How do care experienced adults who were also excluded from school make sense of belonging?

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Abstract

The voices of adults who have been in care as a child and were also excluded from school are almost absent in the academic literature about care, education and exclusion. More than that, children who are excluded from their home, in whatever way that has come about, and are also excluded from school face a double challenge in relation to making sense of the fundamental need to belong, that is, to feel safe, to feel accepted, to be connected and to have access to relational wealth. This research seeks to fill that gap in the literature and carve out further opportunities for research on the intersection of school exclusion and being in care as a child, from the lens of the adult that the child became. The research explores this group of adults' accounts of their childhood experiences of exclusion, of what supported and hindered growth from these experiences, and of their sense of belonging. It also considers what it means to be asking these research questions while having shared lived experiences with the participants, and intends to support those working with children to use and engage with the knowledge of those who have lived through these experiences.

The methodological approach takes the view that knowledge acquired through lived experiences should be considered as more than simply 'data' and chooses Interpretative Phenomenological Analysis (IPA) to build an understanding of what it is like to be an adult with both care and school exclusion experiences. IPA provides a clear framework for gathering knowledge from participants regarding their lived experiences and sense of belonging, and for a narrative, idiographic interpretation of participants' sense-making of significant experiences, and of convergence and divergence in participants' accounts. The ten participants self-identified as care-experienced and also as having been permanently excluded from an education setting. They were invited to take part in this research through contact made with two organisations, one working with adults who are care experienced, and the other working with care-experienced adults within and on the edge of the criminal justice system, alongside a request made via the author's Twitter account. Ten participants submitted a biographical writing task and took part in individual semi-structured interviews.

The methodological rigour is demonstrated by close listening and attention to participants' unfolding individual narratives (Personal Experiential Themes), a thorough analysis and interpretation with idiographic depth, and through attending to convergence and divergence across the different Personal Experiential Themes in order to build a coherent experiential account of the knowledge gathered across the group, as Group Experiential Themes.

Through the analysis of the knowledge shared by the participants, nine themes were identified: Movement, Trauma, Power, Stigma, Survival & Resilience, Relationships, Rejection of Stigma, Searching for Belonging, and Finding Belonging. The research findings call attention to the interrelationship between Movement, Trauma, Power and Stigma at the intersection of the experience of care and the experience of school exclusion. Then Survival & Resilience, Relationships and the Rejection of Stigma form the basis by which overcoming disadvantage is explored. Finally, Searching for Belonging and Finding Belonging demonstrate the strategies the participants employed in order to find belonging, regardless of how successful or not those strategies were.

Conclusions suggest that understanding our need to belong, and how belonging is cultivated, needs centralising into practice in education settings and in settings where children in care live. Challenging professional and societal stigmatisation of the experiences of being in care and of being excluded from school also needs active attention in order to reduce the self-stigma that can be carried into adulthood. Finally, strategies employed to find belonging often result in more abuses of power, further stigmatisation and often, system trauma. A deeper understanding of the lengths undertaken by those searching for belonging having experienced being in care and school exclusion could result in more compassionate responses to distress and a desire for settings, services and systems to work in ways that understand the impact of movement and then centralise the need to belong into practice, policy and legislation.

Keywords: exclusion, belonging, trauma, trauma informed, stigma, care experienced, insider research, IPA, school exclusion, children in care.

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I dedicate this thesis to you, the reader, for engaging deeply with this work from wherever it is you stand, with your own experiences, your own hopes and dreams for the future and your own unique capacity to leave the world in a better place than you found it.

Table of Contents

List of Abbreviations

DfE: Department for Education

GETs: Group Experiential Themes

IPA: Interpretative Phenomenological Analysis

LA: Local Authority

NEET: Not in Education, Employment or Training

NSPCC: National Society for the Prevention of Cruelty to Children

PETS: Personal Experiential Themes

SEND: Special Educational Need and Disabilities

TACT: The Adolescent and Children's Trust

Glossary

Care Experienced

The legal definition in Scotland of the term 'care-experienced' refers to anyone at any stage in their life who has been or is currently in care or from a looked-after background, no matter how short, including adopted children who were previously looked-after. This term has also been used in England and Wales, but not as a legal term, in an acknowledgement that the impact of being in care does not end at 25 years old but rather continues across the life course.

Care leaver

The legal definition of a care leaver, and thereby eligible for on-going support, falls into four categories: an *eligible* child is someone who is 16-17 and still in care, a *relevant* child is someone who is 16-17 and used to be in care, a *former relevant* child is someone aged between 18 and up to 25 who used to be an eligible child or relevant child and finally, a *qualifying care leaver* is someone aged between 16 and up to 25 who was in care for less than 13 weeks after their 14th birthday. These young people are statutorily entitled to some ongoing help and support from the local authority after they leave care.

Child in Care

Children that are looked after by a local authority are known as children in care. The local authority takes on the responsibility for the children as if it was a parent although sometimes the arrangement is that the parental responsibility is shared between the local authority and the parents. Unless there is an adoption order, parental responsibility is always shared but to different degrees depending on whether the child is 'accommodated' under Section 20 of the Children Act 1989 (a voluntary arrangement) which would mean the parent had more parental responsibility, or a full care order under Section 31 is in place, which would mean the Local Authority had the most parental responsibility.

Complex Trauma

Repeated, ongoing, and often extreme and usually interpersonal trauma such as violence, abuse, neglect or exploitation experienced as a child, young person or adult.

Corporate Parent

The Term 'Corporate Parent' was first mentioned in the Children Act 1989 and refers to the idea that the general duty of the local authority is to safeguard and promote the welfare of any child that the local authority is looking after. More recently, the Children and Social Work Act 2017 introduced principles that local authorities must pay regard to, namely, to act in the best interests, and promote the physical and mental health and wellbeing, of those children and young people, including:

- to encourage those children and young people to express their views, wishes and feelings
- to take into account the views, wishes and feelings of those children and young people
- to help those children and young people gain access to, and make the best use of, services provided by the local authority and its relevant partners
- to promote high aspirations, and seek to secure the best outcomes, for those children and young people to be safe, and for stability in their home lives, relationships and education or work; and
- to prepare those children and young people for adulthood and independent living.

Cultural Humility

A personal lifelong commitment to self-evaluation and self-critique which understands that "I do not know what I have not lived" starting with an individual or organisation as a whole, learning about another's cultural experiences while also examining their own positionality. This should lead to a better understanding of power imbalances.

Group Experiential Themes (GETs)

The group themes that are identified within the analytical process of IPA, which indicate patterns of convergence and divergence across individual experiences.

Interpretative Phenomenological Analysis (IPA)

IPA is a qualitative research approach which aims to provide detailed examinations of personal lived experience.

Personal Experiential Themes (PETs)

The individual themes that are identified within the analytical process of IPA that are based on clusters of experiential statements made by the participants.

Post-Traumatic Growth

Post-traumatic growth is the process of recovery in individuals who have experienced trauma (see Tedeschi and Calhoun 2004). They highlight that post traumatic growth is not caused by trauma, but by the healing process that the individual [later] takes part in.

School Exclusion

The term 'school exclusion' is used in this study more narrowly than it is usually used to refer to the permanent removal of a child from an education setting. This might be a school or pupil referral unit, a secure unit, a residential children's home with education known as a Community Home with Education (which was more prevalent for children in care prior to 1990).

Trauma

There is no agreed definition but here the definitions used are that 'trauma can be defined as any experience or repeated experience where the person feels terrified, powerless and overwhelmed, to the extent that it challenges their capacity to cope. It can leave an imprint on the person's nervous system, emotions, body, behaviours, learning and relationships' (de Thierry 2021.p15), alongside a definition that more encapsulates the intersectionality with social conditions, in stating that trauma is 'an experience or series of experiences and/ or impacts from social conditions, that break or betray our inherent need for safety, belonging and dignity' (Haines, 2019, p. 74).

Trauma-informed

A reconceptualisation of traditional approaches to health and human service delivery whereby all aspects of services are organised around recognition of the prevalence of trauma. Services which are trauma-informed are aware of and sensitive to the dynamics of trauma and seek to recognise trauma, to aim to not further traumatise, to mitigate the effects of trauma and to shift the imbalance of power.

List of Figures

List of Tables

Prologue

I didn't belong

I lived with my mum and brother, I didn't belong.

Mum’s boyfriends hurt me, I didn’t belong.

Mum was angry, we were scared and locked in our room, I didn’t belong.

I wasn't like the other kids at school, I didn't belong.

Two schools excluded me, I didn’t belong.

My third school was a small ‘behavioural school’, I think I belong.

I did so well they moved me back with the other kids, I didn’t belong.

I moved to my dads, my sister hated me, I didn't belong.

I was 12 in care, I just wanted to run, I didn't belong.

School kicked me out again, I didn’t belong.

I went to secure, they violently retrained me and locked me in a cell, I didn't belong.

I moved care home, angry, drunk and high, I didn't belong.

The teachers in secure told me I was worthless, I didn’t belong.

In prison I felt this connection with an older prisoner, I didn’t have to explain myself,
maybe this is where I belong.

I met other older girls from prison to take drugs, the pain vanished, I could no longer
feel, I think this is where I belong.

I am 16 my world is getting darker and darker, I don’t want to belong.

I can’t stop the pain, I want to feel numb, I will never belong.

I found recovery, people who didn't judge or shame me, do I belong?

I tried so hard at college when I was 21, I achieved two GCSE’s, they didn't accept
me into the next year, I still didn't belong.

I got a job, I took the opportunities and worked so hard, do I belong?

I achieved medals in sports, if only they knew about me I don't deserve them, how do I belong.

I have my own family, close friends and my heart feels full of love, is this how you belong?

A loving hug, being accepted for me, connection and the warmth of people who love and care, now I know I belong.

By a participant

Chapter One - Introduction

This research study set out to provide a greater understanding of the intersection between school exclusion and being a child in care and more specifically, how belonging was made sense of in this context, as the prologue's poem eloquently articulates. This chapter explains the problem being addressed before describing the nature of the study. I introduce the language used in policy and practice around being in care and school exclusion. I then go on to clarify the contribution of the research to the field, make explicit the limitations of the study, until finally, I outline the structure of the thesis.

1.1 Problem Statement

It is well documented that those leaving care have poorer outcomes in health and education than their peers (LACGro Project, 2021) and many researchers of children in care and care leavers introduce their work by documenting these differential outcomes; potentially a leftover from the early work of those working hard to help the reader understand the importance of prioritising children who were in care. My resistance to begin this chapter in the same way lies not simply in a desire to make space for other experiences, but also because the methodological design of this research creates the space to elicit the nuance behind the available outcomes regarding those with care experience. The outcomes of those who have been in care as children can be better understood as being on a life course spectrum dependent on age, experiences, relational opportunities, access to education and personality. Administrative data on young adults collect information at 17, 18, 19, 20 and 21 years old (Department of Education, 2022) on the number of care leavers 'in touch' with their local authority, whether they are in education, employment or training and the reasons if not, and whether the accommodation they are living in (while looked after between 16 and 18 years old) is regarded as suitable by professionals. In addition, data collected about adults who are over 21 years old and therefore outside of the data asked by the Department of Education, tend to be asked from adults who are accessing a particular service, for example, mental health services, criminal justice settings, and housing departments. Administrative data, alongside data from adult supportive services, collect the kind of outcomes that present a bleak picture of life for an adult who has experience of the care system, not just lacking in nuance but also in complexity of human development across the life course.

It is not my intention to diminish the seriousness of the very particular vulnerabilities of those who have been in care, but rather to suggest that the outcomes of being in care, as detailed in administrative datasets, should not be presented as a description that perpetuates shame and stigmatisation. For example, data that show that within the prison population 31% of women and 24% of men had spent time in the care system as a child (Ministry of Justice, 2018) also indicate that 69% of women and 76% of men in prison had *not* spent time in the care system as a child. A more recent study showed that more than half (52%) of looked-after children born in the academic year ending 1994 who attended school in England had a criminal conviction by the age of 24 years compared with 13% of children who had not been in care (Office for National Statistics, 2022). This also means that 48% of looked after children did not have a criminal record by the age of 24 years. However, that is notwithstanding the concern that should be at the forefront of policymakers' minds regarding such an eye-wateringly high number of looked after children gaining a criminal conviction. That said, there is huge relevance and importance for policy in understanding what has been termed an 'invisible minority' (Care Leavers Association, 2015) but statistics that simply focus on negative outcomes can become the 'single story of coming out of care' while there are many very different stories to be told about the care experience.

However, I will outline the data available regarding care leavers within this chapter to make explicit the very particular challenges that can face those with experience of care. I invite the reader to understand that there are many other outcomes, arrived at during many other points of a person's life that are never asked about. For example, having a successful relationship or achieving in education at another point during the life course is an important life outcome. I would also suggest that it is possible that knowledge such as this on adults across the life course is not asked for because it is simply not desired. I suggest this as there are statutory obligations to understanding children that simply do not exist for adults and the knowledge from adults reflecting back on difficult childhood experiences has not previously been deemed as useful knowledge that has the potential to influence policy and practice. This is changing, albeit slowly. Finally, the majority of the literature will be UK based as my focus for this research and the analysis is primarily on children in England and the UK prior to Devolution in 1997. The contexts of providing care in different European countries or the US and Canada are too different to warrant further mention other than during selected comparisons in Policy explored in Chapter Three.

1.1.1 Language

The importance of language in how we make sense of the world, our experiences and the experiences of others can be thought of as a continuing and reflective aspect of those living with the experience of being in care or having been in care. The reader will note that the term ‘looked after child’ is a legal term under the Children Act 1989 and applies to children under 18 years of age who are subject to a placement or care order, or are supplied with accommodation by the local authority (LA) children’s services for more than 24 hours. Further, the term ‘care leaver’ is also a legal term which denotes a person over the age of 16 who has met certain criteria so as to warrant support up to the age of 25 years in certain circumstances (Appendix 1). However, the Care Leavers Association acknowledges that the experience of being in care extends across the life course and expands the definition to refer to any adult who spent time in care as a child. Some people prefer the term ‘care experienced’, which is the term used in Scotland in The Promise (2020) and was chosen in collaboration and consultation with those with care experience. This interchangeable use of terminology reminds the reader that legal or institutional language can be othering and inclusive both at once, particularly when not chosen by the person who has experienced marginalisation from defining their experiences for themselves. This reflection will be a continuous one throughout this research and understands the limitations of legal definitions and terminology within self-identification and self-expression.

The term ‘education’ in this study is used to mean compulsory education. However, what has counted as compulsory education has changed over the last few decades. For example, the age that one could leave compulsory education was raised from 14 years old to 16 years old in 1972. In England the age was raised again to 17 years old in 2013 and to 18 years old in 2015. In Scotland, Wales and Northern Ireland, the compulsory leaving age is 16 years old.

The latest guidance on school exclusions differentiates between a suspension, which was previously known as a fixed-term exclusion and can last for a maximum of 45 days in an academic year, and an exclusion, which refers to permanent removal from the education setting (DfE, 2022). It is important to note that there are other educational facilities other than schools. Some residential units also offer educational facilities as do other settings such as secure units, medical provisions or ‘young offenders'’ provisions. Exclusions may well have taken place in some of these other settings as well as in what we understand to be traditional (mainstream) schools.

The complexity of the cultural, legislative and historical shifts over time which frame the experiences of school exclusion, being a child in care and being in education will have impacted each individual differently. The way humans make sense of our experiences will be narrated in different ways; through the legislative language used, through the language used by practitioners and in how an individual will have internalised the language used during their own cultural and historical period.

1.1.2 Language and Labelling

The language used in professional services and settings can be verbal or non-verbal, spoken and/or written. I argued elsewhere that it can be used as a tool of power and can harm or heal (Cherry, 2023) and language that can harm is prevalent for children in care within education settings (Jones et al, 2020). An example can be found in the term 'looked after child' that shows up in policy and practice documents as the acronym LAC, which has been highlighted by many children and young people asking the question, 'Does this mean I am lacking in something'? (NSPCC, 2023).

The Adolescent and Children's Trust (TACT), co-created and developed with care experienced children and young people from across England, a document called Language That Cares (TACT, 2019). An array of terminology disliked by the authors and contributors such as not in employment, education of training (NEET), 'LAC', 'placement' and 'respite' were highlighted, with alternatives given as suggestions. Expanding upon this work, the Children's Safeguarding Board in Staffordshire co-produced a Dictionary (The Voice Project, 2021), while consciousness around the power of language and the role it has in shaping identity, in stigmatisation and in cultivating belonging is now very much a consideration in how many services and local authorities think about in their work with children and young people who are in their care.

There is a body of research on language and how it can stigmatise those with poor mental health through labelling and terminology that serves to 'other' the person using the service from the person delivering the service (Ashford et al, 2019). There is little research specifically on the language used within Children's Services, and about children in care and their families, and how terminology perpetuates stigma.

1.1.3 Children in Care

There are currently 83,840 children in care in England and this number continues to rise (DfE, 2023). Children in care who are described as being of White ethnicity are 73%, 10% mixed or multiple ethnic groups, with 7% described of as Black African, Caribbean or Black British and Asian or Asian British at 5%. ‘Other’ is at 4% with those where ethnicity was not recorded being 1% (DfE, 2022). These data are not broken down by age. Currently, males account for 57% of all looked after children and females account for 43% with no category included that understands or considers gender identification. Not only are the placement and service needs of LGBTQIA+ youth not always adequately addressed (Lopez Lopez et al, 2021) but that data are not collected. The category of needs recorded by the DfE state that 66% came into care due to abuse or neglect, 2% due to the child's disability, 3% due to parental illness or disability, 7% due to the family being in acute stress, 13% due to family dysfunction, 1% due to socially unacceptable behaviour and 7% due to absent parenting (DfE, 2022).

Children in care and those leaving care have long been identified as vulnerable, experiencing poorer educational and longer-term outcomes than children and young people who are not looked after. One study found that 25% of the homeless population were estimated to have been in care and 39% of care leavers aged 19-21 years were not in education, employment or training (Barnardo’s, 2021). The chances of children in care enjoying the same social and economic advantages in adulthood as other children are deeply unequal (The LACGro Project, 2021). Another study found that more than half (52%) of children in care born in the academic year ending 1994 who attended school in England had a criminal conviction by the age of 24 years, compared with 13% of children who had not been in care (Office for National Statistics, 2022).

The stated outcomes provide a bleak backdrop against which those in care, those leaving care and those who were children in care make sense of their lives. There has been some debate regarding whether the reasons for coming into care cause poor outcomes (Sebba et al, 2015) or whether care itself does. Neuroscientists argue that we experience the world dynamically and that we develop over time with the relational experiences available to us (Eagleman, 2019), thus it could be argued that it is irrelevant to think about seeking to isolate a cause. The reasons for coming into care, care itself, the professional practices that envelop ‘care’ alongside how education and the community respond to those experiences, and then how all those aspects interact with the individual and with their personality, highlight complexity. Therefore, the nuance that is absent in the collected administrative data, which currently only provide a one-dimensional view, is an important aspect of understanding the experience of care.

1.1.4 School Exclusion

School exclusion (legal permanent removal), ‘off-rolling’ (illegal permanent removal) and the use of ‘isolation booths’ (legal temporary removal) persist as hot issues that can be divisive in tone within education (Condliffe, 2023, Martin-Denham, 2020). The education of children in care is now recognised as an area of concern, but it has not always been like that. Data collected that look at the relationship between education and children in care are a relatively recent addition to the legislation and are explored fully in Chapter Three. Then in Chapter Four the role of researchers is discussed, such as Sonia Jackson who relentlessly pursued an interest in the education of children in care that revealed the poor educational outcomes for this group of children. Jackson’s seminal text “The Education of Children in Care” (1987) highlighted the lack of statistical data on the educational outcomes of children in care alongside anecdotal experiences of poorer educational attainment and significant overrepresentation in all types of exclusions. There are many complex and intersecting factors that make understanding educational outcomes challenging that I am unable to explore in depth in this research, including length of time in placement, numbers of placements, additional learning needs, ethnicity, gender, location of placement(s), reason for entry into care, to name a few.

Currently, there is statutory guidance from different Departments that is written to help agencies within local authorities abide by the law in order to safeguard and promote the welfare and educational achievement of those who are currently termed looked after children and young people, urging that exclusion of children in care should be avoided. However, children in care are still five times more likely to receive a fixed-period exclusion than their non-looked after peers (DfE, 2020); international comparisons show that children in care remain significantly overrepresented in suspensions (what were previously known as fixed term exclusions), (Demie, 2021). Alongside this, 2,000 adopters of those now known as ‘previously looked after children’, when asked about exclusion, indicated that these children were 20 times more likely to be excluded than their peers (Adoption UK, 2018). It has been argued that data collected by the DfE regarding the exclusion of children in care are likely to be inaccurate with hidden exclusions such as ‘managed moves,’ the use of isolation booths, and unrecorded exclusion from the mainstream classroom or mainstream activities being used instead (Power & Taylor, 2020). In addition, the impact of Covid 19 has heightened risks for exclusion as raised by the Excluded Lives Project (Daniels et al, 2020) an expansive project exploring the causes and consequences of school exclusion and the experiences of young people affected by school exclusion.

Poor educational experiences potentially have life course implications, with care experienced adults being more likely to experience homelessness, high unemployment and be involved with the criminal justice system (O'Higgins et al., 2017). That education levels out the differences between care experienced graduates and non-care experienced graduates, showing up as 70.1% of care-experienced graduates working in a professional role or studying on a professional or postgraduate course compared with 72.3% of other graduates six months after graduation (Harrison, 2022), indicates how important education is for altering trajectories for those adults who were in care as children.

Where education has not been accessed, which might be through exclusion, constant home moves or unmet additional learning needs, children in care become more vulnerable to social exclusion and unemployment (Parker, 2017). Understanding the particular needs of many children in care helps identify why accessing education at strictly decided chronological milestones can be challenging for those children. The latest figures show that 30.2% of children who had been continuously in care for 12 months or more have a special education need (SEN) compared to 12.4% of all other pupils, and social, emotional and mental health (SEMH) is the most common SEN at 51.2%, alongside children in care being 2.5 times more likely to access free school meals than other pupils (DfE, 2022).

1.1.5 Trauma

As noted, 66% of children enter care due to abuse, which combines physical, sexual and emotional abuse into one category, or neglect, which is defined in Working Together to Safeguard Children as "the persistent failure to meet a child's basic physical, emotional and/or psychological needs, likely to result in the serious impairment of the child's health or development" (DfE, p.108, 2022). Developmental trauma refers to early childhood experiences of ongoing and repetitive exposure to abuse and neglect by those who were meant to protect them during the developmental years, especially in the early years of life. This exposure can cause developmental harm (Perry, 2006, Van Der Kolk, 2015, Treisman, 2017, Golding, 2020). Adopting a trauma lens, which means we can be sensitive to the trauma experienced by ourselves and others, offers an opportunity to contextualise difficulty in forming relationships, difficulty in managing emotions and finding emotions overwhelming, detecting safety and finding chronological expectations unrealistic. This can provide another way of looking at social, emotional and mental health needs in educational contexts. In addition, it has been argued that neurodivergent conditions and trauma tend to present similarly (Cox et al, 2019), and that education settings that are more punitive in their approach to behaviour, can be experienced as traumatic (Morgan & Costello, 2023). That is, they can be overwhelming and feel unsafe without the relational support required.

A note of caution is worth highlighting: such is the complexity of the dynamic human way that we experience the world, in relational experiences, that the tendency to determinism is unhelpful. Adlerian psychology argues, for example, that early experiences impact us through the meaning we make of those experiences (Kishimi & Koga, 2019). Neuroscientists have offered an understanding of plasticity, the brain's capacity to reorganise the neuronal pathways that form our internal architecture in response to experiences and relationships (Eagleman, 2021). The concept of neuroplasticity provides some answers not just in relation to recovery from trauma, but also in relation to understanding why some people manage to live life without the poor outcomes associated with trauma in childhood (Voss et al, 2017).

1.1.6 Belonging

Attachment relationships and our motivational human needs are pivotal in the literature on belonging. Most of childhood is usually spent first within the home and available extended community and then within educational settings and the larger community. What happens during developing years impacts humans and can provide the anchor upon which children develop and grow (Shonkoff and Garner, 2012) and a sense of belonging is cultivated (Corrales et al, 2016). When home and school become fractured, what creates a sense of belonging? If we take the view that belonging is a fundamental human need, as Baumeister & Leary (1995) do, then this need must be met somewhere, and if it is not being met at home or within schooling then does its absence, as these authors go on to argue, have consequences and what are these consequences likely to be?

Bowlby's work on attachment (1940, 1944), is now very much integrated into practice. Attachment Theory (1969) provided an understanding of the importance of early childhood relationships. Mary Ainsworth went on to provide a tool for measuring and assessing the quality of those early relationships which was called Strange Situations (Ainsworth et al, 1970). This technique developed the categorisations that we call 'attachment styles' which Ainsworth named as secure attachment, insecure avoidant and insecure ambivalent. It was not until much later that a fourth attachment style became an addition, named as disorganised attachment (Main & Solomon, 1986). Attachment Theory argues that in order to thrive, a child needs to be provided with a sense of safety and a secure base. Ainsworth argued that a secure attachment is achieved through the infant feeling safe and connected to their primary caregiver which was later developed to be described as the infant feeling safe, seen, soothed and secure (Siegel & Bryson, 2020). Insecure avoidant and insecure ambivalent styles, it is argued, are likely to have occurred due to the child not having an attuned caregiver, with their needs rejected or not met with consistency. The addition of disorganised attachment mentioned above refers to a categorisation that leaves a child who has been exposed to family violence, abuse or caregivers who are frightening engaging in behaviours that are conflicted and disorientated in relation to the child's caregivers (Reisz et al, 2018).

There are numerous critiques of Attachment Theory, including the perceived rigidity of the styles of attachment and the potential for pathologisation and categorisation of people's experiences, as well as an argument that views it as a somewhat Western model of a family (Smith et al, 2017). The Eurocentric nature of the Strange Situations method does not account for different ways of being a family and different caregiving systems, and Attachment Theory is potentially too inflexible (Rottger-Rossler, 2014). Focusing on attachment styles, it has been argued, can prevent an understanding that attachment styles are more fluid and can change over time and this possibility can be lost (Webber, 2017). In response, the Dynamic Maturation Model is more flexible and thinks about attachment as self-protective strategies that are connected to how the child interprets the environment and circumstances in which they find themselves (Crittenden, 2006). This view offers a more strength-based approach in thinking around early childhood relationships and the capacity for building relationships and recovering from those experiences (Wilkerson, 2010).

Belonging and attachment are interrelated, although it is difficult to establish whether attachments develop with belonging or having a sense of belonging creates attachments. It might well be possible to argue that the presence of secure attachments can cultivate a sense of belonging (Chimange & Bond, 2020). While the work of Bowlby and Ainsworth provides a popular and straightforward way to categorise behaviours, contemporary knowledge suggests a level of complexity that simply was not available at the time and which I turn reflects an increasingly complex world. The insertion of neuroscientific knowledge on child development, the extensive literature on the impact and legacy of trauma coupled with a deeper understanding of the resources and conditions that help humans thrive, highlight that the relationship between attachment and belonging becomes a more complex one.

Figure 1 Maslow's Hierarchy of Needs (Image purchased from iStock)

Another theoretical giant is Maslow, and his conceptualisation of the hierarchy of needs (Maslow, 1943) shown in Figure 1. The model hierarchically locates the importance of belonging and has maintained its position of importance consistently across numerous disciplines including psychology, education and social work disciplines as a visual illustration of our human physical, psychological and emotional needs. This theory of human motivation appears to suggest that meeting these needs is a process and that without our physical needs being met, our ability to develop a sense of belonging is hampered.

The figure suggests a progressive step by step approach to reaching 'actualisation' which starts with our physiological needs, then moves on to safety and security, then love and belonging, self-esteem and finally self-actualisation. The section on love and belonging was initially a section on love, but Maslow later expanded this area to include belonging to encompass friendship and giving and receiving affection (Rojas et al, 2023). The iconic pyramid strongly implies that the starting point is the lowest layer of needs and each ‘layer of needs’ must be met in order to move to the next layer, which was described by Rojas et al (2023) as sequential satisfaction. Furthermore, Rojas et al (2023) go on to argue that the sequential structure of the model has led to a focus on basic human needs at the expense of our need for love and belonging and esteem.

There has been much critique of Maslow’s Hierarchy of Needs (see Figure 1), not least that it was a study limited to highly educated white males (Mittelman, 1991) undertaken from an ethnocentric position (Bouzenita & Boulanouar, 2016) and therefore has a focus on individualistic societies, on self-actualisation and self-fulfilment, as opposed to community and belonging within this structure (Hofstede, 1984). Further criticism of the model lies in spirituality as a missing component and the commodification and overuse of the model divorced from its meaning and sense of interdependence (Bouzenita & Boulanouar, 2016).

Despite all the critiques considered, these two theoretical routes into understanding belonging, Attachment Theory and Maslow’s Hierarchy of Needs, nevertheless both point to theoretical links to the human need to belong. Research has supported this link when considering the hypothesis that a secure attachment in childhood is a positive predictor of having a sense of belonging in adulthood (Hagerty et al, 2002). Belonging is intrinsically linked to relationships, and a shift in emphasis from thinking in a linear way about the importance of meeting our basic needs before anything else may well need to involve a shift in focus onto belonging as this has a considerable impact on people’s sense of wellbeing (Rojas et al, 2023).

It has been argued that a sense of belonging is dynamic, cultural and relational with an emotional complexity that can shift and change (Riley, 2022). Belonging is multi-dimensional and is distinguished by thinking about belonging as something built up over time through everyday practices, as well as having membership or citizenship in a place (Antonsich, 2010). Within psychology, belonging has been defined as a yearning for connection rather than as an emotion and a need for positive regard (Rogers, 1951). Furthering that idea, developing a sense of belonging has been defined by the extent to which a person feels accepted, respected and supported (Goodenow & Grady, 1993). Maslow’s Hierarchy of Needs argued that physiological and safety needs have to be satisfied before love and a sense of belonging can emerge (Maslow, 1968, 1971), while Bronfenbrenner’ ecosystems theory invites us to think about layers of belonging presented in concentric rings with the child in the centre (Bronfenbrenner, 1979). Furthermore, some (e.g. Sprince, 2015) argue that having a sense of belonging brings a coherent sense of self, with emotional intelligence, the capacity for self-reflection and reflection of others, alongside a capacity to collaborate.

Belonging may be interpreted in different ways in the literature, and as Wright (2015) argues, its importance comes not necessarily from a stable meaning, but rather from the textured diversity of ways of feeling, doing, practising and living that are associated with it. The lens of belonging offers a powerful way of viewing individuals which acknowledges human beings as social creatures, and that they thus have a need to bond and form connections with others (Allen, 2021).

Beyond traditionally accepted academic literature as summarised above, writing on belonging is extensive, covering a multitude of ways of thinking about belonging and of examining this very human experience. As discussed in Chapter Four, there are several popular books simply referring to Belonging (O'Donohue 1998; Corless, 2021; hooks 2009; Fuller, 2019).

The available literature on belonging, to be fully explored in Chapters Three and Four, provides a valuable supposition that having a sense of belonging is impacted by attachment relationships and is of fundamental human importance across the life course. Human needs vary, are interrelated and contextualised, and are experienced differently depending on factors such as age, culture, gender and race.

1.2 Why This Research Matters

The literature highlights that research on making sense of belonging having experienced exclusion from school while being in care is limited. Through further understanding how belonging is made sense of in relation to care experience and school exclusion as an intersection, the potential for shifts in policy and practice is made more available. The importance therefore for good mental health and wellbeing, relationship capability and the ability to access meaningful work across the life course could be argued to be rooted in having a sense of belonging (Baumeister & Leary, 1995).

This study explores what it is like to be an adult who has experienced both being a child in care and school exclusion. To do so, it asks:

1. How have participants made meaning from their childhood experiences of being excluded from school and family environments?

2. How do participants make sense of belonging in the context of care-experience and school exclusion and the impact of that upon their adult life?

In answering these research questions, a unique opportunity is provided for those working in education and in children's services to centralise thinking about belonging as an antidote to the experiences of being in care and of being excluded from school.

1.3 Context Implications

According to recent DfE data, since 2010, the number of children in care in England has continued to rise. In November 2023 there were 83,840, a rise from 64,460 in 2010 (DfE, 2022). During the same period, the number of unaccompanied asylum seeker children has risen from 3,490 to 7,290. I am using the period of 2010 to the present date to reflect on very specific events that could be relevant to this rise. Firstly, the ideology of austerity saw harsh welfare reform, a decimation of preventative and protective services and a sharp rise in what became known as 'poverty porn' exploiting division and stigma (Cooper & Whyte, 2017, Tyler, 2020). The rise in youth knife crime during this time, peaking in 2017/2018, was argued by some as interconnected with the austerity agenda (Thapur, 2021, Younge, 2017). Virdee and McGeever, (2018) argue that Brexit brought more divisive politics and was underpinned by the slogan of 'taking back control' which invariably brought race, racism and xenophobia to the fore bringing a rise in racist hate crimes. After Brexit followed the global pandemic and various lockdowns enforced by the Government in a bid to quell infection. Barnardos found that the number of children needing foster care rose by 44% during the pandemic while at the same time the number of those looking to become foster parents fell by half (Barnardo's, 2020).

High profile child protection situations also intensify concerns in society and therefore place pressures on the system and cultivate a more risk averse climate in which social workers and all those involved in safeguarding children and young people practice. In the last 12 years alone, deaths of children in the hands of abusers, such as 4 year old Daniel Pelka (2012), 4 year old Hamzah Khan (2013), 6 year old Arthur Labinjo-Hughes (2020), 16 month old Star Hobson (2021) made the headlines and created individual serious case reviews that provided enough evidence to change the culture of child protection.

In addition, rising numbers of children needing to come into care could be accounted for by the impact of environmental harm on the Global South increasing numbers of those fleeing affected countries and also, ongoing wars; this potentially explains the rise of unaccompanied minors entering into care, as highlighted above.

Another potential explanation for the rise in numbers of children coming into care could be sought in the expansion of those living in poverty, termed the 'cost of living crisis.' A longitudinal study between 2015 and 2020 found evidence that rising child poverty rates contributed to an increase in children entering care, noting that children who are exposed to poverty are more likely to experience more adversity, which brings poor health and social outcomes across the life course (Bennett et al, 2022). Since this study was undertaken, the 'cost of living crisis' has taken hold more deeply and we are yet to see the data in relation to the impact of an expansion of poverty. Laying out the worsening context highlights a spectrum of events that will have impacted children, young people and their families in various ways. While this research focuses on adults who were in care as children, it is important for the reader to understand the socio-political impact on children in care of the state, and that the impact is changeable depending on the period of time and the focus that a particular government may or may not have on prevention and on the welfare of children.

As highlighted above, the very particular context that we find ourselves in has broad consequences for children and young people who rely on relationships, communities and settings for their protective factors.

1.4 Thesis Structure

Following this introductory chapter, Chapter Two introduces the author, with Chapter Three providing a review of the development of policy and legislation literature through a historical lens observing administrative datasets, government reports, organisational literature and media reporting. Chapter Four offers a detailed and critical view of the relevant academic literature highlighting what is available in the area of care, education and school exclusion and also belonging, while noting gaps within the research.

Chapter Five details the methodology, which provides an explanation of the research questions, and leads on to the research design, while also exploring the epistemological and ontological reasons for the decisions taken, including for choosing to place Interpretive Phenomenological Analysis (IPA) at the heart of the research design. The participant recruitment strategy is explained, and the methods used to collect and analyse the data are described, together with reflections on ethical considerations, positionality and limitations.

There are three Findings Chapters as follows. In Chapter Six, the findings from the research analytical process are introduced. The purpose of this chapter is to explore the lived experiences of those who had had the intersectional experience of being in care and being excluded from school, and how they made sense of belonging as adults reflecting back upon those experiences. This chapter explores the findings, building on participants’ Personal Experiential Themes and subsequently identifying nine Group Experiential Themes of Movement, Trauma, Power and Stigma. Chapter Seven continues the analysis of the data exploring the group themes of Survival and Resilience, Relationships and Rejection of Stigma, thus seeking to understand how the participants sought to recognise and overcome disadvantage. Chapter Eight explores Establishing a Sense of Belonging, focusing on the remaining identified group themes of Searching for Belonging and Finding Belonging.

In Chapter Nine the findings from the data will be discussed in relation to the research questions and existing research in this field. It will then detail the strengths and limitations of the research with a focus on a discussion of rigour, lived experience and use of Interpretive Phenomenological Analysis. Then in Chapter Ten, recommendations for further research, implications for practice for children in care and key messages for system change are offered, including by reflecting on the implications for those who share the experiences researched in this study and for myself as a researcher, an author and an influencer for change.

1.5 Conclusion

This chapter sought to present an introduction to children in care, school exclusion, and belonging and to reflect on the complexities and limitations of the language used in public, policy, professional and scholarly discourses to refer to these experiences. An outline of the rest of the thesis was made explicit. The next chapter will reflect on my own experiential knowledge of care, exclusion and belonging, with Chapters Three and Four then providing a literature review on these areas.

Chapter Two – Researcher's Background

2.1 Care and Belonging

This research has been inspired by three experiential aspects: my own journey through life and my ongoing relationship with finding a sense of belonging in different places and spaces at different times; my own research at undergraduate and Masters levels; and thirty years of professional practice.

Entering into the world in 1970, I experienced separation at birth from my mother in the mother and baby unit where I was born, which led to me entering my first foster placement. A few months after I was born, with adoption assumed, as it was for the children of unmarried mothers at that time, my grandmother decided and agreed that the baby, me, could be brought home. My childhood was spent with my gran and my mother as my mother lived at home with her mother, as opposed to any formal arrangement. I have never met my father and do not know his identity. My mother had a short marriage when I was 10 years old and when that broke down, we shared a flat, with my gran living across the road. However, as I started to enter adolescence, at around 12 years old I went into care for the second time and never returned to my mother again. During this time, I was also excluded from two schools, attended an onsite education facility in a residential unit and spent some time in what would currently be termed Alternative Provision.

Being looked after away from home by the state is a unique experience for each individual in much the same way that family life is unique to each family. Furthermore, each of the children in that family can often describe very different versions of growing up with their parents. 'Care' in that regard is no different. Yet being in care was an experience that has cast a long shadow. My experience of being in care was the ultimate exclusion, the most profound exclusion with my mother's words ongoing throughout my childhood, "Why can't you just fit in?" ringing in my ears for years to come. To then find myself unable to belong to a school community or a town, and then experiencing homelessness after leaving care, which is not uncommon post-care, the theme of belonging has been a persistent one across my adult life.

2.2 School Exclusion and Belonging

In reflecting upon school exclusion, what strikes me is that it is about so much more than being removed from a community; it is on a continuum with all that came before it and in relationship with all that will come after. It is about being removed from knowledge, from access to the next step in a learning journey and a removal from experiencing school belonging; belonging to the group of people who finished school, had a leaving event, a leaver's certificate and a basic foundation from formal education. It is the ultimate removal of factors that support and enable a sense of belonging, creating ruptures instead.

2.3 Education and Belonging

Reflecting across my life, I can see how much education has provided me with a sense of belonging, and I do not just mean the institutions that provide the bricks and mortar for formal learning to take place in. Having said that, a library will always make me swoon and a student canteen with subsidised food will never fail to make me feel special.

For me it has been the learning, the reading, the connections made between my experience of the world and academic accounts of meaning making. Reading lists excite me, presenting a whole new world for me to delve into. I undertook my first degree in Sociology in the early 1990s at the age of 21, just a few years later than my peers. With housing secured and the removal of legal and illegal substances from my body, I was very ready. Funded by a charity that supported young people who had been in care, I was able to take A Levels and secured a place at Goldsmiths College in London. The modules I chose, or maybe they chose me, were very aligned to the life experiences that I needed to make sense of. As I explored 'The Sociology of Racism, of Feminism, of Identity and of Psychiatry', my first real breakthrough came with a reading list recommendation of *The Drama of Being a Child* (Miller, 1987). This book investigated the search for self from a psychotherapist's perspective, providing me with an opportunity to begin to explore who I was and how I had been impacted by my own experiences. My dissertation was on the isolation experienced by coming out of care, and the impact upon a person's self-esteem.

Several years later, I completed my MA in Education between 2016-2018 at Oxford Brookes University and chose to look at care experience, school exclusion and the employment and education trajectory across the life course. In order to do my MA, being without what were once known as 'O' Levels, I had to take GCSE's in Maths and English and I also chose to do Biology, highlighting gaps in what might be termed 'general knowledge'. During my time at Oxford Brookes, I was invited to enter a Poster of my MA Research into their 'Get Published' conference and received first prize for the 'Postgraduate taught highly commended 2018 Award', which was an academic confidence boost.

Now, again, I find myself back where I appear to belong; in education, cultivating decades of professional practice, academic learning and personal lived experiences into a document of research that can tell a story of how we search for and find belonging. It is also a picture of a lifetime's work, sharing the voices of those who cannot be heard however loud they may shout, reminding researchers that it is not about 'giving voice,' rather it is the work to ensure that those who write policy, develop legislation and those who deliver and create services have no alternative but to listen to the voices that are already very much present.

2.4 Professional Experience and Belonging

It is strange that one might run out of the system of care with the speed of an athlete, going forwards, forwards, forwards and wanting to never look back, then find oneself back in that system working professionally; yet many of us do just that. Between my first degree and my MA, my career had been spent working in the fields of social work and education. The first twenty years were spent working in the fields of Leaving Care Social Work, Education and Social Inclusion with young people and their families in a variety of roles, but all very connected to care and to school exclusion. Working in and around exclusion and familial complexity brought further curiosity about the nature of belonging and of course, the question: did I belong in that profession? Especially as I felt unable to be honest about my own experiences due to feelings of unsafety, my own feelings of shame and stigma and of not having anyone that I could discuss that with.

During the last thirteen years I have been self-employed delivering training, speaking and writing on trauma, recovery and resilience, working with those doing the direct work rather than doing the direct work myself. Continuing to work in education and social work, my interest in how adults make sense of the experiences that happen in childhood has deepened (Cherry, 2021, Cherry, 2022).

2.5 Summary

I enter into this research knowing that I am deeply tangled up in the process; the question and the methods that I am using to begin to think about process and content, are not outside of me. I am in and of a process that has no beginning and no end. I arrive to the research challenging the notion of 'subject', ideas about who controls the research, and ultimately where the ownership of the research lies. I am within it, of it, underneath it and looking in on it. It is, because I am, because we are.

Chapter Three – Review of the Policy Context

3.1 The Process of Reviewing Policy and Legislation

As outlined, the main focuses for this thesis are adults who were once both children in care and excluded from school and their experiences of making sense of belonging. In order to understand these experiences, however, the legal and policy landscape needs investigating and describing. The core concept is belonging, approached by seeking to understand how the participants made sense of these experiences and of the legal and policy processes in relation to it.

These adults' care experiences intersect with those of their school exclusion. Prior to 1986, permanent school exclusion was referred to as 'expulsion' and fixed-term exclusion as 'suspension'. It is permanent school exclusion that is of interest in this study, however, as the participants could have been in school prior to 1986 when the language was altered within The Education Act, noting shifts in language is important. For the review of policy and legislation and grey literature, the aim was to capture the changing landscape of relevant legislation and administrative data within children's social care and within education. This approach required a continuous search that would also serve to identify themes within the research literature, in the next chapter. The historical context of children in care and education requires some interrogation, and relevant legislation and policy, alongside the administrative data, provides this opportunity. It is a somewhat overwhelming task due to the vast amount of law and policy to navigate and this can be a lot to unthread, as the relationships that existed between child welfare and education were not well developed for lengthy periods. However, this exploration situates children, children in care and their education within the social and political contexts across the decades. This undertaking also ensures that there is an understanding that the recognition of children as being vulnerable and in need of rights has been centuries in the making. The right to education for all children, their right to protection and the way that poor children and families are interweaved into child protection supports how the reader might understand how those with experiences of having been in care have an intergenerational history that can sometimes disappear from the contemporary challenges that are faced in this sphere.

After explaining the process of reviewing the literature in relation to policy and legislation, the chapter goes on to explore this review in three sections. First, recent policy that mentioned or addressed belonging will be explored to consider if it is present in policy texts, and finding that it is not. Second, there is a narrative historical account of legislative changes over 200 years, because legislation provides the structure of expectations of society towards children and towards those children who are or have been in care. This historical view follows the journey of children's welfare through layers of policy and legislation. Then education policy is explored and finally, there is an exploration of reports published by various government websites in specific reference to policy development on children in care which reviews the relevant datasets collected over several decades. Responsibility for children in care moved from the Department of Health around 2005 to the Department for Children, Schools and Families, which in turn became Department for Education and Skills and then to the Department of Education, which is where the responsibility presently lies. This undertaking is to enable further examination of administrative data that are relevant to the intersection between care experienced adults who were also excluded from school.

3.2 Reviewing Legal, Policy and Administrative literature

This chapter looks at children's social care, education and belonging while also exploring language across the legislation, administrative datasets and policy. It reviews literature and administrative datasets, which were sourced through governmental websites, Google searches and article references. However, there are complexities regarding the areas covered in this chapter which will be explored in each section. For example, the devolution of the United Kingdom, voted by referendum in 1997, enabled separate legislatures and executives in Wales resulting in differing legislation and practice. Scotland and Northern Ireland have had different legislation for much longer. It would be beyond the scope of this chapter and of limited relevance given that this research focuses on adults who were in care and/or educated in England and Wales only, to compare legislation across the four nations. The focus instead is on legislation and practice in England and where appropriate, Wales, though with some reference to the other home nations when relevant.

3.3 Select Resources to Search

I identified the databases that were most appropriate for the topic of the study from those relevant to professional practice and the academic disciplines of education, social policy and social work. On this basis, Table 1 shows that the following were chosen to search for legal, policy and administrative sources:

Policy and Legislation Review
Search Oxford Libraries Online (Solo)
Current government websites, including the Department of Health, Department of Education and the Office of National Statistics
Archives of historical Government Legislation
Historical Archives in the public domain regarding children's homes
Historical Archives kept by the public regarding Workhouses

Table 1 Resources used for the review.

3.3.1 Complementary Sources

This was a largely organic process led by already held knowledge from having worked within the sector for a number of decades. I started with what I thought I knew quite well, such as legislation regarding children in care and then found myself in different areas of knowledge to my own. While organically searching to cover years 1980 – 2023, varying historical perspectives on the welfare of children spanning over 200 years also became relevant. Within this search, I found an array of archives held by people trying to trace their families historically who had been moved to other countries, been adopted, and by those seeking to make connections with people they were in care within specific children's homes. With this search, thus, came a much deeper realisation of the impact of legislation upon children and young people and their families and how that was interrelated to public opinion and governmental interests.

3.4 On-going Updates

The next stages of the review involved revisiting the latest administrative data in education and also children in social care to gather the most recent statistics and figures. Regular searches using the search terms 'exclusion,' 'children in care,' 'belonging,' alongisde pairing those terms together and a more fine-tuned organic exploration were also undertaken, capturing the most recent legislation, policy and grey literature on belonging, on exclusions and on children in care in education. This process continued and was repeated with the addition of exploring legislation, white papers and administrative data of areas not so directly connected with children's social care and education, in order to observe whether belonging in relation to children in care and in education were thought of more directly within policy documents. This stage also provided an opportunity to return to the databases identified for the literature review that underpins Chapter Four, to gather more recent academic papers using the same search terms. In a constantly shifting social, political and policy landscape, this aspect of the search continued throughout the writing of this study.

3.5 Policy Development on Belonging

In approaching thinking about belonging in this policy section, I have turned to language used in legislation and reflections on international policy. This approach is a way of considering the dance between legislation and social attitudes and vice versa, and it lends itself to pointing towards some of my rationale for this section. Cultivating belonging in education and in services working with children in care is referred to directly in some international policy. For example, the concept of belonging can be found in other countries' policy document, such as The Early Years Learning Framework for Australia (2022) which is called "Belonging, Being and Becoming" and mentions the word belonging 82 times. Similarly, in Alberta, Canada, the early years and care framework makes reference to belonging throughout (Makovichuk, 2014). This international policy suggests that practice in international sectors such as Education may be clearer about how exclusion is a feature of the experience of being in care and being excluded from school, and therefore how cultivating belonging might be a helpful solution.

