



Title: A study exploring the meaning of culturally competent practice with care leavers in Cornwall

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**A STUDY EXPLORING THE MEANING OF CULTURALLY  
COMPETENT PRACTICE WITH CARE LEAVERS IN  
CORNWALL**

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**University Of Bedfordshire  
2018**

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COMPETENT PRACTICE WITH CARE LEAVERS IN CORNWALL**

**by  
Stacey Pellow-Firth**

A thesis submitted to the University of Bedfordshire in partial fulfilment of the requirements for the degree of Professional Doctorate in Leadership of Children and Young People's Services

**March 2018**

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Abstract

The experiences of young people leaving care in rural areas is not a topic widely researched or written about in the general discourse surrounding care leavers. The neglect of the specific needs of this group leads to universal decisions regarding practice and policy being applied without consideration given to their different needs. In particular, the cultural needs of this group of young people requires specific attention due to the demographic composition of rural areas which often comprise lower numbers of diverse cultural groups than urbanised areas.

This thesis describes a qualitative research study into the experiences of young people leaving care in Cornwall using the theoretical lens of cultural competence. The study comprised a series of interviews and focus groups with care leavers to explore their experiences of working with professionals and the impact of a rural environment. Further interviews and focus groups were held with professionals and strategic staff to gain a fuller understanding of the context of Cornwall and specific challenges to practice.

In total, 19 care leavers were involved in either the focus groups, interviews or both; 21 professionals were involved in the focus groups; and interviews with four strategic members of staff took place. The numbers of care leavers involved is small in comparison to the overall care leaver population of Cornwall, however the findings of the study provide a useful foundation from which to draw conclusions regarding practice in this area.

Culture and culturally competent practice are complex concepts to define with variation between individual interpretations. This study identified several key issues for young people in terms of interactions with professionals which could be defined as culturally competent practice. Views from professionals and strategic staff highlighted the specific challenges of achieving culturally competent practice in rural areas. The study concludes by taking account of both sets of views and making recommendations for practice and further areas of learning.

Stacey Pellow-Firth

## DECLARATION

I declare that this thesis is my own unaided work. It is being submitted for the degree of Professional Doctorate in Leadership of Children and Young People's Services at the University of Bedfordshire.

It has not been submitted before for any degree or examination in any other University.

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## **Chapter One**

### **Introduction**

#### **1.1 Overall Aim of the Study**

This study explores the experiences of care leavers in Cornwall using the theoretical lens of cultural competence. The overall well-being of children in care and care leavers is an issue of national importance with concerns frequently raised regarding their care experiences and longer term outcomes (Stein 2012; Driscoll 2013; Brodie et al 2011; Stein and Munro 2008; Wade and Dixon 2006; Dixon and Stein 2005). Culturally competent social work practice is also a matter of concern, frequently emerging as a theme of Serious Case Reviews and OFSTED inspection reports (references such as, O'Brien 2013; Battista 2011; Sands 2011; Staines 2009; Barn et al 2007; Barn et al 2005; Wade et al 2005; Grady 2004, Department of Health 2000; Department of Health 1998). This thesis aims to bring these issues together.

#### **1.2 Context of the Study**

##### ***1.2.1 Legislative Requirements***

Ensuring that the cultural needs of children and young people are met is a theme reinforced throughout the legislative framework which governs childcare social work. All children need to develop a positive sense of identity and have their cultural needs met and the Children Acts 1989 and 2000, the Assessment Framework 2000 and Care Planning Regulations Vol. 2 and Vol. 3 all emphasise the importance of taking into account identity, culture ethnicity when working with children and young people. Research has tended to focus on outcomes for young people and whether ethnicity/culture has played a part adversely or not. (Stein 2012; Malek 2011; Stein and Morris 2010; Stein 2009; Dixon et al 2006; Barns et al 2005; Stein 2005; Stein 2004; Kohli and Mather 2003; Beihal et al 1995). What appears to be lacking is clear guidance on how to meet diverse cultural needs in different authorities/settings. This is particularly significant as dual and multiple heritage children are over-represented

in the care system, while in some areas, such as Cornwall this demographic is not reflected in the workforce or placement options (Department of Health 2010).

### **1.2.2 *Cornwall Perspective***

Cornwall is the main site for this research and it is important to provide some contextual information. Cornwall has a population of 532,300 which is an increase of 33,233 when compared with estimates from the 2001 Census. As with the rest of the UK, Cornwall's population continues to grow older with increases in medical advances and life expectancy. The number of 0-19 year olds in Cornwall has risen by 21.7% to 115,300 which is a marginally lower increase than the rest of the UK. In terms of ethnic demography, at the 2011 National Census, 95.7% described themselves as White (Cornish/British/English/Welsh/Scottish/Northern Irish). A further 2.5% of residents described themselves as White (either Irish or Traveller/Gypsy or Other). The next highest group were those who described themselves as Mixed (White/Asian) at 0.3%, followed by the remaining ethnic groups at 0.1% or 0.2%. In terms of religion 59.8% stated Christianity, 39.5% stated either none, not specified or no religion, with the next highest group stating Buddhism at 0.3%, followed by Hindu and Jewish at 0.2% each. Cornwall is not, therefore, characterised by high numbers of culturally diverse groups. This can cause complexity for practitioners when considering the cultural needs of care leavers.

### **1.2.3 *Cornwall's Socio-Economic Climate***

Cornwall is one of the poorest areas in the United Kingdom with a GDP of 61.2 per cent of the national average in 2012 and is one of four UK areas that qualifies for poverty-related grants from the EU (European Social Fund). Due to Cornwall producing less than 75% of the average European GDP, Objective One funding was received between 2000 and 2006 and similarly in 2005 the same criteria met for funding, although this stream was known as Convergence funding, and was due to commence beginning of 2008 until 2013 (Cornwall Council 2013). There is massive variation in poverty and affluence in Cornwall with some areas among the poorest in England with others among the top half of wealth. In particular, the Camborne, Pool and Redruth area, one of the largest populated areas, is characterised by pockets of intense deprivation, a legacy of the collapse of the local mining industry. In this respect, financial disparity is a visual and obvious reminder of the inequality

experienced by many sections of the population. Young people leaving care are a marginalised group and the financial climate of Cornwall adds to their experience of disadvantage. Interestingly, during the course of this study the young people acknowledged there was disparity of opportunity but used comparisons with other parts of the UK rather than areas within Cornwall.

#### **1.2.4 *The Experiences of Black and Minority Ethnic Young People***

Pugh (2003) writes about diversity in rural areas and points out that the population only appears 'homogenous' in comparison to more urbanised areas with higher levels of diversity. However, what Pugh (2003) does acknowledge is that being Black or different in any other way, can be more exposing in rural areas, heightening the risk of racism due to the lack of anonymity found in larger groups (Williams 1997). Stigma and discrimination become more commonplace as 'incomers' or 'outsiders' are more visible and not accepted in the same way (Philo et al 2003b; Parr et al 2002). The Rural Race Equality Project (Dhalech 1999) was initiated in Cornwall, Devon and Somerset between 1996 and 1998 in response to the report, *Keep them in Birmingham: Challenging Racism in the South West* (Jay 1992). At the time of the project there was an overwhelming assumption, 'that there were no Black people, no racism' (Dhalech 1999, pg. 13 in cited in Pugh 2000). The project highlighted how the everyday experiences of BME people and groups in rural areas resulted in a 'cycle of discrimination', resulting in isolation and poor levels of support and service provision (Pugh 2000, pg. 138).

#### **1.2.5 *Care Leavers as a Disadvantaged Group***

Care leavers experience disadvantage on many levels. These can largely be attributed to the 'accelerated and compressed' (Stein 2012) nature of their transition to adulthood, denying them the normative opportunities afforded to their peers. It is important to acknowledge that being a 'care leaver' is not a 'fixed' state and relates to the care experience in a variety of ways. The status of 'care leaver' is a term found in legislation and defined through statutory guidance as being a young person who has spent a minimum of 13 weeks in local authority care with at least one night having been spent over the age of 16 years (Department of Education 2010a). Consequently, 'care leaver' is a term that has come to refer to young people who

have been in care at a certain time in their adolescence but does not capture the many more young people who have experience of care at some point in their lives.

In Stein's (2012) most recent work, he found that placements moves were still high (a third with four or more moves and 10% had ten or more moves) and that 37% of young people were still leaving care at 16 years, with a further 50% leaving prior to 18 years from residential care. This runs counter to the countervailing trend amongst other young people, who have more protracted transitions, and highlights the disparity in terms of opportunity as they approach adulthood (Stein 2012). The relationship between the experiences of care leavers and their peers who have not experienced care is a theme running throughout this study.

These 'compressed and accelerated' transitions to adulthood have a direct impact on the life chances and outcomes for care leavers. The older a young person leaves care, the more likely they are to be in education at 19 years, therefore moves at 16 years are likely to impact upon educational achievement. The attainment gap in education, remains considerable at all levels between care leavers and their peers, i.e. they are around four times less likely to get 5+ GCSEs A-C (Stein 2012).

Inevitably, this has implications for access to further or higher education and to employment (Driscoll 2013). Psychosocial adversity and psychiatric disorder is markedly higher than even the most disadvantaged children in private households with only 10% deemed as having 'good psychological adjustment' (Stein 2012). Between 45-49% of 5-17 year olds experience some form of mental health difficulty and those aged between 11-15 years are 4-5 times more likely to have an actual mental disorder or diagnosis (Stein 2012).

Stein (2005) discusses that helping care leavers develop a positive identity will be linked firstly, to the quality of care and attachments; secondly to their knowledge and understanding of family background and personal history; and thirdly their experience of how people perceive and respond to them and the opportunities they have to influence their own biographies (Stein and Munro 2008). These factors are linked to having an understanding of self within relationships with others.

### **1.2.6 *Researching Care Leavers in Rural Areas- A gap in existing knowledge?***

The cultural needs of care leavers is an under researched area with few studies specifically addressing practice in this area (Barn 2010; Barn 2007; Mendes and Moslehuddin 2006). Studies which include research findings on the cultural needs of care leavers have tended to focus on what is already being provided by services and make recommendations from existing practice (Stein 2012; Malek 2011; Stein and Morris 2010; Stein 2009; Dixon et al 2006; Barns et al 2005; Stein 2005; Stein 2004; Kohli and Mather 2003; Beihal et al 1995). However, what appears to be lacking is a study which focuses on the end user perspective, one which asks care leavers to explore what culturally competent practice means to them and what they want from practitioners. Therefore, this research fits closely with the body of research relating to young people's views of services more generally (Barnardos 2016; Bazalgette 2014; Munro et al 2012; Stein 2012; Munro et al 2011; Stein and Morris 2010; Brodie et al 2009; Gaskell 2009; Stein 2009; Stein and Munro 2008; A National Voice 2005; Stein 2005; Stein 2004).

A further gap in the existing research is the grouping of care leavers into a homogenous group when it comes to the areas in which they live. Research studies rarely specify the geographical location of their research samples and the needs of care leavers from more rural areas tend to be incorporated into the larger group and findings applied en masse. When thinking about the cultural needs of care leavers, there is a distinct lack of acknowledgement that they may have different and unique needs to their counterparts in urbanised areas. Other studies of rural populations have highlighted the differences in everyday social experiences and access to services (Barnes 2003; Pugh 2000; Social Services Inspectorate 1999; Streich 1999; Spilsbury and Lloyd 1998; Department of Health 1996; Hayle 1996; Cloke et al 1994; Couchman 1994) and this study seeks to further explore this idea and draw attention to the comparisons.

## **1.3 Social Work Practice and Care Leavers**

### **1.3.1 *Culturally Competent Practice***

Cultural competence is crucial for the social work profession as it is concerned with providing culturally responsive services to diverse cultural groups with the aim of

effectively meeting diversity of need and reducing or eradicating disparity and inequality in service delivery (Harrison and Turner 2010; Jack and Gill 2010). Cultural competence comprises an awareness of the values and behaviours of diverse groups, alongside a developed sense of self reflection and an ability to carry out the social work task, consistent with this awareness (Petrovich and Lowe 2005, pg. 163).

Proponents such as Laird (2008) would argue that a high level of cultural knowledge/experience is required and that in order to acquire this, practitioners need to have experienced higher levels of diversity. My professional experience, together with inspection reports suggests that there is a misconception amongst many practitioners regarding what constitutes cultural diversity. Cornwall has faced considerable challenges in terms of its provision of support to service users from diverse cultural backgrounds. Ofsted reports from 2009, 2011a, 2011b and 2013 have all cited responses to equality and diversity as being 'variable' (O'Brien 2013; Battista 2011; Sands 2011; Staines 2009). The different reports have picked out various themes such as, where evidence was seen, it was ' cursory'; workers not confident in identifying and meeting the needs of those from different cultures; limited use of recording; assessments not reflecting diversity of need; interventions not tailored accordingly; insufficient consideration to how diversity may impact on parents' ability to protect.

Following on from this assertion it could be suggested that practitioners from rural areas are maybe less able to meet the cultural needs of service users due to their lack of experience of working with high levels of diversity. This argument is problematic; clearly not all social workers will have this experience, and such a lack of experience should not militate against high quality practice. However, it is striking that this view is present in the literature, even while it has been disputed (Johnson and Munch 2009; Laird 2008; O'Hagan 2001). Such findings highlight the importance of high quality social work practice but what this entails to the young people and practitioners is a matter of much debate. Social work practice is interactional and in order to undertake the task, practitioners must seek to create relationships with service users. Therefore what becomes apparent is that in order to be culturally competent one must also work relationally.



The Munro Review (Munro 2011) has re-affirmed the importance of the relationship which workers have with children and young people as a tool in understanding their world or 'lived experience'. The 'relationship' itself can be seen as a tool, an important source of information for the practitioner to understand how best to help, as well as being the means by which help is offered (Ruch 2005). Trevithick (2003) talks about relationship based social work as being particularly effective for children in care who may be vulnerable and need help in overcoming traumatic experiences, losses and separations. Young people in care themselves report the critical importance of positive relationships with carers and, to a lesser extent, with other social work professionals in providing security and helping them develop in different areas of their lives (Trevithick 2003).

Studies by Brodie and Morris (2010) which looked at improving educational outcomes for children in care, Stein and Morris (2010) which focused on 'safe and settled' accommodation and Shuker (2013) which evaluated the role of specialist care placements for victims of trafficking all emphasise the significance of professional relationships in promoting positive outcomes. The research also highlights the challenges associated with building such relationships in the light of the serious disadvantage, including abusive and disrupted relationships, experienced by many young people prior to their entry to care and often mirrored by their experience of the care system. Understanding how care leavers interpret social work practice will aid the development of a theoretical and practical understanding of cultural competence but will also give a more thorough understanding of the specific cultural needs of care leavers.

### **1.3.2 *Personal Motivation***

Identifying what research symbolises to me is intrinsically linked to the motivation for undertaking this particular study. My motivation in some senses of the word, is simplistic, I have an interest in working with care leavers in Cornwall which is where I live and want to research their experiences and where possible, improve practice. I am particularly interested in care leavers' experiences of culturally competent practice and how this is applied in a rural area such as Cornwall. The latter motivational factor is multi-faceted and composed of personal, professional and wider influencing factors.

Firstly, whilst I do not wish for this section to be a personal biography, being White Cornish and living in Cornwall for the majority of my life gives me a unique perspective on what life is like living here and what some of the challenges may be for care leavers. Conversely, living and experiencing Cornwall for this length of time means that there are many unknowns in terms of other parts of the country and it is comparisons of this nature that I am particularly keen to explore further. To give an example of my personal interest, when travelling to London, whether for professional or leisure reasons, I am innately interested in the differences between city and rural life. My interests and observations are with everything from the more obvious aspects like diversity of people, transport and consumerism to the more 'unseen' aspects, such as support networks, disadvantage and overall socio-economic struggles.

The significance of this in terms of my motivation for this particular study is concerned with the rurality of areas like Cornwall and how life in general is either similar or different to other parts of the country. This approach to thinking could be described as a type of radical looking, viewing what I already know through a different lens and opening up the familiar to a new or different way of thinking (Clough and Nutbrown 2012). This critical approach to thinking about the world around us forms an integral part of my professional practice. In the widest sense, as a competent practitioner I strive to not only undertake my role, but seek to find ways of improving what I do. My personal interest in the variation of people's experiences and difference in general, means that when considering how to improve my professional practice, I also look to these general principles.

In my wider professional capacity, the concept of cultural competence has sparked an interest into how, as practitioners we apply those principles to care leavers living in Cornwall. I would hypothesise that care leavers in Cornwall experience life differently to those living in other parts of the country, yet they are considered the 'same' when it comes to discussions regarding the needs of care leavers. Are the disadvantages greater in Cornwall than elsewhere? If so, it could be argued that care leavers from rural areas like Cornwall, have additional disadvantages but their voices are not individually heard in wider research and literature. Therefore, as practitioners, can we be truly culturally competent if the needs of this group are not

fully recognised or even understood? My motivation to undertake this study is therefore based on my desire to further understand an integral part of my professional practice, within the parameters of my personal desire to better understand the challenges of living in a rural area such as Cornwall. Goodwin and Goodwin (1996, pg.5) state that,

‘Research results in the creation of knowledge to solve a problem, answer a question and better describe or understand something.’

The purpose of my study is not to answer a specific question, I am concerned with creating knowledge by better understanding the experiences of care leavers in Cornwall and those practitioners who work with them. In reference to my earlier discussion on the concept of ‘research’ itself, I also hope that this new knowledge will bring about change by way of improvements in practice and/or service delivery.

#### **1.4 Aims of the Research**

The overall aim of this research is the development of culturally competent practice with care leavers in rural areas. Specifically, the objectives of the study are:

- To review current research relating to culturally competent practice with care leavers;
- To explore, via the views of care leavers in one rural authority, their understanding of ‘cultural’ need and their perception of how far this has been present during their contact with social workers and other professionals;
- To gain the views of social workers, personal advisors and other relevant professionals regarding their experiences of practice in Cornwall
- Produce new knowledge regarding ‘good’ and ‘poor’ practice in respect of difference and diversity amongst care leavers.

## **1.5 The Approach of the Study**

This is a qualitative study that aims to explore the views and experiences of young people. As explained above, the concept of cultural competence is a complex one and the methodology needs to be able to probe the meanings and understanding held by participants. There are two elements to the methodology: (1) focus groups with groups of care leavers and professionals which will provide the opportunity to identify initial themes and (2) semi-structured interviews.

There are similarities with my approach and that of action learning, or at least in the exchange of knowledge between researcher and participant. Action research aims to improve and involve, is problem and context specific and involves a research process whereby participants are involved in the change process (Hart and Bond 1995). Themes identified as part of the young people's focus groups were used to generate discussions in the professional's focus groups and interviews. This knowledge exchange will serve to raise awareness and empower participants to consider current practice and ways of improving, creating a collaboration, allowing for participants to become agents of change (Hart and Bond 1995).

### **1.5.1 *Main Themes Addressed in the Study***

The primary focus of this study was how young people leaving care experienced culturally competent interventions from professionals. Cultural competence has a complex meaning which is not easily understood outside of the social care profession. Therefore, the experiences of the young people were interpreted using a theoretical lens of cultural competence. During the young people's focus group and interviews three main areas were addressed; firstly, their understanding of 'culture' using a variety of words and terminology in line with their understanding; secondly, the professional response to their specific needs; and thirdly their experiences of living in Cornwall with specific reference to challenges and barriers.

The focus groups and interviews with professionals took place after those with the young people. Themes and ideas for further exploration were drawn out in discussion with the young people and used as a basis for many of the questions used with the professionals. The main areas covered with professionals were

focussed on: firstly, the barriers young people leaving care face; secondly, the impact (if any) living in Cornwall has on the young people; and thirdly, are there any challenges or barriers to practise due to living in Cornwall. After the focus groups and interviews were transcribed, Nvivo software was used to analyse the content and findings were drawn.

The next section gives detail on how the thesis is organised with a brief summary of each chapter.

## **1.6 Outline of Chapters**

*Chapter One* being the introductory chapter has introduced the study and explained its rationale, aims and objectives

*Chapter Two* details the methodological approach of the study. The study is a qualitative study which uses focus groups and semi-structured interviews. Chapter Two explores ethical considerations such as the position of the researcher, the potential impact on informed consent and the ways in which this was mitigated against.

*Chapter Three* comprises a literature review of the literature on care leavers relevant to this study. It focusses on topics relevant to the study such as statistical information regarding outcomes, the needs of Black and Minority Ethnic groups, the developmental stage of adolescence, transitions, the formation of identity and the restorative nature of care.

*Chapter Four* considers the theoretical basis for culturally competent practice. This chapter explores the developments which have led to the inception of this approach to respond to cultural needs. The chapter looks back at past approaches such as radical social work, anti-racist anti-discriminatory practice and examines the key debates of the time and rationale for adopting new methods. The key components of culturally competent practice are identified and the tensions regarding its usefulness as a concept highlighted.

*Chapter Five* 'Responding to the Cultural Needs of Young People Leaving Care', is the first of three findings chapters and focusses on the experiences of the young people shared during the focus group and interviews. The focus of this chapter is; firstly, the young people's definition of culture and what is important to them; secondly, the specific needs of BME groups and; thirdly, the specific challenges of living in Cornwall. This chapter uses the notion of cultural competence to interpret the young people's experiences and identify areas of good practice.

*Chapter Six* is entitled 'The Meaning of Care' and is the second findings chapter. This chapter also focusses on the experiences of the young people as expressed through the focus group and interviews. The chapter examines three main areas; experiences of stigma and difference; importance of relationship based practice; and the transitional nature of care. In this chapter the young people talk about their care experiences and how they have been interpreted.

*Chapter Seven* 'Developing Culturally Competent Practice' is the final findings chapter and represents a professional perspective on the challenges of meeting the cultural needs of young people leaving care in Cornwall. The chapter uses the views and experiences of professionals and strategic staff, obtained through focus groups and interviews. The chapter is closely linked to the previous findings chapters and seeks to find areas of commonality and discrepancy in order to draw conclusions regarding practice.

*Chapter Eight* concludes the thesis by bringing together the main themes identified throughout the study and making recommendations for practice and further areas of study.

## **Chapter Two**

### **Methodology**

#### **2.1 Introduction**

‘To have evidence based social work without the evidence from a service user perspective seems unthinkable. Yet there are not inconsiderable methodological problems...these problems call for greater methodological sophistication and variety in understanding the social worlds of those receiving services.’ (Stein, 2004. p.6-7)

This is a qualitative study of care leavers’ experiences of culturally competent practice in Cornwall. The concept of culturally competent practice is complex and the study was designed to probe the meanings and understanding held by participants. The study comprised two elements: focus groups with groups of care leavers and professionals which provided the opportunity to identify initial themes and semi-structured interviews which provided scope for further probing and exploration of the key themes.

In this chapter, the research rationale is considered and the key components of the study are identified in terms of their significance to the overall design of the study. What research means to me as an individual is examined and the motivation for researching care leavers in this particular context is explored. As this is a practitioner study rooted in practice, it is also important to consider the ethics and process of undertaking the research as a practitioner working within my own professional context. A discussion on methods used and sampling techniques highlights key methodological concepts around research with young people, specifically care leavers.

This chapter highlights my strong belief in research as a means of achieving positive change for the benefit of those who are researched. I have a compelling desire to

ensure that I not only uphold the researcher's fundamental aim of 'doing no harm' but extend this to be a catalyst for positive change. I acknowledge that this is not always possible, and also that research can be experienced as oppressive. The position of the researcher or the generation of knowledge is rooted in relationships of power (Smith 2012; Butler 2003; Powell 2002) but my determination to ensure that care leaver's voices are 'heard' means that my research decisions are carefully considered with this premise in mind. Therefore, methodology is more than a technical exercise but an overall attitude to the conduct of study in accordance with a participatory approach.

## **2.2 Aims of the Research Study**

As described in Chapter One the overall aim of the research study is the development of culturally competent practice with care leavers in rural areas. Specifically, the objectives of the study are:

- To review current research relating to culturally competent practice with care leavers;
- To explore, via the views of care leavers in one rural authority, their understanding of 'cultural' need and their perception of how far this has been present during their contact with social workers and other professionals;
- To gain the views of social workers, personal advisors and other relevant professionals regarding their experiences of practice in Cornwall
- Produce new knowledge regarding 'good' and 'poor' practice in respect of difference and diversity amongst care leavers.

## **2.3 Ethical Considerations**

### **2.3.1 *Research as a Moral Act***

'Good social work research means doing social work research with a confident and robust understanding of the values on which social work itself is predicated'

(Butler 2003, pg. 19)



Butler (2003) suggests that social work research is at risk of 'being robbed' of its potential to contribute to the 'radical, emancipatory and transformative ideal' (Butler & Drakeford, 2001, p. 16) which is in line with the overall shift to managerialism in the social work profession as a whole (Ayre and Preston-Shoot 2010). Parton (2000) and Beresford and Evans (1999) discuss the drive in social work for efficiency, rationality, structure and outcome measurement, all of which leave little room for a conceptualisation of social work's moral purpose. However, a fundamental premise of the social work profession is to put power into the hands of those with little or no influence, regardless of the climate of practice and social work research should emphasise the same. This does not disregard the tension that invariably exists between this and the social worker's role as an agent of social control, but fits with the ethical consideration to 'do no harm'.

Smith (2012, pg. 83) writes about the lack of acknowledgement of social work's 'moral, social and political' tasks in the current climate of managerialism and how the 'blunt instruments' employed cannot capture the complexity in the lives of service users. He goes on suggest that not exploring the 'the messiness of practice' will lead to an 'incomplete and distorted' portrayal of the very situation practitioners have set out to understand. Therefore, empowering practice requires social work as a profession to acknowledge the inherent inequalities in its own systems and the potential for research to identify such areas. Humphries (2003) discusses the inequality of power relationships that exist between the state, the organisation, the worker and the service user and how these relationships often shape the nature of the social work task (Garcia and Melendez, 1997; Pollack, 2004).

Social work research must be undertaken on the basis that regardless of the design of the study or intentions of the researcher, it may replicate inherent structural inequalities (Strier 2007). Smith (2012, pg. 86) discusses the importance of the knowledge from service users as a 'legitimate contribution' and talks about the language of 'user participation' as a means of influencing the shaping of service delivery. Therefore an underlying principle in giving service users a voice in social work research is that of collaboration, drawing on their experiences as a way on shaping the services they receive.

### **2.3.2** *The Approach of the Study*

Furlong and Oancea (2005, p. 7) discuss how some types of social work research are about practice or how it is carried out, experienced by the service user and whether or not it is effective. Other types are concerned with the context of practice or the service user groups and the socio-economic climate in which the practice operates. The type of research carried out in this study can be viewed as containing elements of both of the above, namely understanding care leavers' experiences of working with professionals *and* understanding the way in which the context of Cornwall impacts upon those experiences.

This study was fully supported by Cornwall Council's Children's Services and I was able to access any resources needed to complete the research. It is important to highlight the privileged position which I was able to adopt with such a high level of organisational support. The research process was supported through the allocation of an administration worker to support with tasks such as sending out and receiving information from the young people (discussed further later on in Chapter). Expenses accrued from the focus groups and interviews, such as refreshments, travel costs and incentives were agreed prior to the research taking place and funded by Cornwall Council. Staff throughout the department gave up their time to take part in focus groups or be interviewed. As my employing agency, Cornwall Council permitted me the time to undertake the research and flexibility to write up the findings. The findings of this study will be presented to the young people who took part in the study and widely disseminated to managers and staff.

### **2.3.3** *The Practitioner Perspective*

This study gives a practitioner perspective on the experiences of care leavers in Cornwall. Powell (2002, pg. 24) states that 'issues of epistemology and methodology are inseparably linked to practice'. This is a similar point made by Beresford and Evans (1999) regarding the interrelated nature of the researcher and participant mirroring the complexity in relationship between the practitioner and service user. Arguably the context in which social work operates cannot be fully undertaken without a practitioner led focus, however there is a very limited amount of research carried out by practitioners themselves (SCIE 2005).

Fuller and Petch (1995, pg.10) demonstrated the significance of practitioner research in their four year study finding that 'practitioners are often better placed than academic researchers to develop collaborative relationships at all stages with professionals and service users'. Specifically they suggest that by having knowledge of context they were able to draw upon their practice skills to aid the research process and their knowledge of the organisation to support the collection of data (Mitchell et al 2008). However, Fuller and Petch (1995, pg. 11) also discussed the potential risks of practitioner research in respect of not being able to offer a strong enough critique of the practice context and a general lack of skills in the research process itself. This is an interesting point and as a practitioner, a tension which feels familiar due to my immersion in the practice of leaving care rather than in critique of it. Undertaking research of this nature requires of me the ability to critique my own practice as well as that of others in a manner not ordinarily used in social work.

In terms of knowledge regarding the subject area, I have worked with the 16+ team and care leavers for several years and have built up relationships with team members, managers and young people. My current role is separate and I now work in a different area of the service (still with adolescents) so I have no direct line management responsibility for leaving care social work practice. There are several advantages to having built specialism in this area. I have developed strong working relationships with staff and understand the context of the work. I am a familiar face to many of the young people, not necessarily through direct work but through participation groups, Children in Care council and so on. These factors aided rapport building during the research process and gave credibility to me as a researcher. Conversely, I was also mindful that my position within the authority may have had a detrimental effect on the young people's view of giving their consent and feeling pressurised or compelled to do so. This issue will be fully explored later in the Chapter.

#### **2.3.4 *The 'Insider' Perspective***

This study can therefore be considered a piece of 'insider' research. While there are ethical issues associated with such work, they can also generate valuable learning, and this study has provided ample opportunity for reflexivity and learning for my personal practice, and the practice of the agency. I considered ways of minimising

this effect (see also, section relating to 'Consent') and made clear to all participants, at each stage of the study, of their right to not participate or withdraw, without prejudice.

Dwyer and Buckle (2009, pg. 61) point out that qualitative researchers are not separate from the study, they are always incorporated into the process and the quality of the relationships formed during the research process are essential to its success. They suggest that the issue of 'researcher membership in the group' is an integral part of the approach due to the intimacy of the role in both data collection and analysis. Insider research involves consideration of the researcher as a member of the group to be studied, sharing features such as identity and experiential characteristics (Asselin 2003; Kanuha 2000). In the case of this study, my experience within the 16+ service and my position within the local authority became significant and comprised an integral element of the methodology. I had a general 'feel' for the context of the work and any possible issues which may arise. Having worked in the same area of service for so long I had professional relationships with social work colleagues and had prior knowledge of the young people through my day to day contact.

Adler and Adler (1987) talk about the importance of an insider role as providing a level of legitimacy, allowing researchers quicker access and acceptance which will ultimately result in a greater depth to the data gathered. Dwyer and Buckle (2009) discuss the benefits of acceptance as providing a degree of openness and trust not present if considered an outsider. The commonality is an important feature to participants as well as the researcher due to acknowledgement of a shared understanding of the distinctiveness of the context. However, there are specific difficulties with this approach which relate to assumptions made on the basis of a 'shared understanding'. The difficulties of this approach are highlighted in another strand of the literature which views insider research as problematic from an epistemological perspective, as lacking objectivity and scientific reliability (Asselin 2003; Rose 1985).

Asselin (2003) and Rose (1985) write about the importance of understanding one's own bias and approaching insider research as if you know nothing about what is

being studied. This is virtually impossible to achieve therefore I suggest the focus should be on questions of what may be assumed on the part of the researcher, triangulating views in order to ensure assumptions are not carried throughout the study. The assumptions are two way and it is possible that participants will likewise make assumptions of the researcher's understanding. Dwyer and Buckle (2009) highlight the impact this can have throughout the study if assumptions are not checked from an insider perspective, for too much emphasis (or too little) on shared factors between researcher and participant. As Rose (1985, pg. 77) states, "if you do not appreciate the force of what you're leaving out, you are not fully in command of what you're doing" (p. 77). The supervision process which involved a high degree of critical questioning was an important means through which to ensure critical distance during the research process.

I made several assumptions at the outset regarding the experiences of young people and staff and these assumptions were based on my position as an 'insider'. For example, I made an assumption that the difficulties of living and working in Cornwall would be shared between the young people and professionals. While, some examples of this were evident (see Chapters Five and Seven) I had based this on my understanding of the challenges rather than a young person's perspective. In anticipation that there would be areas such as this where I would make assumptions I started the research process with the focus group and interviews with young people so that themes could be highlighted and then followed up with professionals. By undertaking the research in this way, I was able to minimise the effect of any bias I may have had regarding the topics to focus on and use the areas identified by the young people as a starting point.

#### **2.4 Considerations in Designing the Study**

The methodological design of this study lends itself to an interpretive approach. Kazi (2003) highlights the characteristics of interpretive approaches as being focussed on language, perspectives and meanings of reality that emerge through narrative. The methods used in this study, focus groups and semi-structured interviews fit well with this. The sample was constructed flexibly and although a similar format was followed

for focus group and interviews, no two experiences were the same. In this study, concepts have been developed inductively from the data and literature review.

#### **2.4.1 *Terminology Used***

The focus of this study is to hear the voice of young people leaving care in Cornwall. Language is powerful and the use of certain words and phrases can reinforce or empower entire groups of service users. For this reason, the use of terminology in this thesis needs to be clarified. Care leaver is a term universally used and specified in legislation to denote a young person who meets the criteria for leaving care services (Department of Health 2010a). However, this is not a term widely used by the young people involved in this study. This raises an interesting issue around terminology and its meaning to those it defines. This thesis frequently uses the phrase 'young people leaving care' as this denotes the person before the label, signifying the importance of those characteristics which are shared and universal before highlighting that which makes the young person unique or in some cases more vulnerable.

#### **2.4.2 *The 'Voices' of the Study***

The 'voices' in this study are those of the young people, leaving care staff (both statutory and non-statutory), strategic and senior staff, academic literature and of course my own. One of the biggest challenges of this study, was by far the process of finding ways of 'hearing' the voices of the young people. Finding the 'voice' of vulnerable young people through participative research is notoriously difficult (Brodie 2016). Participation plays an important role in rebalancing power dynamics and shaping service delivery but is often approached tokenistically (Lansdown 2010). The term 'participation' has many meanings and is used to describe a range of activities from directly being involved in decision making right through to service design and delivery. This study's aim was to 'hear' the voice of the young people in order to make recommendations which may improve service delivery. Ensuring that young people were able to participate in this way presented a number of challenges.

In relation to this study, the challenges were multi-faceted but one of the most obvious was geography. Cornwall has a care leaver population of around 350 which is high for a single local authority. Cornwall is a rural county, spread over 3,500 sq

km with an approximate population of 550,000. Cornwall is the 12<sup>th</sup> largest county in the UK (out of 48) in terms of geographical area but the population density is comparatively much lower indicating that people/communities are more dispersed across the county. As in other parts of the country care leavers live across the county with higher numbers living around the more urbanised areas and towns.

### **2.4.3** *The Young People's Sample*

Chapter one discusses the demographics of the care leaver population in Cornwall. The sample was drawn from a group of approximately 350 care leavers in Cornwall. Care leavers are young people defined as a 'Relevant' 'Eligible', 'Former Relevant' or 'Qualifiers' by the Children (Leaving Care) Act 2000 and Vol.2 and Vol. 3 of the Care Planning Regulations 2010 (Department of Health 2010). In order to be defined as a 'Relevant', 'Eligible' or 'Former Relevant' care leaver, young people must have spent at least 13 weeks in the care of the local authority from the age of 14 years, with at least one night in care over the age of 16 years. 'Qualifying' care leavers will have spent at least one night in the care of the local authority over the age of 16 years. To be defined as a care leaver (as opposed to a child in care) young people will be over the age of 16 years.

In Cornwall, the breakdown in respect of leaving care status is as follows (figures given are approximate due to the changing characteristics of the leaving care population):

- 90 Eligible- 16 or 17 year olds still in care
- 20 Relevant- 16 or 17 year olds no longer in care
- 220 Former Relevant- over 18 year olds
- 30 Qualifying- any age over 16 years, entitled to advice and guidance

### **2.4.4** *Exclusions*

A young person's suitability to participate was assessed in partnership with the 16+ worker/professional, particularly for young people who may have had additional vulnerabilities, such as mental health. Young people with additional needs were not automatically excluded on this basis, however consideration was given as to whether to invite them to participate on the basis of 'doing no harm'. Care leavers who may

have had complex needs in terms of their capacity to understand and give consent to this research (for example significant learning disability or serious mental health difficulties) were not invited to take part in this research. Those young people who are classified as 'Qualifying' care leavers were not invited to take part in this study for two specific reasons. Firstly, they have often not spent a considerable period of time in care (by definition this can be as little as 1 day over the age of 16 years) and may not have had the experience of being a care leaver in the way in which this study is directed. Secondly, in terms of support following this study, qualifying care leavers are offered a less comprehensive package of support (requirement is to 'keep in touch', rather than provide regular, structured support), meaning that their subsequent support needs may not be adequately met if they participated.

#### **2.4.5** *Selection of Participants*

The sampling of participants therefore presented particular challenges in terms of ensuring that young people had meaningful opportunities to participate. For reasons of time and resource I was not able to send out information to the entire care leaver population as even if only a third responded it would still be a struggle to manage the numbers in terms of focus groups and interviews. My overall aim in terms of sample size was to undertake a focus group with 6 to 8 young people followed by 8 to 10 semi-structured interviews. I anticipated that some young people would be interested in participating in both the focus group and interview with others favouring just the one method.

Care leavers were reached in two distinctly different ways, the first of which through anonymised selection. Working with an administrative colleague, we used an anonymised report of all care leavers which was broken down by age and gender. Age was an important factor, as without having other identifying information, this gave a rough idea of whether the young people would still be in care, supported lodgings, living independently or engaged in higher education. I was keen to obtain a range of views from young people of different ages, so although the list was anonymised young people were broadly selected to meet this objective.

Thirty care leavers a month were selected, ensuring that there was a spread across the age range. The response rate by the end of the month, determined whether the



process would be repeated again the following month. If less than three responses a month were received, the process was repeated. The eventual outcome of this process was that information was sent out for three consecutive months with ninety care leavers receiving information in this way.

The second method for reaching potential participants was more targeted and involved professionals making direct contact with young people. Accessing children and young people in care for research purposes is complex and time consuming as noted by Heptinstall (2000), Liabo (2013) and Wigfall and Cameron (2006). By approaching the professionals who had direct contact with the young people and carers I hoped that I could gain their trust about me as a researcher and the value of the research. Once I had reassured them, I could then emphasis the important role they had in supporting the young people to participate. A meeting with the 16+ team and other relevant professionals was held to discuss the research and how they could contribute to the study in terms of their own views and supporting the young people they work with to participate. Copies of the young people's information (as well as separate emails being sent) were given to each member of staff and they were asked to speak to the young people they work with about joining the focus groups or interviews. Due to my position in the local authority and in recognition of the influence which young people may perceive me as having (notably the position of team manager in the 16+ team) the initial information did not contain my name and the return address was a generic postal address. Using this method, information was given out by professionals to approximately 70 young people.

Some young people would have received the information twice, from a professional and through the post in line with the first method. It would be difficult to break the numbers down by specific method as accurate information on response rate could not be obtained due to the anonymous nature of the initial selection. Overall, 26 responses were received from young people who either wanted to know more or wanted to participate. Following a response being received from a young person, I made contact by their chosen method (information on the form) to acknowledge and thank them for the response, answer any questions and give details of focus group and interviews. I also ensured that professionals were made aware of the details of

dates and times for the focus groups and interviews so that they could support young people to attend if they needed additional help.

In total, 19 young people were involved in this study and whilst I acknowledge this is a small sample size, it is appropriate given the qualitative design of the study. Much of the research on the care population tends to involve small samples although it is noted by Stein and Morris (2010) and Brodie and Morris (2009) that there is often a lack of information in care based research about how samples were accessed.

#### **2.4.6** *Characteristics of the Participants*

Of the 19 young people who participated, the majority were young people over the age of 18 years who were living independently in social housing or private rented accommodation. This could be regarded as a success of the sampling method as accessing young people living independently can be difficult. Two young people were 17 years and living in foster care with a further two young people over the age of 18 years living with foster carers under a 'Staying Put' arrangement. Two young people over the age of 18 years lived with carers under an adult supported lodgings scheme. In terms of gender, there was an even split over the entire research process, however the focus group with young people comprised more male care leavers than female. In terms of cultural diversity, the majority of the young people identified as White British, one of the young people identified as Asian Chinese, two identified as having a religion, one young person identified as Transsexual. The make-up of this group being primarily White British corresponds to the overall population demographic in Cornwall (see Chapter One). Several of the young people talked about having additional needs and/or medical conditions but in line with ethical guidelines, all young people had the capacity to give consent. The young people had a mix of educational and employment statuses with the majority either working or attending college.

