing data (Stanley, 1990). Thus, it was decided that the focus would be shifted to amplifying participants' voices in the thesis, voices that were absent in existing research. This decision led to a greater interrogation of the methodological and theoretical frameworks and how they could be effectively modified to continue to validate participants' perspectives. It is likely that practitioner knowledge may be different from that of academics and policymakers, but this research has focused on service users' experiences. Throughout the research process, ethics have been engaged with, not just during data collection, but also throughout the analysis and writing up. This embedded ethical approach led to lengthy consideration of appropriate methods of analysis,

theorising and the subsequent writing up of the thesis. As a result, this thesis blends both the researcher's and the participants' understandings in such a way that it is clear when the researcher is making a point and when participants are speaking. Although this thesis has argued that much of the previous research on care leavers is privileged knowledge, sociologists are not necessarily immune to this criticism. This critique could also be levelled at sociology as a discipline and social theorists themselves because of their male, white, Western normative approach to child development (Honneth, 1997; Bourdieu, 1996) and how they see the role and functioning of the family (Honneth, 1996, 2007) and the critique of talking therapies (Füredi, 2004). However, as this thesis has shown, different privileged knowledges, such as a sociological approach rather than a psychological approach, can offer a different perspective on the same phenomenon. In this way, building and extending a more robust and credible evidence base of what leads to, and affects, the differential outcomes of care leavers can be achieved.

The process of analysis has been unsettling as it sought to identify power relations and their effect on identity without devaluing participants' perspectives. There were paradoxes in the way in which this thesis problematised dominant narratives, as they can be oppressive, but, on the other hand, they provided participants with particular ways of knowing. Such cultural resources provided ways for participants to make sense of their lives and/or understand their agency. The other key unsettling aspect was the unanticipated emotional impact of the interviews; this was an aspect that continued, particularly during data transcription and analysis. During the final writing up of the thesis, there was a balance to be made between presenting participants' stories and producing an academic piece of work, which has led to some aspects of their stories not being included.

#### **9.4 Recommendations for Future Research**

The recommendations presented here are suggested for future research programmes. These primarily focus on the development of the knowledge base regarding adults who are care experienced and recommendations for future work that could counter the dominant narrative of CiC by being based on real experiences.

Empirically, there is a need to engage with the way in which statistics misrepresent the outcomes of adults with care experience. This research suggests a programme that brings together both qualitative and quantitative research methods. It would be wise to broaden theoretical explorations to develop more insights into how sociology can help to understand the life courses of those who are care experienced. A more materially sensitive approach could help to generate findings that provide a better understanding of this. Bourdieu's work could enable this as well as provide a link to the concepts of symbolic power, symbolic violence and embodied history.

Longitudinal research should be considered despite the challenges associated with it. This would provide an invaluable opportunity to better capture the lows and highs that people face across their lives, and understand them. Moreover, the relational dynamic, if good practice is implemented, could play a positive role in participants' lives. Whilst BNIM, and other narrative methodologies, could be used to collect this data, there is a need to move from retrospective accounts. In many ways a mixed method approach would be useful to capture both objective and subjective dimensions of the life course of those who are care experienced.

Very few participants who reported maltreatment and/or abuse whilst in care were responded to in a helpful manner. Such emotional and social misrecognition had negative effects on participants' sense of worth. This is important as the findings of Jay's (2014) report indicate that teenage girls were often seen by some professionals as complicit in, or consenting to, their sexual exploitation. This demonstrates the need to research why some children's disclosures are believed and other children's are not.

The collection of more representative information about older care leavers, specifically about those over the age of 25, and actively facilitating their involvement in consultations would be useful. There are a few organisations which could be engaged to facilitate this (e.g. the Care Leavers' Association, The Who Cares? Trust, ECLM (Every Child Leaving Care Matters) and the Rees Foundation). This could be useful in challenging dominant narratives of CiC and the assumed impact of 'harm'.

Future research programmes should be developed sensitively with people who have experienced care as co-producers. This is important; it was previously highlighted how the data collection method in this research may have dissuaded some people from taking part, as it was felt to be a threat to their well-being. It is perhaps these untold stories that would be the most troubling to tell, and to be listened to. Therefore, a less intrusive methodology may enable wider participation.

In order to develop counter-narratives, workshops should be conducted with young people in care and older care leavers to identify the positive aspects and diverse representations of experiencing a different childhood and living experiences. Participants would then be able to choose as a group what dissemination strategies are the most appropriate. An independent researcher could facilitate dissemination. This would aid the development of a shared understanding of the misrepresentations as a public, not a private, problem. Moreover, care leavers may be empowered to construct a new narrative of what it means to be care experienced.

Raising awareness amongst the public that discrimination and stereotypes are problematic and invalid should be undertaken. This could build on the action research previously proposed, and would contribute to addressing problematic representations and their effects. A variety of practitioners, corporate parents, charities and campaigners could challenge unhelpful representations.

This research found that care experiences can continue to shape people's lives materially, socially and emotionally. Indeed a relative lack of financial and emotional support resources at the pivotal point of transitioning into adult independence was a factor that contributed to the production of some of the negative representations of children in care. In policy, 'corporate parenting' conceptualises how state services should provide for children in care. This resonates with participants' normative justice claims of not having ongoing family support, relationships and care. Thus, future research should examine service users', practitioners' and policymakers' perspectives of the need for access to services being extended beyond the age of 25.

Further research is required to establish whether or not systematic careism is prevalent in the experiences of later cohorts of CiC. It has been noted that systematic careism, whilst contributing to marginalisation, could also be a way for young people in care to access services/resources. Therefore, firstly, attention should be given to the validity of the concept of systematic careism, and secondly, that research focuses on more inclusive ways of involving young people in care and leaving care in decisions about their lives.

### **9.5 What's the Story?**

The participants in this study shared their stories so that their life course could be sociologically analysed. Through a particular focus on participants' subjective lived experience, what was said and how it was experienced, this research has produced a sensitive, nuanced account of at times intersecting, but also diverse, life courses.

The accounts that participants gave of their lives showed tenacity, agency and a toughness that was at times admirable. What is seen in this thesis is only a fraction of the data collected and considered. It has been shown that there is a broad range of intersecting factors, not just their time in care, that shaped participants' identities.

This has highlighted both the positive and the negative experiences participants encountered during their time in state care. There was a focus on the positive effects of stable care placements, that is, how positive experiences were used to renegotiate an identity that was based on good-quality, caring relationships. The state in this way can be seen to have had a positive effect on the life course of some participants. However, many participants experienced more abuse and/or maltreatment whilst living in state care. This demonstrates how interventions could produce vulnerability. It should be noted that no participant spoke of not needing to be in state care.

It was clear that negative representations could have real affective power in shaping a participant's negotiation of their identity. This thesis highlighted that the intersecting dominant narratives of healthy child development, intergenerational

transmission and the symbolic capital of the family were also used to narrate life stories. Attention was brought to the relational dynamics of moral worth by positioning participants' decisions as constituting resistance to dominant narratives of intergenerational transmission and/or the dominant representations of CiC.

Finally, this research has shown that whilst the ascribed status of being a child in care did end for the participants, the experiences of this time continued to shape their identity and adult subjectivity. But throughout the participants' life course to the time of interview, as shown in this thesis, there was a range of different experiences that they could use as narrative resources to co-construct and negotiate their identities. There was a range of factors, such as hobbies, sports, employment and adult education, that provided participants with important subjective turning points, and class, geography and gender shaped these. Thus, participants' identities were affected by their time in state care; however, they were not determined by it.



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