Learning about belonging in policy internationally led to an exploration of policy across the UK and the devolved nations, commencing with looking through documents released from the Department of Education that act as Guidance, Statutory Guidance and Statutory Frameworks. Five key documents (see Table 2 below) that are relevant did not feature belonging as a concept. Commencing with the beginning of life, entirely grounded in the evidence and research that we have about the importance of the early years in childhood development, the concept of belonging was absent.

	Document	Page Length	Number of times exclusion mentioned	Number of times belonging mentioned	Number of times relationships mentioned
Doc 1	The Best Start for Life: A Vision for the 1,001 Critical Days The Early Years Healthy Development Review Report (HM Govt, 2021).	147 pages	6	0	22
Doc 2	Statutory Framework for the Early Years Foundation Stage Setting the Standards for Learning, Development and Care for Children from Birth to Five (DfE, 2021)	53 pages	0	0	9
Doc 3	Keeping Children Safe in Education Statutory Guidance for Schools and Colleges (DfE, 2020)	179 pages	7	0	0
Doc 4	Exclusion from Maintained schools, Academies and Pupil Referral Units in England Statutory guidance for those with Legal Responsibilities in Relation to Exclusion (DfE, 2017).	62 pages	288	0	0
Doc 5	Suspension and Permanent Exclusion from Maintained Schools, Academies and Pupil Referral Units in England, including Pupil Movement Guidance for Maintained Schools, Academies, and Pupil Referral units in England (DfE, 2022) Updated version of Doc 1	72 pages	223	1	0

Doc 6	The Designated Teacher for Looked-after and Previously Looked-after Children Statutory Guidance on their Roles and Responsibilities (DfE, 2018)	50 pages	26	0	14
Doc 7	Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan (DfE, 2023)	101 pages	3	2	9
Doc 8	Behaviour in Schools. Advice for headteachers and school staff (DfE, 2024)	34 pages	13	0	6

Table 2 Language in DfE Documents

The fact that the word ‘belonging’ did not appear in any of the policy documents regarding the early years, but ‘behaviour’, ‘looked after children’ and ‘safeguarding’ all did, suggests that belonging has not been an intentional consideration in relevant policy in England. This suggests the possibility that ‘belonging’ may simply not be part of the broader understanding of how developing children and young people facing challenges could be supported through intentional practices that cultivate belonging.

We might argue there are many words that do not appear in these documents that we might need to consider. Thus, I looked at the ‘Keeping Children Safe’ document again and found that ‘safety’ was mentioned 46 times, ‘exclusion’ mentioned 3 times, the phrase ‘looked after children’ was mentioned 13 times, ‘school’ was mentioned 664 times, ‘family’ was mentioned 24 times and ‘home’ was mentioned 81 times. For context, there are approximately 280 words on each page so a rough guide of how many words there are in this document would be around 33,000. ‘Belonging’ as a concept is undeniably and conspicuously absent from documents about children, young people and their families. Similarly, the statutory guidance for designated teachers for looked after and previously looked-after children does not reference the word ‘belonging’ either (DfE, 2018). This is despite the fact that this document refers to children who have been displaced, moved around, and have experienced major disruption to any sense of belonging that they may have had.

Yet, some recent changes in policy in England suggests that the disconnect between research, some international policy and English policy on the issue of belonging may well be turning. One reference to belonging has recently emerged in the Children's Social Care Reform in the section on Kinship Carers (DfE, 2023). Kinship Carers are close family members or friends of family members. While the word 'love' is in the title of the document (Children's social care: stable homes, built on love consultation response, 2023) and is mentioned a further 42 times throughout, the word 'belonging' is also mentioned (DfE, p.39, 2023). Albeit this is a single mention, it potentially indicates a turning point for policy and therefore, potentially for practice too. However, it is also possible that it is practice that has influenced the introduction of belonging into policy also.

Local strategies are already incorporating belonging into their plans. It is worth highlighting that Bristol's Strategy (Bristol Belonging Strategy: Belonging from the Beginning 2021–2024), makes it clear that 'belonging' is key to thinking about the 0-5 age group of children (Bristol City Council, 2021). Dorset's 10-year strategy plan for children, young people and families has also acknowledged that belonging is key, by developing a 'Belonging Strategy' in education (Dorset Council, 2023).

Exclusion is linked to particular 'risk' factors and those highlighted in a report by New Policy Institute Chances, (1998) had many similarities with those highlighted in The Timpson Review 20 years later (DfE, 2019). For example, both reports identified that black Caribbean children and children with social and emotional mental health (SEMH) difficulties had a much greater chance of being excluded from school. Exploring protective factors and risk factors can support a better understanding about what helps (Jackson & Martin, 1998, Martin & Jackson, 2002, Mallon, 2005). The DfE commissioned The Timpson Review to support a better understanding of the continued disproportionate exclusion of certain pupils from English schools, namely boys, children with SEN, those who have been supported by social care or come from disadvantaged backgrounds, and children from certain ethnic groups, (DfE, 2019). The findings highlighted that most of the literature was generic rather than seeking to understand particular subgroups and that multiple vulnerabilities overlap and are at play for these children and young people (DfE, 2019).

This section has argued that, despite some recent signs of change, particularly in local strategy documents, belonging seems to be missing from guidance documents in England about children who are displaced from their families and also about the way children are to be excluded from school. This policy reluctance to acknowledge belonging might be in part due to the word 'belonging' feeling in some way like sand running through fingertips; understanding what it means is to grapple with its disparities. It is necessary therefore to take a longer historical perspective on why belonging is absent.

3.5 Development of Statutory Provision on Children in Care

The history of the treatment of children in need of care is pertinent to understanding some of the challenges faced by those who were in care as children and were excluded from school. There is a long history that creates an important perspective on this group of people, and their sense of belonging.

The first piece of legislation that allowed the state to intervene and permanently transfer guardianship of a child from parents to a third party was the Act for the Care and Education of Infants who may be Convicted of Felony 1840. Ward (1990) explains how

> "In the 1880s legislation was introduced through which natural parents could permanently forfeit the custody of their children to third parties. The Prevention of Cruelty to and Protection of Children Act 1889 was introduced to separate children from parents who were considered unfit; the Poor Law Amendment Act 1889, the Custody of Children Act 1891 and the Industrial Schools Act 1891 prevented certain children who had already been cared for by the state or the voluntary societies from returning to their parents. The legislation formed the basis for a number of procedures which were used to regulate the relationship between natural parents, children and child care organisations for the next century. Place of Safety Orders derived from Section 6 of the Prevention of Cruelty to Children Act 1889; the grounds for making Care Orders were to be found both in this Act and in the Industrial Schools Acts of 1857 to 1881; provisions by which a local authority could, by administrative fiat, assume parental rights and responsibilities over a child in its care (Section 3 of the Child Care Act 1980) were laid down in the Poor Law Amendment Act of 1889. The

> Custody of Children Act 1891, though gradually superseded by other legislation, remained on the statute book, and was cited as recently as 1973. The Industrial Schools Act 1891 survived as Section 24 of the Child Care Act 1980. These provisions were all repealed or altered by the implementation of the 1989 Children Act; nevertheless, they created a legal framework for child care policy in this country which endured for a hundred years" (p.33).

However, previous legislation had already made the situation difficult for these children. The Poor Law Amendment Act 1834 aimed to reduce dependency on the state and ensure that the situation of the able-bodied pauper 'on the whole shall not be made really or apparently as eligible as that of the independent labourer of the lowest class'. Because wages were so inadequate it was virtually impossible to provide a lower standard of poor relief without widespread starvation. The solution was to perceive dependency on the state as a moral failing and to stigmatise paupers. Most children in care were pauper children with the voluntary societies taking in far fewer children than the statutory authorities, and some only took in legitimate children of a 'better class'. Illegitimate children, who were overrepresented in pauper establishments, were further stigmatised, as were children with disabilities. This deliberate stigmatisation of pauper children in the 19th century produced a legacy that has been hard to eradicate.

The beginning of the expansion of central government in the 19th century led to the shift in the oversight of children's welfare, placing duties in law to protect children (Jones, 2010). Between 1885 and 1913, no less than 52 Acts of Parliament affecting child welfare were passed (Boushel et al., 2000) reflecting changing attitudes towards children over that time. It is not possible to write about children's welfare without also considering the treatment of their mothers, as this is where the story of children in care often begins. The Foundling Hospital was founded in 1739 by Thomas Coram, as a place for saving poor parents from shame, poverty and infanticide, yet with an emphasis on the poor unwanted child rather than on the mother (Williams, 2018). Workhouses were particularly relevant for poor, destitute and unmarried mothers and intended to be seen as a deterrent while also providing a place for childbirth (Williams, 2018). However, the hospital was opened in response to Coram seeing so many dead babies on the streets of London. The hospital provided a place where a mother could leave her infant believing it would be cared for. Children were given a new name upon arrival and the mother was given a token in the rare circumstances that she should find herself in a tenable position to return for her child and the child could be identified. The new name had no connection with anyone with whom they came into contact and the new birth certificate that they were given until 1953 labelled them as coming from the Foundling Hospital, indicating that they were foundlings. The museum stands there to this day displaying all the things that the mothers left with their 'abandoned' babies.

Illegitimacy was a huge issue of a magnitude that is hard to imagine in contemporary times. Unmarried mothers were assumed to want to hide their sin through killing their infant and were blamed for being poor, blamed for betraying the father of the child, stigmatised and deemed a burden (Higginbotham, 1989). The child of an unmarried mother could be harshly described: ‘The bastard, like the prostitute, thief and beggar, belongs to that motley crowd of disreputable social types which society has generally resented, always endured. He is a living symbol of social irregularity’ (Davis, 1939). Having a child outside marriage was considered to be an offence against the sacrament of matrimony, and a threat to the good order of society, right up until the mid-20th Century. An illegitimate child was ‘filius nullius;’ nobody’s child. Theoretically they had no legal relations. Illegitimate children, who were over-represented in the care system, were actively and deliberately stigmatised. Arguably, this historical legacy of the stigmatisation of children in care is one of the reasons why children in care continue to be stigmatised. In addition, there was the deliberate stigmatisation of paupers and their children following the 1834 Poor Law, where shame and stigma were actively attributed as this was seen as a deterrent. It was not by accident that these children were deliberately made to feel that they did not belong, that they should feel ashamed and would be stigmatised by society; this ancestral, historical legacy has yet to be overcome and can be observed within policy and legislation across the centuries, highlighting where public attitudes towards the family, social justice, the deserving and underserving poor, women and ideas about mothering, can be attributed.

In conclusion, there were active mechanisms in place to ensure ‘unbelonging’, focusing on unmarried mothers, their children and ‘the poor’. An illegitimate child belonged to no-one and there was an active endeavour to ensure that a child in care no longer belonged to their families. Unbelonging and stigma are inextricably linked, and are very much a legacy that is embedded within current legislation and practice that can be seen in presently. Belonging is a relatively recent concept that can be much more associated with Bowlby’s Attachment Theory (1944) than by anything that came before it. There is also evidence (Ward, 2011) that, just as the Foundling Hospital children never saw any sentimental items their parents had left with them when they were admitted, children in care today often lose sight of personal items such as photographs and jewellery that symbolise a connection with their past, and may reinforce a sense of belonging.

3.6 Policy Development in Education

If positive practices of belonging are absent from the history of social care, we should now turn to consider its place in the history of education. Education and children's social care legislation regarding the protection of children intertwine and serve to highlight the interconnected nature of care and education in children's experience; this legislation was initially borne out of notions about destitute children and work and later on basic education as preparation for work.

During the 18th Century children, without rights or laws in place to offer any protection, often died young and were treated with brutality; there was little understanding of children as developing humans. As the 19th century concluded, much had moved on: health and sanitation had improved, children were less likely to be found working under the age of 12 years old, and there was a better understanding of the concept of childhood (Hopkins, 1994).

Mary Carpenter had a significant role in the development of industrial schools established for the 'perishing classes;' destitute children who had not yet offended but were thought likely to do so, with the purpose being to deflect them from crime. Underpinned by Christianity, Carpenter's mission was "to carry education to the lowest depths of society, to seek out in their hiding-places the most wretched and deserted children... to raise them from their hopeless condition" (Carpenter, 1851, p.110). They were named as Ragged Schools, it seems, because the children were thought to be ragged and filthy and so the school provided not only education but also clothes and food for the poor. One of the original aims of the Ragged Schools was to provide food for the poor, whereas the gap in educational attainment had been narrowing.

The various Industrial Schools Acts (1857-1881) defined the grounds under which children could be committed to the care of the state, regardless of the wishes of their parents. These grounds and others introduced by legislation such as the Prevention of Cruelty to Children Act 1889, formed the basis for separating children from their birth families through Fit Person orders, and later care orders, until the implementation of the Children Act 1989.

However only a relatively small proportion of children in care were placed in Industrial Schools or as they became later known, Community Homes with Education (CHE). The majority of children looked after by the state were placed in workhouses, poor law schools and foster homes or residential homes and foster care from mid-20th century onwards. The education of pauper children in general is where some ambivalence can be found. If they were not educated, they would be unlikely to achieve independence in adulthood and remain a burden to the state, but if they *were* educated then, until universal education was introduced, they would be given an advantage that was not open to the children of the independent labourer. This created a conundrum regarding the education of children in care, arguably a legacy that remained across the centuries until intentional mechanisms were put in place, explored further in this section. Finally, there was the concern that educating them would cause them to no longer be satisfied with their situation in life.

Children in the care of the statutory authorities and the larger voluntary societies had better opportunities for education than their peers in the 19th Century and in the early years of the 20th century. However, as universal education opened up greater opportunities, this advantage was gradually lost. The need to reduce dependency on the state meant that some were denied access to secondary education because it was thought imperative that they stopped being a burden on the state as soon as possible. This legacy of ambivalence is one of the factors that lies behind persistently low aspirations for looked after children.

The Children Act 1989 swept away the grounds for children coming into care for reasons that had persisted since the 19th Century, such as illegitimacy and poverty and replaced them with the criteria that the child is suffering or likely to suffer significant harm. The Act reframes the relationship between the state and the family specifying (Section 17) that the state should have a duty to promote the welfare of children in their area who are in need, and providing services designed to ensure that they achieve or have the opportunity of achieving a reasonable standard of health and development. This child development perspective formed the basis for the policies introduced by the labour governments of 1997-2010.

For children with additional needs, the Elementary Education (Blind and Deaf Children) Act of 1893 extended compulsory education to include blind and deaf children, establishing special schools, and six years later provision was made for physically impaired children in the Elementary Education (Defective and Epileptic Children) Act of 1899 (UK Parliament, 1899). Furthermore, in a bid to ensure that children were healthier, further assistance under the Education (Provision of Meals) Act in 1906 allowed local authorities to provide free school meals, later extended and made compulsory by the Education Act 1944 (UK Parliament, 1944). These shifts in attitudes show the beginning of the infusion of the education and welfare of children in legislation.

In 1991 the United Kingdom ratified the UN Convention on the Rights of the Child providing a statement of children's rights with four guiding principles which are: Non-discrimination (Article 2), Best interest of the child (Article 3), Right to life survival and development (Article 6), and the Right to be heard (Article 12) (Unicef, 1990). The latter is a landmark in the history of children who have previously been understood as voiceless.

Much legislation follows on from the culture shift to the idea that children have rights such as The Protection of Children Act 1999, which set out that a list should be kept of all those unsuitable to work with children where they had harmed a child or placed a child at harm. The Care Standards Act 2000, establishes a National Care Standards Commission to ensure standards for all environments providing care, including fostering agencies and children’s homes. Also, Article 28 and Article 24 on the Rights of Persons with Disabilities all state the right of disabled people to receive an education. Having been given the right to participate in education in 1970, it was only the Equality Act 2010 that protects disabled people from discrimination in the UK, including in education.

Policy on children in care moved between various Government Departments such as the Home Office to the Department of Health, to the Department for Children, Schools and Families in 2007. It was under New Labour (1997-2010) when several policies and legislation that directly impacted children and young people in care came about. Many reforms that impacted children in care, were introduced such as Education Action Zones, established by the Secretary of State for Education and Employment in 1998-99 under the School Standards and Framework Act 1998. These zones were introduced to raise educational standards for those children and young people in seriously disadvantaged areas although they were not deemed a great success and were discontinued (Reid & Brain, 2003). The Every Child Matters policy agenda, launched partly in response to the death of 8 year old Victoria Climbie, focused on a number of identified outcomes that all children’s services had to work towards with the aim being to improve the lives of children and to narrow the gap between the most disadvantaged and their peers (DfES (Department for Education and Skills, 2003).

The Care Matters White Paper (DfES, 2007) was particularly pertinent in relation to the education of looked after children becoming of particular importance. This focus on children and young people in care alongside those in the most disadvantaged areas created a culture of placing children at the heart of care and education and that shift in focus went on to pave the way for an increased attention to ensuring foster carers supported education, in guidance under

Section 20 of the Children and Young Persons Act 2008. This required the development of designated teachers (DTs). Next was the introduction of the pupil premium in 2011 by the coalition Government of Personal Education Plans (PEPs) legislated in Section 36 of the 2008 Act, which was followed by the role of Virtual School Headteachers (VSHs) Children and Families Act 2014 becoming statutory, alongside Education, Health and Care Plans (EHCP).

The sole role of Virtual Schools is to oversee the education of children in care by driving up the performance of schools in relation to these children, providing local authorities with the power. These included directing schools to admit children in care, even where the school is fully subscribed and through developing better support in school to prevent exclusions of children in care (DfES, 2007). There was also now an understanding that children in care were ten times more likely to be excluded from school than their peers (Truancy and School Exclusion, SEU, 1998). As mentioned above, in 2014, Virtual Schools became a statutory service directed by the Children and Families Act 2014 and has had an impact on reducing the numbers of exclusions for children in care (DfE, 2019). So successful has the Virtual School policy been that its reach was extended through the Children and Social Work Act 2017 to previously looked after children (those who have been adopted) and guidance released from the DfE (2021) extended support to all children with a social worker.

A current evaluation of this extension is being undertaken by the Rees Centre at the University of Oxford, until March 2025. The question remains as to whether the reduction of the number of children in care being excluded has in fact gone down, or whether the use of off-rolling, managed moves and fixed terms exclusions have increased, making calculating the actual numbers impossible.

Recognition that Section 24 of The Children Act 1989, needed extending to offer a better package of care, was legislated in The Children (Leaving Care) Act 2000. This replaced Section 24 in a bid to make law, the duties and responsibilities of Local Authorities towards those young people who had been in their care. Further duties were introduced to include that young people coming out of care should be better prepared and that a Personal Advisor should be allocated to each young person to provide support. A further introduction was that the Personal Advisor now provide a Pathway Plan for any child for whom they are responsible. While there were criticisms that the Act did not go far enough, (Grover et al, 2004), the shift in trajectory cannot be understated.

Regional differences across the home nations began emerging. Around the same time The Children's Commissioner for Wales Act 2001 created the first children's commissioner post in the UK, whose principal aim was to safeguard and promote the rights and welfare of children. Northern Ireland followed next (The Commissioner for Children and Young People (NI) Order 2003), then Scotland (Commissioner for Children and Young People (Scotland) Act 2003) and finally England (S. 1-9 of The Children Act 2004). The Education Act 2002, specified the requirement for school governing bodies and FE institutions to safeguard and promote the welfare of children.

The period of New Labour could easily be argued as providing a holistic approach to thinking about children in care and education. The Department for Children, Schools and Families was renamed the Department for Education (DfE) in 2010 by the incoming coalition government, in response to a view that the focus had shifted too much on welfare and not enough on education. The Every Child Matters policies ended, re-establishing the tension between education and welfare.

The trajectory, through the lens of policy and legislation, demonstrates not just how much things have changed, but also what has not changed. The historical relationship between poverty and care, care and education, class and care, stigmatisation and the movement towards children's rights, can be followed in the legislation.

3.7 Administrative Datasets - Education and The Welfare of Children

The final review here is of educational outcomes for children in care, in order to identify the educational problem at hand. National datasets have been collected on children in care since around 1950. However, it was only in 2000 that data of educational outcomes were linked with data on looked after children and collection was introduced to gather data on how children in care were performing in education (DfE, 2020). The statistics, collected from local authorities annually by the Department for Education (DfE), have repeatedly shown poor education outcomes for children in care. However, they do not include baseline data at the point of entry in to care or data on trauma that had been experienced prior to care. Nonetheless, the fact that national data are collected, collated and analysed is helpful in drawing out themes for underpinning policy and for improving outcomes for those in and coming out of care. There is a cautionary note to add here however, which is that these datasets collect administrative data rather than data about the nuanced and complex realities of life in the care system. An on-going project commenced in 2021, led by the Rees Centre at the University of Oxford, funded by the

Nuffield Foundation, seeks to address this issue. Its aim is to improve the way this collected information can be best used to create services and support children, young people and families. It is also important to highlight the work of Administrative Data Research UK (ADR UK) who link datasets across the public sector, to enable better informed policy decisions that improve lives. The most relevant dataset linking for this research is ECHILD which will link records for around 20 million children. This generates insights into how education affects children's health and how health affects children's education (ADR, 2023). Where more nuances gathered from data collected can be achieved, the role of the school, the significance regarding the length of time spent in care, any impact of relational practice by teaching staff and the resources that may have been available, can be better understood (Luke et al, 2018).

Since 2000, the collection of GCSE results and end of Key Stage results has compared looked after children's educational outcomes against their peers, demonstrating a notable educational gap. For example, data collected in 2005 showed that 86% of all children achieved level 2 at Key Stage 1, 80% achieved level 4 at Key Stage 2 and 73% achieved level 5 at Key Stage 3. For children in care KS1 was 58%, KS2 was 44%, KS3 was 27%, and 96% of all school children obtained at least one GCSE or GNVQ, compared to only 60% of children in care. Furthermore, 36% of them did not even sit such an examination. In addition, 56% of all children obtained at least five GCSEs (or equivalent) at grades A*–C with only 11% of children in care (Department for Education and Skills, 2006a, in O'Sullivan & Westerman, 2007).

The most recent data collected is not easily comparable due to changes in collection, impact of Covid-19 changes in how GCSEs are awarded, and changes in measurable outcomes. However, regardless of how statistics are collected and any changes made to examination types, the results still demonstrate a gaping hole. In data collected for 2022, the percentage of pupils meeting the expected standard in reading show that 67% of all children met the standard, whereas only 44% of Children Looked After (CLA) for more than 12 months and 36% for CLA for less than 12 months. The gap demonstrated at GCSE level is notable; the average Attainment 8 score for all pupils for Key Stage 4 (KS4) is 48.8% but for CLA 12 months or more it was 20.3%, and for CLA less than 12 months, it was 15.1% (DfE, 2022). Sebba et al (2015) found that young people who have been in longer-term care do better than those 'in need' but not in care, and better than those who have only been in short term care, suggesting that care may be an educational protective factor. Most children in care only remain for a relatively short period, leaving little opportunity for educational outcomes to improve but where entry into has been early, the risk of poor educational outcomes is reduced (Sutcliffe et al, 2017).

The primary reason for entry to care is recorded by social workers, and as such is very perspective orientated, and subjects the data to many influences such as the current societal expectations of parents and families. It could be argued that children coming into care have experienced developmental trauma which continues to have long term consequences. However, it is argued that being ‘in care’ or registered as excluded from school are social identities constructed by administrative decisions which others have made about those in care (Macleod et al, 2022), which then determine what is gathered as administrative data. These current datasets collected and reported by the DfE focus on achievement, closing the attainment gap and the numbers of children in care/care leavers accessing university education and have only recently increased collection to the age of 21 years (DfE, 2022). There are, of course, other datasets that I have not focused on here such as those that collect data on health, for example: ‘Fingertips’, which reports on Child and Maternal Health from the Office for Health, Improvement and Disparities. There is a specific section on Vulnerable Children and Young People and Ofsted statistics which report on Standards in Education, Children's Services and Skills (Fingertips Dataset, 2023).

The discussion around school exclusions in educational discourse intensified after the introduction in the Education (No. 2) Act 1986, ss 22-28 of fixed term and permanent exclusions. Fixed term exclusions (or “suspensions” in this Act) indicate the removal of a pupil from the school classroom or premises for a period of time.

The most recent national overview of school exclusions demonstrates that not all children are likely to find themselves candidates for school exclusion and found that 78% of permanent exclusions were of pupils classified as either having Special Educational Needs (SEN), deemed in need in accordance with Section 17 of The Children Act 1989, or eligible for free school meals. Of that 78%, 11% of permanent exclusions were of pupils who had all three characteristics (DfE, 2019). The review goes on to state “while exclusion is an important component of effective behaviour management in schools, outcomes of excluded children are often poor” (p7) suggesting that regardless of the impact of exclusion, it is still a suitable strategy and approach.

3.8 Conclusion

Governments, in theory, identify a problem, gather information and research, produce a policy, conduct an impact assessment and then draft legislation and statutory guidance to implement it. This then directly impacts children's and young people's experiences of those sectors. Policy is implemented and interpreted into practice delivery. Research can feed into all of these areas (which is further explored in Chapter Four) and activism plays a role in leading change from the ground up. However, these processes are often framed by the law and language of the past.

This chapter has made explicit the review process for legislation, policy and relevant data collection. It has provided an analysis of the place of belonging in current policy, finding it largely absent, which led to a historical review by which to understand the development of statutory provision for children in care. The chapter then went on to look at education policy and children in care. The relevant administrative datasets were explored regarding education and the welfare of children, showing a consistently poor achievement.

Overall, 'belonging' is missing from this policy landscape; indeed historically 'unbelonging' was the implicit aim of policy and law. Legal language and its complexities, the relevant legislation and policy and how language is being used or omitted can guide and inform us as to what is deemed strategically important and what is not when it comes to policy creation and service delivery. Policy and legislation influence how services are delivered, alongside other influences such as good practice, inspection frameworks, resources and leadership. Ultimately, children continue to be at the mercy of government ideology, social views and socio-economic resources. This chapter has sought to narrate, explore, and explain the historical interconnection between poverty, women and the working class, with policy, legislation and public attitudes and the impact that all of that has had on children who are in or have been in care.

Chapter Four - A Review of the Research Literature

4.1 Introduction

Chapter Three has set out the historical nature of policy development on children in care, in education and on belonging, and the current policy and professional grey literature and administrative data; this demonstrates how the continued impact of many of those early approaches can be identified to services up to the modern day. The intergenerational relationships between children in need of care, poverty, the role of philanthropists, the church and state intervention, alongside the way that education and being in care did and did not intertwine, take the reader on a journey that underpins the intergenerational context of children in care and adults who were in care as children.

This chapter will explore the empirical research within the areas of being in care, school exclusion and belonging. The chapter sets out the process of the review and goes on to explore the findings around experiences of care, school exclusion, intersectionality, stigma and trauma. The review of the research suggests that this study is the first to ask adults to reflect back on their experiences of having been in care as children while also having experienced being excluded from school. Furthermore, it appears to be the first study to also ask how people with these experiences made sense of belonging in that context. There is little research available asking adults who have been in care as children to reflect upon those experiences (Brady & Gilligan, 2018). There was an absence of research that could be found on the intersection of being a child in care and school exclusion as understood by the adult who had those experiences. Finally, there was an absence in the literature exploring this intersection with the concept of how belonging was made sense of in that context. I was unable to find longitudinal research on educational outcomes for those who have been in care as children who were also excluded from school and the impact across the life course. This has created a one-dimensional perspective with little evidence to support alternative narratives about exactly what people with these experiences achieve educationally and in other life outcomes. The search highlighted a scarcity of scholarly work on the care and exclusion intersection and did not identify any papers that focused on both school exclusion and children in care as understood by adults who had those two experiences. Furthermore, how they made sense of belonging within that intersection is not explored at all.

4.1 The Process of the Academic Literature Review

The review of the research literature has taken place in three stages throughout the process of conducting the research. Stage One commenced in February 2021, ending in July 2021; Stage Two took place between March 2022 and January 2023; and Stage Three commenced in March 2023 and has been ongoing throughout writing the thesis. The ongoing nature of review is largely due to ensuring that the review of the literature captured the most relevant and recent studies in this evolving, multi-disciplinary field.

4.1.1 Selecting Resources to Search

I identified the databases that were most appropriate for the academic disciplines of social work, social policy, education and psychology. On this basis, the following databases and platforms were chosen for the search as shown in Table 3 below:

Academic and Non-Academic Literature
Search Oxford Libraries Online (Solo)
Scopus database
PsychINFO database
Google Scholar
Rees Centre current research projects

Table 3 Academic Databases and Research Centre used for the review

4.1.2 Defining Search Terms and Searching Resources

As outlined, the main focuses for this thesis are adults who were once children in care, school exclusion and belonging. As such, the search terms were determined by the main concepts and the review sought to identify literature at the intersection between the three areas. My first search was to explore what research currently exists that looks at this intersection. In order to test this I created a Boolean string using "belonging" AND "children in care" OR "looked after children" OR "care experienced" AND “school exclusion.” Collectively, this retrieved 3995 entries. I then searched “belonging” AND “children in care” OR “looked after children” which collectively generated 3446 entries. Next, I searched “belonging” AND “school exclusion” which collectively raised 736 entries. I then searched “care” AND “education” in Solo, which produced 3,947,829 entries. Refining this particular search to English only, peer reviewed articles from 2000 – 2021 still produced 1,265,118. Scopus produced 500,327 entries and

PsychINFO produced 60,272. Finally, I searched “school exclusion” AND “looked after children” OR “care experienced” which raised 9994 entries.

Undertaking these searches, I found Solo identified substantially more literature than the other two databases, as listed above, many of which were irrelevant. My final search in Solo generated 9,772 items whereas the number of items identified by PsychINFO and Scopus were significantly smaller (217 and 5 respectively).

As set out above, taking a systematic approach to the identification of literature generated large numbers of articles, and a preliminary examination of titles and abstracts indicated that a number of irrelevant articles had been identified. It was not feasible to conduct a title and abstract screening on all of the identified articles, and as such I changed my approach to refine my results.

4.1.3 Refining the Results

Approaching my literature review in such a systematic way produced far more results than could be processed, in the main, predominately irrelevant articles that did not focus on the intersection of having been a child in care while excluded from school, with very few having a focus on belonging. Time was spent eliminating many entries at the point of title and then more at the point of the abstract but the review then became more organic. As outlined above, having identified some of the challenges with a systematic approach to the search, I allowed my search to take me to the references of articles that were relevant and then follow up on those cited articles. The snowball method, which is a process that draws upon references within identified articles, proved a more resourceful way of finding centrally relevant literature (Wohlin, 2014). Despite the vast amount of references returned by the systematic searches, the screening of a proportion of these references and the snowball strategy revealed that there is in fact a scarcity of literature on the specific intersectional experience under study and from the perspective of adults.

4.2 Experiences of Being in Care

4.2.1 Research and Adults with Lived Experiences

The absence of academic literature highlights that the area of adults with care experience across the life course is under-researched. There are potentially several factors that may have contributed to this absence. The most obvious being that researchers may have experienced difficulties encountered in identifying and gaining access to adults who were in care as children. The seemingly impossible task of finding participants to take part in a study that requires them to divulge that they were in care, hampered research in this area up until relatively recently, even without having to consider additional intersections. In one study where the author chose to interview care experienced adults, the author discussed how they asked newspapers to print adverts for participants, alongside their reluctance to do so (Mallon, 2005). In the last ten years, social media has become part of everyday life and this has made connecting with people, all over the world, something that we can do with ease, which undoubtedly has implications for research in more complex spaces. It is possible to find and connect with a diverse range of self-defining groups and organisations online, potentially bringing people together from as near or as far as one desires. Making sense of the social and political landscape across the different decades that a person may have been in care and lived after care, is undoubtedly a consideration in this area; the complexity is profound.

4.2.2 Research and Childhood Adversity

Notwithstanding the challenges of accessing adults with childhood experiences that are marginalised, some factors that relate to the experience of care are extensively researched. In recognition of what precedes care, what happens in care and what might happen after care, understanding the impact of trauma in childhood is considered important. There has been extensive research that has focused on the impact of early childhood adversity (Shonkoff, 2000, Shonkoff & Garner, 2012, Sroufe, 2005) and the impact of developmental trauma (Schore 2001, Porges, 2011, Siegel, 2010, Gerhardt, 2014). This area of trauma will be further explored later in this chapter.

How the impact of early adversity and trauma affects learning has also been explored (Geddes, 2006, Nash & Schlosser, 2015, Bombèr, 2020) finding that early trauma “indicates that the trajectory for learning across the developmental lifespan is radically affected” (O’Neill et al, 2010, p.190). There have also been a number of studies in recent years that seek to better understand care leavers and higher education trajectories (Cotton et al, 2014, Harrison, 2017, Harrison, 2020). Of the few studies that look at life course or trajectories of those who were in care as children, some apply a particular age range or a cut-off date as a requirement for participants to take part in the research (Brady & Gilligan, 2018). Other studies have a broader age range that emerges because of who came forward for the research (Mallon, 2005, Cox et al, 2018).

4.2.3 Research and the Education of Children in Care

The direction taken by policy and legislation in how child welfare and education policy became intertwined in the 19th Century was explored and demonstrated in Chapter Three. In the late 20th Century, the process became heavily influenced by academic research. Researchers such as Jackson with her extensive focus on children in care and education (1987, 1998, 2005, 2006, 2010, 2012), Stein's focus on care leaver pathways (Stein, 2012) and Broad's research on those in and leaving care and wellbeing (Broad, 1999), could arguably be seen as the trailblazers in this field in regards to research.

Jackson's first publication in 1987, titled *The Education of Children in Care*, asked some poignant questions about how children in care perceive education, how practice can be improved and whether some forms of care are more effective than others in promoting educational success (Jackson, 1987). This was the beginning of a long academic endeavour where Jackson consistently argued that it is education that is the best guarantee of social inclusion (Jackson, 2005, 2010, 2012). While The Children Act 1989 was focused on promoting children's health and development, Jackson saw it as the first step towards ending the neglect of education within the care system (Jackson, 2010). However, Jackson goes on to argue that it took a further 20 years for education to be at the centre of provision for children in care (2010). It is a topic area that has grown and developed significantly through persistence at a time when thinking about children looked after by the state and the importance of their education was simply not on the agenda.

The notion that education 'levels the playing field' for children in care continues to be argued (Harrison, 2017). However, it is known that the percentage of care experienced young people who go to university still remains low, although this is slowly rising having moved from the often quoted 6% to 13% (Harrison, 2020). Harrison pointed out that many of those who have been in care as a child often enter Higher Education later than the general population, and when this is taken into account, the percentage of undergraduates with care experience rises (2020). Harrison also includes those students who are studying part time, observing and then reflecting the less traditional trajectories of those who have been a child in care (2020). The latest report, Breaking the Care Ceiling, shows that the number of 19 year olds leaving care who are going to university is now 14% compared to 47 per cent of young people who did not grow up in care. If we continue in this direction, they state, it will take 107 years to close the gap (Civitas, 2023).

However, other factors that have contributed to poor educational outcomes are potentially at play. Jackson's depiction of foster carers receiving a lack of extra support to compensate children in care from early deprivation, and social workers and other professionals having assumptions about the potential for such children to have any academic success (Jackson, 2010) highlights some of the complexities. However, she also focuses on multiple home and school moves, often with little notice and communication, as a factor. These findings are picked up in further research and there is some evidence that care is not detrimental to education, but that there is a need to better understand pre-care experiences (Luke & O'Higgins, 2018). However, while care may have a positive impact on educational outcomes, multiple confounding factors such as frequent moves, inadequate staffing and children's experiences of growing up in a system dominated by bureaucratic concerns can act as deterrents (Walker, 2017).

Consistent research findings suggest that compared to all children, those in care are at an increased risk of adverse life outcomes such as mental ill health (Seker et al, 2021), social marginalisation (Social Market Foundation, 2018) and contact with the criminal justice system (Howard League, 2018, ONS, 2022). Internationally, children and young people in care show the same educational challenges and comparable outcomes. These include a lower than average educational performance than their peers (DfE, 2022) and, in addition, research suggests a strong association between educational outcomes and life outcomes. Furthermore, a high proportion of children in care have been observed as having accessed special educational needs (SEN) provision. A recent study found that of the 6,240 school aged children who entered the care system, 83 per cent received provision for special educational needs at some point during those school years (Jay & Gilbert, 2021). This creates a picture of vulnerability for those who have been in care as children and an even further layer of vulnerability across the life course for those who have also been excluded from school. An important consideration here is that many SEN needs are likely to be related to adverse experiences before or during care so they are more likely to be SEMH issues. It may also be that some SEN increase the pressure in the family and may lead to an increase in the chance of being brought into care.

A recent research project investigated the educational trajectories of children in care who entered school in 2005 up to them taking their GCSE's in 2016. One of the findings of this longitudinal study was that broader forms of disadvantage such as gender, ethnicity, socio-economic status, and special educational needs and disabilities had more to do with educational attainment rather than care itself (Berridge et al, 2020). That said, Chapter Three's exploration of child welfare and education in policy and this chapter's review of the academic literature highlights that the experiences of a child in care are likely to intersect with other experiences of marginalisation, and therefore disadvantage.

The Timpson Review (2019) reports that there is a trend of children who have received support from social care in being excluded from school, both through fixed term exclusions and permanent exclusions. This group of children refers to any child with a social worker so not necessarily a child in care. For example, this would include Children in Need (CIN) of help or protection, including children in care, previously looked after children (adopted children) and children under Special Guardianship or Child Arrangement Orders. Timpson goes on to report that being in need of help and protection has an association with poor educational outcomes.

However, prior to the time that we collected national data on children in care and their educational attainment, Brodie (2000) examined the evidence regarding school exclusion with a focus particularly on children who were living in residential care placements. At that time, Brodie argues, much more was known about the educational experiences of children living in residential accommodation than about those in foster care. Brodie's research suggests that alternative views on exclusion are required in regard to children who are in care. These are exclusion by non-admission, exclusion upon admission, graduated exclusion or progressive isolation, planned exclusion and finally, exclusion from school and professional intervention. Brodie (2000) suggested, over 23 years ago, that more research into this intersection of care and exclusion was further required.

4.2.4 Language

Appendix 1 and Chapter Three sought to demonstrate some of the complexity around the language used in legislation regarding the welfare of children. The interconnection between legislation, policy and practice with differing individual, familial, geographical and cultural experiences create a map that can feel challenging to navigate. It is unsurprising as this complexity is such that this area can only be thought of as multifaceted, multi-layered and interdisciplinary (Cherry, 2022).

4.3 Exclusion

Permanent exclusions indicate removal of a pupil from a classroom and school building permanently (Sealy, 2021). There have always been suspensions and expulsions, as they were once known, but it was the introduction of exclusions in the Education (No 2) Act 1986 that led to an interest for researchers and policy makers (Berridge et al, 2001). Prior to that time, schools used to have autonomy over exclusions, but they are now regulated to some extent.

The literature search identified a number of articles and one book that intersected exclusion with race, learning difficulties, stigma, social, emotional and mental health and also crime (Gillies, 2016; Daniels et al, 2019; Demie, 2021; Fazel, 2021).

The research available regarding poorer outcomes for those who have been excluded from school (Welsh & Little, 2018; DfE, 2019), indicates a need to further study the impact of exclusion upon those who were excluded from school and were also children in care. The various intersections experienced by children in care, as raised earlier, are further compounded by the various intersections experienced by those children excluded from school. Additionally, marginalised groups have and continue to intersect with exclusion and therefore with further marginalisation, inequalities and inequity in their adult lives (Thompson & Menter, 2017; Thompson et al, 2021). Research has consistently shown that children classified as having Special Educational Needs and Disabilities (SEND) are more likely to experience layers of disadvantage such as living in rented accommodation, within single parent households and in poverty (Daniels et al, 2019). Children and young people with mental health challenges are more likely to be excluded from school (Fazel & Newby, 2021). Black Caribbean pupils have been shown to be four times more likely to be excluded from school than the rest of the school population (Demie, 2021) and a child with learning difficulties is nine times more likely to be permanently excluded (O'Brien & Gilbert, 2016). Martin-Denham (2021) argues that inadequate SEND support in schools accounts for the prevalence of exclusion rates for children with SEND. Children with identified SEND are entitled to receive support in school but where that is deemed inadequate, an Education, Health and Care Plan (EHCP) will be applied for. However, a recent report found SEND identification is variable depending on the school and area. There is a mismatch between how schools and local authorities identify children with SEND, and children who have suffered abuse or neglect have a reduced chance of being identified as having SEND (Nuffield Foundation & EPI, 2021). The report found that it was not until after a full year in care that the chances of being identified with SEND rose above those for other children (p.8, 2021). As of January 2021, there were 430,700 children and young people with an EHCP, a number which has increased each year since 2010 (DfE, 2021).

Children who are adopted, a subgroup of previously looked after children, were found to be 20 times more likely to be excluded from school, and over half of the children who were represented in this study had a recognised SEN (Adoption UK, 2017). The same report found that a quarter of the children who had been excluded had had a somewhat questionable informal exclusion, expanding how we think about the term school exclusion.

Illegal exclusions take many forms. Hidden from the data is off rolling, the practice of removing a pupil from the school roll yet not formally excluding that pupil (Power & Taylor, 2020). Often the parents are then forced to home educate without any resources or support for the young person. There are also what are termed ‘managed moves’ which refer to a discussion between those involved in the education of the child, to move them from one school to another avoiding the need to exclude (Done & Knowler, 2020). Social, cultural and structural factors such as apportioning blame on to children and young people in the name of behaviourist approaches in schools, the presence of racism, classism and sexism, and a failure to understand aspiration as hopes and dreams are embedded in the system. These aspects appear to ensure that children and young people who already face disadvantages are destined to face even more (Gillies, 2016). Further evidence in support of the view that the system itself is simply not designed for children who are already marginalised can be found in exploring mental health and school (Robertson, 2021), children with a social worker and school (Millard, 2021) and geographical based inequalities and school (Baars, 2021).

Drawing from Bronfenbrenner's Theory of Ecology, Bourdieu's Theory of Social and Cultural Capital and the Theory of Intersectionality, Welsh and Little’s (2018) comprehensive literature review explores the connection between school exclusion and outcomes. These include looking at pupil achievement, test scores, graduation rates, belongingness in school and contact with the Youth Justice System. Their review suggests exclusion impacts upon a range of academic outcomes, a strong correlation between exclusion and contact with the juvenile justice system, and an association with a host of adverse life outcomes. In conclusion, they note that the effects and impact of exclusion are under-theorised, while having significant education policy and equity implications (Welsh & Little, 2018).

In a longitudinal study focusing on the impact of exclusion upon employment, Madia et al used data from the ‘Next Steps’ study, revisiting young people up to the age of 25/26 who had experienced school exclusion in early adolescence. The study found that there was a correlation between school exclusion and an increased risk of being unemployed, of being economically inactive and earning less. They also concluded that school exclusion does in fact represent a precursor to exclusion from society in adulthood and as such, understanding the implications of exclusion to include the impact upon the individual and also to better inform the costs to society are vital as little is known about them (Madia et al, 2022).

School exclusion has been found to show short- and long-term difficulties, both in terms of psychological implications and life outcomes including a connection between exclusion and ‘knife carrying’ and drug use (Martin-Denham, 2020b). There is also some evidence that children who were excluded can experience high levels of psychological distress in comparison to their peers (Ford et al., 2021). While this research shows a correlation between school exclusion and poor outcomes, a causal connection was not confirmed.

The literature highlights that there is a need for further research into the impact and implications of school exclusion upon the individual and on the costs to society. What is also scarce is the literature on any positive outcomes to being excluded from school. This is less frequently explored (Parker & Ford, 2013), yet some research invites us to think about alternative narratives around school exclusion. Leaving mainstream education and entering into Alternative Provision (AP) can be a route offered after school exclusion. AP can focus on stronger relationships between teacher and pupil (Fitzsimmons et al, 2021), and on more therapeutic education practices (Solomon & Thomas, 2013), both of which are shown to improve mental health (McLaughlin & Clarke, 2010, Diamond, 2012). In this sense, an exclusion from a mainstream education setting may bring about an effective gateway to getting the support that a child or young person needs (Parker et al, 2016).

There is much literature to support alternative approaches to school exclusion. This literature includes trauma informed education (Eggleston et al, 2021), rejection of behaviourism (Kohn, 1999), restorative practice (Smith et al, 2022), cultivating school belonging as a strategy for inclusion (Allen & Kern, 2020), whole school approaches to compassion (Coles & Gent, 2020), or attachment awareness programmes (Rose et al, 2019).

Finally, the vital importance of education for children in care is often overlooked, yet the relationship opportunities that school presents are of utmost importance with the capacity to provide stability, calmness and relief from the complexities of their lives. However, children in care may instead find that school is a battleground, a hostile environment where they feel unheard (Melkman, 2023).

4.4 Belonging

The interest in exploring belonging through the intersectional experiences of being a child in care and being excluded from school has arisen out of a curiosity about how these potential disrupters to belonging are made sense of in adulthood. The need to belong, as a fundamental human and therefore universal motivation, was a hypothesis that was reviewed and explored by Baumeister and Leary (1995). They suggested that belonging is a sense of fitting in or feeling like you are an important member of a group, and indicated that close family gives each of its members a strong sense of belonging (1995). Baumeister and Leary's (1995) work has inspired much research into belonging. The interest in belonging was further explored by Wright (2015), who hypothesises the reasons why:

> "If belonging resonates because it means things to people, if it means different things to different people, if it is used in widely disparate ways, then perhaps what is most important about the term is the texture of how it is felt, used, practised and lived" (Wright, 2015, p. 392).

Belonging is multi-dimensional and is distinguished by thinking about belonging as something that is built up over time through everyday practices, and belonging as having membership or a citizenship of a place (Antonsich, 2010). Developing a sense of belonging has been defined by the extent to which a person feels accepted, respected and supported (Goodenow & Grady, 1993). Maslow's Hierarchy of Needs model argued that physiological and safety needs have to be satisfied before love and a sense of belonging can emerge (Maslow, 1968, 1971) and Bronfenbrenner' ecosystems theory invites us to think about layers of belonging presented in concentric rings with the child in the centre (Bronfenbrenner, 1979). Allen (2021) further suggests that adopting a lens of belonging allows one to view humans as relational creatures with a natural and deep desire to bond with one another.

The literature on belonging is extensive, covering a multitude of ways of thinking about and of examining this very human experience. For example, there are several books simply called Belonging or that have Belonging in the title. The Irish Priest John O'Donohue describes belonging as a hunger that is an echo of our eternal heritage (1998), which for children who have experienced disruption to family connection, or even a complete severing of that family connection, raises the question of how loud that echo might become. A memoir of place and beginnings chronicles one woman's search for justice for the 796 babies found in a sewage tank in a mother and baby home in Tuam in Ireland (Corless, 2021). Exploring intergenerational displacement, enslavement and racist victimisation, bell hooks (2009) focuses on belonging and place, arguing that not having a sense of belonging had limited strategies for survival, cultivated deep grief and intensified observing structural exclusion. From a UK perspective, the first ever black chief constable's memoir shares a story of searching; as a black child in care forcibly removed from his mother, a black man in the police force and as an adult, the impact of learning that his mother loved him after all became apparent from gaining limited access to records of his childhood (Fuller, 2019).

Theorising belonging is complex as we can have many identities and potentially feel that we belong to many places and spaces. Furthermore, the way we feel that we belong or not may change across the life course. Yet, belonging is about connectedness, so is therefore always relational (Halse, 2018).

4.4.1 Belonging Disrupted - Home

The concept of the need to belong is embedded within social psychology and provides a framework to understand social behaviour (Over, 2016). There is evidence to suggest that children seek and form social bonds and that a lack of social bonds is detrimental (ibid). Further, it is argued that relational poverty is a better indicator of poor outcomes than adversity (Hambrick et al, 2019). Relational poverty theory refers to being poor in community, arguing for a relational analysis that shifts the lens away from contextualising poor outcomes in life as individual failings (Feldman, 2019). When close relationships are experienced in the developmental period of childhood, this supports the development of self-esteem and emotional balance (Chimange & Bond, 2020). Pearce (2017) argues that the development of secure attachment relationships can be achieved through the CARE model which stands for consistency, accessibility, responsiveness and emotional connectedness. It was only after attachment became identified as a fundamental component of childhood development that the concept of belonging began to be explored and its importance recognised. Belonging is intrinsically connected to relationships, and while it might be possible to argue that belonging is cultivated within those secure attachment relationships, it is more difficult to establish if belonging develops at the same time as attachments or attachments develop at the same time as belonging (Chimange & Bond, 2020).