The exact geographical spread of the young people who participated is difficult to comment on *per se* as the majority of the young people made their own way to the focus group and interviews and for reasons of confidentiality their addresses were unknown to me. However, from general conversation with the young people and

travelling expenses paid to them, I estimate that the young people came from several different areas, spread across the County.

The sample reflected what is known about the key characteristics of the care leaver population in Cornwall (discussed previously in this chapter). Throughout this process I spoke regularly to professionals regarding any young people who may have been interested. On reflection, this was key to the success of recruiting participants as the initial conversation with the young person was with a known and trusted worker. This encouraged the young person to participate in the process and facilitated any difficulties which may have arisen with the practicalities of attending the focus group or interviews. Some young people responded directly to the information they had received through the randomised sampling, however the number of participants from this process was lower. If this study were to be repeated I would use the same dual method of selecting participants as the spread of young people involved was only achieved through undertaking the process in this way.

#### **2.4.7 *Building Rapport***

As part of my methodological approach to the actual research itself, I attended and became part of several care leaver groups run by Carefree. Bearing similarities with a study by Manchester and Pett (2015) this approach sought to gain trust with young people through adults whom they already had established relationships. Carefree is a Cornish voluntary organisation, partly staffed by care experienced practitioners and mentors which works specifically with children in care and care leavers. I wanted to become a familiar face to the young people so that they felt comfortable to be interviewed by me. I had arranged to have a room available for interviews alongside the groups so that young people could join me for an interview before, after or during the group itself. This approach achieved the desired outcome and I was able to interview six young people across the different care leaver groups.

Attending these groups had a further benefit which is aligned with the principles of ethnographic studies. This study was not an ethnographic study, however as McNeil and Chapman (1989, pg. 90) discuss, it allowed me as a researcher to 'access the 'lived experience' of this group. The benefits of understanding the participants to be studied or having first-hand practice experience were highlighted in a study by User

Voice (2011) and whilst the purpose of my study was not to research care leavers in an ethnographic capacity, attending the groups afforded me the opportunity to immerse myself in their 'normal' day to day activities. Conversations arose regarding what was going on in the local area, where young people were spending their leisure time, changes in the local authority and other pertinent issues for care leavers. The group gave valuable insight into the informal social support that the young people gave to one another and the manner in which the group self-regulated itself in terms of boundaries and acceptable or non-acceptable behaviours.

It needs to be made clear at this stage, that the conversations and information obtained during these groups were not recorded or formally included in the study. I did not intend to use the groups in this way and therefore did not seek consent to do so. The purpose of attending the groups was to familiarise myself with the young people and create a sense of trust in me as an individual/researcher. If I were to have introduced consent forms and ask permission to record or take notes on what was being discussed, I feel sure that I would have created a barrier to engagement and prevented the natural flow of conversation and dynamics within the group. However, due to the complexities in building rapport with this service user group I can also appreciate the potential value of undertaking an ethnographic approach.

#### **2.4.8** *The Professional Sample*

The professional sample was drawn from strategic members of staff and managers within the local authority, statutory workers from the 16+ service and voluntary sector workers from Carefree. Two separate focus groups were undertaken with staff from the 16+ team and workers from Carefree. In addition to the focus groups, 4 semi-structured interviews were undertaken with the Head of Service for Cornwall children's services, Senior Manager for children in care and care leavers in Cornwall, Chief Executive Officer for Carefree and the young people's Participation Manager.

As discussed earlier in this chapter, I attended team meetings with staff from 16+ service and Carefree to talk about the research aims and selection of participants. At these meetings I was able to agree a date and time for the professionals focus groups and gauge interest from staff as to whether they would like to contribute to the process. In terms of numbers of participants, twelve members of staff (six social

workers and six personal advisors) from the 16+ team attended the first focus group and nine workers (six youth workers and three care experienced peer mentors) from Carefree, the second focus group.

Prior to any research taking place agreement from the Head of Service and Senior Manager was sought and even at this earlier stage, they both expressed their interest in being interviewed. Similarly, as part of the initial discussions regarding undertaking this research with care leavers, both the CEO of Carefree and Participation Manager expressed interest in being interviewed. These professionals play vital strategic roles in the services for care leavers in Cornwall and their involvement in the research was crucial. The focus groups and semi-structured interviews with strategic staff took place after the data collection with young people. The rationale for this was to ensure that the research was young person focussed and the themes identified could be followed up with professionals and strategic staff.

## **2.5 What is the Purpose of the Research?**

When first thinking about how to approach the research study it struck me that understanding what I considered to be 'research' and my own motivation for that 'research' would influence and possibly direct the study more than anything else. These are maybe points to highlight for the seasoned researcher, but for me, being new to the field of research, concepts which needed greater exploration. In terms of definition, there is a widely held view that the primary purpose of any social work research is to promote the development and improvement of social work practice (Beresford and Evans 1999).

Positioning myself as a social researcher means that my ultimate aims are associated with understanding social phenomenon and behaviour, developing and improving our responses to the human state and the problems of our socially constructed world. Clough and Nutbrown (2012, pg.4) refer to social research as a 'moral act', one which concerns itself with changing for the good or making things better. However, the moral nature of research is given varying degrees of priority and other, more positivist accounts may give more emphasis to questions of

effectiveness or scientific value. Also, researchers may well be motivated by a desire to improve, but have relatively limited power in generating change.

The construct of the research is strongly influenced by my desire for greater understanding and improvement of practice (and services) specifically in relation to young people and care leavers. Featherstone (2014, pg. 71) talks about a shift in conceptualisation of social workers from 'knowledge users' to 'knowledge makers'. She stresses the importance of practitioner research in organisational learning and advocates for a more active relationship with knowledge rather than an unconditional acceptance of evidence. She suggests that practitioners use research skills to examine their own assumptions and judgements and spend time with service users talking to them about their lived experience. Research then becomes less about 'establishing facts' and 'reaching new conclusions' and more about making a difference, understanding care leavers views and the views of those that work with them, creation of knowledge, improving practice and being a catalyst for change.

Fook (2002) discusses the widening disparity between practitioner knowledge and the theory generated by professionals and how this poses questions regarding who is best placed to generate knowledge. Beresford and Evans (1999) further this by asserting the view that social research appears to play a more significant role in the implementation and evaluation of policy but a limited role in its development. The relationship with social research and the development of policy is complex as noted by Glass (2001). However, the participatory tradition in social research with the focus on empowerment is a strong motivating factor in hearing the voices of those who may not ordinarily have influence. This approach, described by Beresford and Evans (1999) as a 'progressive response' fits well with the overall methodological design considerations of this study.

## **2.6 The Role of the Participatory Approach**

It is crucial that the voices of care leavers in Cornwall are heard and their experiences used as a basis for the creation of knowledge and improvements in service delivery. Smith (2012, pg. 443) talks about research not lending itself to 'neat' or straightforward, easy to apply solutions but dealing with uncertainty,

alternatives and differing interpretations. Social work research is concerned with the complexity of the social world, it is service-user focussed, action orientated, holistic and varied (pg. 445). The motivation for undertaking this research is to further understand the experiences of care leavers in Cornwall and create knowledge which is based on the complex interplay between practitioner and service user.

As a social researcher, I hold the strong belief that 'hearing' is to be taken literally and accomplished through holding focus groups and undertaking interviews. This is clearly not the only way of 'hearing' the voice of those being researched and the desire to conduct research in this way is influenced by other factors. My own understanding of research, as a 'moral act' alongside the motivation for undertaking the study is strongly influenced by my desire for understanding social phenomenon and social change (Bryman 2016). Even the language being used (or more significantly not being used) points towards qualitative methods, such as an emphasis on experiences, problems and thoughts rather than testing, control groups or RCTs.

In order to achieve social change for disadvantaged or vulnerable groups, such as care leavers, the 'voices' need to be heard to influence those changes. A familiar theme for disadvantaged groups is the apparent lack of their views in local practice and wider policy, arguably adding to their disadvantaged position and creating a culture of 'being done to' rather than in partnership with. This notion is referred to by Clough, pg. 67) as *'turning up the volume of the suppressed or inaudible voice'*.

Smith (2012) discusses research justifications being firmly embedded in a commitment to social justice. Shaw (2007, pg. 662) points out that the choice of methods should not be the focus but, 'the extent to which these are consistent with these core values'. He goes on to suggest that the methods do not necessarily need to be associated with methods but on 'principled positions that work on behalf of excluded groups' (pg. 662). If this study were to progress along a quantitative route, it would still, to a certain degree be certain to 'hear' the voice of this group. Questionnaires, for example would give a breadth of information in terms of numbers that focus groups and interviews would be challenged to achieve. However, adopting a qualitative approach as is the case in this study, means that the 'data' will be

derived from the richness of individual experiences and the thoughts shared, which quantitative methods would just not be able to match. In a similar respect, it is also about the quality of experience for the participants who were asked to give up time, therefore important that the experience of being involved in the research was a good one (Shaw 2007).

A significant point to acknowledge here is that it is not merely a wider notion of social research which better lends itself to qualitative methods but a personal one also. My professional experience has largely been with care leavers and adolescents and I am familiar with undertaking one to one sessions and groups with young people. Therefore my comfort zones in terms of approaches will always fall within qualitative methods which enable face to face contact with individuals and groups, listening to experiences and exploring themes. However, the methods also need to be able to achieve the overarching research aims, which in this case relate to understanding the experiences of a specific group and social change by improving practice for care leavers who at a wider level may not always have their voices heard (Stein 2014). Therefore, the justification for selecting these particular methods is two-fold; resting with my initial rationale for undertaking the study and careful consideration into what will enable me to carry this out to the best of my ability.

## **2.7 Ethics**

### **2.7.1 *Ethical Approval Process***

A research proposal was drawn up in line with the University of Bedfordshire's ethical guidelines (<http://www.beds.ac.uk/iasr/ethics>). The proposal was approved which allowed me to approach Cornwall Council's Research Governance Framework with specific details of the research proposal. Prior to submitting this proposal, a discussion was held with the Head of Service to ensure that the research was in line with the overall ethos of the service and to gain provisional authorisation prior to submission to Cornwall's Research Governance Framework. The proposal subsequently secured approval through this committee.



### **2.7.2 *Informed Consent***

Young people were over the age of 16 years and therefore able to give their own informed consent. Young people who were 16 or 17 years old who gave consent were included in this research if myself and professional/16+ worker deemed there to be no additional vulnerabilities. Young people over the age of 18 years were able to fully give their consent and were only precluded if there were substantial issues with their capacity to give consent (as above). Written and signed consent was required by all participants taking part and it was a requirement that the form was signed at the first meeting. The form contents were read out to the young person so that they had the opportunity to ask questions and clarify any doubts. This was particularly important as some of the young people had learning or communication needs and required the concept of consent to be re-phrased. When I was confident that the young person understood that their consent is voluntary and could be withdrawn at any stage, and that they were happy with the process, they were asked to sign and give consent.

Young people were informed at each stage of the research (including at the start of interviews, focus groups, end of data collection) of their right to withdraw at any stage with the agreement that any information they had contributed could also be withdrawn and destroyed if that was their wish. I made it clear to the young people that this would be without prejudice which is likely to be of particular significance to the young people due to my position in the authority. I was conscious that the young people must feel able to withdraw their consent when they are informed that the research would be carried out by me. It was crucial to assure participants of the independent nature of the research and that no adverse consequences would result from the decision not to take part. None of the young people or professionals had any questions or queries about this. Following the completion of the research, a time limit was given for young people to withdraw their consent to their anonymised information being used in the final thesis. This is in recognition of the difficulties involved in removing data from a published piece of work.

### **2.7.3 *Confidentiality and Disclosures***

The limits and significance of confidentiality was explained to the participants at the outset of each meeting. Young people were informed that the information shared

with me (and anyone else involved in the research) would be kept confidential unless a disclosure was made that would make me concerned for their own safety or that of another individual. If a disclosure of harm was made (of which there were none) appropriate referrals would have been made following the Working Together 2013 guidelines. If issues of concern arose regarding a young person, which were not of a safeguarding nature, but as the researcher I felt concerned by (of which there were none) I would have notified the professional/16+ worker. Young people would be informed at each stage of the process if any action was being taken following any disclosures of harm/concerns.

The purpose of this research is to identify areas of strength and weakness in professional practice, therefore I anticipated being given examples of poor or practice which is lacking. If issues of concern were raised by young people regarding the inappropriate conduct or practice of a worker (of which there were none) I would have discussed any necessary action with the Head of Service. I would have only done this if, as a researcher and experienced social worker I believed that the information I had received was of a harmful or damaging nature.

#### **2.7.4** *Support to Young People*

The focus of this study is care leavers, therefore they all have a social worker and/or personal advisor allocated to them. Young people's views were sought and if requested their allocated workers and if relevant/appropriate, carers were notified of participation in the research. All young people involved in the study had my contact details by way of email address and mobile phone number and were encouraged to make contact throughout the duration of the study if they had any concerns or questions. The findings of the study will be presented to them following completion of the process.

#### **2.7.5** *Access to Information and Data*

Data was gathered in several ways, through recording and transcribing discussions during focus groups, by the taking of notes during interview and by the writing up of notes after interviews. Care leavers were informed of how their data would be collected and used and at all stages given the option of withdrawing their consent and information. Access to information and data was restricted to myself and

assigned research team at the University of Bedfordshire. In the case of the young people's focus group, the group facilitator who was a youth worker was present throughout but had no access to any of the transcripts or other elements of the research process. Databases were password protected and hard data was stored in a locked cabinet and destroyed at the end of the project. Participants were notified and had access to full copies of the final report and a summary version when the study was completed.

### **2.7.6** *Considerations for Location and Venue*

The selection of venues and timing was also carefully considered to further create a sense of familiarity and to make it as easy as possible for the young people to attend. The focus group was held at a local youth project which in effect is a young person's space which professionals go to rather than a professional's building which young people attend for formal meetings. The location of this venue was mid Cornwall, near a train station and although the venue was central, still posed some difficulties for some young people to attend due to the rural nature of the County. Young people's transport costs were re-imbursed and they travelled by a variety of means including car, train and walking. The focus group was held in the evening to take into account work/college and travel time.

Holding the focus group and interviews at venues designed for young people, away from local authority offices was deliberate. This was part of the overall aim of wanting to hear the views of the care leavers in an environment comfortable to them, but maybe unfamiliar to the researcher. This is an important concept to explore from a methodological perspective. The notion of 'radical looking' emphasises what you already know and making this unfamiliar (Clough and Nutbrown 2012). I have extensive experience in working with young people, but due to the statutory nature of my role, much of the work has been framed within the 'professional' role, ie statutory visiting and child in care processes following *The Children Act 1989 Guidance and Regulations Volume 3: Planning Transition to Adulthood for Care Leavers* (Department for Education 2010a). Of course, social work practice with young people is flexible and not as prescriptive as I may have suggested, however visits would often be in foster placements, meetings held at local offices etc.

I have no doubt that most of the views shared with me during this work would have been honest and genuine, however the context in which the views were expressed was very different to the one I wanted to create with my research. Clough and Nutbrown (2012, pg. 25) write about ‘the arrest of experience’ and how as researchers we should be holding our ‘experiences up to the light’ and examine the differences. My choice of venues was purposeful, to step outside my professional comfort zone of what was familiar to me and place myself in environments familiar and welcoming to young people.

## **2.8 Focus Group with Care Leavers**

The aims of the focus groups were: firstly, to acknowledge that some young people may prefer to speak as part of a group; secondly, to identify themes, areas of consensus and disagreement regarding the meaning of ‘culturally competent’ practice in the context of their individual experience; thirdly, for young people to give their views on ways to improve practice; and lastly to identify issues (which may be from a particular individual) to be followed up in semi-structured interview. I also reiterated at the focus groups the opportunity to participate in an interview following on from the groups. The aims of the focus group with professionals were similar to those of the young people. Data from both focus groups were analysed thematically using Nvivo and key issues identified for further exploration in the individual interviews.

Hess (1968) discusses the advantages of using focus groups by setting out five principles for the process itself; synergism, snowballing, stimulation, security and spontaneity. The overall aim was to create a context for these processes to unfold as with familiarity of the group I was hoping for a willingness on the part of the young people to share thoughts and experiences, bounce ideas off each other, debate, concur and form opinions. In thinking about the advantages it is also important to recognise the potential drawbacks of using focus groups. Factors such as participants being uncomfortable in group settings, not contributing, others ‘contaminating’ individual’s views and wider difficulties such as the group itself being difficult to manage and therefore data extraction difficult to achieve (Dawson 2002).

Taking into account the challenges and rewards of working with young people in groups I took the decision to work with an individual/group facilitator (youth worker) familiar to many of the young people when undertaking the focus group. Billington (2009) advocates for research to be undertaken by people known to children and young people as far too many already have a number of different adults involved in their lives. By working with this facilitator the young people were already put at ease through trust and familiarity and felt safe to share their experiences. The capacity for the young people to be objective was taken into account in selecting this particular individual due to their familiarity. However, after careful consideration and recognition of the difficulty in securing young people's views the potential disadvantages were greatly outweighed by the advantages. This research decision worked well and if the study were to be repeated I would recommend the use of a group facilitator who was familiar to the young people.

### **2.8.1 *Facilitating the Focus Group***

Despite my day to day work with young people, my primary feeling before this group started was of anxiety. I was anxious that young people would not turn up, I would not ask the right questions, they wouldn't speak and so on. We had allowed extra time either side of the focus group for refreshments and general conversation which I felt was important to enhance familiarity and ease any initial discomfort of the group setting. Later, reflecting on this I feel that this may have benefitted me as much as it did the young people as gave me a chance to relax and chat with the young people. I was expecting four or five young people to attend out of a potential eight and there would be a mix of young people who would know of me (through my previous role) and those unknown to me. In total seven young people attended (one part way through) and I can honestly say that I was delighted that so many wanted to participate. As the young people started to arrive, I felt more comfortable in my ability to achieve what I needed to as I felt I was on familiar ground.

Some of the group knew one another, all but one knew the facilitator and I knew four young people. This familiarity was positive in some respects, ie already know one another, familiar setting, comfortable to speak in front of each other but conversely means that there could be some issues which they feel unable to share with people they know as well as the possibility of some voices being more dominant than others

due to that familiarity. I was also conscious of how some of the young people known to me may perceive my position in terms of the 'power' I have and how this may affect the views they express. Several individual issues cropped up before the focus group started and the facilitator and I had agreed beforehand that we would attend to anything of this nature. This was an important point to reflect on as firstly, the researcher's primary aim is to 'do no harm' and secondly I was clear that this focus group was for the benefit of the young people.

I need to be clear that none of the issues raised were of a case management or safeguarding nature as that would clearly be in breach of my ethical position as researcher (see above regarding process for disclosures). However, several of the young people were in need of advice or guidance and support in one way or another. Therefore, from their perspective it is entirely reasonable to ask for this from trusted workers, regardless of the setting. From my perspective to not attend to these individual issues would be to 'cause harm' by an act of omission and be at odds with my belief of research being a moral act. This is affirmed by Oakley (1993, pg. 58) when she writes about 'personal involvement' being a crucial way of understanding the perspective of others.

On reflection, the decision to allow extra time either side of the focus group was positive and allowed individual issues to be addressed away from the focus group. A further benefit was that young people felt more at ease and valued as individuals, which I hoped would increase their overall participation in the group discussions. An important part of my methodology was to incorporate an element of group work into the focus group. This had two purposes: firstly I wanted to spend some time with the group exploring the concepts of 'culture' and 'identity' and what these mean to individuals. Culture has different meanings to different people and this was the overall principle I wanted to explore, however I also wanted to make sure that the young people knew what I meant when I referred to culture or identity. These are words often used by professionals when working with young people but I am not convinced that their meanings are always understood.

The main aim for incorporating an element of group work was to provide the young people with an opportunity to gain something from the focus group as well as their

contribution to the study. My belief in the importance of working with young people in this way and supporting them to conceptualise how they understand themselves is fundamental to me as a practitioner and a powerful motivation to undertake the study. The activities which the facilitator and I devised were all based around the principles of group work with young people and related to understanding their own individual identity and culture.

The focus group itself was successful and most young people were able to talk about their experiences. As initially predicted some voices were more dominant than others and it was a constant dilemma whether to allow these young people to continue or not. The relationship I had with the facilitator meant that we were jointly able to manage some of this through gentle interruption if appropriate, nods or eye contact between ourselves to acknowledge the need to pick up on points or views which may have been missed. Including the activities at the start, the group itself lasted for over three hours which is a long time and could have gone on for longer. However, this factored in three refreshments breaks (one of which was for pizza so a little longer than a tea/coffee break) and as previously discussed, some time for individual issues to be raised at the start. I have reflected on this and do not feel that I would have conducted the group in any other way if I repeated the process. The facilitator and I had planned the group, specifically taking into account the needs of this group of care leavers and for all intents and purpose the group had been a success.

## **2.9 Semi-Structured Interviews**

Following the focus groups, a series of semi-structured interviews were held which were more local to where the young person lived, with venues selected as close to placement/accommodation as possible. The purpose of these interviews was, firstly to acknowledge that some young people may prefer to speak on a one-to-one basis and, secondly, to probe further into issues identified as part of the focus groups, or follow up on individual issues. There was the possibility that themes may arise regarding specific groups, i.e. gender, disability, sexuality, in which case the semi-structured interviews were used to probe further. The interviews were fully transcribed and analysed using NVivo.

It was important for young people to not be disadvantaged by not being able to participate because of anxiety regarding group settings. Once again, this relates to the core belief in research as being for the benefit of those being researched, therefore alternative methods of contributing to the study were a necessity. At the end of the focus group I asked if anybody would be interested in talking to me on a one to one basis and although there seemed to be a lot of interest to do this at this stage, when the time came only the two mentioned wanted to be interviewed. I interviewed these two young people several months before the remaining young people, so in effect used these as pilot interviews. Fontana and Frey (2000, pg. 645) write that,

‘Asking questions and getting answers is a much harder task than it may seem at first.’

If one quote could sum up my initial feelings around undertaking interviews then this would be it. The concept itself is a surprisingly simple one, to sit down with a young person, ask questions, get answers and repeat. However, the reality was much more complex and having the benefit of pilot interviews beforehand, invaluable to subsequent interviews. I had prepared an interview schedule with specific questions and it was this schedule which I used for my pilot interviews. Clough and Nutbrown (2012) talk about interview schedules as guiding the interview but not dictating the path and I feel that this was something which I quickly adapted to as my pilot interviews progressed. I moved away from specific questions towards topic areas as the former became too limiting and not responsive enough to the views I was being presented with.

In effect my methodology was evolving into using un-structured interviews which focussed on topic areas and tended to represent more of an open conversation with the young people rather than a formal interview. McNeil and Chapman (1989) discuss the importance of the unstructured interview in building rapport and trust with participants due to the lack of pre-set or imposed responses, providing the opportunity for participants to express their own views and opinions rather than what the interviewer may want. McNeil and Chapman (1989, pg. 58) go on say that this



approach may increase validity of the research due to the participant feeling more comfortable to open up, adding that,

‘...this type of interviewing may be more likely to get at sensitive information difficult to reach using other methods....Further probing by the interviewer is likely to uncover deeper meanings with regards to beliefs and attitudes...’

In undertaking interviews in this way I made the assumption that the views and experiences held by the young people would not be easy to obtain and would require a deeper level of questioning. This made me interrogate the questions or topic areas themselves as I was conscious of the need to make these as clear and purposeful as possible. In thinking about research questions Clough and Nutbrown (2012) suggest using the Russian Doll principle and Goldilocks test. Although a light hearted way of thinking about such an integral part of the study, the concept of refining a question or topic area to make it more defined, alongside, the principles of ‘not too big’, ‘not too general’, ‘not closed’ were valuable considerations to take on board. The experience of my focus group also supported this process as I was conscious during this that having a list of specific questions did not meet the needs of the group. I adapted the questions I had prepared for the focus groups in line with themes which were generated in order to be responsive to what was being expressed to me. This guide formed the basis of my interview schedule, which developed into a list of topic areas with some more structured questions.

## **2.10 Analysis of the Data**

### **2.10.1 *Thematic Analysis***

The data collected during the course of this study was analysed thematically using NviVo software. Fook (2002) talks about thematic analysis as being one of the most commonly used methods to analyse material for emerging and recurrent patterns. The importance of this approach is that the themes emerge from the data and are not imposed by the researcher, therefore a degree of analysis takes place alongside this process (Dawson 2009). Huberman and Miles (1994, pg. 432) suggest a check list for organising a thematic analysis and these general guidelines were followed in in undertaking the analysis. Initial categories were created which followed onto

patterns and themes, making note of clusters of information or reoccurring phrases then comparing and contrasting, noting links and finally evaluating against emerging ideas and existing theories. Strauss and Corbin (1994) discuss the importance of this approach as a necessary component of the interpretative process of thematic analysis, whereby, 'grounded theories are never developed in a vacuum, but ultimately in relation to current thinking and discourse around a phenomenon'.

### **2.11 Limitations of the Research Study**

The qualitative approach of this study aims to specifically explore the views of care leavers in one rural and one urban authority. Studies which incorporate research findings on the cultural needs of care leavers have tended to focus on what is already being provided and make recommendations from existing practice. This study will explore with care leavers, in more depth how they experience culturally competent practice and how practice can be improved. In the context of Cornwall where the research took place, the findings will support the continued development of support services to care leavers. However, there are limitations to this study in terms of the numbers of care leavers who were involved. It is acknowledged that although I will be forming recommendations from the findings, it may not be possible to transfer these to other groups of care leavers.

### **2.12 Conclusion**

This chapter has set out to explore the methodological design of the study and rationale for using the chosen methods. The methodological design is firmly rooted in the premise of research having a moral purpose, the purpose of which is to do 'no harm' and to uphold the welfare of the participants to ensure that their voices are heard. In this chapter I have sought to examine the implication of my position within the local authority, a position which deems the research I have carried out as 'insider research'. The potential disadvantages of insider research have been discussed and the methodological decisions made to ensure bias was minimised, highlighted. Practitioner research such as this offers an alternate perspective, one which is firmly rooted in understanding those processes and practices which are often accepted without challenge. A key component of this study has been the way in which

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culturally competent social work practice is interpreted by the young people and professionals. It is therefore necessary to explore the theoretical basis of cultural competence and this shall be addressed in the next chapter.

## **Chapter Three**

### **Theoretical Basis of Cultural Competence**

#### **3.1 Introduction**

In order to understand the extent to which young people leaving care experience 'culturally competent practice', it is important to examine what is meant by 'cultural competence' and how this idea has developed in social work practice. It is a complex and often contested term and idea. This chapter explores in greater detail the concept of cultural competence, its history and how it interacts with social work. It is also important to demonstrate why the language of cultural competence has been used in this study, rather than other related ideas such as 'anti-oppressive' practice.

All that said, the term cultural competence is widely and often un-critically used, particularly in the health and social care fields to describe a practitioner's ability to work effectively with different cultural groups (Jack and Gill 2010). In a paradoxical way, cultural competence both incorporates and can be distinguished from previous notions of anti-discriminatory and anti-racist practice. Social work practice with individuals, families and communities, particularly those from disadvantaged or minority groups must acknowledge the inherent oppression and discrimination faced and take steps, accordingly to challenge and overcome (HCPC 2012). This anti-discriminatory approach is intrinsic to the ethos of culturally competent practice but the way in which it distinguishes itself from 'merely' challenging oppression is through the positioning of the practitioner and the centrality of 'self' in the exchange. This is a departure from the 'othering' of those who may be 'different' to the practitioner, towards recognition of the differences between individuals (including the practitioner) and how those differences may impact on the helping relationship.

This chapter begins by defining culture and noting the importance of this definition in understanding the social work response to cultural need. It continues by exploring the origins of emancipatory practice in social work and the significance of the

'Radical Social Work' movement in building the foundations for anti-discriminatory and anti-racist practice. The chapter then traces developments in anti-oppressive practice including the notion of intersectionality and multiple oppressions, examining the key debates surrounding each concept. The chapter concludes with a discussion on cultural competence and its usefulness as a practice concept.

### **3.2 Seeking a Definition of Culture**

There is a distinct lack of reference in policy and legislation regarding culture and cultural needs. The Children Act 1989 which is rightly heralded as the one of the most influential pieces of childcare legislative of its time states that professionals must '*give due consideration to a child's religion, racial origin and cultural and linguistic background*' s.22 (5) (c) (O'Hagan 2001; White, Carr and Lowe 1991). However, for an Act known for its clarity it fails to give a definition of culture which leaves the term open to be defined by those who use it. O'Hagan (2001) suggests that this omission runs the risk of definitions being developed which could be based on limited knowledge and are biased or founded on negative perceptions. Therefore, in order to proceed with this chapter it is important that a definition of culture is given. The following explanation primarily takes a sociological and anthropological stance in order to unpick the concept of culture. It is important to understand culture in this way as the methodological design of this study is firmly rooted in a qualitative approach which seeks to understand social phenomenon.

In Edward Tylor's early work *Primitive Culture* (Tylor 1870 cited in Spencer-Oatey 2012) culture is defined as,

'that complex whole which includes knowledge, belief, art, morals, law, custom, and any other capabilities and habits acquired by man as a member of society'.

This early definition links two important elements of culture; namely its multi-faceted composition and the significance of a shared meaning. Hofstede (2001, p.21) highlights this when he writes about, 'the collective programme of the mind which distinguishes the members of one human group from another'. Adding to this, Senge (1990) talks about, 'the way we do things around here', which is suggestive of a set

of norms followed by individuals which may or may not involve an awareness of the impact on one's actions.

Culture is a shared phenomenon, comprising multiple individuals and groups which can span generations or merely relate to a snap shot in time. Human beings are members of multiple cultural groups which exist simultaneously and may alter over the life course. Cultural groups can include association with a particular race, ethnicity, country of birth, language or religion. They can also relate to generation, familial role, gender, sexuality, disability, socio-economic class and can be associated with the culture of a particular region, area, past-time, lifestyle choice, street or place of work or study. Avruch (1998 pg.17) suggests that the more developed populations become the more complex their cultural make-up. Furthermore, with increasingly complex cultures there is the increased opportunity for the development of sub-cultures (Spencer-Oatey 2012).

Culture is not a linear path to be followed but exists differently for each individual and consequently, it is uniquely interpreted. Concurring with this, Spencer-Oatey (2012) write about the 'fuzzy' nature of culture and how group members are unlikely to share identical views or beliefs but show general resemblances. Culture is both individually and socially constructed with differences in interpretation occurring within and between cultural groups. Examples of this can be viewed in orthodox or liberal interpretations of religious practices. An individual's culture is not homogenous or uniformly organised and association with cultural groups can be viewed as learnt rather than inherited.

### **3.3 Social Work and Culture**

The cultural identity of any one individual is multi-faceted and dynamic, changing and emerging over time. The social work task of meeting this need is not without its challenges, particularly as the meaning of 'social work' itself has shifted over time and has carried considerable weight. From its historical origins as an activity carried out by those working in voluntary organisations to uphold values of family life and hard work to the more radical movements which challenged capitalism and the fragmentation of society, social work's identity has shifted. This is visible in the

accounts of individual social work careers, as well as the research that tries to track these changes. The shift in focus from individual to collective interpretations of what social work entails is not fixed and involves elements of both. Social work must operate at the intersection between the individual and wider societal forces in order to critically question the forces and structures which reinforce inequality or powerlessness in minority (or less powerful) groups (Thompson 2000).

This poses complexities for practitioners when responding to the cultural need of service users. Much of modern day social work is framed within a legislative and bureaucratic context, requiring practitioners to adhere to set processes. Whilst not intending to minimise the impact of modern day social work, the bureaucratic nature of the task is an added challenge for practitioners when meeting the diverse cultural need of individuals. The social work response to cultural need has evolved over many years and the following sections will explore those developments which have contributed to this.

### **3.4 Social Work's Emancipatory Origins**

The emancipatory element of social work can be identified through the ideas of 'Radical Social Work' which explicitly committed itself to social justice and empowers service users to view the inherent power discrepancies in society and social work itself. 'CaseCon' was a socialist organisation for social workers active in the early 1970's provided momentum and voice for the radical social work movement and published the CaseCon Manifesto. The manifesto placed significance upon socialist principles of 'a worker's state', alongside collective activism, democracy, participation and an understanding of oppressed groups in terms of their social and economic position (The CaseCon Manifesto in Bailey and Brake 1975). Although originally emphasising class and structural inequalities such as poverty, radical social work extended the analysis to incorporate a wider range of socio-political inequalities such as gender and ethnicity (Thompson 2010; Ferguson and Woodward 2009). The impetus of the radical social work movement slowed towards the end of the 1970's but it's core principles and focus on wider socio-political and structural inequalities lived on through growing notions of anti-oppressive practice (Thompson 2010).

The related term, 'anti-oppressive' practice originated in the late 1960's/early 1970's and was primarily concerned with social justice, and improving life quality for communities, groups and individuals (Dominelli 1998). Anti-oppressive practice involves working in partnership with service users to empower them to overcome barriers and take control of their lives. It involves a critically reflective approach from the practitioner, one which questions the 'given' social order and provides minimal intervention in order to reduce the oppressive potential of the social work task (Dalrymple and Burke 2006). Social work became one of the first disciplines to both take an emancipatory approach; one which recognised discrimination *and* attempted to make changes.

Within this process social work also drew on wider cultural developments. An important movement emerged in the 1960's and 1970's which sought to address the relationship between individual experiences and societal forces. Feminist social work perceived 'women's troubles' as being the result of their position in society and their predefined roles as women (Dominelli 2002, pg. 6). Feminist perspectives in social work were regarded as a way of understanding the experiences of women and those they interact with, in a society where gendered roles are often predefined. The feminist movement was a key development in contextualising anti-oppressive practice, although opponents would suggest it was not encompassing enough of other forms of oppression (Dominelli 2002; Williams 1989). In a similar timeframe, approaches which sought to address inequality based on race and ethnicity were emerging. Using this movement as an example, the next section will explore the social work response.

### **3.5 The Social Work Response to Anti-Oppressive Practice**

The advent of anti-oppressive practice was timely as there is evidence that an insensitive assimilation perspective underpinned early approaches to cultural diversity. Any emphasis on diversity was ignored and practice with ethnic minority groups was guided by, '...the prevailing assumption that (services) should be provided in exactly the same way as for the majority' (Cheetham et al 1981, pg. 3). This 'one size fits all' approach minimised not only the specific needs which diverse cultural groups may have, but assumed that the interventions provided met the



needs of these groups, without consideration or adaptation. If service users were unwilling to participate, (often because of the inappropriateness of service offered) or the intervention 'failed' (once again due to the inappropriateness) the blame was attributed to the individual, which often led to further or more punitive measures, reinforcing the marginalisation already experienced. The implications of an individualistic and narrow focussed response to Black and Minority Ethnic (BME) groups served to pathologise negative views which in turn perpetuated racist practices and 'excused' professionals from taking action (Maiter 2009).

In terms of social work practice there appeared to be an underlying theme that on an individual level some social workers could acknowledge the economic and social disadvantage experienced by ethnic minority groups while at the same time social and organisational policy ignored racism and social disadvantage on a wider or structural scale (Graham 2007; O'Hagan 2001). When Francis (1991, pg. 81) stated that, '....it is important that social work.....takes a historical perspective on race and racism', he clearly advocated for an approach which moved away from the 'pathologised' individual ('prejudiced person') towards a systems response which acknowledged inherent racism as an institutional feature of society.

Dominelli is one of the most influential contributors to this body of thinking and has been writing about anti-racist and anti-oppressive practice since the 1970's. She proposed a model of anti-racist social work which challenged the ideological construct theory of race and the belief in superiority of one dominant race over all others (Graham 2002). She proposed that a widespread lack of acknowledgement or outright denial of racism existed; an individual blaming strategy to ethnic minority groups was evident and in practice there was a 'colour-blind' approach based on principles of assimilation which avoided tackling acts of overt racism due to lack of confidence (Dominelli 2008). Dominelli challenged the idea that social work was not a racist institution and proposed that social workers should actively seek to expose the inherent racist ideology entrenched in practice (Ely and Denney 1987). This was an important proposition which Dominelli made and the response by the educative element of social work practice generated yet more debate around the essence of anti-discriminatory practice through the publication in 1991 of the Central Council for Training in Social Work's (CCETSW) Paper 30.

CCETSW Paper 30 (1991) attempted to introduce specific anti-racist components into the Diploma in Social Work programme by way of a competency approach. It promoted 'ethnic sensitivity' (although cautioned against the use of stereotypes) and sought to connect racism to other forms of oppression such as those based on class, gender, age, disability, sexuality, namely 'structural oppression'. However, Paper 30 did not acknowledge that other forms of oppression may be as significant or even more so, than racism. Despite Dominelli's influence into Paper 30 she was critical of approaches which separated racism from other forms of oppression. She believed that multiple oppressions interact and potentially exacerbate one another forming an individual experience of discrimination. Furthermore, Dominelli debated the definition of 'Black' and the apparent hierarchy linked to which groups could experience racism, claiming that Paper 30 did not take into account culture or cultural differences.

O'Hagan (2001, pg. 118) discusses how racism was seen, 'as the most common and worst form of discrimination' experienced by those identified as 'the black community.' By connecting the term racism to the term Black, and homogenising this group's identity, there is a danger that racism towards other groups could be viewed less seriously or the overall concept misunderstood (Modood 1994). The focus of social work education in terms of emancipatory practice at the time focused on 'racism', which minimised the impact of how racism on different minority groups and as Dominelli (2008, pg. 23) states, '...tended to reduce the identity of black people to one solely determined by racism.'

Furthermore, focussing on a singular facet of oppression negates the effects of multiple or intersectional inequalities and assumes, a singular problem definition of cause and type, followed by a simplistic solution (Macey and Moxon 1996). In essence this reinforces the marginalisation of minority groups, who are defined as such by social work academics with origins in an inherently racist institution. Macey and Moxon's (1996, pg. 304) powerful critique of Paper 30 would support the point that, '....racist exclusivity is rooted in racist stereotyping and thinking....' Their examination demonstrated that much of the anti-racist literature was not informed by sociological, economic, political research and was 'theoretically inadequate'. (pg. 297)

Paper 30 is not remembered for its educative contribution to the field, but for generating debate regarding the definition of race and anti-racist practice and the pervasiveness of institutional racism, which includes the Euro-centric perspective on which it was based. It was published in the context of social work (education in particular) needing to collectively embody the emancipatory role of the profession. However, what it highlighted was the preoccupation with topical and prevailing concepts of the time, rather than confronting oppression on a wider scale (Macey and Moxon 1996). The criticisms of anti-racist social work being narrow focussed were just and further demonstrated the challenges of adopting a framework for anti-oppressive practice.

### **3.6 Developments in Cultural Competence and Social Work 1990-2016**

During the 1990's the focus on anti-racism slowly moved towards anti-oppressive practice which was in response to the narrow focus of anti-racist practice. This wasn't an attempt to dilute the significance of anti-racist practice but to incorporate other forms of discrimination, i.e. on the grounds of class, gender, disability, sexuality together with racism (Laird 2008). As discussed earlier in the chapter, cultural identity is complex and multi-faceted, requiring a social work response which is equally dynamic. O'Hagan (2001, pg. 120) claims that, 'Racism is not the most common form of discrimination in Britain as a whole' and a preoccupation with it, '...precludes serious consideration of other forms of discrimination.....' A preoccupation with anti-racist practice places different forms of discrimination into a hierarchical mode of thinking. Macey and Moxon (1996, pg. 301) surmised that this was the flaw with anti-racist literature and publications which were 'characterised by ambiguity and confusion', resulting in literature that followed trend rather than presented with originality and rigour.

