

The safety and wellbeing of looked after young people:

An analysis of looked after young people's experiences and perceptions with implications for contemporary safeguarding policy and practice

Kim Nicholas Bown

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Abstract

Looked after young people, the focus of this thesis, are young people in state or public care. They frequently have complex family circumstances, socially excluded backgrounds and often intense need. Whilst it is possible to identify trends and patterns in their backgrounds, their needs and requirements are essentially heterogeneous (Bullock, Parker, Courtney, Sinclair and Thoburn, 2006, p. 1346).

The research was undertaken within the national context of persistently poor educational, health and behavioural outcomes for looked after young people, evidence from Inquiry reports of historic abuse, and contemporary concerns that small groups of looked after young people may not be safe (Ofsted, 2008d, p. 5). In addition, a dissonance was found between contemporary social policy developments for looked after young people and effective implementation which impacts positively on their experiences and outcomes.

Previous research on the topic from the perspective of young people themselves remains under developed. The study aimed to investigate the views of 25 looked after young people who had recently left a placement about their safety and wellbeing whilst in their previous placement. The researcher adopted a case study design, an interpretivist perspective and conducted in-depth interviews using structured and semi-structured methods.

The study found most participants felt safe but some felt unsafe to varying degrees. Participants felt most safe from sexual harm and least safe from physical harm and bullying. Carers, other looked after young people and foster carers' own children were identified as the main sources of harm. Families were identified as the people who were most effective in listening and looking out for participants' safety and wellbeing. Formal complaints procedures were found to be inadequate for communicating young people's concerns about their safety and wellbeing. Many participants valued their participation in education and wanted increased participation in all important decisions that would, or could, impact on their safety and wellbeing. A close inter-relationship was found between participation, outcomes, power and engagement. The concepts of 'voice' and 'exit' were applied to the analysis of participation to denote inclusive, empowered levels of participation and, conversely, levels which contribute to disconnection and disengagement.

Close trusting relationships with family, friends, carers and social workers were found to be important but often experienced as inadequate. Participants mostly wanted to discuss important, personal issues with people with whom they had a close, personal relationship.

High levels of placement discontinuity and complex care arrangements often resulted in disrupted key relationships and contributed to making key information – including knowing the reasons for being looked after – difficult to understand and recall for some participants. Having a clear sense of self history was identified as contributing to self identity, and the building of resilience and wellbeing.

The study identified an absence of person centeredness relating to looked after young people. The study compared aspects of UK and European welfare models and found the UK model to be antithetical to the importance of relationships, participation and the centrality of the young person. European social pedagogic models were generally found to achieve greater synergy with young people's perspectives and priorities.

The study concludes by emphasising the close inter-relationship between the key concepts of 'safeguarding from harm' and 'promotion of wellbeing'. Four emergent categories identified from the analysis of findings are proposed as the key components of a new model of safeguarding and wellbeing for looked after young people. These four components are: feeling safe; inclusion and participation; continuity and quality of relationships; and sense of self and self history. In addition to these four components, the defining feature of the model is presented as the centrality of the voice of the looked after young person, with subsequent implications for policy and practice.

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Abbreviations

ACPC	Area Child Protection Committee
ASSIA	Applied Social Sciences Index and Abstracts
BASW	British Association of Social Workers
CSLA	Case Study Local Authority
CM	Care Matters
CSD	Children's Services Department
CSCI	Commission for Social Care Inspection
CAA	Common Area Assessments
CRB	Criminal Record Bureau
DCSF	Department for Children, Schools and Families
DfES	Department for Education and Schools
DH	Department of Health
ESRC	Economic and Social Research Council
ECM	Every Child Matters
EDA	Exploratory data analysis
GSCC	General Social Care Council
JARs	Joint Area Reviews
JUC SWEC	Joint University Council Social Work Education Committee

LSCB	Local Safeguarding Children Boards
LAYP	Looked after young people
NCSC	National Care Standards Commission
NCB	National Children's Bureau Healthy Care Programme
NMS	National Minimum Standards
Children's NSF	National Service Framework for Children, Young People and Maternity Services
PAF	Personal Social Services Performance Assessment Framework
QoL	Quality of life
RCT	Randomised controlled trial
SCIE	Social Care Institute for Excellence
SSI	Social Services Inspectorate
SEU	Social Exclusion Unit
SWP	Social work practices
SPSS	Statistical Package for the Social Sciences
UASC	Unaccompanied asylum-seeking children
UNCRC	United Nations Convention on the Rights of the Child

DECLARATION

Whilst registered as a candidate for the above degree, I have not been registered for any other research award. The results and conclusions embodied in this thesis are the work of the named candidate and have not been submitted for any other academic award.

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DISSEMINATION

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Change and Challenge in UK Social Work: Rules or Relationships?
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New Organisational Perspectives from a New Generation
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Section 1: Setting The Scene

Chapter 1: Introducing the research

1.0 Summary

This chapter introduces the subject of and rationale for the thesis, explains the background and topicality of the research and its specific focus on the safety and wellbeing of looked after young people.