Developmental trauma, disrupted attachment relationships, disrupted home settings and a general lack of continuity have been found to have an impact on the sense of belonging as experienced by children (Skoog et al, 2014). Children enter into the system of care for a variety of reasons with the largest category being abuse and neglect (DfE, 2019) which demonstrates an absence or a rupture of the components of Pearce's CARE model as outlined above.

Belonging, it has been argued, is a feeling that you are an important part of the group, of the family, and has been described of as feeling at home (Yuval-Davis, 2006) which is an idea that becomes complex when thinking about children in care. It is possible that what matters most is having a sense of belonging that is not about the environment but rather specific to the people within that environment (Holmes et al, 2018). Regardless of the reasons that children enter into care, there is disruption to the daily relationships around the child, a loss of attachment figures (Sulimani-Aidan & Tayri-Schwartz, 2021), instability (Skoog et al, 2014) and the presence of early childhood trauma. Furthermore, those coming out of care are likely to have less in the way of relational capital otherwise thought of as access to high quality relationships, while at the same time often receive little in the way of support (Sulimani-Aidan, 2021). Two main features of belongingness identified by Baumeister and Leary are the need for frequent personal contacts with others, and the perception of a stable relationship (1995), highlighting particular challenges for those who have experienced care.

4.5.2 Belonging Disrupted – School

School belonging, it has been argued, is experienced as a feeling that takes place within the school community (Allen & Kern, 2020), and research consistently shows that positive relationships with teachers, who offer emotional and instructional support, are associated with a higher sense of school belonging (Allen et al. 2018; Joyce 2018). Alongside relationships with teachers, supportive relationships with peers and parents are also positively associated with school belonging (Allen & Boyle, 2018; Slaten et al. 2016). Belonging can be cultivated through deepening connection; connections with teachers, with parents, with peers, with oneself, with learning and with help (Allen & Kern, 2020). Some argue that focusing on attachment relationships for children and young people who are in care will help develop a sense of belonging, and therefore provide many of the benefits that come with feeling a sense of belonging such as self-esteem and resilience (Chimange & Bond, 2020).

Exclusion impacts on a child’s sense of belonging to school, and ruptures the relationships between pupil and teacher, a relationship which can help children thrive, and is another psychological implication of school exclusion (Martin-Denham, 2020b). The impact of losing relationships within school appears in wider society where social exclusion can follow in the community (Paget & Emond, 2016). How young people experience belonging shapes their sense of self and identity, defining their relationships with peers, with family and within their communities; school can thus be experienced as inclusive or isolating (Halse, 2018).

Another risk to belonging concerns the fact that those in care are much more likely to make school moves that are *not* exclusions. For example, they may move school because of a change in placement or return to the family of birth. Transitions will also impact the sense of belonging

(Francis et al, 2021) and we find that these moves also have a negative impact on educational outcomes (Sebba et al, 2015). Importantly, it is argued that there has been a decline in school belonging, greatest for those students from disadvantaged social backgrounds as well as for low-achieving students (Högberg et al, 2021).

4.4.2 Space and Place

The conceptual ideas around spaces and places are worthy of exploration here, as children in care who were excluded from school are highly likely to have moved around a vast amount of spaces and places. Massey argues that spaces are interrelational, as a sphere where a multiplicity of existence is possible and is co-constructed by those within that space (Massey, 2005). Low invites us to think about the social production of space (p.69, 2017) which, when connected to explorations in Chapter Three, can highlight the production of spaces inhabited by children in care and in education settings, and how those spaces are in relationship with policy, legislation and public opinion. Low goes on to explore the emotion of space (p.151, 2017). In introducing emotion, for example, it can be considered that a child may be told they are going to live in a foster 'home' but practices within the home may feel like it is not home. Yet it is still a home, a 'place', it just is not experienced as one. It is a 'space'. Similarly with a school; the school may have very exclusionary practices within it that isolates, shames or problematises the child. However, it is still a school, a 'place', it just might not feel like one and be a 'space'. The emotion of space, or of even the anticipation of entering a place that becomes a space, connects with cultivating belonging. This intersection of emotion and Massey's importance on relational and co-constructed requirements may be where space becomes place as a 'place' and "is formed out of the particulars set of social relations which interact at a particular location" (Massey, p.170, 2018). Place, it seems, is more boundaried while space is more abstract (Gieseking & Mangold, 2014).

4.5 Intersectionality

The literature demonstrates how researchers have grappled with the complex interplay of a multitude of intersections, although perspectives from those who have lived through these experiences as children have too often been ignored. Introducing intersectionality as an analytical tool that facilitates understanding of care and exclusion raises the experience of these areas as marginalising. Intersectionality is rooted in black feminist and critical race theory and offers a way to move away from marginalisation and exclusion and into thinking about social empowerment and reconstruction (Crenshaw, 1991). Furthermore, the concept of intersectionality provides a tool by which to understand social inequality and inequity and that enables us to think beyond one-dimensional explanations for, and explorations of, marginalisation, stigmatisation and inequity (Hill-Collins, 2016). As a theory, it helps us think about complexity and how different aspects of ourselves in the society in which we live and the time that we are born, influence and interplay with each other. This study is interested in the intersection between having been in care and having been excluded from school. However, it also recognises some of the many other areas that intersect with care and with exclusion such as race, gender, class, Special Educational Needs and Disabilities (SEND), poverty, mental health and criminal justice.

The inception of intersectionality as a critical theory invites the reader, the author, ordinary people, the policy maker and the practitioner, to think differently about the problem (Hill-Collins, 2016). The review of the literature highlights the complex ways in which people experience marginalisation across many aspects of the multiple identities they have, and it is simply not possible to think about care, exclusion and belonging without also thinking about intersectionality. An additional consideration arises in thinking about the potential age range of participants in a study that seeks to ask adults about childhood experiences. This undoubtedly requires us to not only think about intersectionality, but also of the historical time that we individuals have developed in and the differing historical worlds to which each person across the decades will have been exposed (Brady & Gilligan, 2018).

4.5.1 Stigma

Much has been written about stigma, building upon Goffman’s seminal work which defined stigma as a social process that was discrediting to individuals and groups based upon a perception of difference that affected the way a person was seen as a whole (Goffman, 1963). Goffman considered that types of stigma came about because of mental illness, physical disabilities and identification with a particular race, ethnicity or religion, which has taken place. This focus on particular characteristics that are fixed and distinct, relying on the idea that there is a ‘norm’ has created much interest in the study of stigma. A multi-disciplinary interest, a debate over the definition (Link & Phelan, 2001) and a rejection of the term by those with lived experiences (Pescosolido & Martin (2015) have dominated the discourse. Having been taken apart within many contexts, disciplines and accounts of experiences, stigma is now more broadly understood as a social process (Manago et al, 2022) or as the “machinery of inequality” (Tyler, 2020, p.1). It has been argued that it is now time to return to a broad theoretical account of stigma and how we can understand it (Manago et al, 2022). In recognising that stigma and marginalisation move with time, culture and context, Manago and colleagues set out to provide a transferable theoretical framework that has the malleability to embrace stigma, which they argue is a moving target. Their theoretical framework known as the Discourse Value Framework (DVF) focuses on the area of stigmatisation using a model of Deficit, Diversity and Pride, which serves to resist normative values and acknowledges how those that are stigmatised can resist or reinforce stigmatisation.

There are strong indications that many adults who have been in care have unknowingly applied this framework, demonstrating a shift away from persistent narratives about having been in care and what happens to adults who were in care as children (Cherry, 2022). Yet the connection between stigma and care remains a widely under-researched area. Chapter Three's historical interrogation into policy and legislation as it pertained to child welfare provides some insight into the stigmatisation of children in care in understanding the history of poverty, of unmarried mothers, and of early connections made between child welfare and youth justice systems.

The National Youth Advocacy Service (NYAS) produced a report addressing care leavers, stigma and mental health (2020). In that report, they explore the very particular experiences faced by those leaving care, sharing concerns about labelling and stigma, and wanting to cut ties with their 'corporate parent' which thereby distanced themselves further from potential support. Stigma affects the wellbeing of children in care, which was highlighted in a study in England (Wood & Selwyn, 2017). Stigma also creates secrecy about being in care: children in foster care were found to 'manage stigma' through the process of perceiving and internalising a sense of stigma, through recognising that there are consequences to their care status, and that this can be managed through secrecy (Dansey et al, 2019). Transitioning into adulthood for those who were in care, while living with the internalised feelings of loss and stigmatisation, is described as emotional work (Østergaard, 2023). Alongside disadvantages such as limited educational opportunities, as highlighted earlier in this chapter, children in care are also often found to be on the receiving end of stigma, exclusion and isolation, and this is further described as an epistemic injustice (Fieller & Loughlin, 2022). As highlighted by Janzen, "given that children in care experience social and educational exclusion, it is not surprising that they sometimes report feeling stigmatized" (p.277, 2023).

4.5.2 Trauma

There is extensive research focused on the impact of early childhood adversity (Shonkoff, 2000, Shonkoff, 2012, Sroufe, 2005) and the impact of developmental trauma (Schore 2001, Porges, 2011, Siegal 2011, Gerhardt 2014). How early childhood developmental trauma affects learning has also been explored (Geddes, 2006, Nash & Schlösser, 2015, Bombèr, 2020). While the word 'trauma' has its origins in the Greek word 'traumata' which means wound (Kolaitis & Olff, 2017), modern traumatology spans just a few decades and focuses on individual psycho-social, psycho-biological and emotional reactions to traumatic events (Figley, 2006). There are many definitions of trauma such as it being 'an event or series of events such as abuse, maltreatment, neglect or tragedy that causes a profound experience of helplessness leading to terror' (de Thierry, 2017, p.14). A definition that more closely encapsulates the intersectionality with social conditions is one which states that trauma is "an experience or series of experiences and/ or impacts from social conditions, that break or betray our inherent need for safety, belonging and dignity" (Haines, 2019, p.74).

Developmental trauma describes ongoing exposure to distressing events in early childhood in relational contexts (Schore, 1994; Van der Kolk, 2005; Perry & Szalavitz, 2017; de Tierry, 2017; Treisman, 2017). The impact of early childhood trauma can be found in the understanding that neuroscience has brought us around brain development in the early years, and the speed with which humans develop (Shonkoff et al, 2012). Much research indicates that developmental trauma can disrupt the development of brain architecture (Eagleman, 2020; Cozolino, 2017 increase the risk for stress related disease (Felitti et al 1998) and cognitive impairment well into the adult years (McCrory at al, 2011, Shonkoff, et al., 2012). Furthermore, some argue that children who experienced early developmental trauma struggle to manage impulses, develop adaptive coping strategies and take in new information (Van der Kolk, 2015). The impact of trauma for children and young people is that it can present as difficulties in emotional regulation, dissociation, sensory processing and speech and language, all areas that will impact the trajectory for learning (O'Neill et al, 2010).

Porges' Polyvagal Theory (2011) argues that we detect safety when we feel threatened through using what Porges refers to as neuroception. We search faces for smiles, warmth and connection and when we cannot detect safety, our autonomic nervous system (ANS) will take the decision, on our behalf, to have a flight or fight response with a freeze response to follow if fleeing or fighting has not proved successful. As trauma overworks the ANS, it can struggle to know when it needs to be activated or not. This is often referred to as hyper vigilance.

The growth in the development of creating Trauma Informed Education settings accounts for what the research has demonstrated: trauma impacts emotional regulation, impulsive behaviours and the body's demand for safety. As such, a trauma informed education safety measure is "a whole- school, multi-tiered approach providing support at the student, school personnel and system levels can help mitigate the effects of trauma and chronic stress." (Dorado et al., 2016, p163). Trauma is an embodied experience and early childhood developmental trauma occurs prior to speech; as such, it is important to have a sense of how trauma embeds itself in the body and the mind and how this presents in our body in its task of ensuring we survive and in our implicit and explicit memory (Badenoch, 2018).

The theory of plasticity, which is the brain's ability to change and shift neuronal wiring based on experiences and relationships (Eagleman, 2020) needs consideration in the addition of trauma into the analysis of human experience (Wastell & White, 2017). In other words, the temptation for reductionism and determinism is present, yet ignores the rest of the 'science' that informs so much of how we understand trauma. It is important that we distinguish between what is data and how data is interpreted. For example, there is an extensive critique offered regarding the impact on brain architecture of early developmental trauma that argues that the science works for a specific neo-liberal political agenda that seeks to blame parents and avoid tackling social conditions (Gillies et al, 2018). However, a recent systematic review is clear; early adversity is one of the most potent environmental predictors of poor outcomes across the life course, particularly in poorer physical and mental health (Gerin et al, 2023). In conclusion, the weight of the literature suggests that the prevention of early childhood trauma is vital. However, this focus on early childhood trauma can be contextualised within the theory of intersectionality, which allows us to think about the complexities of a person, the historical context in which they develop, and the particular strengths and vulnerabilities they have available to them.

4.6 Considerations

The intersection between school exclusion and care experience from the perspective of adults who had those experiences is limited within academic literature. While there are some intersectional studies of care experience, the literature on adults across the life course with care experience remains under-researched. Research on how making sense of belonging with these two experiences is not available, namely, care experience and how it impacts the life course, how belonging is understood in relation to care experience and school exclusion, and the particular intersection between school exclusion and care experience.

The addition to the research that this study brings lies in providing in-depth perspectives regarding the impact of having been a child who was in care and also excluded from school through the lens of belonging. Furthermore, it offers insights into how this was made sense of and understood by individuals who were in care and excluded from school, and ultimately how these experiences have shown up in relationships, in working life, in parenting and in health. The research questions explored in this study thus ask: ‘how have participants made meaning from their experiences of being excluded from school and being in care?’, and ‘how do participants understand belonging in the combined context of care experience and school exclusion, and the impact of that combination upon their adult life?’.

4.7 Conclusion

This chapter has reviewed the academic literature. It has shared the process by which this has been undertaken. The chapter has explored the literature on the experiences of being in care and of educational exclusion, on belonging and its relationships with both these experiences, and on stigma and trauma, finishing with a discussion on intersectionality. The review has highlighted gaps in the literature on the intersection between care and exclusion, and how those with these experiences make sense of belonging; particularly scarce is literature from the perspective of the adults that these children have become. The chapter concludes with a brief reflection on the contributions of the current study to this literature; these contributions will be discussed in more detail in Chapter Nine. In the following Chapter Five, the methodology to conduct this study is outlined.

Chapter Five –Research Design and Methodology

5.1 Introduction

This chapter explains the research design and explores some epistemological and ethical reasons for the decisions taken. First, the research questions are posed and the overall design is explained. Then the participant recruitment strategy is explained, which used three channels (Twitter and two charities). Data collection methods are outlined, notably a three-stage process of a survey, a biographical writing task and an online semi-structured interview. Then language is reflected on in thinking about ‘data’ and ‘collection’ and considering this terminology in the context of gathering lived experience insights and understandings from the final 10 participants. Analysis and interpretation are then made clear alongside the methodological decision to use IPA. Finally, I address ethical considerations and research challenges and limitations, including the complexities of researching from the perspective of having had similar lived experiences with the participants.

5.2 Research Questions and Overall Research Design

The literature review set out in Chapter Four highlighted that there is little research that focuses on the intersection of care experience and school exclusion. There is also little in the literature regarding how adults make sense of belonging when reflecting back on their experiences of this intersection. The overarching research question asks:

How do care experienced adults who were also excluded from school make sense of belonging?

In order to address the research question, two sub-questions are asked. These are:

1. How have participants made meaning from their experiences of being excluded from school and being in care?

2. How do participants understand belonging in the combined context of care experience and school exclusion and the impact of that combination upon their adult life?

The objectives are to:

- Examine the double challenge of when family rupture results in state intervention and also school exclusion.

- Understand how a sense of belonging has been interpreted by these participants, and how or if that ‘fundamental human need’ (Baumeister and Leary, 1995) has been met for them.

- Explore the participants’ accounts of school exclusion and its impacts.

The overall design is IPA, which is a qualitative research approach originating from the field of psychology and strongly influenced by the hermeneutic tradition of phenomenology. It examines how people make sense of their lived experiences (Smith et al, 2021), and is not simply an analytical technique, but an idiographic approach to qualitative inquiry rooted in both phenomenology (through its focus on experience) and hermeneutics (through its methodological emphasis on interpretation). As such, it frames the choice of recruitment, of methods for gathering and analysing data, and of the conceptualisation of interpretation. In light of this, a multi-modal approach to recruitment and to the methods of data collection was chosen that was informed by IPA principles, which is explored further later in this chapter.

Multi-modal contributions were aligned to the central aim of IPA which is to understand and interpret how individuals make sense of their lived experiences (Smith, Flowers & Larkin 2021). The first data collection method was a survey, the purpose of which was to build an understanding of who was potentially going to be taking part in the study and to check that there was a diversity of experience, gender, ethnicity and age among the potential participants. As such, it gave insights into which parts of the relevant population may be reached through my recruitment processes (which are explained in detail in section 5.3.1); thus the survey acted as a filtering device while also being a data collection method. 15 respondents of the 28 who expressed interest, as illustrated in Figure 2, completed the survey. I then invited each of the 15 respondents to undertake a biographical writing task of up to 250 words or, as an alternative, to create a multi-media or art piece. 11 participants completed this, one of whom subsequently withdrew from the study. Finally, I conducted 45–60-minute one-to-one online semi-structured interviews with the remaining ten participants. In line with the principles of IPA, the interviews included a small number of core questions and many additional prompts depending on the participants’ answers to core questions.

5.2.1 Doing Interpretative Phenomenological Analysis (IPA): a reflective account

IPA helps me answer my research questions from this perspective and offers a clear framework on how to develop the research design, including ethics, sampling, and the methods for gathering and analysing participants’ accounts of their lived experiences and interpretations.

It is the intention of IPA to engage with individuals and their ways to make sense of major life experiences. Making sense of our lived experiences is something that we engage in as humans but in this context, it is the researcher's role to invite the sharing of this meaning making, observe it and then make sense of it (Smith, 2018).

IPA is a relatively recent approach which was first developed in the 1990s within health and counselling psychology, although it has been argued that IPA has confused phenomenology with therapy (van Manen, 2017). Qualitative research can be therapeutic regardless of whether this is the intention of the research, yet this is unacceptable to van Manen in an academic context. However, a by-product of qualitative research *can* be therapeutic (Rossetto et al, 2014, Newton, 2017) and while it is not my intention to explore that here, it renders van Manen's critique of IPA questionable.

There are four quality indicators of good IPA; a compelling narrative highlighting sections of participant's extracts, developing a vigorous experiential account thorough analysis and interpretation, as well as idiographic depth (Nizza et al, 2021). These indicators draw on the double philosophical roots of the approach, which are in hermeneutics, in the interpretative focus, and in phenomenology, in the prioritisation of experience.

5.2.2 Phenomenological roots of IPA

In addition to thinking about how hermeneutics helps us to understand how humans make sense of their world, phenomenology places lived experience at the heart of its understanding by 'returning to 'the things themselves' (Langdridge, 2007). Phenomenological psychology is concerned with how we focus our attention on the experience of things as they appear, which it calls intentionality, the directedness of consciousness and the experience of (relationships between) people and intersubjectivity (Langdridge, 2007); these aspects of phenomenology form the basis of my methodology. Phenomenology supplies the ontological framework from which to understand the process of gathering data that has lived experience at its centre, hermeneutics offers the epistemological framework, and IPA provides the operational means by which to go about data collection.

Providing a deeper way of thinking about meaning-making and consciousness, *epoche* stems from Husserl's 'intentionality' which argues that the mind is an instrument for making connections with the world; the mind is purely a connector (Van Deurzen, 2009). It is this relationship between the mind and the world that makes phenomenology the central chosen methodology to undertake this research. This is expressed in an understanding that "The activity of my consciousness is utterly linked with the intended object and it is only because I am in this way connected to the world that things are meaningful to me" (Van Deurzen, 2009, p37). A student of Husserl, Heidegger argued that all understanding was gained through how we interpret life (Heidegger & Stambaugh, 1996) and that how we understand is a circular structure. Existence is living in the present and understanding our experiences is always ongoing. We may misunderstand our experiences but that is still an understanding; there is something rather than nothing. Central to answering my research questions is reflecting on, and making sense of, the participants' understandings of their past experiences.

The study focuses on adults who have lived experiences at the intersection of both being in care and being excluded from school, and on how the participants made, and make, sense of those experiences in relation to belonging. The research invites participants to recollect past experiences in order to support answering the research question.

The experiences that the study is investigating happened during the period of child development, a period widely accepted as occurring between in-utero to 25 years old. This is when humans develop individually (agency), culturally (common and contested beliefs and values for action) and socially (constructing oneself and experience in relation to others) (Raeff, 2016). There is a complexity in researching events and experiences that have happened in childhood. It is understood that brain development continues to around 25 years old, yet childhood is still seen as something that ends at 18 years old. Being in care often ends at 18 years old and school exclusion can only take place during compulsory education. The lines drawn are arbitrary and are not as firm as they may seem when seeking selection criteria for inviting participants to take part in the study. The interpretation of these experiences in relation to belonging during childhood may provide helpful insights regarding how belonging is made sense of, how we search for it, how, and whether, we find it and how we might support children's services and school settings to cultivate it. As noted in the literature review, belonging is important because it is widely understood to be a fundamental human motivation (Baumeister & Leary, 1995) and the implications of not belonging can impact our wellbeing (Verhagen et al, 2018). Belonging can be understood as a "dynamic construct shaped by our interactions with people, places and things" (Guerin & McMenamin, p.1, 2019) which suggests that those specific interactions by an individual with unique people, places and things will have a particular impact on how belonging is understood by that individual.

5.2.3 Hermeneutic roots of IPA

Hermeneutics centralises three concerns: the nature of consciousness, the nature of truth and the importance of language (Zimmermann, 2015). In understanding how the participants of this research made sense of their experiences, these central themes support how we might interpret experiences. Consciousness, hermeneutics argues, shapes how we interpret the world and how our attitudes are shaped by our childhood experiences, our upbringing. Rather than the process of interpretation being linear, interpretation draws upon the idea that the whole and the part have relationships with each other. For example, to understand a word, it needs contextualising into the sentence and the sentence into the paragraph (Smith et al, 2021), but the paragraph and sentence only have meaning because of each word. Truth happens *to* us; it is an event; the event is being *placed* in care, while being *in* care is not an event. In addition, language helps us make sense of our experiences and how we might communicate them to others. The world we inhabit is interpreted through language and how we transmit culture or cultures. In thinking about the care system and the education system, we might consider them to be different cultures to make sense of, with their own images, signs and symbols (language), that young people attempt to navigate. The events of being placed in care or being excluded from school are very much 'events' that happen to children and young people at a time when consciousness is forming. It is this tradition of understanding humans that supports why IPA is the appropriate methodological position by which to answer my research questions.

Gadamer argued (Gadamer & Lawrence, 1982) that what we encounter means something to us and that is what matters. We interpret and gain understanding in conversation; people are not an object but a conversation partner (Burbules et al, 2015). The aim for Gadamer is to not live in the past but learn something new from it (Smith et al, 2021).

In the process of reflecting back and making sense of past experiences, Ricoeur asks us to think about language as to how we connect to the social world through the language we use and the stories we tell about it (Riceour 2010; see also Van Deurzen, 2009). Ricoeur further argues that human existence is like a language, formed within the culture in which we are living. We access the self through how we interpret the world we are living in through our language, cultural beliefs and stories (Ricoeur, 2010). Describing making sense of the process of interpretation, Gadamer, in discussing poetry, also invites us to listen closely:

> "The reader who is interested in understanding and decoding... must clearly not be hurried. Such a reader need not be scholarly, or especially learned. He or she must simply try to keep listening" (Gadamer & Krajewski, 1997, p.77-78).

The hermeneutic view of language as important is particularly relevant regarding the experiences that the participants have had was mentioned earlier. Children who are in care are exposed to a variety of other humans, far more than a child outside of this system. These adults also use a very particular language, for example ‘contact’ to describe a meeting with family members or ‘respite’ to refer to something foster carers do to have a break. We might also think about terminology such as ‘birth parents’ to mean parents or 'in care’ to mean living away from home or ‘placement’ to mean where the child lives. Those to whom children in care are exposed come from many walks of life in a way that children living in their families are not with their own unique relationship to the world. Children in the care system may have had several social workers, several foster carers and those living in and around the family, maybe residential workers, while also attending several different schools. They will also have an Independent Reviewing Officer, a school nurse, someone assigned to them from the Virtual School and potentially someone from the Children Adolescent Mental Health Services (CAMHS), all bringing their different agendas, motivations and perspectives on that child. These relationships are paid ones where people can leave, take holidays or be off sick. They are quite unique to the care experience. Meaning making of all these diverse types of relationships within the context of making sense of belonging and how that is understood is central to this research’s exploration of care and exclusion.

5.3 Respondents and Participants

Getting the right participants is crucial in qualitative research design as it can impact the findings and outcomes (Lopez and Whitehead, 2013). Having a range of recruitment methods would enable me to gain a socially and geographically diverse range of participants. In order to achieve a varied sample of participants who shared the intersecting lived experiences of having been in care as a child and also excluded from school, I needed to take different routes in my recruitment strategy. I chose three channels through which to recruit the participants; my own Twitter account, a national charity specifically working with care experienced adults, and a local charity working with people in, or on the fringe of, the criminal justice system. Figure 2 outlines each stage of recruitment and data collection for each channel.

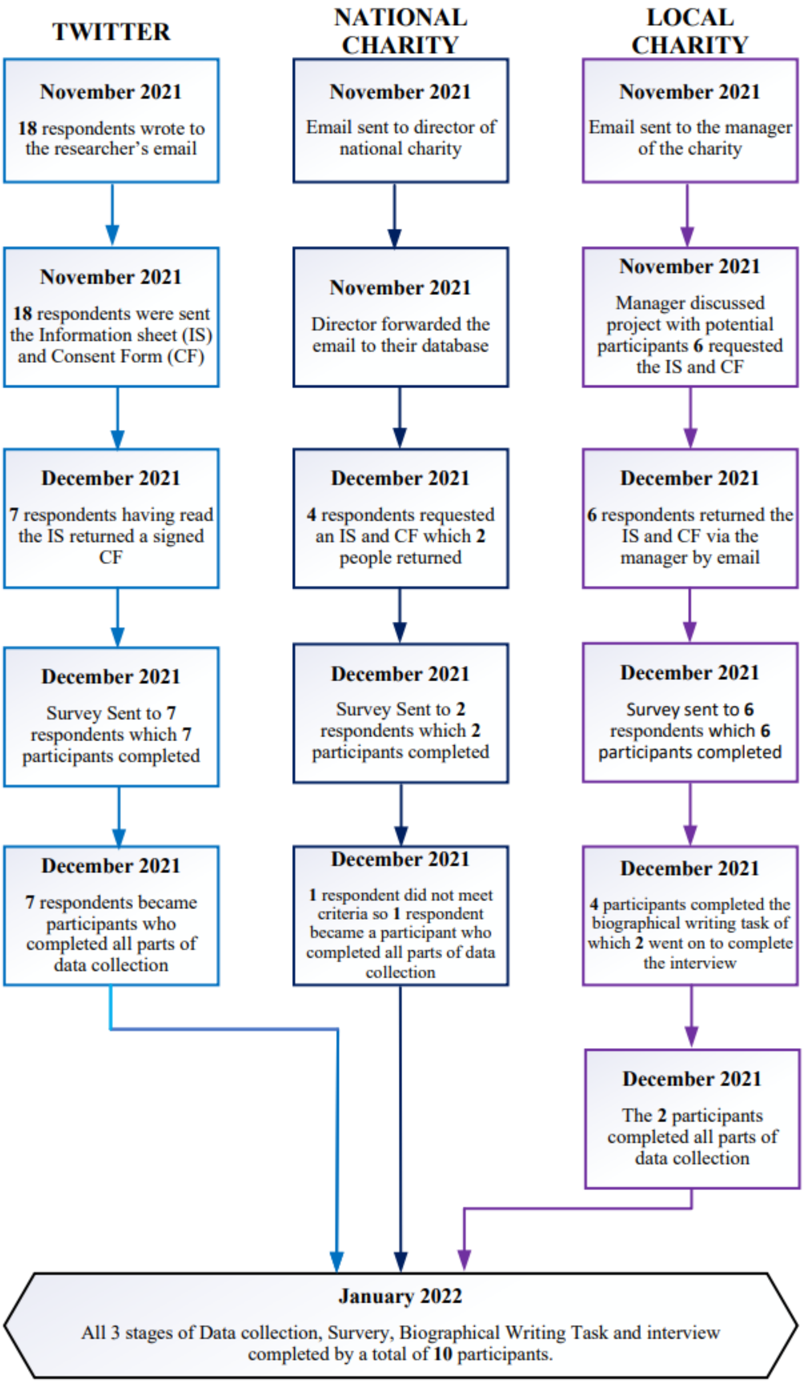


Figure 2 Participant Recruitment Strategy and Data Collection Timeline

In Figure 2, ‘respondents’ refers to those showing an interest in taking part while ‘participants’ refers to those who have consented at each stage and participated in each element of data collection.

5.3.1 Initial Recruitment Strategy

The recruitment strategy aimed to ensure that as many potential participants as possible could undertake the data collection methods and that I would not lose too many from those who had expressed an interest (Van Wijk, 2014). The different aspects of gathering data might be problematic for some potential participants, particularly those living with precarity, who had significant barriers to taking part or those who were juggling work, childcare and their own study or other demands. The recruitment strategy process had to consider all those factors and ensure that becoming a participant was as accessible as possible.

People who experienced both being in care as a child and school exclusion could be considered ‘hard to reach,’ for example due to being subject to discrimination or stigma, or because they may be vulnerable to harm should they be identified (Ellard-Gray et al, 2015). Thus, as a researcher, I aimed to ensure that I was accessible and as easy to reach by potential participants as possible. As such, I used the social media platform Twitter, where I have over 40,000 followers in this sector, to share information about my study and invite volunteers.

I also used my professional network of key collaborators from national and local charities to seek further participants indirectly, through ‘gatekeepers’ (Bamdad, 2021) at a national charity for adults with care experience, and a local charity that works with adults who are loosely connected to the criminal justice system. Once people from the database of the national charity had been contacted about the research by the organisation, they were given the option to contact me directly via email.

Recruiting participants through the local charity generated challenges that I had not considered. For example, before the formal data collection even commenced, potential participants needed an email address, the use of the centre, and support in accessing the information about the study and consent forms. However, the charity’s manager was able to support all these aspects of participation and continued to support participants throughout data collection.

5.3.2 Selection Process

It was important for me that everyone who showed an interest was valued and therefore responded to personally, from the very first communication – whether through responding to a tweet on Twitter or to a message conveyed through either of the two charities. The enthusiasm shown to tell their story suggested a desire, with which I empathised, to share something of themselves, to be heard, to have someone bear witness to their lived experience. Having followed on Twitter the reactions that people had regarding feeling unheard in the recent Care Review process (The Independent Review of Children's Social Care, 2021), I remained attentive to these reactions throughout my entire research approach to asking people to take part in this research.

Having chosen Twitter, the next stage was to choose the two charities and work with a key member of staff as a 'gatekeeper' in each. The gatekeeper had relationships with the participants, and it was *that* relationship that made their inclusion possible. This was highlighted by Aldridge (2016) and Rattani and Johns (2017) in their research where they specifically reference working with 'gatekeepers' to gain access to online communities, as all their data collection was also undertaken online. Utilising different ways of selecting participants required different approaches and raised a variety of challenges which will be explored further in this chapter. However, the systematic use of selection criteria, the Information Sheet and the Consent Form remained the same across all three approaches to gathering participants, which I will detail next.

The first step was to establish whether someone who came forward met the criteria described in Table 4 below.

Selection Criteria
1. Must have been in care (residential care, foster care, kinship) for a period of 3 years of more (concurrently or sporadically amounting to the total) 2. Must be a UK resident and have been in care in the UK

3. Must have been permanently excluded or expelled from at least one school
4. Must be aged 25 years or over at the time of the data collection
5. Be comfortable writing a short biographical writing piece (250 words) or producing a multi-modal response
6. Be comfortable taking part in an interview
7. Can give the time required throughout the stages should they move on to stage 3 of the selection process

Table 4 Selection Criteria

Meeting the criteria was not without challenges. The interchangeable use of ‘excluded,’ ‘expelled’ and ‘suspended,’ conflated fixed-term exclusions with permanent exclusions, and the changing language across the decades, such as that used prior to the Education Act 1986, was prominent. One respondent in an initial email exchange talked about being ‘isolated’ within school but not expelled out of it. The inclusion criteria asked that someone had experienced a permanent exclusion from a school building and yet the word exclusion was raising more than this, rather, the *feeling* of exclusion by potential participants was present throughout the recruitment process.

Once I and a respondent had established that they did meet the criteria, they were sent an Information Sheet (Appendix 2) for them to confirm their interest in taking part and then finally, the Consent Form to return (Appendix 3), enabling them to become a participant.

5.3.3 Twitter

Using the social media site Twitter as a platform for recruitment provided some advantages. The number of connections that I have on Twitter is a distinct advantage, of whom a good number are professionals with lived experiences of being in care. Twitter also raised several potential challenges that I needed to consider. With around 40,000 followers to my Twitter account, receiving a high volume of responses was a risk. It is for this reason that I chose to schedule just five tweets over one week to be released at various times of the day to include different days during the week, with one tweet on a Saturday and one tweet on a Sunday. Limited to 280 characters by Twitter, I wrote:

Are you an adult with care experience? Were you also excluded from school as a child? I am researching this experience asking how 'belonging' was made sense of in this context. For more information, please email me (No DMs pls) on [university email address]

In total, I received eighteen email enquiries from the five tweets sent. The eighteen respondents were all then sent the Information Sheet (Appendix 2) and Consent Form (Appendix 3) within an email including a timeframe of a week to return them. Using Twitter as a method of recruitment yielded seven participants.

The purpose of the tweet was not to gain consent nor to be specific about the inclusion and exclusion criteria. However, having stipulated that care experience, school exclusion and that further information was gathered by writing to my email address, I was surprised that around 20 people responded publicly on Twitter rather than by email. The tweet generated several replies in this way by people who did not meet the criteria but wanted to be involved. As these conversations were now in the public domain, they now highlighted another area of concern regarding participant recruitment through Twitter, namely that I had lost any control of who shared, read or responded to the tweet (Ahmed et al, 2017, Fileborn, 2015). However, it could be argued that this is not dissimilar to methods of recruitment used in the past such as the use of newspapers or posters. Although made explicit in the CUREC and DPA forms, these ethical and potentially legal issues are not fully explored in research methodology literature, although the pandemic has changed the online behaviour of most people which has impacted how much has been done digitally, including via social media, in research since early 2020 (Vivyan, 2021).

5.3.4 Email Exchanges Following the Twitter Enquiries

Considering whether to take part in research creates an internal exploration that can potentially raise emotional responses that can have an impact. One respondent considered their position and wrote that they did not feel prepared at this time to take part in this research because it raised too many emotions. Revisiting areas of experience that have long since been pushed to the side can create an internal discomfort.

The inclusion criteria which stipulated that a person must have been permanently excluded from a school/place of education building, as highlighted above, proved difficult to apply. As raised in the literature review, school exclusion is more complicated than it first seems because there are different ways that exclusion happens. For example, some email respondents asked whether a secure placement counted as a school, as it had not been possible to attend school while in this placement. There was also a question raised around whether the potential participant was considered to have been excluded from school if they had refused to go back to a school because they had found it ‘traumatising’. In these email conversations, we spent time discussing the different situations to decide if they were permanently excluded from school in the sense of being unable to return to the school building. This distinction is important as exclusion from school has a complex history, creating confusion for those affected around what it means to be excluded. The language around exclusion is complicated by what has been described of as hidden exclusion (Power & Taylor, 2020) which can leave some excluded pupils unaccounted for in the exclusion statistics. The official way that exclusion is recorded as an ‘exclusion’ is decided by the person doing the recording (Daniels, 2003, p.137). Also, there are some ‘placements’ for children in care that deliver education on site. In two email examples, we decided that they had been permanently excluded and therefore they met that criterion. A further response indicated that the person did not meet the criteria, but the lack of clarity was still present. The person eventually understood that they had not been permanently excluded although they had often been temporarily excluded from the same school.

Another person talked about spending their early years in care, and stated that they ‘self-excluded’ and that school was not a ‘safe space.’ Home (lived in by the child in care) and school (education for the child in care living in that home) were inextricably linked; they were not separate spaces. They felt excluded just by being away from home, living in an institution. This research is asking adults to reflect on this experience, an experience described of as ‘brutal’ by one participant, all of which happened while they were a child.

The email responses left me with some doubts about my inclusion criteria and concerns that they might be too rigid. However, to really think about belonging, it felt important that I kept to this intersection of those who were permanently excluded from school during compulsory education and in care during that time for a period of three years or more. These emails demonstrated that even before being asked to write the biographical writing task, there was a desire to share deeply held experiences.

Finally, the other element of the criteria required the participant to have been in care for 3 years. Similarly to the discourse around exclusion, there is room for confusion about what may constitute being in care. The types of accommodation that someone may have been in, the language used by professionals and the different situations that can be classified as ‘being in care’, including a child’s home, while legally in care to the local authority, created some complications for meeting the criteria. Sometimes children might move between their family home and a foster placement while remaining legally in the care of the local authority. It might be difficult for a person to understand that they were in care for three years if they spent some of that time at home for example. To conclude, the desire for the research to take place with offers of help, stating that the research was important and that it needed doing, was mentioned by several email responders.

5.3.5 National Charity (for care experienced adults)

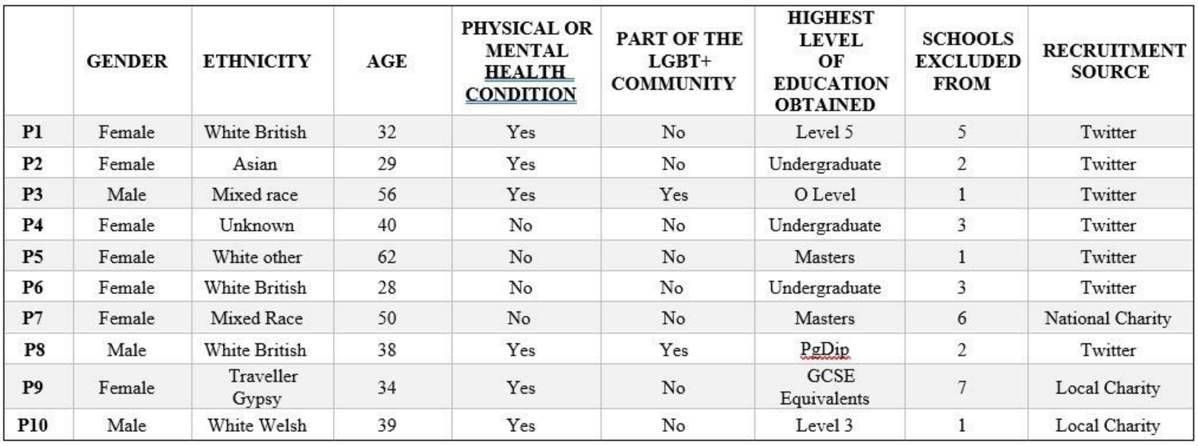
The second request after Twitter in the recruitment strategy was to a national charity. I asked the charity to send an email to everyone on its database, inviting them in the same way as I had done on Twitter, letting the manager know that I would send more information should it be requested. This request generated four responses, all of whom were sent the same email response as that sent to those expressing an interest through Twitter. Of those responses, two people returned the forms. As with the communication from the tweets, there was complexity around meaning for one of these two, who suggested that they had been ‘excluded’ from several residential homes but had always been able to return to the ‘same school’. This approach therefore ultimately yielded one participant.

5.3.6 Local Charity (working with those with lived experience of the criminal justice system)

Finally, a request for participants was sent to what I refer to as a ‘local’ charity, in that it works in a specific geographical location, the location of which will not be made explicit to ensure that it cannot be identified which could risk making participants identifiable too. This charity is a service that supports people who are connected to the criminal justice system (CJS). Flexibility had to be applied in how participants were gathered using this organisation and I worked closely with the Manager of the charity, the ‘gatekeeper’. Her relationships with this community gave her privileges and responsibilities that I did not have, and which ensured that the members of that community were represented, protected and assisted with any barriers to participation that they might have encountered (Rattani & Johns, 2017). Continuing a relationship of trust with the gatekeeper was paramount and built upon our existing professional relationship. The gatekeeper was a community advisor holding specialist knowledge and could provide safeguarding for the participants should it become necessary (Kay, 2019).

Many of the potential participants identified via this route did not have an email address or a device and many had complex circumstances to navigate, which meant that there were barriers that needed to be overcome to ensure that their voices could be heard. Overcoming these barriers was only possible because of the gatekeeper’s support. Having sent an initial enquiry about the research to the gatekeeper (as I did with both of the charities), I received an email response from her letting me know that there were many people who would meet the inclusion criteria. She also asked me several questions that required some thought, specifically, how many people did I want her to ask and whether I wanted a mix of genders.

The Information Sheet (Appendix 2) was sent to the Manager for her to talk through with those using the service who were interested in knowing more with the exact inclusion criteria within it and in order that this process could be as close to the other methods of recruitment used, I suggested that everyone be informed of the research and then we could see who would want to take part. I would then be able to supply the Consent Form (Appendix 3). A further ten people from this participant gathering exercise wanted to take part, taking the total potential participants from all three methods of recruitment invited to complete the Consent Form, to nineteen. Figure 3 below shows the diversity of the final group of ten, after selection and consent processes were completed and any withdrawals were taken into account.



	GENDER	ETHNICITY	AGE	PHYSICAL OR MENTAL HEALTH CONDITION	PART OF THE LGBT+ COMMUNITY	HIGHEST LEVEL OF EDUCATION OBTAINED	SCHOOLS EXCLUDED FROM	RECRUITMENT SOURCE
P1	Female	White British	32	Yes	No	Level 5	5	Twitter
P2	Female	Asian	29	Yes	No	Undergraduate	2	Twitter
P3	Male	Mixed race	56	Yes	Yes	O Level	1	Twitter
P4	Female	Unknown	40	No	No	Undergraduate	3	Twitter
P5	Female	White other	62	No	No	Masters	1	Twitter
P6	Female	White British	28	No	No	Undergraduate	3	Twitter
P7	Female	Mixed Race	50	No	No	Masters	6	National Charity
P8	Male	White British	38	Yes	Yes	PgDip	2	Twitter
P9	Female	Traveller Gypsy	34	Yes	No	GCSE Equivalents	7	Local Charity
P10	Male	White Welsh	39	Yes	No	Level 3	1	Local Charity

Figure 3 Final Participants

5.4 Data Gathering

In this section I will outline in more detail the multi-modal methods used to collect data from the participants, making explicit some of the challenges that ensued.

5.4.1 Methods

The most common method used in IPA is a semi structured interview (Smith & Nizza, 2022), and this formed the core of the data collection. Interviews were preceded by an online survey to gather positionality data. What followed the survey was a biographical writing task or art piece so that the participants could share their thoughts in a different way than is achieved through an interview. Each of the methods is explained below.

5.4.2 Part One: The Survey

The initial purpose of the survey was to help understand the potential population and to ensure that my sample was diverse, alongside informing the decision as to whether further recruitment was required to achieve more diversity. Twenty-eight people in total (Twitter = 18; national charity = 4; local charity = 6) were sent an Information Sheet and a Consent Form, of which seventeen signed and returned the Consent Form (Twitter = 7; national charity = 4; local charity = 6). Of the seventeen, fifteen completed the survey (Twitter = 7; national charity = 2; local charity = 6).

The survey enabled me to get a sense of the positionality of the participants and to check that the purposive sample had sufficient demographic and experiential diversity to enable the collection of rich and varied data. However, given that the initial survey responses had been given anonymously, the survey questions (Appendix 4) were also asked directly in the follow-up online interviews to ensure that I understood the specific context of the individual participants and to add depth.

5.4.3 Part Two: Biographical Writing Task or Art Piece

The idea of using writing alongside an interview was driven by my experience as a writer and of having facilitated many writing spaces, observing that the words we write when alone with ourselves are often quite different than the words we speak. I have also found that my writing voice has brought personal healing with it due to developing and expanding an articulation of my internal world, something I was asking of the participants. In writing on a subject such as belonging there is also an invitation to facilitate resistance (Morrison, 1994) which occupies a different space than the spoken word in an interview. As will be noted later in this thesis, one of the themes identified through the analysis makes explicit this resistance (Rejection of Stigma).

All the fifteen participants who completed the survey and consented to participating in the writing task were invited to write up to 250 words on their thoughts about belonging in relation to being in care and/or being excluded from school. I also invited those who may find writing a challenge or a difficult form of communication to offer a piece of art or another form of communicating thoughts on belonging. The guiding question was:

> *That the need to belong is a fundamental human, and therefore universal, motivation was a hypothesis that was reviewed and explored by Baumeister and Leary (1995).*

> *They suggested that belonging is a sense of fitting in or feeling like you are an important member of a group and indicated that really close family gives each of its members a strong sense of belonging.*
>
> *What do you understand by the word belonging? What does it mean to you? Have you experienced belonging? If so, how did you know?*

Writing and artistic expression may bring up feelings that felt more comfortable not being verbally expressed in an interview. The feelings may have been too intense, or the benefits of writing may have been experienced as a therapeutic endeavour (Aldridge, 2016) in which they had agency rather than being confined to the interview questions created by the researcher.

The biographical writing task or art piece enriched the data with personal and open forms of expression, as illustrated in Table 5. In order to sit and write something, we must think about it, reflect upon it, and spend time formulating our way of expressing an aspect of our internal world. Part 2 was thus an invitation for participants to return to their experiences of belonging in a very private way. This is very different from answering questions in an interview where one is dyadically returning to the phenomenon in a more public way, in ‘relationship’ with each other as opposed to the participant doing that in relation to their ‘self.’ Art, in whatever form that took, provided the opportunity for ‘performance’ (Atkinson & Delamont, 2006) in ways that an interview never could, and an opportunity to shape the narrative in whatever way was chosen.

All fifteen people who completed the survey were invited to take part in Part Two and twelve people returned their contribution (Twitter = 7; national charity = 1; local charity = 4). There were eleven written contributions, one PowerPoint contribution that came with their written piece and one art piece. Writing a biographical piece and having artistic freedom to do so created a space for participants to decide whether to continue with the final component of the study, the interviews. For example, I was unable to use the art piece as this participant did not continue in the research due to difficulties in maintaining contact in the timeframes of the research. An example of a completed biographical task from P6 is below in Table 5.

All I wanted was to belong, to have a place where my mind could rest and my heart could stay warm, to love and be loved, and most importantly, to be accepted for who I was.

Instead in life, I was constantly told that I wasn't good enough, that I needed to comply, that I needed to behave, that I needed to be someone that society expected of me.

I was in a constant state of fear, and I was simply surviving. My brain and body were functioning, they were doing exactly what they were supposed to do, I was in a constant state of fright.

Instead of adapting, the educational system failed me by asking me to conform. A young girl who has been subjected to a variety of sorts of maltreatment. I was let down by a system that was supposed to protect and safeguard me, not just in my parental home, but also in foster care and at school. Adults, on the other hand, caused me the most grief in my life, and I was always required to affirm and listen to them. But who was listening to me?

Even after all the professionals in my life have asked me to conform, I will still be requested to do so. I was instructed to remain silent and sit in a classroom without allowing my voice to be heard. My inner monologue was to be quiet.

I was told that I needed to achieve my GCSEs and acquire a good education.

After all, if it weren't for this, I would be nothing.

I used to be a powerless child.

Rather than requiring youngsters to conform, how about we teach these extremely evolved children, who have experienced a great deal, perhaps more than any adult would ever experience, the value of education?

Innovator's abilities, the ability to think creatively and, most crucially, the ability to assist these children in developing a growth mindset. Allow these youngsters to remain in school and not be forced to comply.

Instead, it was a place of hope, security, and development.

All of them to grow and heal.

Allow them to feel a sense of belonging.

Table 5 Biographical Writing Task Example (P6)

5.4.4 Part Three: Interviews

Ten semi-structured interviews (Appendix 5) were undertaken online. The predominant reason for choosing to interview online was that the research was undertaken during a pandemic and there was little consistency regarding the movement and presence of people.