Thompson (1998) suggested that setting a single oppression against another created further segregation which he believed gave 'ammunition for those who oppose' (pg. 165). Thompson's (2007) Personal, Cultural and Structural (PCS) analysis was a major contribution to the developing theories of anti-discriminatory practice and a useful way of understanding the shift in focus. Thompson's PCS model promotes a multi-dimensional analysis of oppression including the potential

for discrimination in social worker's own practice (Graham 2007). The significance of the PCS model lay in its transferability across multi-oppressions and societal contexts; in effect it had the potential to stand the test of time and has been extensively used in social work education to this day.

The PCS model was an important development in anti-oppressive practice as it's simplicity and transferability ran counter to prevailing trends of ideologies being uncritically adopted or logical arguments being misinterpreted due to fashion or fad (Gomm 2003) such as was the case with CCETSW Paper 30. The shift towards anti-oppressive practice recognised the significance of multiple oppressions and models such as Thompson's PCS analysis, sought ways of understanding impact. Influential commentators were seeking to dispel the hierarchical mode of thinking which put racism as the most significant form of oppression, seeking to further explore how multiple oppressions intersect with one another (Dominelli 2008; Thompson 2007; O'Hagan 2001; Dominelli 1998; Macey and Moxon 1996; Modood 1994). It is therefore of no surprise that during a similar time frame, the concept of intersectionality became an important ideological approach in conceptualising this very subject.

### **3.7 Intersectionality- a Framework to Understand Multiple Inequalities**

While cultural competence is key to this study, it should be recognised that it is one of a group of concepts which are important when thinking about the experiences of young people leaving care and social work practice. Intersectionality can be viewed as a method of analysis which considers different forms of social inequality, oppression and discrimination and explores the interaction and multi-dimensional overlap. The strength of this model lies in its capacity to adapt to an ever changing society, where individual definitions of cultural identity are fluid. It does not necessarily seek to abandon categories used to define ourselves, moreover celebrate the endless possibilities of diversity. It is a concept originally formulated by Crenshaw (1989) and was initially adopted as a feminist framework to organise thinking around structural inequality of power and privilege based on gender. Notwithstanding its influential history in feminist writings, Hearn (2011, pg. 89) writes about it as a concept that is not new,

‘The notion of intersectionality and the complex social phenomena to which it refers, go under many names and labels, including multiple oppressions, multiple social divisions, multiculturalism, multiple difference, ‘diversity’

Phoenix (2011, pg. 137) states that intersectionality is a ‘*bottom-up*’ concept that originated through observations of everyday practices and the social positioning of individuals and groups rather than being introduced by any one discipline or theorist. Intersectionality supports analysis based on the positioning of individuals in multiple categories which extends the thinking on multiple oppressions to consider the interplay rather than merely a tally of how many categories an individual may sit within. Lutz et al (2011) suggests that it, ‘...serves as an instrument that helps us grasp the complex interplay between disadvantage and privilege...’ The ingenuity of this approach is that by focusing on the significance of the intersecting characteristics of multiple oppressions, thinking is not constricted to the categories in which an individual may be positioned. Dill et al (2007 in Phoenix 2011, pg. 149) concur, stating that, ‘...intersectionality is unique in its versatility and ability to produce new knowledge...’ whilst being well placed to uncover continuing intersecting oppressions and inequality.

The complex manner in which intersectionality offers an original discourse for analysing multiple oppressions is highlighted by Crenshaw (2011 pg. 29) when writing about Black women. Crenshaw postulates that Black women are discriminated against not on the basis of being Black or on the basis of being women, but for being Black women. This approach negates any hierarchical thinking in terms of which oppression is the least or most damaging and focusses on the interplay between the two. Crenshaw offers criticism to anti-discrimination legislation which has an ‘either or’ focus and proposes that the focus of such policy rests on the presumption that the outcome would be fair or just if discrimination didn’t occur. Following this line of thinking, if for example, being a Black woman is not recognised as being additionally (intersectionally) oppressed, the outcomes on which anti-discriminatory legislation are based will be inherently flawed, hence any measure of discrimination against these ‘norms’ will too be inherently flawed.

Mechthild and Neuber (2011, pg. 75) provide further illustration to the concept of intersectionality when discussing the findings of their longitudinal study of the integration of young men from East and West Germany who had spent time incarcerated. When considering their findings through a lens of intersectionality, a point of discussion was to consider if the young men who had experienced multiple disadvantages through their life course were still more privileged than young women (who had not experienced multiple-disadvantage) because of their inherent masculinity. Without doubt, this raises fundamental questions regarding the complex interplay between disadvantage and privilege, questions that do not have simplistic, one dimensional answers.

Intersectionality is a way of conceptualising the complex interplay between multiple oppressions. It moves away from viewing oppression in a hierarchical manner, a manner which ironically runs the risk of minimising disadvantage as it ignores the cumulative effects of inequality. Contemplating multiple oppressions in this way requires practitioners to be self-aware and possess a level of reflectivity to consider not only the service users they are to work with, but their own position within that helping dynamic. Intersectionality is a concept for understanding disadvantage which does not stand in isolation but feeds into the notion of culturally competent practice.

### **3.8 Cultural Competence**

#### **3.8.1 *Applying the Concept of Cultural Competence in Social Work Practice***

While cultural competence has strong historical roots within social work practice, further consideration is needed to understand how it may take place in practice. Much of the literature surrounding culturally competent practice focusses on ethnic or racial elements of culture. O'Hagan (2001) sees this as a legacy of the pre-occupation with anti-racist practice from the 1970's. An example of this is the handbook for practitioners compiled by Harrison et al (2010) which is intended to be a 'tool' to support the development of cultural competence. As a reference tool, it does highlight the key issues and debates surrounding culturally competent practice, but falls short of acknowledging culture in its widest sense by focussing on definitions which relate solely to ethnicity, race or religion. This type of limited focus in the literature poses challenges for practitioners as it could lead to interpretations of

culture which disregard those less obvious or visible elements of an individual's cultural identity (as discussed earlier).

Culturally competent practice seeks to encompass broad interpretations of cultural identity as practitioners should not be constrained by narrow, inflexible definitions. This closely links to the earlier discussion on definitions of culture and the breadth of its meaning. The literature suggests there are three areas in which this can be developed; reflective self-awareness; cultural knowledge; and cultural competent interventions; all of which are examined in turn, below.

### **3.8.1.1**      The self-reflective practitioner

Cultural competence comprises three main elements; reflective self-awareness, knowledge possessed by practitioners and the ability to provide culturally responsive interventions. Firstly, self-awareness whereby practitioners are aware of their own biases, prejudices and cultural beliefs and embody the basic principle that the beliefs of others may not be the same as your own (Kohli et al 2010). This primary element of cultural competence is the most significant departure from previous developments in anti-oppression practice as it comprises a reflective exploration of the practitioner's own attributes, attitudes and cultural beliefs and how these may impact on the helping relationship. As suggested by McPhatter (1997, pg. 121) it begins with a credible and, '...honest assessment of one's level of functioning with culturally different others' or as O'Hagan (2001) terms it, a 'rigorous self-exploration'.

This exploration takes into account the potential impact of power of the practitioner, whether that be implicit, ie through a practitioner's gender or ethnicity; explicit, ie a lead professional in a child protection case; or as in many cases, both implicit and explicit. It takes into account racism, particularly in terms of past and present discrimination and recognition of cultural differences (Kohli et al 2010; Laird 2008; Graham 2007; Sue 2006; McPhatter 1997). Sue (2006) contends that a culturally competent practitioner is able to acknowledge this internalised oppression and acknowledge that social workers (in particular) are more often than not, perceived as 'symbols of the Establishment', who are likely to have 'inherited the racist, sexist and homophobic biases of their forbearers' (Sue 2006, pg.57). Culturally competent practice does not seek to minimise the responsibility of service users for their actions

(particularly pertinent in the context of safeguarding children) but acknowledges the discriminatory ways in which services are often set up, taking into account historical context, discrimination and the othering of diverse cultural groups and seeks a deeper understanding of the cumulative factors that have contributed to them being referred to support or statutory services for intervention.

### **3.8.1.2**      The knowledge debate

The second strand of culturally competent practice relates to knowledge and indicates that a certain degree of cultural understanding, specific to the service users whom practitioners are working with is required. Described by National Association of Social Workers (NASW) (2007, pg. 9) as a '...heightened consciousness of how clients experience their uniqueness.' O'Hagan (2001, pg. 235) re-affirms this view by writing about 'a cultural awareness, attitude and approach'. The fundamental premise is that specific pieces of cultural information which will aid practice with diverse groups. Whilst few would argue that practitioners having an understanding of the service users they are working with are key to successful interventions, the knowledge debate specific to cultural competence is multi-faceted and complex.

Knowledge is the central theme in question and when Johnson and Munch (2009) talk about the epistemological question of 'knowing about cultures' they are referring to the way in which our knowledge is obtained and to varying degrees, its subsequent use. Past definitions, identified race as a biological category, but it is now widely accepted that race is a social construct (Maiter 2009). Therefore, following a logical line of thought, information generated about culture runs the risk of also being categorised incorrectly or emphasis given to the wrong elements, i.e. a focus on religious festivals, clothing or food, rather than the in depth influences which culture can have on the individual in society. Therefore using generalised information regarding specific groups runs the risk of a misconception that racial and ethnic groups can always be understood by the same set of static, observable, generalised traits which creates and maintains stereotypes. Laird (2008, pg. 43) goes as far as to state that,



‘Any assumption by a social worker that individuals from a particular ethnic background have fixed characteristics is necessarily racist. This is regardless of whether those attributes are viewed positively or negatively.’

Whilst this statement appears somewhat disproportionate in its reference to social worker’s being ‘necessarily racist’ it does add to the dialogue regarding how cultural information is obtained and the manner in which it is used. Practitioners who focus their efforts on learning about specific, cultural traits run the risk of stereotyping and alienating the service user. Ortega and Fuller (2011) fear that possessing this type of limited information, leads workers into having a false sense of security regarding the competence of their own practice. This is a theme identified by McPhatter (1997) and O’Hagan (2001) who both write about practitioners feeling more competent than they actually are because of the amount of specific cultural knowledge they possess.

Johnson and Munch (2009) would even go so far as stating that they are concerned about literature which attempts to ‘educate’ social workers about racial and ethnic norms. Dominelli explores the importance of working in a reflective questioning mode as an alternative to having ‘a toolkit on each and every ethnicity that (social workers) might encounter’ and supports the notion that to be familiar with cultural diversity does not equate to ‘knowing chapter and verse’ (2008, pg. 82). Approaches which place too much emphasis on the importance of cultural knowledge reinforce the notion of the ‘Other’; that individuals are ‘different’ rather than recognise the significance of differences between groups.

A social constructionist viewpoint would follow that knowledge about a group or individual cannot be obtained without the contribution of the relevant group being studied. Keddell (2009) suggests a narrative approach may be more useful as this emphasises the position of the practitioner as someone who can never fully understand or predict the behaviour of an individual, even though they may have numerous encounters with individuals from the ‘same’ culture’ Hendricks (2003, pg. 76) supports this and writes,

‘Culturally competent practice involves immediate responses to diverse situations and sufficient reflection on these experiences to develop some

sophistication and confidence in one's ability to work with a range of constituencies, cultures and conditions.'

The knowledge debate is therefore specific to how knowledge is obtained and subsequently used and requires continued levels of reflective self-awareness on the part of the practitioner in order to challenge the potential of cultural knowledge reinforcing stereotypes and alienating service users.

### **3.8.1.3**      Culturally competent interventions

The third strand of culturally competent practice involves the ability to identify and use culturally appropriate skills or interventions. This element of practice is often misinterpreted to mean identifying and/or providing 'race' specific services or groups in the community. In considering the debate around cultural knowledge and how it is used, it is of no surprise that this misinterpretation is evident. If culturally competent practice is based solely on cultural knowledge which in itself is potentially based on cultural stereotyping and 'othering', providing 'race' specific services would give the illusion of effectively meeting service user's needs.

Providing interventions which are culturally competent involve understanding how to engage in the helping process with culturally diverse groups (McPhatter 1997). It requires of practitioners the ability to translate the knowledge and cultural awareness they have about the service users they are working with into tailored interventions. An intervention may be as simple as engaging in a helping relationship in order to help people to help themselves (Cross 1998) or as complex as working with parents who may be using excessive physical punishment and placing their children at risk of harm.

The components of culturally competent practice do not stand in isolation- they represent the sum of their constituent parts. It comprises an awareness of the values and behaviours of culturally diverse groups, alongside a developed sense of self reflection and an ability to carry out the social work task, consistent with that awareness (Petrovich and Lowe 2005). To be effective, models of cultural competence must not only meet the needs of the diverse cultural groups for whom they are to apply, they must also be accessible and understood to the practitioners

who use them. Key debates, as discussed above relating to cultural knowledge are important to be voiced and reflected upon, allowing practitioners to develop the ability to challenge held assumptions and approach their own practice with professional curiosity and seek to understand service users' perspective not merely apply cultural knowledge based on stereotypical ideology.

### **3.9 Conclusion**

This chapter has explored the theoretical basis of culturally competent practice by tracing the origins of social work's response to anti-oppressive practice. The anti-racist and anti-discriminatory approaches of the 1980's and 1990's were fundamental in raising awareness of the marginalisation of minority groups but this focus on specific groups created a sense of 'othering', a legacy which has been difficult to move away from. Culturally competent practice recognises the marginalisation of minority groups but emphasises self-reflectivity on the part of the professional, moving away from the 'othering' of minority groups towards an approach which recognises differences between groups. Culturally competent practice seeks to understand individuals through their lived experience of diversity rather than through the application of generalised or stereotypical information about minority groups.

The self-reflective practitioner tailors culturally competent interventions specifically to the needs of the service user and in some cases the intervention can be as simple as the helping relationship itself (Cross 1998). Culturally competent practice is the most comprehensive form of anti-oppressive practice social work has experienced. It is a strengths based model which requires practitioners to reflect upon their own values and prejudices before entering into the helping relationship with the service users who they work with. This is a welcome departure from previous models of anti-oppressive practice and their narrow focus on the differences of minority groups and subsequent 'othering'.

The idea of cultural competence can be applied to practice with young people leaving care due to their diverse pre-care experiences and vulnerability as a service user group. The next chapter entails a detailed review of the literature relating to

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young people leaving care and reasons why they may be considered a marginalised group.

## **Chapter Four**

### **Literature Review**

#### **4.1 Introduction**

This study covers several different areas of research literature, namely the experiences of care leavers, cultural competence and social work practice with young people in and leaving care. Chapter Two has outlined the approach to the study, and has highlighted the conceptual significance of the voice of young people. This literature review aims to examine the evidence base relating to the study in more detail. This literature review explores important areas when considering the experiences of care leavers and the developmental stage of adolescence. It examines the current context for practice with care leavers including the demographic information currently held, explores concepts such as attachment, identity development and transitions.

The Care Leavers (England) Regulations 2010 and subsequent guidance The Children Act 1989 Guidance and Regulations, Volume 3: Planning Transition to Adulthood for Care Leavers (Department of Education 2010a) details how services to care leavers should be provided. The regulations were implemented following the introduction of the Children and Young Persons Act 2008 which provided specifically for care leavers, sought to ensure that young people did not leave care before they were ready and afforded extended levels of support for older care leavers intending to continue with education. The Act also implemented findings from two important pilot programmes, the Staying Put 18+ Family Placement Programme (Munro et al 2012) and the Right2BCared4 Pilot Programme (Munro et al 2011) which were both aimed at delaying young people leaving care.

In the Care Leavers (England) Regulations 2010 and guidance the Department of Education (2010) highlighted the need for care leavers to receive the same level of support as would be provided by a reasonable parent and included references to

achieving individual potential and being provided with opportunities and tailored provision to make a successful transition to adulthood. Stein (2012, pg. 24) argued this legislation contributed to a 'levelling up' of leaving care services in recognition of the inconsistencies in day to day practice across the country. This inconsistency arose following the implementation of the Children (Leaving Care) Act 2000. The Act was one of the most important pieces of legislation passed as it brought about raft of national minimum standards which local authorities were duty bound to adopt for care leavers. However, due to the variability of service provision across the country it also laid bare the inequitable spread of resources and variation of practice (Stein 2008a; Broad 2005).

On the other hand, the Children (Leaving Care) Act 2000 achieved the widespread and formalised introduction of leaving care services across the country. In recognition of the need to sustain improvement in outcomes for young people, voluntary sector organisations such as the National Care Advisory Service (NCAS) and the Care Leavers Foundation were involved in drafting and the subsequent implementation of the 'Care leavers' charter (Department for Education 2012). Over 120 local authorities signed up to the charter which was concerned with equalising the support provided to care leavers in line with their peers who were not in care.

It is important to note that although the introduction of the Care Leavers (England) Regulations 2010 and the 'Care leaver's charter' was intended to improve the consistency of service provision for care leavers, it was implemented at a time of austerity and mass cuts to public services. There has been a decline in public service provision for young people, reduced resources and difficulties in recruitment and retention of professionals (Featherstone et al 2014; Munro 2011). Stein (2012, pg. 25) discusses the complexities of implementing legislation seeking to improve policy and practice at a time of austerity measures and budget cuts. Austerity measures included cuts to the very frontline services which the Care Leavers (England) Regulations 2010 and guidance aimed to develop and strengthen, created uneasy tensions between the ethos of aspirational services to care leavers against the reality of faltering resources (Hiles et al 2014; Stein 2012). Therefore, the government's intention to improve services for care leavers appears somewhat disingenuous.

Barnes (2007) and Holland (2010, pg. 1665) both propose that developments in policy and legislation which are intended to improve outcomes are often at the expense of the relationships in which young people are situated. Holland (2010, pg. 1667) sees one of the flaws of legislation in this area as being 'the thrust for independence' for this group of young people, treating them as an homogenous group with a concentration on basic, universalised systems of assessment, monitoring and review which erode 'the relational aspects of the corporate parent's involvement'. Stein (2012, pg. 91) adds to this perspective by suggesting that national, standardised performance indicators linked to educational attainment fail to recognise success in the widest sense, further homogenising and isolating this vulnerable group from their peers and distorting the real meaning of care.

This chapter entails an examination of the literature on care leavers. Starting with the scope and sources used, it goes on to explore the care leaver population and the additional difficulties that can be experienced by this group of young people. The chapter then examines the developmental stage of adolescence and how this is experienced by care leavers, particularly in regard to the impact of earlier childhood experienced and the development of identity. The discussion then concludes with an exploration of the additional difficulties associated with transitions for young people leaving care.

#### **4.2 Literature Scope and Sources**

The literature review was an ongoing process throughout the course of this study. Search engines such as the University of Bedfordshire's Discover and Google/Google Scholar were used to search key words and phrases which included: *care leavers, looked after young people, young people in care and/or leaving care (and other variants of these terms), adolescence, independence, transition, participation, children in care councils, resilience, outcomes, identity, Black and Minority Ethnic groups (and other variants of these terms), culture, diversity, cultural groups.*

After initial searches were undertaken a snowballing approach was adopted to identify further sources of relevance. In order to keep track of the search process, a

literature review diary was maintained with details of searches, ideas and themes emerging from the literature as well as new areas to follow up. Included during the course of the study were the following types of literature:

- Books
- Published research reports
- Peer reviewed journal articles
- Published literature reviews
- Government statistical releases
- Legislation and accompanying departmental policy and guidance
- Government reports
- Grey literature including voluntary sector publications and local government publications and releases

The search strategy incorporated literature which focussed on young people in care or leaving care which indicated ages of around 16 years to 25 years. The primary focus of the literature was on UK based sources which reflected the specific policy, practice and research context within the UK. However through the snowballing approach, some international sources were identified and deemed to be relevant to the study. Due to the need for past context of developments in leaving care there was no limitation placed on the period of time of publication. Of particular focus were sources published following the implementation of the Children (Leaving Care) Act 2000 due to the additional responsibilities placed on local authorities to support care leavers. Additional searching was also undertaken in relation to cultural competence and the cultural needs of care leavers.

#### **4.3 The Care Population**

There were 69,540 children looked after by local authorities in England as of March 2015, an increase of 1% from 2014 and of 6% from 2011 (Department for Education 2015 in Sebba et al 2015). Young people enter care for a multitude of reasons and over half will have experienced some kind of physical or sexual abuse or neglect (Department for Education 2012a). Many children and young people will return home



or live with a relative but others, particularly those under four years will be adopted (Department for Education 2012a). Some young people will remain in local authority care mainly with foster carers but also in residential settings which is more common for older children and adolescents (Department for Education 2012a). The Department of Education (2012b) found that almost a quarter of care leavers will have experienced eight or more placement moves with late entry to care being associated with increased placement instability and problematic transition to independence (Akister et al 2010; Stein 2008).

#### 4.3.1 *Black and Minority Ethnic Groups*

Past studies have found an over representation of young people from Black and Minority Ethnic (BME) groups (Barn 2005; Barn et al 1997; Barn 1993; Bebbington and Miles 1989; Rowe et al 1989). Below is a comparison from 2011 between the National Census data for England and Wales and the care leaver population.

<b>England and Wales 2011</b>	<b>Care Leaver Population 2011</b>
White 86%	White 77%
Mixed or Multiple Ethnicities 2.2%	Mixed or Multiple Ethnicities 9%
Asian or Asian British 7.5%	Asian or Asian British 5%
Black or Black British 3.3%	Black or Black British 7%
Other 1%	Other 2%
<i>Total BME groups 14%</i>	<i>Total BME groups 23%</i>

(Department of Education 2011a cited in Stein 2012, ONS 2011)

The ability of children’s social work services to meet the needs of BME young people has often been questioned. Transracial placements, placements in White areas away from community links, BME young people reporting not enough input from professionals about culture or identity, suitability of placements for Unaccompanied Asylum Seeking Children (UASC) and the appropriateness of carers to meet cultural needs have led to questions regarding the adequacy of social work services (Barn et al 2007; Barn et al 2005; Grady 2004; Department of Health 2000; Department of Health 1998; Ince 1998; First Key 1987; BIC 1984). The frequency and repeated

focus over the years on these inadequacies suggest that these issues and themes are longstanding.

BME young people are more likely to leave care early (16 years or 17 years) than White young people which can lead to poorer longer term outcomes (Barn et al 2005, Stein 2012). BME children and young people have reported a sense of 'not belonging' in care, with Mixed heritage young people stating that they felt they were not accepted by either White or Black people (Biehal et al 1995, Ince 98).

Experiences of racism, lack of contact with birth family, community and/or racial/cultural input can compound negative experiences, particularly leaving care (Barn et al 2005) due to the additional challenges of managing complex transitions.

In 2010 about 6% of care leavers were Unaccompanied Asylum Seeking Children (UASC) (Department of Education 2011a cited in Stein 2012). UASC have the additional challenge of transitions which are often 'abrupt' and 'chaotic' (Hek 2007; Wade et al 2005; Kohli and Mather 2003). Leaving care provision and support can be variable as decisions regarding immigration are often delayed or contradictory meaning young people may not know what entitlement they have upon reaching 18 years (Dixon and Wade 2004). Cultural matching is difficult to achieve and many UASC are placed in cross cultural placements which has been highlighted as a factor in young people 'choosing' to leave care early to move into semi-supported accommodation in more culturally familiar areas (Wade et al 2005).

#### **4.4 Defining the Rural Context**

Franks and Goswami (2010) discuss the importance of defining 'rural' and 'rurality' which are often used interchangeably but have different meaning. Whilst rural is a term linked closely linked to statistical data, namely population density, 'rurality' 'is a conceptualisation of the characteristics of rural living, actual or imagined' (Franks and Goswami, pg.124, 2010). The Rural Urban Classification is an Official Statistic used to distinguish rural and urban areas and defines areas as rural if they are outside settlements with more than a 10,000 resident population (Department for Environment, Food & Rural Affairs 2016). Rurality does not have universally agreed definition although it is a widely used term and Philo et al (2003a) and Cloke (1977)

advocate for a definition which is flexible and corresponds to the context in which the term is to be used. Acknowledging a lack of agreement regarding definition, for the purpose of this study, rurality is used to represent the following: population size and density, numbers of BME and culturally diverse groups, distance from larger or more urban areas, provision of service and transport links and socio-economic factors such as poverty and employment (Barnes 2003; Pugh 2000).

Pugh (2003) talks of the 'neglect' within the discourse of addressing rural social work. He goes on to state that although there appear to be no specific social work skills unique to rural social work, the application of said skills may need to be applied differently acknowledging the specific context of the work. Cheers (1998) elaborates on this by suggesting that an understanding of the context of the rural area is integral as often, service user's difficulties are intrinsically linked to where they live. Couchman (1994) states that to be disadvantaged in a rural area brings with a specific type of exclusion due to the more dispersed nature of the population and ability to access adequate support services for those in need. This is particularly pertinent to care leavers who are a marginalised group in society, experiencing disadvantage on a number of levels.

#### **4.5 The Additional Difficulties for Young People Leaving Care**

It is acknowledged that the fluid nature of care and the fact that the socio-economic disadvantage of care leavers is shared with other young people from challenging and poor backgrounds. Bebbington and Miles (1989) and more recently Bywater (2014; 2015) show how children who live in poverty are more likely to end up in care. Similarly, work by Sebba et al (2015) demonstrate that it is important to compare the educational outcomes of children in care with those from similar socio-economic backgrounds. It is without question that care leavers experience the transition to adulthood on a less linear and structured path than their peers. Early childhood trauma and negative or abusive experiences of parenting leading up to being placed in care often negatively affect patterns of cognitive functioning which are difficult to compensate for.

Many children and young people are placed in caring environments which provide the necessary levels of stability and authoritative parenting to overcome some of the earlier traumas. A significant factor in how a young person makes the transition to adulthood which then correlates with positive outcomes later on in adolescence is their experience whilst in care (Sinclair et al 2007; Dixon and Stein 2005). However for many young people, this compensatory experience is either not enough or not available and children and young people who experience instability in their care years, coupled with the multitude of transitions during adolescence and the prospect of leaving care altogether, make the journey to adulthood fraught with struggles and insecurities.

#### **4.5.1 *Moving to Independence***

Of considerable significance to a young person's transition to adulthood is the age at which they leave care. There is a stark difference between making the choice to leave home, which is a normative experience for most young people, against the expectation that you have to leave care (Stein 2012). For care leavers, the expectation to leave care also happens at a much younger age, as early as 16 years or 17 years which is at odds with the UK average age of 25 years for young people not in care to leave the family home. The Office of National Statistics (2013) found that 26% of 20 years-24 years were still living with their parents and this number has been increasing year on year. Research studies carried out by National Voice (2007), Sinclair et al (2005) and Stein and Morris (2010) found that foster carers, personal advisors and housing workers all felt that young people were leaving care too early, notwithstanding policy emphasising the undesirability of this.

Young people leave care early for a multitude of reasons and some of these reasons may relate to not feeling a strong sense of belonging in care, wanting to return home to family, a desire for independence away from the care system as well as more traumatic causes such as placement breakdowns and instability (Morgan and Lindsay 2012; Stein 2012; Ofsted 2009; McAuley 2005). Evidence suggests that younger care leavers are more likely to be living in unsuitable accommodation, have more moves and are more likely to be categorised as homeless (Stein 2012) and research highlights the importance of safe accommodation to protect young people from sexual exploitation (Brodie et al 2011). The vulnerability of care leavers to

homelessness is recognised in legal statute. Care leavers are classified as a Priority Need Group under Part 7 of Housing Act 1996 and it is specified under Homelessness Act 2002 that local authorities should create joint strategies to prevent homelessness for this group.

Despite the recognition of vulnerability in housing legislation, just under a third of young people who had previously been in care, experienced homelessness at some stage during the first six to twenty four months after leaving care and this risk was further exacerbated by lack of employment (Stein 2012; Wade and Dixon 2006; Dixon and Stein 2005). Being classified as homeless (as opposed to 'street' homeless) can also entail living in un-suitable accommodation, for example 'sofa surfing' or returning to volatile family or partner relationships. Bed and breakfast or hostel type accommodation is also deemed unsuitable and there is a correlation of higher numbers of young people with mental health difficulties and those leaving secure units, arguably those with highest level of support needs, being placed in these types of provisions (Glover and Clewett 2011; Harder et al 2011; Youth Justice Board 2007; Vasillou and Rylie 2006; Wade and Dixon 2006; Social Exclusion Unit 2002; Slesnick and Meade 2001).

Choice and standard of accommodation with young people feeling 'secure and safe' was a major issue of concern due to feelings of being 'lonely and depressed' (National Care Advisory Service 2010; Morgan and Lindsay 2006; National Voice 2005). Sinclair (2005 et al) found that having a sense of family was symbolically important even if that 'family' comprised those that were not related. Young people valued the ongoing support of fosters carers after they had left care and talked about needing more support outside of 'office hours' (Stein 2012; National Care Advisory Service 2010; Morgan and Lindsay 2006; National Voice 2005).

#### **4.5.2 Health and Mental Health Difficulties**

Young people talking about needing 'more' support is not surprising when taking into account the increased likelihood of health and mental health difficulties. The Office for National Statistics (2001) found that disproportionate numbers of young people in care had a physical complaint compared to the general population and were also four to five times more likely to have mental health difficulties and/or alcohol or

substance misuse difficulty. There was also a correlation between these issues: at least three quarters of children in care and care leavers with a mental health difficulty also had a physical health complaint, with mental health increasing the likelihood of smoking, using drugs and consuming alcohol (Stein 2012; Department of Education 2011a; Dixon and Stein 2005; Ward et al 2003; Office for National Statistics 2001; Saunders and Broad 1997).

Despite statistics which suggest that children in care and care leavers are four to five times more likely to attempt suicide in adulthood (Department of Education 2011b in Stein 2012) they continue to experience a delay in receiving help from CAMHS due to long waiting lists. Young people experience persistent difficulties when their care is transferred from CAMHS to CMHTs and the differences in culture of treatment between the two services mean that the needs of care leavers are often not adequately met (Brodie et al 2011; Department of Education 2011b; Mooney et al 2009).

#### **4.5.3 *Pregnancy and Early Parenthood***

Care leavers tend to experience higher levels of younger pregnancy and parenthood than the general population and whilst this in itself can bring a sense of pride, belonging, increased support and improvements in familial relationships (Stein 2012; Barn and Mantovani 2007; Chase and Knight 2006; Dixon et al 2006) it can also add to placement instability, have detrimental effect on educational attainment, effect peer and social relationships, increase risk of unemployment and increase substance and alcohol use (Mendes 2009; Dixon et al 2006).

#### **4.5.4 *Offending***

In terms of the youth offending population, Blades et al (2011) found that between one quarter and one half of young offenders have been in local authority care at some stage of their lives. Being in care brings a heightened level of monitoring and to a certain degree surveillance by the police and it is important that any causal link between being in care and offending is carefully considered in light of this (Stein 2012; NACRO 2005).

#### **4.5.5 Education**

Brodie et al (2011) found that improving educational outcomes is strongly linked to overall improvements in quality of care and emotional health and wellbeing. Stein (2012) also talks about the benefits of re-engaging with further or higher education for older care leavers as a means of increasing self-esteem, social integration, career opportunities and life chances. The Social Exclusion Unit (2003) highlighted several factors outlining the challenges for care leavers in achieving their educational potential including; placement instability, too much time outside of school, insufficient help with school work, carers not equipped to offer required level of support and unmet or undiagnosed health or learning needs.

Twelve percent children in care achieved five A\*-C grades in GCSE compared to 53% of all children (Department of Education 2010b). Statistics such as these are crude measures to judge educational achievement and do not take into account the different starting points of each young person (Stein 2012). Children in care and care leavers are nine times more likely to have special education needs than other children and often these needs are not identified until they have been placed in care (Department of Education 2010b; Berridge et al 2008). As crude as they may be, normative measures such as GCSE results highlight the educational barriers which care leavers face when entering the employment market or further/higher education as requirements often stipulate specific GCSE grades.

#### **4.6 The Care Leaver Identity as a Cultural Characteristic**

As discussed in the previous chapter, definitions of culture are complex. Culture incorporates elements of individual identity as well as a collectiveness or belonging to a variety of broadly defined groups. Understanding culture in this way is important when considering the situational context of young people as the notion of 'care leaver' is both individual and collective. The term 'care leaver' is a statutory definition (Department for Education 2010a) assigned to young people who have met the criteria and qualify for a leaving care service from the local authority. Therefore there is a collective element, care leavers are defined in legislation and recognised as a group.

However, in practice and on an individual level, identifying as a 'care leaver' is a matter of choice and not all young people will choose to adopt this 'label'. In this respect the term can be seen as socially constructed and interpreted differently by different young people. There are a multitude of reasons why young people may choose not to identify as a care leaver which may include aspects of their pre-care, in-care and post-care experiences. This chapter's exploration of the additional challenges which young people leaving care face highlight how they are over-represented in a number of marginalised groups. The term care leaver is so often linked with this over-representation that young people may choose to distance themselves from it. This presents itself with contradiction and challenge for young people in terms of a developing sense of self. The development of a positive identity is intrinsic to the developmental stage of adolescence and it is this stage which will now be explored.

#### **4.7 Young People Leaving Care and Adolescence**

Stein (2012; 2009; 2008b; 2006b; 2005), exploring an idea regarding the transition care leavers make to adulthood, talked about care leavers as being in one of three categories; 'moving on', 'survivors' or 'victims' (later renamed 'strugglers' (Stein 2012)). Stein's discourse around care leavers focussed on the journey travelled to adulthood, acknowledging how difficulties can be compounded for young people leaving care. The significance of this perspective is that even while providing a classification, it acknowledges the individuality of young people rather than viewing care leavers as a homogenous group. Ward et al's (2015) article exploring care leaver's experiences on the social work degree highlight the impact of a discourse focussed solely on negative outcomes,

'Many of the students' perceptions of the teaching relating to looked-after children were negative.....annoyed about lectures that dwelt upon poor outcomes....' (pg. 7)

Young people leaving care and making the transition to adulthood often do so from a different starting point than other young people and this can negatively affect their trajectory. Methodologies which acknowledge this but do not merely focus on poor



outcomes allow for greater exploration of what works in achieving positive outcomes rather than creating a simplistic and predestined narrative. Stein's (2012) use of the three categories; 'moving on', 'survivors' and 'strugglers' provides a balanced, organising theme for knowledge in this area. This theme acknowledges the diversity of experiences and allows for departure from a discourse focussed on care leavers as a homogenous group. A discourse that can take account of individuality is important and the individual experience is structured by a number of factors, including gender, ethnicity, sexuality – but also the experience of adolescence which is examined in the next section.

#### **4.7.1 *Adolescence- A Question of Definition?***

The very concept of adolescence is widely debated due to the social meaning that is often apportioned to this period of biological change. This ambiguity around definition is inherent in the 'Key Data for Adolescence 2015' (Hagell et al 2015) which gives differing definitions in terms of chronological age for adolescence, young people and youths and then later discusses the data gained in terms of 'young people in the second decade of their lives, between 10 and 20'. Terms such as young people, adolescents, teenagers and youths may relate to a specific chronological period but in everyday language they are used interchangeably. These different terms do not appear to represent different stages or convincingly, further any understanding about the experience of adolescence. For the purpose of this section of the literature review I will be using the terms adolescence or adolescent, unless directly quoting another source.

Adolescence as a political and social construct can be understood by considering the impact of history and culture and the notion that longer periods in education and increasing affluence in the Western society has created an extended stage between childhood and adulthood (Daniel et al 2010 pg. 205; Steinberg 1993). Use of the word adolescence to describe a distinct phase has been relatively recent, as late as the early 1900's (Shaffer 1999). Giddens (2006. pg.176) raises the point that many cultures do not have the degree of uncertainty and turmoil found in adolescents of Western society, with these cultures encompassing 'distinct ceremonies that signal a person's transition', meaning that the process of change is slower, more understandable and easier to negotiate for the adolescent. Shaffer (1999) adds that

other cultures have no concept of adolescence, distinguishing only between childhood and adulthood. The stage of development we now term as adolescence has differed across historical and cultural contexts. Equally the experience of childhood and adolescence has always been structured differently for the children of the economically disadvantaged, including children in care, who have had little choice regarding their destinies in terms of educational attainment, employment, support etc. What there does appear to be almost unanimous agreement about is that the stage referred to as adolescence is a period of time characterised by the strive for independence versus the need for protection (Howe 2011; Daniel et al 2010; Shaffer 1999; Steinberg 1993).

Many classic theories of child development signify adolescence as a critical period (Erikson 1968; Freud 1966; Blos 1962) and it is unquestionably viewed as one of the most dramatic stages of development, an important time for laying the foundations for life long behaviours (Hagell et al 2015; Research in Practice 2014). Coleman (2011) advocates that adolescence be viewed as a biological state which is understood in a social construct and this notion supports much writing around the area of adolescence. In recent years researchers have uncovered a mass reorganisation of the brain during adolescence and have made links to other areas of adolescent development and transition (, Morgan 2007; Blakemore and Choudhury 2006; Steinberg 2005). Steinberg (2005, pg. 69) talks about this period of mass activity as ‘sensitive’ or ‘critical’ to development and proposes that,

‘.....adolescence is a heightened period of vulnerability specifically because of gaps between emotion, cognition and behaviour....’

The adolescent brain does not develop in line with other physiological changes and this dissonance is the primary reason for viewing this developmental stage as ‘sensitive’ or ‘critical’ and ‘fraught with both risks and opportunities ’ (Steinberg 2005, pg. 69). Evidence would suggest that brain development continues into mid-twenties which is long after other adolescent changes, such as puberty has reached its natural conclusion (Child Information Gateway 2009; Giedd 2004). A degree of caution should be maintained when considering neuroscientific explanations as they can present as ‘fixed’ concepts to a period of human development which is largely

construed as socially constructed. Coleman (2011) points out that although unquestionably the structure of the brain alters in adolescence, whether this has a direct linkage with subsequent thoughts and emotions is subject to wide ranging scientific debate. Therefore, adolescent brain development should be viewed as a contributing factor but not an absolute justification for many of the other variables which occur during a similar timeframe. The next section discusses the relevance of attachment in understanding the developmental stage of adolescence.

#### **4.8 Attachment- a fixed or fluid state?**

Whilst the discussion in the previous section highlights the importance of social and historical context, psychological and neurological research tends to focus on individual explanations. Whilst the two are not mutually exclusive it needs to be acknowledged that there are different perspectives influencing knowledge in this area. The impact of early childhood trauma, abuse and neglect can have a negative effect on the development of attachment behaviours. Early care shapes the developing nervous system and the brain, shaped by the environment constructs itself in light of the experiences it encounters (Gerhardt 2011; Ventress 2011; Howe 2008). As stated by Daniel et al (2010, pg. 148),

‘The child growing up with trauma and unpredictability will only be able to develop neural systems and functional compatibilities that reflect disorganisation’

Care leavers by the very nature of being in local authority care have experienced varying degrees of abuse and neglect or suffered loss through bereavement or abandonment. Attachment theory can help to organise thinking around how early childhood trauma may impact on care leavers as they negotiate their path through adolescence. Young people with disorganised attachments may be poorly equipped at managing the challenges and stresses which adolescence provokes and lack in the ability to regulate emotions (Howe 2011; Sroufe et al 2005). Attachment is dyadic for example, Horowitz et al (2007) found that children of depressed mothers have similar patterns of adults with depression and are more at risk of developing emotional/mental health difficulties in adulthood. Children with disorganised

attachment may feel unlovable or behave in ways that elicit rejection from others, often unpopular with peers, struggling with normative social interaction (Aldgate 2010; Howe 2008). Difficulties in family communications often emerge in adolescence but rather than being new, are often symptomatic of long established patterns of family communication (Daniel et al 2010).

Eighty per cent of children with disorganised attachment have been abused or neglected (Carlson et al 1989) but not all care leavers have a disorganised attachment. Shemmings (2011, pg. 40) talks about this as being 'the nature of causation itself' and points out the importance of distinguishing between events being related or having a direct correlation. The significance of this distinction is further highlighted by Ward et al (2015, pg. 7) in a comment from a care leaver on social work degree programme who viewed the teaching of attachment theory as being too deterministic,

'They were saying basically if you don't form an attachment at an early stage you are doomed.'