The concept of safeguarding and its relationship to the wellbeing of looked after young people is examined, and the development of research in this field, including current shortfalls, are explored. A preliminary framework for understanding and promoting the safety and wellbeing of looked after young people is proposed.

This framework comprises six domains drawn from an analysis of existing wellbeing frameworks, recent policy initiatives and a review of literature. These domains were reviewed by a young person consultant engaged by the researcher, and subsequently used to organise the research and analysis of findings.

Chapter One also describes the main aims and objectives of the study, explains the research design including the use of international comparative analyses, and concludes with a summary of the key stages of the research, which are further developed in Chapter Four. The chapter ends with an outline of the thesis, explaining the subject of each of the three sections and nine chapters.

1.1 The Research Topic

Looked after young people [LAYP] are children and young people in state or public care. The term 'looked after' was introduced in the Children Act 1989 and aimed to de-stigmatise the experience of being in care. The phrase 'looked after' will be applied in the thesis. LAYP generally use the term 'in care'. LAYP frequently have complex family circumstances, socially excluded backgrounds and often intense need. Whilst it is possible to identify trends and patterns in the backgrounds of LAYP, they do not constitute a homogeneous group. They are best defined and understood by their heterogeneity and diversity of needs (Bullock, Parker, Courtney, Sinclair and Thoburn, 2006, p. 1346).

LAYP have been subject to considerable social policy and legislative attention over the last decade. Despite this activity, two major concerns for their safety and wellbeing are apparent:

- i) The evidence of persistently poor outcomes achieved for LAYP compared with their non-looked after peers, and inconsistencies in the quality of care experienced by some LAYP. This evidence constitutes concern for the wellbeing of LAYP;
- ii) The evidence from numerous inquiry reports that LAYP had been subject to abuse in predominantly institutional contexts in the 1980s and 1990s, and from contemporary research and social policy statements which indicate that LAYP remain vulnerable to abuse in a range of contexts. This evidence constitutes concern for the safety of LAYP from abuse.

1.2 The Study

The research asked LAYP for their views on the two key dimensions of their safety and their wellbeing. The study was based on the argument that there is a close inter-relationship between these dimensions, and investigated the views of 25 LAYP on their safety and wellbeing whilst looked after in their previous placement. The study therefore adopted a case study design, enabling an intensive analysis of the views of LAYP from one local authority (referred to as the Case Study Local Authority [CSLA]). Each participant engaged in an in-depth individual interview. The case study design is further examined in Chapter Four.

The title of the study was confirmed as: The safety and wellbeing of looked after young people: an analysis of looked after young people's experiences and perceptions with implications for contemporary safeguarding policy and practice.

The background and topicality of the two main dimensions of the research are examined below, followed by an overview of the key contextual features and profile of looked after children and young people in the UK. This is compared to key features arising from a brief international comparative analysis, and a summary of the major contemporary developments that illustrate the pertinence of this topic to current and future policy and practice.

1.3 The Abuse of Looked After Young People

There is little consensus in the literature and research on the definition and prevalence of abuse of LAYP. Problems with definition and lack of conceptual clarity have subsequently resulted in methodological difficulty in agreeing the incidence, prevalence and other characteristics of abuse. Gil (1982) developed a commonly applied model for defining and conceptualising institutional abuse which differentiates abuse at individual, programme and system abuse levels (p. 9). The three level model has since been developed: individual abuse was originally conceptualised as physical abuse but now is generally recognised to also encompass emotional abuse, neglect and sexual abuse. There is an emerging recognition of the harmful impact of peer abuse and bullying which can also be categorised as individual abuse (Gil, 1982, p. 9; Kendrick, 1998, p. 170).

Programme abuse conceptualises abuse in a programme or facility which may be characterised by poor quality of care, extreme or unfair policies, and the use of harsh, inhumane or unusual techniques. The concept was extended to incorporate the word 'sanctioned' to reflect the organisational legitimisation often given to this type of abuse, which can also often result in persistent imbalances of power between professionals and LAYP, and managers and practitioners (Gil, 1982, p. 10; Stein, 2006a, p. 16). This concept is referred to as programme sanctioned abuse in the thesis. System abuse is conceptualised as the abusive impact of the broader LAYP system (Gil, 1982, p. 11). Stein (2006a) is critical of this narrow definition of system abuse, and suggests redefining it 'system outcome abuse' to reflect the failure of the broader system, including the law, policies, practice and procedures, to promote maximum outcomes for LAYP (p. 16). This includes the failure to change systems that enable programme or individual abuse to occur and/or become embedded.

Official inquiry reports of historic abuse and those associated with it continue to be an important source of information on the abuse of LAYP. Historic abuse refers to the era covered by the major inquiry reports of the 1980s and 1990s (reviewed below) which covered a period extending back to the 1960s and 1970s.