I was aware that the participants would be located around the country. I was also aware that they would mostly be an ease about connecting online largely due to the demands to live digitally placed upon people during the pandemic, which left many people more comfortable through being in their own spaces, dressed less formally (Howlett, 2022) and in much more control about the process of engagement. Finally, as a researcher without any budget, there also needed to be a consideration about resources: the time and the money involved in travelling around the country meeting people in person. Having arranged a time to meet and then sending through a Microsoft Teams link, we spent some time settling into the online space and once I pressed record, the interviews took between 30 and 45 minutes each.

As mentioned previously, the interview set-up for both of the participants recruited through the local charity was supported by, or even mediated through, a gatekeeper. I did send the link for the interview to the participant, but I also sent it to the gatekeeper as I had been informed that participants' regular use of email communication was unlikely. The participant and I also needed to use the device available in the service premises as neither participant had access to a private device. As such, the link needed to be accessed from that device which required the gatekeeper to be present in the room during the interview, and on occasion was called upon for assistance in making sense of some of the questions.

The interviews focused on seeking to understand how participants had made sense of being in care, of being excluded from school and of belonging (Appendix 5), and the prompts within the central questions changed in each interview as I responded to each person individually. I did not share the questions prior to the interview, choosing instead to see what arose for participants rather than give them time to think about and prepare their answers in advance of the interview. I focused on watching them and listening attentively as they answered the questions, knowing that the interview was being recorded and transcribed. Rather than having to focus exclusively on *what* was being said, this allowed me to focus also on *how* it was being said. Noticing the emotional state of the participant was important, not just enabling me to interpret what was happening in our interaction, but also to ensure they were managing the situation safely (Appendix 6). ‘Noticing’ helped me to consider how the next moment might need to be, while also understanding that what could be noticed was filtered through a screen.

5.4.5 Language

Conforming to the usual IPA research terminology by naming this section ‘Data Gathering’ and referring to the participants’ contributions as ‘data’ has raised many questions for me. Some scholars have increasingly argued that the term ‘data’ is not neutral because data itself cannot be neutral (Lyle, 2022). What is gathered is driven by the decisions taken at every stage by the researcher or researchers. Using the term ‘Data Gathering’ as a way of describing the sharing of accounts of people’s lived experiences that was at the core of this research feels misaligned with the knowledge that I am seeking to gather. There are several assumptions I am making that are embedded in the research design that have made referring to people’s knowledge as ‘data’, and to how we engage in that together as ‘collection,’ felt incongruent. It is in this context that I explored other ways of describing the contributions that felt more in line with my axiological position.

Firstly, I take the epistemological view that people are the experts of their own lived experiences; we know what we know about ourselves because we have lived it (Lyle, 2022). Cultural humility offers an invitation to epistemically embrace that “I do not know what I have not lived”. This does not detract from knowing what could be known through observing it, reading it or empathising with it. However, knowing what is known through *living it* is a unique way of *knowing* that needs to be considered as knowledge. This particular was of *knowing* has often not been viewed as knowledge, and this can be referred to as epistemic injustice (Giladi & McMillan, 2023). The term ‘experts by experience’ (EBE) also sometimes referred to as XBX’s (Lees et al, 2019), has flourished in recent times in a variety of disciplines and is a term mostly applied to those who have had marginalising experiences. It is especially prevalent in thinking about co-producing resources and services, particularly within the discipline of health, namely within mental health settings (Happell et al, 2019, Tapsell et al, 2020). In such settings, EBE’s can experience themselves more like service producers and educators, as opposed to making sense of what has happened to them through the prism of being a patient (Jones & Pietilä, 2020). The term EBE is also widely used in social work education (Videmšek, 2017, Fox, 2020), social care inspections (Scourfield, 2010) and family group circles (Gupta & Blumhardt, 2016).

Concerned that terminology that can be reduced to an acronym reduces the important intention that sits behind the use of ‘experts by experience’, I decided not to use this term. Instead, my preference is to posit lived experiences as ‘wisdom’ maintaining that what participants share is ‘wisdom’ but what I gather is ‘data’. Wisdom is a much discussed concept in philosophy and religion but not so much within the area of research in science (Thomas & Duffy, 2022). In this context, wisdom is described as knowledge of what is good or important for well-being, knowledge of one’s standing, relative to what is good or important for well-being, and knowledge of a strategy for obtaining what is good or important for well-being (Grimm, 2014). This definition suggests that wisdom can only be wisdom when a person has some strategies for living and has learnt these strategies, for the purposes of my study and the experiences of my participants, through (recovering from) their experiences. However, wisdom, I would argue, can be harnessed relationally where recovery may not have yet occurred. If wisdom were only limited to those who had the answers to complex life events and were on the other side of them, then much would be missed. There is a distinction made between theoretical wisdom, understanding the nature of reality and the place of humans within it, and practical wisdom, “doing the right thing, at the right time, for the right reasons” (Jeste et al, 2019). In this research, I understand that the participants are gifting me something that belongs to them, often when it is painful, and invariably, as was shared with me throughout, because there is a deep desire to be heard and for action to be taken in policies and system delivery because of what has been shared. I receive these gifts with humility, with care and with respect.

Secondly, I meet the same criteria as that required to take part in this research and the term ‘gathering’ rather than ‘collection’ suggests an even further departure away from the power imbalances that research can inhabit. Gathering stories is inherent in indigenous ways of knowing (Althaus, 2020; Hanson, 2020) and of healing (Atkinson, 2002) and the notion of gathering suggests that we can sit alongside each other sharing what is known in language albeit not sharing the experience itself. This created resonance for me as a researcher alongside the application of IPA in its quest for deep listening and attention to detail about what is being offered. Resonance, or synchronicity, a reverberation of our respective experiences suggests that we are far away from potentially positivistic ideas about the participants providing ‘data’, as being the object of interest and I as the researcher, collecting ‘data’ from the object. We are creating something together in the unique interaction between myself, Lisa Cherry, and the person sharing their meaning-making of their lived experiences, in that moment in time.

The aims and research questions as set out earlier in this chapter support thinking about the intersectional experience of being in care and being excluded from school. The literature review identified this gap in the research. Addressing it means moving beyond narratives that focus on either individual stories of success or on patterns in the administrative data collected by the Department of Education, which tend to show ‘poor outcomes’ for those in and leaving care in relation to many things, including education.

Prior to gaining approval from the University ethics committee (Appendices 7 & 8x 10), I conducted a pilot study with a colleague to test what might be collected in the chosen format, to test out using Microsoft Teams as a recording and transcribing platform, and to see how the initial questions would work in a conversation. One interview question was removed. In preparing my questions I asked ‘can you share why you were in care’ but when I began to ask the question in the pilot study, I realised that it was an unhelpful question as many people do not know why they were in care. It is not the kind of question that is appropriate to ask and I was surprised that I had detached myself from my own lived experience and ‘wisdom’ in seeking to step into the researcher role. In hoping to be a ‘good’ researcher, I had focused more on the mechanical process of writing up questions rather than simply bringing myself authentically. I had inadvertently fallen into the ‘ways of knowing’ I was so keen to avoid. As someone with that shared experience, it is not a question I would ever want asked of me.

Although, in line with many methodological accounts of IPA, I will use the term ‘data’ in this report, I do so with a caveat and qualifications. The caveat is that although the knowledge my participants shared with me was ‘gifted’ to me, it is not ‘given’ in any discrete, dualistic or neutral way. The qualifications are those outlined above, and I invite the reader to remain alert to these concerns and to the textured and contested nature of the term ‘data’.

5.5 Analysis and Interpretation

Although IPA does not prescribe one way of undertaking the work, the broad steps taken in the analysis and how they are then recorded enable a clear audit trail of the analysis process and demonstrate rigour (Smith & Nizza, 2022).

Once I had collected all of the data, I created folders for each participant, naming each folder with a ’P’ and then a number. I added the transcript of the video recording and the biographical writing task or art piece. When I opened the folder, I immersed myself in the contents, which IPA demands, and started by maintaining an idiographic approach to each individual participant, open to the possibility that there might be a theme or themes that each person presented throughout. In doing this, I could slowly deepen my relationship with each person as a single case. There are principles and processes that enable the rich process of ensuring that immersion is consistent and thorough (Smith et al, 2009) and these are:

- Reading and re-reading
- Initial noting (examining content and language)
- Developing emergent themes (PETs)
- Searching for connections across emergent themes
- Moving to the next participant
- Looking for patterns across participants' data (GETs).

Using IPA for the first time, I felt reassured to have such clear guidelines to follow which supported my decision to use IPA and in keeping with this structure, it has been helpful to use the outline to describe analysis.

5.5.1 Analysis of the Interviews and the written task

To analyse the interviews, I began by transcribing the video interviews through watching several times and stopping and starting to ensure that I had written the content exactly as spoken by the participant. I watched the video while checking the transcript and correcting the contents where necessary, listened to the video again and then watched the video once more before removing any identifying features from the transcript. The inbuilt Microsoft Teams transcribing tool had limitations although this was easily overcome through having the video recording to adjust errors. It also worked well with the first procedure of 'data analysis' stipulated in IPA methodology, which is to read and re-read and read again. I repeated this around three times until I felt as though I was in the interview fully and that I was very familiar with the participant, and then I deleted the video. I worked with one transcript at a time, placing the contents into a table (see below) adopting a "close, line-by-line analysis" (Smith et al., 2022), and then looked at paragraphs seeking immersion into the lived experiences being shared. I then wrote exploratory notes and identified potential themes for each participant. Having identified the personal themes individually, group themes were then identified collectively. Through observing the same words, sometimes even sentences, across all the participants, I was able to see how themes converged or diverged, and undertook cross participant analysis. There were themes that were identified individually that were not identified as overall Group Experiential Themes applicable across the group. For example, 'loss' was a Personal Experiential Theme for one of the participants but this did not arise for any other participant. ‘Movement’ however, was mentioned by every participant and was therefore a clear theme across the entire group.

The exploratory notes taken included descriptions which Smith et al. (2022) suggests should be comments on relationships, places, events, while also thinking about what meaning the participants gave those areas of concern. I focused on what language the participants used, whether they spoke in the past or the present tense, where they did that and where there were pauses or changes in tone or pitch which were noted on the original transcript before deleting the video. I also noted areas that struck me as interesting and then added notes as to why this was the case and also inquired of myself the meaning making I had ascribed to that content. I looked for words or phrases which felt meaningful to think about making sense of belonging, and noted anything that stood out. I also added my thoughts about how the participant was making sense of their experience and these ideas were noted. I revisited the transcript several times. This helped me feel as though I really connected with what was being said so that I could gather thoughtful exploratory notes. It helped me revisit areas of transcript that I had missed on prior reading because it was a tiring endeavour. When the words became blurry or I was having to read them again because I had not taken them in, I left the computer and made a drink or went for a walk before coming back to them again.

As someone who has worked professionally for a number of decades interpreting human behaviour, I entered into observing the interviews with a skill set that I almost take for granted. It feels like the most natural way to enter into any form of communication with another. In social work settings, having worked mainly with young people with lived and living experiences of trauma, detecting that which they need to express through their body language, their tone and their posture is an integral part of providing appropriate relational support and connection. In education settings with young people and children communicating their internal world through their behaviour in settings which can often prefer to punish rather than understand, such support is essential. As a holistic therapist, I was not only listening to the words and noting what I could see, but I was also attentive to what the body was holding on to through touch and making interpretations about where trauma may need release. As a trainer I work with the energy in the room to ensure that I can hold a room of up to 200 people; the enthusiasm of it, the sadness of it, the need for refreshments, the space to rest, the time to move around, the need to connect with each other. In research, I was doing all of this, except that I was doing this through a screen and I was doing this as a researcher.

Being fully present while listening to what is being said and then attempting to interpret those things, is at the heart of working with distress. In more therapeutic contexts, the next stage is of course negotiating that interpretation and co-creating a language to help the person make sense of their internal and often unarticulated feelings. In Table 6, I have used colour coding to highlight what I hear (red), what I see (light grey) and how I interpret that (blue).*

*These colours have been chosen to reduce confusion for a reader who may be colourblind.

Annotated Transcript of Observations

Researcher

OK, So what? What do you understand by about your, by your experience of having been in care?

P6

OK, so I I'm also a social worker now, so I have quite good insight to my childhood. *Rubs chin and changes facial expression and now appears nervous*

Uhm, decisions that were perhaps made up by various professionals ummm.

But also I guess the one thing that kind of when you ask this question, I guess the one thing that kind of... that I stick... that sticks out to me as childhood trauma *rubs side of face and appears a little uncomfortable*. So I think from my experiences of being in care and being a looked after child and and just having corporate parents in general is the trauma that comes with that *facial expression suggests like that is obvious*. And and it's weird, a weird sort of way 'cause, it's not a lifestyle *nervously laughs.* I don't want to say it's like a lifestyle to live, but it's ultimately made me demonstrating resilience

I've had quite a different life to say. Some people, many people, and that has lasting impacts on me. My childhood was disrupted and so my childhood, you know *speaks very matter of factly about this almost detaching from the words now*, I perhaps didn't develop as say my friends would or people who didn't experience childhood trauma, so I kind of feel I'm quite delayed in some ways as an adult. I'm now learning things that I didn't get taught as a child or things that I know that I need to equip me for adult life, so I kind of have to teach myself

those things *looks puzzled* or, you know, for instance, pay for a therapist or pay for a service to educate myself. And so my…yes, my experiences in my understanding of being in care is that *long pause and then a giggle* yeah, so many things *now laughing*. But I yeah, I feel like that. I've answered that hopefully enough *still smiling* *knowingly or nervously, I'm not sure.*

Table 6 Data Analysis Example

This process helped to identify patterns, first within each participant's wisdom, and then across all the participants' contributions. Initially a table was used to plot the content and to add my explanatory notes (see Table 7 below). Here I noted what I heard (red), how I interpreted what I heard (blue) and what patterns emerged (light grey).

Example Question	**Excerpt from Interview**	**Example Exploratory Notes**
How do you think that experience impacted on your education?	Massively so my education....I've always, and I think because I've always been quite articulate, that they just missed me, if that makes sense, because for me, education was, when I was in the beginning of secondary school and I was actually doing like in, year seven, I was doing GCSE Maths so I was very articulate and I loved education. But education for me was an escape. And then when my behaviour started to come out in education, I didn't know as I was obviously so young. But I was really angry. Really, really angry when I was younger and so that would be me being labelled as naughty. But it was that, you know, my experiences at home where, you know, sometimes I'd come to	They just missed me. Feels invisible? Education was an escape from care, from self, from professionals? Education was a safe space (until it wasn't) Loved education But labelled as naughty due to being so angry about home life Angry, really really angry, labelled Homeless from a young age ...no one knew. Didn't they? Or no mechanisms in place to 'notice'? School was safe place until excluded and isolated, put on reports.

	school and I'd slept on the streets. So I was, you know, homeless at such a young age and no one around me knew that. School then becomes not a safe place because teachers then would you know, I was then excluded.	Liked being ‘on report’ as it meant attention. Was monitored and looked after. Was seen and also maybe safe? Misunderstood behaviour, exclusion, not safe, no escape CYCLE

Table 7 Data Analysis Example

Then I created a new table which plotted the explanatory notes and I then highlighted quotes and words that sounded similar to each other (see Table 8 below).

Example Exploratory Notes	**Highlighted areas/ Emergent themes**
Education was an escape from care, from self, from professionals? Education was a safe space (until it wasn’t) Loved education But labelled as naughty due to being so angry about home life Angry, really really angry, misunderstood, labelled Homeless from a young age ...no one knew. (Didn’t they? Or no mechanisms in place to ‘notice’?) School was safe place until excluded and isolated, put on reports. Liked being ‘on report’ as it meant attention. Was monitored and looked after. (Misunderstood behaviour, exclusion, not safe, no escape CYCLE)	Safety Labelled ‘naughty’ ‘excluded’ A ‘safe space’ an escape Attention needing Monitored Noticed & not noticed & noticing being noticed and not noticed Looked after by adults Homeless

Table 8 Data Analysis Example

The written tasks from the survey were analysed in a different way as the interviews in Part Two. A sharper lens was placed on ‘belonging’ as the biographical writing task asked the question specifically “what do you think about when you think about belonging?” Areas were highlighted and themes were identified. Colour coding took place in written submissions too. Table 9 below highlights this. As this was a written task, I have noted what I heard from what I was reading (red) and what I interpreted (blue).

Example Analysis of Part One
Belonging when I was starting my teenage years was about fitting in. SEARCHING FOR BELONGING I was bullied for being mixed race RACISM after I moved to a predominantly white area council estate. I would explore any way I could to become 'white' like them STIGMA, RACISM, SEARCHING FOR BELONGING I put talc on my face, SEARCHING FOR BELONGING hated my dad for being Indian, RACISM tried to dress like my peers but couldn't always afford it, got into similar hobbies (a lot of which were not really very ethical). The main thing was that I would do absolutely ANYTHING to fit in. SEARCHING FOR BELONGING This included sleeping around at a very early age, running away from home and becoming a Tomboy STRATEGIES FOR SEEKING BELONGING and SEEKING ACCEPTANCE Belonging to me was about people, people accepting me ACCEPTANCE for who I was - at first I wanted to be like them but as I found myself more I wanted people to like me for who I really was ACCEPTANCE. I think at the time I used to think that belonging was about place but I know now that it was the people FINDING BELONGING who were important. As I never fitted into mainstream school I was sent to small centres and when I was forced to leave POWER those, I took overdoses TRAUMA and tried to go back to them. I think in those places it was more like a family SEARCHING FOR BELONGING so I felt like I belonged more. In the big schools I was nobody INVISIBLE. Looking back it was people believing in me who made me feel like I belonged as I didn't really get that at home. I have moved around a lot MOVEMENT since and feel a bit nomadic really - I have never felt like I fit in in England STIGMA, RACISM particularly as it has not been very kind to

me as a place. It was only recently I realised that belonging is about the people you love and who love FINDING BELONGING you rather than a specific place.

Table 9 Data Analysis Example (Written Task)

P9 submitted a PowerPoint presentation known as a multi-modal artifact as the slides used words, images and two pieces of music with lyrics for me to use as a background soundtrack to my viewing. Unfortunately, I am unable to share any of the actual presentation due to each slide using images that were not owned by P9 but are owned under copyright. However, I will share what I saw, which I will not highlight in light grey as the whole section is on what I saw and my interpretation of what I saw (blue) below in Table 10.

Example Analysis of Part One – Multi Modal
Slide One presented a powerful depiction of words located upon two separate images. The first image was a fantasy traveller scene; lots of children together, as a group, belonging to and with one another, standing by a traditional painted gypsy caravan. The words placed upon this image by P9 are "family", "clean", "kids", "be a good catholic woman", "misplaced", "in care", "traveller". The second image on Slide One is of a fenced off caravan park. The caravans are the white ones people use to holiday in. Outside of the fenced off area are children attempting to play. They look cold and dirty and lost. There are puddles everywhere, debris of rubbish and bins in the background. The words that P9 places on top of this image are "alcoholic mum", "drug dealer dad", "bang bang shot himself in front of me'. Contrasting images potentially communicating the contrast between fantasy and reality. I turned up Zombie by The Cranberries on my headphones and allowed the drums to lead me into the lyrics, a few lines in "the violence cause such silence...., but you see, it's not me, it's not my family, in your head, in your head, they're fighting, with their tanks and their bombs and their bombs and their guns, in your head, in your head, they're crying." My interpretation of these lyrics as I looked at Slide One left me curious about not feeling the sense of belonging in such a close knit community, the fantasy maybe. But the reality is not belonging, is the fighting, being trapped in a community where you are being told this is your family but P9 is screaming "it's not *my* family."

Table 10 Data Analysis Example

The songs that P9 chose are shown in Table 11 below.

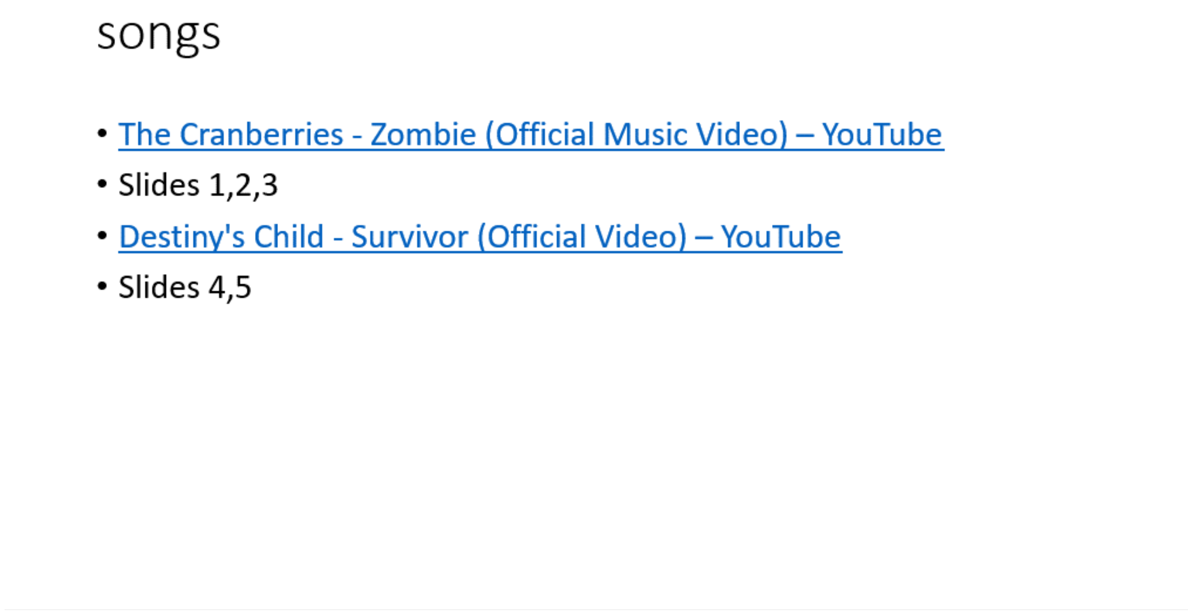
Part One Task Example
 songs • The Cranberries - Zombie (Official Music Video) – YouTube • Slides 1,2,3 • Destiny's Child - Survivor (Official Video) – YouTube • Slides 4,5

Table 11 Data Analysis Example (Multi-modal Submission)

The themes were identified in the same way through analysing the words chosen and the way in which they were written. For example, rejection of stigma, stigma, movement, trauma, searching for belonging and finding belonging run through the presentation.

Plotting out the data in this way, and looking across all the Personal Experiential Themes specific to each individual participant, I then identified broader themes known as Group Experiential Themes (GETs) in IPA. This approach and the terminology of PETs for individual themes and GETs for themes that express patterns of convergence and divergence across the group draw on the revised edition of Smith, Flowers and Larkin (2022) and also on Smith and Nizza (2021). I colour coded GETs in a similar way to that described above, and used Exploratory Notes, Emergent Themes, and Patterns as organising categories in their development. Details on the group analysis and full accounts of the GETs are offered in Chapters Six, Seven and Eight.

5.6 Ethics

The approach taken to ethics is one that places relationships at the core of the project, with the philosophical underpinnings that we are not separate from one another; we are interdependent and our relationships with each other are significant (Austin, 2007). Relational Ethics arrived via Canada in the early 1990's in research led by Vangie Bergum within clinical health practice (Bergum, 1994). Knowledge, Bergum argues, is constructed in 3 different ways; descriptive knowledge of a person's subjective experience gained through listening to the person's descriptions of their experience, abstract knowledge gained from analysis and rationality, and the inherent knowledge that comes from lived and living experiences (Bergum, 1994).

5.6.1 Consent

The underpinning components of what can sometimes be approached as the 'mechanical aspect of gaining informed consent' involve having adequate knowledge of what is entailed, that taking part needs to be voluntary and that those participating are competent to choose freely (Brooks et al, 2014). The process of obtaining informed consent ensures the safeguarding of the potential participants. For example, one of the participants had been involved in international trafficking and another participant was involved in a high-profile trial against her abuser. In these contexts, it's important that they understand what they are getting involved in (Seale, 2018) and their sense of safety is paramount. However, as previously highlighted, this is complex and requires ongoing attention throughout the process.

Within this process, confidentiality and identifiability has to be communicated clearly and regularly to participants, highlighting that anonymity will be protected in every way possible. This is not just by ensuring that their name is removed from their data but also ensuring that participants are not identifiable in any way, for example the place they live or lived, the children's homes they may mention they lived in, or the schools they may refer to that they attended. Significant people, organisations that have been used alongside high profile events, were all removed. The PowerPoint slides contain redactions for this reason.

5.6.2 Consent – The Local Charity

Having sent out a Consent Form with the Information Sheet, the organisational mechanism that allowed me to proceed was complete once I received a signed Consent Form from a potential participant. However, consent is complex and this complexity was further revealed after learning that anyone taking part in the research from the Local Charity would only be accessed via the gatekeeper, the manager of the service. Alongside access to participants, I learned that they would need the centre for use of a device and Wi-Fi, support in creating an email address and someone with them supporting and if required, advocating on their behalf during the interview should they feel it necessary to do so. Consent would be needed by the participants for their gatekeeper to hear their responses. Alongside this was the very real possibility that their responses might be impacted by them being unable to fully retain their anonymity. I had not anticipated this in my Ethics form, so an amendment was required (see Appendix 8).

My relationship was with the manager of the service, the gatekeeper. We are connected on Twitter, have met once in person and been in mutual professional spaces. I trusted her and she trusted me. Her trust in me gave me access to those using the service, and a belief that my intentions were genuine, alongside the knowledge that I am aligned with her values about marginalised people whose life stories are so often misused by media, by the public and also by researchers. Likewise, I would not have contacted her without the trust I had of her way of working, as the risks would be potential coercion to take part, control of decision making, and potentially a fear for users of the service of losing access to that service (Miller & Bell, 2012). However, that trust is tenuous and could have been compromised at any moment, thereby challenging our relationship and compromising the research too (Miller & Bell, 2012). Furthermore, it is argued that using a gatekeeper is a political process because there is an investment in how the organisation is viewed and a desire to shape that view to align with how the service is funded and how it fits in with local priorities (Bryman, 2016; Crowhurst, 2013; Clark, 2010 as cited in Kay, 2019, p.4). While I do not think this applied to this research, it felt important to be aware of it.

5.6.3 Potential Harm

Understanding that my participants are potentially living with the legacy of trauma, embedding the principles of a trauma informed framework into all aspects of the data gathering felt important. These principles are safety, trustworthiness and transparency, collaboration, voice, peer support and cultural humility (CDC, 2022). Within the research process, the ethics process paid attention to psychological, digital and physical safety. Adhering to rigour within qualitative research supported the principle of trustworthiness and transparency, while having agency by writing or drawing on belonging through using voice and exercising choice about what was written or drawn met the principle of voice. In paying close attention to positionality, the issue of cultural humility becomes centralised, although academic discussion on cultural humility is recent (Abe, 2020). The understanding that we have not lived another person's life and therefore cannot understand it without curiosity and humility (Abe, 2020) is embedded in the methodology. However, openness, self-awareness and egoless-ness are attributed to cultural humility in practice (Foronda et al, 2016) and the discussion about whether research can be 'egoless' would be too broad to tackle here. Collaboration is less easy to identify in this particular research process but could be argued that it is present during the consent process. Additionally, peer support is not embedded within this study.

Placing relationships at the core supports a continuous conversation around consent. For example, there are issues that pertain particularly to publication and ensuring that the copyright, the intellectual property, remains that of the creator alongside consent to publish, doing so under a Creative Commons License (Kara, 2018). This applies to publishing the written contributions which I view as art as they present as creative writing.

5.6.4 Building rapport

While essential in asking people to reflect on childhood experiences that they may have chosen to forget or have never even articulated, building rapport is not without complications. From a relational ethics standpoint, there is a need to understand that within the interdependent nature of relationship, I affect that relationship. I bring myself. This is multi-layered. With the complexities of my own positionality as laid out in the section on epistemological tensions, I have to consider the possibility that being 'Lisa Cherry' was more than helpful in whether people made the decision to respond to the initial enquiry. Also, whether they were happy to send a writing or art task to me, and whether they would enter into a conversation with me that may well be internally provocative.

There may have been a trust that I was able to 'hold', which arose sitting side by side with the knowledge that I too shared the experiences that we were talking about. Within that context, I also have to consider that my being 'Lisa Cherry' may equally have been off-putting for the very same reasons. People knowing that we might meet in professional spaces or simply in public online spaces may have felt that this was not appropriate.

With the participants from the Local Charity, my rapport building started with the gatekeeper which then was extended between me as the researcher, the participant and the gatekeeper, who was present throughout. I also conducted every aspect of the research online using email, Twitter, Microsoft Teams and a transcribing tool. Building rapport online is quite different to building rapport in person. Conveying warmth, safety, and connection online requires a different attention. In my professional space, working with education settings, children's services and charities, the pandemic had moved my work online and so these skills had been fine-tuned over time. What was striking during the pandemic was how organisations had not equipped their staff digitally. While people rose to that challenge, it raises the question as to how conducting all my research online might have looked prior to the digital education that many people underwent from March 2020.

Rapport building has been described of as 'faking friendship' (Duncombe & Jessop, 2012) and raises the question as to whether 'rapport' can transcend the power imbalance, gender, social class, ethnicity and mental and physical health differences. However, while the 'rapport' may be 'fake' as described, it is possible that an unexpressed contract has been agreed. This 'contract' enables the researcher to listen to something uncomfortable or something far from their experience and the person speaking is able to be heard, to have space to speak and to also articulate something that may not yet have been articulated. However, rapport can also be thought of as alignment, affiliation and empathy (Prior, 2018) which could be argued as having more resonance when the experiences being researched are shared by the researcher, even though the experience of the experiences will undoubtedly differ.

No financial offer for taking part was made, although if there had been any travel expenses, I would have reimbursed those. An email was received asking me if people taking part would be compensated for their time. I explained that there was no compensation. I had considered whether this would be appropriate but felt that the typical kinds of gifts, such as a £10 Amazon voucher, which are often seen as reasonable, can carry some offence and misunderstandings around why some people are drawn to share their story.

The feeling of contributing something of yourself, that might make things better and improve services can be a motivating factor for many people who become participants and this motivation was expressed to me by many of the participants. It is certainly a motivation for me as a researcher to take three years to undertake this research as a woman in my 50's and it would be naïve of me to think that this motivation does not come across in some way. Thus, it might be reasonable to assume that witnessing my motivation would draw others to this work. This view of the research as being 'important' was certainly expressed in several emails I received from would be participants. In addition, the best practice guidance on payments and incentives at the University of Oxford states that the use of incentives can be incompatible with treating the participants with respect and dignity. Payment can also be seen of as coercive, especially in the face of an exponential rise in the cost of living. However, exploitation is a consideration for *not* taking part in research and this sense of being used in research is well documented (Buck et al, 2021; Carr, 2019; Costa, 2012). Today, there is a vast amount of literature concerning lived experiences being commodified so others may benefit from them (Stone, 2020), the amplification of some stories over others (Cherry, 2022) and what it means to be hidden behind a paywall (Schiltz, 2018; Phillips, 2019).

5.6.5 Ethical Tensions

Engaging in ethical practice is an ongoing process that is dynamic and consistent throughout the research process (Smith et al, 2009). Ethical practice is a continued presence which forms and shapes continued reflexivity; it is an active pursuit rather than a passive one that removes the illusion that ethical considerations are completed at the approval stage (Brooks et al, 2014). Considerations about my responsibilities to participants and the research community, consent, transparency, the right to withdraw, privacy and data storage and how the research will be disseminated all need expressing (BERA Ethical Guidelines, 2018).

There are several tensions that create ethical complexities that need to be explored in some detail. Who I am cannot be disentangled from this research, as raised in the following section on positionality. Firstly, I share the two areas of lived experience being researched with the participants: care experience and school exclusion. This position might suggest a connection with the participants that helps rapport building, access and insights, yet insider status, a term used to describe someone with shared experiences between researcher and participants, brings, as I shall go on to explore, other challenges (Hayfield & Huxley, 2015). It is argued that thinking about inside/outside as a binary concept can be unhelpful. Instead, the notion of 'inside and outside' is complex and messy, and may be better thought as fluid researcher identities (Thomson & Gunter, 2011). This insider researcher position forces me to ask different questions of myself and requires me to develop a deep awareness of what aspects of the lived experiences may be similar and what aspects may be different. The question I might ask regarding how much I should share seems a moot point as I have written autobiographically on many occasions, and these publications are available to the public in the form of books, blogs and vlogs which they may or may not have read. This means that the participants may think they know me when in fact they will simply know who I have revealed, and how I felt about what I revealed at the moment that I wrote or spoke of my experiences.

Secondly, I am a publicly well-known professional and work across education, children's services and criminal justice in schools, services and systems giving me a perceived status that is available for all to see. Due to the complexity of being a 'public figure' in this area having written on the subject and worked in the area for over 30 years raises the issue of power. This could lead to fears around what to disclose for fear of judgement. It could also lead to having concerns about 'meeting' me in online spaces outside of the research as well as in offline spaces which could also hinder what is shared.

Third, I am known professionally as taking a position that is compassionate, empathic and relationships focused which may lead participants to confuse being a participant with wanting or even expecting, a therapeutic experience. I am known to be qualified in therapeutic modalities, and that I have been on what I call a 'recovery' journey for over 30 years. Participants may arrive with an expectation about what information I can handle, what demeanour I have, and what therapeutic capabilities I hold in reference to working with sensitive and emotional information. Being aware of over disclosure is paramount alongside clear boundaries throughout the process about what the research process can hold.

Research *can* be a therapeutic experience, as previously discussed, as it may provide a space that hasn't been available before to explore the questions being asked. Both are emotional processes but being a participant may hold less stigma than accessing counselling for example (Newton, 2017). Good practice in qualitative research requires clarity about the research/participant relationship and the limitations that will be laid out in the Information Sheet (Appendix 2). There was also a distress protocol (Appendix 6), which provided me with a clear outline of managing emotional responses that may mean interviewing has to end, and where I might signpost people should that be appropriate.

Finally, throughout my entire career I have argued for the position of preventative practice. For example, we should focus on preventing harm whether that is harm through sociological conditions such as poverty, poor housing or health inequities, family harm or system harm, and improvement for children and young people. I may therefore be understood as an 'ally', an 'insider', an 'activist' and/or a 'role model'. This may lead to invitations to collude with or be drawn into a particular assumed way of thinking about certain experiences. It may mean that participants are more vulnerable with me than they would wish to be were I not thought of as an 'insider'.

Even though clearly, I am the same person, I found myself distinguishing myself as Lisa Cherry the DPhil student from Lisa Cherry who is known professionally, as it felt a fundamental ethical consideration. This is potentially complicated by using Twitter to recruit participants, which is my professional social media account. There are a number of considerations raised in using this account around transparency. Similarly, the information sheets and consent forms reiterated that participants were invited to take part in Doctoral research. The ease by which online communication can take place can lead to misunderstandings, poor sensitivity (Gelinas et al, 2017) and blurred boundaries. Thus, I referred any potential participants to my University of Oxford email, where I formalised the discussion.

It does not sit comfortably with me to project an identity of ‘vulnerable’ upon the participants. However, all the tensions I have raised are due to how I understand that the childhood experiences we reflect back on are experiences that happen to children who are experiencing vulnerabilities in their environment which impacts them during their development. These vulnerabilities can travel into adulthood, and I am not able to make any assumptions about what ‘recovery’ process or journey participants may have taken. It feels prudent to note that we all have the capacity to be vulnerable because it is not a fixed position; it shifts and changes. However, I place Antle's (2017) key statements as a form of safeguarding at the core of the research when working with my participants. These are:

- We must be willing to take the time and make the effort to be aware of and ask ourselves some of the difficult questions that arise when working with vulnerable populations.
- We must understand that we view the world through a lens of our own experience.
- We should consider the Belmont Report’s tenets of welfare, justice, and respect in our dealings with vulnerable populations, keeping in mind that often what we ought to do is not always consistent with what we can do (Antle, 2017, p.75).

5.7 Positionality

My research question is entrenched in personal and professional experience. It is within this experience that my ontological position is formed; my way of being. I know what I know about the research as an entity worth exploring because I have lived in it, worked in it and written about it for many years. Having first written in 1994 for my Undergraduate dissertation about young people being isolated from a relational network and that this was impactful, I went on to write *The Brightness of Stars* (2013), about care experienced adults having different narratives than ‘poor statistical outcomes’ (published by Routledge as a 3rd Edition in 2022). In 2018, my MA looked at the educational and employment trajectories of adults who were excluded from school and in 2021 Routledge published my book Conversations That Make A Difference for Children and Young People (Cherry, 2021) detailing how services, sectors and systems can work with children and young people from a trauma-informed perspective to increase relational practice and relational opportunities beyond services.

Living within this system is not a mainstream experience; about 1% of children, at any one time, are looked after away from home formally (there are informal arrangements that will not be recorded by the Department of Education’s annual collection from Local Authorities) and about 3% of children are in receipt of services and support from children’s social care at any one time (Ofsted, 2020). Furthermore, one study looking at a child’s first entry into care, found that one in thirty children in England will experience at least one episode of being in care before their 18th birthday (McGrath-Lone et al, 2016). Comparable figures regarding school exclusion are more complex as highlighted in the literature review, making gathering detailed data a challenge.

It is argued that research offers an opportunity to understand, acknowledge and defend an ontological and epistemological position by being persuasive, purposive, political and positional (Clough & Nutbrown, 2012). However, the contradictions that have arisen in how I understand the world in relation to the research question also informs my desire to pursue the research. My personal experience tells me that being excluded from school can create a hunger for more education. This was largely what I found in my MA research too (Cherry, 2018). However, my professional experience tells me that school exclusion can be harmful with lifelong consequences. Furthermore, there is emerging research which seeks to understand if there is a pipeline from exclusion to prison (Sanders et al, 2020). The gap within research on adults who were excluded from school, in part, informs my desire to further explore and contribute knowledge to the discourses on school exclusions.

Paradoxically, I contest the tendency to reduce a person’s identity to their care experience, while also acknowledging how defining that experience has been for me across my life. Childhood defines us; but then we also live beyond it. Unpacking our childhood in adulthood, making conscious the taken for granted, discarding and keeping what we choose, may be likened to an old suitcase full of clothes opened at various points throughout life. The paradox of defining yet not being defined is rarely explored as care experienced adults, of all ages, are seldom asked to explore this paradox. There is a little research, but which I hope will be added to, that explore how political, cultural and social forces shape adults after care (Hugman et al., 2016).

This position is not without challenge. Standing alongside, while standing on the outside, while standing with those taking part, brings complexities that require continuous reflection. I arrive to this research as a white woman who is ostensibly middle class. I come with certain privileges: white privilege, colonial privilege and class privilege accentuated by undertaking this research in ‘Oxbridge’ which is regarded as elitist (Bhopal & Alibhai-Brown, 2018).

Having identified a gap in the literature for addressing guidance for novice critical qualitative researchers to practice positionality, Jacobson and Mustafa’s Reflexivity Tool (2019) supported a deeper dive into my positionality (see Figure 4).

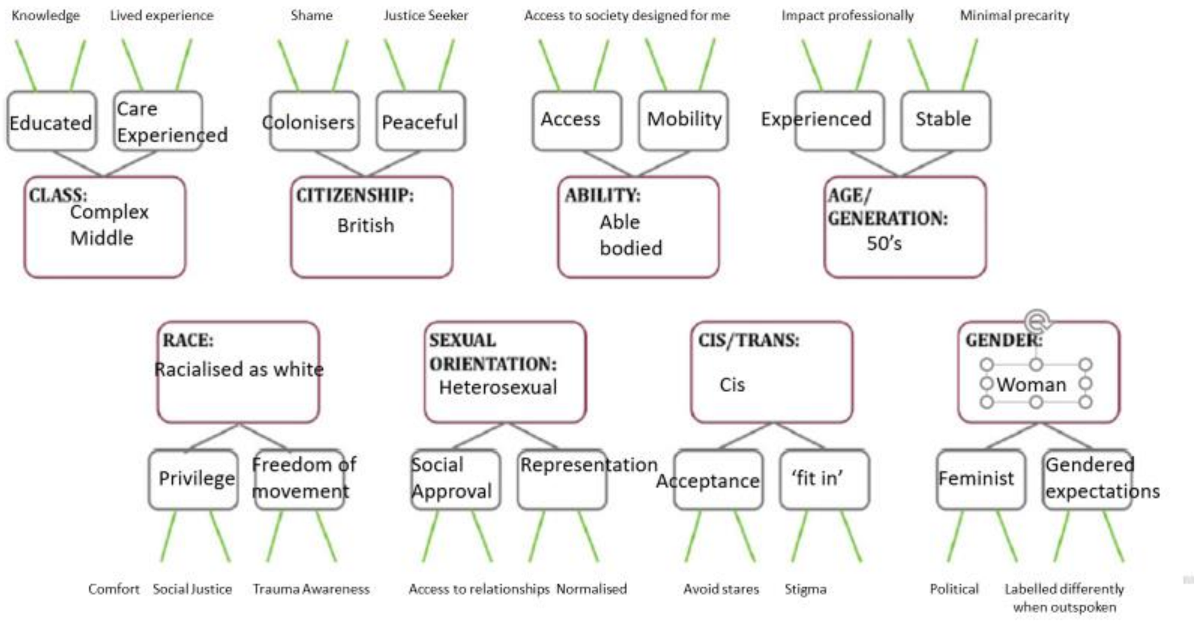


Figure 4 Completed Reflexivity Tool

I was not expecting to find anything new completing this tool, however, a visual representation of my privilege was a stark picture. While I had placed so much emphasis on the care experience within this research, it only arises as a complexity within the class section of this tool.

The use of different colours, tiers and connecting lines is encouraged (Jacobson & Mustafa, 2019) and this really supported the value of visually observing positionality. Furthermore, I could explore and make explicit what it might mean to be a woman in her 50's, bringing into all the spaces I show up in the menopause and, potentially, a threatening presence that also intersects with an invisible one. As a woman in my 50's I am 'uncomfortably invisible' yet as a cis woman, this invisibility, the blending in, becomes comfortable due to the normalisation of heterosexuality in mainstream spaces.

My axiological position is that research cannot ask questions of others who belong to marginalised communities, even if they themselves are no longer marginalised, without seeking to create some change for those communities. My personal, professional and academic experience has formed and shaped this empathic position as I will express throughout the writing. It is from this position that I explore what counts as knowledge and who benefits from it and who/what it has the potential to transform (Edwards & Brannelly, 2017). It is important to me that my research is not simply performative. The purpose of these explorations has to be for the betterment of those it speaks of and with, in this case, children who are in care, children who are excluded from school and adults with those experiences.

5.8 Principles of Rigour and Methodological Integrity

The participant recruitment strategy aimed to have as diverse a group as was accessible for a study such as this. I limited the use of my Twitter account due to concerns regarding the limitations of my audience. As substantial as my audience is, they are invariably people with devices, Twitter accounts, Wi-Fi, and good literacy skills, as a bare minimum. I was keen to capture a diverse range of adults who met the criteria ensuring that some of them had had very different lives to my own. There are narratives around the care experience that fall largely into the binary of success story vs poor outcome (Cherry, 2022) both of which locate the success or the poor outcome within the individual. Either the person 'beat the odds' and 'triumphed' over unimaginable beginnings or, they were 'doomed' and 'destined' to end up in prison, homeless or sectioned. However, this is simply not reflective of the lives that people go on to live after those experiences (Cherry, 2022).

My positionality has been discussed above and it is my view that it is inseparable from the research I have chosen to do and the way that I have chosen to do it. Differing from quantitative research, qualitative research seeks a different framework in its desire to be rigorous and also to be deemed trustworthy. Qualitative research asks for credibility, transferability, dependability and confirmability (Guba & Lincoln, cited in Maher, 2018, p.3), as opposed to reliability, replication and validity. What is especially important in this research are the aspects of my axiological position that arise such as transparency, integrity and relational trust between the participants and I.

In this phenomenological study, credibility lies in presenting a true reflection of my interpretation of their interpretation of their lived experiences. Transferability considers how the methodology could be transferred to other contexts, with dependability ensuring that another researcher could repeat the research because there is enough detail provided (Tracy, 2010). Rigour in qualitative research requires the researcher to have self-awareness (Koch, 2006) embedding reflection into the research process. Bringing this into the research helps me focus on what it is I bring to the hermeneutic circle (Koch, 2006), and how I understand the journey I take to reach my interpretation of the participants' interpretation of their lived experiences.

Finally, IPA guidelines suggest that methodological integrity can be met in a number of ways. These are through highlighting the central features of IPA in an introduction, clearly detailing the methodology regarding design, recruitment, 'data gathering', analysis and writing up, providing examples of annotated scripts, use of strong quotes from participants and a discussion on the findings commenting on strengths, weaknesses and suggestions for further work (Smith & Nizza, 2022).

5.9 Researcher Wellbeing

Diving deeply into lived experiences that I knew were likely to be filled with neglect, abuse and loss, I had to consider my own well-being and the emotional labour that undertaking this research would take (Moncur, 2013). However, even with preparation, I was still taken aback by my emotional responses. Some of the sessions were incredibly evocative and I was left with feelings of overwhelm at times. I chose to write journal entries of the feelings and emotions that arose during the process of interviewing participants. The challenge of being empathic is that you have to 'go there' with the person you are empathising with, and in doing so this creates a connection. The cost of doing this differs for different people depending on their own experiences and I felt far away from the idea of horizontalisation with the ability to distance myself from usual empathy to the phenomena, as raised earlier in this chapter.

Furthermore, being 'known' has been difficult. Not knowing that whether I am known, for example whether someone has seen me speak, read my book or simply follows me on social media, has been equally unnerving. People have expectations of me and I also have expectations of myself. One such expectation was that I can interview participants without feeling too affected. It is important to me that I am relational, connected, empathic but not because such characteristics signal a ‘good researcher’, but rather because that is how I wish to show up professionally and personally each day. Where people do know me, these are relationships/connections which are therefore already important to me, and I continued to show up in the way they are accustomed to. Doing that as a ‘researcher’ felt unnatural at times, stifling and without resonance.

The interviews were emotionally draining at times as each person withdrew into their own internal spaces of often unarticulated domains of pain, and took me with them. As I pulled myself out back into the space that sits between us, I would then draw within myself in a kind of push me/pull me emotional seesaw before returning to the space between us. So much resonated which left me nodding from personal experience, and so much did not resonate, which required a deep empathic response, and which would leave me weeping at times.

When we cry, are we giving consent to share that spontaneous explosion of emotion? Several participants cried, stating they had not ever said these things aloud before and in that deeply empathic engagement I found myself having to hold back my own tears, such a natural human response in the face of such an unnatural setting; a research interview. The emotional labour left me feeling vulnerable and it was vitally important that I practice good collective and self-care utilising my own professional supervisor, my academic supervisors, peers, and ensure that I am eating nutritionally and sleeping well.

5.10 Conclusion

The purpose of this study was to look at the intersectional experience of being in care and being excluded from school and how belonging was made sense of within that intersectional experience. This chapter has laid bare the research design, highlighting the recruitment strategy and the approaches to data collection. Analysis of the interviews and the written task were explored followed by the reasons for choosing IPA as the methodology and by a discussion of the ethical tensions. Considerations have also been given to researcher well-being and to the limitations of this study. In the following Chapter Six, I turn to detail the first series of findings as they relate to ‘Intersectional Experiences of Care and School Exclusion’. The identified GETs will be shared and analysed with some deliberations.

Chapter Six – Findings: The Intersectional Experiences of Care and School Exclusion

6.1 Introduction

The purpose of this research is to explore how experienced adults who were also excluded from school make sense of belonging. In order to address the research question, two sub-questions are asked. These are:

1. How have participants made meaning from their experiences of being excluded from school and being in care?

2. How do participants understand belonging in the combined context of care experience and school exclusion and the impact of that combination upon their adult life?

This chapter briefly outlines the nature of the data sharing and interpretation processes that led to the identification of nine GETs, which summarise patterns of convergence or divergence among the participants' accounts of their experiences (see Smith, Flowers & Larkin, 2022; Smith & Nizza, 2021). PETs, as described in Chapter Five, are personal to each participant, and as such they can be highly contextualised and individualised – which also makes them complex to report in individual detail, for reasons of confidentiality. GETs are rooted in these deep and detailed individual experiences captured by PETs, but are integrated across the group to express patterns of experience, even though the specifics of it may have been lived and recounted in diverse ways by the participants.