Care leavers who have attachment difficulties or patterns of disorganised attachment will need additional support to increase their confidence in the availability and reliability of care givers (Stein 2006b). Children and young people who are provided with compensatory secure attachment relationships such as stable foster placements are more likely to have positive outcomes than those who have had numerous moves and disruption (Stein and Munro 2008). Schofield and Beek (2009, pg. 259) found that children developed best in long term, stable foster placements, however when this was not available in a previous placement, a move to a new placement, even as late as mid-teens gave, '...a fresh opportunity to experience therapeutic care, to belong and to begin to fulfil their potential.' Barber and Delfabbro (2004) and Sinclair et al (2007) also found that the quality of the final settled placement was more significant than placement moves.

There are no absolutes with adolescence, patterns of behaviour and attachment may be formed in early childhood but are not necessarily set. The attachment style 'learnt' in early infancy is generally fixed, particularly if the caregiving environment remains

the same. However the significance of a 'sensitive' period of adolescent development and the restorative potential lends a persuasive alternative to viewing attachment as a fluid concept. Drawing on Stein's three categories further supports the importance of not viewing attachment as fixed. For example, when discussing the groups of 'survivors' and 'strugglers' the impact of less secure attachment relationships in care, decreased stability, higher numbers of placement moves and leaving care prematurely will be more likely to reinforce disorganised attachment states or attachment difficulties. On the other hand, characteristics of the 'moving on' group such as having secure attachment relationships, stability, continuity and gradual transitions are cited as factors in positive transitions to adulthood (2012, pg. 170-172).

#### **4.8.1 Risk and Vulnerability**

A significant component of adolescent development is the increased likelihood of risk taking behaviours. Whilst these behaviours do not necessarily equate to risks which are dangerous, young people's development of executive functioning relies on their awareness of risk and consequence. Risk taking needs to be understood using a social constructionist lens under the guise of developmental stage to include brain development. During adolescence changes in the neurobiological system responsible for emotion and social interaction contrast with a differing rate of development of the neural systems responsible for regulation and control (Hanson and Holmes 2015; Steinberg 2010). Therefore, adolescents tend to rely more on their 'gut feeling' rather than logic or consequence as the part of their brain which regulates the latter is not yet matured, hence the view of 'nothing bad will happen to me' (Child Welfare Gateway 2009; Steinberg 2005; Berger 2001).

Steinberg (2010) highlights the vulnerability to risk taking as being normative for the stage of development with Romer (2010) discussing the increase in 'sensation seeking' as being linked to the rise of dopamine during adolescence. Dopamine is responsible for feelings of pleasure, thrill and excitement. Romer (2010, pg.269) goes on to point out that this rise in dopamine is a universal phenomenon seen in adolescent mammals which encourages them to leave their families and seek new territory and mates. Consequently, risk is not solely connected with danger but a

necessary process linked to evolution and survival, as summed up by Morgan (2007),

‘Survival and achievement are a delicate balance of risk and caution, spurred on by pleasure.’ (pg. 80)

It is important to note that not all risk taking involves danger but due to the developmental stage, adolescents are more likely to undertake dangerous activities and experience harm or die, despite knowing the risks (Hagell et al 2015; Steinberg 2010; Steinberg 2005). Risk in adolescence involves a sophisticated understanding of the interplay between choice (or agency), developmental stage and danger. To consider adolescents as ‘victims’ of their environment and neurobiological functioning negates the role of agency and conversely to deem that they are able to consequentially think through a concept and always ‘choose’ the safe and rational outcome negates the powerful impact of developmental stage.

The Children’s Society’s (2010) report ‘Safeguarding Young People’ looked at responses to the ‘maltreatment’ of adolescents and implications for future policy and practice. However, what is apparent in their findings is the overly, simplistic way in which they write about age-related factors and shortfalls in professional responses. The way in which professionals perceived young people affected their professional response which led to assumptions being made.

‘...young people were seen as more competent...’

‘...perceived as more ‘resilient’...’

‘...contributing to and exacerbating the situation through their own behaviour...’

(The Children’s Society’s 2010, pg. 4)

It is without question that any responsibility for harm and abuse inflicted on the adolescent rest with the perpetrator and professional response should address this, however it negates the core elements of adolescent development. Whilst the

professional response to adolescents is outside the scope of this literature review, the approach of Hanson and Holmes (2015) when exploring the same issue, is a well-balanced narrative taking into account the nuances and complexities involved.

‘When adolescent choices and behaviours are seen to be playing a part in the risks that adolescents are experiencing, it would be erroneous (as well as harmful) to conclude that those choices are ‘informed’ and that adolescents are acting with complete ‘free will’ and have full responsibility for their actions.’

‘In parallel, it would also be inaccurate in these situations to minimise or ignore the decisions and actions of adolescents and the part they are playing.’

‘..a simplistic narrative of adolescent passivity is unhelpful...’

(Hanson and Holmes 2015, pg. 25)

Experimentation and impulsive behaviour are a normal and healthy part of adolescence which promotes the development of executive functioning. Constraints on choice and behaviour can mean adolescents are less able to develop responsibility for their decisions and actions. Controlling and co-ordinating thoughts, holding information in mind, applying and planning, impulse control and developing the ability to think about alternatives and consequences are negotiated, although rarely in a straightforward manner (Hanson and Holmes 2015; Daniel et al 2011).

Adolescents move into Piaget’s (1952) ‘formal operation stage’ which entails the development of abstract thinking, deductive logic, considering ranges of possibilities, challenging ideologies, and constructing own hypotheses. With logical thinking becoming more sophisticated adolescents by nature are less likely to accept adult explanations and want to challenge, question and assess for themselves (Daniel et al 2011). Arguing with parental figures or figures of authority and the way in which this conflict is managed, supports the development of healthy problem solving (Smetana 2006). Fahlberg (1988) discusses the adolescent’s striving for freedom vs. need for safety as being similar to a toddler’s need for connectedness and autonomy and draws resemblance to the tantrums in both stages. When thinking about adolescence through this lens, the inherent conflict with parents or carers can be

seen as normal behaviour for this stage of development. Developing a sense of independence will require a degree of conflict and a rejection of some parental rules and care (Collins and Laursen 2004).

The way in which adolescence is defined has a significant impact on the interpretation of behaviours during this stage. The dichotomy in terms of adolescents as 'children vs. adults' or adolescents 'in need of protection vs. a threat to others' is highlighted particularly well in the discourse surrounding the development of identity. It is during this stage that the crucial task of identity formation occurs and the challenges for care leavers in achieving this will be discussed in the next section.

#### **4.9 The Complexities of Developing a Positive Sense of Identity**

The development of a positive sense of identity is challenging for all young people and arguably a struggle for many adults. During adolescence people find out who they are and how they fit into, an often confusing world. Identity is dynamic and not necessarily determined by characteristics such as gender, class, ethnicity, sexuality culture or age (Giddens 1991 cited in Stein 2012; Beck 1992). Although in essence, identity rests with the individual, it can be shaped by wider social forces and is also influenced by how the individual thinks others perceive them (Ward et al 2015; Mulkerns and Owen 2008). Noble-Carr et al (2014, pg. 389) asserts that this is what makes young people's identity, 'fluid, interrelated and powerful'.

The development of positive identity relies on a number of key components which in turn relate to the interplay between several factors. Firstly, the quality of attachment and caring connections with an emphasis on reciprocity from which to model emotional responses; secondly, a sense of belonging or connectedness and a knowledge or understanding of family history and background, the need for a coherent story in order to make sense of current self; thirdly, the ability to participate, contribute and achieve which promotes self-esteem and gives the opportunity to develop a sense of self efficacy; fourthly, acknowledgement and encouragement, with the responses of others are particularly important; and finally a sense of self-determination and hope for the future, a realisation of being in control of own destiny (Ward et al 2015; Noble-Carr et al 2014; Stein and Munro 2008).



#### **4.9.1** *Peer Groups*

Peer groups play a crucial role for young people in developing a sense of identity, although their impact can be both positive and negative. Erikson (1968) was one of the first theorists to highlight the ambiguities surrounding adolescence when he wrote about it as being a time of identity crisis or role confusion. Words and phrases such as crisis, turbulence, acting out, raging hormones, peer pressure and being out of control all conjure up negative, possibly anti-social connotations but are common place when describing adolescence. Though historical research indicates this has always been the case (Pearson 1983) the 1990's and 2000's, saw the public image of adolescents become even more marginalised with descriptions attached such as, having no respect, anti-social, gangs, criminal and the concept of 'hoodies' (Daniel et al 2011; Hayden 2007).

Peer group relationships become more significant during adolescence with the reliance on parental figures and family lessening (Research in Practice 2014). However, the role of parental figures and a secure parental attachment base is key to exploring peer attachments and likely to result in better adjusted and more socially competent individuals (Feeney and Noller 1996; Rice 1990). Friendships can represent key risk and protective factors largely due to the developmental stage adolescents find themselves in, in terms of striving for autonomy coupled with an increased likelihood of risk taking (not necessarily involving harm or illegality).

Peer groups are often seen to heighten vulnerability to risk taking behaviour of adolescents due to peer pressure and the need for a sense of belonging. Negative societal connotations surrounding all groups of young people being referred to as 'gangs', regardless of whether they are involved in any criminal activity or not furthers this perception of risk and vulnerability. Undoubtedly, adolescents are more susceptible for differing social and biological reasons to risk taking behaviour but a simplistic causal view directed towards peer groups and pressure does not take into account the multitude of factors involved. Coleman and Hendy (1990) dispute the concept of peer pressure, suggesting that conformity to norms only lasts until 14 years after which, executive functioning is becoming more developed. However, the idea of 'adolescent egocentrism' (Elkind 1967) which involves a preoccupation with an imaginary audience, a self-perception of 'everyone is always thinking or looking at

me' would suggest that peer groups are significantly influential at this developmental stage. The powerful role which social media plays in young people's lives reinforces the notion of an 'imaginary audience.

A more balanced focus on peer groups as a source of belonging or solidarity, rather than focussing on the negative elements of peer pressure is central to the notion of identity development in adolescence. Identity formation in adolescence can be seen as a re-examination of thoughts, views, roles and ideologies which needs to be viewed more as a time of reflection rather than crisis or confusion (Herbert 2005; Marcia 1966 and 1980).

#### **4.9.2 *Identity Development for Young People Leaving Care***

The acquisition of a positive sense of identity, could not, therefore coincide with a more challenging developmental stage. For care leavers, many difficult questions regarding where they have come from and who they are arise at this stage but with challenge and uncertainty also come the opportunity to explore, develop and grow (Schofield and Beek 2009). Adolescence is an emotionally testing time when feelings can become overwhelming and often expressed in inappropriate ways (Schofield and Beek 2009, pg. 261). The complex struggle of being a child vs. becoming an adult is all consuming and a sense of continuity difficult to maintain. There are frequent times when holding the future in mind is not a priority and risk taking can increase due to lack of 'fear' of the consequences (Ward 2011, pg. 2513).

Having a positive sense of identity promotes resilience and can be viewed as a protective factor in mitigating against negative experiences and risk (Noble-Carr et al 2014 pg 390). This is of particular significance for care leavers who are confronted by persistent and complex challenges during adolescence and consequently building resilience and developing a positive sense of identity can be compromised (Crawford and Rossiter 2006). Biehal et al (1995) see one of the main barriers for care leavers in developing a positive identity as being the professional's lack of ability to help the young person understand their reasons for being in care and how to manage feelings of rejection and resentment. A lack of congruent narrative regarding family history and the young person's place in that is likely to have a negative impact on the development of self (Schofield and Beek 2009).

Biehal et al (1995) extend this stating that it is not a question of what happened but why. Many young people have a perpetual struggle with the strong connection they feel for their family alongside confusion with being abandoned. In trying to reconcile this, young people often blame themselves (significantly damaging to sense of self) or professionals as permitting thoughts which attribute any degree of fault with their families is just too painful. Biehal et al (1995) give the example of young people who have left care wanting to access their files in an attempt to build a more congruent narrative of their family history.

Links with family, established family rituals and culture of origin all have important symbolic functions which are crucial to maintain. Schofield and Beek (2009) support this, asserting that family are often underestimated because of the developmental stage of adolescents and the perceived tendency to reject family. There rests in this sentiment the dilemma of promoting these links when the relationship is not a reciprocal one and in some respects, could further add to feelings of rejection and resentment. Barns et al (2005) discuss the additional complexities for Black and Minority Ethnic children who have been separated from families in terms of the major negative disruption this has on developing a positive identity. Ethnic and racial identity development constitute a large part of development in adolescent but a lack of belonging can lead to poor racial and ethnic socialisation and lack of place in a racialised society (Barns 2010; Barns et al 2005).

#### **4.8.3 *Factors Impacting on Identity Development***

In considering the characteristics which support positive development of identity the idea of social capital and the role of agency is particularly significant for care leavers. Barns (2010) discuss social capital in terms of relationships/networks of trust, reciprocity, mutual obligations and access to social networks, family and communities. A lack of these 'resources' would lead to inequality of social capital and in essence, the possession of social capital and ability to be self-deterministic is a strong pre-requirement to developing positive identity. Hiles et al (2014 pg. 10) proposes that negative behaviours on the part of the young person attract more support from professionals, which in turn promotes a degree of negative identity formation and could undermine self-efficacy.

Biehal et al (1995), Stein (2012; 2009; 2008b; 2006b) and Ward et al (2015) also talk about the stigma linked to the label of 'care leaver' by way of low self-esteem due to the assumptions made by others about reasons for being in care, ie attributing blame on the young person. Due to the inherent complexities in relation to what being a care leaver means to the young person, maintaining a sense of agency over actions can be problematic. The dilemma over who is responsible for control and decision making is mixed, ie foster carers, social workers, department, legislation, therefore developing autonomy and self-determinism also becomes a complicated path to navigate (Schofield and Beek 2009).

Factors which increase levels of agency and social capital for care leavers include placement stability; gradual transitions; education and work which not only give an increased sense of achievement and self-esteem for attainment but also due to managing despite the additional challenges; participation in decision making; promoting social connections away from the home, including family; peer relationships; mentoring schemes; accessible professional support network (Stein 2012; Schofield and Beek 2009; Stein 2009; 2008a; 2006a; Dixon and Stein 2005; Biehal et al 1995). An important theme arises from this list (which is more of an annotated version rather than exhaustive) and that is that many of the factors which increase levels of agency are outside of the young person's control and in the sphere of the professional network. The implication of this for the young person's agency and developing identity is a contradiction in terms as it relies on others to make decisions about what should happen to/with the young person. It could be argued that young people are being empowered to be self-deterministic, however more persuasively, it indicates the additional challenges young people leaving care have in developing a positive sense of identity. Hiles et al (2014) sums this up in the following quote.

'Trying to develop a positive sense of identity whilst in a perpetual state of transition' (pg. 5)

The mention of transition is a particular pertinent issue for care leavers due to the number of changes they encounter during a short period of time. The complex issue of transition to independence for care leavers is explored in the next section.

#### **4.10 The Transition to Independence**

Young people leaving care are often denied the normative transition experienced by their peers. Stein (2012; 2009) terms this as an 'accelerated and compressed' transition to adulthood which he found is often attributable to numerous placement moves (approximately a third of young people having four or more moves) and moving into independent living at an earlier age to their peers (over a third (37%) were leaving at just 16 years or 17 years with more than half the young people in children's homes leaving care before 18 years).

Stein (2012; 2009; 2008b; 2006a; 2006b) discusses the concept of 'instant adulthood' to describe the transition care leavers experience into independence which is against the trend of gradual and extended patterns for other adolescents. A sense of belonging and connectedness are key elements in the process of transition and in normative settings, family would often act as a safety net in the event of crisis (Ward 2011; Stein and Munro 2008). For care leavers relationships with family are often problematic or missing altogether. Despite the influence of research (see Schofield and Beek 2009) and legislative changes it is often still the case that once a young person has left a foster placement there is generally, no option to return.

Schofield and Beek (2009) and Geenen and Powers (2007) write about the struggle care leavers often face as they manage the transition by relying on their own internal resources. Biehal et al (1995) discuss the disruptions to normative attachment patterns when moving placements and leaving care, which leaves a sense of continuity difficult to establish.

'It is a frustrating paradox where they have little or no opportunity to practice skills of self-determination while in care, but are expected to suddenly be able to control and direct their own lives once they have (left care)'

(Geenen and Powers 2007, pg. 1090)

The suggestion here is not that care leavers receive no support during the process of transition, rather it highlights the unique nature of support needed at different times for the different elements of transition itself; transition as social, physical and

psychological. Taking a life course approach to transition which takes into account the cumulative effect of different starting points, personal histories and social setting allows for exploration of normative and non-normative contexts (Stein 2012; Biehal et al 1995). By taking a life course approach, leaving care is seen as a process to travel through rather than a stand-alone event. Chandler et al (2003 cited in Ward 2011) view this as the young person trying to reconcile two contradictions; to change and whilst remaining the same (Ward 2011). Moving from an identity of being 'in care' to one of a 'normal' identity in the community is a difficult transition to make and not normative for other adolescents (Dima and Skehill 2011).

#### **4.10.1 *The Focal Model of Transition***

The *focal model* of adolescence developed by Coleman in 1974 (Coleman 2011) is concerned not with developmental stages but with young people dealing with a wide range of transitions, one at a time. The order at which the transitions occur is less important than the young person being given the time and psychological space to work through each transition (Dima and Skehill 2011). The significance of this model for young people leaving care is that they are often denied the psychological opportunity to deal with each transition (Stein and Munro 2008). Young people leaving care have the double transition of adolescence which can be viewed as normative and leaving care which is not.

Leaving care involves multiple transitions of differing types and there is the need for time and space to adjust and manage the changes. There is often not sufficient time and space for young people to adjust psychologically to the transition (Dima and Skehill 2011). This relates well to Stein's (2012; 2009; 2008b; 2006a; 2006b) concepts of 'compressed and accelerated' transitions to an 'instant adulthood'. When events or transitions cluster together as they do for young people leaving care, they are not given the time and space to navigate through each and are likely to be ill prepared for the next transition or adverse life event. The idea of social transitions needing to be worked through prior to starting on the next involves a process of disengaging from the old, transitioning and before arriving at the new state (Hart 1984 in Stein 2012). Dima and Skehill (2011, pg. 2537) highlight the need for transitions to be viewed holistically to guard against scenarios which consist of professionals taking one step forward, with young people left one step behind.

#### **4.10.2 *The Bridges Model of Transition***

The Bridges model is a staged approach and similarly places importance on the process of transition itself. Dima and Skehill (2011) use this framework to understand the difficulties for care leavers in experiencing multiple transitions. The three stages involve, managing loss or letting go; managing in a 'neutral zone', psychologically adjusting to changes; new beginning and new identity (Hiles et al 2014, pg. 10). When considering the specific circumstances of young people leaving care, it is argued that not enough focus is given or time spent during the 'neutral' or transition phase (Dima and Skehill 2011, Stein 2006b). The Bridges model asserts that the starting point for transition is not the beginning of the next phase or event but the ending of the last. Bearing similarities with the 'focal model of adolescence' it clearly differentiates between change as a physical process and successful psychological transition. The Bridges model states that the new identity can only be formed once the old identity has been let go (Dima and Skehill 2011).

Time spent in the 'neutral zone', living between old and new and experiencing ambiguity supports the shift to a new identity. The ending is as important as the beginning but often this is the element which is given least time (Dima and Skehill 2011). The in between phase or 'neutral zone' for care leavers can be particularly challenging as young people may feel they do not belong with their carers or family, are pre-occupied with the past yet ill- equipped for the future (Biehal et al 1995).

#### **4.11 The Restorative Nature of Care**

It is important not to minimise the effects of in care experiences on children and young people. This chapter has already given insight into some of the potential difficulties faced by young people leaving care and how longer term outcomes can be adversely affected. However, a focus on negative outcomes often dominates discourse in this area and the restorative nature of care not given enough attention. Positive outcomes for care leavers are more likely when the young person has the ability to develop a positive sense of self, recognising and praising achievements which may not necessarily be educational; through assessment, planning and preparation prior to leaving care which could include transitional or supported living arrangements (10-25% of care leavers have lived in supported lodgings of some

description); having access to good quality housing upon leaving care; a network of professional and informal support, including friends and family (Fostering Network 2011; Simon 2008; Cameron et al 2007; Wade and Dixon 2006; Dixon and Stein 2005).

The significance of acknowledging the positive nature of care was reinforced in a report compiled for the Care Leaver's Association (Duncalf 2010) exploring the experiences of over 300 older care leavers. Data in the report found that 33.7% of the care leaver's interviewed felt that they had had a 'mainly positive' experience of being in care with 46.7% stating that their time in care had been 'mainly negative'. The remaining 19.6% indicated that they felt 'indifferent/neither of the above' about their time in care. Whilst it would be unwise to make wide scale generalisations about the findings of Duncalf's report it does suggest that there are large numbers of young people who have had positive in care experiences and it is those experiences which we must learn from.

A young person's ability to retain a sense of personal agency is a powerful way to develop resilience and a number of studies have highlighted the significance of education or work as an empowering concept for care leavers (Arnau-Sabates and Gilligan 2014; Shepherd et al 2010; Gilligan 2008; Rutter 2006). Of particular interest are the components of employment or education which become influential as these are not limited to the positive qualities of the activity itself. Education and employment have the capacity to 'level' opportunity and decrease social isolation, particularly for marginalised groups. In addition to this, for young people leaving care work related transitions such as, economic independence, increased recognition and trust, the acquisition of social capital and supportive relationships with colleagues have significant impact on the development of confidence and self-esteem (Arnau-Sabates and Gilligan 2014; Berridge 2014; Gillian 2008). This change in 'status' can serve to act in a restorative way, helping to redress some of the earlier challenges of pre and in care experiences (Rutter 2006; Masten et al 2004).

#### **4.11.1 *Relationship Based Practice as a Culturally Competent Intervention***

The Munro Review (Munro 2011) has re-affirmed the importance of the relationship which workers have with children and young people as a tool in understanding their



world or 'lived experience'. The previous chapter discusses culturally competent interventions and suggests that in its most simplistic form this can be the relationship between service user and professional. Bell (2002) views this 'relationship of trust' as one of the most effective ways of engaging and protecting children and young people. The 'relationship' itself can be seen as a tool, a tool for positive change, an important source of information for the practitioner, a means of engaging with the young person to facilitate an understanding of how best to help, as well as being the means by which help is offered (Gilbert 2007; Ruch 2005). The significance of trusting and supportive relationships has been linked to better longer term outcomes, particularly in terms of ability to overcome adversity (Arnau-Sabates and Gilligan 2014; Mcleod 2010; Gilligan 1999). This was re-affirmed by Stein (2012) who also found that a key element in the development of resilience in all young people is associated with having at least one redeeming and warm relationship whether this be a parent, foster carer or other trusted individual.

Trevithick (2003) talks about relationship based social work as being particularly effective for children in care who may be vulnerable and need help in overcoming traumatic experiences, losses and separations. Hennessy (2011) reaffirms this and discusses the 'inconstancy' for children in care and care leavers in respect of their relationships, suggesting that consistent and long term relationships with professionals will help to overcome this incoherency. Drapeau et al (2007) further this by suggesting that relationships of trust can serve to initiate 'turning points' for young people which reinforces the need to pay careful attention to how transitions are understood for care leavers. Studies exploring the views of children in care and care leavers have consistently highlighted the value they place on supportive relationships with professionals (National Children's Bureau 2006; Munro 2001; Butler and Williamson 1994) and there is a strong correlation between children and young people having supportive, trusting relationships and going on to have more positive, longer term outcomes (Jobe & Gorin 2013; Leeson 2010; Mcleod 2010; Gilligan 2007; Leeson 2007; Bostock 2004; Dearden 2004; Bell 2002; Gilligan 2000; Luthar and Cicchetti 2000; Masten et al 1990). Specific studies by Brodie and Morris (2010) which looked at improving educational outcomes for children in care, Stein and Morris (2010) which focused on 'safe and settled' accommodation and Shuker

(2013) which evaluated the role of specialist care placements for victims of trafficking all emphasise the powerful effect of professional relationships in promoting positive outcomes.

#### **4.11.2 Relationships and the Symbolic 'Family'**

Kendrick (2013) writes about the significance to young people of professionals who provide emotional and practical support. Using the metaphor of family, his article discusses residential care and the relationships young people have with staff. Other studies also emphasise the importance of relationships with workers which mirror the positive qualities often associated with families (Steckley & Kendrick 2008b, pg 565; Wilson et al. 2012, pg 123). Young people were able to talk about the significance of workers who 'cared' or were simply just 'there' when needed which further highlights the significance of quality and enduring relationships for children in care and care leavers. The common theme is the notion of family and how young people are able to identify those specific characteristics which promote a sense of belonging.

Garfat (1998) found that young people valued relationships which were characterised by 'intimate familiarity' suggested a level of investment or reciprocity in the relationship. This was also noted in a study by Pahl & Spencer (2004) who found anecdotal evidence to suggest that some of the young people's relationships with workers which persisted over longer periods of time were reciprocal. Holland (2010) writes about the fundamental requirement to wellbeing that young people are able to envisage a future with continued and sustained relationships and it is the 'reciprocity in a relationship which helps to build and sustain bonds of trust and commitment' (Gilligan 2009 pg. 26).

#### **4.12 Conclusion**

It is without question that care leavers are over represented in statistics which highlight negative outcomes. Examples cited in this literature review such as prevalence of mental health difficulties, lower educational attainment and achievement, offending and substance misuse all lean towards an almost pre-determined or pre-destined trajectory for care leavers. This is problematic- the disproportionate representation of care leavers in these groups does not suggest a

causal link, merely an increased vulnerability. It is important to acknowledge that although care leavers by definition are a unique group, many of their actions, attributes and behaviours are influenced by the developmental stage of adolescence. Of particular significance for care leavers is the way in which being an 'adolescent' interacts with their family, care, educational, peer group and other social experiences.

Care leavers are a highly visible group whose actions are scrutinised more so than their peers. The statutory systems in place, designed to protect, often have the reverse effect. For example, the duty of local authority foster carers to log missing person requests to police when arguably parents of young people living at home may allow more flexibility and autonomy or the requirement for increased monitoring or agreements for young people to visits friends, family or participate in school trips or the regular monitoring of health and education. Taken in isolation, each of these duties are designed with the best interests of the young person and set about to improve longer term outcomes. However, arguably what these processes also achieve on a cumulative basis, is the increased scrutiny of actions and behaviours. The risk taking, possibly defiant and conflictual nature of 'normal' adolescence is often disregarded in favour of attributing a causal link to being in care.

A tension is apparent in the discourse surrounding care leavers and this relates to the search for certainty and absolute cause, versus fluidity and individuality. This mirrors issues identified by Munro (2011) regarding social work practice and the importance of individual judgement. A narrow focussed discourse which attributes negative outcomes solely on being in care or being a care leaver is un-helpful and at times damaging, further marginalising this vulnerable group. Whilst this does not dispute the impact of early childhood trauma and abuse on the developing young person, it does suggest that the label of 'care leaver' is not always a useful one if other factors are not taken into account.

It is clear from the research that those young people who have had traumatic early childhood experiences and admissions into care, on the whole, fair worse than their peers who haven't. The reasons for this disparity are multi-faceted and complex. Suggesting a simplistic causal relationship between care and poor outcomes

undervalues the compensatory nature of the care experience. The professional response must take into account the lived experience of young people and the impact (whether that be perceived as positive or negative) of the 'label', care leaver.

This chapter has highlighted the key themes from the literature on care leavers. The following three findings chapters aim to bring together these themes (along with those from Chapter Three) using the data obtained from the focus groups and interviews. The first findings chapter examines the response to cultural needs of young people leaving care.

## **Chapter Five - Findings**

### **Responding to the Cultural Needs of Young People Leaving Care**

#### **5.1 Introduction**

This chapter is an exploration of the cultural needs of young people leaving care in Cornwall. As described earlier, this study was a qualitative study which sought to obtain the views of young people and professionals through focus groups and semi-structured interviews. The chapter begins with an exploration into the importance of meeting the cultural needs of care leavers and follows into how culture is defined by the young people, recognising the differences between individual interpretations. Cornwall is the setting for this study and its rurality presents a number of challenges for both young people and professionals. Cornwall has lower than average numbers of BME groups and this can present as a challenge for professionals in meeting the needs of BME care leavers. However, as highlighted in Chapter Three, definitions of culture are individual, encompassing characteristics as broad as race and ethnicity as well those more unique such as place of birth or social groupings. Young people leaving care have different experiences to their peers and this can add a different level of meaning to their cultural identity.

The chapter explores some of these complexities specifically in relation to intersecting disadvantage and the overall impact of rurality. Chapter Four provides a theoretical examination of cultural competence and a focus of the study has been to explore the views of young people using this concept to frame their experiences. This chapter draws on this exploration and identifies examples of practice which can be understood within the framework of culturally competent practice.

## 5.2 What Does 'Culture' Mean to the Young People?

### 5.2.1 *Young People's Definitions of Culture*

A fundamental component of this study was to hear the experiences of young people leaving care in Cornwall through a theoretical lens of culturally competent practice. The discourse surrounding this area of practice is an ever changing landscape of language (an issue fully explored in the Chapter Three) which is established primarily by professionals. As previously discussed, culture is not explicitly defined in legislation which can pose complexities in interpretation amongst professionals. Without clear and agreed parameters to work within, it is likely that practice will be applied inconsistently and experienced differently by young people. This study sought to explore some of these issues with the young people and the professionals who worked with them.

In order to achieve this it was important to establish with the young people what their understanding of culture was. It was crucial that young people were able to articulate what culture meant to them before they were then able to discuss their experiences of working with professionals. Whilst I was not seeking a definition of culture per se, it was important for the young people to talk about their understanding of culture and the specific meaning this had to them before embarking on their views regarding the professional response. In the first set of quotes, Hayley and Tom talk about what they understand culture means. What is striking is the distinction in definitions between 'I' and 'we', suggesting an understanding of culture as the positioning of an individual within a group.

*'culture by literal definition means the knowledge and values of society that have been created to make a group of people think and act in a certain way.....to me it's what a group of people in a certain space or country collectively believe.....culture is what makes us believe what we believe through religion, through art and music, generally it's about how we function and how over years and years how we accept the way we do things' (Hayley)*

*'your religious background, where you came from, where you were brought up, country you come from, your people or your tribe, your ethnicity whether you are British or Chinese or Black'* (Tom)

A fundamental premise of this study was to hear the voices of the young people and it was important not to shy away from asking questions about complex ideas. The decision to discuss definitions of culture proved rewarding and interesting insights were given by the young people. The quotes above capture several key components found in definitions of culture, such as identifying the significance of shared characteristics, traditions and beliefs, the place of the individual within a group and the significance of customs passed down over time. When discussing individual meanings of culture, some young people linked their understanding of the concept, to themselves and gave examples using elements of their own culture.

*'culture means like religion, so if you have a God, you must respect that God, example my culture is Chinese but there is different Chinese, like Hong Kong, Beijing and Japan. Mine is Hong Kong and we have to respect God which like others I do. We have different food that is not the same, like here you have bacon, eggs like that but in Hong Kong they have Chinese food like rice, prawn crackers and everything else. Some people are different but some people look the same, so you come from Japan and you look like Chinese and look the same but it's different how you speak.'* (Daisy)

*'yep, it's about myself. I'm a male and it's like my hobbies, I like doing photography and all other stuff, I like playing games and lots of other stuff'* (Calum)

*'yes, it's who I am, I am a Roman Catholic'* (Kate)

What is interesting in the above quotes is the diversity of characteristics which the young people talked about. Characteristics such as religion and ethnicity were mentioned which is unsurprising as these are often associated as being primary to definitions of culture. Also discussed were references to gender, food, hobbies and language which demonstrate a wider conceptualisation of what culture means to

them and their ability to articulate this. In talking with the young people it became clear that the way in which they defined 'who they were' was multi-faceted and although they may not have made direct reference to culture through the terminology they used, the importance of people, place and symbols bore significance through the views they shared. Below is an excerpt from a conversation with Jared about 'who he is' and what is important to him.

*'So I go out on that day and do a load of busking and pay my bills.... yes I love it all, I've never (pause) for all my life I've had a strong belief that I never want to work and go home and be like, I don't like my job, coz there are so many people I know who are working in big organisations, companies and all that sort of stuff and half the time you meet them down the pub for a pint and their like, I really hate my job, I'm like why do you do it? They are like, coz it pays my bills. Mine just pays my bills but I am still enjoying it and I'm happy'*  
(Jared)

The views which Jared shared with me were not part of a conversation containing terminology such as 'culture' or 'cultural needs' however what the above dialogue illustrates is an example of those characteristics of cultural identity which are individual and wider than the formal categories upon which culture is ordinarily based. For Jared, defining himself as a musician was a thread which weaved through his entire interview representing an integral component of his overall identity. The nature of this discussion was not unique to Jared, other young people spoke of similar interests or characteristics throughout their interviews which gave a real sense of their individuality. For example, earlier on in this section (and in subsequent sections) Calum talked about his love of photography which he used as a focal point to frame many of his answers during the interview. The quote from Tom below, using a different subject of interest, further illustrates this finding.

*'(laughs) yeah and I'm still watching Dr. Who, from when I was 12 years I think, that was my first time and that's when I got into it and I've been watching it ever since, on TV, live player, DVD on the website'* (Tom)



The notion of familiarity or comfort in routine can be picked out in this quote from Tom and the previous from Calum and Jared. In terms of culture, the views expressed show how something which stands the test of time, becomes part of who you are, part of your cultural identity. And this next quote from Beth highlights an altogether different element of culture, one of parenthood and the way in which it has changed her as a person.

*'ummm, yes its changed because I've become a Mum, it all changed then'*  
(Beth)

Early parenthood is often considered to be indicative of poor outcomes (discussed in Chapter Four) but for Beth the meaning of having a child was positive and contributed to her sense of self and purpose. This finding is important to note in line with the literature on the restorative nature of care. Beth viewed parenthood as positive, a transition to a new identity which is arguably at odds with what is already known regarding poorer longer term outcomes for care leavers who experience early parenthood. Whilst I am not suggesting that these facts should be disregarded, it is also important to acknowledge the young people's views on what constitutes positive outcomes.

The views shared in this section have consisted of young people taking about their understanding of culture and their own cultural identity. Several young people interviewed were able to articulate a definition of culture and almost all of the young people willing to talk about their own individuality. Chapter Three explored a definition of culture and suggested that this clarity was not apparent in legislation, leaving professionals unclear on how to approach this area of practice. The findings from this study would indicate that young people are aware of what constitutes culture and how to define their own cultural identity which arguably is at odds with what is assumed. The professional response will be considered later on in this chapter and in Chapter Seven. Moving away from young people's definitions of culture, the next section considers the cultural significance of place which similarly holds individual meaning.

### 5.2.2 *Cultural Significance of Place*

This study was conducted in Cornwall and sought to obtain a perspective on the experiences of living in a rural area. This section focusses on the significance of place to cultural identity and addressed later on in the chapter will be an exploration of the specific challenges of living in Cornwall. Over half of the young people had lived in Cornwall throughout their lives with the other half spending a considerable period of time in Cornwall. All of the young people had experienced local authority care whilst living in Cornwall.

The following quotes and dialogue represent the importance of place, namely Cornwall, to the young people. The significance of 'place' is noted in a number of studies (Wilson and Milne 2013; Anderson and Jones 2009; Rasmussen 2004). These studies highlight the meaning and attributes which children and young people associate with certain places and interestingly not always those designated by adults as 'spaces for children'. An older study by Tuan (1977) emphasises the abstract nature of place whereby meaning is generated through those experiences associated with a location. Sharing similarities with the previous section's views from Jared, the quotes below were not framed in a conversation about 'culture' or cultural needs' but taken from broader discussions about what was important to the young people as individuals. What is interesting about the following discussions is that Cornwall is talked about as representing more than 'just' a place, seeming to have a deeper meaning, akin to belonging. The first quote, from a professional suggests emotional connections to living in Cornwall.

*'Because Cornwall is ridiculously long and thin and we can't help it, but we love it'* (CEO Carefree/former foster carer)

This sense of belonging and importance of place is further highlighted in the dialogues below where Calum and Tom talk passionately about Cornwall and what makes it special to them.

Calum- *'Cornwall is a wonderful place'*

Researcher- *'I agree'*

Calum *'(long pause) I don't think there any problems living in Cornwall'*

Researcher – *‘so for you there are good things about living in Cornwall?’*

Calum- *‘loads, there are wonderful views, just go out and explore. Some people haven’t even been out and explored those places that have wonderful views’*

Researcher - *‘I think your right. And are those the places you take photos of?’*

Calum- *‘I’ve been to those places before and I just like going back there to see if anything has changed’*

*‘living in Cornwall is exciting. We can see a lot of Cornish stuff like the tin mines, the beaches, the flags, the churches, the flowers, the everything. I enjoy being a care leaver in Cornwall, its exciting..... being a care leaver in Cornwall is quite exciting so you can learn a lot of new things and do a lot of new things like meeting new people and meeting new friends’ (Tom)*

Culture is often associated with customs or rituals which are passed down through generations therefore a strong emphasis on tradition and consistency. Evident in Calum’s and to a degree Tom’s views are a sense of cultural belonging due length of time and familiarity with Cornwall. Whilst neither spoke of customs in the traditional sense of the word, what they both described were activities which they repeated over time, almost ritualistically such as regularly visiting or taking photographs of Cornish landmarks. Cornwall represents more than a place to these young people, forming an integral part of their cultural identity. This is an important finding as it is at odds with the perception of young people living in and leaving care being detached from place (Clark et al 2014). The notion of belonging, experienced through familiarity is a recurring theme throughout many of the interviews. The next section takes a different angle and considers belonging experienced through cultural symbols.

### **5.2.3 The Importance of Cultural Symbols**

Gilligan (2009), Holland (2010) and Stein (2012; 2011) all write about the significance of belonging for young people leaving care. Chapter Three discussed elements of culture which are passed down, customs or practices which contribute to an individual’s identity. A sense of belonging is obtained through shared beliefs, acceptance and an understanding of past narrative which can be challenging for care leavers to achieve. Young people leaving care can often feel different to their

peers and the experience of stigma can have a profound effect on the development of positive identity (see Chapter Four). Later on in the thesis, Chapter Six explores the young people's experiences of difference but the following dialogue highlights how cultural norms impact upon a sense of belonging. The dialogue is included in its entirety and makes a number of important points which will be discussed in subsequent chapters. However, for the purpose of this section, the focus will be on the *school prom* as a cultural symbol.

Mark- *'it came to prom and stuff and they got a prom suit and social services paid for that, and I needed a suit for a funeral and my foster carers went out and bought one coz they cared and they wanted to spend their own money to help us more than anything'*

Kate- *'do you know what I had to wear for my prom dress? A £10 dress because I couldn't have a proper one, apparently social services didn't have a fund to get you one, so I just wore a normal dress, £10'*

Adam- *'I saved up and went to Matalan'*

Kate- *'yeah but that's different, you're a boy and just needed a suit, I'm a girl. Have you seen what the girls wear? Do you know how much their dresses are?'*

Adam- *'suits aren't cheap'*

Researcher- *'in terms of culture and what makes you, you, going to your prom was a biggy for you Kate?'*

Mark- *'it is a major thing for girls'*

Adam- *'guys just get drunk at the after party'*

Researcher- *'for you Kate, you felt that you wanted a prom dress and that you didn't get one?'*

Kate- *'I would have loved to have had a big dress, but I wasn't allowed one'*

Matt- *'why do girls feel they need to be so flamboyant?'*

Kate- *'sorry but it's your prom, a big day'*

Adam- *'closest thing to a wedding day'*

Kate- *'we're talking about differences'*

Mark- *'wedding dresses aren't as important as prom dresses because you only leave school once'*

*Kate- 'you can get married six times and have six different dresses but with your prom only one and then pass it onto your kids for the big day..... I went to my one and only prom without a prom dress, all of my friends had massive, big dresses and not me. When I get married I will have a massive dress..... the reason I wanted a prom dress is that I went in a £10 dress from a charity shop and all my mates were wearing these big fancy dresses so that's why I made it a point. And the girls all made fun of it'*

The high school prom is a phenomenon from the USA slowly being incorporated into a British rite of passage for UK school leavers. Surprisingly there is very little written about it from the USA and virtually nothing from UK sources. From a feminist perspective Zlatunich (2009) writes about the cultural messages given to young people, girls in particular about striving for the perfect prom. She talks about the damaging messages reinforced by the media, of the prom as 'the night of your life' where anything other than the pursuit for perfection will result in disaster.