Major incidents of abuse have been documented by successive inquiry reports, including: 'Pindown' (Staffordshire County Council, 1991); Leicestershire Children's Homes (The Kirkwood Inquiry, Leicestershire County Council, 1993); and the abuse of children and young people in residential care in North Wales (Waterhouse, 2000). These reports found LAYP had been subject to individual abuse in the form of sexual abuse, physical abuse, emotional abuse and neglect; and subject to programme abuse in the

form of oppressive and entrenched regimes. Sir William Utting (1997) drew attention to the sexual, physical and emotional abuse of LAYP in residential care from the early 1970s to the 1990s (p. 1).

More recently, two significant inquiries highlight the continuing concerns and relevance of this topic. First, an investigation was undertaken into over 160 allegations of child abuse in Haut de la Garenne, a former children's home in Jersey dating back to the 1960s (Siddique, 2008). Second, the Commission to Inquire into Child Abuse in the Republic of Ireland (Department of Health and Children, 2009) found systematic child abuse in Catholic-run children's institutions in Ireland over a 60 year period, claiming that the lessons learnt have contemporary application for the protection of vulnerable children (p. 1). The above research and inquiry reports will be subject to further examination in Chapter Three.

It is generally recognised that significant developments in the safeguards for LAYP have taken place since Utting (1997), which will be examined further in Chapter Two. As a result, it could be assumed that the abuse of LAYP is historical and has limited or no relationship with the contemporary context. Some attempts have been made to research the contemporary prevalence of the abuse of LAYP. Hobbs, Hobbs and Wynne (1999) found that LAYP in foster care are seven to eight times, and in residential care six times, more likely to be abused compared with the total population of children (p. 248). This study, whilst dated, provided evidence that LAYP were vulnerable to abuse after the era of historic abuse outlined above. In a longitudinal study, Gallagher (2000) found that looked after children and young people constituted 3 per cent of sexual abuse referrals, and concluded that sexual abuse of LAYP did not represent a statistically major problem. (p. 800). The studies find quite different prevalence rates; both can be criticised methodologically and will be examined further in Chapter Three. Additionally, contemporary social policy guidance reflects the relationship between historic abuse and the continuing vulnerability of LAYP to abuse. It is felt that the incidences of historic abuse:

Raise awareness of the particular vulnerability of these children. We should not be complacent that such abuse could not occur again (HM Government, 2010a, p. 292)

One limitation of Gil's framework of three levels of abuse is that it was designed to apply to abuse in institutional settings. As noted above, the historic abuse of LAYP was

predominantly found in institutional contexts and therefore often referred to as institutional abuse. Part of the conceptual confusion is based on whether abuse of LAYP is restricted to institutional contexts. Utting (1997) developed the notion of abuse of LAYP beyond the institutional context by claiming that LAYP were vulnerable to abuse in a diverse range of institutional and non-institutional settings, including foster care. Ofsted (2008a) confirmed this broader definition by finding that one in ten children's homes and fostering services achieved inadequate standards in keeping LAYP safe (p. 5).

There is now a greater awareness that the abuse of LAYP is perpetrated by both adults and children and young people. Farmer and Pollock (1998, p. 3) and Farmer (2004, p. 375) focused on the management of sexually abused and abusing children in substitute care. Barter, Renold, Berridge and Cawson (2004, p. 10) investigated peer violence and bullying as a source of harm to LAYP, and contributed to the development in knowledge of the range of harm that may constitute abuse to LAYP. There remains little research on peer violence and bullying.

Rose (2006) draws attention to autobiographical material, which has become an important source of information grounded in the perspectives of current and former LAYP. This material has often been developed by organisations advocating on behalf of or for LAYP, for example: The Who Cares? Trust; Voice; the Care Leavers' Association; Barnardo's; the National Children's Bureau; and NCH Action for Children (p. 289). Two key points can be extrapolated from autobiographical material on the research area. First, some victims of historic abuse claim that the abuse spans a longer period of time, back into the 1960s; and second, that abuse of LAYP continues to occur (Care Leavers Association, 2008).

1.4 The Wellbeing of Looked After Young People

The term 'wellbeing' has become commonly used in political, professional and academic contexts, but its definition is contested and subject to a diversity of interpretations. The Cambridge Advanced Learner's Dictionary (2010) refers to:

The state of feeling healthy and happy

However, the wellbeing of children and young people is more often defined less by a single term phrase, and more often as multiple domains informed by indicators which

frequently reflect political and ideological perspectives (Bradshaw and Mayhew, 2005, p. 5). UNICEF (2007) claim:

There is no single dimension of well-being which stands as a reliable proxy for child well-being as a whole (p. 4)

Thus, different measures have been developed and applied for different purposes and within a range of political, economic and social contexts. In addition, some domains and indicators associated with these measures are concerned with current wellbeing and others for future wellbeing. The following critique of five frameworks for promoting and measuring wellbeing illustrates the range of approaches, underpinning ideologies and definitions in use:

- Every Child Matters [ECM] (Department for Education and Schools [DfES], 2003) is a national, generic child wellbeing measure which includes health, safety and economic measures consistent with the social investment model (see Chapter Two) and less focus on relationships. The generic domains are criticised for being insufficiently precise in reflecting the needs and priorities of specific, vulnerable groups including LAYP (Lawlor, 2008, p. 13).
- Youth Matters (Department for Children, Schools and Families [DCSF], 2006) also adopts the generic ECM domains.
- The UNICEF (2007, p. 2) wellbeing domains – which are also generic – have a greater focus on relationships than ECM, and incorporate concepts of safety, educational wellbeing and subjective wellbeing.
- The Case Study Local Authority had developed a generic wellbeing measure, using domains which were less relational than UNICEF's but which include a focus on aspirations and a strong community safety dimension.
- The domains in the Looking after Children System (Ward, 1995, p. 67) were designed to measure developmental outcomes for LAYP, and have a strong focus on relationships and identity. However, they omit any reference to safety.

None of these frameworks incorporate measures for or domains relating to participation and/or inclusion. No model or framework exists that is explicitly applicable to the analysis of both the safety and wellbeing of LAYP.

1.5 Using Wellbeing Indicators to Compare Outcomes and Quality of Care

One of the major benefits of having a clear framework of wellbeing indicators is the (potential) capacity to measure and track progress in improving the wellbeing of and outcomes for LAYP.

In a major comparative study of 21 nations applying their wellbeing domains, UNICEF (2007, p. 2) found that the UK scored the lowest overall ranking for child wellbeing. The study investigated the whole child population and not discreetly LAYP. However, the emergence of performance management and outcomes measurement provide an opportunity to undertake comparative analysis between the LAYP and non-LAYP populations. On the key outcome measures of preventative health, educational attainment, offending behaviour, progression to higher education, propensity to suffer mental health problems, young parenthood and the experience of homelessness, Gibbs, Sinclair and Stein (2005, p. 220) found some progress has been made for LAYP, but also that this progress is disappointingly slow.

The Department for Education and Skills (2007a) also identified improvements in outcomes achieved for LAYP, but noted a persistent gap between LAYP and their non-looked after peers (p. 6). The UK Children's Commissioners (2008, p. 17) were also critical of outcomes achieved for LAYP; whilst Lepper (2008, p. 11) notes that some educational outcomes for LAYP improved, but have not always kept up with improvements in the non-looked after population.

Beecham and Sinclair (2006, p. 35) criticise outcome measures for the potential dissonance between measures selected by practitioners and researchers and those selected by LAYP. Stein (2006b) is also critical of outcome measures for LAYP which frequently fail to account for pre-entry experiences. Iwaniec (2006) examined government and research sources and conclude that they indicate:

Serious shortcomings and inconsistencies in the quality of care provided for children in foster and residential care and extremely poor developmental outcomes for these children (p. 9)

Stein (2006a, p. 16) notes the research evidence from LAYP themselves, which indicates their frequently poor and abusive pre-entry experiences, which the care system fails to compensate for by the time they leave care.

Outcome measures, whilst limited and subject to critique, do provide evidence of persistently poorer life chances for current and former LAYP across a range of indices. Contemporary research evidence, together with inquiry reports, indicates that many LAYP have experienced poor quality of care, historic abuse, and the risk of abuse from other children and young people (Blewett and Foley, 2008):

If children live with insecurity and do not feel safe, this is not only a breach of their human rights but can have a significant impact on their wellbeing in both the short and long term (p. 208)

Thus, it is argued that there is evidence to support the topicality of the research area of the safety and wellbeing of LAYP.

1.6 Understanding Key Contexts of Looked After Young People

In order to fully understand the key factors influencing the safety and wellbeing of LAYP, it is first necessary to consider the important contextual backgrounds of LAYP.

1.6.1 Socio-economic backgrounds

The government collects some socio-economic data on LAYP, including ethnicity, but more detailed socio-economic analyses regarding LAYP are mainly derived from research studies. Bebbington and Miles (1989) in a seminal study found that variables such as social class, ethnicity, family and household composition were key predictors of the probability of being looked after. They found that children and young people with largely mixed ethnic heritage living with a single parent in overcrowded, privately rented accommodation on state benefits, had a one in 10 probability of being looked after. This contrasts with a probability of one in 7000 for children and young people living in white, smaller families with two parents in uncrowded, owner-occupied accommodation and not in receipt of state benefits (p. 354). This research is now dated but it highlights the impact of social and familial background on the propensity to become looked after. Thus, Thomas (2005) concludes:

Many LAYP who enter the care system bring with them a history of relative disadvantage (p. 21)

It is generally recognised that most LAYP come from family backgrounds that that can be conceptualised as having the key components of social exclusion. The

conceptualisation of LAYP as a socially excluded group is examined further in Chapter Two.