To maintain participants' confidentiality, I will not present individual findings on their PETs, but instead focus in this and the next two chapters on the more connected and aggregated level of GETs. This choice has also been made with a view to enabling – in light with my value commitments and research principles – the drawing of implications and recommendations for practice and policy. The GETs are clustered into three broad domains, themselves the result of interpretation: intersectional experiences of care and educational exclusion; overcoming disadvantage; and establishing a sense of belonging. The GETs pertaining to each of these clusters are explained in the next section.

This chapter explores in detail the first cluster, which comprises four of the nine GETs identified: Movement, Trauma, Power and Stigma answering the first sub-question. Chapters

Seven and Eight will continue with the presentation of the remaining two clusters of themes, thereby answering the second sub-question. Also included in this chapter are tables used to present excerpts from the transcripts and analysis of the data shared, as well as quotes from the individual interviews to support the key themes explored here. Collectively, the following findings chapters (Six-Eight) will address the overall research aim.

6.2 Group Experiential Themes

Summarising chapter 5, through applying the approach of IPA to the data shared by participants, personal experiential themes were identified from the experiential statements included in interviews and the biographical writing task. All data gathered are understood as accounts of the subjective experience of the participants and how they made sense of those experiences at the time of taking part in this research. It is important to make explicit that sense-making of experiences can change depending on where we might be in our lives and our 'recovery' from those experiences (Cherry, 2022). This is not only the case for the participants in how they make sense of their experiences but also in how I make sense of their sense-making. My interpretation has the potential to change each time I read their contribution and were I researching this area ten years ago, I may have made different interpretations. This research then, presents a moment in time, akin to a piece of art, created at the intersection between the participant and the researcher. This does not diminish the richness of the sharing of lived experiences, rather in a research context, it offers us wisdom that can be missed and misunderstood.

Through IPA (Smith et al, 2022) and with the caveats above, I then looked for patterns of convergence and divergence across the personal themes, and identified nine Group Experiential Themes (GETs), as indicated in Figure 5. Some of these themes were very obvious and mentioned continuously, including in participants' experiential statements and in the PETs, such as movement, relationships and finding belonging. Power became a group theme through identification in the mechanisms involved in children's lives who are in care and also excluded from school, while trauma emerged as a group theme more explicitly as being more encompassing than some of the personal themes such as violence, neglect or disruption, with a similar process for the theme of survival and resilience. Searching for belonging came through as a theme highlighting the different ways that participants had looked for ways to belong to something. Finally, stigma was a theme that ran through the findings yet was not mentioned by name by the participants, with some rejecting stigma and others internalising stigmatisation which developed into an internal narrative. In fact, prior to identifying ‘stigma’ as the theme, I had named it internal narrative. Upon further investigation, it became clear that this internal narrative was a symptom of the professional and social systems endured by those in care and excluded from school, and the theme was renamed.

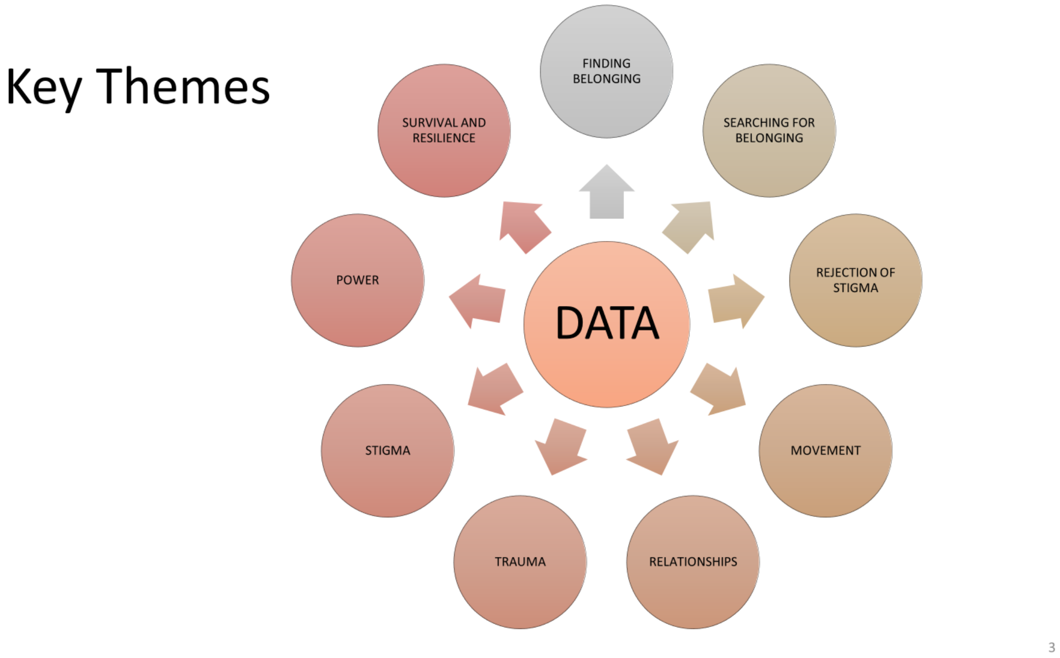


Figure 5 Identified Group Experiential Themes

Figure 6 shows how the themes overlapped and in what ways there were connections between GETs. Power, stigma and trauma and movement interweaved throughout the data, often without being named yet were intrinsically linked. Stigma and trauma rely on power mechanisms, highlighted later in this chapter, making it difficult to speak about one without the other. The other cluster of findings, survival and resilience, rejection of stigma, and relationships, emerged through analysing the impact of movement upon relationships and adaptation, and the impact of relationships on rejecting stigma. Finally, the search for belonging and then finding belonging sit together demonstrating a journey to establishing a sense of belonging.

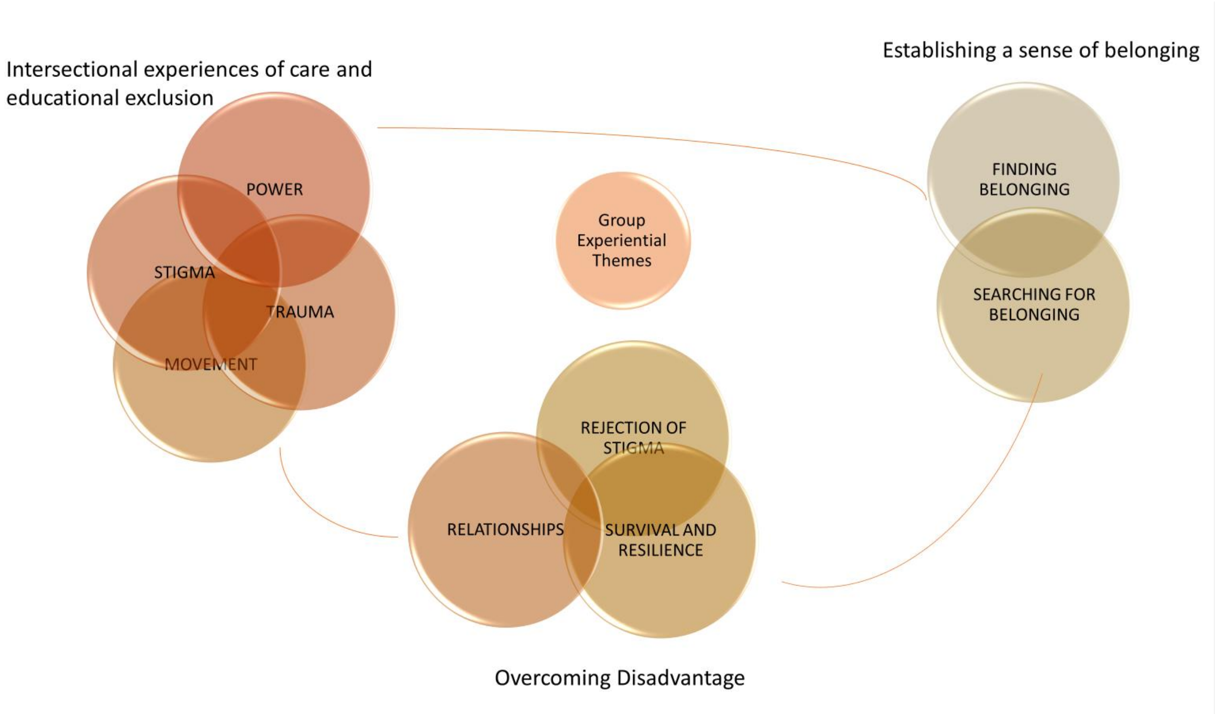


Figure 6 Overlapping Group Experiential Themes

In summary, some themes were quite straightforward to identify. For example, ‘movement’, which I will explore in the next chapter, mentioned so many times that identifying this as a PET and then also as a GET was explicit. However, the GET of ‘stigma’, which I am going to address shortly, was not a word used by any of the participants but rather my interpretation of the clustered quotes.

6.3 Movement

> "I was passed around quite a lot so I was passed down through their family first and then and the care system. ...like you know 'cause you're like, part of like your travel" (P9).

Every participant talked about movement; movement between homes they lived in, movement between education settings, movement between countries. Within that experience of movement came the internal interpretations as to why the movement happened, and also brought to the fore numerous strategies to enable them to survive and adapt in those situations.

Here P2 shares an internal interpretation when they talk about the sensation of feeling as though they were 'getting lost in the system' having moved around different places they lived, including countries.

> "So it started off in coming to the UK and then when I got to 11, I went back to (another country) and then when I'm there, I was gonna come back for secondary school to the UK but then my mum's mental health deteriorated. I was taken into care for bits of that and got placed back with my mum and then I was from the ages of kind of 14 upwards I was exploited. So then I was in care kind of 16 to 17, but then I've got to that age where they don't know what to do with you. And then yeah, kind of got lost in the system on there onwards" (P2).

The movement between education settings is further observed by P1.

> "By the time I was 12 I'd already been to three mainstream primary schools. I was excluded when I was eight and then the next one uhm, I went for a year and a half and they excluded me again and I went to a behaviour school and I did really well there like small classes, two teachers you had to do certain amounts and then like we had like a morning break in afternoon break then lunch. So it was quite separated. I did really well there, so they moved me back to a mainstream school" (P1).

The implication of doing 'really well' in what P1 describes of as a 'behaviour school' created more movement.

> “I struggled back in mainstream education again because I was different to those kids. You know, I just wasn't...we weren't the same and I struggled with the setting. I struggled with everything. I was excluded a lot, didn't go to classes. I liked PE and I'd always been a keen footballer but I wasn't allowed to do PE. Couldn't get to other schools and then I eventually got expelled from there” (P1).

An unintended consequence of the success of the alternative provision was the return to mainstream. In doing well in an alternative provision, P1 was then returned into a mainstream school which she was unable to cope with causing more exclusions and more educational and home movement. In the following excerpt, P4 shares some of the reasons for movement that might be unspoken ordinarily, and also demonstrates how the complexity of the ‘system’ fuses with the child and their sense making of moving from place to place. The idea that a child is ‘lucky’ to be fostered rather than placed in residential care is remembered alongside the types of experiences that one might have when living in a setting with other children who are also in care. For example, the almost incidental way that a resident ending their life by suicide is mentioned suggests that many very difficult things happen that are just part of the experience. Furthermore, it is in the context of this tragic event that another move is required.

> “First off, I was put in a children’s home. Actually, they're like assessment units, so I was there for about probably about 3 months, then they said to me, because you're quite a well-behaved child we will try and get you a foster carer...you're really lucky because most teenagers don't go into foster care so I went into awful foster carers for about 6 weeks and she was much more awful to my younger foster brother than me and then thankfully she gave up fostering and then I went into the worst children’s home in the town which everyone at the time in care went. Then I went to another children's home after one of the residents killed himself, then I went to the children's home in the town that was for longer-term children. I then went back to the other children's home and then I went into a semi-secure setting, when my case was going through Criminal Court. I went from there to another foster placement, then back to that unit again, then to another children’s home and then back to that unit again where I stayed until I was 18” (P4).

The way that P4 talks about suicide, about her ‘case’ going through a criminal court and the endless moves provokes either a sense of detachment to such debilitating experiences or integrated, ‘normalised’ experiences of movement and how movement brings to the fore so many different experiences. She describes a children’s home, which is a home where a group of children and young people live and are looked after by paid staff. She then describes it as a ‘unit’ rather than a home suggesting more of a coldness towards the setting as the memory comes to the fore. The assessment she speaks of leaves her with very clear feelings around being assessed as to whether she was ‘good’ and therefore allowed to leave and go to a foster placement. A foster placement is a family configuration where a child who is in care can be looked after as part of that family. P4 highlights here the way in which a foster home is thought of as a ‘good’ home to be in unlike a children’s home which is where you might get sent were you not ‘good.’ It is not the place of this research to address the complex discussion around residential homes and foster homes and the nuanced debate that has always been present on where children are best placed: in total, 11 different home moves are described in this quote. However, what is clear is that P4 has internalised this debate as a child and has felt the unspoken and spoken views of the adults around her. She has experienced the stigmatisation of being in care, understood the stigma of different types of care and carried that into adulthood.

Additionally, other recollections of movement demonstrate the vulnerability and fragility of complex family relationships around formal care provision.

> “I moved around quite a lot when I was younger, so I always lived in foster placements or with. ...I lived with a lot of friends when I was younger as well because I was just very unsettled. My dad still had parental rights, so he would be able to bring me back in and out of care and it was never challenged so I often slept on the streets because when my step mum would come home, who had quite severe mental health problems, she didn't want me there. So my dad would then kick me out and that happened the first time I think I was eight. So from the age of eight until I got my own place, when I was 16 ... I've never lived in any hostels or any residential homes or anything like that. I've always lived with friends, family and foster carers” (P6).

Movement described by P6 is of foster placements, friends and moving in and out of care and home. She talks of feeling unwanted at home but does not talk about feeling wanted in any of the other settings. My sense making of this observation leaves me curious about whether finding belonging in endless moves in care is less important than feeling a sense of belonging in the home.

The internalisation of the reasons for the movement are demonstrated by P10 as he has developed the view that he is a ‘problem child.’

> “I went into a children’s home and that was the worst time of my life... it was bad things happening...really bad things happened... it was terrible. They moved me from place to place...problem child. Nobody can control me 'cause I won't get medicated. Nobody had the time to take me to the doctors and medicate me. So I was living with an illness which I didn't know about” (P10).

Movement had impact on his health, on his ability to get to appointments, on being somewhere long enough to receive a diagnosis, on being somewhere long enough for any professional to develop a curiosity behind the behaviour rather than medicate the behaviour. In this quote we hear how P10 has internalised the idea that he is a ‘problem child,’ he is taken on that label. He cannot ‘control’ himself and no-one can ‘control’ him. He also shares the unspeakable while not speaking about whatever the ‘terrible things’ were that happened to him.

All the participants talked about movement; movement between home settings such as foster placements, children’s homes, back and forth between their family home and care settings, prison settings and secure settings. Movement was also talked about geographically around the UK and for some, around countries. Equally, movement between education settings was spoken of by all the participants. Every move offered an opportunity for a new relationship that might make a difference, for a sense of belonging, for safety from trauma. However, what is mainly described is how movement was a thread that weaved through power, how it is decided where the child goes, trauma, what happened to the child once they arrived somewhere, and stigma, how where you were was stigmatised by society and by other professionals.

The data highlighted power as a PET analysed further in this chapter. The PET of movement highlights other demonstrations of how power presents. A child has little power, if any at all, about where they live and where they might receive education. For children in care, this is amplified by all the experiences that have proceeded it. For example, P5 states the process of being moved, but also of having another person pack their belongings,

> “We had our bags packed for us and moved elsewhere and moved to the next place” (P5).

Implied here is that this is someone with whom they have no meaningful relationship.

6.4 Stigma: "Not Good Enough”

Children who have been in care experience stigmatisation is not a new phenomenon, and can arguably be attributed to the long shadow cast by early recorded care experiences of the 19th Century. Poverty was stigmatised in society and children in the Poor Law Institutions were taught to be ashamed of their families and of themselves (Ward, 2021). In other words, the stigmatisation of children in care was deliberate and it came through strongly in the data. Albeit the word ‘stigma’ was not mentioned as such by the participants in the interviews or writing tasks, the theme of not being good enough, not being acceptable, was clearly identifiable throughout the data as a shared and implicit narrative emerging through participants’ descriptions and reflections (hence originally naming this GET ‘internal narrative formation’).

> “I was a problem child” (P10).

In describing themselves and their views of themselves, participants referred to feelings from childhood while also sharing current reflections and assumptions. For example P7, a 50 year old mixed race woman, spoke of the intersection between racism and classism:

> “I was bullied for being mixed race after I moved to a predominantly white area council estate. I would explore any way I could to become 'white' like them, I put talc on my face, hated my dad for being Indian, tried to dress like my peers but couldn't always afford it” (P7).

The description ‘a predominantly white area council estate’ suggests that she believes us to share an implicit understanding of that to mean ‘working class’, expressing what being mixed race in a predominately white area council estate might have been like to experience.

As a 28 year old white woman Social Work Graduate, P6 also talks about her ‘negative beliefs” and that sense of not being good enough:

> “So I have to reinvent myself and I have to recreate myself and teach myself who the person I am who I want to be and you know, try and challenge myself all the time on these negative beliefs I have about myself and it's fucking hard work” (P6).

This internal narrative formation is here describing negative beliefs which suggests that she has located the problem within herself and thus strives to challenge herself ‘all the time.’ When I revisited the data again, it was evident that a further exploration was required to make explicit that the ‘internal narrative formation’ did not arrive from nowhere. It did not create a lens through which the world was viewed that arose from within the individual. Rather, it was the way those experiences were understood and experienced which created the ‘internal narrative formation.’ When this is happening to a child in their developmental period, we might think about those narratives as forming while the child and/or young person was ‘wiring up’ hence the internalisation into identity. Drawing from the literature, my thinking around stigma was supported; children in care experience stigma and view themselves, in the role of professionals and society in this and also in who might gain from this keeping stigmatisation alive. Identities develop through the sense making of a person’s story that is not static but rather a co-creation between the person and those around them (Roberts & Dutton, 2009). In other words, it is relational and experiential.

I interpreted diverse types of stigma faced specifically by children in care; systemic (professional and social) and individual (self-stigma). Professional stigma can be found located in professional practice. It can be found in the language used between professionals that can sometimes end up as recordings in files held about children that they go on to read as adults. This might show up as jargon or opinions. It can also be found in views held by some working within the care system. Those working in the system may share social views towards aspects of the lives experienced by children in care and their families such as parental incarceration, abuse, neglect, exclusion, racism, classism, sexism or ideas about what children who are in care might deserve.

On a systemic level, the stigma narratives internalised were of the mechanics of being in care. For example, this manifested through living in certain children's homes, through being in or from certain parts of a town and of being from families previously known to services and around being in prison. Some of these stigma narratives are expressed below.

> "Lost in the system" (P2)
>
> "It (the children's home) was where all the bad boys went" (P3)
>
> "You're lucky to get fostered" (P4)
>
> "You're looked after by the state" (P8)
>
> "Teachers said I wouldn't amount to much like my mum" (P8)

The experience of being in care then intersected with many other aspects of marginalisation such as race, class, and poverty.

> "I was bullied for being mixed race" (P2)
>
> "The only black kid and feeling 'not normal'" (P3)
>
> "I have never felt like I fit in in England particularly as it has not been very kind to me as a place" (P7)

On an individual level, this systemic view appeared to then be internalised in how the experiences were understood and either were then assimilated or rejected. I will explore rejection of stigma in the next section.

> "I wasn't good enough" (P1)
>
> "I was deemed a high risk" (P1)
>
> "My understanding was I wasn't good enough for foster care, so I went into a children's home." (P1)
>
> "I was always like the naughty kid" (P2)
>
> "I was maladjusted" (P3)

> “I felt hated” (P4)
>
> “I felt flawed” (P5)
>
> “I felt I was naughty” (P6)
>
> “It’s like there was something wrong with me, that nobody wanted me” (P9)

With this data, we are given an opportunity to think about the internal dialogue that might occur when the tension between how someone perceives themselves collides with systemic stigmatisation and self-perception.

> “I begged my social worker to not take me there because I already knew that the school had a reputation and it's where what we consider where all the bad boys went an’ I didn't think I was a bad boy” (P3).

The data conveyed systemic stigmatisation that was then internalised by the individual. The individual might not have described themselves as having been stigmatised. However, the language used informed my interpretation of what I read across all of the participants data: stigma was present in society and in professional practice, which subsequently formed a narrative that impacted on identity formation and the development of self-stigma. This is aligned with Andersen et al’s (2022) view on stigma being experienced by groups, but causing the suffering to individuals. Figure 7 below demonstrates this systemic and individual stigma.

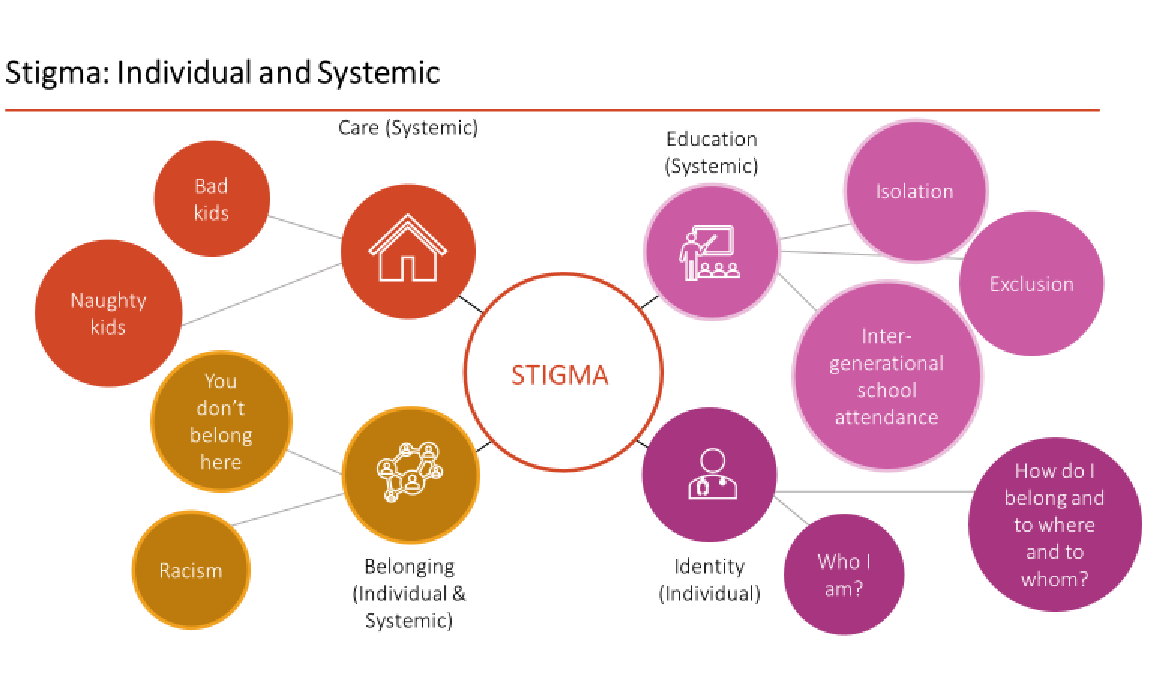


Figure 7 Stigma: Individual and Systemic

This movement between systemic stigmatisation and how this impacts those using those systems, warrants further exploration. It is not straightforward to theorise on 'stigma' as it is contested, rejected and potentially deemed inadequate, including by those who have experienced it, thus creating a 'definitional morass' (Pescosolido & Martin, 2015). It does, however, provide a medium for exploring the data. The complexity is intensified for the participants who experienced systemic stigma, professional stigma, which became internalised. These participants would then subsequently become a professional working in those systems; such as a teacher or a social worker.

> "Now I'm a safeguarding social worker would you believe and I often think what on Earth am I doing, you know, doing this job given my background given my knowledge of how it affected my own children." (P5)
>
> "Now I've actually done social work and also research into modern slavery I'd say one of the things that really stood out is the labels that they put on you from your outcomes." (P2)
>
> "I thought becoming a social worker would change how I viewed things but it has reinforced the oppression. Fighting as a child, fighting that oppression,

> fighting that discrimination to then have to do that as an adult and as a professional." (P6)

Deep intersections of stigmatisation that were nestled between being in care and school exclusion, and were intertwined with experiences of ethnicity, race and class. One participant talks about the experience of being from the Gypsy traveller community:

> "I was treated very differently to the others. The other people that were there in most of the schools because of my background from where I came from because I was a traveller and because I was like I think it was, you know different and that just made me feel like I have to always be on edge like ready to... I don't know." (P9)

Powell (2008) writes that "the persistence of stigma in relation to British nomadism runs so deep that the Commission for Racial Equality (2006) concluded that Gypsies and Irish Travellers are the most excluded groups in Britain today" (p.88), echoed recently by Brassington (2022).

Some participants further highlighted the complex intersection of care and educational exclusion with being racialised as black or brown:

> "Ofsted says it's amazing. Outstanding. It was one of the best schools in the area that wasn't a private school and going into there, already you kind of feel like an outsider because of your race and also... because I was kind of the only brown child in there." (P2)

> "As a black boy (mixed race – increasing my sense of not being one or another) I didn't feel I belonged where I found myself; a children's home in a new town on the outskirts of London." (P3)

The intersection of care and school exclusion with class *and* racism was also raised, and demonstrates the multiplicity of the experience of marginalisation and stigmatisation.

> "I lived with my grandparents until I was 10 and it was quite a middle-class upbringing. I didn't realise I was different in any way and then my mum wanted to move out of there and she got a council house. That setting was really awful for mum. I had a lot of kind of racist attacks then because I'm mixed and I didn't realise I was any different before that, so that was really hard on me. I guess

> from that, that's when I kind of started to kind of run away and just be kind of crazy and not going to school and stuff like that.” (P7)

The interviews and written materials thus offer strong indications not only of how stigma exists in society and in professional discourse, but also of how it ultimately impacts an individual’s identity during development and well into adulthood. There are layers of experience that are stigmatised and stigmatising, and they interweave to create a sense of disconnection and confusion about who a person is and where they belong.

6.5 Trauma

The entry of the word ‘trauma’ into the lexicon of understanding the impact of harm during the developmental period of childhood has only recently crossed into a more mainstream audience. As highlighted in Chapter Four, the rise in understanding around psychological trauma as an impact of distress and a way of thinking about the impact of ‘what happened to a person’ rather than approaching what is being presented as being ‘what is wrong with this person’, is now more firmly rooted.

It is through the lens of the impact of the experiences endured during the childhood developmental period that ‘trauma’ was identified as another GET. The literature around trauma provided fertile ground by which to develop a sensitivity to data that indicated participants’ experiences of trauma; nonetheless, my own lens aside, some of the participants themselves directly used the word trauma to describe their experiences, so this theme had also been a PET that had arisen inductively.

> “My experience of care was pretty traumatic” (P1)
> “My mother equally went through trauma, so we're a result of her trauma” (P5)
> “My childhood was disrupted and so my childhood, you know, I perhaps didn't develop as my friends did or people who didn't experience childhood trauma” (P6)

Diagnoses and disorders were much more widely raised in the data and while trauma does not mean that the inevitable outcome will become a mental health diagnosis or that a mental health diagnosis will always be the outcome of trauma, the literature suggests that the two can be interchangeable. In other words, a diagnosis might well locate the problem in the individual without further investigation. This creates a lifetime on medication instead of access to trauma therapies. Poor mental health as a response to trauma did arise in the data demonstrated in how those who had an understanding and used a lens of trauma, were not the same people who used the lens of the diagnostic language of mental disorders.

> ‘Post Traumatic Stress Disorder’ (P2, P9, P10)
> ‘Social Anxiety Disorder’ (P8)
> ‘Attention Deficit Hyperactivity Disorder’ (P8)
> ‘Paranoid Schizophrenia’ (P10)
> ‘Split personality disorder’ (P10)

All the participants recalled memories of events that brought traumatic experiences to the fore. Some examples are highlighted below. For example, P1, a 32 year old white British woman, recalls vivid memories of the inside of a ‘secure unit’ which she arrived at as a 13 year old. As an adult she recalls sleeping in a bedroom rather than a cell as a reward. She is able to describe the inside of the cell and while she did not describe this as traumatic, this element of the interview was given amidst a catalogue of remembered ‘homes’ during her time in care as a young teenager.

> “When I first went in there, you like, walk down the corridor and then you go into the cells and those bedrooms upstairs. But you had to earn points to go and sleep in a bedroom and it was like a bare concrete cell and there was just a crash mat on the floor like no wooden furniture or nothing” (P1)

Throughout the interview P1 uses the word trauma 4 times and the word traumatic twice explicitly referencing her time in care as a ‘traumatic experience.’ In referencing trauma, she describes isolation, aloneness and having nothing. At this stage of her life, she talks about the way her life is now, and that she has her own family:

> “I've got like this life that I've created for myself that sometimes I feel like I don't deserve 'cause you get that impostor syndrome and stuff, don't you, but I've got real true friends that care about me. Knowing like where I am now compared to where I was. It's more of a journey, isn't it?”

Others, such as P2, a 29 year old Asian female, did not use the word trauma, but described what are commonly recognised as traumatic events:

> "I'm also survivor of modern day slavery and I would say that all the vulnerability factors stemmed back from when I was in care" (P2)

Furthermore, the implicitly traumatic experience of the loss of his mother at a young age was recalled by P10:

> "My mother was the only person I did trust growing up. I didn't trust nobody else. Like I'd phone her from everywhere I went and like they were taking me to visit her every weekend because she was asking and when they talked to me she didn't know how to cope. I had to take care of my brother. I had to feed him and change him as and I was only 12 and they've took me in care again and so my mother found it hard like. I mean she went and lived with my Nana and then my father's mom. My brother's father took my brother off my mother so that affected her in a big way. Then she had a lung transplant. Then she died. I was in prison, I was." (P10)

It is widely understood that parental death in childhood during the years of development, understood to be during most of our time in utero to around 25 years old, is a traumatic event and bereaved children can be at an increased risk of developing mental health issues in adulthood (Azuike et al, 2022). Moreover, P10 describes going into care "as the worst time of my life" which happened prior to his mother's death. He does talk about having diagnoses for PTSD, ADHD, Paranoid Schizophrenia and Split Personality Disorder and in so doing is very aware of his own poor mental health. Moving forward from his experiences, he attributes where he is today to the organisation supporting him and his new partner. My interpretation of his interpretation of what happened to him was that he was in the early stages of making sense of his experiences, but was clearer about helped him to achieve Post Traumatic Growth (PTG), namely relationships, personal and professional.

Whether the participants shared diagnoses, events or the manifestations of dealing with distress, trauma provided the soundtrack. In speaking of trauma, whether explicitly or implicitly, the participants made reference to abuse, to exploitation, to violence, isolation and neglect. Key characteristics that come through in the accounts of trauma are powerlessness and isolation. Within the transcripts, traumatic events recollected refer to "feeling scared" and "lost" (P3) and that "care was extremely abusive" (P5). "Where are the relationships" asks P8 while speaking about being isolated in school. For P10 being any more detailed than "bad things happened... really bad" was as much as he could share.

One participant spoke vividly of powerlessness, sexual and physical abuse and neglect with much detail:

> "Even the nurses behaving inappropriately trying to get me to go and see adult films and so on, you know it was really shocking and I was actually groomed there by somebody and so now I think if children are groomed like that, it would be considered statutory rape, yeah? It was horrible." (P5)

Other participants were also descriptive about what had happened to them:

> "As a child it wasn't my responsibility to build relationships with adults that couldn't trust, because even by then I was being sexually abused. I've been physically abused. I've been neglected." (P1)

> "Mum alcoholic, dad drug dealer and shot himself in front of me when I was young." (P9)

In conclusion of this section, trauma is, among other things, about a loss of power, and a sense of powerlessness (Herman, 2001, Rothschild, 2010, Van Der Kolk, 2015). There are numerous accounts of trauma in the data, yet trauma was expressly recognised and defined in these terms by only some of the participants. By investigating the detail and experience of trauma such as the impact on them as a child and into adulthood, we can extend our understanding of the impact of trauma and the long shadow that it casts.

6.6 Power

Like trauma, power is a thread that runs explicitly and implicitly through the data gathered, and this is also unsurprising. Unlike trauma, power is barely made reference to but is identifiable in the detailed accounts, mostly where trauma is being described. Where children are concerned, the 'state', which intervenes in the family, the care system and the compulsory education system are settings and systems that do 'to' a child rather than 'with'. Especially when those two systems, care and education, collide rendering a child powerless.

Using a trauma lens to view childhood experiences, such as abuse and neglect, locates power and the powerlessness experienced at the heart of the experience. Whereas power has traditionally been left out of the psychiatric discourse on emotional distress (Boyle, 2022). This can be observed in the more recently developed Power Threat Meaning Framework which has been a collective and inclusive endeavour that has sought to develop an an alternative lens to the diagnostic model of distress and mental illness (Johnstone, 2022,). This framework PTMF focuses on meaning making rather than biology, and is premised on the idea that the meaning making is individual and not fixed. Additionally, that the patterns of threat responses (rather than symptoms) are about what people 'do' rather than what they 'have' (Johnstone, 2022, p. 16).

In considering the powerlessness that is presented in the data, several different aspects of power are considered. These are embodied, coercive, legal, economic, interpersonal, social/cultural and ideological (Boyle, 2022). The data highlights these different aspects of power weaving throughout the participants' accounts, which are explored further in this section. For example, P1 expressed:

> "I already had all these professionals involved in these people talking about me deciding what they knew was best. Don't remember being included in any of their meetings " (P1)

Feeling as though she was not included, not accepted or involved, not only speaks to the lack of control and agency she felt in her own life, but also potentially of what 'unbelonging' might feel like. Others knew best, and she felt there was no way of having her voice heard:

> “You're not in secure accommodation, because although you can't leave, you know it's not prison, but actually it was. If it was looked at in this context, I wasn't able to leave. I wasn't able to go out when I wanted. I had my whole teenage years being restrained in a unit where if I left the grounds or if I went out on a company, I would get arrested” (P4)

Power comes through here in P4’s descriptions of being restrained (physical violence), and of being unable to leave the building when she wanted without being arrested, and the power then exercised by the police in an arrest. Here, power is intrinsically connected to feelings of safety and of having freedom.

> “On one occasion she [the member of staff] tried her best to pull my trousers down, but I was on my period and I was probably about 10 'cause I was quite early” (P5)

The physical and sexual abuse described in P5’s account again link power to force and abuse. In a different way of thinking about power, P7 talks about the experience of being a woman of mixed race living on a council estate.

> “You know, for me, social exclusion is not being made, feel a human being. It's like a mix of things so yeah, there's many kind of levels to it if you know what I mean and so I wasn't just mixed race. I was a female. I was living on a Council estate, you know. So there was a lot of kind of things against me ” (P7).

These are all experiences that are visible and in bringing them together, she highlights intersectional disadvantage and social exclusion. The stigma is the visibility of those experiences and how stigma is a form of power exercised over others (Tyler, 2020). In other words, it is difficult to cross analyse the data and talk about stigma without talking about power. Likewise, it is not possible to discuss power without discussing trauma, and to speak of trauma without speaking of power and stigma.

6.7 Summary of Analytic Insights

Stigma, Trauma and Power are inextricably linked. Their collective impacts on the individual will be connected to the way that a person has made meaning of the events they have experienced, the relationships and opportunities available to them, and the ability of the person to access those relationships and opportunities. The GET of rejection of stigma is further worth exploring and could well serve as a rejection of powerlessness, and a rejection of being defined by trauma. Relationships will be explored further in Chapter Seven as a GET.

Figure 8 below demonstrates the intersection of stigma, trauma and power, and provides an opportunity to reflect on how difficult it can be to break free from this toxic web.

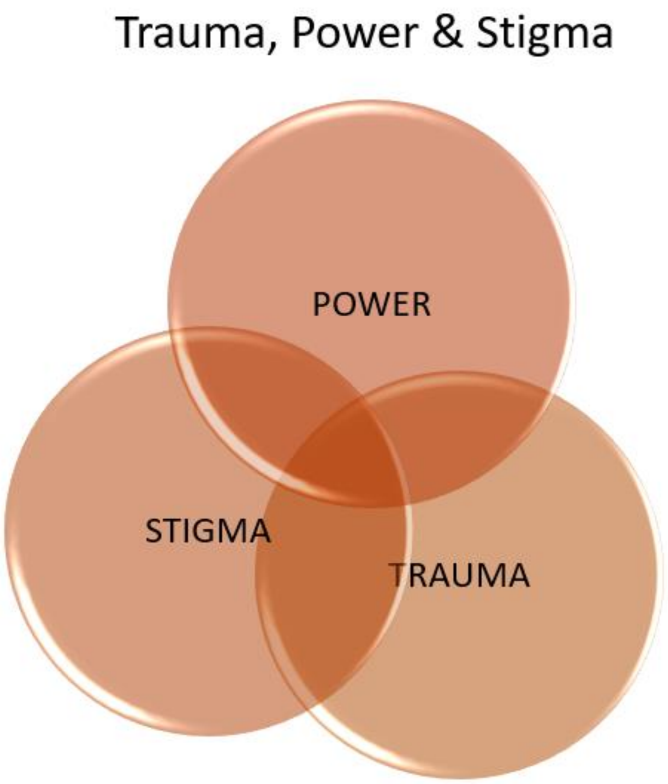


Figure 8 Stigma, Trauma, Power Intersection

Stigma, Trauma and Power are inter-related, intersectional and multi layered. In thinking about stigma, I have identified three types of stigma that the data highlights, set out in Figure 9, with more detail on the different categories in Table 12. Firstly, there is Professional Stigma which is found in the language used in practice and in policy by professionals such as educators, social workers, police. Secondly, Social Stigma refers to the experience of living in care, of being excluded from school and of racism. Finally, Self-Stigma is the internal narrative developed through the exposure of the Professional and Social Stigma, which manifests in low self-worth, lack of confidence and patterns of behaviour that are recreated from childhood experiences.

Power highlighted within the data also shows up in three ways. There is Coercive Power which shows up in state intervention and abuses of that intervention, physically and sexually. Then there is Professional Power which is demonstrated through practices that silence, isolate and restraint using legislation, law and policy. Finally, Economic Power in poverty in childhood, poverty after care, austerity and access to education.

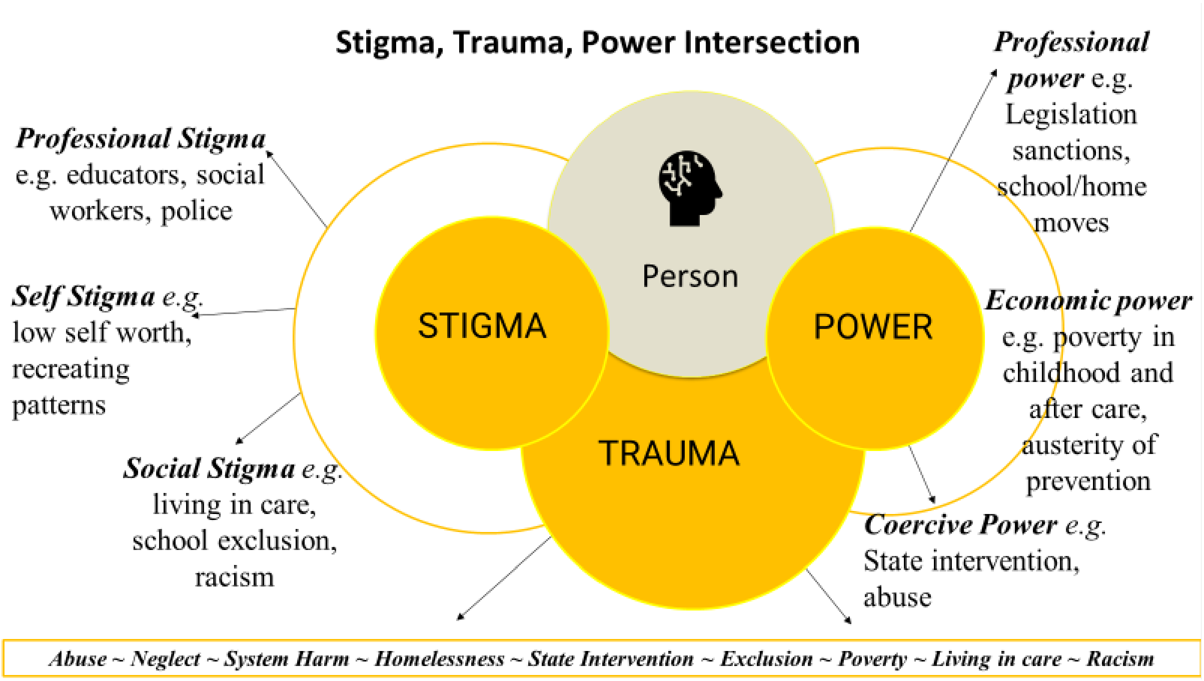


Figure 9 Types of Stigma, Types of Trauma and Types of Power

Trauma	**Power**	**Stigma**
Neglect Physical abuse Sexual Abuse Polyvictimisation Community Trauma Child Trafficking System Harm Homelessness State Intervention Exclusion Poverty Living in care Racism Bereavement of a parent	**Professional Power** for example the power of the state to have intervened and taken a child into care, the power of service entitlement, the power to move a child from one home **Coercive Power** for example in state intervention with families, during different types of abuse and neglect and in control of access to support **Economic Power** for example policies that perpetuate poverty for families and therefore experienced in childhood, the financial impact of leaving care and essentially being 'abandoned' by the state, availability of preventative services.	**Professional Stigma** for example by language used, historical notions of 'care' and 'deserving poor' and beliefs of educators, social workers, police **Social Stigma** for example the stigmatisation of what it is to be a child living in care, in children's homes, school exclusion, racism **Self Stigma** for example how these experiences of professional and social stigma impacts identity, low self worth, self belief.

Table 12 Trauma, Power and Stigma

Trauma refers to many different experiences that the participants shared which included abuse, neglect, system harm, homelessness, state intervention, exclusion, poverty, the experience of being in care and racism.

6.8 Conclusion

This chapter focused on three of the GETs identified in the data gathered: Trauma, Power and Stigma. It sought to justify why those GETs had been interpreted from the data while also exploring further implications in thinking about meaning making from experiences that were traumatic, and the potential impact upon how participants experience the world. The chapter seeks to demonstrate how Power and Stigma are identified as GETs within individual accounts and then through cross analysis as Key Themes, even though they were not explicitly the words used in the data. The chapter further seeks to explore the intersectionality of Trauma, Power and Stigma. It further acknowledges the capacity and tenacity demonstrated by participants who tried various strategies to find belonging, alongside the rejection of stigmatisation once they identified it had seeped into their internal narrative of self.

Chapter Seven – Findings: Overcoming disadvantage

7.1 Introduction

As explained in Chapter Six, nine GETs were identified in this research and the previous chapter explored Movement, Trauma, Power and Stigma. This chapter will explore the GETs of Relationships and Rejection of Stigma, with the aim to address these themes in the context of how the participants overcame disadvantage. This will help to answer the sub question of how do participants make sense of belonging in the context of care-experience and school exclusion and the impact of that upon their adult life? In order to achieve this, there will be some analysis of power and how it is present in the life of a child in care. Mechanisms of powerlessness are explored through the lens of movement and the interruption of relationships. There is then some analysis on surviving the impact of powerlessness, ruptured relationships and movement, and stigmatisation in the context of overcoming the impact of these experiences. Finally, the chapter will explore the usefulness of the concept of resilience for adults with the experiences of being in care and school exclusion. The chapter will conclude with a summary of analytical insights.

7.2 Survival and Resilience

7.2.1. Memories and Time

The previous chapter highlighted power as a GET. A child has little power, if any at all, about where they live and where they might receive education. For children in care, this is amplified by all the experiences that have proceeded it. For example, P5 expresses the lack of agency in the process of being moved but also of having the packing of their belongings taken on by another person, potentially by someone with whom they have no meaningful relationship.

> “We had our bags packed for us and moved elsewhere and moved to the next place” P5

Someone with whom a person has no relationship, touches their belongings, belongings which may be few yet deeply meaningful, such as reminders of home, and then that person packs those belongings. This could evoke many feelings of powerlessness.

In this context of powerlessness and repetitive movement between home and educational settings, the process of survival and adaptation may present in different ways. For example, in certain behaviours, in particular ways of understanding one's identity and also through indications of how a person understands connection or belonging to the self, to others and to the environment in relation to time. One aspect of this comes through in how P2 perceived that there was a pointlessness of believing in stability and describes the adaptive behaviour that follows:

> "I would never unpack my bags or my suitcase. Moved around in bin bags. There's no point making my room nice...no point getting pictures" (P2).
>
> Again, there is a reference to belongings and how they are handled, placed in binbags, or not handled such as 'unpacked.'

Formation of identity and connecting with others becomes problematic when those 'others' keep changing. The transient nature of being in care is vividly highlighted by P4, with a poignant emphasis not only on how one's own making of memories may be affected, but how and whether others might remember and value important aspects of one's experience and identity:

> "Spending time in the care system, meant that I did not belong to places or people, I had no shared rituals or history, I was lucky if people remembered my age let alone anything important like my friends, what my favourite subject was and what excited me. Instead, I felt like I was wrong" (P4).

Another consequence of so much movement during this developmental period appears to be how recollections were muddled and timelines lost in confusion about when and where some of the events took place; holding on to memories and a clear chronology of events is difficult.

> "I had my 18th birthday. No, I had my....I think I had my 18th, but now I couldn't have done because I had a flat (looks up and furrows brow demonstrating that they were thinking)" (P3).

This sense of time lost, of confusion, might suggest that some of what has happened has been suppressed so it can be 'forgotten' or it might be that this time has not been fully integrated and therefore in some ways it is unresolved. There are also aspects of an experience that are ‘remembered’ but that memory is more of a sense of something rather than an actual memory:

> “I think I remember that I was chosen for that setting. I don't know. It's just in my head somewhere. There must have been a meeting maybe. And they were... I think somebody said to me that this is the one that you're going to. And because, you know, because of that meeting, or I can't remember, I don't really know if that's true or I made that up. Right?” (P7).

Making sense of timelines can be one of the reasons that people want to read the files that were kept on them as children, even if these files are written within the same context of professional demands, boundaries and legal requirements that can further reinforce relational disconnection because making sense with any memories is a form of survival.

7.2.2. Fighting for Survival

The research exposes the reality of the multiple adversities experienced through living in care, through being separated from family relationships and communities and recovering from the loss of education. The fight for survival is present in the data in various ways. The first verse of a poem written for the biographical writing task talks about fighting, but with a sense of resistance to it, as though he really has no option but to fight:

“THE LONELY GHOST

What does this mean if you never had it?

You search for it in places even when you were hit

Abuse you take it cos you think its right

But you end up in a state where you want to fight

You take it cos you think its what you should get

Really your searching for your needs not met” (P10).

Others spoke of fighting as a way of protecting themselves and their belongings from other children and young people in care:

> “I had to fight every single day so I knew how to avoid violence” (P3).
>
> “And then you've got the care system where, you know, people in the care. It's kind of territory and a bit of a fight for survival. So I was doing things that I didn't think that I would do. Your make up your underwear would get stolen, and by other foster children and it was about fighting and you know, then you're almost turning into something that you have to do to survive” (P2).

Several participants also mentioned fighting to survive the professionals:

> “On one occasion she (staff member) tried her best to pull my trousers down, but I was on my period and I was probably about 10 'cause I was quite early. I fought this lady off, there was a physical fight going on in the dining room 'cause there was no way I was gonna let her do that because that would just been horrendous. For me that was, you know what, I've managed to do something by fighting back, you know. I mean physically fighting back” (P5).
>
> “I had my whole teenage years being restrained in a unit where if I left the grounds or if I went out on a company, I would get arrested” (P4).

Then there is fighting oppression and stigmatisation:

> “Fighting as a child, fighting that oppression, fighting that discrimination to then have to do that as an adult and as a professional” (P6).
>
> “And when you do, you know when you do achieve, when you are able to work and when you are able to drive and you are able to do an undergraduate degree, the response that people get is well, you know, I think that's outstanding after everything you've been through even as a survivor, you know, you're now helping with their research. That's fantastic, but it should be an opportunity in the 1st place. So whilst people say it out of goodwill, I think its condescending 'cause. you think, well, what did you expect?” (P2).