Here, the *school prom* is discussed as a shared experience, an event which the young people describe almost akin to custom or tradition. This is significant and links to earlier discussions around definitions of culture (see Chapter Three). Although there was disagreement amongst the young people (albeit an interesting disagreement around gendered roles) there was a shared understanding of the meaning of the school prom. A key component of culture is collectiveness, sharing experiences through rites of passage which is clearly evidenced here. Conversely for Kate, what becomes significant is not the shared experience per se but her feelings of not fitting in and being different from her peers.

The prom dress was symbolic to Kate for two reasons; firstly, the prom was perceived by Kate as a collective way of marking the passage through school and the dress was part of this custom; and secondly, not having the 'right' dress symbolised her difference. The school prom is a rite of passage associated with adolescence which is a sensitive time in terms of identity development (see Chapter Four). Peer groups play a pivotal role for young people during this time with belonging and difference experienced intensely. This raises important considerations for culturally competent practice with young people particularly in respect of what

constitutes 'cultural knowledge' (see Chapter Three). The point in question is not necessarily the 'prom dress' itself but what it symbolised for Kate, particularly in the context of adolescence and identity development.

The above discussion highlights not only the significance of cultural symbols to identity, but also the disadvantages which young people leaving care experience through 'difference'. The next section continues along a theme of difference and explores the intersecting disadvantage experienced by Black and Minority Ethnic young people in Cornwall.

### **5.3 The Intersecting Disadvantage of Black and Minority Ethnic Young People**

The overrepresentation of Black and Minority Ethnic (BME) children and young people in care and the inadequacy of service provision is widely commented upon (see Chapter Four). The purpose of this study was to explore the cultural needs of young people leaving care in Cornwall. In common with other rural areas there is a lower number of culturally diverse groups present than for other areas of the UK (Pugh 2000) and this demographic is reflected in the young people who participated in this study.

O'Hagan (2001) talks about the lack of clarity in defining terms such as culture. He believes that this lack of clarity has resulted at times, in the term being misunderstood and used pejoratively. This point was raised in an interview with Mark when he was talking about what culture meant to him.

*'it's about equality and not being prejudiced about different people, whether they are coloured or religious' (Mark)*

In the above quote Mark makes the swift association between the term culture and discrimination. This quote is interesting because the conversation at the time was not framed around discussions of discrimination. For Mark, the term itself conjured up notions of inequality and prejudice which confirms the point made by O'Hagan (2001). It is difficult to ascertain if Mark was referring to a particular experience of his

own or more generally but raises an interesting point nonetheless. The following section continues with the theme of culture and difference by exploring the views of a BME young person.

### 5.3.1 *Discrimination*

The additional challenge of living in an area with a predominantly White, British population was highlighted in an interview with Daisy. Daisy is a dual heritage young person, with English as a second language and has been living in foster care in Cornwall throughout her teenage years.

*'what has changed is basically that when I was little I always stick with my cousin and family which has changed a lot because now we're, I'm with lots of people who are White, White British, so that's changed. However I'm also in a school with lots of White people and lots of culture people that have come down here, so that has changed and also I have carers who are White British'* (Daisy)

*'The bad thing is that there is not a lot of Chinese people here which is really bad but at the same thing is good and bad because I do have my foster family and I do talk to them but it's not in Chinese it's in English which is understandable but also weird'* (Daisy)

The views shared by Daisy reaffirm the findings of many studies which indicate the lack of suitably matched placements in White areas which are away from a young person's community and raise questions of the appropriateness of carers to meet cultural needs (Gilligan 2009; Barn et al 2007; Barn et al 2005; Grady 2004; Department of Health 2000; Parker 2000; Department of Health 1998; Ince 1998; First Key 1987; BIC 1984). The same studies also write of BME young people reporting not enough input from professionals about culture or identity, describing a sense of 'not belonging' in care, with dual heritage young people stating that they felt they were not accepted by either White or Black people (Ince 1998; Biehal et al 1995). Daisy shared the following views regarding her experiences of racism and how this affected her.

*'I've been threatened when I was in secondary school, they call me lots of stuff, you know like the rhyme, my mum's Japanese, my dad's Chinese and I end up like this. I had all that racism then I had them call me ching chong and everything else but I just look at them and walk away because I remember when I was at secondary school I slapped someone because put it this way I didn't know how to discipline myself. I had just come down, I went to an English British school and I don't know how I'm going to do this, I don't know the rules, I don't know anyone, a new thing for me, I don't know how to punish myself. Professionals said laugh and walk away, ignore them, don't do anything. Did all that they still bullying me, all the time, I had to stand myself and I don't care so I just walked over and done my own thing and then they realised it's not a joke anymore its real life' (Daisy)*

*'the things they said not what they did. You know when there's news about depressed and suicide, that's what I felt like. Not suicide but depressed, I just want to hurt myself. I told my professionals that I wouldn't hurt myself I wouldn't do stupid things like that to put me in hospital but I felt like it. The only I did that helped me is smoke cigarettes, it does help me, I know it's bad for you but I would rather not self-harm and overdose. I can tell its suitable for me, I can think about hurting myself but I won't' (Daisy)*

Daisy's experiences confirm the findings of Barn et al (2005) who found that experiences of racism, lack of contact with birth family, community and/or racial/cultural input can compound negative experiences, particularly leaving care. Her experiences highlight a sense of difference, prejudice and overt racism which intersects her experiences of being a care leaver. It is poignant that Daisy felt that she had to deal with much of this alone. This could also link to her earlier views of not wanting to talk about her culture to professionals due to language barriers and/or not feeling confident in the subsequent response. Evident in the quotes from Daisy are a sense of powerlessness to stop the bullying and to a degree, confusion at the responses of professionals. This highlights an important issue for professionals when considering culturally competent practice and the knowledge required. Daisy's care needs were being met but there was an overwhelming sense of difference or not belonging which she struggled to articulate. This was a theme picked up earlier on in



this chapter and suggests that professionals need to have a more sophisticated understanding of young person's needs in relation to the context they are in. For example, in Daisy's case, an understanding of the intersecting disadvantage of being a BME care leaver, fostered by White carers and living in a predominantly White rural area.

Barn et al (2005) write about the challenges for BME young people in developing a positive self-identity and this is heightened in areas such as Cornwall due to lower levels of culturally diversity. As pointed out by Pugh (2000, pg.45) who comments about living in a rural area, 'one's identity is always potentially a point of issue', a visible reminder of difference. Stein (2005) discusses that helping care leavers develop a positive identity will be linked, firstly to the quality of care and attachments; secondly to their knowledge and understanding of family background and personal history; and thirdly their experience of how people perceive and respond to them and the opportunities they have to influence their own biographies (Stein and Munro 2008). Daisy's experiences suggest that she was not able to fully understand her position in relation to the responses of others. This was further compounded by a lack of familiarity due to the physical and emotional distance from her community and family. Continuing with this theme, the next section focuses on the importance of family to cultural identity.

### **5.3.2** *The Cultural Significance of Family to Religion and Ethnicity*

The quotes contained in this section are taken from interviews with two young people and illustrate the significance of ethnicity, language and religion to their cultural identity. Both young people highlight the value they place on their family in making sense of who they are.

*'I'm Roman Catholic.....I chose my own (religion), I followed my Mum's beliefs which is Roman Catholic' (Kate)*

*'I do go back to Hong Kong for holiday or with my Mum. This is a tradition for Chinese people, if it's Chinese new year, close all the restaurant down and go to Hong Kong and come back about January' (Daisy)*

Daisy also highlighted how she felt that she didn't always want to talk to other people (specifically professionals) about her culture, feeling more comfortable in talking with her family.

*'I don't know, just that I want to speak to family and not professionals (about culture)....yeah because they ask if you want to talk about your culture and everything else and I say no, not really coz it's a big lot of hassle and I didn't want to' (Daisy)*

This is an interesting point to acknowledge and there are likely to be many reasons for this reluctance. Daisy's past experience suggested that professionals did not always understand the context in which she was positioned, therefore she may have lacked confidence in disclosing. The next quote from Daisy would tend to suggest the language barrier was a contributing factor in feeling reluctant to discuss her cultural needs.

*'when I was little, well this is part of it as well, when I was with my Mum and all of those years I basically go to Chinese, learn Chinese and this and that, but when I've grown out of it, like you know when people say your language will be small because you are learning another language well it's hard for me....so technically I don't know what it's like I'd rather have part of my family to do it with' (Daisy)*

Identified within this quote is the importance of a continued connection to language for young people who are living with foster families and/or in areas which are culturally different to their birth language. The fundamental value Daisy places on her family is evident in the views she shares and was a theme running throughout her interview. This finding is in line with a similar finding discussed in Chapter Six which explores the importance of family to a young person's meaning of care. For Daisy, the link with family represents familiarity and a link with her cultural identity. Living in a rural area with lower numbers of BME groups highlights Daisy's difference and she experiences this more so due to the language barrier. In terms of culturally competent practice, this once again re-iterates the importance of understanding the context. Professionals need to be aware that young people are not always able to

talk about their cultural identity in ways that are easily understood as many of the issues they are facing are experienced on a wider, community or structural level. Taking the notion of community or location into consideration, the next section focusses on how young people experience rurality.

#### **5.4 The Specific Challenges of Living in Rural Areas**

Cornwall is one of the poorest areas of UK with numerous areas of intense deprivation (see chapter One). Earlier on in the chapter, the significance of place to the young people was explored. During this exploration, several examples were given which showed the link between Cornwall and cultural identity. The young people felt strong attachment to place and considered it intrinsic to their identity. However this attachment to place is not without significant difficulty. This section explores a different perspective, namely the challenges of living in Cornwall and the young people's experiences of rurality (see Chapter Four). One of the main concerns expressed throughout the interviews and focus groups was transport and therefore it is fitting to discuss this first.

##### **5.4.1 *The Specific Difficulties of Transport in Rural Areas***

The difficulties of accessing public transport and the subsequent implications on education, employment and support services factored highly throughout the interviews and focus groups. Pugh (2003, pg. 70) writes that the lack of public transport is both a 'cause and consequence of rural deprivation' (Buchanan, 1983; Denham and White, 1998; Lowe et al., 1986; McLaughlin, 1986; Shaw, 1979). Therefore, households with low incomes in rural areas with poor transport links are more vulnerable to continued inequality due to the widely dispersed nature of employment and services (Cloke et al 1994). Couchman (1994) Leach (1996) and Streich, (1999) all discuss the lack of transport as an 'overwhelming' cause of social exclusion, limiting participation across the age range in essential provision and support services (Franks and Goswami 2010). For children and young people in care, rural locations can also limit access to specialist services that might be required to meet their needs (Harris et al 2017). In the following discussion about the challenges for care leavers in Cornwall, transport is at the forefront of Matt's views.

*'Going back to the original question about what makes things difficult for care leavers in Cornwall..... one thing is difficult for everyone in general but care leavers specifically is obviously related to this, is travel. It will always be an issue, were spread out across continents for god's sake' (Matt)*

Mark and Jared continue this discussion by giving examples of why they think transport is so problematic.

*'the prices are really expensive and its like really hard to get into town and stuff, everything really' (Mark)*

*'the problem with it, is that in Cornwall you need to be able to drive or ride a motorbike or something or have transport of some kind coz public transport is ok, but it doesn't go everywhere. So it's like, I was doing a performance in (local area) on Sunday and I needed to be there for 11am, the first train got me there for 11.15am. I ended up being 45mins late and missing the start' (Jared)*

*'timings of transport, reliability of transport. If I lived in a city I would be able to do a lot more' (Jared)*

It is interesting to note the comparison Jared makes with what he believes it would be like in a city (this comparison with 'cities' is a theme picked up in the next section). In the next set of quotes, Kate begins a dialogue about the individual impact, which in her case related to maintaining contact with her family and attending appointments.

*'on Sundays I'm lucky if I have the money I'd see my Dad every Sunday rather than every fortnight, though my partner's step dad drops me to (local) Station and I get the train to (local area), but if I like needed to go to an appointment, like doctors then I have to walk a mile to get on the bus to get to the doctors surgery. Round Cornwall it's the transport' (Kate)*

Kate's views highlight the difficulties associated with the unavailability of quality public transport. In Kate's case it related to maintaining contact with her family, the importance of which has been discussed elsewhere (see previous sections and Chapter Four). Similarly, in the following dialogue Calum explains how difficulties with transport affected his ability to attend his local running club.

*Calum- 'I used to go to (local area) leisure centre on a Tuesday to a running club, go and do maybe 5 or 6 laps of the track but now because of the money I can't do it'*

*Researcher- 'and what is the money about, is that transport?'*

*Calum- 'I didn't use public transport at the time, I had to use a taxi, getting one to pick me up at my place and take me and it was a lot of money'*

*Researcher- 'and is that because there weren't any buses?'*

*Calum- 'no buses at the time, there might be buses going now but I've stopped going'*

The views expressed by Calum give a specific but all too common example of the effects of poor transport links. Attending a running club not only provides an opportunity for social interaction but has obvious health benefits, both of which Calum is no longer able to access. Service provision in rural areas can be patchy and inconsistent. The Social Services Inspectorate (1999, p. 2) comment that this is often attributable to increased expense due to location and dispersed population, meaning less use, often leading to closure of the service. This fits in with the views shared by Calum. Several reports confirm this finding suggesting that there are marked inequalities between service provision in rural and urbanised areas (Spilsbury and Lloyd 1998; Department of Health 1996; Hayle 1996) with transport being cited as a major contributing factor (Pugh 2000). A consequence of this lack of provision is often an increase in social isolation, exacerbated by living in areas which are less densely populated (Pugh 2009). Along similar lines, Lucy talks about distance and school. She focusses on the rurality of Cornwall and how the distances between foster placements and schools negatively impacted upon her educational experience, increasing social isolation.

*'schools are far away from placements which meant that you couldn't keep a social network or make new friends. Friendships weren't encouraged. Felt like I lived in a bubble, journey to school took 1 1/2 hours. It led to depression, I wasn't like a normal teenager. My only consistency was school, if that had gone I would have melted down'* (Lucy)

Poor educational attainment and mental health difficulties factor highly in the research (see Chapter Four) and the findings of this study add to this discourse by giving specific examples. When considering these statements through the lens of culturally competent practice, rurality should be viewed as an intersecting inequality. Of significance is not *just* being a care leaver or *just* living in a rural area but the cumulative effects of being a care leaver who lives in a rural area of socio-economic deprivation. There are longer term implications for young people living in rural areas and Pugh (2000, pg 133) describes some of these factors as being; an increase in the risk of youth homelessness; lack of employment, poor transport, low income, lack of affordable accommodation, fragmented links with family and leaving care.

Continuing with the theme of rurality, the next section explores an interesting angle, that of the young people's perceptions of how life in Cornwall is different to other parts of the UK.

#### **5.4.2 'down here' and 'up country'**

Throughout the course of the interviews and focus groups numerous references were made to Cornwall which included the strengths and difficulties of rural life. Young people were able to talk about their views and give specific examples of their experiences. The following section draws attention to young people's negative conceptualisation of life in Cornwall and how they perceive urban areas to be more privileged.

*'the money of living in Cornwall and the jobs. It's not easy to get a job in Cornwall then what its like in a city because jobs just go in Cornwall and they always say, get yourself a job but they don't know how difficult it is for someone to get into work in Cornwall'* (Kate)

*'Financially I reckon that people in London get more money than us down in Cornwall because we are like, treated differently'* (Mark)

*'I think there would be more.... from my imagination there would be more or might be more support in a city, there is so much going on there that means so much going wrong, going right, more of everything. Down here there is very little'* (Jared)

Of interest here is Mark's and Jared's use of the phrases '*down here*' and '*up country*'. These are common phrases, frequently used in this area to indicate Cornwall and other parts of the UK. There is no definition of where '*up country*' may be but its meaning is universally understood by people who live in Cornwall. This use of language raises a pertinent issue around belonging and acceptance (see Chapter Six) but for the purpose of this section its meaning is the focus. The phrases seem to have been used in the context of disadvantage. It appears to mean more than location and is to be understood in the literal sense- *down* as lesser or below. This is an important finding as it suggests that there is a perception held by the young people that by living in Cornwall they are at a disadvantage in comparison to their peers.

As previously discussed in this chapter (see also Chapter One) Cornwall is an area of socio-economic deprivation which creates additional barriers for young people. In this respect, there is legitimacy to the young people's views that they are disadvantaged by living '*down here*'. However, this is also the case for many other parts of the UK, therefore the meaning should be explored and the notion itself challenged. If young people internalise a view that they are somehow lesser than their peers in other parts of the UK, there is a risk that this will feed into their sense of worth and impact upon self-efficacy. This raises an important issue for culturally competent practice and the potential for professionals to either confirm apathy or raise aspiration.

Comparisons with other parts of the UK were also noted in Hayley's interview when talking about the availability of services and support.

*'but the parts of Cornwall I'm familiar with aren't great parts of Cornwall, but (local area) is very tourist based and Cornwall has not got lots of facilities that I feel appeal to everyone and not only that but I feel that its very small, closed county' (Hayley)*

*'not only do I know there is more support (outside of Cornwall) but I know that it is widely more accepted, more of it, it's like more talked about, Exeter has the clinic, London has a clinic, there are LGBT groups in other places but there is not that much here' (Hayley)*

The views shared by Hayley highlight a lack of service provision for those young people who define themselves as culturally diverse. Hayley suggests that a lack of support services equates to a lack of acceptance and her words *'it's a very small, closed county'* give meaning to her sentiment that she feels to be *'different'* in Cornwall is difficult. This is unsurprising if considered alongside the previous discussion regarding the experiences of BME young people in and leaving care. There is a distinct lack of specialist provision in Cornwall, largely attributable to the considerably lower than average numbers of culturally diverse groups. Hayley is experiencing intersecting disadvantage through being a care leaver who also defines herself as Transsexual. In Hayley's interview she talked about the support she received from professionals and some of her views are shared in the next section.

## **5.5 The Professional Response to Cultural Need**

Cultural competence (see Chapter Three) is crucial for the social work profession as it is concerned with providing culturally responsive services to diverse cultural groups with the aim of effectively meeting diversity of need and reducing or eradicating disparity and inequality in service delivery (Harrison and Turner 2010; Jack and Gill 2010). Definitions, although numerous and varied in length and detail, support three key elements, with a differing emphasis on the significance of each component.

Firstly, self-awareness, which Leigh (1998, pg. 10) sees as social workers who are, 'aware of self-limitations' and Kohli et al (2010, pg. 257) sees as possessing 'the core abilities of warmth, empathy and genuineness.' The second strand is concerned



with the knowledge which practitioners must possess about cultural groups and it is worth noting that this is the strand of cultural competence which generates the most polarised views owing to the nature of knowledge required. The third strand of the definition is explained by Sue (2006, p. 29) as being concerned with a practitioners ability to identify and use culturally appropriate skills or interventions. Therefore, cultural competence comprises an awareness of the values and behaviours of diverse groups, alongside a developed sense of self reflection and an ability to carry out the social work task, consistent with this awareness (Petrovich and Lowe 2005, pg. 163). The first quotes from young people highlight positive experiences of talking with professionals about their cultural identity.

*'they respected me, I had no problems when I told them I was a Roman catholic, I had no problems'* (Kate)

*'yes definitely, in fact I've had many opportunities to talk about it so yeah I feel that is one thing they do and they try to understand, obviously my situation is not something everybody would be able to understand but they tried which is always reassuring because you don't feel that people are always trying to dance around you as it were..... purely because it is an uncommon situation to deal with, nobody could have completely prepared which is understandable but I feel, their general knowledge they had a lot to offer'*  
(Hayley)

As discussed above (see also Chapter Three) one of the key components of culturally competent practice is to understand the specific needs of the individual from their perspective, placing emphasis on not basing professional knowledge of cultural groups on generalised or stereotypical descriptions. Hayley uses the phrase '*nobody could have completely prepared*' which suggests that her worker had made an effort to gain knowledge about Hayley's specific needs, but not based their understanding solely on this 'generalised' information. The significance of an individualised understanding of cultural difference is written extensively in the field of cultural competence (Johnson and Munch 2009; Hendricks 2003; O'Hagan 2001; McPhatter 1997). Both Dominelli (2008) and Keddell (2009) advocate a narrative or reflective questioning approach, taking into account professional knowledge or

previous experience but asserting that cultural differences can never be fully understood from this basis alone. Hayley's example is very much in line with this assertion and demonstrates how her worker sought to understand her cultural identity through exploring her individual lived experience. Whilst Hayley's views represent an example of good practice in relation to cultural competency, the following views from other young people indicate mixed experiences with professionals.

*'good helping me with my problems, disability problem but my beliefs and religion, they don't really help with that'* (Kate)

*'well no actually, certain persons no coz they don't understand from our point of view, some don't understand from our point of view what it's like to be in care. Some of them don't understand that point of view so they try to help us but they can't help us if they don't know or don't understand. But some of them are really good at understanding even if they haven't been in care they try to make the effort to understand what it feels like'* (Natalie)

These quotes both share a similar theme of variation in their experiences of professional practice. Although the content is different both Kate and Natalie both feel that at times the professional response is good and at other times, not in line with what they needed. What is interesting in the last quote is Natalie's view that not all professionals understood what it was like to be in care but some *'made the effort'*. This statement could apply to any characteristic of a young person, from differences in gender to differences in ability, sexuality or even hobbies and interests. Clearly, having experience of being in care would give valuable insight into the challenges for care leavers, however this would not necessarily equate to improved practice as these are not the only skills required of professionals. Professionals would not have experience of every characteristic for every young person they work with, even if they did, the individual experience would vary enormously. Therefore, what becomes significant is not necessarily having personal experience, but how the professional seeks to understand each characteristic, valuing diversity and striving to understand the unique lived experience. Culturally competent practice requires practitioners to translate the knowledge they have about individuals and tailor interventions to meet

needs. The next section will explore the idea of culturally competent interventions by using the young people's views to highlight areas of good practice.

### 5.5.1 *Specific Interventions*

McPhatter (1997) states that culturally competent interventions are those which are focussed on supporting the service user to function effectively in their cultural context. Pugh (2003) stresses the importance of relationships in relation to rural social work and it is through these relationships that service users are supported to function in the way described by McPhatter. The importance of the relationship (see Chapter Four) is also commented on by Cross (1998) who views this as a culturally competent intervention in itself. The young people involved in the study gave examples of the ways in which their workers had supported them. It is important to acknowledge that all of the views shared below came from young people who had previously talked about the value of the relationship they had with their worker. Therefore, for the young people a prerequisite to the support they received was having a trusting relationship with the professional in question.

*'The only thing that is difficult is getting to (specialist) appointments from Cornwall, (personal advisor) takes me but it's a long way to get there'* (Hayley)

Tom- *'people to help with independence, like getting on a train which I can do now'*

Researcher- *'did you have help with that to start with'*

Tom- *'this year I had help, in January but I managed to get on and off myself. I can get on the train on my own here now'*

Both Hayley and Tom talk about practical support with transport; in Hayley's case to get to appointments; and Tom to increase independence. Transport has already been highlighted as a significant barrier for young people living in Cornwall, therefore support to overcome this barrier can be viewed as a culturally competent response. For Hayley there is an element of emotional support involved with the transport due to the nature of the appointments she attends and for Tom, similarly a support element due to the anxiety of using transport independently. These examples can be viewed as culturally competent interventions as the relationship is used as a basis to

understand the young person's specific needs and provide tailored support. In the next example from Calum he talks about the overall support he has received.

*'I get to have a bit more independence sort of thing, they help me to be a better person and also like joining in with groups, I've now got really good communication skills'* (Calum)

This quote identifies the significance of supporting young people to access and maintain their own social networks. This chapter has discussed the increased risk young people leaving care have to social isolation. Empowering Calum to increase his confidence in social scenarios can therefore be viewed as a culturally competent intervention. Calum was able to utilise the trusting relationship he had with his worker to gain confidence which subsequently enabled him to progress onto accessing groups. The importance of relationships to young people is a common thread which weaves its way throughout this study and will be focussed upon in more detail in the next chapter.

## **5.6 Conclusion**

This chapter has explored the cultural needs of young people leaving care in Cornwall using the theoretical lens of culturally competent practice. Culture can be complex to define but the young people involved in this study were given the opportunity to discuss their own interpretation and their responses proved invaluable. Care leavers are a distinct group with distinct vulnerabilities which can impact upon their longer term outcomes (see Chapter Four). Good practice with care leavers requires recognition of their marginalised status in society and interventions provided to promote more positive outcomes. Young people had a strong desire to be empowered to do things for themselves and many of these examples related to elements of their cultural identity. For example, being empowered to use transport independently in order to attend care leaver groups, needing support to attend appointments relating to gender re-assignment or having contact with family to support birth language were all positively promoted.

The cultural needs of BME care leavers were explored in this chapter within the context of Cornwall. Cornwall has lower than average numbers of BME groups and this sense of difference was highlighted during the study with examples given of discriminatory actions and racist abuse. There is a distinct lack of provision designed to meet the needs of BME groups but culturally competent practice does not rest solely on the provision of race specific services. Of particular significance when working with BME care leavers is the acknowledgement of the context of Cornwall and how this has an overall impact in terms of increased isolation and increased risk of discrimination and racist abuse.

The rurality of Cornwall factored highly in this study and the impact of the socio-economic climate and dispersed nature of the County raised significant points regarding the barriers experienced by care leavers. Of particular interest was the way in which young people felt that they were different and disadvantaged to their peers from other parts of the UK. This notion raised issues for culturally competent practice and the potential for professionals to challenge meanings attached to identity that are prejudicial and raise aspirations. The young people place significant value on the relationship they have with professionals and it is through this relationship that many interventions can be provided. Cross (1998) talks about the simplicity of the relationship as a culturally competent intervention and this study strongly re-affirmed this point. The young people did not describe the relationship as an intervention but used examples of how it served as a foundation from which to develop and progress. Therefore in terms of culturally competent interventions, the relationship can be viewed as the primary tool professionals can utilise in meeting the needs of young people leaving care.

This chapter has explored some of the issues relating to culture and the cultural needs of care leavers in Cornwall. A primary aim of this study was to understand the young people's experiences and the next findings chapter will explore the meaning of care.

## **Chapter Six- Findings**

### **Meaning of Care**

#### **6.1 Introduction**

This chapter, the second of three Findings chapters forms the basis of an exploration into how young people define their care experience and what factors are significant, absent or worthy of greater examination. The meaning of care is important to conceptualise as its definition varies between individuals. Care relates to physical, actual acts or experiences as well as having an emotional meaning and more often entails elements of both. Local authority 'care' is intended to compensate for families who are unable, for whatever reason to care for their children but it is this compensatory component which is the most complex to achieve and arguably, the one which often falls short of what is necessary.

This chapter's broad aim is to examine what 'care' means to the young people involved in the study and make comparisons with the current discourse. The chapter begins by acknowledging the complexity of the meanings attached to care and offering a discussion on different interpretations. This discussion follows onto an exploration of young people's experiences of stigma, recognising that the label of care leaver often entails a marginalised position in society. Acknowledging this position, the chapter then seeks to explore those factors which mitigate against stigma, factors such as relationship based practice and the importance of normalised experiences. The experience of care can be viewed as a transition and the chapter concludes with an examination of how young people experience this transition and those aspects which have greatest impact. In this chapter I will be reporting findings from nine young people's interviews and the focus group with young people. It is important to highlight the conversational aspect of the focus group and I will be providing relatively long pieces of text in order to capture the way in which young people grappled with complex ideas.

## **6.2 What is Care?**

In discussing the 'ethic of care', Holland (2010, pg. 1670) asserts the position that 'Care is a broad and difficult to define concept'. This builds on the thinking of Shakespeare (2000, pg. ix) who discusses care as being 'a word which is value laden, contested and confused, particularly in the way it combines an emotional component and description of basic human service.' Care can be viewed as a social construct, its meaning changing in line with particular political ideologies or periods of time (Hayden 1999; Hendricks 1997). Featherstone et al (2014), Tronto (1994) and Diller (1996) describe the key elements of care, with similar emphasis on the importance of responsibility for the person being cared for; attentiveness to the needs of others; responsiveness to the relational aspect of care; and an integrity to the task itself.

These broad conceptualisations of care are important to understand in the context of young people leaving care where the primary aims are to provide, '...young people with permanence or stability in their lives, through a speedy return home, adoption, a longer term foster placement or preparation for adulthood' (Stein 2009, pg. 29). Longer term outcomes for young people leaving care are poorer in comparison to their peers (see Chapter Three) and the importance of a quality care experience in compensating for early childhood traumas and past difficulties cannot be overstated (see Chapter Four). For some young people the quality of the care they have experienced may have failed to compensate (Hannan, Wood and Bazalgette 2010; Sinclair et al 2007) and in considering this, Stein (2009, pg. 29) writes of, 'A long shadow.... cast on their education, health and emotional well-being especially in comparison to their peers who have not been looked after'. Care therefore becomes more about an 'emotional platform' for the journey ahead, an environment to develop resilience, the ability to overcome odds, manage and recover from adversity (Stein 2012).

## **6.3 Care Experiences of the Young People Involved in the Study**

Chapter Two has provided demographic information regarding the participants of this study but a further description of their circumstances is helpful at this point in the

discussion. The young people involved in this study ranged in age from 16 years to 25 years, were all defined as 'care leavers' under current legislation (see Department for Education 2010) and therefore had spent a considerable period of time in local authority care. All of the young people had lived in foster care at some stage of their lives and some had also lived with extended family members, in residential care and supported lodgings or housing. The young people came with a range of experiences relating to stability with some having remained with the same carers throughout their time in care and beyond, to those young people who had numerous placement breakdowns and subsequent moves. At the time of the research the young people lived in variety of settings ranging from privately rented, supported lodgings or housing, with foster carers (either as a statutory foster placement, under Staying Put arrangements or private arrangements for the older care leavers) or temporary accommodation, awaiting social housing. The young people's experiences of care varied immensely, but in common was their group identity of 'care leaver'.

#### **6.4 Young People Leaving Care and Stigma**

Brodie (forthcoming) discusses the 'unity' of the care experience which is often unfortunately derived through negative connotations of poor outcomes. This results in stigma which although argued by Goffman (1967) is 'socially constructed' has significant impact on young people leaving care. Bazalgette (2014) also found that some young people leaving care felt that the general public did not understand what being in care meant, or that this often resulted in stigma or prejudice. Stein 2012 (pg. 56) writes about care leavers being 'first and foremost young people', who face the same challenges as their peers in terms of their position in society and developmental stage of adolescence. Chapter Four explores the developmental stage of adolescence and identifies key themes relating to the challenges this can present for young people leaving care. Therefore care leavers should not be defined solely on the basis of their leaving care status but given acknowledgement as being young people who have the additional challenge of leaving care. This is particularly relevant due to the stigma often associated with care leavers and the negative discourse focussed on poor outcomes.



The following quote from Zach, taken during a discussion regarding the additional challenges for young people leaving care shows an awareness of this disparity but also a sense of perspective.

*'but that's normal isn't it, like there are some rich people in our society and some poor'* (Zach)

In a similar discussion with Daisy and Beth they articulated the importance of seeing themselves, first and foremost as young people. They identify a continuity of experience between their pre and post care selves; they assert a coherent identity which is not threatened by the experience of stigma of care.

*'I do everything other teenagers do like have fun, go shopping and stuff'*  
(Daisy)

*'I'm just the same person, I'm just the same as everybody else I've just had a different upbringing'* (Beth)

As highlighted by Beth the notion of being the same but also different is an important feature for young people leaving care. Gilligan (2009) and Samuel and Pryce (2008) discuss the importance of recognising the multiple social roles they play, in that it is unhelpful for a young person to have as his/her exclusive role, that of being a 'care leaver'. Gilligan (2009) stresses that this is not to deny the significance of being a care leaver, rather acknowledges that this is not the only identity which a young person has. The concept of difference raised in the above quote easily applies to most people in society who's diversity of experience contribute to the person they are and subsequently become. However, for young people leaving care this 'difference' often entails stigmatisation resulting in the focus not being on their different experiences but on them as 'different' individuals.

#### **6.4.1 Defining Difference**

During the focus group with young people, a discussion started regarding difference, was it evident and if so what did it feel like. Understanding the lived experience of young people is key to culturally competent practice, therefore exploring the notion of

'difference' important to pursue. This discussion generated lively debate and poignant statements were made regarding how difference was experienced and overcome. The following quotes demonstrate a real strength of feeling about the notion of difference and entitlement.

*'We're all saying how horrible it is in care and stuff but that being in care, we expect too much sometimes. We think that because we are in care we are automatically owed this but I don't think we do deserve more help than others who are not in care but because we are in care we are owed it and we should have it. We don't need extra help with travel and stuff, we are 18 years, we need to learn, we are not owed it because we are in care. We need to think for ourselves'* (Adam)

The last sentence of Adam's quote 'we are 18 years' relates to adolescence, a theme picked up in Chapter Four. Adam is talking about not being seen as 'different' due to the similarities in with his peers. He continues this discussion by emphasising a sense of self-efficacy, that being in care was a positive catalyst for change, disputing that he should have been treated differently because of it.

*'we don't want to be seen as any different so why should we expect to be treated any different? It's not about how terrible life is for us, its also about rules for life....we need to be, people in care need to be a bit more... they need a kick up the jacksy because we expect a lot of help, we think we're owed it'* (Adam)

*'We're not all victims because we've been in care. But theoretically, we're where we are today because of being in care. It sounds cliché but we're all here, we're alright, we've done ok and its now about how we take that forward and develop that ourselves'* (Adam)

Adam feels strongly that his identity as a young person takes precedence over his experiences as a 'care leaver' and whilst he acknowledges the impact of these experiences, he does not want to be treated differently because of them. These views demonstrate a strong sense of determination to succeed despite earlier

experiences, to place distance between who he was and who he is now. He raises the notion of not 'being owed' things because of being in (or leaving) care) which is an interesting point to note as much of a young person's entitlement to statutory support and services is linked to their leaving care status. Implicit is the issue of the relationship between the young person and the state. The notion of 'being owed' and 'deserving' represents an uneasy tension for some. There is a striking discomfort, which chimes with wider discourses regarding welfare and the deserving/underserving (Abrams 1998; Frost and Stein 1989). The following thread, included in its entirety and involving a number of young people elaborates on this point.

*Zach- 'I think that all people are in care are in care for their own reason and that all people in care are vulnerable because of the stigma that is attached to care leavers, ie criminals, drug addicts, stuff about their behaviour being uncontrollable and I think that that extra support, although we sit here and say we shouldn't have had it, we expect too much (a theme identified by Adam above) but I think that's alright because we're not like everyone else, we haven't had the same lives as everyone else, we need it because we are disadvantaged from the beginning. We need that extra support to get us to where we are today, because I know that I was very lucky to live with my foster parents from 7 years and I'm still there now. I've been there throughout my life and they've been supportive. All the extra stuff through social services, like finances and help and this and that, that's a good thing? I know you can think it's a bit like treating us like babies but .....*

*Adam- 'no, not like babies but we don't want to be seen as different, so why we treated differently- why say we are?'*

*Zach- 'because we ARE different'*

*Adam- 'we're not. Only lifestyles have been different, we're not, we're all the same, we're all people'*

*Zach- 'we are'*

*Adam- 'we're all gonna have to stand up in the big wide world at some point, whether that's 30ys, 20 years whatever. I agree, but only thing I would say is that only your upbringing is different'*

Whilst the above discussion has centred on the individual interpretation of difference, the following (which is a continuation) changes focus and begins to raise the notion that these different experiences can be a catalyst for positive change.

Matt- *'uhmm'*

Adam – *'that's all I would say'*

Researcher- *'that's a big difference though?'*

Adam – *'some things I agree, being vulnerable yes in the way that you are seen and the way people treat you. Being vulnerable as a person is an individual thing'*

Zach- *'if you tried to imagine the perfect family upbringing- if you got that perfect family upbringing would you be a different person?'*

Adam – *'yes definitely and I would probably be less appreciative and less independent and I love having my independence. I think that if I was mollycoddled like that with the perfect family I don't think I'd like myself'*

Matt- *'actually makes you respect yourself for having your independence'*

Adam – *'I think that if we can come from a background where we are vulnerable and we're all here, we're all alive, we're not in prison, we're not in trouble, we're good people, then I think we've won. Which is why we're not different, in my opinion, we have beat that cliché'*

Zach- *'being streetwise'*

Adam – *'if we've beat that cliché then we are no longer vulnerable'*

This dialogue highlights a number of important points and there is clear disagreement between the young people about difference, the meaning of care and the meaning of being a care leaver. This disagreement is of course understood in the context of differing experiences of being in care and interpretations of those experiences. The young people express strong views about the diversity of their earlier experiences and the impact this has had on them as individuals today. There is a distinction between being a 'care leaver' and needing additional support because of that fact; against the alternative of being a 'care leaver' and not needing additional support because this does not make you different. This is an interesting dichotomy particularly when considering service design and delivery which is based on the presumption of young people leaving care needing additional support to 'equalise'

life chances alongside their peers. This poses the question does service delivery in this way, isolate 'care leavers', making them different and exacerbating stigma, creating rather than removing barriers? It is hard to ascertain how services could alternatively be designed, however these young people certainly provide compelling views which add to the discourse and maybe highlights the importance of linking the views of young care leavers with others in socially disadvantaged situations.

#### **6.4.2 *The Experience of Difference***

The 'othering' of young people in and leaving care is written about by Stein (2011) as he charts the right's movement of care leavers from the 1970's. Young people during this period were challenging the corporate systems in place which were at odds with their choice and autonomy, singling them out and causing stigma, ie having to buy clothes through an order book or not having dinner money, meals being paid directly to the school, making the young people different to their peers. More recently the focus was aimed at normalising experiences for young people by way of less bureaucracy in order to allow sleep overs at friend's houses and banning the use of bin bags to move young people's belongings (Stein 2011). Feelings of being singled out or treated differently are closely linked to the desire to belong, particularly the case when referring to foster carers, a similar finding of Gilligan (2009), Holland (2010) and Stein (2012; 2011).

The young people talked about the experience of difference in many ways, some citing actual physical experiences as well as the emotional or internal contextualisation of difference. The first quotes were taken from a discussion about what it felt like to be in care or leaving care and highlighted feelings of intense difference.

*'not treated as a person' (Adam)*

*'You immediately feel that because you're in care and don't live here means you're not to be trusted.'* (Adam)

*'its like when you're a kid and all your friends have a bike and you don't have one, you want to be part of that, you don't want to be left out, singled out. Bit like being in care, you don't want to be seen as the outsider'* (Matt)

These powerful statements are indicative of emotive and often painful experiences for the young people, not necessarily as a result of physical, actual events but clearly experienced on an emotional level. Feeling different was experienced in many ways and the views shared below highlight how young people experienced 'difference' in a wider context and the feelings this evokes.

*'it's like Mother's Day and Father's Day, I don't even know when those days are, I like hated being in school at those times because people would be like 'oh I got my mum and dad this and that' and people just don't think. It's like oh what about being in care, what its like'* (Kate)

*'I'm the same now, my partner had very different life, almost the extreme to me and had car, after car, after car and didn't have to put her hand in her pocket once. I didn't have a car, I wanted one but couldn't. Even now, she has one but I don't, it's a childish thing I know but it comes down to the same, if I have something it's harder, I have to go out and get it. When people get what they want for nothing really and your there, 'are you like serious or what?' How come they are getting all this for no hard work and I've got to do everything I can'* (Adam)

*'it's the concept of being treated differently. It's like when kids aren't in care and they look forward to a great Christmas family everywhere, you don't have that because you're in care. I don't have my family buying me cars because I was in care, they wouldn't pay for my bus fare let alone a car, but it's that principle that kids out of care look forward to great Christmases, kids in care don't.'* (Adam)

Interestingly, the above examples could apply to many young people in society, not just 'care leavers' but the significance of the views shared relate to the attribution which the young people place on themselves being 'care leavers'. The point which

the young people are making is that, despite not wanting to be different from their peers, at times they are distinguished apart, by their 'care leaver' status. This can take the choice away from owning the identity and it is this choice which is the key factor. Notwithstanding the significance of an internalised feeling of difference, there were times when the young people felt they were treated differently through behaviours or acts of others. The next set of quotes give examples of how the young people felt they were treated differently or set apart from others due to being in care or a care leaver.