1.6.2 Reasons for becoming looked after

Since the 1980s the proportion of children and young people looked after for reasons of abuse and neglect has increased, and has been the predominant reason for entry over the last decade. In 2009, 61 per cent of children and young people were looked after due to abuse and neglect, followed by the next largest category of 11 per cent for reasons of family dysfunction (DCSF, 2010). The officially recorded reasons for becoming looked after do not fully reflect the broader socio-economic background variables examined above (Bebbington and Miles, 1989, p. 354).

Table 1.1 below summarises the reasons for becoming looked after recorded in the official data.

Table 1.1 Children looked after at 31 March by category of need

	2005	2006	2007	2008	2009
	%	%	%	%	%
Category of need	100	100	100	100	100
Abuse or neglect	63	62	62	62	61
Child's disability	4	4	4	4	4
Parents illness or disability	5	5	5	5	4
Family in acute stress	7	7	8	8	9
Family dysfunction	10	10	11	11	11
Socially unacceptable behaviour	2	2	2	2	2
Low income	0	0	0	0	0
Absent parenting	8	8	8	9	9

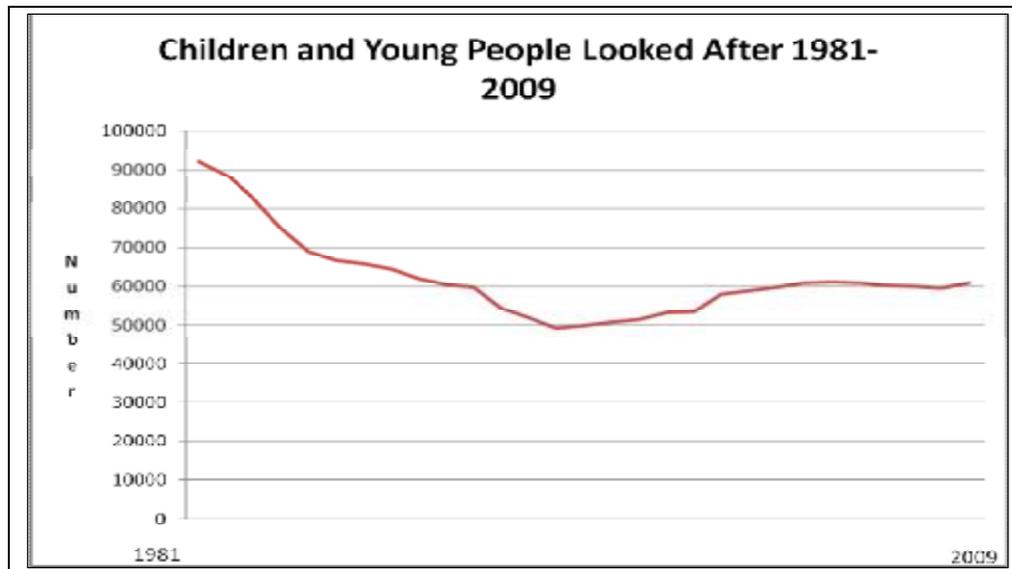
(DCSF, 2010)

There was an increase in the numbers of unaccompanied asylum-seeking children [UASC] who were looked after during the early part of the 21st century. This increase is partly explained by The Hillingdon Judgment (Hillingdon London Borough Council, 2003) which clarified the status of UASC provided with accommodation as 'looked after'. This change in legal status contributed significantly to the recorded increase in the UASC population up to 2005. The population has increased marginally since 2005 and was 3700 in 2009 (DCSF, 2010).

1.6.3 Changes in the size of the LAYP population

The overall LAYP population has declined significantly but not consistently since the 1980s, as Table 1.2 below illustrates.

Table 1.2 Numbers of LAYP, England 1981-2009



Numerical trends are significant as they often reflect the major influencing social, cultural and legal variables which can impact on the experiences of LAYP. The downward trend in the LAYP population between the early 1980s and mid-1990s can be explained by a combination of an increased focus on prevention; higher thresholds for admission to care; discontinuation of criminal care orders; more rigorous grounds for making a care order; and an increased priority on child protection (Rowlands and Stratham, 2009, p. 83). This downward trend was then followed by a 20 per cent increase during the period 1994-2000. The change in pattern conversely reflected fewer children and young people being looked after, but with longer episodes of being looked after (DCSF, 2008a).

Thus, from 2001 to 2009, the overall numbers of LAYP have remained relatively stable, clustering around the 60,000 figure. At end of March 2009, the LAYP population was 60,900 (DCSF, 2010). The death of three-year-old Peter Connolly in 2007 and the subsequent publication of the executive summary of a serious case review (Haringey Local Safeguarding Children Board, 2008) has had a potentially significant impact on the LAYP population. Peter's death was due to familial abuse and neglect, and generated significant professional and media debate on the relative merits of children in need continuing to be cared for by their families, juxtaposed against the merits of being looked after. The longer term impact on overall numbers of LAYP remains unclear, but the

Children and Family Court Advisory and Support Service [CAFCASS] reported a 33 per cent increase in public law cases in 2009-2010, and similar levels for the first quarter of 2010-2011 (CAFCASS, 2010). It is therefore probable that increased legal activity will result in an increase in the overall population of looked after young people in England.