Finally, there is the fight within and the strategies adopted for dealing with it:

> “I was getting further involved in drugs and exploitation and I just wasn't really present” (P1).

> “Never ran away but discovered marijuana here so smoked a lot to get through it” (P3).

> “My childhood a battle ground fighting for my dignity, my adulthood a battle ground navigating the effects” (P5).

> “I've always used alcohol as a crutch when life was good when life was bad, when I wanted to forget the world and more recently I've kind of put that down and learned other kind of ways to deal with stress, anger, and you know, I've got a loving relationship which was always, you know, not exactly stable when I was younger, self-sabotage probably” (P8).

> “Stumbled into the world I only knew… Making Babies – taken away. Taking Drugs. I am a lost soul” (P9).

7.2.3. Endurance and Adaptation

Another consideration is the physical, emotional and mental labour involved in surviving a childhood without a relational wealth which can sit alongside adverse experiences.

> “I’ve gone through life the best I can, depending almost entirely on myself. In many ways it gave me a forced resilience but one I wish I’d never had to have!” (P8).

It may well be the case that it is one’s capacity for endurance of not just adversity but also of living with the impact of that adversity without relational wealth, that supports overcoming it and developing as resilient.

The word ‘endurance’ often tends to feature more when thinking about the capacity of a sports person rather than the ability to live through adversity and trauma without sufficient relational networks. Yet endurance provides another way to think about why many people can grow and heal and find meaningful relationships and lives as adults when childhood had been so harsh.

> “I have muddled through as attempts to find the right support were unsuccessful” (P5).

> “I can adapt like a chameleon” (P2).

> “My behaviour, I was excluded. It's because it might be easier. It wasn't really me the person that was being disruptive. It was just me trying to fit in and then I'd end up getting thrown out of school and then passed on to somebody else passed to another family” (P9).

These participants highlight muddling through, adaptation, and, in the last example, the use of a persona as their strategies for endurance.

7.2.4. ‘Coming through’

Some participants used the term ‘resilience’, and others described qualities that might be described of as resilience. Notwithstanding the extensive research base on resilience and the overuse of it as a concept in relation to children particularly, the need to understand why some people can thrive after adversity and trauma in childhood will always remain of interest to those working with those children. The word ‘resilience’ can evoke negative reactions for people who have endured adversity and trauma as children, yet this research suggests that it is plausible to think of resilience as having the ability to achieve in learning, the capacity to engage in relationships should they be available and the ability to have the basic needs of housing, food and warmth met. This view of resilience might be also considered as ‘positive outcomes’ and the research suggests that this is the view of the participants. However, there is also a view that resilience is ‘coming through’ something and being ‘ok’ after having done so:

> “I know personally that the word resilience conjures up a lot for a lot of people, but it's the only word I can think of. You know, the children are just so resilient to go through some of the things that they go through and make it through the other side like and I feel really proud of myself for doing that and I feel like it's really motivated me to it or want to be better” (P8).

> “Regardless of my background I managed, albeit later than most, to achieve a BSc in Psychology and an MSc in Social Work and I now am a Safeguarding Social Worker” (P5).

> “I do feel now as an adult, I'm in a really good place like I have my own house. You know, I'm I have, you know, I have a profession, I have a dog” (P6).

> “I’m learning things I didn't get taught as a child or things that I know that I need to equip me for adult life, so I kind of have to teach myself those things or, you know, for instance, pay for a therapist or pay for a service to educate myself” (P6).

> “I realised not long ago was that it doesn't really matter because it's just about people. You know, I've got my kids. I got grandkids. I got my pop, my husband

> and you know, as long as we're around each other and together and supporting each other” (P7).

The findings strongly suggest that people can and do recover, and the ways recover occurs are inextricably linked with access to relationships and education. Every participant talked about losing or gaining their education and every participant, regardless of having been excluded from school, talked about education as something to be desired. The loss of education may have created vulnerabilities, but it may also be a stimulus for resilience.

7.3 Relationships

The impact of not having meaningful, safe and longstanding relationships came through as a strong GET in the research and as something that participants were deeply aware of. P4 connects not having relationships as a child with movement.

> “Yeah, I didn't have any relationships as a child and I think that was my biggest downfall because I was moved so often” (P4).

There is also a recognition that certain relationships were with strangers and for P9, this was connected to her life as a traveller.

> “I didn't really have any relationships with anyone. I was married off, so I was married to a person that I didn't know” (P9).

However, relationships with strangers are integral to the experience of being in care. The expectation to having a relationship with a stranger when trust was so badly damaged has a history of being named as ‘hard to reach’ or ‘won’t engage’. P1 unpicked this in relation to their own experiences of ruptured relationships, and carried a sense of expectation to build relationships with adults.

> “It's difficult for me to build relationships, but as a child it wasn't my responsibility to build relationships with adults that I couldn't trust, because even by then I was being sexually abused. I've been physically abused. I've been neglected” (P1).

Furthermore, P3 went onto express:

> “I left care completely, unable to hug anybody or be hugged. In fact, if anybody touched me up, you know, tried to hug me, I'm gonna be like this (pulls back, hands up). And, you know, they'd let go really quick because their reaction was, you know” (P3).

The impact of abuses experienced inter-relationally is shared by one participant in a verse of poetry:

“In care, excluded, and in Jail
Was I always destined to fail?

No one cared, or cared the wrong way
Too young, too ‘naughty’ to even say.
No trust in the people I should trust
Because abuse was just not love but their form of lust” (P10).

The familial separation, between siblings and from parents, the severing of community connections, childhood traumas and the continued movement between home and education settings are raised extensively in the research. There is often another layer that emerges that is not always known to those working with the child or young person. One participant spoke of how being excluded from school interplayed with a sense of exclusion from his mum:

> “After I was excluded, there was no way they (school) were ever going to accept us back and it upsets me a bit now because....(visibly upset) not only because I, I know why I was behaving like that, but it was my mum’s school and now my mum is not here anymore. I kind of I don’t know. I feel that I mean obviously that was a connection that I had with her that I kind of lost because of silly behaviour and stuff. So I kind of regret that now” (P8).

However, the impact upon those who experience exclusion can arguably be compounded by professional boundaries that veer towards caution and avoidance of risk in being accused of ‘breaking professional boundaries’ or engaging in abuse. This is opposed to relationships that tend toward love and connection with the children and young people in these professionals’ care.

That boundaries are complex, dynamic and culturally diverse does not tend to detract from the acceptance that there are boundaries so solid that working relationally can become impossible.

> “My social worker wasn't very loving towards me. She didn't hug me” (P3).

However, there was a lot of evidence to support the power of relationships with professionals, for example social workers or teachers, with some participants referring to such individuals as making a profound difference to them. What was described as making this profound difference was really nothing extraordinary in a relationship. P6 spoke of a head teacher who was “life changing”, yet was simply accepting and supportive of them, offered appropriate physical contact, and ensured educational achievement that enabled them to move into adulthood.

> "I remember the head teacher and I remember it to this day. It makes me emotional 'cause. It was so nice (crying) sorry I haven't actually ever like ....I don't think I've ever told anyone this. Uhm but he was like to me "we can handle you." He was so nice uhm and they built such a support around me, I managed to actually leave that school with GCSE's and I went from literally nothing and they put in place like after school sessions and they were just so good. Sadly he's passed away now, but he was an amazing headteacher, but I remember my last day of school. He gave me a hug and he was like to me "you'll go so far" like he was so proud of me. He was just so lovely. For me, that was just like life changing, because I always knew I was clever, but I was always told I wasn't. That school really kind of saved me because they uh, it was just. Yeah. So nice and so kind" (P6).

P3 further spoke of a relationship with a social worker where they (P3) were taken back to the social worker's home in the holidays.

> "I was often the only kid left in the home, you know, holidays, Christmas and stuff like that. So she would take me to her family. And I remember, you know, her first husband. I remember going and spending Christmas there. I felt like, you know, I felt like I had somebody on my side. She definitely was an excellent social worker" (P3).

The perception that there was a desire from the social worker to be relational was as powerful as being relational itself. Additionally, P4 talks about a relationship with a history teacher that made a difference to them:

> "My history teacher, Mrs. XXXX first saying to me 'I've asked the deputy head if I can take you bowling and take you for dinner, but unfortunately they've said no, but you know, I just wanted you to know that I've tried'. Those little things just made the biggest difference to me, even if they couldn't have happened or anything. The fact that they would want to and this is probably the same for a lot of kids in care" (P4).

P4 went onto explain the power when someone did go further in their relational approach with them:

> “I met someone called XXXX. She was on the Therapeutic Day unit there and she was an incredible human being and took me in. So when I went got accommodation, she broke every boundary in the book and stayed in my life. She’s still in my life now, pulled me through everything.... she was the person that probably saved my life” (P4).

Having a person who believes in you, who wants to invest you and who can see in you what you cannot yet see yourself, can comfortably be incorporated into professional relationships.

> “I think what really helped was having a key worker who actually seemed to care. You know and she kind of had some belief in me which a lot of people really didn't before that. So I think that’s what it’s more about, kind of; you know people believing in you. I think that's helped me a lot” (P7).

7.4 Rejection of Stigma

Following on from the identification of stigma, the rejection of stigma was also identified as a PET. The process of living with, feeling and internalising the stigma created a response that rejected the narrative born out of stigmatisation, suggesting an active response of rejection by the participant rather than a passive one of powerlessness in the face of it. There was an anger present that rejected what was assumed to be thought of as outcomes, as illustrated below by P2:

> “You predicted my outcomes, I would belong to a prison, I would belong to the justice system, I would belong in a pharmacy picking up a script, I would belong to the streets, I would belong to a teenage pregnancy group, I would belong to the benefit system, I would belong to the colour of the people you so desperately want to fuck off to where they belong too [sic].” (P2)

The ‘you’ referred to in this quote is potentially ambiguous. However, this quote struck me as incredibly powerful as there is a suggestion that the 'you’ highlights authority and almost certainly the administrative data collected by the DfE, data which are regurgitated into the introductions of almost every research paper I read on children in and leaving care. My interpretation of P2’s statements suggests she felt she was told how her story is going to end, and the empowerment was audible in her voice as she rejected the life mapped out for her.

> "I would never belong where you belong, I would never belong to the group that finishes school, I would never belong to a university or achieve anything, isn't that what your stats say? Your predicted outcome? I would never have life spoken over me, instead I am your hashtag, or statistic, I am the subject of a system. A system so blinded. I belong to nature, I see my strength and resilience there, I belong to challenging you, I belong to breaking narratives" (P2).

The curiosity for me as the researcher is around how these messages, these annually collected statistics, are internalised to a point that a narrative is developed, which is then articulated to a place of rejection.

When P2 writes 'you' in her writing, I am drawn to interpreting that as 'society' but more importantly, the authorities. By the 'authorities' I think of Children's Services, Schools and how intrusive those spaces are for children in care in ways that children outside of service intervention just are not accustomed to, and therefore unlikely to be aware of. I also think of professional stigma and societal stigma, and how the stigmatisation experienced by people using services and systems seeps into a person as they desperately exercise the fundamental need to belong. As P2 refers to dreaming and nature, she is potentially incorporating a more indigenous lens to what it means to belong, to be human, to be part of an ecological system that does not demark some forms of life and ways of experiencing the world and ways of knowing as more valuable than others (Washington, 2018).

There was also a determination to reject the stigma that was demonstrated in actions that people engaged in to alter the narrative. In the example below, P10 shares how the narrative of not reading and writing was altered:

> "I learned myself how to read and write when I went to jail when I was 15. I couldn't spell my name up until 15" (P10).

Being in a criminal justice setting provided the opportunity to learn how to read and write which he chose to do. It is unclear whether any formal education was offered to him to do this or if he was helped by another prisoner. A recent report from Ofsted (2022) highlighted that literacy is poor within the prison population and that prison education in prisons cannot remedy this. Recommendations include that reading must become a key part of the curriculum, that the library is used promoting reading for pleasure, and that reading ability should be monitored. In this context, P10 demonstrated tenacity, strength and a desire to ‘beat the statistics’ which I interpreted as rejecting stigma.

Rejecting stigma and stigmatisation or stigmatising the stigmatiser through stigma reversal invites alternative ways of analysing stigma (Kusow, 2004). In learning how to read, P10 rejects the stigmatisation of being yet another prison statistic by having poor literacy. Already carrying the burden of having been in care and excluded from school, this 15 year old who could not read distanced himself from the stigmatisation of being illiterate. The stigmatiser can then no longer stigmatise him and if they do, they become the stigmatised for being an obstacle to someone changing their life.

The participants demonstrated agency and a deep desire to fight back. They actively rejected certain narratives formed through stigmatisation, which struck me as significant and more importantly, empowering and demonstrative of their agency. Being on the receiving end of stigma conjures up images of being a victim with little power. Instruments of stigma production (Tyler, 2020) could arguably be seen as a consequence of service use that keeps those using services or those finding themselves having to engage with the criminal justice system or mental health services in a cycle of service use. This cycle can problematise the individual, both producing the stigma and also ensuring that it can sustain itself multi-generationally. These contentions will be further explored in Chapter Eight.

7.5 Summary of Analytic Insights

The data in this research suggest that unfortunately for many children experiencing being in care alongside educational experiences that are exclusionary, movement is unavoidable; however, one strategy participants adopted was to be adept at constant movement. Also clear in this data was the impact that just one person, prepared to push the professional boundaries and requirements even just slightly, can have to make a ‘life changing’ difference across the life course. A social worker, a residential worker, a teacher, are all professionals mentioned as profound relationships. According to the participants in this research, this is not to be underestimated. However, while many in education settings focus on evidence based, relational approaches to learning, born out of an inherent understanding that we learn in the context of relationships, there is a prevailing alternative narrative that potentially adds to harm rather than mitigating the effects of movement and relationship ruptures. A growing trend towards ‘Zero Tolerance’ policies that does not have an evidence base, has supported the use of internal exclusions using ‘isolation booths’ and exclusion as a response to ‘managing behaviour’ that won’t be tolerated twice (Condliffe, 2023). The children who tend to be on the harsh end of this approach are likely to be the adults in this research who were once children which reflects children in care, children with special educational needs, black boys and those in receipt of free school meals. Discussion of how these groups are more susceptible to exclusion is highlighted in Chapters Three on the Policy Context and Four on the Literature Review.

There is an argument to be offered regarding a connection between the social stigmatisation and professional stigmatisation of children with experiences such as those explored in this research presented in Chapter Six, and in the use of punitive approaches to unexplored behaviours. The participants all experienced stigmatisation in some form or another and they all experienced exclusion from an education setting. However, the connection between the rejection of stigma, relationships and survival and resilience, and the role that this might have in overcoming adversity is an interesting one, and not something that all the participants made explicit, shown in Figure 10.

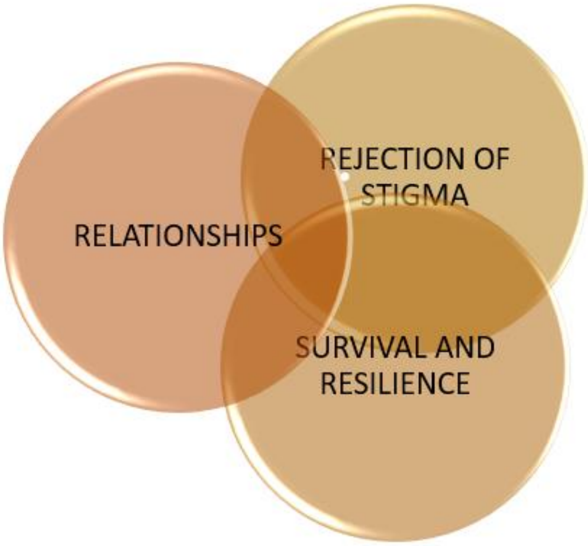


Figure 10 Relationships, Survival and Resilience and Rejection of Stigma Intersection

Rejecting stigmatisation involves knowing it is there or as one participant said, people thought “they knew how the story would end” (P2). The process of actively rejecting stigma involves firstly knowing it exists and it is present, the strength to act or action to highlight it to others and then in developing new narratives that are different to the ones that highlight stigmatisation. Participants demonstrated this process of actively rejecting stigma through the experience of connected relationships, through education, and through connection with nature.

The research questions concerned how those who had been in care as children and excluded from school made sense of belonging. Alongside the outcome of this enquiry is the emergence of a strategy for overcoming adversity that furthers the literature already available. Resilience is relational and therefore relies on the capacity of a person to access relationships alongside the availability of those relationships. In order to achieve this need for relationships, there needs to be endurance which is required to adapt to endless movement and ruptured relationships to overcome adversity. In Figure 11, aspects of overcoming adversity that emerged from participants can be seen.

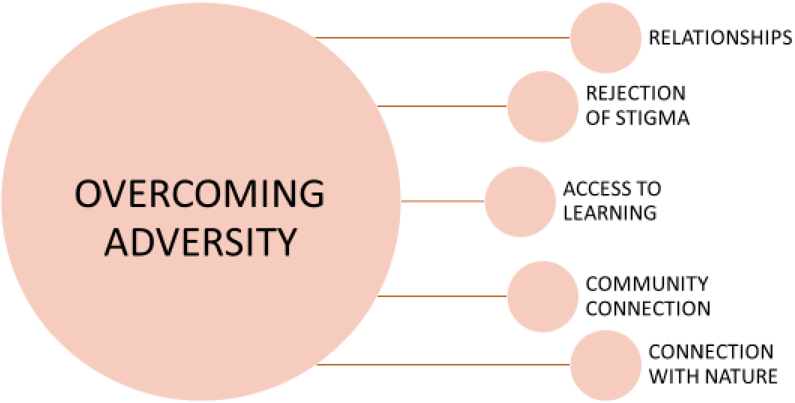


Figure 11 Overcoming Adversity

7.6 Conclusion

This chapter has explored the GETs of Survival and Resilience, Relationships and Rejection of Stigma in the context of overcoming disadvantage. In exploring the adversity experienced within constant moves, relationship ruptures and exclusion from education, it is possible to consider resilience through the lens of endurance in fighting for survival, and in seeking to access relationships while make meaning of those experiences alongside access to learning. In the next chapter, there will be an exploration of the process of searching for belonging and then finding belonging.

Chapter Eight – Findings: Establishing a Sense of Belonging

8.1 Introduction

Having considered the intersectional experience of being in care and also excluded from school through the GETs of movement, trauma, power and stigma in Chapter Six, and then in Chapter Seven on overcoming adversity through the identified GETs of relationships and rejection of stigma, this chapter is concerned with belonging. This chapter answers the second research sub-question: How do participants understand belonging in the combined context of care experience and school exclusion and the impact of that combination upon their adult life? While the interviews offer rich insights into this element of the research question, it is the biographical writing task that provided the richest opportunity for reflective thoughts on belonging. As explained in Chapter Five's Methodology, the participants were invited to consider belonging through the writing task:

> *"Please write up to 250 words on your thoughts about belonging in relation to being in care and/or being excluded from school. You have creative licence to explore this how you wish. You may want to write poetry or thoughts or experience. If you prefer, you can create some art which may be used to create a digital photograph wall of all entries called Belonging.*"

The invitation to consider belonging provided a wealth of wisdom including poetry, a PowerPoint presentation (highlighted in Chapter Five) and written thoughts. This chapter will intersperse the analysis with the responses to the task, some shared in their entirety. It will go on to explore the final 2 of the 9 themes: searching for belonging and finding belonging. These themes will be considered in education, in care and in the community and following on from there, the chapter demonstrates a conceptual framework to support thinking about cultivating belonging, concluding with an exploration of lost belongings and new beginnings

8.2 Contributions on Belonging

Each participant sent in their contribution, a contribution created in the privacy of their thoughts, in their own safe place, sharing something so personal that I, the researcher, felt a jolt of gratitude each time my email alerted me to their arrival. The first written piece I received encapsulated the experience of not feeling belonging, of searching for belonging, the process of wondering if belonging had been found, and then finding belonging; P1 expresses this journey as a poem (also presented as the prologue to this thesis).

I didn't belong

I lived with my mum and brother, I didn't belong.

Mum’s boyfriends hurt me, I didn’t belong.

Mum was angry, we were scared and locked in our room, I didn’t belong.

I wasn't like the other kids at school, I didn't belong.

Two schools excluded me, I didn’t belong.

My third school was a small ‘behavioural school’, I think I belong.

I did so well they moved me back with the other kids, I didn’t belong.

I moved to my Dad’s, my sister hated me, I didn't belong.

I was 12 in care, I just wanted to run, I didn't belong.

School kicked me out again, I didn’t belong.

I went to secure, they violently retrained me and locked me in a cell, I didn't belong.

I moved care home, angry, drunk and high, I didn't belong.

The teachers in secure told me I was worthless, I didn’t belong.

In prison I felt this connection with an older prisoner, I didn’t have to explain myself, maybe this is where I belong.

I met other older girls from prison to take drugs, the pain vanished, I could no longer feel, I think this is where I belong.

I am 16 my world is getting darker and darker, I don’t want to belong.

I can’t stop the pain, I want to feel numb, I will never belong.

I found recovery, people who didn't judge or shame me, do I belong?

I tried so hard at college when I was 21, I achieved two GCSE’s, they didn't accept me into the next year, I still didn't belong.

I got a job, I took the opportunities and worked so hard, do I belong?

> I achieved medals in sports, if only they knew about me I don't deserve them, how do I belong.
>
> I have my own family, close friends and my heart feels full of love, is this how you belong?
>
> A loving hug, being accepted for me, connection and the warmth of people who love and care, now I know I belong.

Apart from immediately addressing ‘not belonging’, P1 also raises the question of being ‘deserving’ of belonging, which suggests that cultivating belonging is not only about creating moments or ‘wise interventions’ (Cohen, 2022) but also about seeking to understand the mechanisms by which people can access those moments or interventions. P1 believed they were allowed to access these moments or interventions, that they are worthy of them, that those moments are indeed for them to access.

P2 also highlights the sense of not deserving to belong, which is demonstrated in what she describes as ‘self-exclusion’:

> “So I used to love drama and love sports, but I'd never go to those things 'cause I think well, it's not made for me because all those kids, you know, great, they can afford the like special sports badges that you'd have to buy to get and school trips. So you already exclude yourself 'cause you think well I'm not good enough. I'm not going to be picked for the school talent shows and stuff like that, and I wouldn't engage” (P2).

The protection mechanism that P2 speaks of may well be essential in adapting to feeling like they do not belong and are not deserving of belonging to this group. There is a vulnerability involved in ‘testing the water’ around belonging that is very demanding for those living with trauma and adversity in childhood without the relational connections with and relational safety from others to fall back on.

In the following written submission, P6 shares the motivation for belonging, describing her deep desire for a space and a place where she could enjoy the relational warmth of acceptance and love. Instead, she describes how, in searching for the belonging on offer, she found that it was conditional, and felt that she could not be heard. Finally, P6 generously provides an alternative narrative, a different perspective and ultimately a way of supporting the cultivation of belonging:

> “All I wanted was to belong, to have a place where my mind could rest and my heart could stay warm, to love and be loved, and most importantly, to be accepted for who I was.
>
> Instead in life, I was constantly told that I wasn't good enough, that I needed to comply, that I needed to behave, that I needed to be someone that society expected of me.
>
> I was in a constant state of fear, and I was simply surviving. My brain and body were functioning, they were doing exactly what they were supposed to do, I was in a constant state of fright.
>
> Instead of adapting, the educational system failed me by asking me to conform. A young girl who has been subjected to a variety of sorts of maltreatment. I was let down by a system that was supposed to protect and safeguard me, not just in my parental home, but also in foster care and at school. Adults, on the other hand, caused me the most grief in my life, and I was always required to affirm and listen to them. But who was listening to me?
>
> Even after all the professionals in my life have asked me to conform, I will still be requested to do so. I was instructed to remain silent and sit in a classroom without allowing my voice to be heard. My inner monologue was to be quiet.
>
> I was told that I needed to achieve my GCSEs and acquire a good education.
>
> After all, if it weren't for this, I would be nothing.
>
> I used to be a powerless child.
>
> Rather than requiring youngsters to conform, how about we teach these extremely evolved children, who have experienced a great deal, perhaps more than any adult would ever experience, the value of education?

> Innovator's abilities, the ability to think creatively and, most crucially, the ability to assist these children in developing a growth mindset. Allow these youngsters to remain in school and not be forced to comply.
>
> Instead, it was a place of hope, security, and development.
>
> Allow them to grow and heal.
>
> Allow them to feel a sense of belonging” (P6).

Belonging is dynamic and can be expressed in thinking about the interplay between how we feel inside and how our interpersonal relationships foster belonging. Furthermore, how these relationships are shaped or framed by social narratives about ‘us and them,’ marginalised groups’ experiences, and culturally and current or historical political discourses. Belonging happens in relational and environmental contexts. Figure 12 below displays how belonging was explored in the data through the participants’ voices and how I have interpreted them.

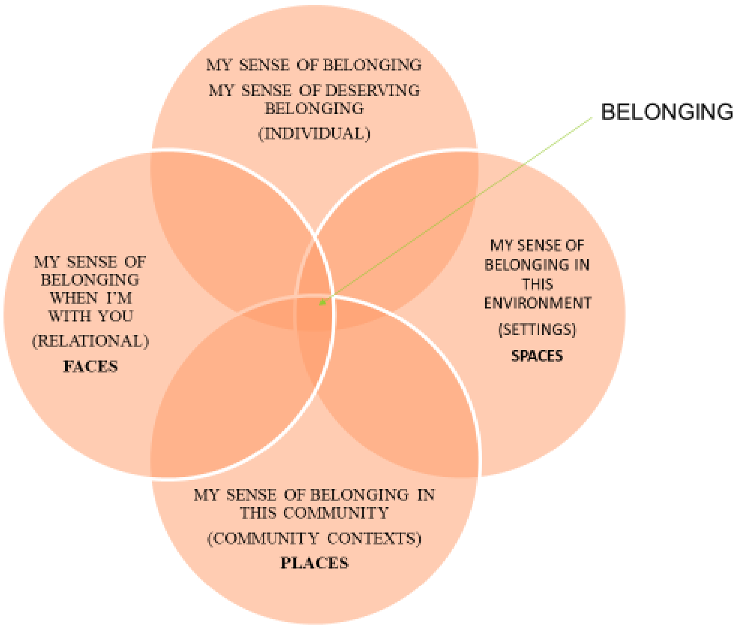


Figure 12 Journey to Belonging

This finding highlights the fragility of belonging and the constant negotiation with faces (relationships), places (contexts) and spaces (settings or environments). For example, each setting or environment that a child in care inhabits, is full of relational opportunity that can provide consistency of faces by way of high-quality professional relationships, peer relationships and connection opportunities. However, those environments with the relational potential sit within a context, a place, which may hamper how that operates. Faces, places and spaces are not separate entities, but rather are intertwined.

In the next section I will explore the theme of searching for belonging and in particular the finding on faces, spaces and places as a means of understanding the search for belonging.

8.3 Searching for Belonging

The review of the literature informs the view that we have a powerful human need, a motivation, to belong, and that this is a dynamic process. From this starting point, the data highlights how we feel about ourselves interacts with the relationships available to us (the faces), the environments or settings we find ourselves in (spaces) and the community contexts we are engaged in (places). Of the latter two terms: "*place* is bounded and specific...*space* [is] more abstract, unlimited" (Gieseking & Mangold 2014, p.xix). In this dynamic experience, how we feel about ourselves in relation to belonging changes depending on those faces, spaces and places. The complexity of this need to belong, in parallel with whether it is believed that belonging is deserved, alongside access to relationships (faces) and settings (spaces) and community localities (places), highlights why some of the participants talk about it taking years to find a sense of belonging. Furthermore, the tenacity demonstrated in trying to belong is profound and the search is experienced intersectionally.

This is particularly prevalent in the case of participants who experienced racism, either directly or in the context of the anticipation of racism:

> "I actually changed my name by deed poll for a more white sounding name because they would you know my Indian name" (P2).
>
> "The big one for me and schooling was that I went to quite an affluent school in the area, and it was a CofE school. And I was the only non-white person there and in the area that without saying the name, there was lots of racial tensions, there was the terrorist attacks that were happening and the community itself was very segregated" (P2).
>
> "As a black boy (mixed race – increasing my sense of not being one or another) I didn't feel I belonged where I found myself – A children's home in a new town on the outskirts of London. I got into lots of fights at school as I was one of very few people of colour in the town" (P3).

> “I was bullied for being mixed race after I moved to a predominantly white area council estate. I would explore any way I could to become 'white' like them, I put talc on my face, hated my dad for being Indian, tried to dress like my peers but couldn't always afford it” (P7).

The quotes above demonstrate how the intersectionality between being in care and being excluded from school was experienced through the lived experience of being ‘black’ or ‘mixed race’ or ‘non-white’ in the United Kingdom across a variety of decades. The participants span different decades, conjuring up different cultural references that would have resided neatly within the environmental fabric of those living through it. Each decade provides a backdrop in regards to that intersection of experience. For example, the 1960’s saw Conservative MP, Enoch Powell during the first reading of the Race Relations Bill make his infamous Rivers of Blood Speech (Powell, 1968) where he deplored “In this country in 15 or 20 years' time the black man will have the whip hand over the white man.” In the 1970’s, having formed in 1967 using immigration as its central issue, the National Front, a far-right political party peaked in 1976 winning 18.3% of the vote in Leicester (McCarthy, 2021). In the early 1980’s, the release of Lord Scarman was asked to conduct an inquiry into what were termed as the Brixton Riots sparked by tensions between the police and the black community with violent assaults on those of South Asian descent. The early 1980’s saw uprisings or riots breaking out across the UK where there were substantial black community populations. In 1993, Stephen Lawrence was brutally murdered in Eltham, London, in a racially motivated attack leading to decades of holding the police to account for their failure to ensure that the murderers were convicted. The noughties commenced with the racially motivated murder of Damilola Taylor who was a 10-year-old Nigerian boy, with the police, yet again, being accused of the lack of progress made in bringing the perpetrators to justice. The participants were all children and/or young people during these decades and thus it is not surprising that the experience of racism played such a large part in searching for belonging as a child in care, and also as a child excluded from school.

The data show that, in searching for belonging, the participants had employed a range of strategies to manage exclusion, whether that was from perceptions of home, from school, from country or from culture.

> “The main thing was that I would do absolutely ANYTHING to fit in. This included sleeping around at a very early age, running away from home and becoming a Tomboy” (P7).

Searching for belonging thus may have involved faces, spaces and places that were harmful. In fact, belonging was found to be more valued by participants than whether the context for that belonging was good for a person or not. This finding is consonant with research around gang motivations for joining gangs. Belonging can be fulfilled through connectedness with others, which also then validates one's social identity (Bolger & Needs, 2022).

> "Glue sniffing was my escape. I could forget all my loneliness and feelings high on glue. The funny thing is that I did feel a sense of belonging with the group of kids I hung about with. All came from broken homes where no one cared if they were out late graffitiing town and nicking cars. We looked after each other, protected each other and hunted together – hunted for trouble, any kind" (P3).

It is worth raising that the very ways that people try and belong, especially such as those stated by P3, are often the areas that are socially stigmatising. This in turn can create further stigmatisation and may result in having further contact with services in adulthood such as mental health services, drug and alcohol services and criminal justice services.

8.3.1 Faces

In the previous chapter, the theme of relationships was explored and the impact of not having meaningful, safe and longstanding relationships came through strongly. The idea of 'faces' reflects the pervasiveness of social encounters and the importance of meaningful relationships within them; faces that tell us we are safe, faces that we recognise, faces that tell us we are in the right place, faces that mirror back to us that we belong.

As raised in the previous chapter, relationship-focused practices in education and in children's social care make an important difference to those children and young people who need it the most and have far fewer high-quality relational opportunities to rely upon. This was illuminated in the research and this section on searching for belonging further emphasises the importance of relationships in making sense of belonging through searching for it and then finding it. P1 describes this as such:

> "But I couldn't cope, I just needed one warm person to be there and be consistent and that I could trust and depend on" (P1).

That sense of not belonging with anyone who looked after you when you are in care and also feeling as though the family you were born into is not where you belong either is illuminated by P6, who goes on to extend the idea of relationships in childhood and belonging:

> “There is a sense of people are abandoned if they don't belong somewhere. So when you don't belong you are abandoned and that's just kind of....With belonging I've never, I don't, even now, as an adult, I don't feel I belong anywhere because I don't talk to.... I don't have secure foster carers, that I, you know, lived with, that I flourished with that I can say I oh, I belong in their family. Uhm, I definitely don't belong in my family, in fact my birth family is very dysfunctional” (P6).

It is plausible to suggest that this has further led to asking ‘well where do I belong then’? ‘Where are my people’? As P7 states, there is a recognition that it is all about the people, the faces:

> “I have moved around a lot since and feel a bit nomadic really - I have never felt like I fit in in England particularly as it has not been very kind to me as a place. It was only recently I realised that belonging is about the people you love and who love you rather than a specific place” (P7).

8.3.2 Spaces

Spaces might be systems, structures or settings, e.g. education settings, foster placements, children’s homes and any other setting that a child or young person who is in care might find themself in. These spaces are an opportunity for them to search for belonging or for belonging to be actively cultivated by those working or living in them. As spaces, these settings are socio-spatial: both material *and* relational. Being in care is, in this sense, a space. In conceptualising space, Massey argues that space is inter-relational; it is a relational understanding of the world (p.307, 1999). Furthering this idea of relationships with others, Low talks about space as embodied (p.96, 2016), which arguably concerns the relationship we have with ourselves that we carry within us. The spaces that children in care might travel through can be large in number, as demonstrated in the findings of this research, and illuminated in the theme of movement in Chapter Six, which was raised by every participant in this research. Having concluded that the level of movement for children in care and also excluded from school appears unavoidable, cultivating belonging in the spaces they inhabit is thus essential. Understanding spaces as relational and embodied suggests an urgency in mitigating the effects of movement and cultivating belonging. Ideally, both movement and cultivating belonging would collide but searching for belonging, as shown earlier in this section, is tied up with feeling deserving of belonging.

If it is the case that movement is unavoidable for children in care then a key challenge is around how belonging can be cultivated, as belonging takes time to grow, yet movement removes that opportunity. It is vital therefore that safety can be detected in the faces in those settings and that the construction of the setting invites belonging. The data demonstrate how this is often not the case. One example, is in discussions of ‘school’, generically:

> “I think you as a young person, you're always trying to belong and you're trying to find your identity. And I think the school is pivotal for that and it's reinforcement, it's people believing in you” (P2).

Or, when one is not encouraged to belong:

> “The same goes for school. All you want at that age is to fit in, to be unremarkable, to blend in. Yet, you’re marked out as different by being in care. That’s just the teachers! They have a pretty dim view of you before you’ve even opened your mouth” (P8).

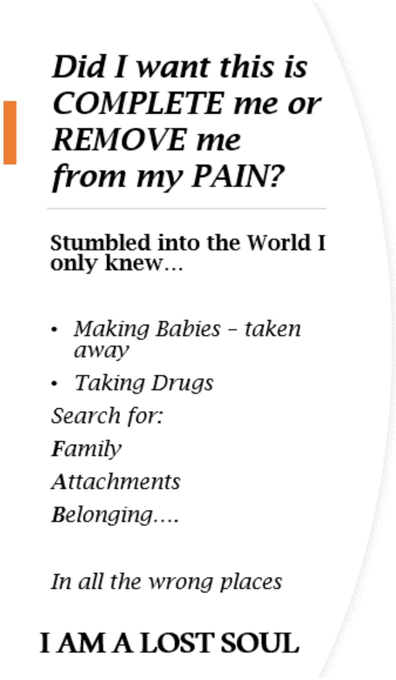
This is observed by P6 also raising the question of how to search for and then find belonging amidst such instability of faces and spaces in the space of the care system:

> “I think sometimes when you've gone through the care system and when you have corporate parents, you also don't really belong there because ultimately, foster carers can, it's a role for them. It's a job, so ultimately they have that choice to, you know, give you back if that makes sense” (P6).

These spaces could be more widely drawn (though noting that they do not make the distinction but simply use the term place):

> “I have never felt like I fit in in England particularly as it has not been very kind to me as a place” (P7).

Slide 3 of the PowerPoint presentation (displayed as Figure 13 below) sent by P9 demonstrates powerfully the sense of not belonging in the term ‘stumbled in the world’. They also use ‘places’ (to be read as spaces), to reference the contexts of being a mum, of being someone who is using drugs, of a family.



Did I want this is COMPLETE me or REMOVE me from my PAIN?

Stumbled into the World I only knew…

- *Making Babies – taken away*
- *Taking Drugs*

Search for:

Family

Attachments

Belonging….

In all the wrong places

I AM A LOST SOUL

Figure 13 Slide 3 of P9 Presentation

Indeed, for another person, they felt that they did not belong in the world, as a space:

> "I didn't even believe that I belonged in the world. I felt that I shouldn't be here that somehow I was flawed and wasn't part of everything. I just didn't have a belonging. Does that make sense?" (P5).

Another example of community contexts has arisen through the global connection that is accessed via social media. When I first started writing about adults who had experienced being in care as children for "The Brightness of Stars" (Cherry, 2013, 1st Ed), it was not easy to find people. Now there is an explosion of groups, of networks, of a 'care experienced community' that provides a sense of belonging for many where that simply may not have been possible before, as P4 explains:

> "I think for me I've I found my biggest sense of belonging and inclusion as an adult, and that has been through the care experience community because there are so many themes that run through in my life that resonate, that actually they don't - that most people don't get or they think they get and they really don't. So it's almost like they're normative" (P4).

Thinking about spaces~~,~~ broadens the sense of possibility about an environment, for example by emphasising the scope for movement and potential for active adaptation to the needs and agency of those entering and experiencing it. The experience of a space can be impacted by the entrance into that space.

8.3.3 Places

The idea of place helps capture the *particular* context or community, as manifestations of spaces such as school, community home, or foster home. As Massey suggests on place, “there is, then, an issue of whose identity we are referring to when we talk of a place called home and of the supports it may provide of stability, oneness and security” (2018, p169). Thus, P6 describes:

> “I think belonging is a safe place and that's my understanding of belonging is that it's nurturing, it's safe, it's warm, it's a place where we all we all want to have a place where we feel we belong. But for myself, I feel that's something that I constantly strive for” (P6).

The examples of places could be very explicit, for example:

> “I had 10 very good years in a small community home, a small family group home. Then aged 10, the woman who ran the home was made redundant or asked to leave and my whole world fell apart and my behaviour really changed” (P3).

The impact of that lack of consistency can be devastating, highlighting the need to think about how faces and places work together to cultivate belonging. Some participants recognised the importance of this without having experienced it:

> “I guess for some people maybe that have more of a permanent place in school and in a care home rather than being moved a lot, having that one person in each place that you feel safe with is probably going to help as well, but I think you need to start with one person” (P1).

However, a potentially beneficial ‘space’ could be negated by a particular ‘place’. P2 here found the space of education difficult because of the particular school they attended:

> “So I found myself going to a school that was quite affluent where there was, you know, people not from their typical broken homes, but both parents drove

> them to school. They have the latest gear. You know, they would sit at a table and eat. And so I already...and then I was kind of the only brown child in there" (P2).

As P7 shows, different types of place can be more or less beneficial:

> "As I never fitted into mainstream school I was sent to small centres and when I was forced to leave those, I took overdoses and tried to go back to them. I think in those places it was more like a family so I felt like I belonged more. In the big schools I was nobody" (P7).

This is not a rejection of education, but of a particular school, instead valuing the other 'small centres'.

Participants also point to how the image of a place can affect their experience of belonging:

> "I remember well the feelings of not belonging that came from being called names and never feeling anyone defended me or understood why I was so angry. I was excluded from primary school aged 9 and sent to a boarding school for mal-adjusted kids. I cried and begged my social worker not to take me there because I knew it was where all the bad kids from my town went" (P3).

P3 brings into focus the powerlessness experienced when everyone in your life is paid to be there, which means they can disappear either temporarily, for example if they go on holiday, or permanently, as they can be fired or simply leave for a range of other reasons.

Places, environments, can be schools, care homes, foster families, making explicit that there is a role for those working with children and young people to ensure access to the right individual place. It further reinforces the idea that belonging is possible if you can find the right faces and spaces within them.

8.3.4 Summary

Searching for belonging is a human motivation that can be fractured through the experiences of being in care and being excluded from school. For developing children and young people, belonging is inextricably linked to identity formation developing internal narratives about deserving belonging and self-worth.

Searching for belonging in the faces, spaces and places that are available for those in care as children is complicated by movement being an inevitable aspect of that situation. This suggests that it is vital to cultivate belonging as an active and deliberate centralised theme of professional practice which seeks to ensure that, at the very least, the experience of belonging is experienced by the children and young people affected.

8.4 Finding belonging

It is now widely understood and accepted that we arrive into the world hard wired to connect to our caregivers and the community that awaits us. When we cannot access that connection, the consequences, for those who survive it, cast a long shadow far beyond a miserable childhood. Research in the last century looking at infant mortality and orphanages found that a lack of love can be the cause of infant death (Spitz, 1949). However, the efforts dedicated to ensuring that this need to understand the requirement of love in order that a baby has the best chance of survival and can flourish continues apace (Tronick, 2007, Szalavitz & Perry, 2010, Gerdhardt, 2015), suggesting that societies need constant reminders.

The data in this research suggest that ‘belonging connectors’ are touch, acceptance and a sense of safety. This makes distinguishing between love, belonging, touch, connection, acceptance and psychological and physical safety, challenging. However, the purpose of this research has been to focus on belonging and how it is made sense of in the context of being in care and also being excluded from school. Continuing with focusing on faces, spaces and places, finding belonging can be explored in the same way as searching for belonging was in the previous section.

8.4.1 Finding Faces

The importance of relationships is clear, but also what the faces of those relationships mirror back is meaningful in how a person can see themselves. P4 explains this idea further:

> “As I have grown older I have found belonging with people, sometimes it can be a moment, sometimes if I am lucky it can be longer. When I have found belonging, its been felt, its been like being wrapped in a blanket, it’s a feeling of safety. When I have felt like I have belonged I have been able to identify myself in others, despite difference, and we have a shared acceptance of reality. Belonging is about that feeling of safety, of acceptance and that I am like you and you are like me and I will take care of you and your thoughts the way that you take care of mine. It’s pure gold” (P4).

P1 further describes:

> "It's a feeling I feel like I belong 'cause I have people that accept me, people that they would judge me. People that don't shame me. I'm sure there's some of them around that do that still, but I have real people that don't" (P1).

Finding belonging in our intimate relationships is also raised, although it is difficult to decipher what enables the building of trust in intimate relationships where there was early childhood neglect and abuse. P8 and P10 talk about belonging and trust:

> "And whilst belongings probably not the right word, I feel like myself and my partner belong together. So not we don't belong to each other, but we belong together, if that makes sense" (P8).
>
> "We connect to each other...I just I tell her everything and we do everything, like she was just my best friend. I don't bother with someone else" (P10).

However, P4 also emphasised that finding faces was not a goal in itself: they did not have to try and be someone else in order to feel acceptance and therefore experience a sense of belonging.

> "I found my first sort of idea of belonging actually was that it was OK to be me, but I didn't need to try and be someone else" (P4).

Nevertheless, for P5 intimate relationships were not so straightforward:

> "My relationships were abusive so I've been on my own for a long time now because I didn't want my... so I had two long term relationships, one where my older children came from and the other one where my youngest child came from and I just decided I can't do this 'cause I can't trust myself not to pick another person that is like that and I know, especially with my job, I know what the effect that had on my children" (P5).

8.4.2 Finding Spaces

P8 emphasises the twin socio-spatial aspects of belonging, in identifying a "group or environment":

> "For me, to 'belong' means being welcomed into a specific group or environment and treated as an equal and intrinsic part of it. It's acceptance for exactly who we are - our strengths, limitations, experiences, and our traumas. It's unconditional and doesn't require anything other than our true selves" (P8).

Finding belonging in poetry for P5 also seems to be about developing a sense of self-acceptance and deserving of belonging which raises questions about accessibility; to poetry, to art and to music. In finding such depth of meaning in the connection between self and words, there is a need to consider and broaden the idea concerning what settings can do for a person with artistic content available to support personal recovery, which is not facilitated by a therapist for example, but is simply available. For example, P5 expressed:

> "I remember reading I, I remember two things, one was I was working in the NHS at the time you know, as an admin person like a secretary and there were these books on the shelf and there was this little book saying I'm OK, you're OK. I don't know if you've ever seen it. It's a little yellow book and that sort of got me thinking you know, because I pick books up and read them. I took it and read it. And then I saw that poem, it's called Desiderata. I read that poem and I cried because for the first time, it felt as though the poem spoke to me that I actually was entitled to be here whereas previously there was no sense of that" (P5).

P4 also talks about belonging in freedom to travel, which may be intrinsically tied up with experiencing institutional care where freedoms were curtailed and did not evoke feelings of belonging:

> "I cannot be trapped, so for me, part of my sense of belonging is free, to which is really, so I've, you know, do I mean my sense of belonging is, I feel like I belong when I can travel. I feel like I belong when I can have that space and read. I feel like I belong where I can choose my, make my own decisions so belonging to me is so linked in with the freedom" (P4).

Furthermore, nature can also provide a sense of belonging, something that is deeply embedded in indigenous ways of being and understanding of being human: "I belong to nature" states P2.

8.4.3 Finding Places

Some participants identified their experiences later in life, in relation to a particular place:

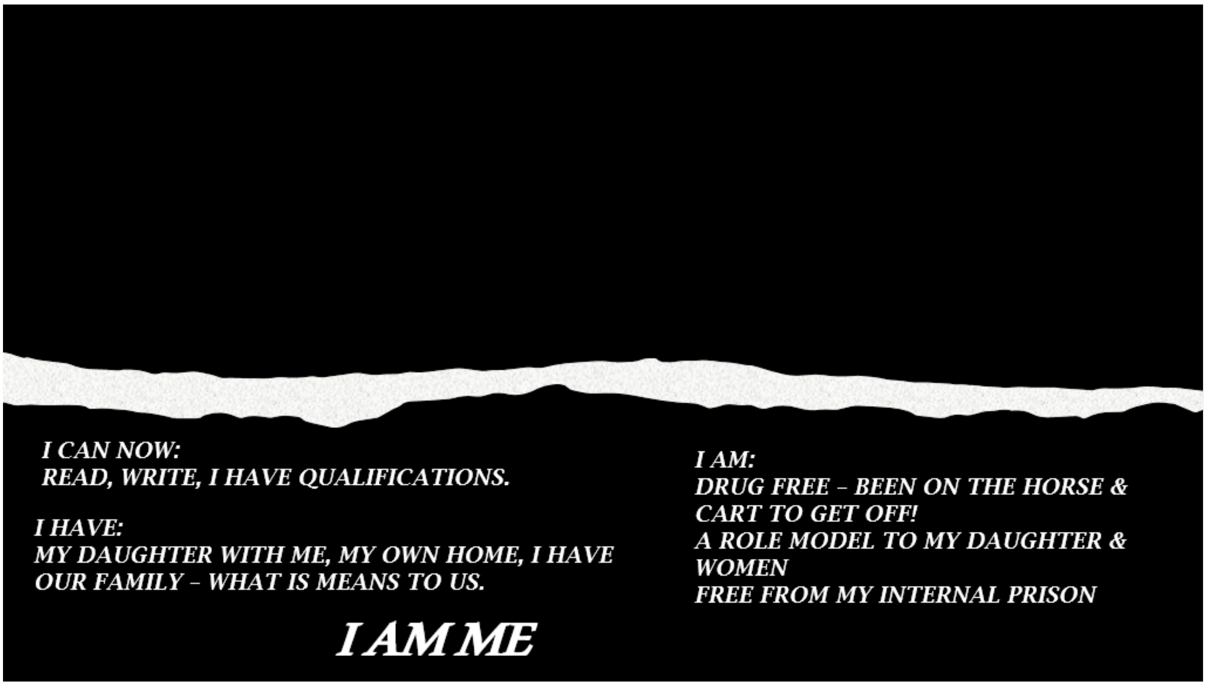
> "One of the most important things for me was my education because it was so bad and one of the proudest moments for me was graduating. It was kind of like a finally did it, so I feel like I belong to a group of graduates. Obviously within the XXXX University, which is where I graduated from and I'm really proud of

> belonging to the XXXX, I feel like it's quite a, you know it's an inclusive world class university and I'm really proud to belong to that” (P8).