*'I just wouldn't be able to do that with my foster carers, I would have followed all of the rules. Three or four years of my life was shit because of my carers'*  
(Holly)

*'a lot of this stuff, I couldn't tell my foster carer, she didn't understand, she was too old. So I just did these things'* (Lucy)

The following piece of dialogue develops on the notion of difference. It is focused on Adam and talks about his feelings of being treated differently and a sense of *not belonging*.

Adam- *'I was told to come home late sometimes when my foster carer would have her family over, her daughters, her grandkids and I would be told to not come back for another hour or too as they had family over.'*

Zach- *'that's fucking mad that it'*

Matt- *'that's bad'*

*(agreement by several young people) 'that's shit,' 'that's fucking awful.....'*

*.....Raised voices.....*

Adam-*'that's no lie, that's true'*

The dialogue represents a tangible feeling of unfairness for Adam, who feels not only that he is treated differently but that he doesn't 'belong' to his foster family. Such events are held onto by the young people and have a cumulative effect of feeling 'different' to their peers. Of course, there may have been significant context to the experiences which was not shared during the course of the interviews and focus

groups, which may have enabled an alternative understanding of the events. However, for the young people who shared these experiences during the study, their feelings of difference were fundamental to the overall meaning of their care experience.

### **6.4.3** *The Stigmatising Nature of Difference*

Care leavers have additional vulnerabilities to their peers by the very nature of their early childhood experiences and cumulative effect of life events, both pre and post leaving care (see Chapter Four). The disadvantage experienced by care leavers manifests itself in many different ways and this was evident in views shared in both the focus group and interviews. A theme identified by several young people was that they felt they don't have a choice in the way in which they are viewed, almost an assumption that being a care leaver will result in negative treatment. Both of the young people quoted below use the word stigma to highlight the different treatment they feel they received due to being a care leaver. They felt this was often reinforced by foster carers, peer groups and professionals.

*'mine (foster carers) had people who had stole off her, trashed the place, disrespectful and I got the same thing, the same stigma..... that all kids in care are criminals and that all kids are in care because they're little shits not because bad stuff has happened to them'* (Adam)

*'that is true and a stigma attached, you are in care for a reason, used against you a lot and yes some are but the minority shouldn't ruin it for the majority'* (Matt)

Adding to this below, Kate talks about the stigmatising nature of being a care leaver and uses an example of her experiences of being bullied and how she felt that the measures in place to support her reinforced the difference to her peers.

*'yeah, like other children, but not workers. When I was at school I used to get bullied about it (being in care) and now I'm in college I get bullied about it but not the professionals they were ok about it and actually talked to me about it sometimes'* (Kate)



*'when I went to (local area) college, they didn't ask me if I wanted a teaching assistant to follow me around, they just assumed that I wanted it and I got a bit fed up because of that, trying to hang out with my mates and there was a teaching assistant always with me. I got fed up because they didn't ask me if I wanted that, they just assumed that I did' (Kate)*

The points raised by Kate highlight a challenge for professionals in terms of how to respond to these types of issues. There is a general question of low expectations in the care and care leaver literature (Stein 2012; Brodie et al 2009). If taking the view that young people leaving care are a disadvantaged group there may be situations when additional support is required in order to overcome disadvantage and address the inequality of opportunity. Some early work on the education of children in care highlighted the need for 'compensatory' experiences (Heath and Aldgate 1994) (see also Chapter Four). This acceptance of disadvantage is a difficult notion for many young people to acknowledge as to admit being different is at odds with what they are trying to achieve. Of particular significance for Kate is the assumption made by professionals that she needed additional support and the subsequent decisions being made on how this support should be provided. Kate clearly experienced bullying throughout school and college and this was clearly a factor in providing her with a teaching assistant, however from her perspective this caused stigma, isolating her further from her peers.

A further issue highlighted in Kate's view relates to not wanting to identify herself as a young person leaving care. Chapter Four examines the importance of a shared identity and belonging, particularly in adolescence. For Kate there is an inherent desire to want to feel part of her peer group, not to be the 'outsider'. Interestingly, although Kate has the identity of a 'care leaver' she does not feel a sense of belonging to this group and wants to distance herself from it. In many ways having a teaching assistant would be supportive for Kate but her feelings of being different outweighed this potential support. This presented a complex internal dilemma for her, involving a hypothetical choice between receiving entitled (and possibly necessary support) against being socially accepted amongst her peers. Young people have varying views on whether they want information about their care status shared (Brodie and Morris 2010).

Although this example is specific to Kate, the nature of the dilemma itself was identified by other young people during the focus group. The difficulties become apparent needing to access certain services or types of support. Young people need to 'declare' their status which can result in stigma and the fear of being marginalised or possibly discriminated against. There is also anecdotal evidence that young people are reluctant to tick the 'in care' box in university applications, which also means they will not receive the support they are entitled to (Brodie and Morris 2010). The dialogue below gives insight into the differing views on housing from the young people who took part and highlights the importance of choice and autonomy but also shows the complex choices faced by many.

*Adam- 'a lot of landlords just don't want to rent their flats out to 18 years olds anyway, I guess they think they will party and break stuff. So whether you are a care leaver or not it's the same, just soo difficult'*

*Mark- 'but they have guarantors, people who have been in care don't have guarantors'*

*Kate- 'but when you're a care leaver you can't go private, you have to say you want to go private or they put you in a council place'*

*Mark- 'if you're a care leaver you don't have a guarantor and that's what most private landlords want, guarantor and a reference and stuff, especially if you're wanting to go through an estate agent and wanting to go private and all that, they are wanting finance, fees and stuff like that you don't physically have'*

This dialogue illustrates the everyday effects of stigma associated with young people leaving care. These types of dilemmas are by no means unique to the group of young people involved in this study, statistics on outcomes (as referenced earlier in the Chapter) suggest that care leavers experience barriers in accessing services across the spectrum and their attainment and overall life chances significantly decreased in comparison to their peer group.

#### **6.4.4 Service Accessibility**

Legislation provides a baseline standard for the organisation of leaving care services but at times it is argued that these minimum requirements do not fully meet the

needs of care leavers (see Chapter One). For example, young people raise the issue of their social and emotional needs and how support should be more accessible, including outside office hours and during weekend and evenings (Stein 2012; NCAS 2010a; Morgan and Lindsay 2006; A National voice 2005). The findings of this study are in line with previous studies and the following quotes highlight the young people's difficulties in accessing support when they felt they needed it.

*'it can be a problem here though, like if your personal advisor goes on leave, most of the time you just don't have anyone to contact, it's like a duty system'*  
(Matt)

*'My leaving care worker is on annual leave at the moment and it's been a month since she text me so it's been quite a while. I don't really mind though as I'm quite independent, I try to do everything myself, I only ever contact them if I'm in an extreme emergency and I'm about to lose my place or if I'm struggling that much. I'll always try to sort out my own problems myself'*  
(Jared)

*'we still work on a 9-5 model for many services and that's a barrier in itself for young people accessing services. So do we get what its like, no we don't, we expect them to manage day to day life but in reality we are not adjusting enough around them'* (Toby)

Services for care leavers are generally organised around a 'nine to five' model as this reflects the working patterns of the professionals. This begs the question of who are the services designed to support if young people are experiencing their most challenging times out of office hours, in the evening for example or earlier in the morning when they are struggling to muster the motivation to get up and attend college. This is not to say that professionals do not provide support to young people out of hours, because they do, but this is more often viewed as an exception, responding to an emergency or crisis, rather than the norm. With questions poised regarding the impact of care on young people it is now important to consider those factors which mitigate against the negative outcomes.

## **6.5 Relationship Based Practice with Young People Leaving Care**

### **6.5.1 *The Qualities Young People Value in a Relationship***

The relationship is the most significant part of the work with young people, it forms the foundation for all help and support with young people valuing this highly and arguably above all else (see Chapter Four). In talking about relationships the young people valued with professionals, they spoke of the feelings which the relationship evoked and the manner in which professionals acted towards them, reinforcing the findings of other relevant research studies. Being listened to with genuine interest, feeling understood and taken seriously, alongside a sense of feeling valued as an individual are all cited in numerous other studies as crucial components for trusting relationships (for example, Noble-Carr 2014; Morgan 2012; Mcleod 2010, Oliver 2010; Morgan 2006; Ward et al. 2005). The emotional engagement of trusted, reliable, competent and honest professionals is commented on by Honneth (2001, pg.48) as providing 'affective acceptance and encouragement' which plays an important role in validated the young person for who they and supporting the development of self-esteem (Meltzer and Craig 2016; Ridley et al 2016).

In a recent study by Ridley et al (2016) care leavers described the positive attributes that they valued in professionals which are reminiscent of the words used by the young people in this study; qualities such as 'likeable', 'friendly', 'kind', 'understanding', and valuing a 'warm', 'sensitive' approach. Meltzer and Craig (2016) and McLeod (2010) view the importance of these qualities in building a relationship which is based on equality, acknowledging the differentiation in power of the professional role with practitioners who are direct but not directive and friendly but not friends. This type of relationship fits well with the developmental stage of adolescence due to the need for young people to develop a sense of agency through increased autonomy, using secure relationships as a foundation from which to explore (discussed in Chapter Four). Quotes taken from the young people involved in this study reinforce these findings, using similar words and phrases to describe the attributions of professionals.

*'she was lovely and it just kinda of seemed that she was doing the best job that she could for me and stuff, and she would always ask how I was, interact*

*with me. It felt like it was an actual close connection and like she understood what I was like' (Mark)*

*'I think she understood the way I was and the things I did and why and how to broach different situations and stuff' (Mark)*

*'They needed to understand and I feel that they did' (Hayley)*

*'yeah when I was in care I would have my 16+ worker coming on a regular basis, just coming and talking' (Jared)*

*'my carers understand me most, understand me now. I like Dr. Who and Man U and they know they are important to me' (Tom)*

*'I respect him because he is like open with me and talks to me and gives me advice, doesn't judge.... Little things like that make it so much better' (Jared)*

*'I do talk to my foster carers a lot because they helped me a lot through care and I've got a really good relationship with them' (Tom)*

The young people involved in this study talked about relationships which involved carers, professionals such as social workers and personal advisors who were involved in a statutory capacity as well as individuals involved in a less formal capacity such as youth workers, peer mentors and workers from other services. They talked of the importance of positive relationships with carers and other social work professionals in providing security and helping them to develop in different areas of their lives. The following dialogue discussing relationships illustrates how a young person differentiated between the professionals who had worked with her.

Beth- *'not with social services or my foster carer, just my leaving care worker'*

Researcher- *'have you still got a leaving care worker now?'*

Beth- *'no she left me in January'*

Researcher- *'you smiled then, did you like her?'*

Beth-*'yeah she was lovely'*

Researcher- *'so it wasn't so good before with carers and social workers but it was with leaving care workers?'*

Beth- *'yeah'*

Researcher- *'so what made her better?'*

Beth- *'she understands me'*

Researcher- *'do you think that was because she understands care leavers more or was it something else?'*

Beth- *'I don't know, it was something about her that made me like her and I don't know, she just used to talk to me like you are talking to me now'*

The obvious importance of this relationship to Beth is evident in the words she uses to describe her worker, words such as *'lovely'* and *'she understands me'*, which reinforce the genuineness of the relationship. Beth also describes feelings almost akin to loss when she describes her worker as *'leaving me'* which indicates a view of the relationship as something more than a professional interaction (endings will be discussed further on in this chapter). The following dialogue raises similar points to those above and reinforces the significance of normalised interactions.

Kate- *'I used to talk to Toby you might know him?'*

Researcher- *'yes I know him'*

Kate- *'I could talk to Toby about problems'*

Researcher- *'so you feel that he understood you?'*

Kate- *'yeah'*

Researcher- *'you worked with Toby when you were a bit older'*

Kate- *'sort of, I've known Toby since I was 12 years and up to now. He's helped me when I moved out and into the flat on my own. He helped me with that and budgeting'*

Researcher- *'was there something about the way Toby helped you that meant that you could speak to him more?'*

Kate- *'he used to talk to me when I was down'*

Researcher- *'did you see Toby as a professional or as someone different?'*

Kate- *'I saw him as my youth worker'*

Researcher- *'so there was something different about the way he worked with you to maybe others, social workers?'*

Kate- *'yeah'*

Researcher- *'and it meant that you were able to talk to him more than others'*

Kate- *'yeah'*

Researcher- *'and you knew him for a long time which built your trust?'*

Kate- *'yeah, also with the leaving care worker I've got to trust them too'*

Both of the above excerpts make distinction between social workers and other professionals which is an interesting observation, suggesting that the statutory role of social workers is a barrier for young people in developing trusting relationships. Engaging with leaving care workers or youth workers tends to be less prescribed and more voluntary which gives the young person an element of choice. This links back to Chapter Four and the context of support services for young people, namely the cuts to spending on services. Youth work provision, which is highly valued by young people has been cut considerably despite the value and benefit placed upon it. This element of choice in voluntary work creates a sense of 'normalisation', equalising power differentials which is a theme running throughout this study. Both dialogues reinforce the concept of 'normalised' interactions which would be difficult to obtain unless there were genuine feelings of trust in the professional (or individual) concerned.

The types of qualities talked about by the young people are the components you would expect to find in a trusting relationship of any description, not necessarily of the professional type. There is a degree of regularity and 'normalness' in the qualities described and this study affirmed the findings of others which observed that young people appreciated workers who demonstrated respect and interest, were informal, who 'listened to not lectured' them, valued and treated them as equals or individuals not 'like a child', were reliable and available, helped with practical things and kept to promises (Gilligan 2009; Diller's 1996; Triseliotis 1995, pg 272). The notion of being treated as an 'equal' is an interesting finding, particularly within the professional relationship where there is an obvious power differential.

### **6.5.2 Longevity of Relationship and Changes in Worker**

A strong message emanating from the views of the young people and reinforced by professionals is the significance of time or duration and its relevance to positive relationships. Several young people equate a positive relationship with the length of time they have known a particular professional, with foster carers and leaving care workers among those who are often viewed most supportively as they are likely to have the longest standing relationship with young people. A study by Mcleod (2007) referred to young people appreciating the time professionals took to get to know them and valued those who had remained for a long time. The following quotes illustrate how young people value longevity of relationship with professionals.

*'I'm actually very grateful for my leaving care worker because she was the one consistent person for five years'* (Adam)

*'there have been times when I've gone to him and broke down and talked to him and that I've known him for four years, we've had that relationship since I went into care and he's been my music leader since then and we've built that friendship, that relationship and he knows me better than anybody'* (Jared)

*'my carers know a lot about me, carefree people know a lot about me coz I've been coming here for a long time'* (Calum)

Vacancy and turnover rates are high in social work with a heavy reliance on agency workers and it is noted that children's social work is now being listed on the 'national occupation shortage list' (Department for Education 2015). The average turnover rate for 2014 was 17% within a range of 0% to 59% (Research in Practice 2015; Department for Education 2014; Baginsky 2013). A significant barrier to achieving this level of trust in a relationship is inconsistency or changes of worker. Various studies have highlighted the need for greater stability and a reduction in the number of changes to workers (Dickson et al 2009; Gaskell 2009; Morgan 2006; Barn *et al.* 2005; Blueprint Project 2005; Munro 2001). Studies by Jobe and Gorin (2013) and Lesson (2007) which both looked at the participation of young people in decision making found similarities in the frustration of young people at having to re-tell their stories due to changes in workers following cases being transferred between



services, especially when young people felt they had built up a relationship with the previous worker. The young people in this study echoed these views and highlighted changes in worker as a difficulty in sustaining trusting relationships.

*'Yeah I had some good ones, I had three good ones over the years but all the rest I didn't really get on with and it felt like I had to start all over again every time I got changed.'* (Samuel)

*'I have a lot of social workers, too many to name'* (Tom)

*'they (social workers) come and go'* (Natalie)

*'I had so many social workers and they didn't really know me'* (Beth)

In the following dialogue, Jared raises an interesting point about the specialisms of workers and the rationale for changing at 16 years. His comments suggest that different skills are required to work with young people but he struggles to understand why all workers cannot be trained to undertake this work.

*'Certain ones are really good social workers, like before I was 16 years but after that I got into a really bad state as you change social workers, having built up that relationship with my social worker for 3 years and now you are taking that away from me and now I'm meeting this new person who I've never met in my life and I have to tell what's happened, she knows what's happened because she has read it but she hasn't been there through it with me like my old social worker was. It took me a while before I would even talk to my new social worker after I was 16 years, I just didn't like it...it does more harm than good. Why can't they train social workers to work with young people and young adults at the same time?'* (Jared)

Researcher- *'so were there any benefits for you in changing at 16 years?'*

Jared- *'in the long run yes but at the time no coz as I said it just felt horrible, but now I look back, I'm older and think actually its made me who I am now'*

Researcher- *'do you think they had different skills maybe to the other social workers'?*

Jared – *'yeah, I suppose what I'm saying is why don't they give those skills to the ones who are working with them anyway?'*

The findings of this study affirm what is already known regarding young people's views on the number of and changes in workers. The words used by the young people present a feeling of exasperation regarding the inevitable changes in workers attributable to their common experience. A contributing factor to this exasperation is likely to be the emotional content of the relationship and the investment required from both parties. Due to this reciprocity, endings become particularly significant and will form the basis of the next section.

### **6.5.3 Endings**

Studies by Bell (2002) and Mcleod (2007) found that the continuity of relationship was important owing to children feeling 'bereft, forgotten and confused' (Bell 2002, pg.4) experiencing a sense of anger and betrayal when social workers left. Ruch (2010) describes changes in workers for children in care and care leavers as having similarities with feelings of loss or bereavement of close family members. This lack of continuity has been highlighted as a contributing factor to poor mental health in both children in care and care leavers (Ridley et al 2016; Unrau et al 2008; Stanley 2007). Changes in workers is often a significant event for a young person and the enormity of this is highlighted by a number of young people in the words used to describe their feelings of loss around workers leaving or changing.

*'no she left me in January'* (Beth)

*'having built up that relationship with my social worker for 3 years and now you are taking that away from me'* (Jared)

There is strong theme of *loss* in the above quotes which reinforces the findings of Ruch (2010) who studied the significance of relationships to children in care and care leavers. In many respects, these types of feelings are predictable if considering the importance of 'normalising' experiences for young people leaving care. If the

focus of relationships is to model every day, emotional interaction, then feeling loss when that relationship ends is an expected emotion. However, changes of workers for children in care and care leavers occur too frequently and due to a variety of reasons, such as worker sickness and vacancies, changes often occur at short notice with little planning. The findings of this study clearly identify the need for continuity of worker in order to sustain relationships. Frequent and abrupt changes of workers can be traumatic for young people as they may not be psychologically ready or equipped to manage the process. Relationships are multi-dimensional and impact upon both young person and professional. The next section explores the concept of reciprocity and highlights the contribution made by the young person.

#### **6.5.4 Reciprocity**

In the previous section the young people talked about the qualities they valued in relationships with professionals. Inherent in these qualities was a degree of 'normalness' which has been found in previous studies and described as 'being typified by longevity, fairness, partiality, reliability and everyday acts' (Holland 2010, pg. 1673). The young person's interpretation of the relationship is strongly influenced by the interconnected way in which they experience interactions with professionals and the following quote gives context to the importance of reciprocity.

*'how they treated me, respect and two way respect. Kind of if they were able to talk to me and ask how my day was and treat me in a sense like family, but not if that makes sense'* (Mark)

The sentiment which the young person expresses is the need for meaningful, genuine relationships which are reciprocal and give capacity for 'normalised' growth and development. The importance of empathy in the professional relationship is written about extensively (Hennessy 2011; Munro 2011; Shemmings 2011; Howe 2008; Rogers 1980; Kohut 1977). Roger's (1980) claims that empathy is a core quality which facilitates 'self-understanding, self-confidence, the ability to choose behaviours, the freedom to 'be and become'' have stood the test of time and received little challenge (Hennessy 2011, pg. 86). It is a fundamental need of the human condition to crave social interaction and emotional connection with others. Young people leaving care have variable experiences of reciprocal relationships due

to their earlier childhood experiences therefore the empathic capacity for symmetry in the professional relationship is crucial.

Chapter Four refers to the dyadic nature of attachment and how reciprocity can reinforce negative or positive behaviours. In considering the dyadic nature of relationships it becomes significant to examine not only how this is demonstrated by professionals but also how this is mirrored by the service users, inferred by Gilligan (2009, pg 91) as being 'kindness' the significance of which 'may resonate down the years and serve as important modelling for the young person when they in turn take on a caring role and look for caring scripts'.

Empathy on the part of the professional in many ways is a characteristic of the helping relationship and a core interpersonal skill. When viewing relationships as dyadic and acknowledging the modelling capacity of professionals to the young people they work with, it is interesting to pay attention to the empathy expressed by the young people. In these first quotes the young people acknowledge the difficult job which professionals have whilst at the same time acknowledging their part, correlating with the concept of the professional relationship as dyadic.

*'the way the youth workers are treated by some young people is terrible. Like the profanities that some young people use against youth workers nowadays is just horrible'* (Jared)

*'I think everybody is doing a brilliant job and praise be to the people who do it, we're not the easiest people to be around sometimes, I know I'm not the easiest to be around sometimes but they guys are doing wonderful things for a lot of us and I think that's nice'* (Hayley)

These quotes indicate a degree of balance in understanding the difficulties experienced by professionals but in another interview, a view was shared which suggested the empathy extended too far. Jared shared this view during a conversation regarding the importance of relationships and the difficulties experienced, particularly relating to regularity of contact and continuity of worker (discussed later on in chapter).

*'I'm a very forgiving person' (Jared)*

The way in which the young people expressed empathy was also demonstrated through their views on the caseloads carried by professionals, signifying a shared understanding of the challenges faced undertaking this type of work in the current context of statutory practice.

*'case-loads are high and young people pick up on that and sometimes it's difficult to put aside the right amount of time for individual young people'*  
(Toby)

*'They didn't know that obviously coz they've got loads of other kids that their trying to deal with at the same time so they are trying to find the best sort of thing to do' (Jared)*

The above views shared by the young people signify a shared understanding of the working relationship which is based on the impact each has on one another. The young people did not express their views to complain about their worker, more as an understanding of the reality of their role. In this respect, caseloads which were too high could almost be seen as a 'constraint to care' (see Chapter Seven) viewed with equal meaning to both young people and professionals. The capacity of the young people to display empathy towards professionals is key to reciprocity in relationships and this contribution will now be explored in greater detail.

#### **6.5.5 *The Contribution of the Young Person to the Relationship***

The dyadic nature of relationship based practice emphasises the significance of each individual's contribution to the interaction. Featherstone et al (2014, pg. 42) write about, 'The process of caring for- or being cared for- makes one aware of diversity, interdependence, and the need to accept difference.' This further emphasises the reciprocal content of the relationship and vital contribution made by the young person to the professional. More often than not the contribution of the service user is not explicitly acknowledged, other than in reference to the service they are receiving. This study identified an alternative finding and highlighted several

examples of the young people talking about their contribution to the professional relationship. The following quote from Jared talks specifically about the shared value of the relationship and the significance to both him and his social worker.

*'I mean yes, if a social worker has lost their job or doesn't want to do their job anymore then that's perfectly fine, that's their choice but to take that away from both, because I imagine or would like to think that my social worker at the time had a good relationship with me'* (Jared)

The notion of a young person contributing to the professional relationship is taken one step further in the dialogue below. Hayley talks about the way in which working with her and her specific situation supported professionals through the acquisition of understanding and knowledge.

*'obviously my situation is not something everybody would be able to understand but they tried which is always reassuring because you don't feel that people are always trying to dance around you as it were....yeah they kind of had to, it was obviously a big part of my life and was going to be a part of their professional career'* (Hayley)

*'Other professionals have used what I have to say about the LGBT community to their advantage to better understand. Not a lot of people who I have been involved with have not actively been involved with transsexual people so that's helped me because I was able to really feel part of the community as well as share my thoughts and opinions'* (Hayley)

One of the key aspects of the relationship which is highlighted in this last quote is the reference to how the young person and worker both supported a transition; for the young person it related to a life changing decision to become who they always felt they were; for the worker it was a transition of professionalism, gaining new knowledge and understanding in an area they were previously unfamiliar with. The role of relationships in supporting transitions is discussed later on in the chapter but what the above quote also identifies is the significance of belonging, in Hayley's case

to a community. The next section will explore the meaning of belonging to the young people involved in this study.

### 6.5.6 *Belonging*

If a young person's meaning of care is intrinsically linked to how they experience reciprocal emotions, a sense of belonging is the foundation from which this originates. Chapter Four explores themes in developing a positive identity and cites the importance of reciprocal relationships and a sense of belonging, particularly relating to a coherent narrative of earlier experiences. Corrales et al (2016) talk of the absence of belonging being associated with a range of negative outcomes related to executive functioning and affect regulation and evidence of this can be identified through some of the negative outcomes associated with mental health of care leavers. Young people leaving care need to develop a sense of belonging, a narrative of professionals and carers who encourage normalised experiences which mitigate against difficult or traumatic earlier experiences. Gilligan (2009) and Holland (2010, pg. 1673) write about how care can be conceptualised, the everyday acts, both symbolic and practical, 'difficult to specify in fostering standards or Looked After Children policies' which stretch beyond the formal 'placement' period. This takes into account the emotional meaning of care which is seen as an act over time, a connection through rites of passages, staying in touch even when the formal relationship has ended similar to the safety net of a 'normal' family who don't easily give up (Holland 2010).

The quotes included below illustrate the significance of those symbolic and practical 'everyday acts' referred to in the above passage. Those acts which give a sense of genuineness or belonging to relationships and remove the professional element, allowing for 'normalised' experiences.

*'Feeling loved and actually cared about. Its one of the main things people look for, it's being loved for where you are'* (Mark)

*'It felt like it was an actual close connection and like she understood what I was like and even if I needed to go somewhere important like me school or leaving assembly, she took me there, paid for stuff and went with me.'* (Mark)

*'they don't treat you like you are in care or have been in care, they treat you like a normal person'* (Beth)

The importance of feeling '*normal*' was not just about every day or ordinary interactions with professionals. The following quote suggests that at times being treated '*normally*' was challenging for both the young person and professional.

*'I look back at me being 16 years and thinking I gotta leave care and just hated everyone, and now I look back and I'm actually very grateful for my leaving care worker because she was the one consistent person for five years. She was the only person in five years who stuck with me and I was a pain in the ass sometimes and I was difficult to work with but she stuck around'* (Adam)

*'foster carers need help with this. Young people need to test and then realise that carers do care'* (Youth worker)

The quotes make interesting observations relating to being 'cared for' through not 'giving up'. Attachment theory would suggest that having a secure base from which to explore, challenge and make mistakes is the key component in developing positive relationships. Normalised experiences and a sense of belonging are crucial in supporting this. In Stein's (2012) most recent work, he found that placement moves were still high (a third with four or more moves and 10% had ten or more moves) and that 37% of young people were still leaving care at 16 years, with a further 50% leaving prior to 18 years from residential care. This runs counter to the countervailing trend amongst other young people, who have more protracted transitions, and highlights the disparity in terms of opportunity as they approach adulthood. Closely linked to placement moves is the theme of foster carers 'not giving up' and was highlighted in the following dialogue with Jared who spoke of his initial and positive experiences of being placed in care.

Jared - *'So when I went into care, it was like 2 weeks before they were going on holiday to Tenerife and they managed to get me on that holiday, I went to*



*Tenerife for 2 weeks, all went fine, honeymoon period, came back and all hell broke loose. I remember my foster dad, all he told me to do was clean my room and I kicked off and pinned him up against the wall and that's when I realised I needed help. Although I don't think I did realise at that point? I denied needing help, didn't think I wasn't normal, didn't need help. But what helped was that my foster carers didn't give up and I put them through hell and I pushed them and did everything I could to push them away but they didn't. I remember this one time I just didn't want to go to school, I just wasn't going to school, I just lay on my bed, they pulled sheets off the mattress, I didn't move, just ended up just getting a bit angry but it was comical because they just flipped the mattress and I was on the bed and I was between the bed and the mattress (laughing)'*

The dialogue continues with Jared talking about the extra effort which the carers went to in order that he attended school. Previous studies by Bazalgette (2014) and Brodie and Morris (2010) both evidence the value that young people place on this type of additional support in relation to their educational experiences.

Researcher- *'did they get you to school?'*

Jared- *'yeah I went they got me to school!'*

Researcher- *'that really sticks in your mind doesn't it? I can tell by the way you're telling me'*

Jared- *'yeah it does, it really sticks in my mind and that was when I was 14 years, 4 years ago, just the fact that they wouldn't give up'*

This dialogue raises the notion of building relationships which stand the test of the time, relationships that offer continuity, predictability and comfort. Young people leaving care often do not experience these relational components in a consistent way or they are missing altogether which runs counter to what is actually needed, arguably more so for care leavers. Holland (2010 pg. 1679) writes about the rebalancing of priorities so that 'interdependency and care are valued and welcomed alongside goals of autonomy and self-reliance'. The interdependency of the professional relationship removes the notion of the young person as a 'passive recipient of care' which enhances the capacity for young people to have more

autonomy and lessens the powerlessness which can often be associated within professional relationships. A further advantage of viewing the professional relationship as interdependent is that it removes some of the stigma involved, re-balances dynamics and 'normalises' the relationship (Holland 2010).

Through the views shared in this and previous sections, the young people have identified a number of professionals who may be involved in their lives. At this stage it is important to explore the different types of relationships which young people have and the significance of those relationships to their overall care experience.

### **6.5.7** *The Differing Types of Relationships*

#### **6.5.7.1** Family and Foster Carers

The young people talked about a variety of individuals, workers, professionals and groups when discussing their care experiences. The importance of birth family was a consistent theme highlighted throughout a number of differing topic areas and referred to in many ways, examples of which are noted below.

*'I have things here, like my boyfriend, my friends are here, my family'* (Hayley)

*'my Mum, biological, real Mum, she teached me Chinese.....when I'm seeing my family, I still talk to them and I still speak Chinese to them'* (Daisy)

*'I've got my family when they want, no when I want them'* (Natalie)

*'I know from my experience when I was living with my auntie I learnt all the finance and stuff from her'* (Mark)

*'I followed my Mum's beliefs which is Roman Catholic'* (Kate)

These quotes demonstrate the thread which a family connection weaves through a young person's meaning of care and how these relationships add definition to their experiences. Family is a socially constructed concept which will have different meaning to different individuals and cultural groups. The crucial role played by family

to the young people was evident in this study, but also, interestingly was the significance of a symbolic sense of family. By symbolic, I refer to the components which would ordinarily be found within a family for example, belonging and shared understanding, which for young people leaving care are often found elsewhere. Owing to the very nature of being a care leaver, having spent time in local authority care, many of the young people had experiences of fractured or traumatic childhoods. Therefore, family was understood in the broadest context with foster carers as important and often more so, to the young people as their birth families. The quotes below from several different young people show the depth of connection to foster carers and the important role which they had and continued to play.

*'My carers are the most important to me in the whole world, also my brother and sister, they are young I am the oldest.... my carers understand me most, understand me now'* (Tom)

*'I do talk to my foster carers a lot because they helped me a lot through care and I've got a really good relationship with them'* (Jared)

*'I'm more happy than I used to be, I've got friends who I can talk to, still got my foster mum'* (Natalie)

*'but as soon as I moved to my second foster placement I felt that it was the best thing in my life, moving to those new carers, sorted me, helped me and put me where I am now, I am grateful for what they've done for me'* (Samuel)

*'I know that I was very lucky to live with my foster parents from 7 years and I'm still there now. I've been there throughout my life and they've been supportive'* (Zach)

*'The foster carers were like really reassuring, made me feel wanted.... They were really trusting and I trusted them'* (Mark)

These quotes identify a number of factors already addressed within this chapter, such as the importance of warm and genuine interactions, normalised experiences,

trust and longevity of relationship. Meltzer and Craig (2016) discuss the importance of these factors in relation to young people having trusted adults who are reliable, competent and honest which encourages young people to be comfortable in showing their vulnerability. Noble-Carr (2014) link this to developing a sense of mastery which dictates that in order to be good at something there is the need for positive and external affirmation from trusted others in order to obtain this. The crucial factor for young people leaving care is that these relationships do not necessarily need to be family and the next section will explore the role of symbolic family and connections.

#### **6.5.7.2**      Symbolic Family

Noble-Carr (2014) found that when considering 'caring connections' young people felt relationships were just as powerful when they were of a professional or non-family nature. Meltzer and Craig (2016) affirmed this and added that non-parental and those individuals not necessarily assigned or allocated to young people, possibly identified by young themselves also hold significant importance, for example community or faith groups were found to be important to some young people not necessarily due to the faith itself, but the sense of family that it provided. This study saw similarities with Meltzer and Craig's (2016) findings through the young people's descriptions of their experiences of accessing support through Carefree, an organisation partly run by care experienced staff, for care leavers. Some of their experiences are shared in the quotes below.

Researcher- *'what makes them (Carefree workers) different?'*

Beth- *'they understand'*

Researcher- *'what it's like to be a care leaver?'*

Beth- *'yeah'*

*'Carefree people know a lot about me coz I've been coming here for a long time'* (Tom)

*'great laugh, there if you need to talk to them (Carefree workers)'* (Jared)

*'missed out on so much. Being with Carefree meant that I swam in the sea for the first time, saw my first sunset'* (Natalie)

*'I knew the other people, if I was going into a new situation then I knew them. I would have got really nervous and twitchy as I don't like being around other people but with (Carefree workers) I knew other people and could just be who I am' (Kate)*

*'its good coz if you've got a problem then they've (Carefree workers) gone through it or if they've got a problem you may have gone through it so you can give them support' (Beth)*

*'they (Carefree workers) don't treat you like you are in care or have been in care, they treat you like a normal person' (Beth)*

Evident in these quotes is the re-occurring theme of feeling 'normal', not different to everyone else, a real sense of belonging and un-conditional acceptance, which sadly is often lacking for young people leaving care. The above views illustrate how a sense of belonging (discussed earlier on in this chapter and Chapter Four) can be achieved by acquiring a shared identity through specialised groups or services. This was a finding shared by Corrales et al (2016) in a recent study and highlighted the importance of feeling normal, part of something bigger, not an outsider, a sense of community. Meltzer and Craig (2016) and Hennessy (2011) discuss the concept of 'normalness' and supporting young people to identify mechanisms through which they can achieve this, reinforcing autonomy and sustainability of relationships.

The above quotes make important observations about the role of services such as Carefree to young people leaving care. Services designed in the way Carefree has been, provide support in an organised, structured manner. However, the added benefits to the young people often evolve organically from the mechanisms in place. Services such as this generate a shared identity which young people leaving care often feel is lacking due to their experiences of feeling different. This reinforces the theme of normalisation for young people as they are able to feel belonging to a group of individuals who have shared similar experiences. Due to the organic nature of the evolving support, young people are able to build their own informal networks which encourage sustainability due to choice and its voluntary nature. These findings

strongly demonstrate the importance of relationships to young people and it is now pertinent to explore the issue of longevity and endings.

## **6.6 Care as a Transition**

Adolescence is a time of rapid change and for young people leaving care this period is particularly complex due to the 'accelerated and compressed' transitions which they experience (Stein 2012). Young people are often required to make numerous transitions in a short period of time, for example, leaving education, moving placements and becoming responsible for own finances. Transitions are multi-faceted and although often seemingly a physical process, involve emotional and psychological changes, themes which are fully explored in Chapter Four.

### **6.6.1 *Relationships as a Tool to Support Transitions***

The importance of relationships in the process of transition is a finding also shared by Holland (2010) who discovered that young people were more concerned with the informal side of their experiences, the relationships with professionals rather than the formal elements, ie pathway plans, assessments and reviews. Stein (2012, pg. 50) writes about young people wanting 'practical and personal support in preparation for moving, at the time of moving on from care and when they have moved into their accommodation including when they get into difficulties'. There is strong focus on the relational aspect of young people making the gradual transition to adulthood and having time to manage the interpersonal elements of this process, with the support of trusted professionals to promote better longer term outcomes (Dixon and Stein 2005; Coleman and Hendry 1999; Hart 1984). Views shared during the course of this study showed how the relationships which young people had with professionals, supported positive transitions with a focus on psychological readiness to change.

*'how did professionals help? I came out not long after going into care so a lot of the person you see in front of you was constructed by the help I got from professionals, mainly my foster carers who were placed with me and who had me stay, bought me a lot of the clothes that I wear, they started getting me in the swing of using my pronouns and using makeup, they really taught me and I used it as a stepping stone to understand myself' (Hayley)*

*'a lot, a lot has changed. When I wasn't in care and living with parents, I didn't even have a camera or anything, I didn't know about photography or anything. Probably still playing games. But also I was a bit more of a bad person, now I'm like a better person than I was before'* (Calum)

*(talking about her time in care) 'you can ask any professional who came to me when I was little, I was shy person, when I was growing up I actually progressed in confidence and personality'* (Daisy)

*'I get to have a bit more independence sort of thing, they help me to be a better person and also like joining in with groups, I've now got really good communication skills'* (Tom)

*'in the long run yes but at the time no coz as I said it just felt horrible (being in care) but now I look back, I'm older and think actually its made me who I am now'* (Jared)

As highlighted above, change was often associated with acquiring new skills and for Jared (below) it related to new interests and hobbies.

*'When I was 14/15/16 years I didn't want to do anything in life. I was quite depressed and all that sort of stuff, when I was 15 years my carers bought me a guitar and I basically picked it up within a week, so started learning songs and carefree have helped me more with the work side of things, volunteering, life skills and all that because we went to see the wild ride, which was a performance done by (theatre group) and we went backstage and all that sort of stuff because we got free tickets and met the crew, I met the person who I am working with now and that gave me the incentive to actually go out and do it.....after a while they did realise that keeping me active did help, coz towards the end of my time in care I was a lot happier, I was a completely different person than when I moved in there and that's only 4 years'* (Jared)

A theme running throughout the above excerpts is the attribution the young people place on the relationship as a key component to their transition. All of the young people strongly felt that their time in care and relationships with professionals have positively influenced their sense of self and helped them to become the person they are today. Interestingly, the way in which the young people describe professionals as doing this, for example buying clothes, a camera or a guitar, through conversation and encouragement are not specialist tools or resources. These everyday acts stood out in the young people's minds as important enough to mention as part of this study because of the significance of the relationship they had with each professional.

### **6.6.2** *Factors Affecting Positive and Negative Transitions*

Stein (2012) refers to Masten's notion of 'everyday magic' and its relevance to young people leaving care, in building resilience. The views shared in the previous section reinforce the crucial role 'ordinary' and 'everyday' acts play in positive experiences of transition and the development of self. The young people also shared experiences of professionals supporting them in more practical ways, using the relationship as a secure base from which to explore elements of their independence. The first quotes illustrate the significance of learning to use public transport and how having the secure base of a trusting relationship they were able to explore and grow in confidence.

*'they taught me a lot of independence and they trusted me to go on a train to my mum's. and if I wanted to see my aunties they would be like yeah ok, just give us a ring or text or something and keep us informed. They were really trusting and I trusted them'* (Mark)

Calum- *'people to help with independence, like getting on a train which I can do now'*

Researcher- *'did you have help with that to start with'*

Calum- *'this year I had help, in January but I managed to get on and off myself. I can get on the train on my own here now'*



*'(my personal advisor) actually drives me to my appointments so apart from a few times when I've said I'll go up myself which she still has provided the means for a lot of it has been with her help to get me there' (Hayley)*

*'if I needed to go somewhere important like my school or leaving assembly, she took me there, went with me' (Mark)*

*'things that the foster carer would do, would be for example to not physically go along with the young person to the station kind of thing but to find out the relevant times or help the young person to find out the relevant times/arrangements and that's pretty much, travel in a nutshell. That's the hard part, its getting the confidence to do it by yourself' (Matt)*

Transitions for young people leaving care are likely to be experienced differently than other young people due to the additional external pressures placed upon them. Young people leaving care often manifest these external pressures through what may appear on the outside as negative behaviours. Young people who present with repeated crises, shortages of money or food, are argumentative with workers and not willing to take advice or struggle to keep in contact may be viewed by professionals as having practical problems but there is likely to be emotional content. This correlates to an internal working model of abandonment, examples of which can be seen through behaviours such as 'I will reject you first for fear of being hurt' or 'I am hostile to people and they withdraw' which subsequently reinforce the internal working model of not being 'worthy' of the relationship. These behaviours are particularly pertinent during times of stress and for care leavers this could include complicated transitions such as moving to independence (Ruch et al 2010). The following dialogue highlights the way in which Zach used his negative experiences of care as a transition in itself.