The relationship between the size of the LAYP population and the overall severity and intensity of LAYP's needs has been subject to considerable examination. It is generally argued that there is a correlation between the decrease in the LAYP population and increased severity of need. Thomas, (2005) summarises the argument:

It is arguable that children tend to enter the care system now with more severe problems than in the past, and undeniable that many of those with most difficulties find themselves in residential care (p. 115)

Thus, those children and young people assessed as having the most severe needs fulfill the Children's Services Department [CSD] threshold criterion and become looked after. Conversely, those with lower severity of assessed need frequently do not meet the threshold criteria for entry. This relationship is generally considered in the literature in terms of its impact on placement commissioning. Thus, an increase in the LAYP population may place an increased demand on scarce placements, which diminishes placement choice. The relationship between the size of the population and the impact on the experiences of LAYP themselves has been subject to less examination. It is argued that this may have a potential impact on their experience of safety and wellbeing in two main ways: first, LAYP may experience limited or no choice in how their needs are met; and second, they may be placed in settings and situations that do not adequately meet their needs.

1.6.4 The changing pattern of placement provision

Placement patterns have changed significantly since the 1980s, as Tables 1.3 and 1.4 illustrate on the following page.

Table 1.3 LAYP England 1981-2009 cross-referenced by year of entry and placement classification (foster care and residential care)

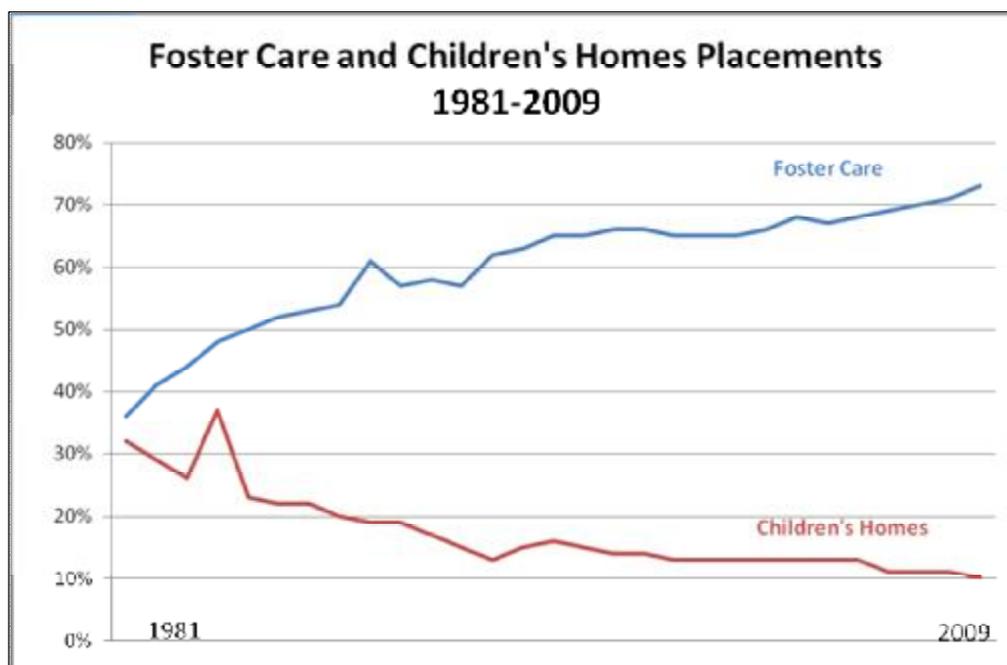


Table 1.4 LAYP England 2001-2009 cross-referenced by year of entry and placement classification (foster care and residential care)

Children and Young People Looked After 2001- 2009										
Year	31 March 2001	31 March 2002	31 March 2003	31 March 2004	31 March 2005	31 March 2006	31 March 2007	31 March 2008	31 March 2009	
All children (n)	58,900	59,700	60,800	61,100	60,900	60,300	60,000	59,500	60,900	
Foster placements (%)	65% 38,300	66% 39,200	68% 41,100	67% 41,200	68% 41,700	69% 42,000	70% 42,100	71% 42,300	73% 44,200	
Children's home	13% 7,900	13% 7,900	13% 7,700	13% 8,200	13% 8,100	11% 6,600	11% 6,500	11% 6,500	10% 6,200	

(DCSF, 2010)

The number of LAYP placed in foster care has remained stable in contrast to the significant reduction in residential care placements during this period. Thus, the relative proportions of foster care and residential care placements have changed from 36 per cent and 32 per cent respectively in 1981, to 73 per cent and 10 per cent respectively in 2009 (DCSF, 2010). Since 2000, the proportion of LAYP placed in kinship placements (also known as family and friends foster care) grew to 13 per cent of all placements in

2009 (DCSF, 2010). Therefore, LAYP are predominantly placed in foster care in preference to residential care.