Clearly, this is not just about going to university, but about a particular university and degree. Another example, displayed below, is in the care-experience community itself:

> “I think for me I've I found my biggest sense of belonging and inclusion as an adult, and that has been through the care experience community because there are so many themes that run through in my life that resonate that actually they most people don't get or they think they get and they really don't. So it's almost like they're normative” (P4).

However, belonging can be found in not belonging and in accepting that. For P9, the importance of having ‘MY OWN HOME’ should not be underestimated. Further, being part of a community of people who can read and write potentially carries different meanings for P9 as they were part of the Gypsy Traveller community, and felt like they did not belong. Finding belonging in having a child at home when children had been previously removed, and being drug free having previously experienced addiction, reminds us that belonging is intensely personal and connected deeply to our perspectives developed from our own cultural, emotional and psychological internal architecture. Figure 14 demonstrates P9’s movement from searching for belonging to finding belonging.



I CAN NOW:
READ, WRITE, I HAVE QUALIFICATIONS.

I HAVE:
MY DAUGHTER WITH ME, MY OWN HOME, I HAVE OUR FAMILY – WHAT IS MEANS TO US.

I AM:
DRUG FREE – BEEN ON THE HORSE & CART TO GET OFF!
A ROLE MODEL TO MY DAUGHTER & WOMEN
FREE FROM MY INTERNAL PRISON

I AM ME

Figure 14 Slide 5 of P9 Presentation

8.5 Lost Belongings, New Beginnings

There were reminders within the data that finding belonging after childhood ruptures is a journey, with different people on different parts of that journey, with some still trying to find belonging and others feeling as though it was not available to them. The impact of being a child in care and being excluded from school in making sense of belonging was also brought to the fore through the following statements:

> "I don't feel like I belong to a family as such because I've never managed to rebuild those family relationships" (P8).
>
> "Whilst you get used to moving around within a community, you never got used to moving around different foster families or schools. Reinforced over and over the misplaced belonging I felt. Belonging having a place, a sense of where you're not scared... happy and comfortable and you've got the right support around you. I think I've only truly felt a sense of belonging, and in the last two, yes, yeah, maybe since I've been here (at the charity) really" (P9).
>
> "Even as an adult now 28, I still feel, you know, I'm nearly 29 and I still feel I'm still striving to find that place where I belong because ultimately I feel I'm very much and you know, it sounds quite depressing talking about it and I don't necessarily mean to say like that because I generally I'm quite happy with my life, but I generally I don't know where I belong. I don't...I don't feel I belong to myself like I feel I have to find my way in the world because ...No one really showed me where I belong or how to belong or who I'm supposed to belong to, so I very much feel why figure that out myself" (P6).

In these quotes, finding belonging is expressed as a journey that navigates places, spaces and faces.

8.6 Conclusion

In this chapter, the themes searching for belonging and finding belonging were explored. The framework used for this undertaking involved theorising the idea of faces, spaces and places. This creates room to consider how they work individually using belonging connectors, and then how they intersect to create belonging experiences.

Chapter Nine - Discussion

9.1 Introduction

The following chapter will discuss the findings of this interpretative phenomenological analysis by contextualising them within previous research in relation to each of the research questions. Then, the strengths and limitations of the project are discussed.

The first part of the literature review consisted of a comprehensive exploration of the policy, legislation and administrative data available, including a historical context of the education and welfare of children across the last few centuries in Chapter Three. The review phase then continued in Chapter Four where the focus shifted to academic literature. These Chapters highlighted a distinctive gap in how being a both in care and excluded from school is made sense of by those with this double experience.

The objectives of the study were therefore to:

- examine the double challenge of when family rupture results in state intervention in care, combined with school exclusion
- understand how a sense of belonging has been interpreted by participants, and how or if that 'fundamental human need' (Baumeister & Leary, 1995) has been met for them
- explore participants' accounts of school exclusion and its impacts.

These objectives were framed as two research questions, and the project's contributions to each of the two research questions are set out in the next two sections.

9.2 How have Participants made Meaning from their Experiences of being Excluded from School and being in Care?

This research contributes to our understanding of the experiences of being in care and excluded from school by exploring: early adversity and developmental trauma; the effect of language used in policy and in practice about children in care, including the term 'trauma'; school exclusion and inequities. These will be considered in turn.

9.2.1 The impacts of early adversity and developmental trauma

There is considerable interdisciplinary research into the effects of childhood trauma (Shonkoff, 2000, Shonkoff, 2012, Sroufe, 2005), yet the thesis offers further insights into the impacts of developmental trauma, as experienced by the participants, including around mental and physical health, and also education. The experiences of the participants further validated findings from neuroscience and psychology around the impact of trauma (Gerin, 2023). However, focusing on the impact of trauma and adversity in childhood without also understanding the evidence and mechanisms at play to fully comprehend that recovery is achievable, can leave open the possibility of some interpreting the data as deterministic or static. This research challenges the view held by some regarding the processes and mechanisms of recovery from early adversity and trauma. For example, recovery takes time with some of the participants referring to finding a community to belong to, having a family and being in nature as some of the keys to overcoming trauma. Therefore, while the research corroborates the conclusions of previous studies that early childhood developmental trauma has an impact upon the developing child that reaches far across the life course (Schore 2001, Porges, 2011, Siegel 2011, Gerhardt, 2015) it also provides a story of hope.

The experiences of the participants further validated findings from neuroscience and psychology around the impact of trauma upon mental and physical health in adulthood (McCrory et al, 2011). This research corroborated current research around the impact of developmental trauma on learning (such as Geddes, 2006; Nash & Schlösser, 2015; Bombèr 2020), particularly on what are seen as normal trajectories within the education system (O'Neill et al, 2010). However, not witnessed in research until now is how tenacious and determined those with experience of being in care and excluded from school can be. Participants demonstrated this tenacity and determination through ensuring that somewhere across their life course, they re-entered education, were passionate about education, and aspirational for an education which also serves as a key for overcoming trauma within this research. Research studies often tell one story about the impact of developmental trauma upon learning, without then returning to those adults to find out how they went on to access learning later in life. Additionally, some existing studies only look at care experienced graduates, that is, people who entered into higher education (Harrison, 2017; Harrison et al, 2020). Other research looked at trajectories for care experienced people in education and employment yet only to a certain age, looking at those aged 24 – 36 years of age (Brady & Gilligan, 2018).

This research highlights that every participant was aspirational and every participant sought to gain some form of education, suggesting that access to learning is a vital aspect of recovering from childhood trauma and adversity. For example, one of the participants utilised his time in prison to access learning and to ensure that he learnt the skill of writing, which he previously had not had:

> "I learned myself how to read and write when I went to jail when I was 15. I couldn't spell my name up until 15" (P10).

Another participant took several years to complete a degree with the Open University:

> "One of the proudest moments for me was graduating. It was kind of like I finally did it, so I feel like I belong to a group of graduates" (P7).

Most participants had returned to education, to formal education and also to self-directed learning. Furthermore, whilst different issues came up for different people, such as loss, being different, feeling different, or being seen as different, there was also a common theme of finding purpose.

Understanding the impact of trauma appears to help some of the participants release feelings of self-blame, raising the question as to whether the goal ought to prevent adversity or trauma happening at all. While preventing trauma is an admirable endeavour, it is unlikely to be possible. Thus, it seems important to ensure that we consider how people cannot be protected from everything and that in fact, overcoming adversity brings unique and special gifts to the world. When we think about who we listen to, who inspires us, it will be somebody who has a story of recovery. If we accept that we appear unable to prevent war, neglect, community trauma, loss, poverty and unsafe housing for example, our response can be focused on building strong relational networks and robust communities for people so they can recover in relationship from adversity. If we return to thinking about 'faces, spaces and places' as a mechanism for recovery, we can learn how to better support people to overcome adversity.

For some the word trauma is helpful, for others it can feel stigmatising and deterministic. However, if we focus on making meaning, understanding that what happens to us matters to us, this may help explain particularly difficult aspects of life experience when reflecting back as an adult. A trauma lens can provide the tools which people can use to work their way through a multitude of issues through understanding the impact that they may experience regarding what happened to them.. This is demonstrated in the findings on belonging for the second research question. Nevertheless, people can use this language to make sense of exclusion and being in care. These are the strategies that people adopt for taking on board that language, and this process is important.

9.2.2 Language that harms and language that heals

This research corroborates my prior claim that language is multifaceted, multilayered, and interdisciplinary (Cherry, 2022), through analysis of the language used by participants and the impact that language had upon them. The professionalisation of language regarding deeply challenging interpersonal experiences, the language from policy and how the use of this language enters a person’s lexicon that shapes personal identity, is often the language internalised by participants. Peppered throughout the data, in reference to them as children or how they were seen by the adults around them, language was used like ‘maladaptive’, ‘difficult children’, ‘problem children’, ‘naughty boys’, rendering the child or young person the problem while inadvertently shaping an identity that would last far longer than the service being used.

Professional conversations can be heard regularly in meetings describing these ‘problem children’ as ‘hard to reach’ or ‘difficult to engage,’ or as having ‘challenging behaviour’. In these spaces, there are ‘cases’ and ‘risk assessments’ and ‘contact.’ All those terminologies place the problem in the child and serve to detach them from connection or belonging with others. As referenced in Chapter Three, this disconnection that severed a sense of belonging has a history that was very deliberate in its intention. From The Foundling Hospital changing babies' names to one that had no connection to their birth family, to what was known as an illegitimate child being known as ‘filius nullius’ meaning nobody’s child (Williams, 2018). It can be argued that this legacy remains. This can be seen in services and settings who work with children in care, thus supporting current research on the connections between language and how it interplays with stigma and injustice in relation to children in care (Fieller & Loughlin, 2022) alongside projects undertaken by organisations working with children and young people in care (TACT, 2019; Coram Voice, 2020; NSPCC, 2023).

It is clear, as explored in Chapter Three, that the language used in policy is not consistently, nor thoughtfully used across settings and services, thereby opening up a pathway to using problematic terminology in day to day interactions with children, while also writing that terminology in children’s ‘files’ which are available to the adults that they will become. Furthermore, as this research shows, outdated language may linger for a long time after language in policy has changed, reflecting ongoing public opinion, but being the language that children and young people feel has an impact on they feel about themselves. This research provides some of those insights into how the language is interpreted, received, experienced, made sense of and/or internalised or challenged by the participants.

As this research spans across the life course, this connection between the use of professionalised language and further stigma and discrimination creates a multi-layered complexity for the adult that the child in care and/or was excluded from school, became should they working in settings and services for those children. For example, one of the participants went on to work as a social worker and talked about what it was to work in that field, while also processing their own experiences, listening to colleagues and the way they described people:

> "I chose not to go into children's social work because of what I observed. I couldn't. I couldn't work with Professionals that were oppressive with professional mindsets that wouldn't be changed, couldn't be changed, wouldn't be challenged. So for me it was a very difficult place for me to work because I was constantly fighting and that again is another thing. Fighting as a child, fighting that oppression, fighting that discrimination to then have to do that as an adult and as a professional" (P6).

The current research contributes to the claim that there is a need for further interdisciplinary consideration across how language is used in the sectors of education and children's services, specifically around the overuse of acronyms such as LAC (Looked after children), CIN (Child in Need) and SEND (Special educational needs and disabilities). Furthermore, interdisciplinary research can also consider the continuous need to problematise the child or young person. The impact of language used in this way is that within everyday practice there is often little space for writing and reflecting, which can leave little time to write notes or recordings in ways that avoid acronyms and complicated professional language. Additionally, if those files are being written for a child with a social worker, the adult that the child becomes may want to read them. In this scenario the 'file' needs to have language that heals not language that harms within it, as this adult will be looking at their file to try and make sense of what happened to them. As P5 states:

> "I can tell you that I didn't know why I was there until in my late adulthood, until I read my files" (P5).

The overuse of acronyms persists, however: "This language unfairly injures their right to be viewed and treated like any other child. Is this having an adverse effect on the children we care for? Most certainly, the children and young people we care for should be referred to by their name. Collectively, however, using alternatives to the words "LAC" and "children in care" would be a good start to making care more person-centred" (Fieller & Loughlin, 2022, p.872).

Additionally, the research highlights the tensions, problematic and sometimes multiple interpretations that the language of policy offers when it is transposed into practice, and how this is internalised, understood and spoken about to others. The oldest participant in this research is 62 years old and language used in her childhood might well be seen as highly inappropriate today. However, some of that terminology lingers and it certainly lingers for her. She talks about living in an institution (P5) while P1 who is 32 talks about a secure unit.

Thus, some language that we might consider as 'from the past' persists in the terminology used today through which professional practice is enacted, and in the places and spaces within which that happens. Moreover, this impacts on the experience and meaning making of the participants. For example, one participant talked about being sent to a setting which was for 'the maladjusted':

> "I was also going to a boarding school during the week and coming back to the children's home at the weekend and then we transferred to this new children's home I carried on in the school for maladjusted kids" (P3).

Note how he speaks in the present, using the language of the time as a man in his late 50's.

Another participant shared how he felt he was viewed, while also feeling confused as to where this came from:

> "The teachers saw me as trouble they knew I was an underachiever and all my school reports used to say I was a lovely, likable, cheeky person but academically not gonna kind of amount to much and you know, an underachiever. I'm sure somewhere, I can't trace it now to be honest with you but I'm sure I saw the word inept" (P8).

Discrimination and stigmatisation is fluid as it seeps into language, into the way a person is viewed, and how they view themselves. It is written, spoken, and appears in body language. It is often unseen but always 'felt.' The overuse of language used in policy entering into day to day communication with and around children and young people and their families is highly problematic. The research highlights how language lingers beyond historical relevance ensuring a long legacy of words and attitudes that still remain in the system, in the person and in society which impacts identity, a sense of belonging. This language also impacts the possibility of less harmful ways of making meaning from childhood experiences. The words used are internalised by the people who are experiencing the service, and the language itself problematises the person. The person may feel they are the problem because the language locates the problem within the person. Thus, unless we are more intentional about how we use language, then we will always use language that harms rather than language that heals.

The challenge is, of course, in shifting the overuse of language from policy by professionals. This is an interdisciplinary endeavour because education and children's services are not silos and are by nature interconnected, as Chapter Three demonstrated. However, while an Assistant Director overseeing those two areas may understand this, practice 'on the ground' often does not. I've heard many a teacher state 'I'm not a social worker' and sometimes social workers state 'that's not my area, that's education.' The solution to this is vast and well beyond the capabilities of one thesis. However, the current 'bridge' is the Virtual School, and in many areas of the country, this work is undertaken very well.

Remaining with the interdisciplinary nature of this subject, much of the literature was drawn from neuroscience and psychology. However, these two disciplines alone will not necessarily get a feel for the experiential aspects of peoples' perspectives on their life course, and this is a contribution of this research. Those disciplines often lack a perspective that this research has provided: access to people and their life course, and the nuance of having a deeper lens into talking about developmental trauma. Further, this research demonstrates how experiences will be different for everybody, and peoples' responses will be diverse. Furthermore, there is a tenacity for learning which comes across from the participants evident in their desire for living, and for finding places, spaces and faces that make sense. This is not an insight that neuroscience offers, although some strands of psychology may explore such questions, and educational psychology certainly can and does. Thus, this research has provided a deeper view on what happens for people and demonstrated what developmental trauma actually looks like and how it shows up? It further explored how people have a desire to heal from developmental trauma, however old they are. Other research reviewed for this thesis was drawn from Social Work, Social Policy and also Geography which provides a vast area to explore belonging and notions of place and space.

Finally, two terms which require particular attention are stigma and trauma. Regarding stigma, although Manago et al, (2022) had argued that "it is now time to return to a broad theoretical account of stigma and how we can understand it', this research suggests that stigma should be thought of as located within the places that should help. Stigma is part of what Tyler (p.260, 2020) describes as “stigma machines”. Public opinions around who should be stigmatised and how people are stigmatised affect these debates, but stigma is also inherent in the professional language, described above. Stigma was not a word used by participants, but was an implicit part of their stories. Rather, terms such as ‘bad kids’, ‘shame’, ‘stereotypes’, and ‘outcast’ appeared in statements, expressed below:

> “I was excluded from primary school aged 9 and sent to a boarding school for mal-adjusted kids. I cried and begged my social worker not to take me there because I knew it was where all the bad kids from my town went” (P3).
>
> “The feeling of not belonging is inextricably linked with feeling unsafe and the shame of not being like others” (P4).
>
> “I never really experienced true belonging during my care years. Rather, you’re too aware that you’re part of a system. One with negative connotations and stereotypes. It’s not something you want to shout about. You have no meaningful peer groups because life is too sporadic and forever changing. You’re an outcast and isolated - in school and out” (P9).

Furthermore, trauma was a term that participants *did* use to describe themselves and their experiences. Trauma was described in other literature as “an experience or series of experiences and/ or impacts from social conditions, that break or betray our inherent need for safety, belonging and dignity” (Haines, 2019, p.74), and this research shows how participants made sense of trauma in two interrelated ways – as understanding or recognising it, and as overcoming it to move forward. The devastation of trauma can be felt as a fundamental challenge to the self which forces meaning making of who that self was, and who that self is now (Roberts & Dutton, 2009).

Thus, there is a need to not only consider the trauma which moves people into these sectors and these services, but what happens once they are in those services. This adds to how Haines’ (2019) discussion on the “social conditions”, whilst also bringing in the notions of safety, belonging and dignity. However, it is also recognising that when people go into the “spaces” of systems and settings and services, these can further break or betray their inherent need for safety, belonging and dignity. This is done through frequently moving children around, excluding them from school, not having suitable housing conditions for people, or not ensuring there is nutritional food available.

Spaces and places are also important, a point expressed quite strongly by the participants. The notion of spaces and places can be seen in children's homes, the use of isolation booths, in secure units, in prisons, in mental health services. All these environments are places in which people with unresolved trauma can end up:

> “The bedroom was like a bare concrete cell and there was just a crash mat on the floor like no wooden furniture to hold it up or nothing. Then you had a bed sheet and another one over the crash mat. But as time went on I was in and out a lot. They’d take the crash mat out and I’d sit on the concrete floor and often run at the walls. And you know, I was losing my mind half the time” (P1).

By definition, trauma can be a challenging word and researchers and professionals need to take the opportunity to think about how they work with trauma without always necessarily using that word. For some, to understand what they experienced was trauma helps individuals recognise that it was not their fault. Believing that it is one’s fault is largely how trauma can be made sense of, particularly when the trauma happened in childhood, with individuals often perceiving something wrong with them, and they did something bad. Thus, it is difficult to say what each person might do with the word “trauma”. What is more important is what one does with the word trauma in legislation, policy and practice. This is about the appropriate place for the language of trauma or its limits as a conceptual term. In recognising that ‘trauma’ is different for different people, it would be unwise to be definitive. This research advises professionals and academics to be cautious, thoughtful and inherently understanding about what it is to work with humans, regardless of whether one knows if they have experienced trauma. Professionals and academics can work in a manner which does not add to trauma, mitigating some of the effects of trauma by cultivating relationships that have safety, belonging and dignity, to echo Haines (2019), at the core.

In conclusion, consideration must be given to the language used in policy and the language used by professionals as ultimately, this is an opportunity to shape identities and for language to heal not harm.

9.2.3 School exclusion and inequities

Everybody who was either mixed race or black, Asian, or brown described themselves in diverse ways. The categorisation of race and ethnicity e.g. “black Caribbean pupils”, is hugely different necessarily to how people describe themselves ethnically, hence asking the question "how do you describe your ethnicity" so as not to invite people to further 'put themselves in a box.' Ethnicity showed up important due to it being the first aspect of one's identity that people might see, unlike the question of whether or not a child is in care. For some, this was hugely problematic:

> "As a teenager I was bullied for being mixed race after I moved to a predominantly white area council estate. I would explore any way I could to become 'white' like them, I put talc on my face, hated my dad for being Indian, tried to dress like my peers but couldn't always afford it" (P7).

The lived observation that "I was the only mixed-race boy in the area" (P3) raise issues around racism, brought to the fore by people experiencing living in a country that could be called a hostile environment, and which has a long history of racism, reflected across the decades. Additionally, these individuals were also dealing with being a child in care: being in a residential home, being in an area that was predominantly white:

> "Everyone was like, wow, you're in this amazing school where Ofsted says it's amazing. Outstanding. It was one of the best schools in the area that wasn't a private school and going into their already you kind of feel like an outsider because of your race and also because I was kind of the only brown child in there, you know, and it was just me and my mum" (P2).

More specifically, in terms of exclusion from schools, current research can focus entirely on ethnicity (Demie, 2021) which then only shows details on ethnicity. Or if one only looks at children with learning difficulties (O'Brien & Gilbert 2016; Jones et al. 2020), the research tells the single story, or if we only focus on children in care, then the intersectionality of their experience is missed. The findings here demonstrate how all those different factors of one's identity come together across different services and in different ways. It shows the inequitable nature of being a child in care, who are likely to have developmental trauma and also 80% more likely to be identified as SEND (Jay & Gilbert, 2021). It is noted that these children can have the highest rate of school exclusion for children with SEND identified as having Social, Emotional and Mental Health (SEMH) difficulties without EHCPs (Thompson et al, 2021). An intersection of developmental trauma and SEMH difficulties will certainly be found in the population of children who are in care.

> "Instead of adapting, the educational system failed me by asking me to conform. A young girl who has been subjected to a variety of sorts of maltreatment. I was let down by a system that was supposed to protect and safeguard me, not just in my parental home, but also in foster care and at school. Adults, on the other hand, caused me the most grief in my life, and I was always required to affirm and listen to them. But who was listening to me?" (P6).

In conclusion, it is vital that we listen to those with the experience of exclusion to learn more about how this is made sense of by children and young people. Creative projects such as #seeme where research is co-created, using different types of art, and ensuring that those participating in the research have control over how they share their experiences and voice (Martin-Denham, 2023) are vital. Further research into the impact of UK school exclusion funded by the ESRC in 2019 led by Ian Thompson and Harry Daniels demonstrates how crucial it is to understand the impact of school exclusion upon children, young people and their families. Finally, studies such as this one provides a silent perspective by inviting adults to reflect back and discovering more about how they made sense of their experience.

9.3. How do Participants Understand Belonging in the Combined Context of Care Experience and School Exclusion and the Impact of that Combination upon their Adult Life?

In this section, there are three themes, discussed in turn: disruption and belonging; intersectionality and belonging; the diverse and textured meanings of belonging.

9.3.1. Disruption and Belonging – People, Places, Spaces

The research corroborates Holmes et al's (2018) emphasis on relationships, while highlighting that belonging is not just about the existence of relationships with people, but concerns the quality of those relationships, which might not initially be what we think they are. For example, they might be relationships with each other in prison or in a secure unit. Some participants spoke about belonging with people in those environments, which are not necessarily the most obvious space for developing relationships. Expanding the idea by Gieseking and Mangold of 'people, place and space' (2014), this research's addition of 'faces' encompasses a sense of seeing people who are familiar, yet are not necessarily in relationship with, or as Massey writes: "It is the accidental neighbour; the encounter with the unforeseen" (p.112, 2005). In communities we might see the same faces serving us in shops or taking up the same table in a coffee shop. These are unlikely to be all-important high-quality relationships, but they nonetheless tell us we belong here. One person talked about how the prison environment had no warmth, but she found people that she could connect with:

> “I think the first time I really felt like I belonged was when I went to prison 'cause it was like I was accepted there. The people that were older than me that were in prison kind of trying to help and guide me. This one person who was kind of like my mentor without realising, she used to sit and play Scrabble with me most afternoons so I learnt loads. She just gave me her time and I know that she cared about me. It was genuine and I could feel that like she didn't have to do any of that stuff. That's probably the first time that I felt like I belonged” (P1).

In this example, it was not the staff that worked there, although there is no doubt that this young person in a prison setting was in great need of high-quality relationships. Having a sense of belonging involves encounters with people, spaces and places, and as Massey argues, space is inter-relational (2005), furthermore that it is bounded and specific (Gieseking & Mangold, 2014). People, spaces and places work together in a dynamic way which shapes and cultivates belonging. Thus, while Holmes et al. (2018) emphasise relationships over environment, they do not to separate out spaces and places; it is just simply people and “environments”. Indeed, their point is to highlight the people within that environment, as if one should foreground the relationships. Whereas these findings suggest that faces, spaces *and* places, involve a more complicated interrelationship between various kinds of environments. Thus, in a sense one cannot necessarily foreground any one of those things. Rather, it is the whole socio-spatial network which is important, and is caught up in the moment we collide with it. In other words: “For the truth is that you can never simply 'go back', to home or to anywhere else. When you get 'there' the place will have moved on just as you yourself will have changed” (Massey, p.124, 2005). When in collision with the inevitable consequence of movement as experienced by children in care, this geographical perspective highlights why identity and belonging can feel so challenging to grasp. If there are a multitude of faces, spaces and places that cannot be returned to, no longer exist as they were, with buildings now knocked down, interchangeable faces and continuously co-constructed spaces, then meaning making has the potential to become a pre-occupation of the mind, and might account for the numerous memoirs mentioned in Chapter Four titled ‘Belonging’.

9.3.2. Intersectionality and Belonging

This study builds on existing empirical research and theory to illustrate the limitations of attempting to view the complexities of experience through one lens, and to articulate them within the boundaries of a single story, a single lens by which to consider people’s experiences:

> “I felt different in every way; my name, race, being a ‘brown child’, care, exclusion, maternal mental health” (P2).

This research shows how drawing on Hill-Collins' (2016) concept of intersectionality can strengthen an understanding of marginalisation, stigmatisation and inequity in relation to being in care. In so doing, this research suggests that being a child in care is a further dimension of intersectionality, and one which is often ignored in the literature. Furthermore, if being a child in care is solely focused on, researchers in the field risk failing to capture the complexity of how making meaning of the experience is entirely impacted by other marginalising experiences:

> “As a black boy (mixed race – increasing my sense of not being one or another) I didn’t feel I belonged where I found myself - A children’s home in a new town on the outskirts of London. I got into lots of fights at school as I was one of very few people of colour in the town. I remember well the feelings of not belonging that came from being called names and never feeling anyone defended me or understood why I was so angry” (P3).

Another aspect of experience often overlooked is the relational wealth of the child or young person: the number of people a person has around them. The care experience is so entirely unique that someone may come from a large family, remain in their local area or have one parent, been taken into care in another area, have lost both parents, or been removed in a hospital at birth and a whole host of other scenarios in between. If you are a single parent who also has care experience then you are likely to be doing the job of everyone because you do not have family network. Relational wealth matters, yet this is not a lens that is often applied when thinking about intersectionality. Often, intersectionality is thought of in terms of social characteristics or broadly sociological characteristics, but the focus on spaces and places adds a location or geographical aspect to that, which is missing in the literatures. If one thinks of people being of a particular gender or ethnicity, one focuses on those kinds of identity features rather than these being laid out in physical spaces or places in some way, and the effect of such intersections in those physical spaces and places on those identities. P7 expresses:

> “I was bullied for being mixed race after I moved to a predominantly white area council estate. I would explore any way I could to become 'white' like them, I put talc on my face, hated my dad for being Indian, tried to dress like my peers but couldn't always afford it” (P7).

9.3.3. Diverse and Textured Meanings of Belonging

The findings of this study resonate with Wright’s (2015, p. 392) insight that “belonging means different things to different people”, and that therefore “what is most important about the term is the texture of how it is felt, used, practiced, and lived”. This research explores the experience of finding belonging, which many describe as having their own family. So experiencing living within a family, feeling what it is like to be in a family, which may be for some the first time of feeling safe within their own family, is through cultivating a sense of safety for their own family and practicing, living life as a family.

For others it might involve being part of a different community where they did not have to continuously describe their experience:

> “I think for me I've found my biggest sense of belonging and inclusion as an adult, and that has been through the care experience community because there are so many themes that run through my life that resonate that actually they don't need saying” (P4).

The care experience community gave P4 a sense of belonging in practice. Here she found the faces and spaces, and when those people come together, they are in a place. It is the way that faces, spaces and places interweave with each other in a manner which co-creates belonging. Similarly, the intersection of race and care becomes a space to process what has happened in childhood to P3:

> “Aged 20 I joined a group called Black and In Care – I didn’t know why I was so drawn to it. I left my town, moved in with one of the group members and put my past behind me. I talk to others like me who understood my deepest feelings on many issues. Rejection, identity, anger, prejudice and racism” (P3).

The characteristics of belonging identified in the research were safety, acceptance and relationships, and this was further expressed by participants:

> “As I have grown older I have found belonging with people. Belonging is about that feeling of safety, of acceptance” (P4).

> "All I wanted was to belong, to have a place where my mind could rest and my heart could stay warm, to love and be loved, and most importantly, to be accepted for who I was" (P6).

> "Belonging to me was about people, people accepting me for who I was" (P7).

> "For me, to 'belong' means being welcomed into a specific group or environment and treated as an equal and intrinsic part of it. It's acceptance for exactly who we are - our strengths, limitations, experiences, and our traumas. It's unconditional and doesn't require anything other than our true selves" (P9).

These characteristics of belonging could be woven together:

> "Spending time in the care system, meant that I did not belong to places or people, I had no shared rituals or history, I was lucky if people remembered my age let alone anything important like my friends, what my favourite subject was and what excited me. Instead I felt like I was wrong" (P4).

These connections led to the development of a conceptual framework of thinking about faces, spaces and places. When the co-creation of spaces, places and spaces does not have room to occur, then loss of self, loss of identity and loss of how things should have been can take hold.

9.4 Strengths and Limitations: Rigour, Lived Experience and IPA

Methodologically, one has to acknowledge the diversity of the population under discussion and not start from a deficit view of this community. The population is far more diverse than the systems that are there to support the child. As such, the use of IPA dug into complexity, nuance, and lived experience, and its prescriptive nature was helpful to follow in exploring these complexities. Data saturation occurred early on because of the nature of the systems involved. For example, while the participants were all very different, the systems that are in place are not. The diversity of the participants did not lead to variation os a desire to search for and ultimately find belonging. Indeed, the PETs were already detailed before being aggregated into the GETs. Furthermore, the multimodal tools I used were also one creative offering which allowed for participants' voices to be innovatively represented through their choice of materials, such as song lyrics, presentations, and poetry.

However, IPA also raises some challenges. First, the attraction to use this approach was its prescriptive nature, yet this meant that it was a rigid methodological tool. Had I undertake this research again, I would expand on the use of the writing task, and the one PowerPoint that arrived, comfortable in the knowledge that creative methods, planned from the ground up, can produce rich data. I also felt there were not many surprises across the participants' responses as themes were very similar across them all. The GETs were very generic, in part due to those particular experiences as contextualised historically and culturally through the policies and legislation, which drive the system and the allocation of funding to those systems and the priorities placed on children and families by different governments. In other words, the systems and services available create further trauma, power, stigma, and movement if they are under resourced and underinvested in. However, movement as a theme inherently comes from being a user of that system of care. If we take the view that being taken into care is of itself traumatic, then trauma also derives from the system. Stigma is found in the system and in society regarding being a child in care, and the multiple intersections this entails, whether racism, parental mental health, incarceration or drug misuse. By definition, power is at the core of the system. Relationship ruptures, relationship repair, relational wealth and maintaining family and community relationships are all reliant on the systems of care and often, education. Access to relationships is system-based. Therefore, it was these themes that developed through analysis. The real key is what the person does with all of that experience. I am not convinced that I have unpicked that fully due to the rigidity of IPA, particularly in relation to accessing these quite delicate filaments, which is in people's lives. The question remains whether IPA, although it did some of the investigative work, did or did not do enough. For example, other researchers could consider the use of grounded theory with creative methods to generate more empirical and conceptual insights with the care-experienced community.

Further, IPA does not perhaps give us good access to the very delicate and subtle layers of *how* people reflect back on their experiences of belonging, and therefore how the emotional labour of the researcher listening that deeply and intently to the experiences experienced, is in itself demanding. Of course, not all those using IPA are likely to share the same experiences of their participants but it is likely that some will. IPA also potentially molds the researcher to view rigour as equated to detachment. Indeed, I pushed constantly against conventional takes on IPA as I was inclined to emphasise empathetic listening, as well as equity or parity between different knowledges shared (such as scholarly and procedural methodological knowledge, or experiential knowledge). I also prioritised the co-construction of meaning myself, and with participants as full persons involved in that relationship, rather than enacting particular redefined roles as the 'researcher' and the 'subject' of the research.

This raises the topic of my positionality, which also offered strengths and challenges. A strength of the research came through my rich positionality, professional, academic and personal, which enabled me to reach certain perceived ‘hard to access’ groups, e.g. a member of the travelling community. I had not appreciated this until this was raised in passing by an academic, who remarked that it was difficult to recruit travellers as participants. I had not thought of this, and not considered anyone in this group with these experiences as inaccessible in any way. However, there are many groups I would have no access to, and I would be unable to access. There are huge benefits to insider research, but this means that academia has to ensure better access to and participation by marginalised groups. I further benefit from there being a link between the research and my broader professional life in the trauma informed wider societal ‘space’. I have had to effectively synthesise both scholarly and professional practices and views. However, deep empathetic listening with participants was very emotionally intensive. Even though I used a rigorous methodological tool like IPA, a researcher can arrive in a place with some form of notion that there is ‘detachment’ in the process, but this is simply not true. There is an illusion of not bringing your full self into research, but of course we are always bringing ourselves; the way we ask a question, the questions we choose to ask. I have sought to express that very clearly through the thesis: I am of this research, through this research, in this research. Even knowing a researcher still arrives into a place with some form of notion of detachment, because of the rigour involved in using a methodological tool like IPA, my experience of conducting this research indicates how it is impossible to engage in people’s lived experiences without bringing your full self to that process. An important consideration for anyone undertaking research using IPA must involve knowledge that the person will engage with sensitive and emotionally laborious research. Indeed, a researcher may also be experiencing precarity and be processing their own emotions around their experiences. As such, in some respects, we need to develop a ‘framework for positionality’ for researchers working with care-experienced communities, who need a combination of lived experience, theoretical understanding and professional practice/expertise.

Further, I was juggling three of my own experiences: personal, professional work and those relationships, and then my newfound role as researcher. What emerged in this process was a deep understanding about what I name the ‘triad of knowledges’; academic, professional and personal. However, equity or parity between different knowledges shared is needed; scholarly and procedural methodological knowledge is just one aspect, then there is experiential knowledge of practice and also lived experiences. One of those in isolation of the others, only tells a single story. The ‘triad of knowledges’ is arguably the incorporation of those three areas into how we work together as a community in collaboration. It is not one person holding all those three areas, but rather about how we work together to ensure we pull the wisdom together. Furthermore, this ‘triad of knowledge’ invites us to understand that knowledge is not just academic knowledge or professional practice, and it is also not just personal experience; it is the pulling all of that together in a very thoughtful, respectful and connected way.

This then plays back into the methodological strengths and challenges, in prioritising the co-construction of meaning between me as the researcher and the participants as full persons involved in that relationship. I prioritised this approach over simply enacting particular pre-defined roles as the ‘researcher’ and the ‘subject’ of the research, and pushed constantly against such compartmentalisation.

9.5 Chapter summary

This chapter has offered a comprehensive exploration addressing the policy and literature reviews considering where this research contributes, corroborates or adds to research in this area. It approaches this by focusing on the impacts of early adversity and developmental trauma, highlighting the importance of understanding the impact of this upon learning while also bringing to the fore the tenacity and aspiration shown by the participants for learning across the life course. It addresses the complexity of language and that language used in policy and in professional ‘speak’ can harm or it can heal should the radical leadership be there to cultivate the shift in what language is used, for this is the language that is internalised by those using the system. The chapter then explores school exclusion and inequity noting the growing interest in capturing the voices of those who have experienced school exclusion, noting the importance of adult voices reflecting back on those experiences.

The chapter goes on to highlight disruption to belonging, intersectionality and meaning making of belonging introducing a conceptual model which considered faces, places and spaces in cultivating belonging. Finally, the strengths and limitations of IPA are addressed raising the positionality of the researcher and the impact of using IPA as a methodological approach.

Chapter Ten – Conclusions

10.1. Summary of Contributions

This study researched how care experienced adults who had also been excluded from school made sense of belonging. Most of childhood is spent either at home or at school and the child's interactions within those two pivotal environments are experiences that have an impact on and shape human development. These environments provide the anchor upon which children develop and grow in the early years and also throughout childhood and adolescence, and where a sense of belonging is usually established. The perspectives and views of those with this intersection of experience in childhood are rarely considered, and this leaves a notable gap within research.

I was interested in how participants made sense of trying to feel that they belong somewhere, in a place or community, with someone in their personal and peer relationships or as part of a group, while also having a sense of history and identity, and how this intersects with sex, gender, or ethnicity. The research showed that the participants actively searched for belonging, although often in ways that were stigmatising and potentially harmful to themselves or others. Persistent moves between education settings and home environments were risk factors in developing a sense of belonging. However, a positive high quality relationship with an adult that went beyond what was expected of them professionally, providing relational acceptance alongside feelings of safety in community settings, were factors that helped to cultivate a sense of belonging.

Professional stigma and societal stigma were identified, and the study explores how these created self-stigmatisation through developing certain internal narratives. These narratives formed internalised notions of being 'bad', being 'too much' and 'being 'unworthy.' The findings emphasise the importance of cultivating a sense of belonging in education settings, question professional boundaries that prevent working relationally, and suggest that education and children's social care settings should take on an active role in tackling stigma including racism, shame and labelling.

10.2 Implication and Recommendations

I now turn to a discussion on implications and recommendations, which are split into three sections: implications for policy, practice and research. These are of course difficult to unravel completely, since attempting to research 'what works' is grounded in practice. Further research on diverse adults and their perspectives across their life course is needed, and this informs policy and practice. Considerations for protective factors and also on the practicalities of how the role of nature, the role of learning opportunities and other factors can be taken into account, and how this supports overcoming adversity. Furthermore, there is a need for more case study examples from different cultural contexts that showcase 'what works' through focus on practices, modes and styles. Further inquiry could also adopt research designs that use grounded theory, visual methods and are characterised by a participatory spirit. Moreover, there is a need to think differently about 'milestones' and truly embrace a model of lifelong learning and support for adults who were unable to remain in mainstream education while being in care, but then through the life course feel settled enough to access education. Access to learning in policy offers an opportunity to overcome adversity and harness the tenacity and aspirations of those who have been in care as a child and also excluded from school. However, the separate strands are as follows.

10.2.1 Implications for Policy

First, importantly, belonging, relationships and relationality need to be at the core of policy so they can in turn shape practice. However, we should set out what is meant in policy when we say 'we place belonging at the heart of everything we do' in, for example, a school. But what does that even mean? How do we use policy to ensure that practice really develops what it means to cultivate belonging? What does that actually look like? How do we ensure we embed and 'bake in' belonging to practice through intentionality in practice? Policy can drive practise. So if we had these words in the policies - education, safeguarding, school exclusion children in care – they would read very differently. They would create different types of practice, and ways of responding and working with children and young people who do not have lots of supportive loving relationships around them, and who experience exclusion and fracture. One other implication is the need for a supportive transition out of care which takes more of a life course perspective and embeds relationality/relationships into that process.

Policies lack the term 'belonging' in this country but elsewhere include it - notably some Australian and Canadian policies – and offer potential models to explore. They set out the importance of belonging, and in particular how to do that in ways that take into account diversity of world views, of cultural and socioeconomic context, and of personal experiences. But at the same time, we need to acknowledge that each country's policy arises from its own circumstances and there may be difficult cultural and historical circumstances that has pushed belonging closer to the core of the policy. These policies cannot simply be applied here, but need to be contextualised and understood in light of the circumstances in which they arise, shaped significantly by the legacies of colonialism, the case for Australia and Canada, with a repeated pattern of stolen generations. Thus, the importance of belonging is taught, with teachers of the indigenous children and families, and scholars teaching them about how to think about belonging - belonging to country, belonging to land, belonging to each other. These international policies are nevertheless potentially lacking as they also miss a 'life course perspective', as noted above.

Further, there has been a recent shift in England. Children's services now include a 'staying-put' agenda, which concerns being able to stay with one's foster carers, or if one goes to university there are things in place to understand the situation. The recent independent care review talked about love, and, even if this is unconvincing, it is nonetheless being applied in language. One way of thinking about belonging is as an antidote to trauma. If one thinks that trauma is the problem, then what are the solutions to that problem? The argument here suggests that cultivating belonging can be an antidote to trauma.

In this context, policy language and self-understanding are also important to consider. We currently have language that adopts phrases like: 'hard to reach', 'looked after child', 'child in need', 'excluded', 'hard to engage'. But if one talks about belonging as a way of understanding one's experience, the formation of the child's internal narrative is different, as it is no longer one of 'stigma' and of problematising the child. There is an opportunity to form a different narrative, a different way of understanding experiences, a different way of thinking about what it means to be someone who uses services, not the waifs and strays of the 19th century, but children who have a right to belong in their community, in some sort of family where they are protected.

A key finding in Chapter Six concerned how the respondents used policy language to describe themselves: the formation of an internal narrative. If 'belonging' becomes part of policy language, and is one part of the lexicon by which people describe themselves, this could benefit them in terms of their self-understanding. The language set out above would suggest that the 'problem is me', and so language is needed that enables young people to understand they are accepted just as they are. People develop as far as their identity allows them. But if belonging is a way of understanding one's experience, a young person might say, "well, that's lovely, but

I don't feel like I belong", which is what people could say, but at least then they have developed that notion of "But I deserve to belong because I know I don't feel that I do - that I don't belong. So therefore, I *know* that I deserve to belong". Thus, what does society need to do to help young people belong? If such questions are asked, young people do not have to grow up thinking they are the problem, which is often what children will think; even in a lovely household that has an argument, the children still think it is their fault. This research presents an opportunity to develop an entirely different way of viewing oneself within a system that does not problematise the individual. It is as if a system said: "You deserve to feel like you belong here, and we are going to do that, we're going to meet you where you are, because the way you are is OK, is good enough, and is a good enough person".

Relatedly, considerations for better lexicon for the care experienced community can also draw insights from the language used in Scottish policies, which have specifically adopted the term 'care experienced'. Terminology around care is personal, and some older generations may prefer the term 'care leaver'. However, the idea around care experience is that it has no age limit, and is not linked to the Children's Act. It does not have a cut-off point or a criteria that you have to meet, unlike how a care leaver does. Thus, the creation of terminology needs to be an open conversation which requires being respectful and curious about what language people prefer. We need to take seriously peoples' own self-definitions. Indeed, not everybody wants to define themselves by having been imprisoned or by surviving sexual assault. We need a balance of curiosity and responsibility around our use of language when describing the multitude of experiences that someone has gone through.

Educational policy must also take a life-course perspective. However, currently, educational systems are an inequitable place for trauma-affected students because the likelihood of being able to meet 'mainstream milestones' when you are also living with, dealing with, responding to, and healing from trauma, is not high. As such, there is need to seek out methods to eliminate the barriers so that those in care are able to access education at their own pace across their life course. These individuals need to become part of the academic interface where they can ask the kind of questions that people without those experiences would not be able to ask.

In summary, we need to consider better relationships, including post service and also the adoption of a life course perspective in policy, as well as professional development and working conditions. These policies should look at the workforce, the care providers, and the children. We have discussed the vocabulary of policy and how important it is for changes in the language of policy to occur. Some examples of that have been found in international policy. Vocabulary is still bereft of a life course perspective, because policy is still fragmented internationally as well. There is policy for early years, for different kind of age groups, and a more joined up perspective would be important. Furthermore, there is a need to change the kind of normative framings that are not deficit narratives. These narratives need to be constructed through policy that seep into practice, and co-constructed with the beneficiaries of the services rather than above and external to them, and to re-balance the burden of responsibility between the individual, the service, and society more broadly. Responsibility has been so dreadfully unbalanced up to this point that it continues to exert great pressure, with the onus of this responsibility falling on the individual. Given that policy *drives* practice, we turn there next.

10.2.2 Implications for Practice

First, one finding (Chapter Eight) was the importance of faces, places and spaces; there is a consistency in simply showing up that cultivates that sense of being a part of something. Put differently, an ecology of support in a community requires a focus on supervision of people working with children and young people, ensuring they are supported and nurtured, they have a sense of belonging, and are taken care of. If we take care of the people doing the work properly, they can in turn cultivate what is required for a sense of belonging for children and young people. These young people desperately need to find this sense of belonging from somewhere or someone safe, rather than be exploited and groomed from having this inherent need to belong. This is what often happens: the need to belong can lead to people exploiting them.

Professional and care relationships matter and we cannot starve systems and then get upset that systems have poor retention, high staff turnover, burnout, sickness and the children and young people within those spaces have no relationships to access post-service. These systems should not be so rigid that there is no possibility for relationality. A social worker, for example, should not get in trouble for meeting a young person outside of working hours, or do their washing or have them for Christmas, or all these other things that participants mentioned, that can make a real difference for young people. Often, the people who did those things got into trouble because there was no mechanism for them to work in that way safely and collectively within the system. They were working alone, making those kind of independent decisions, which then created a risk factor.

Post-service is also very important. When we talk of relationships, we are speaking of their prior relationships, and recognising those ongoing relationships, including those with the staff. However, we are also talking about post-service relationships, which are particularly important. You understand more about a duty when you are working with people who have fractured childhood experiences. To ensure that part of your work is developing relational webs for those children and young people in a community, whether that is looking at extracurricular activities, involvement in the community, or through ensuring children are not bussed out of their community. There are resources within the community to help them participate in activities. We build relational webs outside of the school and outside of where young people live so that there are other people available for them to access outside of those networks, and we help sustain those relationships. In short, we think beyond the idea that this child is going to get to 18 and then straightforwardly become an adult.

In summary, there is an element of recognising the importance of relationships and of different types of relationships with other people. There is the importance of putting in place mechanisms that enable some, at least, of these relationships to be sustained over time and across different settings. Then there is also this aspect of flexibility and enabling professional judgement to occasionally override certain kind of narrowly defined structures, in order to act in the best interest of the young person which is relationality. Next, we need to ensure good working conditions and professional development for those charged with care and education for children in care, as it is about building care into the ethos of the profession. Yet this care is not only directed towards the clients, as it were, but also towards the staff, so that the experience of care is shared which is what this study offered through the findings on *belonging.* A conceptual model of faces, places and spaces can be adopted in practice to help cultivate belonging and used as a practice-based tool.

10.2.3 Implications for Research

First, research on this group needs to be better connected. We have to think about people as having intersectional and interrelated experiences, and not just this person who has experienced care in isolation of all the other layers, notably excluded from schools alongside many other societal factors that influence how an individual makes sense of where they belong. Adults need to be spoken about how they understand those experiences over their life course. We also need to acknowledge the diversity of the population we are discussing. Taking a life course perspective enables self-definitions for belonging to arise as adults make sense of their journeys and begin families themselves.

Drawing on recent findings of the Excluded Lives Project (Emery et al, 2020), if we know this for children and families NOW and we know this is how adults with these experiences make meaning of what it meant for them, then research has a duty to respond. I argue that consideration of belonging is one way of doing that, for across the life course providing intergenerationally better life outcomes for children and their families, and families and their communities. Belonging gives parity to going downstream (prevention) and also going upstream (where the harm already happened).

Second, there are broader implications for research on belonging. This research also has implications for belonging outside of the categories of 'care-experienced' and 'excluded', which speaks to our fundamental human need to connect with one another. If we get it right for the people where it really matters, then we get it right for everybody. This research implies a need for a collective understanding of taking responsibility towards cultivating belonging. We can further consider the structural and spatial implications for how a community is designed to enable a sense of belonging, and geography as a discipline may offer insights into this.

10.3 Enabling Impact

This research started from a professional interest as someone who shared the experiences of the participants. The scholarly work informs the thesis bringing the findings full circle in how this research can inform professional practice. This ensures that the implications for practice are wide ranging and as a professional working in the settings, systems and services that children, young people and their families access, I am already well-positioned to ensure this research has an impact. This research is being disseminated through integration into my current work on creating trauma informed systems. I am also placed to influence policy and am regularly asked for input into 'round table' discussions in Government departments. In influencing both practice and policy, I am doing this through:

- Keynotes – Regular presentations at professional and academic conferences where I am invited to speak on trauma informed practices and also on belonging.
- Training – Delivering professional learning and development opportunities within education, children’s services, NHS funded services, Violence Reduction Partnership funded services and Criminal Justice.
- Consultancy – Supporting strategic cultural change through the evaluation of policies, practices and procedures through inviting those who work within them to incorporate the trauma informed principles of safety, trust and transparency, peer support, collaboration, voice choice and empowerment, and cultural humility.
- Content Creation – Providing published books, blog posts, graphic art, video clips, podcast interviews and having a regular professional presence on social media platforms.