*'You might be angry and others will be like, I hate it .... And I will be like, I still hate what it was like but how I've become is the biggest way to stick my fingers up to the people who were arseholes to me' (Zach)*

The notion of *'its made me who I am now'* demonstrates a reflective level of thinking

by Zach, suggesting that he has acknowledged his previous experiences as being a factor, but this has not defined him. The next quote forms part of the same discussion with Zach and shows his determination in using his experiences to better himself, not wanting to be held back.

*'I look back at me being 16 years and thinking I gotta leave care and just hated everyone, and now I look back and I'm actually very grateful for my leaving care worker because she was the one consistent person for 5 years. She was the only person in 5 years who stuck with me and I was a pain in the ass sometimes and I was difficult to work with but she stuck around. So that at 17 years I didn't realise that because I was young and angry, but now it's one of those things that you look back on and I said yesterday, it is the thing about being a young person being in care and being able to shut that off, you will not become your past, you will be your future and what you chose to do with it, education, work, training. That's how your life will be. How your life has been, it's happened, that's gone' (Zach)*

The views shared by Zach highlight his resilience in being able to contextualise his negative experiences and move forward. This is a finding similar to a study by Gilligan (2009, pg. 32) who found that 'qualities of optimism, persistence and stickability, believing in one's efforts to make a difference' were crucial components in the development of resilience. Zach uses powerful words to describe his feelings about his care experience and is able to articulate a more positive outlook. Care often has negative connotations, particularly when considering the discourse focussed on poor outcomes. Summarised above is the idea of care as a positive transition which echoes the findings of Morgan (2012). Morgan found that many young people were able to identify restorative qualities whilst in care and most felt that living in care had made life better for them (see also Chapter Four). Notwithstanding this idea, there are many and varied reasons for young people having negative experiences of care and the following section will begin to explore some of those reasons.

### 6.6.3 *Decision Making*

The statutory processes involved in placing a child or young person in care are lengthy and complex, as are the care planning processes where pivotal decisions are made regarding day to day arrangements. These processes can appear confusing to young people and at times, it is likely to be difficult for them to understand the actions which are taken. Advocacy services play an important role in helping young people to navigate their way through these processes and ensure that their voices are heard but this is not the case for all. Difficult and complex decisions are often made by the local authority and these decisions not always fully understood, leaving young people feeling powerless (Buckley et al. 2010; Department for Education and Skills 2007; Hill 2006; Jobe and Gorin 2013; Leeson 2010; McLeod 2007; 2010; Oliver 2010; Thomas 2005; Willow 2009). The following quotes from young people, give their perspective on not feeling involved in the decision making process.

*'I was like in and out, in and out til I was 15 or 16 years. I was in care permanently but I never got told why I was in care and I've only now been diagnosed with autism and Aspergers and that should have been brought up years ago'* (Samuel)

*'everyone had signed the papers and then I was told'* (Zach)

*'you are there due to circumstances beyond your control.... you might be angry and others will be too, I hated it'* (Adam)

(talking about reasons for being in care) *'that all kids in care are criminals and that all kids are in care because they're little shits not because bad stuff has happened to them..... it wasn't until I got older, left and started doing stuff with (Children in Care Council) that I realised that actually that wasn't the case and that the majority of kids in care are in because they are unlucky or their parents are useless arses'* (Zach)

*'being put in care, the situation was not talked about with me, just them and the social workers at the time and all being arranged that way and me not having any point of view, just what they wanted to happen'* (Mark)

The next quote from Kate highlights her lack of understanding of why a particular decision was made regarding her day to day care.

*'I left my sister's at the age of 17 years because I wasn't allowed to stay there anymore, social didn't want me'* (Kate)

In the context of the examples given by the young people above what becomes overly apparent is not that these statutory processes weren't followed correctly (of course the possibility cannot be ruled out) but the young people were not given the appropriate support to make sense of the decision making and develop a coherent narrative of themselves in the context of those decisions. The views expressed in this study strengthen the findings of other similar studies of the need for young people to be involved in the decision-making process even if their wishes are not able to be upheld, the rationale for actions taken needing to be made clear and reaffirming the value that young people place on relationships when they feel listened to and kept informed about what is happening (Jobe and Gorin 2013; Buckley et al. 2010; Leeson 2010; McLeod 2010; Oliver 2010; Willow 2009; Department for Education and Skills 2007; McLeod 2007; Hill 2006; Thomas 2005).

Young people construct themselves through the relationships they have with others and to begin to understand their own narrative they need to have the opportunity to understand and question the decisions made about them. The primary means of engaging and helping young people is through the relationships we, as professionals have with them and it is through the influence of these reciprocal interactions that young people are able to develop an understanding of themselves. The decision making process is guided by those professionals who are employed to monitor the day to day arrangements for young people leaving care. The next section will explore the notion of being 'paid to care' as for the young people involved, it presented a challenging concept.

#### 6.6.4 *Paid to Care*

In terms of creating a sense of belonging and genuine meaning to the care experience for young people, it is the professionals and carers who are delegated the role of the local authority's 'corporate parenting' duty (Stein 2012, pg. 93). This raises the complicated and often dichotomous notion of being 'paid to care' which was a theme also noted by Ridley et al (2016) where young people questioned whether professionals were doing their job for the pay rather than a genuine desire to work with them. Young people in this study reaffirmed those findings and struggled with the dichotomy of being genuine and 'paid to care'.

*'I used to get into arguments with my youth workers because they would be like, yeah well they are cutting back on money now so we can't keep the youth club running and I couldn't understand it at the time but I was like, well you should be doing this because you enjoy doing it not because you get paid for it. But I didn't understand at the time'* (Jared)

*'if you took away the concept of payment and just reimbursed them for what they spent you would immediately have less foster placements. But I mean there are some who are in it for the money, no doubt about it but....'* (Matt)

*'but some (foster carers) are just in it for the money'* (Natalie)

*'they (foster carers) were more about the money, it felt like they were more about the money'* (Mark)

Interestingly, the notion of being 'paid to care' was not introduced as a direct question in the focus groups or interviews, but it was a strong and recurrent theme for the young people involved in the study. The fundamental issue for the young people appeared to be the internal dilemma of establishing whether professionals were actually genuine in their approach and cared for them or were merely doing a job. The following quotes from young people are strongly worded and indicate how the notion of being 'paid to care' impacted on their overall understanding of their care experience.

*'these people are paid to be doing a job and they are not doing it. I'm only speaking for me, but they weren't doing their job'* (Adam)

*'I was so angry and frustrated and shitty with the way I was being treated by other people who were being paid to look after me that I rebelled against it.'*  
(Matt)

The views expressed above by Adam and Matt indicates their frustration that despite being paid, they felt that the carers were not doing their jobs properly. The next quote presents a different perspective, one which suggests that 'care' is devalued through being paid, suggesting that professionals were disingenuous.

*'we're a pay check, that's how I've always seen people who work with me, I'm money to them, I'm their wage. They don't care, they don't genuinely care about me, they're not crying in the middle of the night, they're not like 'oh it's 3am in the morning and oh my god I hope...' some maybe? But from my experience some people just don't care but you're getting paid to do it. They may be like aww I'm a bit touched by that I do care, do you know what I mean? Its sounds a bit cynical and horrible but from my own experiences, personally, even foster carers are getting paid £100s a week, they don't care about you'* (Zach)

Of poignancy in the above quote is the point raised about being cared for and belonging. Zach felt that despite professionals being 'paid to care' for him, they didn't do this and their actions they weren't genuine. This reinforced a feeling of being different and not belonging which is also picked out in the following dialogue about respite care.

Adam- *'nothing is worse than your foster carer ditching for two weeks with like some stranger in respite. They are using the money they are paid to look after you to go on cruises and travel around the country'*

Kate- *'firstly they don't get paid when you're in respite'*

Adam- *'not respite, but your foster carers do'*

Researcher- *'that's a really good point around respite and having to go somewhere else'*

Adam- *'I don't think that they should do it. I don't think they should have respite for those situations'*

Kate- *'but foster carers need time alone with their own families'*

Adam- *'Why?'*

Kate- *'that's why there's respite, to give the foster carers time. They don't get paid for it. When they're on respite they don't get paid for it'*

Zach- *'that's something that I can't understand? I would imagine that they would still get paid even if you were on respite?'*

Kate- *'they don't have you there so why?'*

Zach- *'I think they still would, they would get something'*

Adam- *'they do still get paid'*

These comments reaffirm the previous views shared about the complicated relationship of professionals who are 'paid to care' with the young people. It raises the issue of foster carers being 'paid' when the young person is not with them, further reinforcing the concept of professionals undertaking a paid 'job' which conjures up fraudulent feelings for the young people. An additional issue raised was the concept of respite in itself, which for these young people evoked powerful feelings of unfairness as it appeared to suggest to them that they did not 'belong' with their foster families, an idea which has reoccurred throughout this chapter. Interestingly, this dialogue also generated discussion and disagreement which indicated a degree of empathy towards the carers and an understanding of the complex role undertaken. The diversity of experiences of the young people in their respective foster placements become overly apparent in some of the examples given in this section and will clearly impact upon how they reflect on their time in care. However, what does seem to be shared is the feeling of being powerless to make changes and alter those events which felt unfair. A young person's ability to become self-deterministic and to retain a sense of 'power' or 'control' in their lives plays an important role in contextualising an overall narrative of care. The next section will explore the idea of 'powerlessness' and how this is felt by many young people leaving care.

### 6.6.5 Powerlessness

Stein (2012) discusses the notion of an increased vulnerability for young people if they feel powerless to exercise autonomy over themselves, their relationships and their future. The very nature of local authority care means that young people are often subject to an increased level of bureaucracy around everyday events, often feeling powerless in their interactions with professionals, further highlighting the importance of reciprocal relationships and normality to a meaning of care. This first quote from a young person indicates a feeling of powerlessness or worthlessness in a specific interaction with a social worker. Whilst there may have been context to this exchange which was not disclosed, the primary feeling the young person was left with was of being undervalued.

*'yeah, make social workers better, coz I hated them. I had too many and the last one was a nightmare. I was having a conversation with him because I had left care and had moved into a leaving care placement and I was talking to him about something, laptop I think and he just started walking out of the door. You have got to listen to them, coz it's not a good job if you don't listen to them'* (Beth)

The important message Beth points out is that she felt she was not listened to or her views did not count. Whilst Beth related her example to a particular interaction with a social worker, other young people highlighted the same issue in relation to decision making and communication more generally.

*'Absolutely terrible, no sense of communication, doing things for you that you didn't want to happen, not including you in assessment process, completely blind sided'* (Zach)

*'the situation was not talked about with me'* (Mark)

*'other people making decisions'* (Matt)

Statutory assessment and care planning often feel at odds with the views of young people due to the nature of professional task which requires implementation of



actions which although may be viewed as in the best interests of the child or young person, evoke feelings of unfairness or inaccuracy. Chapter Four explores the need for young people to have a coherent narrative of self and previous experiences, particularly those associated with reasons for coming into care and decisions made about them. Young people must be involved in decision making, however, at times the decisions made may not be those desired by the young person. Herein lies the complexity for professionals as despite decisions being made which may be counter to the wishes of the young person, they must still be involved in the process, having their views represented and fully understanding the rationale for any decision about their lives being reached.

#### **6.6.6 *Hearing the Collective Voice***

Decision making in the previous sections is discussed on an individual basis, largely relating to care planning and day to day arrangements however, there is wider agenda for care leavers linked to their marginalised status in society. Stein (2012) talks about the importance of young people's participation in improving services, developing policies and ensuring rights are upheld. He also suggests that the involvement of young people in participatory activities such as Children in Care Councils build resilience through experiences such as making a difference by helping others, volunteering and exposure to challenging situations which provide opportunities to develop problem solving and emotional coping strategies (Newman and Blackburn 2002). The following quotes from young people describe experiences of being involved with the Children in Care Council. The first quote from Samuel illustrates the concept of helping others and how this positively impacted on his sense of self-worth.

*'yeah, its (children in care council) like peer mentoring or like volunteering, more like volunteering, you've helped us out, so we'll help you sort of thing. I'm quite proud of our work and being in care was a good thing. Coz I know there were points in my life when I was bad but I used to be negative and now I'm positive because of it' (Samuel)*

The next quote and dialogue highlight the significance of having a collective voice and for Mark, how this influence in decision making enabled him to directly contribute to service provision for care leavers in Cornwall.

*'You get your voice heard, especially (children in care council) you got your voices heard'* (Samuel)

Mark- *'it was brilliant being able to choose social workers and see what (supported lodgings) providers were like, to improve them and make them better'*

Researcher- *'this is with (children in care council)?'*

Mark- *'yes and stuff like that'*

Researcher – *'what did you get out of being involved with (children in care council)'*

Mark- *'just knowing that the future of care leavers and stuff may have a better chance of having better social workers, better open door providers, better foster carers. Have a better experience all around'*

Mark's views highlight how the collective experiences of care leavers can be used to improve policy and service delivery, whilst providing positive experiences for those involved.

## **6.7 Conclusion**

A strong theme throughout this chapter was the importance for the young people of being viewed as young people first with the additional characteristic of 'care leaver'. This was an important finding as much of the discourse surrounding care leavers is framed in terms of negative outcomes. The young people in this study express views about 'normalised' exchanges with their workers, where they are not treated like 'care leavers' and how important this was to them as individuals. Experiencing 'normal' interactions with professionals supported a sense of belonging for the young people, enabling them to develop trust and a coherent narrative of themselves within the relationship. Belonging was described in many ways by the young people in this study, often through actions or words such as 'just not giving up' which would be

difficult to identify in legislation or statutory guidance, indicating the priority given to the informal rather than formal side of 'caring'.

Young people's meanings of care were influenced by the stigmatising nature of the label 'care leaver' which highlighted the difference to their peers. Views shared illustrated their belief of being seen as young people first and there was debate around the levels of additional support (if any) they should receive because of their 'difference'. This was an interesting subject to explore and indicates a real sense of self efficacy amongst the young people to be seen as equal amongst their peers, whilst acknowledging a diversity of earlier experiences.

Young people shared experiences of feeling singled out and different to their peers, often through acts or words which were not intentionally aimed to this effect. Often these feelings were internalised and as a result influenced their overall feelings of being different. These feelings of difference were often exacerbated by those who were 'paid to care', such as foster carers and although the intent was not aimed at causing distress, the young people often experienced it in this way.

A key strand running through this chapter has been the crucial role which relationships play in a young person's experience of care. Young people place high value on the relationships they have with a variety of professionals in providing support throughout their care experience and transition to adulthood. It is within the context of these reciprocal relationships that young people are able to experience the relationship as a tool for positive growth. For example, quotes taken from young people about constraints to a social worker's time such as busy caseloads demonstrate an understanding of the context of the work and a developing sense of empathy. The value of individual relationships was acknowledged through the emotive language used by the young people in describing changes of worker and endings, further adding to the discourse on the significance of relationship based practice.

With questions raised regarding the impact of a young person's interpretation of care it is now important to consider the professional response in meeting their specific needs.

## **Chapter Seven- Findings**

### **Developing Culturally Competent Practice with Care Leavers**

#### **7.1 Introduction**

This chapter is focussed on the challenges for professionals of meeting the cultural needs of care leavers. The chapter will closely link to the previous two findings chapters, drawing out the themes highlighted by the young people and providing an analysis of professional views in response. The quotes included in this chapter are from two focus groups with professionals which included twenty five staff in total and interviews with four strategic individuals involved in Cornwall's overall offer to care leavers. The questions asked during this part of the research were generated from the focus group and interviews with the young people. This enabled themes to be followed up and triangulated, ensuring that areas of similarity and difference were identified. The first section of this chapter addresses the poignant theme of difference and stigma which have important implications for culturally competent practice.

#### **7.2 Young People Leaving Care and Stigma**

Young people often experience a sense of difference and stigmatisation due to being defined as a care leaver (see Chapters Four and Five). There are a number of reasons for this stigma, several of which have previously been discussed and include factors such as, feeling different to peers, experiencing a lack of belonging, poor outcomes in comparison to peer group, complicated transitions and leaving care prematurely. During the focus groups the professionals discussed the barriers associated with stigmatisation and suggested that the young people who they work with often feel reticent about defining themselves as care leavers. Therefore, unsurprisingly, in this first set of quotes professionals were able to share examples of young people not wanting others to know their circumstances.

*'I've worked with young people who haven't told anyone they are in care and although professionals and schools know, they haven't told any friendship groups' (16+ social worker)*

*'It's hard to explain, but when I work with a young person in (local area) and we walk through (local area), one of us had to walk in front of the other so it wasn't apparent we were with each other because they didn't want to explain who I was' (16+ social worker)*

These comments represent the uneasy relationship which some young people have with the care leaver identity. Similar thoughts were shared by young people in Chapters Five and Six. Identity development in adolescence occurs at a fragile time and peer groups are of the utmost importance (see Chapter Four). Feeling stigmatised is a powerful emotion, internalised in many ways. The next quote suggests how far this sense of stigma extended.

*'they have been institutionalised by the care system. I'm very mindful of a young person saying to me that he wanted a job in Asda and I said fine I can provide a reference as he said he didn't have anyone to do this, and him saying well that means I'll definitely not get the job' (Senior manager)*

One social worker discussed the reasons why young people may resist identifying as a care leaver.

*'but if you look at the way care leavers continue to be portrayed in the media, and think about the high levels of care leavers, a reality I know, that enter the penal system, mental health institutions, the sex trade and that kind of stuff and they are highly represented, you can kind of understand. If young people know that that kind of media representation is out there and in the community, then why would they want to say they are a care leaver, because it's almost like they would feel shame in it, when they shouldn't' (16+ social worker)*

The discourse in this area is dominated by research on negative outcomes (see Chapter Four) and the portrayal of care leavers in the media is unbalanced. The

above excerpt raises important implications for culturally competent practice and Thompson's PCS model (Thompson 2007) gives a framework on which to conceptualise this (see Chapter Three). On a 'personal' level, professionals use the relationship as the primary tool and work with young people to make the successful transition to adult life. On 'cultural' and 'structural' levels social work is well placed as an emancipatory activity to challenge negative ideologies and support young people to overcome barriers. However, in practice this is complex as highlighted in the quote below.

*'just on the care leavers not wanting to be labelled, I went to a social work university thing last year and one of the things the universities were saying is that a lot of young people don't tell us they are care leavers because they don't want the label but it stops them accessing a lot of benefits and I'm sure it is easy for some young people to go to university and draw a line there, maybe feeling a bit more together anyway, maybe not?'* (16+ personal advisor)

The point being raised above is reminiscent of earlier discussion regarding support on offer (see Chapters Four and Five). Care leavers are a disadvantaged group and additional support is made available to ensure they are able to achieve to the best of their ability. When considering this through the lens of culturally competent practice, these efforts can be viewed as an intervention which seeks to mitigate against disadvantage and respond to specific need. However, as Brodie et al (2009) anecdotally found out, care leavers are often reluctant to 'tick' the box identifying them, henceforth losing out on additional support. This presents complex dilemmas in practice as young people leaving care quite reasonably wish to be viewed the same as their peers. The comments given by the professionals below elaborate on this point.

*'But on the other hand I think we forget that care leavers are young people like anybody else. One of the things I'm looking at is the othering of young people in care and leaving care, making them into something strange and different when they are not seen as something part of society. A youth worker once said to me we don't work with young people leaving care, we only work*

*with universal young people, took me years to work out the oxymoron in that, its like universal means everybody' (CEO Carefree/former foster carer)*

*'shouldn't be labelling normal teenage behaviours due to being in care' (Youth worker)*

These are key observations when working with young people leaving care, the primary focus being on *young person* rather than *care leaver*. This further highlights normalised interactions and culturally competent interventions which take into account the context in which the young person is positioned. This is further affirmed by a youth worker in the excerpt below.

*'Sometimes just stepping outside of the system and thinking, you are a human being, what are your aspirations in life, what do you want to achieve and this is just part of the journey for you, not just you as a care leaver? We would run consultation groups around housing but maybe we approached that in the wrong way, asking the wrong kind of questions, always asking what's good for care leavers rather than what's good for an individual who happens to be a care leaver' (Youth Worker)*

The benefits of participation through hearing the collective voice is discussed later on in the chapter. When framing ideas around culturally competent practice it can be viewed as a way of supporting young people to develop mastery over their own narrative by influencing service design and delivery. This also encourages a positive, collective identity which helps counter those views expressed earlier on in the chapter. In the next quote the social worker talks about young people feeling 'proud' of who they are.

*'but then again I've had young people, and I don't know if proud is the right word to use but they have sort of bragged about being a care leaver? You know I've been on the phone and they are like, 'I'm on the phone to my SW!' and sort of announcing it. I've met young people from college and they've been like oh so and so said hello because they have found each other and*

*found out that they have been in care and discussed who they've got. Its more shared than I thought it would be?' (16+ Social Worker)*

This last quote is important to highlight as it gives recognition to the positive or restorative elements of care. This is a theme which will be picked up later on in the chapter (see also Chapter Four). Young people need to feel positive about themselves so that they are able to develop a coherent narrative. The development of identity is dependent upon a young person's position in relation to others, hence the significance of positive affirmation. This section has given a professional perspective on the complexities of the care leaver 'label' and implications for practice. In the next section, attention will be drawn to the shared characteristics of living in a rural area.

### **7.3 The Specific Challenges of Living in Cornwall**

The socio-economic disparity in Cornwall is a visual reminder of the inequality experienced by certain sections of society. Young people leaving care are a marginalised group who experience poorer long term outcomes compared to their peers who have not been in care. The rurality of Cornwall exacerbates many of the disadvantages young people leaving care experience and this poses challenges for professionals in meeting need. In the focus groups with professionals, views were explored about the context of Cornwall and the notion of difference. The first quote acknowledges the difference for young people living in Cornwall but recognises those characteristics which are shared.

*'there is huge diversity between those experiences but underneath that, all those young people are human beings living in the same rural area and they have much in common as they do different' (CEO Carefree/former foster carer)*

The point made in this quote is in line with a theme from the previous section, that of commonality. Culturally competent practice focusses on the differences or similarities between individuals and groups rather than 'othering'. Understanding those characteristics which are shared as important as those which make us



different. Interestingly, the CEO of Carefree does not make an obvious link to young people being disadvantaged just because they live in Cornwall and this was a view shared by other professionals.

*'having recently worked in (different local authority) and in (charity) we work a lot over the South West, every place has different issues so every place is going to be different by the nature of us all being human beings, every social worker, every personal advisor, every young person, every foster carer, every professional is always going to be different and have a different approach....But I'm not sure how different Cornwall is? The conversations I've had with young people is that they feel like Cornwall is a different place, they feel disadvantaged, its natural to compare with Plymouth where they have a nice cinema, easier to get to places but I struggle with that and would that be the same wherever you lived, focussing on the negatives of a situation' (Youth worker)*

*'I know that people move out of Cornwall as its lacking in opportunity but this isn't just people in care, this is everyone' (Youth worker)*

*'I think sometimes as professionals we think that Cornwall is more significantly different, different to other places as well and this has been highlighted by going to national meetings and professionals are quite vocal in 'Cornwall is different' but that approach can often lead young people to think that Cornwall is significantly different whereas I'm not sure it is' (Youth worker)*

This is a thought provoking finding which is at odds with the views of the young people described in Chapter Five. The young people felt strongly that by living in Cornwall they are at a disadvantage to their peers who live in urban areas. Conversely, the views shared by professionals tend to suggest the opposite. They believe that young people in Cornwall experience difficulties which may be different but are equally as challenging as their counterparts in other areas. If not explored, these different interpretations have consequences for practice. The first component of culturally competent practice is for professionals to recognise what they bring to the encounter; their views, beliefs and understanding of the issue (see Chapter

Three). Elements of both viewpoints are evidenced in the literature (see Chapters One and Four) but the disconnect is not necessarily concerned with evidence or facts, more about the young people's internalised feelings of unfairness. Culturally competent professionals need to be aware of their views and the impact of their perspective on the work they undertake with young people. If they do not acknowledge this, there is the risk that the young people's sense of disadvantage will be minimised.

Given the young people's views on the disadvantages of living in Cornwall, it is unsurprising that they chose to distance themselves from the Cornish identity. Throughout the interviews and focus groups only two of the young people identified themselves as Cornish. The professionals involved in the focus groups and strategic interviews shared their views this.

*'One of the things I was shocked by I supposed, maybe a bit naïve to be shocked by was some of the attitudes within Cornwall about the different areas in Cornwall. So I've picked up some very derogatory comments, picked up on them and challenged them appropriately I think, around (local area) and (local area) for example and about people who live in (local area). I tell you, if comments like that were made in some of the places I've worked the challenge would be very, very strong'* (Head of Service)

In interview with the CEO of Carefree they were able to share an example of the negative, discriminatory views expressed by a young person who had moved to Cornwall.

*'we've had discussions in groups about the Cornish identity and there are young people in care in Cornwall who are from other authorities, I'm thinking of a young person from London in particular.....a lot of denial and this has resulted in some young people kind of being like, what the f\*\*k have I been sent to Cornwall for? Rural, outback, no decent clubs, no decent shops and that leads onto all people are stupid. Maybe less tendency to tell Irish jokes now than the 1970's but certainly acceptable to tell Cornish ones and dismiss the Cornish as stupid.'* (CEO Carefree/former foster carer)

A similar observation was also identified by Franks and Goswami (2010) in a study into teenagers who ran away from home. The study observed difficulties for young people 'transplanted' from urban areas to the countryside by their families who sought a quieter lifestyle. The study found that the young people struggled in adapting to the dramatic changes in lifestyle and found that they were at increased risk of running away from home back to their former communities. The Head of Service raises an important issue about the acceptance of derogatory comments. This type of 'local' dialogue can be offensive and discriminatory but is not exclusively confined to Cornwall, other parts of the UK having a similar story. Clearly, the impact of this negativity to place is important to consider in terms of the effect on young people. The notion of somehow feeling un-equal or lesser in comparison to peers was highlighted in the following quotes as a further reason for not wanting to identify as Cornish.

*'for 150 years or so Cornish identity, Cornish language and Cornish culture has been derogated, it has been forced out by the hegemony of the UK, we don't like things that are different.....I think that by driving out the Cornish language, slightly ridiculing the West Country accent, all of those attitudes which come from the 'big sophisticated' cities and the 'less sophisticated' rural towns, I think you can see why young people might struggle to see themselves as Cornish in the same way that some Black children struggle to see themselves as Black, they don't want to be associated with something where racist myths have started to get under their skin and they have started to believe that.....So if you've got all of that going on I have an understanding of why young people may not want to overly identify themselves as Cornish, they want to be more like the people they see on MTV or wherever' (Head of Service)*

*'I also think there is a lot of anti-Cornish prejudice, it's difficult to say that when you work in world where racism based on the colour of your skin is so prevalent and so much of an issue. It's not to devalue that at all but as a Cornish woman growing up myself and knowing other Cornish young people it's a real issue as well' (CEO Carefree/former foster carer)*

Interestingly, both of the above quotes reference ethnicity, drawing comparisons to some of the complexities for BME groups in forming positive identities. Whilst a direct comparison is not appropriate as it minimises the legacy of inequality and racism experienced by BME groups, the similarities do give insight into some of the feelings which may be experienced by young people in identifying as Cornish. Identity development is multi-faceted and the position of self, amongst others, pivotal (see Chapter Four). The implication for a culturally competent response is to recognise the impact on the young people of this derogation by exploring the meaning and challenging appropriately. This sense of difference is tangible and there are additional barriers which are present for young people living in rural areas. The notion of intersectionality is an important one here as it recognises the cumulative impact of inequality (see Chapter Three). The following quotes by the CEO of Carefree begin to address these ideas.

*'so the diversity bit, yes of course we have high levels of diversity in Cornwall the same as everywhere and everybody is diverse from everybody else. I think people get very caught up with the is diversity just about the nine protected characteristics, but that is just what the law says which is important and it's great that it's there but diversity is about every human being having a fair chance of having a good a life as anybody else therefore when you are working with care leavers you are automatically working with a group who have a less fair chance of having that equality of opportunity, so every single member of that group is diverse and discriminated against which is compounded by living in rural isolation, discrimination against Cornish young people'* (CEO Carefree/former foster carer)

*'I think that care leavers, unless they are supported really well are a minority themselves, are discriminated against for being care leavers and then discriminated against horizontally for who they are, including this anti-Cornish thing'* (CEO Carefree/former foster carer)

These are strongly worded sentiments regarding the disadvantage experienced by care leavers. The views reinforce what is known regarding outcomes for young people leaving care and make clear reference to intersecting inequality (see

Chapters Three and Four). In the next section, a professional perspective will be explored on the specific challenges of rurality for young people.

### **7.3.1 Services and Support in Cornwall**

Rural areas such as Cornwall are known for extremes of financial disparity between the affluent and poor, presenting young people leaving care with specific difficulties relating to education, availability of support and services, employment opportunities, provision of housing and transport. Chapter Five gives the young people's perspective on what they consider to be the challenges experienced through rurality. This section comprises a professional perspective and many similarities are drawn with the views of the young people. This first quotes acknowledges the socio-economic disparity and how this can impact on provision of services and resources for care leavers.

*'I'm going to say a negative because young people's centres are closing and resources diminishing, lots of things reducing. Young people used to be able to drop into centres but this is not there anymore, there used to be satellite provisions in more rural areas but that's not there anymore, that then impacts on the statutory resources because services are being produced in another way' (16+ social worker)*

*'also it's the financial climate for Cornwall, it's a UK area of deprivation but conversely its rich in resource for second homes for the more affluent so you've got clear financial disparity in terms of resources' (16+ social worker)*

The socio-economic climate of Cornwall is a compounding factor in accessing services. This is not just the story for care leavers, it is a difficulty experienced by many. However, for care leavers it must be considered under the framework of intersectionality which acknowledges the cumulative impact. A further key issue is the lack of specialist service provision and this was recognised by a youth worker during a discussion in one of the focus groups.

*'Mainstream provision is not suited to care leavers. It doesn't take into account their different needs. Cornwall is lacking in specialist provision for care leavers'* (Youth worker)

This quote picks up on the concept of difference which has been explored in detail elsewhere (see Chapters, Four, Five and Six). The notion of difference for care leavers has been disputed throughout this study due to its negative connotations and differential treatment. Therefore, this comment is interesting as it suggests that care leavers do need specialist support due their '*different needs*'. Other professionals highlighted the additional barriers rurality places on young people in terms of accessing services in general.

*'lots of services are down the A30 corridor so young people living along the coast may miss out and may need shifting to colleges, lose friendship groups. So you may live in the village, go to same school, secondary school but the college course you want is 50 miles away that is the same for most young people in Cornwall not unique to care leavers'* (16+ social worker)

The social worker in the above quote makes an important point about the impact on young people in general, not specifically care leavers. This is an important point to highlight particularly due to the discussion earlier on in the chapter regarding the importance of viewing the young person not just the label of care leaver. However, what cannot be ignored is that the cuts to youth services negatively impact provision for care leavers and this is felt more harshly in rural areas due to the geographical constraints of the county. The next quotes draw comparison with other parts of the UK, particularly urban areas.

*'in London you've got access to 32 boroughs worth of services and they are quite close'* (Senior manager)

*'apart from one border, we are surrounded by water so we don't have other local authorities to dip in and out of, competition for services'* (16+ social worker)

The theme of comparison with other parts of the UK was evident in the focus group and many of the interviews with young people. Chapter Five discusses this comparison and how the feeling of difference is internalised by the young people to mean disadvantaged. The above quotes give some context to this feeling of disadvantage by acknowledging the disparity of service provision for young people in Cornwall. It adds weight to the young people's views and identifies specific areas into which culturally competent professionals should be focussing. One such area is the provision of transport. Difficulties with transport factored highly in the focus group and interviews with young people and the next section will explore the professional perspective.

### **7.3.2 Impact of Rurality on Accessing Services**

The rurality of Cornwall is, in particular poor transport links has been previously discussed (see Chapters Four and Five). Poor transport links, cost and availability present additional challenges for young people, but these effects are also felt by the professionals assigned to help them. These difficulties are discussed by social workers and personal advisors in the following quotes.

*'If you've got a lot of young people needing that level of support its very, very difficult to balance young people's needs particularly when they are all over the county and more than half an hour in between each other'* (16+ social worker)

*'I think that goes back to the geography side of things and how it doesn't just impact on the young person but workers too, 4hr round trip for a 20minute visit. It's very difficult sometimes for young people to understand that you have 30 others and can't give them the time that they may need'* (16+ personal advisor)

*'it's hard and you don't want them to feel like they are not valued but you do often have 30 young people to work with, it's how you manage that'* (16+ social worker)

*'there is less time to engage with the young people in meaningful work (due to workload and transport difficulties)' (16+ social worker)*

This finding confirms that of Pugh (2000) who writes about the Shropshire Regeneration Partnership (1998). It identified that owing to increased staff and travel costs associated with rural areas, social workers found it harder to organise their visits than in urban areas. The notion of young people living *'all over the county'* is accurate and county wide teams often struggle with the practicalities of visits and meetings. The following excerpts from a conversation with a youth worker illustrates how the benefit of attending a specialist service such as Carefree (see Chapters Five and Six) is not available to all young people due to its location.

*'then you've got the situation of for example, living in (local area), you are at a huge disadvantage and maybe that's where there is a disadvantage for living in Cornwall because Carefree is quite unique and when I've looked at other authorities they don't have similar models, but actually it does give a bit of a postcode lottery as Carefree are based in (local area) but try to cover the county.....So although you can get to the groups, if you have an issue at the weekend you could maybe pop in here on a Monday whereas you couldn't if you lived in (local area), might be a phonecall' (Youth Worker)*

*'I think Carefree has become more and more important for our young people because of the diversity of work they can do and the way in which they work with them but the downside of that is that they are based in one location which again makes it really difficult as we are a county wide team covering a big area. We don't have a central point where care leavers can come together, like in a city where they could meet, share experiences, peer support, sharing their own resources' (16+ social worker)*

It is interesting to note, once more the comparison with urban areas. This is a theme which continues into the next section and explores the professional perspective relating to education and housing.



### 7.3.3 *The Impact of Rurality on Education, Employment and Housing*

Stein (2012) discusses the shortage of housing in rural areas and the increased dependency on the private sector (Ofsted 2009). An increased dependency on private sector housing causes accommodation insecurity for care leavers due to a lack of stability of tenure and unaffordable, private rent costs. In Chapter Five the young people discussed their concerns regarding lack of affordable housing and these views are shared by the professionals.

*'challenges are that the main thing is getting a flat in Cornwall- it's very hard'*  
(Youth worker)

*'I think housing is probably one of the big challenges and perhaps where it is different'* (Senior manager)

The next quote from a social worker makes comparison with an urban area in terms of choice, availability and leaving care support.

*'although housing availability is likely to be better in urban areas with more choice, far more properties but far more people. London boroughs, you tend to move between them all don't you, you could live pretty much anywhere and still be accessible to your leaving care team, whereas when ours go across borders it becomes a major issue in terms of support'* (16+ social worker)

The issue of availability and support was also noted in respect of employment and educational opportunities. Young people leaving care are more likely to be out of education post 16 years and although the numbers in education have been increasing since 2011, in comparison to their peers the numbers remains low (Stein 2012). Similar patterns are found with employment of care leavers and in Cornwall this is compounded by the socio-economic climate. Pugh (2000) writes about the high levels of seasonal and casual jobs in rural areas and how this effects financial security and increases the risk of poverty. The difficulties in securing employment for young people leaving care was commented on by a senior manager and youth worker, both of whom made reference to the differences between Cornwall and urban areas.

*'A lot of young people are not able to access reasonable employment and that's another disadvantage for care leavers in Cornwall as apart from seasonal opportunities, work is hard to find. I appreciate it's a struggle for many young people but for care leavers there is an added barrier due to availability. If you live in London I suspect there are greater opportunities to work and certainly across the board it is more difficult to work in Cornwall, limited opportunities and very few large companies'* (Senior manager)

*'better job opportunities and more universities outside of Cornwall'* (Youth worker)

*'In many ways its more difficult to get people into education, training and employment because of distances and appropriateness of courses, with higher education we didn't have a university for quite a long time so people had to go out of Cornwall and they still will do so as there will be other universities with better courses, so there will be complexities for all young people so they are exacerbated complexities for care leavers.'* (Senior manager)

The professional view regarding the challenges of living in Cornwall has confirmed many of the views expressed by the young people. This concurrence is important to recognise in the context of culturally competent practice, particularly in reference to the prioritisation and provision of services. Using a similar framework to pick through some of the pertinent issues, the next section will examine the professional perspective on factors which improve experiences for young people.

#### **7.4 The Role of the Professional Relationship**

Chapter Six discussed the significance of reciprocity of relationship and the important role this played for the young people in developing a sense of self. Professionals also get a sense of achievement through being effective in their role and satisfaction from the task itself. The dyadic nature of the interaction becomes a crucial modelling experience for the young person with both contributing to the relationship. During the focus groups, professionals talked about the challenges in

sustaining relationships with young people citing some of the barriers to achieving this.

*'You could work with someone from 16 years to 21 years, have the stability of relationship but also job satisfaction, seeing young people mature, be with them through the traumas, may or may not come through it but often they did and I think now there is a lot more bureaucracy for the 16+ team and there is less time to engage with the young people in meaningful work and I'm sure the personal advisors probably see the same although they are with them longer term so with them for that journey through life'* (16+ social worker)

*'I think as social workers, when you've got young people who are in particular difficulty between 16 years and 18 years it can appear soul destroying because you are doing that statutory role and it can be frustrating that you can't see it through like we used to'* (16+ social worker)

Interestingly, these quotes from social workers illustrate the nature of the relationship as something more than a professional interaction. Phrases used such as *'enjoyable'*, *'meaningful work'*, *'frustrating'* and *'soul destroying'* indicate the emotional investment in the relationship and genuine feelings of pride or disappointment depending on the outcome. This finding corresponds to the findings of Chapter Five which highlights the young people's views on the significance of the relationship. A pertinent issue raised in the above quotes relates to changes of workers, an issue which evoked strong feelings on the part of the young people. The next section will explore the professional perspective, acknowledging the constraints of bureaucratic processes.

#### **7.4.1 Changes of Worker**

Stein (2006) postulates that following the widespread introduction of leaving care teams, young people were inevitably faced with an increase in changes of worker. When examining the role of professionals in their study, Ridley et al (2016) found that practitioners who had specialisms with care leavers were rated most highly. Therefore, the dilemma for local authorities in terms of decision making regarding the allocation of workers is that working with adolescents and care leavers requires a

degree of specialism and a particular focus on the challenges of the development stage of adolescence. Herein lies the difficulty as those professionals specialised in working with young people leaving care are often not skilled to work with younger children. Therefore it becomes challenging to ensure that relationships are maintained whilst at the same time matching the skill set of professionals to the presenting need of the child or young person in question. The following views were shared by professionals during the focus groups and highlight the complexities involved when young people's cases are transferred between services.

*'I can understand why a consistency of worker can be really important and building those relationships because who else have I got?'* (16+ team worker)

*'they lose you at 18 years and that is a big difference for young people, I've heard a lot of young people say, I don't want to form a relationship with my social worker coz they are only going to be with me for so long'* (16+ personal advisor)

*'relationships which young people build with their social workers seem to be lost when they move to leaving care'* (Youth worker)

*'Not really ok to just change at 16 years, only reason seems to be because of the age?'* (Youth worker)

The above quotes highlight strong feelings regarding the changes in workers for young people, echoing the findings of Chapter Six. The next set of quotes also discuss changes in worker negatively impacting on relationships but also talk about the different type of work needed for young people as they approach leaving care.