This pattern indicates that foster care has been the preferred placement choice over residential care by CSD commissioners over a sustained period of time. This trend contrasts with some European countries where significantly higher numbers of LAYP are placed in residential care (see Table 1.5). In 2001, 59 per cent of LAYP in Germany and 54 per cent of LAYP in Denmark were placed in residential care (Petrie, Boddy, Cameron, Wigfall and Simon, 2006, p. 37).

Table 1.5 Numbers of LAYP in residential care in a sample of EU countries in 2000

Country	Population of LAYP (000)	LAYP in residential care	% of all LAYP
UK	59.8	10371	14
Flanders	5.9	3096	53
Denmark	5.3	52400	54
France	60.2	82051	38
Germany	82.2	82051	59
Netherlands	16.3	9000	47

(Petrie et al., 2006, p. 37)

1.6.5 International comparative analysis

Those researchers who promote comparative analyses also point out their limitations due to different national cultures and underpinning ideologies upon which national care systems are based (Cameron, 2007, p. 135). Stein and Munro (2008) also recognise the limitations of comparative analysis, but emphasise the benefits of a broader, cross-cultural perspective (p. 13). For example, they highlight the fact that the UK has a comparatively smaller per capita LAYP population than most European countries, reflecting the differing profiles of LAYP, cultural norms and attitudes towards the family (Thoburn, 2007, p. 18).

1.6.6 Contemporary developments impacting on the lives of LAYP

As noted above, there have been considerable social policy, regulatory and legislative developments in the last three decades aimed at improving outcomes for and experiences of LAYP. The New Labour administration of 1997-2010 achieved high rates of social policy and legislative change. Latterly, the Care Matters initiative (DfES, 2006e; DfES, 2007b) was developed in response to the persistent lack of improvement in

outcomes (p. 1). The Children and Young Persons Act 2008 is the most significant by-product of the Care Matters initiative, addressing a comprehensive range of factors contributing to persistently poor outcomes for LAYP, largely by adopting a predominantly procedural and managerialist model based on centrally derived performance measures and targets designed to monitor progress in improving outcomes. The impact of Care Matters is yet to be evaluated. The gap between the formulation of legislation and social policy (including performance measures and targets) for LAYP and its effective implementation has been a persistent theme over the last decade, and is further examined in Chapter Two.

Alderson and Morrow (2004) note that children and young people are one of the groups most excluded from research (p. 60). There continues to be a general shortfall in research that investigates the safety and wellbeing of LAYP, and a specific shortfall in research that investigates LAYP's perceptions of their own safety and wellbeing:

Research which seeks children's views about the process of foster care or residential care is an important part of understanding the needs and wishes of children, but until recently, research has been scarce (Golding, Courtney and Foules, 2006, p. 4)

There has been an increase in contemporary research undertaken on the wellbeing of LAYP (Chase, Simon and Jackson, 2006, p. 1), including a small number of studies which have investigated LAYP's views and experiences of peer violence and bullying (Farmer and Pollock, 1998; Barter et al., 2004; Farmer, 2004). The reasons for the low level of research undertaken with LAYP can be speculated:

- The subject is highly emotive and there are concerns that research could do harm to LAYP.
- The reluctance to include LAYP in research may be explained by the tendency to define them as a 'vulnerable group' with a uniform need for protection, and less emphasis upon the potential benefits to LAYP from participation in research.
- The focus on protection from research may therefore have contributed to difficulties in gaining access to LAYP on the research topic and in gaining ethical approval to undertake research.

In summary, the issues and concerns highlighted by young people can be argued to be of a lesser concern than system objectives set out in recent policy and legislative frameworks.

1.6.7 The concept of safeguarding in relation to LAYP

The contemporary safeguarding debate represents a conceptual evolution from the previously narrow focus on the historical notion of child protection, to a broader perspective incorporating child protection and the promotion of welfare. Government inter-professional guidance on children living away from home increasingly combines concerns for safety from abuse with concerns for achieving optimum outcomes for their health and development (HM Government, 2010, p. 192). The recent application of the term 'safeguarding' to LAYP reflects a move towards:

Protecting children from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables children to have optimum life chances and enter adulthood successfully (Ofsted, 2008c, p. 30)

The breadth of this approach is reflected in the diversity of issues covered within the contemporary safeguarding agenda for LAYP, including: planning arrangements; children's participation in decision making; the quality of frontline social work practice; offending behaviour; and health and wellbeing (Ofsted, 2008c, p. 35-38). However, there appears to be little consensus on the degree of integration between protection and promotion of welfare.