Through continuing to engage in systems and services in the ways described above, the study aims to contribute to a shift towards a culture that ceases to problematise the child, young person and their family and incorporates an understanding of the impact of social structures, stigmatisation and the vital importance of high-quality relationships, as well as paying attention to the voices of these people, both in research and practice. Finally, therefore the following postlogue, echoing the opening of this thesis, returns to the voice of a participant.

Postlogue

Belonging – THE LONELY GHOST

What does this mean if you never had it?

You search for it in places even when you were hit

Abuse you take it ‘cos you think its right

But you end up in a state where you want to fight

You take it ‘cos you think its what you should get

Really you’re searching for your needs not met

Belonging belonging where do I belong?

Never stayed in one place too long..

Belonging belonging where do I find it?

Do you ever get it if you’re a ‘mis fit’

In care, excluded, and in Jail

Was I always destined to fail?

No one cared, or cared the wrong way

Too young, too ‘naughty’ to even say.

No trust in the people I should trust

Because abuse was just not love but their form of lust.

Belonging belonging what does it mean

Is it based on where you been?

Belonging belonging I want it so bad
Finding it might make me feel so glad

How did I feel over this time?
Alone, block the feelings to make me feel fine.
Inside I had no sense of self
Like a cereal box placed on a shelf
I wanted to feel love, like really feel.
The things I knew would make me heal..

Belonging belonging have I found it
With the people that I feel fit
Belonging belonging it feels so nice
To get to this have I paid a price..

A family, togetherness, things I didn't get
Finally feel I have needs met
Honesty, truth, to feel love and safe
Protect the people who keep me safe.
No judgement, respect love me for who I am
Now I feel I should give a dam.

Belonging belonging I do deserve it
A fire inside me it has lit

Belonging belonging we need it the most

I am now not a lonely ghost.

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Appendix 1 - Terminology

The term *'looked after'* has a specific, legal meaning based on the Children Act 1989. The definition is as follows: "Under the Children Act 1989, a child is looked after by a local authority if he or she falls into one of the following:

- is provided with accommodation, for a continuous period of more than 24 hours, [Children Act 1989, Section 20 and 21]
- is subject to a care order [Children Act 1989, Section 31]
- is subject to a placement order) (Children Act 1989, Section 21)."

'Care Leaver' (see Glossary) is also used to define someone in specific reference to legal terms as detailed below which is with reference to rights and entitlements.

- **Eligible child** is a child aged 16 and 17 who has been looked after for at least 13 weeks since the age of 14 and who is still being looked after.
- **Relevant child** is a child aged 16 and 17 who has been looked after for at least 13 weeks since the age of 14 and who has left care. This also includes young people who were detained (e.g. in a youth offending institution or hospital) when they turned 16, but who were looked after immediately before being detained.
- **Former relevant child** is a young person over 18 who was previously 'eligible' or 'relevant'. Councils support this group until aged 21, or longer if they are in education or training.
- **Qualifying child** is any young person under 21 (or 24 if in education or training) who stops being looked after or accommodated in a variety of other settings, or being privately fostered, after the age of 16. This also includes young people who are under a special guardianship order.
- **Former relevant child pursuing education** is any former relevant child whose case was closed, for any reason. If we are informed that they are planning to continue education or training they can ask the council to assess whether they can get any support. Any help would last until their 25th birthday" (Children Leaving Care Act 2000).

Appendix 2

Information Sheet

How do care-experienced adults who have been excluded from school understand those experiences? How do their experiences deepen understandings of belonging?

You are being invited to take part in a research study. Before you decide whether or not to take part, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully.

What is the purpose of the study: The voices of adults of having been a child looked after away from home and excluded from school are largely absent in the academic literature about care, education and exclusion. More than that, being excluded from home, in whatever way that has come about and being excluded from school create a double challenge in relation to the fundamental need to belong. This research aims to begin to fill that gap and carve out further opportunities for research in this area of the intersection of school exclusion for a child in care and how belonging is made sense of. Alongside filling an evidential gap, the research aims to look at how exclusion has been experienced for this group of adults, enhance knowledge around insider research and support those working with children to use and engage with the knowledge of those who have lived through these experiences. How belonging has been understood and what supported and hindered growth from these experiences will also be explored.

We would like to hear about your views and experiences around care and exclusion and the ways in which those experiences gave meaning to your sense of belonging.

What will happen to me if I take part?

I will be collecting the information that will form my study (known as research data) in different ways. Reading this Information Sheet means that you are in Stage 1.

Stage 1	First you can decide whether you want to take part
Stage 2	If you do, you will be asked to complete either, a biographical writing task or a recording of the task if preferred and an online survey.

Stage 3	Taken from the task in Stage 2, 9 people will be asked to also complete a semi structured interview.
	While not all those who take part in stage 2 will also take part in stage 3, the writing and the art pieces will still be used in the final research but will not form part of the analysis of the 9 stage 3 participants.

Disadvantages in taking part in this study are that it will take up your time to do the art piece or the biographical task and around 1 hour of your time to be interviewed. A further hour will be involved further into the research for a focus group which while voluntary, provides a chance for me to share with all those taking part some of the emerging findings.

Advantages in taking part are that you become part of a small but growing body of research on care experienced adults. You may also develop a different narrative about what happened to you by reflecting back and thinking about things in a different way and it is also an opportunity to have your voice and your views within that research.

Table 2 Inclusion and Exclusion Criteria

Inclusion Criteria	Exclusion Criteria
1. Must have been in care (residential care, foster care, kinship) for a period of 3 years of more (concurrently or sporadically amounting to the total) 2. Must be a UK resident and have been in care in the UK 3. Must have been excluded from school (permanently excluded or expelled from at least one school) 4. Must be aged 25 years or over 5. Be comfortable writing a short biographical writing piece (250 words)	1. Those who have been adopted (unless they had a period in care that meets the inclusion criteria) 2. Under 25’s

6. Be comfortable taking part in an interview 7. Can give the time required throughout the stages should they move on to stage 3 of the sampling process	

Frequently asked questions

Do I have to take part in the research?

Taking part is voluntary and you will have two weeks 'cooling off' period from your contribution(s) in which time you can ask me to delete, destroy and/or return what you have taken part in. After the cooling off period, I will assume that you are happy for me to use your contribution.

What will happen if I take part in Stage 2?

You will asked to either write 250 words on your thoughts about belonging in relation to being in care and/or being excluded from school. You have creative licence to explore this how you wish. You may want to write poetry or a thoughts or experience. If you prefer, you can create some art which may be used to create a digital photograph wall of all entries called Belonging.

What will happen during the interview if I take part in Stage 3?

You will be asked for your consent to take part in the interview and you will be asked to go through some questions which you can choose not to answer and you can stop the interview at any time. With your permission, the interview will be audio-recorded using a recording device or via online video call functions to record.

Once all the interviews have been analysed, there will be an invitation to take part on a focus group, online, lasting for an hour, where you will be able to share your experiences of being a participant and I will share the themes that the interviews brought to the fore.

What will happen to the information I provide for the study?

The research findings will be presented in reports, academic articles, webinars, and at national and local events. We may include direct quotes from you, but these will not identify you.

The researcher will have access to the information you provide in the interview. We use trusted third party transcribers to type out the interview for our analysis purposes only. The interview data will be anonymised and stored confidentially on secure servers.

The information you provide will be confidential and will not be shared with anyone else (apart from the transcribers mentioned above),unless the research team think that you or someone else might be at risk of harm.

How will you make sure that I cannot be identified?

You will not be identifiable as you will be assigned a number which will be backed up and kept safe and any name or location or other identifiable information will be deleted. The information you provide is known as *research data*. Any research data from which you can be identified is known as *personal data* (e.g., name, email address, audio recording). It does not include data where the identity has been removed (*anonymous data*). We will minimise use of personal data in this study as much as possible.

How will you protect my information?

The University of Oxford is the data controller with respect to your personal data, and as such we take care in how it is used. The University will process your personal data for the purpose of the research outlined above only. Further information about your rights with respect to your personal data is available from: http://www.admin.ox.ac.uk/councilsec/compliance/gdpr/individualrights/

All data will be stored for 3 years after the results of the study have been published.

Who is involved in the study?

The research is being carried out by Lisa Cherry (Doctoral Student). The study has been approved by the Department of Education Research Ethics Committee at the University of Oxford, reference number TBC.

If you have any concerns, comments or complaints about the study

Contact Lisa Cherry’s Supervisor, Dr Lisa Holmes, [email provided] or phone [number] . We should get back to you within 10 working days and explain how we intend to deal with your concern. If you are still unhappy or wish to make a formal complaint about this study, please contact the Department of Education Research Ethics Committee at the University of Oxford who will try to resolve the matter:

- E-mail:
- Address: 15 Norham Gardens, Oxford, OX2 6PY.

If you have any further questions then please don’t hesitate to contact Lisa Cherry on [email provided]

Appendix 3

Confirmation and Consent Form

Please initial each box, if you agree

☐	1. I have read and understand the information sheet for this study. I have had the chance to think about this information and ask questions about the study which have been answered.
☐	2. I understand that this study has been approved by the Department of Education Research Ethics Committee at the University of Oxford.
☐	3. I understand that taking part is voluntary and that I can stop the interview at any time or not answer some questions. I can also withdraw the information I provide in the interview within the two week cooling off period that starts at the point of taking part in any of the stages.
☐	4. I understand who will have access to the data I provide as part of this study, how it will be stored and what will happen to it at the end of the study.
☐	5. I understand how this study will be written up and published.
☐	6. I understand what to do if I want to complain or raise a concern about the study.
☐	7. I understand that the research team will have to tell other people if they have concerns that I or someone else might not be safe.
☐	8. I agree to being audio recorded using a recording device, or via online video call functions to record.
☐	9. I give permission to be quoted directly in the research publication anonymously.

☐ 10. I agree to take part in this study.

________ dd / mm / yyyy

Name of participant Date Signature

dd / mm / yyyy

Name of person taking consent Date Signature

Electronic signatures will be accepted as this research is taking place online.

Appendix 4

Survey

Stage 1

This appendix sets out the introductory text and questions for the survey. A consent form will be included at the start of the survey. The survey will be sent via end to end encrypted email or a survey option that adhere to the university polices which is currently being explored. University of Oxford approved survey software will be used.

All information collected will be anonymous. The survey will be sent to you via an encrypted email called Egress ensuring security of your information and you must reply using this e-mail which will therefore also be encrypted. The information will then be moved into a secure file, having been anonymised and the encrypted email will be deleted.

Aims and Purpose

The voices of adults of having been a child looked after away from home and excluded from school are largely absent in the academic literature about care, education and exclusion. More than that, being excluded from home, in whatever way that has come about and being excluded from school create a double challenge in relation to the fundamental need to belong. This research aims to begin to fill that gap and carve out further opportunities for research in this area of the intersection of school exclusion for a child in care and how belonging is made sense of. Alongside filling an evidential gap, the research aims to look at how exclusion has been experienced for this group of adults, enhance knowledge around insider research and support those working with children to use and engage with the knowledge of those who have lived through these experiences. How belonging has been understood and what supported and hindered growth from these experiences will also be explored.

We would like to hear about your views and experiences around care and exclusion and the ways in which those experiences gave meaning to your sense of belonging.

1. What age are you?

   18 – 25 *26 – 33* *34 – 41* *42 – 50* *51 – 58* *over 59*

2. How do you describe your ethnicity?

self-identify *prefer not to say*

3. Do you have a physical or mental health condition or illness?

   yes *no* *prefer not to say*

4. If yes, does your condition or illness reduce your ability to carry-out day-to-day activities?

   yes a lot *yes a little* *not at all* *prefer not to say*

5. With which gender do you most closely identify:

   male *female* *non-binary, agender, gender-fluid* *prefer not to say*

6. If you have answered male or female, does your gender match with your sex as assigned at birth?

   yes (cisgender) *no (transgender)* *prefer not to say*

7. Do you consider yourself to be ‘part of the LGBT+ community’?

   Prefer not to say

8. What is the highest level of education that you have obtained?

   no exams ever taken *O Levels/GCSE’s or equivalent* *A Levels/AS Levels or equivalent* *BA/BSc Degree or equivalent* *MA/MSc Degree* *Doctorate* *prefer not to say*

9. How many schools were you permanently excluded from? Please circle

   1 *2* *3* *4* *5 or more*

Appendix 5

In Depth Interview

Stage 3

In line with IPA the questions are designed to help the participants tell me what it is like to live in their world and this will be achieved by asking 9 questions, 3 questions per section. They will be told that there are no right or wrong answers and that I am interested in them and their experiences (Smith et al, 2009). While these questions will invite descriptive and narrative answers and are ‘core’ questions, within the discussion there will be further prompts such as “can you tell me more about that?” and probes such as “what did you mean by that.” I will divide the questions into 3 sections; care, exclusion and belonging.

Care

1. Please can you tell me what you understand by your experience of being in care?

   Prompt: How do you feel about that experience now?

2. Can you tell me how you came to be in care?

   Prompt: What types of care did you have? For example residential care? Foster care?

3. Can you tell me how that experience impacted upon your experience of school?

   Prompt: Can you think of any words that you would use to describe school?

Exclusion

1. Please can you tell me what you understand by school exclusion?

   Prompt: Did you learn anything from that experience?

2. Can you tell me the circumstances around the exclusion from school?

   Prompt: What happened next?

3. Can you tell me how that experience impacted your relationships at the time?

   Prompt: Why do you think that? Did you miss your friends/your teachers?

Belonging

1. Please can you tell me what you understand by the word belonging?

Prompt: Did you understand it that way as a child? Has that changed for you since?

2. Did being excluded from school have any impact on your sense of belonging?

   Prompt: Do you do think having a sense of belonging is important in care and at school

3. Can you think of any examples of when you felt you did belong? What about examples of when you felt you didn't belong?

   Prompt: Do you have people, places or things that you feel that you belong to now?

Appendix 6

Distress Protocol

DISTRESS	A participant indicates they are experiencing a high level of stress or emotional distress OR they exhibit behaviours suggestive that the discussion/interview is too stressful such as uncontrolled crying, shaking etc
STAGE 1 RESPONSE	Stop the discussion/interview and offer immediate support to assess the situation: Tell me what thoughts you are having? Tell me what you are feeling right now? Do you feel you are able to go on about your day? Do you feel safe?
REVIEW	If the participant feels able to carry on; resume interview/discussion. If the participant is unable to carry on Go to stage 2
STAGE 2 RESPONSE	Gently discontinue the interview and encourage the participant to contact a friend or other support person in their network. Or, with consent, offer services which could support them, for example, the services that they connected to this research from.
FOLLOW UP	Follow the participant up with a courtesy call (if the participant consents)

Modified from Draucker C B, Martsolf D S and Poole C (2009) Developing Distress Protocols for research on Sensitive Topics. *Archives of Psychiatric Nursing* 23 (5) pp 343-350)

Appendix 7

Curec Form

CUREC Ref: CIA-21-291

Central University Research Ethics Committee (CUREC)

CUREC 1A Form for Application form for research projects in the social sciences and humanities with less complex ethical issues

The University of Oxford places a high value on the knowledge, expertise, and integrity of its members and their ability to conduct research to high standards of scholarship and ethics. The research ethics review process has been established to ensure that research involving human participants is conducted in a way that respects the dignity, rights, and welfare of participants, and minimises risk to participants, researchers, third parties, and to the University itself. It is assumed that all members of the University will take their responsibilities and obligations seriously, and will ensure that their research involving human participants is conducted according to established principles and good practice in their field and in accordance, where appropriate, with legal requirements.

Before completing this form, please refer to the **Error! Hyperlink reference not valid.** and **Error! Hyperlink reference not valid.** on the Research Support website. Only type-written forms form will be accepted. Completed application forms should be emailed, along with relevant supporting documents, to your **Error! Hyperlink reference not valid.** or to **Error! Hyperlink reference not valid.** from your ox.ac.uk email address.

Please contact your **Error! Hyperlink reference not valid.** or the SSH IDREC if you have any questions about completing this form or the review process.

SECTION A: Filter for CUREC 2 application		
This section determines whether the application for ethics review should be made using the this form (CUREC 1A) or the CUREC 2 form (for research with more complex ethical issues).		
Please indicate with an 'X'.	**Yes**	**No**
1. Does the research involve the deception of participants?	☐	☒
2. Are the research participants vulnerable in the context of the research, or classed as people whose ability to give free and informed consent is in question? For example, • Participants aged 16 or under (also answer question A5); • Participants aged 16 – 18 (refer to **Error! Hyperlink reference not valid.** for guidance); • adults at risk;	☐	☒

Note the University's **Error! Hyperlink reference not valid.** and its implications for researchers involving young people or adults at risk.		
3. By taking part in the research, will participants be at risk of criminal prosecution or significant harm?	☐	☒
4. Does your research raise issues relevant to the Counter-Terrorism and Security Act (**Error! Hyperlink reference not valid.**), which seeks to prevent people from being drawn into terrorism? **Error! Hyperlink reference not valid.** provides further guidance.	☐	☒
If you answered **'No'** to all the questions above, go to Section B. If you answered **'Yes'** to any question above, continue to question 5 below.		
5. Is your project covered by a CUREC **Error! Hyperlink reference not valid.**?	☐	☒
If yes, list the CUREC Approved Procedure(s) you will follow		
If you answered '**Yes**' to ANY of questions 1-4, and answered '**No**' to question 5, **stop** completing this form and do not submit it for ethical review. You will instead need to submit a CUREC 2 application form. If you answered '**Yes**' to **any** of questions 1-4, and your project is covered by an Approved Procedure, **go on to Section B**. If more than one Approved Procedure applies, contact the SSH IDREC or your DREC for advice on whether a CUREC 2 form should be submitted instead.		

SECTION B: Researchers

1. Name of Principal Investigator or student's supervisor	Dr Lisa Holmes	
2. Department or Institute	Rees Centre, Department of Education	
3. University of Oxford telephone number		
4. University of Oxford email address		
Copy and paste the following six rows as necessary to complete for each additional researcher who will be involved in this study, including student(s) and those external to the University.		
5. Name of researcher or student	Lisa Cherry	
6. Department or Institute	Rees Centre, Department of Education	
7. University of Oxford telephone number		
8. University of Oxford email address		
9. Role in research	DPhil Student	
10. Degree programme, if student research	DPhil	
The whole research team		
11. Have the researchers undertaken research ethics and integrity training?	**Yes** ☒	**No** ☐
12. Please provide details of any research ethics and integrity training undertaken, including the dates of the training. Alternatively state relevant research experience.	I have undertaken and passed the Research Integrity Online Training on 25th January 2021 obtaining 95%	

13. State any **Error! Hyperlink reference not valid.** and explain how these will be addressed.	N/A

SECTION C: The research project
1. Title of the research project
How do care-experienced adults who have been excluded from school understand those experiences? How do their experiences deepen understandings of belonging?

2. Anticipated start date of the aspect of the research project involving human participants and/ or personal data (**dd/mm/yy**).	01/11/2021
3. Anticipated research end date (**dd/mm/yy**).	01/10/2023

4. Provide a brief lay summary of the aims and objectives of the research. This should cover the questions it will answer and any potential benefits. (max 300 words)

The voices of adults of having been a child in care and excluded from school are largely absent in the academic literature about care, education and exclusion. More than that, being excluded from home, in whatever way that has come about and being excluded from school create a double challenge in relation to the fundamental need to belong (Baumeister and Leary, 1995). This research aims to begin to fill that gap and carve out further opportunities for research in this area of the intersection of school exclusion for a child in care and how belonging is made sense of.

Alongside filling an evidential gap, the research aims to look at how exclusion has been experienced for this group of adults, enhance knowledge around insider research and support those working with children to use and engage with the knowledge of those who have lived through these experiences.

Using Interpretative Phenomenological Analysis (IPA), a qualitative methodology by an 'insider researcher,' the author will be exploring the lived experience of being a child in care and being excluded from school in relation to belonging. The participants will self-identify as care experienced and also as having been permanently excluded from school. They will be invited to take part in this research through contact made with one organisation working with adults who are care experienced, one organisation who work with adults within and on the edge of the criminal justice system and through a request made on twitter via the author's twitter account.

To answer the research question, a biographical writing task along with a short survey using structured questions will be used to gather data that provides rich narrative alongside age, highest level of education and ethnicity, which will form part of the sampling process for the final smaller sample required in IPA.

5. Please indicate the methods to be used (indicate with an '**X**'):

Analysis of existing records	☐

Snowball sampling (recruiting through contacts of existing participants)	☐
Use of casual or local workers e.g. interpreters (refer to guidance in **Error! Hyperlink reference not valid.**)	☐
Participant observation	☐
Covert observation	☐
Observation of specific organisational practices	☐
Participant completes questionnaire in hard copy	☐
Participant completes online questionnaire or other online task (refer to guidance in **Error! Hyperlink reference not valid.**)	☒
Using social media to recruit or interact with participants (refer to guidance in **Error! Hyperlink reference not valid.**)	☒
Participant performs paper and pencil task	☐
Participant performs verbal or aural task (e.g. for linguistic study)	☐
Focus group	☒
Interview (refer to guidance in **Error! Hyperlink reference not valid.**)	☒
Audio recording of participant (you will generally need specific consent from participants for this)	☒
Video recording of participant (you will generally need specific consent from participants for this)	☐
Photography of participant (you will generally need specific consent from participants for this)	☐
Others (please specify below)	☐

6. Provide a brief summary of the research design and methods. What will research participants be asked to do? (max 300 words)
   Please also submit a copy of the questions participants will be asked, if applicable, or some information about the sorts of topics that will be covered.

There are three stages of sampling for this research.

The first stage of the sampling process requires that I will approach, by email, two organisations; one which is set up to work with adults who have experienced living in care as children and another that works with adults within and on the edge of the criminal justice system. I shall also share 3-5 tweets on my Twitter account which has 32,000 followers.

The second stage will commence with the participants who meet the criteria and express an interest in stage one. This group will be asked to undertake a biographical writing task of around 250 words. For people for whom writing presents a challenge, I will also offer the opportunity to submit a recording. Participants will also be required to complete an online survey.

The biographical writing task and the online survey will inform purposively choosing 9 participants who will each be invited to participate in a semi structured interview.

In using the data from the survey and the biographical writing task, I will choose the participants based on the content of the writing and have a diverse group of participants based on the survey responses. This will involve seeking a mix that includes gender, ethnicity and ages of the participants while also being able to focus on the narrative to aid selection.

Once I have selected the 9 participants, I will be undertaking one to one interviews also known as conversation with a purpose (Smith et al, 2009) using semi structured interviews. The 45 minute long interviews will be held online using the University Teams account where the audio will be recorded, the interviews will then be transcribed. To ensure the participant is not identifiable, any names of people, places, towns, schools, residential homes, work places will be redacted.		
7. List the location(s) where the research will be conducted, including any other countries.	UK	
8. Clarify which parts of the research will be conducted in-person and which will take place remotely, e.g. **Error! Hyperlink reference not valid.**.	All the research will be conducted remotely	
9. If your research involves fieldwork or travel and your department requires a travel risk assessment, will you have completed and returned a risk assessment form beforehand? Please indicate with an **'X'**. (This must be approved by your department before you travel. If you are travelling overseas, you are advised to take out **Error! Hyperlink reference not valid.**.) Refer to guidance available from your Department, the **Error! Hyperlink reference not valid.**, the **Error! Hyperlink reference not valid.**, and the Humanities Division, and on travel for University business.	Yes No Not required in this instance	☐ ☐ ☒
10. In the case of international or collaborative research, explain how you will address any ethical issues specific to the local context. Please provide details of the local review, approval or permission obtained or required. Refer to the **Error! Hyperlink reference not valid.**. If there will be no local review, explain why not. Please also address any physical or psychological risks for Oxford researchers and local fieldworkers in Section G.		
N/A		
11. Name of departmental/ peer reviewer (if applicable)	N/A	
12. External organisation funding the research and grant reference (if applicable)	N/A	
13. Please refer to the **Error! Hyperlink reference not valid.** and list any that have been used to develop your research.	BERA Guidelines	

SECTION D: Recruitment of research participants

1. Number of participants	For the first stage it is unknown how many people will come forward. For the interview stage, there will be 9 participants
2. How was the number of participants decided?	9 participants are deemed at the upper end of the acceptable number when using IPA
3. Age range of participants	Over 25's
4. Inclusion criteria	1. Must have been in care (residential care, foster care, kinship) for a period of 3 years of more (concurrently or sporadically amounting to the total) 2. Must be a UK resident and have been in care in the UK 3. Must have been excluded from school (permanently excluded or expelled from at least one school) 4. Must be aged 25 years or over 5. Be comfortable writing a short biographical writing piece (250 words) or submitting a recording 6. Be comfortable taking part in an interview 7. Can give the time required throughout the stages should they move on to stage 3 of the sampling process
8. Exclusion criteria	1. Those who have been adopted (unless they had a period in care that meets the inclusion criteria) 2. Under 25's

1. Indicate with an ‘**X**’ all intended recruitment methods **Please submit copies of the recruitment material that will be used, e.g. advertisement text, introductory email text.**	Poster advert	☐
	Flyer	☐
	Email circulation	☒
	Social media (e.g. Twitter, Facebook)	☒
	Website	☐
	In-person approach	☐
	Snowball sampling	☐
	Recruitment sites (e.g. Mechanical Turk)	☐
	Existing contacts or volunteer database	☐
	Other (please specify):	☐
9. How will potential participants be identified and approached?	The first stage of the sampling process requires that I will approach, by email, two organisations; one which is set up to work with adults who have experienced living in care as children and another that works with adults within and on the edge of the criminal justice system. The first is [XXXXXXXXX] which has a database 4500 individuals although I have been informed that many of the email addresses are no longer in use. The other organisation is [XXXXXXXX] which works with 2000 adults. They will send out emails on my behalf to all individuals on their databases. Interested parties will be invited to contact me directly via my university email. I have specifically chosen the second organisation because those using this service may well have experience of care and school exclusion yet not be connected to an organisation specifically for people with care experience. I shall also share 3-5 tweets on my Twitter account which has 32,000 followers. Interested parties will be invited to contact me via my university email and my direct message facility will be switched off to avoid confusion as to how to contact me.	
10. Will informed consent be obtained from the research participants or their parents/ guardians? If not, please explain why not.	Yes	

11. For each activity or group of participants, explain how **Error! Hyperlink reference not valid.** will be obtained from the participants themselves and/ or their parents/ guardians, if applicable. How will their consent be recorded?	Appendices attached of the following: • Recruitment material • Information Sheet • A document to record informed consent. I will email the forms to the participants who will return the form by email prior to interview. Interviews will not be conducted until consent forms have been received.
12. Provide details of any payments and incentives and the rationale for providing these. Further guidance in **Error! Hyperlink reference not valid.**.	N/A
13. Describe how participants • may withdraw from the study • may withdraw any personal information they have provided from the study State any limits to withdrawal, for example once the data has been anonymised or at some other specified stage prior to publication. Make sure participants are aware of any withdrawal limits.	All participants will be given the right to withdraw from the research up to a month after the final focus group has taken place. If the participant wants to withdraw from the research then they will email my university account. I will then withdraw their data and confirm that this has taken place. Prior to full withdrawal, if it is desired by the participant, I shall fully reflect with the participant on whether I could have approached anything differently that might have supported them in continuing (BERA Ethical Guidelines, 2018).

SECTION E: Research data

All information provided by participants is considered research data for the purpose of this form. Any research data from which participants can be identified is known as personal data; any personal data which is sensitive is considered special category data. Management of personal data, either directly or via a third party, must comply with the requirements of the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018, as set out in the **Error! Hyperlink reference not valid.**.

In answering the questions below, please also consider the points raised in the **Error! Hyperlink reference not valid.** and **Error! Hyperlink reference not valid.** and whether, for higher-risk data processing, a separate **Error! Hyperlink reference not valid.** may also be required for the research. Advice on research data management and security is available from **Error! Hyperlink**

reference not valid. and your local IT department. Advice on data protection is available from the **Error! Hyperlink reference not valid.**.

For guidance on conducting internet-mediated research, refer to CUREC's **Error! Hyperlink reference not valid.**.

1. What data will be collected? (Indicate with an '**X**')

Screening documents	☐	Task results (e.g. questionnaires, diaries)	☒
Consent records (e.g., written consent forms, audio-recorded consent, assent forms)	☐	IP addresses (refer to **Error! Hyperlink reference not valid.** for guidance)	☐
Contact details for the purpose of this research only	☒	Field notes	☐
Contact details for future use (guidance)	☐	Photographs	☐
Opt-out forms	☐	Information about the health of the participant (including mental health)	☐
Audio recordings	☒	Previously collected (secondary) data	☐
Video recordings	☐	Data already in the public domain. Specify the source of the data:	☐
Transcript of audio/ video recordings	☒	Other, please specify:	☐

2. During the course of the research, where will **each type of** research data be stored?	- Contact details - Audio recordings - Transcript of audio recordings - Task results OneDrive for Business, provided as part of the University's Nexus365 offering, has been approved by the University's Information Security team for the storage of research data and this will be used to store all information. Microsoft Teams will be used for the audio recording which is approved by the University and is linked to the One Drive so the movement of data will be within that system. Also within the Microsoft suite is within Nexus365 is the automatic transcription feature within Microsoft Teams. Therefore, there will be no movement of data from one area to another. Egress is an add on to Outlook that provides end to end security. Egress is used as standard across Rees Centre research.

3. Who will have access to the research data during the project?	Access to the research data will be restricted to myself as the DPhil student.		
4. Please complete this section if your research involves the use of secondary (i.e. previously collected) data.	**Please indicated with an 'X'.**	**Yes**	**No**
	Are data access agreements in place for access to and use of this secondary data? (If so, please attach these.)	☐	☐
	Did the individuals agree that their data could be used for this purpose?	☐	☐
	Could anyone (including members of the research team) link the data back to an individual or individuals? If this is a possibility, please explain how the associated ethical issues will be addressed: N/A	☐	☐
5. How do you intend to share the research data at the end of the project?	Depositing in a specialist data centre or archive	☐	
	Submitting to a journal to support a publication	☐	
	Depositing in an institutional repository	☐	
	Dissemination via a project or institutional website	☐	
	No plans to share the data	☐	
	Other (please specify):	☐	
6. How do you intend to report and disseminate the results of the research? (Indicate with an 'X')	Thesis publication	☒	
	Publication in a peer reviewed journal	☒	
	Publicly available report	☒	
	Conference presentation	☒	
	Publication on a website	☒	
	Report to a research funder	☐	
	Providing participants with a lay summary of the results	☐	
	Submission for academic assessment	☐	
	Other (please specify):	☐	
7. Explain what will happen to the data at the end of the research project. This question must be answered for each type of data, including completed consent forms.			
I will store research data safely for at **least 3 years** after final publication or public release. I will store the data on the University cloud system for optimum security. There will be no paper copies of the data. I am not going to be making the data available for reuse.			

As I am using the University cloud system, I will destroy the data using the University protocol ensuring that no data is left in the recycle bin.

To destroy the data I will use 'fileshredder.'

SECTION F: Protection of research participants and their personal data

1. How identifiable will the participants be from the **Error! Hyperlink reference not valid.**? (Indicate with an 'X')	Directly identifiable from the information included	☐
	Error! Hyperlink reference not valid./ indirectly identifiable	☐
	Not identifiable – data is anonymous	☒
	Other, please specify:	☐
2. To what extent will the **data** be **Error! Hyperlink reference not valid.**? How identifiable will any individuals be from the research data? Describe any measures you will take towards assuring confidentiality, potential risks to confidentiality.	Once received data will be anonymised by giving each participant their own number.	
3. How will you ensure that third parties (e.g., interpreters and transcribers)	I am not using external transcribers or interpreters.	

are aware of and adhere to the measures described in this form?	

SECTION G: Risks and benefits of the research

1. Will the research involve topics that could be considered sensitive? If so:
    a. Please provide more detail or supporting information (such as the interview questions) to show the range of questions;
    b. Explain what steps will be taken to reduce risk of distress;
    c. Consider seeking advice from within your Department or from the ethics committee including whether the application might benefit from additional ethics review (e.g., via a CUREC 2 application).

Attached are the interview questions and a distress protocol

2. Describe any additional burden or risks to the participants and the steps you will take to address these.

N/A

3. Describe any physical or psychological risks to the researcher(s) (including local fieldworkers or research assistants) and the steps you will take to address these.

Expanding on understanding that I belong to the community that I am researching, it is important to consider that the story telling that I hope will unfold in the interviews is also the same story telling that can be hard to hear and that can press my own buttons that I carry from my own experiences.

It is also the case that the subject of ‘care’ particularly can bring up a broad spectrum of experiences and emotional responses and there will be places where those are similar and there will equally be places where they are antagonistic.

My own wellbeing will be managed through effective use of academic supervision, my own independent supervision and maintaining all the activities in my life that ensure that I am well, for example swimming, yoga and walking.

4. Describe any benefits of the research, both to participants and to others.

The findings from this research are expected to be of direct relevance to national and local policy both for children in care, and those excluded from school. There is an opportunity for a greater and more nuanced understanding of the role of the data collected. Since 1969 under the Children and Young Person's Act the focus was on numbers of children in care. Only in 1999 does the statistical data collected highlight how children in care were perform in education.

These statistics, collected from Local Authorities annually by the Department for Education (DfE), have repeatedly shown poor education outcomes for children in care. There has been extensive research that has focused on the impact of early childhood adversity (Shonkoff, 2000, Shonkoff, 2012, Sroufe, 2005) and the impact of developmental trauma (Schore 2001, Porges, 2011, Siegal 2011, Gerdhart 2014). How this affects learning has also been explored (Geddes, 2006, Nash and Schlosser, 2015, Bomber 2020) finding that early trauma experiences "indicates that the trajectory for learning across the developmental lifespan is radically affected" (O'Neill et al, p190, 2010).

The current datasets collected by the DfE focus on achievement, closing the attainment gap and the numbers of children in care/care leavers accessing University education and have only recently increased collection to the age of 21 years. They collect administrative data rather than data about the messy and complex realities of life in the care system. By gathering more nuanced data to understand in more detail care and educational outcomes, we can better understand this area. Where this has been achieved, we can start to understand the role of the school, any significance regarding the length of time spent in care, any impact of relational practice by teaching staff and the resources that may have been available (Luke et al, 2018).

5. Give details of any other ethical issues or relevant information.

There are several tensions that create ethical complexities that need to be explored in some detail. Who I am cannot be disentangled from this research as raised in the chapter on positionality.

Firstly, I share the two areas of lived experience being researched with the participants; care experience and school exclusion. This position might suggest a connection with the participants that helps rapport building, access and insights, yet insider status, a term used to describe someone with shared experiences between researcher and participants, brings, as I shall go on to explore, other challenges (Hayfield and Huxley, 2015). It has been argued that thinking about inside/outside as a binary concept feels unhelpful as it is complex and messy and may be better thought as fluid researcher identities (Thomson and Gunter, 2011). This insider researcher position forces me to ask different questions of myself and requires me to develop a deep awareness of what aspects of the lived experiences may be similar and what aspects may be different. The question I might ask regarding how much I should share seems somewhat a moot point as I have written autobiographically on many occasions and these publications are available to the public in the form of books, blogs and vlogs which they may or may not have read. This means that the participants may think they know me when in fact they will simply know who I have revealed and how I felt about what I revealed at the moment that I wrote or spoke of my experiences.

Secondly, I am a publicly well known professionally and work across all the public sectors in schools, services and systems giving me a perceived status that is available for all to see. Due to the complexity of being a 'public figure' in this area having written on the subject and worked in the area for over 30 years raises the issue of power. This could lead to fears around what to disclose for fear of judgement. It could also lead to having concerns about 'meeting' me in online spaces outside of the research as well as in offline spaces which could also hinder what is shared. Third, I am known professionally as taking a position that is compassionate, empathic and relationships focused which may lead participants to confuse being a participant with wanting or even expecting, a therapeutic experience. I am known to be qualified in therapeutic modalities and that I have been on what I call a 'recovery' journey for over 30 years. Participants may arrive with an expectation about what information I can handle, what demeanour I have and what therapeutic capabilities I hold in reference to working with sensitive and emotional information. Being aware of over disclosure is paramount alongside clear boundaries throughout the process about what the research process can hold.

Research *can* be a therapeutic experience and this is a concept that has been explored in more detail as part of my Transfer of Status. It may provide a space that hasn't been available before to explore the questions being asked. Both are emotional processes but being a participant may hold less stigma than accessing counselling for example (Newton, 2017). Good practice in qualitative research requires clarity about the research/participant relationship and the limitations that will be laid out in the Information Sheet (Appendix 3) along with a consent form (Appendix 4). There will also be a distress protocol (Appendix 8) providing me with a clear outline of managing emotional responses that may mean that interviewing has to end and where I might signpost people should that be appropriate.

Finally, I have been arguing the position of prevention and improvement for children and young people my entire career. I may therefore be understood as a 'ally', an 'insider', an 'activist' and/or a 'role model'. This may lead to invitations to collude with or be drawn into a particular assumed way of thinking about certain experiences. It may mean that participants are more vulnerable with me than they would wish to be were I not thought of as an 'insider.'

Distinguishing myself as Lisa Cherry the DPhil student rather than Lisa Cherry who is known professionally is a fundamental ethical consideration. This is potentially complicated by using Twitter to invite participants, which is my professional social media account. There are a number of considerations raised in using this account around transparency and privacy (Gelinas et al, 2017). My researcher identity will be a continuing negotiation. The invitation will state that this invitation is from Lisa Cherry the DPhil student not Lisa Cherry the professional to ensure transparency. The ease by which online communication can take place can lead to misunderstandings, poor sensitivity (Gelinas, 2017) and blurred boundaries so I will refer any potential participants to my University of Oxford email where we can formalise the discussion.

It does not sit comfortably with me to project an identity of 'vulnerable' upon the participants. However, all the tensions I have raised are because I understand that the childhood experiences that we are reflecting back on are experiences that happen to children who are experiencing vulnerabilities. These vulnerabilities can travel into adulthood and I am not able to make any assumptions about what 'recovery' process or journey participants may have taken. For that reason, I will place these key statements when working with vulnerable populations at the core of my research. These are:

2. We must be willing to take the time and make the effort to be aware of and ask ourselves some of the difficult questions that arise when working with vulnerable populations.

3. We must understand that we view the world through a lens of our own experience.
4. We should consider the Belmont Report's tenets of welfare, justice, and respect in our dealings with vulnerable populations, keeping in mind that often what we ought to do is not always consistent with what we can do (Antle, 2017).

An ethical consideration to date has been the potential impact on participants who express an interest in taking part in this research but are not selected beyond the autobiographical writing task. This has been discussed at length within supervision sessions. We have concluded that a letter explaining how the writing task will be included within the research and why they were not chosen to be one of the 9 participants for interview, would provide an adequate debrief procedure (Appendix 12).

SECTION H: Professional guidelines

Please indicate with an '**X**' at least one set of professional guidelines you will follow.

Research specialism/ methodology	**Association and guidance**	
Anthropology	**Error! Hyperlink reference not valid.**	☐
Computer Science	**Error! Hyperlink reference not valid.**	☐
Criminology	**Error! Hyperlink reference not valid.**	☐
Education	**Error! Hyperlink reference not valid.**British Educational Research Association Ethical Guidelines for Educational Research	☒
Geography	**Error! Hyperlink reference not valid.**American Association of Geographers Statement on Professional Ethics	☐
History	**Error! Hyperlink reference not valid.**Oral History Society of the UK Ethical Guidelines	☐
Internet-mediated research	**Error! Hyperlink reference not valid.**Association of Internet Researchers Ethical Guidelines **Error! Hyperlink reference not valid.**British Psychological Society: Ethics Guidelines for internet-mediated research **Error! Hyperlink reference not valid.**Association for Computing Machinery Code of Ethics and Professional Conduct	☐
Management	**Error! Hyperlink reference not valid.**Academy of Management Code of Ethics	☐
Political Science	**Error! Hyperlink reference not valid.**American Political Science Association (APSA) Guide to Professional Ethics in Political Science	☐
Politics	**Error! Hyperlink reference not valid.**Political Studies Association. Guidelines for Good Professional Conduct	☐
Psychology	**Error! Hyperlink reference not valid.**British Psychological Society Code of Ethics and Conduct	☐
Social research	**Error! Hyperlink reference not valid.**Social Research Association: Ethical Guidelines	☐

Socio-legal studies	**Error! Hyperlink reference not valid.**Socio-Legal Studies Association: Statement of Principles of Ethical Research Practice	☐
Sociology	**Error! Hyperlink reference not valid.**The British Sociological Association: Statement of Ethical Practice	☐
Visual research	**Error! Hyperlink reference not valid.**ESRC National Centre for Research Methods Review Paper: **Error! Hyperlink reference not valid.**Visual Ethics: Ethical Issues in Visual Research	☐
Other professional guidelines		☐

SECTION I: Endorsements and signatures

Please ensure this form is endorsed by the Principal Investigator (or student's supervisor), the Head of Department (or nominee) and, if student research, by the student themselves.

The SSH IDREC Secretariat accepts either option below. If you have a DRECHYPERLINK%20%22%20**, check which signature option it prefers.**

- **Option 1: direct email endorsements**

Each of the signatories should submit an email from a University of Oxford email address, indicating their acceptance of the responsibilities listed below.

- **Option 2: signatures**

Please scan the signed form and email it to us as a PDF. Pasted images of signatures cannot be accepted.

Endorsement by the Principal Investigator/ student supervisor and student, if applicable

I/ we the researchers understand my/ our responsibilities as Principal Investigator (and student, if applicable) as outlined in the guidance on the CUREC website. I/ we declare that the answers above accurately describe the research as presently designed, and that the ethics committee will be informed of any changes to the project which affect the answers to this form.
I/ we will inform the relevant IDREC if the Principal Investigator changes.

Name of Principal Investigator	Lisa Holmes
Principal Investigator's signature	
Date	08/09/2021
Name of student (if applicable)	Lisa Cherry
Student's signature	Lisa Cherry
Date	12th August 2021

Departmental endorsement – from the Head of Department or nominee
(Another senior member of the department may sign where the head of department is the Principal Investigator, or where the Head of Department has appointed a nominee. Example

nominees include Deputy Head of Department, Director of Research, or Director of Graduate/ Undergraduate Studies.)

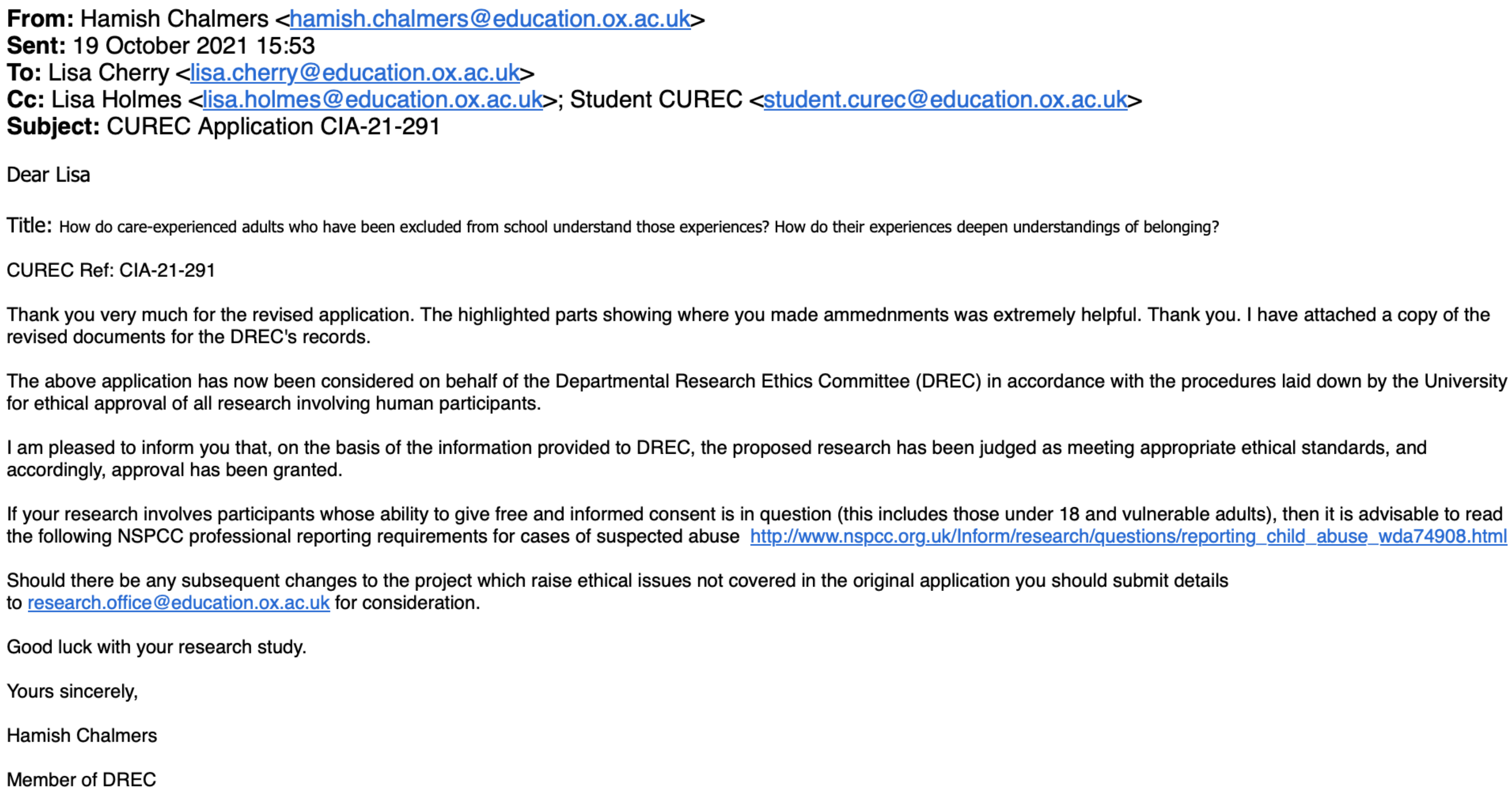
I have read the research project application named above. On the basis of the information available to me, I:

- consider the PI and student researcher (if applicable) to be aware of their ethical responsibilities in regard to the ethical issues associated with this research;
- am satisfied that the proposed design and methodology are sound; the research has been subject to appropriate peer review and is likely to contribute to existing knowledge and/ or to the education and training of the researcher(s) and that it is in the public interest.

Signature	
Name	
Role	
Date	

Appendix 8

CUREC Revised Application Approval



From: Hamish Chalmers <hamish.chalmers@education.ox.ac.uk>
Sent: 19 October 2021 15:53
To: Lisa Cherry <lisa.cherry@education.ox.ac.uk>
Cc: Lisa Holmes <lisa.holmes@education.ox.ac.uk>; Student CUREC <student.curec@education.ox.ac.uk>
Subject: CUREC Application CIA-21-291

Dear Lisa

Title: How do care-experienced adults who have been excluded from school understand those experiences? How do their experiences deepen understandings of belonging?

CUREC Ref: CIA-21-291

Thank you very much for the revised application. The highlighted parts showing where you made ammednments was extremely helpful. Thank you. I have attached a copy of the revised documents for the DREC's records.

The above application has now been considered on behalf of the Departmental Research Ethics Committee (DREC) in accordance with the procedures laid down by the University for ethical approval of all research involving human participants.

I am pleased to inform you that, on the basis of the information provided to DREC, the proposed research has been judged as meeting appropriate ethical standards, and accordingly, approval has been granted.

If your research involves participants whose ability to give free and informed consent is in question (this includes those under 18 and vulnerable adults), then it is advisable to read the following NSPCC professional reporting requirements for cases of suspected abuse http://www.nspcc.org.uk/Inform/research/questions/reporting_child_abuse_wda74908.html

Should there be any subsequent changes to the project which raise ethical issues not covered in the original application you should submit details to research.office@education.ox.ac.uk for consideration.

Good luck with your research study.

Yours sincerely,

Hamish Chalmers

Member of DREC