*'16 years is the wrong age, for example there is a change in how transport is provided or not, expected to do more for themselves which is quite sudden for some. I know it is about independence but why are these things not happening before 16 years, earlier in foster care and stuff?'* (Youth worker)

*'I think another side of that is that if you've got someone in a long term placement and they've got the same social worker that could be good but equally that could be difficult if that social worker hasn't got the skills to work in adolescence and the challenges that come along, especially if the foster carers are already struggling with those challenges. Wouldn't necessarily have to be change of worker though it could be a different type of support'* (16+ social worker)

*'I personally think it should be about 14 years if there is going to be a change because that is generally a time of GCSEs and deciding what they are going to do, that's when the independence stuff should begin and relationships would be better formed I think, that would give you four years of working with them'* (16+ social worker)

In this next quote a social worker shares an alternative view about changes in workers, connecting this to the challenges of leaving care social work and the complexity of promoting independence in a relatively short space of time.

*'its not just a relationship thing, with an earlier age like 14 years you've got a social worker working with carers about independence and also that personal responsibility bit, positive risk taking, all that kind of stuff whereas it feels a bit at the moment that they come to us at 16 years and there's unrealistic and unsustainable things in place and we kinda go 'oh' but are seen as the bad one, particularly by other teams who say that we don't nurture them, we just push them out there, which is not the case at all. Its about creating that different kind of thinking with that young person and for that young person about actually you need to be doing things for yourself, unrealistic to expect a taxi to run you around, that's not how it works, if we were a 14+ team we would be starting that work earlier and potentially changing the way the foster carers view that young person which can mean possibly better outcomes, more independent and more autonomous'* (16+ social worker)

The quotes included in this section chime with the findings of Stein (2006). There is a constant dilemma for managers of services to ensure that children and young people

receive the right support from the right professional at the right time. Leaving care social work requires specialist skills and not all professionals are equipped to undertake this work. Therefore what becomes significant is the way in which changes of workers are handled and attention should be paid to transition theory (see Chapter Four). The transitions for care leavers are complex and involve emotional as well as physical shifts. If not handled sensitively or planned in the right way, transitions (or changes) can have long term consequences which affect future relationships. When considering culturally competent practice, changes of worker should be viewed using the framework of transition theory and planned accordingly. This does not just apply to social workers but should take account of all those involved with young people.

#### **7.4.2 Building Resilience**

Throughout Chapter Five there is a strong theme for the young people of not wanting to be viewed differently to their peers. The notion of young person first is a thread weaved throughout this study. From a professional viewpoint, balancing statutory duties and legislation alongside enabling young people to feel 'normal' amongst their peers is a complex task. Young people leaving care are entitled to additional support but often this support is provided in such a way that it exacerbates feelings of difference. In the focus groups and interviews with professionals there were discussions around the ways in which professionals work with young people to minimise the sense of difference and increase resilience. In this first quote a senior manager acknowledges the balance between treating young people as individuals whilst recognising their unique support needs.

*'although they are young people first there are clearly additional barriers and there is something about the ability and resilience of those young people to find their way through and how we can we help to do that'* (Senior manager)

And continues by talking about the specific ways culturally competent interventions can promote better longer term outcomes.

*'I suppose what I would say is that what we would have tried to do is help you develop and this is a contribution to help you overcome some of the barriers*

*that you are going to face in setting up a home. But it is not an isolated thing, having a grant or an entitlement is not an isolated thing, its part of a process where we incentivise you, work with you develop your capability, access suitable housing, so there is whole series of things which are actually quite hard to achieve so along the way we offer some support mechanisms that enable you to access things directly..... understandably if we can help young people make a positive contribution, access education, access housing, that's extremely important and you could see leaving care grants as a small part of that' (Senior manager)*

The points raised by the senior manager are indicative of the types of standard support mechanisms you would expect to be provided by statutory leaving care services, for example setting up home grants. The next quote raises an interesting alternative perspective to the above quotes, that of support needing to be based on individual need rather than standard entitlement. .

*'I'm working with a lot of young people now who haven't even go that and I look back to my own leaving home I would be like if I needed a saucepan I could go back to my Mum and say can I have the old saucepan we don't use anymore please and she would say ok, or could I have a couple of spare sheets out of the airing cupboard, it looks like its practical help but actually its emotional help and knowing that you have a base to go back to and say, I need a sheet or a saucepan or a hug or £10. It's very difficult for the corporate parent or the local authority to provide that as a good parent would. I get that they are very good at promoting a semi-middle class upbringing to children when they are in care with cello lessons and horse riding and that kind of business, a lot more privileged than their peers from the places of origin they came from. I certainly remember some of the friends of my eldest foster daughter saying I want to come into care she gets loads more pocket money than me' (CEO Carefree/former foster carer)*

The discussion with the CEO of Carefree continued with examples of how support provided to care leavers often increases their feelings of difference. This was a

finding of Chapter Six with the young people having similar debates with one another regarding the stigmatising effects of additional support.

*'so the young people would just assume that they would be fetched by a driver. So I remember one time, one of the young people I was fostering having missed her bus home from school in another town, rang and asked me so I said get the train, they had enough money and wherewithal to do that but they were a bit cross about that so they called their social worker who put on a driver for them. I do get why because if you're a harassed social worker then you know children can be at risk and you've got corporate responsibility, thinking of the media coming crashing down on somebody's head if they didn't get transported home and a terrible thing happened to them, the tabloid press got hold of it and we would be another Haringey, but that mitigates against young people being able to manage themselves safely' (CEO Carefree/former foster carer)*

A number of interesting points relevant to this discussion are made by the CEO of Carefree, specifically about professional responses to young people leaving care and the 'different' way in which decision making is approached, arguably in a more risk averse manner than would be the case for other young people. This suggests that the decision making for young people in and leaving care is not based on the same principles as would be for their peer groups. This is an example of how professional decision making can inadvertently distance young people from their peers, reinforcing a sense of difference. Once again this poses an interesting dilemma for culturally competent practice which seeks to lessen the effects of disadvantage.

The next section explores the importance of belonging as a way of minimising feelings of difference.

## **7.5 Belonging and Shared Identity**

The importance to a developing sense of self of having shared identity and a sense of belonging is discussed in Chapters Four and Six. This sense of shared identity



can be difficult to achieve for young people leaving care as being labelled a 'care leaver' can often bring negative connotations. The young people shared their views around feeling stigmatised because of their care leaver status which had negative effects on their self-esteem and self-worth (see Chapter Five). However, for many young people their experiences of care are positive as highlighted below.

*'I think there's differences with care leavers, some, there's one in particular who I work with and you just get the impression that the early part of their childhood was good, really good attachment with main care giver and how they present and how their behaviour is very different from someone whose parents were substance dependent and they were born with dependency and then adoption, then breakdown, they present very differently but both come under the label of care leavers, but in a sense very different'* (16+ social worker)

The restorative nature of care is discussed in Chapter Four and there are several key components to promoting resilience. Stein (2012) talks about the importance of mentoring schemes for care leavers as a bridge between professional and informal support to increase resilience (Ahrens et al 2008; Clayden and Stein 2005 McBriar et al 2001). A study published by Barnardos (2016) also found the significant role mentoring schemes play for children in care and care leavers but noted the lack of adequate provision across the UK. In Cornwall Carefree which is a voluntary organisation, provides mentoring and provision for care leavers and employs care experienced workers to provide these services. The following views shared by strategic staff highlight the rationale for the development of the service and the significance of having care experienced young people involved in the design and development of the service.

*'What Carefree have done is grown a way of doing things, organically with the advantages of having young people heavily influencing what they want done and its helped those running Carefree to understand how to direct their services'* (Senior manager)

*'that's why we're using them with the mentoring scheme to bring those hard to reach care leavers who are not in education training or employment, over 19 years. We're asking them to work with them because we feel they are going to do something different, not just the people who are doing the work who are care leavers but the way in which they are working with those young people but their whole system can contribute to helping us achieve that'* (Senior manager)

*'But I think Cornwall is quite special because we have Carefree, we've got an organisation that is started by and still led by young people in and leaving care who are trying to overcome the stereotype that being leaving care is a bad thing....Carefree is like the best kind of youth work, the ethical base or value base for it is about empowering young people and empowering young people through association with each other, not through workers, or grown-ups, or oldies but through each other and finding a voice to speak up for themselves but also that sense of identity or shared experience which is the point I am making about ethnic differences in Cornwall, unless you have a community to identify with and bounce ideas off and share experience and share that sense of oppression or misunderstanding then I think that is very very tough to be locked inside of your own head or your own experiences and thinking am I the only one?'* (Head of Service)

The views expressed above describe the significance of having care experienced young people involved in the design and delivery of services. Carefree should be viewed as a culturally competent service, delivering culturally competent interventions to care leavers. The next quotes highlight this further and point out the ability of organisations such as Carefree to foster a positive and shared identity.

*'we've got an organisation that is started by and still led by young people in and leaving care who are trying to overcome the stereotype that being leaving care is a bad thing and they all go around with hoodies and T-shirts saying Carefree and people will ask what's that about and they will proudly say it's about young people in and leaving care, like me'* (CEO Carefree/former foster carer)

*'Carefree has been quite positive for some of the young people I've worked with, those who have been quite chaotic and helped stabilise them' (16+ personal advisor)*

*'We've (Carefree) just asked for some funding to work with young people in care and leaving care, where them working together and making friendships is central to the funding bid, they've accepted it but said that one of the things that don't understand is that how can those young people possibly be friends because some of them live 30 miles apart!' (CEO Carefree/former foster carer)*

The above quotes highlight the encouraging nature of the work Carefree do in supporting care leavers to develop a positive sense of self through belonging. The next quote talks about how the organisation is supporting young people through the development of sustainable social support networks. This finding corresponds to the young people's views in Chapter Six which highlight the importance of symbolic family and extended social networks away from professional support.

*'its that emotional status of belonging and secure base that some of our young people are now showing that they don't feel they have. They can work together as a group and one of the things that I would say about Carefree is that it's a family in the sense of support and we can do that well structured in our groups but what I do know is that with care leavers, for example there's a lot living in (local area) at present, partly because we are here ....yeah they used to cluster a lot around (local area) because the resource centre was there and now it seems that a lot are choosing to move to (local area)' (CEO Carefree/former foster carer)*

It is interesting to note the example given regarding young people 'clustering' around a particular geographical area in order to receive support and maintain social networks. With the widespread cut to youth provision and rurality of Cornwall, this demonstrates resilience on the part of the young people but also testament to the need for continued, tailored support. All three components of culturally competent

practice (see Chapter Three) can be identified in the work undertaken by Carefree. Workers from Carefree, whether they are care experienced or not, possess a reflective, self-awareness of the issues present for care leavers; originating from the local area, they have an advanced understanding of the cultural knowledge required to undertake the work; and finally they provide culturally competent interventions based on their knowledge. Through Carefree, young people are able to experience belonging and develop a positive narrative of themselves. The next section takes a professional perspective on the notion of narrative for young people.

### **7.5.1 *Creating a Coherent Narrative***

NICE (2010) and Winter and Cohen (2005) identify the link between knowing about one's personal history and having a positive sense of identity. Knowledge about genetic and social origins and an ability to build on childhood memories and associated stories are key to developing a coherent narrative (Smith and Logan 2004; Habermas and Bluck 2000). Young people leaving care are often missing the most basic of information regarding their past therefore having a 'lifestory' is key to making sense of self. Life story work is not a standalone piece of work and should not be approached tokenistically. It seeks to integrate positive and negative elements of past events, creating a balanced narrative from which the young person can move forward (Rose and Philpot 2006). The importance of this work was affirmed during the strategic interviews.

*'I think it does leave our care leavers more isolated, more in need of life story work, more help with who they are and help looking forward' (Head of Service)*

*'we've intervened in young people's lives and we have made decisions and we have been involved in the lives and it is not uncommon for example for young people to not be clear on why and this can be seen by the increase in life story work being done which is not necessarily about leaving care but an earlier stage, I think there is something about young people understanding the position they are in' (Senior Manager)*

*'goes back to narrative and having a story about me and I think that it's something that young people who have had very difficult and fractured lives, have less capacity to have. I don't think we work enough to give young people a story of their lives anyway, I know a lot of young people who have got a confused or twisted distortion of why they came into care, including care leavers who think they went into care because of an administrative error and therefore had to spend 16 years of their life away from their family when actually the stories are obviously a lot more complex. It's difficult because you can't just sit a 5yr old down and say you were multiply abused by the people you think of as parents who if you remain in foster care you will probably have contact with 6 times a year for the rest of your childhood and then we won't be able to support you past 21 years, so you'll have to rely on them anyway. That's massive and huge but we've got to find a way of doing it because that sense of identity comes from knowing who you are and knowing yourself, where you've come from'* (CEO Carefree/former foster carer)

The views shared above give important insight into the importance of young people understanding who they are and where they have come from. It is fundamental to culturally competent practice but not always given the recognition it deserves. Stein (2012) cites an awareness of one's own lifestory as a key factor in developing resilience but time and resources often place this as a low priority. Although 'life story work' is acknowledged in the above quotes, it is referred to as being part of a wider ethos of support to the young person to help them make sense of their own identity in light of their family experiences and subsequent decisions made. The following quote gives an example of how damaging a lack of coherency about past experiences can be.

*'So some young people will say I've put myself into care, a lot of s.20, voluntarily which actually means that your parents requested or consented to your accommodation and if you look at the Children Act and the actual word that underpins s.20, it was abandonment which is saying that you gave over your parental responsibility to the local authority. It's really hard for a young person to understand that and still feel that the parents loved them against giving them up. What I've seen is young people blaming themselves because*

*it is too painful to blame someone else, they loved me but I am bad, it's easier than they didn't love me enough and they couldn't do a good enough job but there is nothing wrong with me'* (CEO Carefree/former foster carer)

Chapter Six details the young people's views and negative effects on their life story when questions remain unanswered or distorted. This chapter has highlighted similar findings, suggesting that organisations such as Carefree are important to support the development of a positive, shared identity. Carefree's culturally competent response encourages young people to meet, share experiences and feel positive about who they are. The next section takes this one step further and explores the collective voice of care leavers in Cornwall.

## **7.6 Collective Voice**

Meaningful participation with young people is complex to achieve. Franklin and Sloper (2006) commented on the role of participation, fearing that at times young people were 'fatigued' by repeatedly being 'consulted' with but no action being taken. Brodie et al (2016) also write about a 'culture of participation' and how achieving meaningful participation requires commitment on a number of levels; organisationally; operationally; and individually. They also discuss evidence which suggests young people 'contrast the style of working in the voluntary sector as more positive and supportive than statutory services, such as social care and the police' (pg. 9). Adding that there is evidence to suggest similar positive and supportive relationships are possible with practitioners from statutory services (pg. 9) but the context of the work often makes participatory opportunities less likely.

Organisations such as Carefree organically encourage young people to meet and share their experiences. However, in Cornwall, hearing the collective voice can be challenging due to the rurality of the area. Patel (1999) and Pugh (2003) discuss the dispersed nature of the rural population and a lack of substantial numbers of minority groups to add pressure which culminate in a culture lacking in a strong community voice (Social Services Inspectorate 1998). This was an observation confirmed in the strategic interviews from staff who had worked other authorities.

*'I'm just thinking that through one of the difficulties in working in Cornwall and it's a danger when working with any young people is that you become out of touch with what's going on, we're a peninsula authority, bordering Devon and Plymouth, we often have less contact with other authorities'* (Senior manager)

*'Some of the disadvantages of working with Cornwall care leavers is that they are a dispersed group..... Arranging things to get them to do things as a group is complicated so the things that Carefree do are quite intensive (Children in Care Council) is quite difficult to get people to participate so the effect of that is difficulty in hearing the group voice..... So another disadvantage about having young people so dispersed is that they have difficulty in sharing experiences so coming back to the question it is more difficult as they are more isolated and your not getting young people together to have a discussion and share their experiences'* (Senior manager)

*'I think one of the big issues for care leavers in Cornwall, compared to the most urban areas I've worked in, London and Sheffield I would say and not wanting to over generalise but care leavers in more urban areas have a greater understanding of who they are and what's happened and more assertive with the organisation about what they need and there's a kind of difference .....and I think to a degree its because they spend more time together there's a stronger youth culture, in Cornwall it's not as strong, I think because its more dispersed.....less of a group identity, that would be my observation'* (Head of Service)

*'actually in (different local authority) we met with a group of young people who were leaving care and they clearly knew each other quite well, they lived within a few miles of each other so it is quite different to Cornwall as many care leavers live a considerable distance from each other and its only through some of the group opportunities they have that they come together, but certainly in (different local authority) there's been a care leavers' group for about 20 years and it's very well established, they have 30 members, it's social and not about formal participation but about them coming together and getting support, they are very clear about what they want and collectively they*

*can do that. In Cornwall there aren't the same mechanisms for young people to do that and I'm not sure about how good we've been at achieving that'*

(Youth Worker)

The above quotes make comparisons with other parts of the UK which is a recurrent theme running throughout this study. The comments suggest that young people are at a disadvantage by not having a powerful, collective voice.

*'so I think care leavers do have issues with us, about what we do and what we don't do, in terms of how often they see their worker for example, although I think they are very understanding of the pressures that are on workers.... I think that they are very ready to understand the issues we face rather than like the old NAYPIC (National Association of Young People in Care) which was much more militant, much more demanding, pushing the boundaries really'* (Head of Service)

*'that sense of identity or shared experience..... which unless you have a community to identify with and bounce ideas off and share experience and share that sense of oppression or misunderstanding then I think that is very very tough to be locked inside of your own head or your own experiences and thinking am I the only one?'* (Head of Service)

Sharing experiences and having influence in wider decision making builds resilience (see Chapters Four and Five) and can be viewed through the lens of culturally competent practice. This section has explored the advantages of hearing the collective voice as well as the challenges to achieving this. Communication is a key tool available to professionals and the next section considers the relatively new concept of social media.

## **7.7 Social Media**

All of the young people interviewed chose mobile phones as a way of keeping in touch with me regarding focus groups and interviews. The young people would often discuss amongst themselves what was happening in the online world of social media



and there was a real sense of connection and shared understanding with one another. Interestingly, however social media wasn't raised by the young people in any of the focus groups or interviews (although a direct question about the topic was not asked) which could be for a number of reasons. Firstly, it is likely to be seen by young people as something confined to them and not professionals; secondly, it may have been because young people did not link any of the experiences they were sharing with me to social media; thirdly social media is so intrinsic and normalised in their day to day lives that they may not have felt it necessitated a separate mention.

Social media and online platforms are generally not used as a means of communication with young people and this primarily links to issues relating to safeguarding and risk of inappropriate use. Gabriel (2014) talks about young people using social media as a source of entertainment, a way to share their lives with one another and express themselves but acknowledges the public concern and academic debate which surrounds its use. Richards et al (2015, pg. 1154) sees the concerns as including '....potentially negative effects such as increased risk-taking behaviours, cyberbullying, depression, exclusion of minority groups and negative influences on health and wellbeing, namely reduced self-image and self-esteem.'

Young people freely communicate and use social media as a way of creating a sense of belonging despite the numerous disadvantages to its use. Richards et al (2015) suggests that social media and online platforms increase well-being and self-esteem and improve communication by allowing introverted young people to learn important socialisation skills as well as young people being able to remain in touch with their peers regardless of their situation, location or cultural group. Research by the University of East Anglia (Hammond forthcoming) on social media highlighted the importance of digital networks in increasing self-esteem and mental wellbeing. The study showed how social media platforms can help reduce the stigma experienced by children in care by giving them the opportunity to network in ways otherwise unavailable to them. Brodie (forthcoming) also discusses the importance of considering communities which exist outside of the physical construct due to the changing nature of care, communication and support. The quotes below, taken from a discussion with the CEO of Carefree who is also a former foster carer illustrate

how social media can be used positively to engage with young people and maintain informal support networks.

*‘So, I’ve got most of them on facebook, not sure if that’s technically allowed as a way of stalking them and seeing where they are, probably shouldn’t say stalking should I’ (CEO, Carefree/former foster carer)*

*‘And I just replied, this is Cornwall! Young people communicate through facebook, texts, there’s a sense of creating a culture among young people that’s quite strong’ (CEO, Carefree/former foster carer)*

The above quotes generate thinking around social media as a resource to support sustainability of relationships and belonging, even when formal relationships have ended. In this respect, the use of social media to communicate with young people can be viewed as a culturally competent response. However, the dilemmas involved for local authorities in utilising social media and online platforms are not as easily rectified and there will continue to be concerns regarding the appropriateness of its use for statutory services. This topic was further explored in the following discussion with a youth worker from the voluntary sector who believes more should be done to access these methods of communication.

*Voluntary sector worker- ‘the world is rapidly changing and something which I am conscious of now is how technology is advancing. I practised as a youth worker and we make assumptions based on our knowledge and experience of things. I do use technology, social media but actually its an area which I think is an example of how we don’t get it, because our systems are very rigid, I work for (voluntary sector), (local) council have systems, do we use social media on a day to day basis to contact young people? No’*

*Researcher- ‘but what are the young people using....’*

*Voluntary sector worker- ‘we are so far removed from their world at times, that for us to understand it is impossible. Is that down to professionals or is that down to systems? Probably the systems but actually they are influenced by people.....we are seen as too formal, we are seen as people that don’t get it,*

*it was said to me last week, you don't get what's going on in my world, you don't understand the pressures but I think they are quite right in some ways'*

*'Also online platforms, and accessing information, I don't think we make enough use of these. You know, so they don't want to come to groups and activities but it is still important for them to know what's going on. The online presence in (local area) is shocking, most places are not great but (local area) is shocking. MOMO is an online platform for young people, I started the conversation with (local area) about 3 years ago and they are only now agreeing funding for it. Sometimes it's not just the physical relationships and it's not accepting that the world is changing, apps have been around now for what 10 years? (Local) council have no apps aimed at young people and in terms of costs and investment they should'* (Voluntary sector worker)

Social media and online platforms are a development in communication which professionals have yet to wholeheartedly move forward with arguably to the detriment of relationship based practice. The significant issue to highlight is the potential communication barrier which exists between young people and professionals if social media and online platforms are not utilised in an appropriate way to support the professional relationship. This is not to suggest that professionals should be involved in all aspects of young people's lives, privacy and autonomy are important in developing a coherent narrative of self but as (Franklin & Sloper 2006, pg. 346) suggest, 'The perception that children and young people are difficult to engage as service-users may partly reflect the effects of social marginalisation, which calls for new means of engagement'.

This study has identified examples of how social media is beginning to be used to maintain informal support networks for young people and there is certainly the desire in wider society and on the part of the young people to utilise these avenues of communication. Local authorities appear to be a long way off utilising the capabilities of social media and online platforms. However, there is argument to suggest that professionals should adopt a "digital resilience informed approach" rather than being risk averse to using social media (Hammond forthcoming). If taking the view that

'normalised' interactions with young people promote positive outcomes, local authorities may want to invest in seeking ways to overcome these barriers.

## **7.8 Conclusion**

This chapter has explored the main issues for professionals in developing culturally competent practice with care leavers in Cornwall. The chapter has linked with the previous two findings chapters and identified areas of agreement and difference. For example, an area of striking similarity is the shared impact of rurality on both young people and professionals. Professionals recognise the difficulties for young people in terms of accessing services and support and highlight the additional challenge of meeting young people's support needs when cases are geographical spread across the county. Also evident are examples of where the professional's perspective differs from that of the young people, ie the concept of difference, the implications of which for culturally competent practice explored.

Professionals recognise the stigma associated with being a 'care leaver' and how this can impact upon accessing adequate support, but more significantly the effect on a sense of self-worth. The provision of a service such as Carefree provides a culturally competent response to the associated stigma by using youth principles to create a sense of belonging and shared identity. However the difficulties associated with providing this service to all care leavers come back to the issue of rurality and geographical accessibility. The use of social media has been highlighted as a way of overcoming the difficulties of geography and whilst there are risks associated with this type of communication it is encouraging that alternative methods are being explored.

The final chapter of the thesis brings together the main themes of the study and makes recommendations for practice and further areas of study.

## **Chapter Eight**

### **Conclusion and Recommendations**

#### **8.1 Introduction**

This study's overall aim has been the development of culturally competent practice with care leavers in rural areas. This chapter seeks to reach conclusions regarding the objectives of the study and the extent to which they have been met (or not). The objectives were as follows:

- To review current research relating to culturally competent practice with care leavers;
- To explore, via the views of care leavers in one rural authority, their understanding of 'cultural' need and their perception of how far this has been present during their contact with social workers and other professionals;
- To gain the views of social workers, personal advisors and other relevant professionals regarding their experiences of practice in Cornwall
- Produce new knowledge regarding 'good' and 'poor' practice in respect of difference and diversity amongst care leavers.

Chapter Three examined the theoretical basis of cultural competence and identified the three main components; self-reflective awareness; cultural knowledge; and cultural competent interventions. This study sought to explore the experiences of care leavers in Cornwall using this framework and establish whether the idea of cultural competence is a useful one. This Chapter draws together the key themes identified throughout this study and seeks to make recommendations for practice. It begins by exploring the notion of difference, firstly through the context of Cornwall; secondly, through the experiences of BME young people; and thirdly, through the negative experience of stigma. Relationship based practice is cited throughout this study and the chapter includes a discussion on its value as a culturally competent

intervention. The chapter finishes with a discussion on the meaning of 'care' and concludes with thoughts about the usefulness of the term cultural competence.

## **8.2 Cornwall as Different or Disadvantaged?**

The rural setting of this study intentionally formed the basis for much of the discussion with the young people regarding their experiences. Cornwall as a rural county is considered to be an area of relative poverty in comparison to its urban counterparts and with this comes a multitude of socio-economic challenges. The challenges of living in Cornwall were focussed on by many young people but of particular interest was the way in which these challenges appeared to be contextualised. Apparent was a real sense of 'difference' and to a certain extent 'disadvantage' in comparison to peers in other parts of the country, particularly urbanised areas and cities. Interestingly, the young people were not sure where this information had originated, often basing this view on what they had been told by others, seen in the media but clearly not basing this on their own experience as few had lived outside of Cornwall. This is an important finding which contributes to the negative connotations often experienced by young people leaving care.

This study found that the young people felt more disadvantaged than their counterparts due to an almost implicit acceptance of being 'worse off' in Cornwall. Throughout the interviews and focus groups, the following phrases were frequently used, 'up country' which generally refers to other parts of the UK, often associated with bigger cities; and 'down here' which refers to Cornwall. This terminology is widely accepted in Cornwall and used in everyday conversation so it is unsurprising to feature in a study involving Cornish young people. However, within the context of this study, in several interviews it was used pejoratively, often in conjunction with a statement about either the advantages of 'up country' or the disadvantages of 'down here'. The statement appeared to signify more than a location and the use of the word 'down' almost taken literally to mean lesser or inferior.

If young people internalise the view that by living in Cornwall they are in some way disadvantaged or that their life chances are lessened (which may or may not be true) aspirational thinking becomes limited by the constraints (perceived or actual) of the

environment in which they live. This has implications for culturally competent practice and professionals hold a pivotal role in supporting young people to overcome these barriers. The knowledge produced in this study should be considered a type of 'cultural knowledge' in line with that described in Chapter Three and used to inform a culturally competent response. A key recommendation of this study is that the views of the young people are acknowledged and appropriately addressed by professionals. For example, professionals need to be conscious that young people leaving care in Cornwall may opt to access local education provision rather than further afield, a decision which may (or may not) be influenced by a lack of belief in themselves. In terms of areas for further exploration, the differences in longer term outcomes between young people living in rural and urban areas would add an interesting perspective.

### **8.3 Meeting the Needs of Black and Minority Ethnic Groups**

Cornwall has lower numbers of BME ethnic groups than other parts of the UK and this poses difficulties for practitioners in responding to diverse cultural needs. Possessing cultural knowledge is an important component in meeting the needs of BME groups but Chapter Three highlights the potential risk in associating levels of cultural competence with levels of knowledge. This is particularly relevant to the context of Cornwall as indicated above due to the lower numbers of diverse cultural groups. There may be an inaccurate assumption that discriminatory actions towards BME groups do not occur as these actions are not frequently observed or encountered.

Culturally competent practice with care leavers in rural areas is not necessarily about possessing different social work skills, but how those skills are applied in the different contexts. The experience of difference is isolating and in a rural authority such as Cornwall, this sense of difference is exacerbated by the lack of community presence for BME groups. Specialist support services are sparse in Cornwall but culturally competent interventions do not rest solely on the provision of services. The views shared by Daisy (see Chapter Five) point towards a more thorough understanding of the effects of being isolated from community, family and birth language. BME care leavers experience additional intersecting disadvantages which

are compounded through rurality. A recommendation of this study is that culturally competent practice places more emphasis on the significance of context or place. Professionals must take into account the unique experience of difference which BME young people encounter in rural areas. The experience of difference was a strong theme evidenced throughout this study and the next section considers the effects of labelling.

#### **8.4 The Negativity Association with the 'Label' of Care Leaver**

Chapter Four examines the literature regarding young people leaving care and poorer longer term outcomes. Care leavers are disproportionately overrepresented in many statistical findings, such as un-employment, homelessness, offending and teenage pregnancy. Whilst the reasons for this are varied and complex, (see Chapter Four) the effects of this reporting on young people themselves are neglected. This study highlighted the significance of labelling and the way in which a negative discourse can affect a sense of self-worth. Many young people do not want to own the care leaver 'label' for fear of being discriminated against and this denial of identity has a significant effect on self-esteem and self-worth. Examples were given in this study (Chapters Six and Seven) which suggested that young people were reluctant to share their 'care leaver' status even if this meant accessing additional support. Young people all have diverse experiences prior to being placed in local authority care and it is important to note that these experiences also contribute to poor outcomes. A discourse which primarily focusses on care leavers and poor outcomes is problematic as it negates the significance of earlier childhood experiences and places the 'blame' on the care experience. Young people feel that the label 'care leaver' is often used pejoratively bringing with it a sense of stigma.

This is a particularly complex dilemma for young people and professionals to grapple with. The compensatory measures put in place for care leavers, ie additional support or a service, often require acknowledgement from the young person of their care leaver status, which in turn could exacerbate a sense of difference. A poignant quote included in Chapter Six from Adam, '*if we beat the cliché we're no longer vulnerable*' captured this notion. The quote forms part of a discussion between the young people regarding the idea of difference. Adam, the young person quoted feels strongly that



he is no different to other young people and that much of the support designed to compensate for past experiences only serves to reinforce the difference. The experience of difference is a powerful feeling for young people and professionals must not minimise it's effects.

Culturally competent practice indicates that a level of cultural knowledge is required in order that professionals undertake the task. In relation to care leavers, professionals need an understanding of the longer term outcomes for young people leaving care. However, the way in which this knowledge is applied becomes more significant than the knowledge itself. Young people can feel stigmatised by the label of care leaver and professionals need to understand how the statutory role contributes to this. Much of the support designed to compensate for pre and in care experiences can lead to increased feelings of difference and stigma. Statutory processes such as visits and meetings which are put in place to ensure that a young person's needs are met are often experienced as negative and stigmatising, achieving the opposite of their intention. This captures a key element of culturally competent practice, the ability of the professional to acknowledge what they bring to the encounter and how they use that knowledge to intervene. An intervention can be as simple as the relationship with the young person. The pivotal role of relationships has been a theme throughout this study and the next section comments upon these findings.

## **8.5 The Crucial Role of the Professional Relationship**

This study affirmed the findings of numerous other studies regarding the importance of relationships to young people in and leaving care. Although this study primarily focussed on young people leaving care, many views were also shared about experiences whilst in care. A strong theme emanating from this study was the value young people placed on their relationship with professionals and the significance of this relationship to an ongoing sense of self-worth. Young people valued the relationship due to the support they received but also due to the reciprocity of the exchange and the 'normalness' this subsequently generated. Young people felt a sense of pride when they were able to contribute something back to the worker (see Chapter Six).

Noted within the findings chapters are several examples of the contribution of the young person to the relationship. These contributions include acts such as displays of empathy towards the worker and the sharing of information which would support ongoing professional development. These voluntary and organic contributions to the relationship enable young people to feel valued in ways which would be virtually impossible to replicate in other scenarios. Young people also assigned some of their most positive experiences of workers to relationships where they either felt they contributed in some way. Where young people experienced reciprocal relationships with workers they were able to maintain a sense of 'normalness' and this promoted openness and engagement.

This significance of this study in terms of its contribution to the discourse on relationship based practice is the importance young people placed on 'normalised' interactions. This normalness was felt in many ways, such as the way in which professionals spoke and acted or by attending key celebratory events or important appointments. Chapter Five discusses the significance of cultural symbols and rites of passage. The constraints of the statutory role would make it virtually impossible for workers to attend all of the significant events for the young people they work with. However, a commitment to attending some key events or being part of celebrations would be welcomed by many young people.

Views shared during the focus groups with practitioners highlight the importance of direct work with young people and how this relates to job satisfaction. This is in line with the views of young people who place high value on the relationships with workers. Interestingly, job satisfaction is an important factor in the retention of social workers (Research in Practice 2015; Baginsky 2013). Young people talk passionately about the effects of changes in workers and research (Ruch 2010; Mcleod 2007; Bell 2002) suggests that frequent changes have a longer term negative impact on functioning. If more emphasis were placed on the value of direct work, social workers would be more satisfied with the work they do which could decrease the numbers leaving and subsequently lower the number of changes for young people.

### **8.5.1** *The Informal Nature of Support*

Interestingly throughout the focus groups and interviews with young people, there was no mention of any statutory processes including reference to the Pathway Plan. The Pathway Plan is the single most important document for care leavers, which includes an assessment of their needs and how their support will be provided. Professionals place a considerable emphasis on this document, ensuring in most cases that the young people are fully involved in its completion. Whilst a direct question was not asked about the Pathway Plan, it is interesting to note that despite the significance placed on this by professionals, the lack of importance it seemed to hold to the young people. When talking about their experiences and the support provided by professionals, the young people placed high value on the interactional components, such as the relationship, not on the statutory processes such as the Pathway Plan. This affirms findings of several other studies of social work becoming increasingly bureaucratised and focussed on competences and techniques (Beresford and Evans 1999; Clarke and Newman 1997).

A recommendation of this study is that the relationship professionals have with young people is acknowledged as being the fundamental tool practitioners have to affect positive change and more done by local authorities to allow this to happen. Throughout this study, young people repeatedly affirmed the value of the relationship they had with their workers, citing their most positive experiences as those with whom they had worked the longest. One of the key reasons for this positive response was the normalised exchange they had experienced, over time with those workers. Young people talked about the 'ups and downs', how workers had 'stuck by them' and 'not given up' all of which are normalised experiences which young people leaving care may struggle to encounter with other relationships. The crucial role this modelling provides cannot be replicated in other ways, it can only happen through longevity of worker.

### **8.5.2** *Continuity of Relationship and Transitions*

Whilst the above section cites the importance of reciprocity in relationships, a further finding of the study affirms the available research on changes in workers. With the value placed on the relationship, it is unsurprising that the young people cited the frequent changes in workers as a substantial difficulty in working with professionals.

Therefore a further recommendation, in line with the above section, concerns itself with the way in which services are designed and the manner and frequency in which changes of workers occur. The findings of this study echo those of countless others (see Chapters Four, Five and Six) which highlight the importance of relationship based practice, particularly for children in care and care leavers. Despite the consistent messages regarding the positive effects of meaningful relationships, achieving this ideal is complicated.

This is a particularly challenging area for local authorities as supporting young people to independence requires specialist intervention which is often not found in generic social work teams. Frequent changes of workers impact on the ability of young people to build relationships. Young people must have the opportunity to develop positive, reciprocal relationships in order to compensate for earlier experiences. The more compensatory experiences young people are able to encounter, the more likely they are to experience positive longer term outcomes. However, changes of workers are inevitable therefore what becomes significant is the way in which those changes are managed. When changes are required, more emphasis should be given to the process of transition itself. Transitions which are carefully planned and timely will help young people to conceptualise change positively and be supported to understand the process. The Bridges or Focal models of transition (see Chapter Four) place significance on being psychologically ready for change and this approach may help professionals to understand the significance of carefully planned changes wherever possible.

## **8.6 The Importance of a Shared Meaning of Care**

The second of the findings chapters focusses on the meaning of care which purposefully explores young people's interpretations. This exploration recognises that care is not a static or universally agreed term. 'Care' is a value laden concept due to the emotional connotations often ascribed to this physical act. This study found significant variation in the young people's interpretation of 'care' and what this should entail. A poignant example of this related to the notion of professionals being 'paid to care' which for several young people presented an uneasy tension. Views were shared which suggested the struggle some young people had in accepting the

genuineness of professionals to have their best interests in mind whilst at the same time being 'paid' to care for them. In these instances the young person's meaning of care was different to the professionals assigned to look after or support them. For these young people there was no shared meaning of care which resulted in feelings of resentment and a distrust of professional relationship.

A further example of a lack of shared meaning arose regarding preparation for the transition to independence. Views were shared by the young people regarding the role of professionals in supporting them to develop independent living skills. There was variation of experiences between the young people with some feeling resentful that they had not had more and some feeling confident in the support which they had received. Professionals follow statutory processes to support care leavers through the transition to adulthood with pathway planning and independence skills training being present to varying degrees in all work with care leavers. Whilst professionals are clear on the type of support they are able to provide, this study has found that young people often struggle to make sense of the support on offer. The struggle relates to the meaning of the *care* experience itself, rather than the provision of services.

The views shared by young people in Chapter Five demonstrate the diversity of their individual *care* experience, some more positive than others. This is an important issue to highlight as their expectations (and whether met or not) will affect their overall experience. This is not to suggest that all of the young people's expectations should be met. The point to clarify is that young people should have a clear understanding of what they can and cannot expect from a professional relationship. If there is not a shared understanding there is likely to be a dissonance on the part of the young person about their care experience and this could foster feelings of resentment. The importance of a coherent narrative for young people leaving care cannot be overstated (see Chapter Four and Six). Young people must be able to make sense of their care experience and the relationships within that.

This is a particularly complex area for local authorities to achieve balance within. Young people's needs are diverse, as are the skills of the professionals who work with them. Despite minimum requirements for service provision and guidelines for

best practice, there will be variation in how this is applied to each specific situation and how this is interpreted by each young person. The same service or foster placement may suit the needs of one young person but not the next as their needs and expectations will almost certainly be different. A recommendation from this study is that more attention is paid to an individual young person's needs in the context of their expectations regarding service provision. This does not suggest that service provision be altered to suit individual requests (although this must not be ruled out) but more as a way of supporting young people to have a clearer understanding of what the different elements of 'care' might be. If young people are able to have a positive interpretation of the professional relationship they are more likely to be able to develop a coherent narrative of their position within that relationship.

## **8.7 Concluding Comments**

Culturally competent practice entails an understanding of the intersecting disadvantage care leavers experience through living in a rural context. Evidenced throughout this study are areas of common understanding of the specific difficulties experienced by care leavers in Cornwall. The challenges of rurality have been highlighted as well as the stigma often associated with the 'label' of care leaver. Professional practice strives to provide compensatory support, but the mere presence of this support often exacerbates the experience of difference.

Many of the young people talked about the importance of feeling 'normal' and having a shared or positive identity. Whilst some examples of professionals enabling young people to feel 'normal' were highlighted (see Chapter Six) this was something more difficult to achieve for statutory practitioners due to the nature of their role. Young people and professionals talked at length about the effects of countless changes of workers and abrupt or unplanned transitions. If viewing the relationship as a culturally competent response to the needs of care leavers, transitions must be carefully managed to promote positive psychological functioning.

Interestingly, young people felt that workers from Carefree and the Children in Care Council appeared more able to provide a more 'normalised' response due to the voluntary nature of their work. Carefree (see Chapters Five and Seven) works from a

strengths based, youth work foundation to engage care leavers in positive activities. These positive activities are designed to develop sustainable social networks between young people and encourage self-efficacy through group work. Carefree entails a culturally competent response to the needs of care leavers by possessing the required type of knowledge to meet the specific needs of the young people. Culturally competent interventions can be as simple as the helping relationship (Cross 1989) and organisations such as Carefree are able to evidence how this works in practice.

During the course of this study the young people shared many examples of interactions with professionals which were responsive to their individual needs. Professionals also shared their views regarding the ways in which they supported young people and the difficulties which impacted upon their ability to do this. Therefore the pertinent question would be: 'Is this culturally competent practice or good practice?' Culturally competent practice relates to the self-aware practitioner delivering culturally competent interventions and it is the latter which appears to generate the most discussion. So is culturally competent practice a useful concept when thinking about the specific needs of care leavers in Cornwall? The answer is yes but unsurprisingly as this study has found, its application is complex.

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