The Children Act (2004) consolidated the social policy trend towards safeguarding by formalising the establishment of Local Safeguarding Children Boards [LSCB] and local strategic partnerships for delivering services, with the objective of safeguarding and promoting the welfare of children. The Joint Chief Inspectors' Review of Arrangements to Safeguard Children (Ofsted, 2008a) concluded that few Local Safeguarding Children Boards were giving a high priority to targeted activities in order to safeguard specific vulnerable groups, including LAYP (p. 3). Thus, the development of the safeguarding agenda for LAYP through formal mechanisms appears to be inconsistent in both its achievement and its focus. The Working Together to Safeguard Children Guidance (HM Government, 2010, p. 284) reinforced the application of LSCB safeguarding guidance to LAYP living in all placement contexts, and highlighted the vulnerability of children who go

missing and unaccompanied asylum-seeking children. Further analysis of safeguarding practice with LAYP is examined in Chapter Three.

The relationship between protection and promotion of welfare highlighted above is a key consideration for the implications of the study, in particular the likelihood that the findings relating to LAYP's perceptions of safety and wellbeing will subsequently contribute to the safeguarding debate. Chapter Two further examines the emergence of the safeguarding agenda within a social policy context.

1.7 The Need for 'Situation Specific' Indicators

Jordan (2007) is critical of the social work profession for being uncritical of the term 'wellbeing' and accuses it of:

Adopting whatever the mainstream version of quality of life happened to be' (p. 1)

The terms 'safety' and 'wellbeing' are applied in a diverse range of political and professional contexts with a correspondingly diverse range of meanings and interpretations. Thus, at the point of designing the research, there was no agreed framework for analysing the safety and wellbeing of LAYP. It was felt important to avoid the uncritical adoption of an existing framework for measuring wellbeing which may not be fully compatible with the particular needs and characteristics of LAYP. It is argued that contemporary, 'situation specific' indicators are required to incorporate and fully understand the inter-relationship between safety from abuse and wellbeing.

This conceptual position can be seen to be analogous to the condition-specific discourse in health care research, which seeks to construct models of measurement which take account of the specific medical condition experienced by a patient. Eiser and Morse (2001) evaluated the quality of life [QoL] in children and adolescents, and undertook a critical examination of the appropriateness of adult quality of life measures for use with children. Eiser and Morse (2001) draw two conclusions which relate to condition specificity, namely that:

[First], adult measures may fail to identify specific aspects of QoL that are important to the children and [second] there is a need to develop measures that relate to practice based questions (p. iii)

Thus, it can be suggested that although existing models and frameworks may contribute knowledge to the proposed study, they could fail to identify some key, condition specific phenomena (understanding) and fail to relate to the specific practice context and wider circumstances of LAYP.

In response to the well documented needs of the group and the lack of any appropriate 'condition specific' model, the researcher constructed an initial framework (see Table 1.6) to provide an analytical framework for the study.

Table 1.6 Situation specific framework for promoting the safety and wellbeing of LAYP

1. Safety from abuse
2. Effective participation and inclusion
3. Placement stability and continuity
4. Educational wellbeing
5. Being healthy, and avoiding damaging behaviours and risk
6. Quality relationships

This framework incorporates key issues identified during a preliminary review of research and literature, and is based on six key domains derived from contemporary child protection, safeguarding and wellbeing models. It was developed to reflect the immediate experience of being looked after or the focus on the 'here and now' (Gibbs, Sinclair and Stein, 2005, p. 212). Initially categorised as preliminary, the framework was subject to review and critique during different stages of the thesis – for example, to take account of the review of literature and findings from the research study.

1.8 Introducing the Study

This section explains the inception and aims of the research, and introduces key aspects of the study design which are further examined in Chapter Four. The research was designed as a collaborative project between the CSLA and the researcher. The researcher aimed to undertake research in this field and was aware of the complexities of gaining access to a participant group. The CSLA wanted to determine views of LAYP about the overall quality of the care they were providing to LAYP. The aims and objectives of the study were agreed between the researcher and the CSLA and a steering group formed to manage the project.

The study focused on looking after young people's perceptions of their safety and wellbeing, and the implications for safeguarding policy and practice. It was recognised that the topic is wide and therefore specific lines of enquiry were identified for each of the six domains outlined in Table 1.6. These lines of enquiry are summarised below, in Table 1.7, Key areas of focus in the research:

Table 1.7 Key areas of focus in the research

1. Safety from abuse – *focusing on questions relating to individual abuse*
2. Effective participation and inclusion – *especially in decision making about care arrangements and other major life events*
3. Placement stability and continuity – *including frequency of change and type of placement*
4. Educational wellbeing – *especially in relation to planning and plans*
5. Being healthy, and avoiding damaging behaviours and risk – *focusing on planning, going missing and offending behaviours*
6. Quality relationships – *focusing on family, friends, carers and social workers*

1.8.1 Key aims and objectives

Three research aims were identified, which were to:

- i) Investigate the experiences and perceptions of LAYP of their safety and wellbeing;
- ii) Inform safeguarding policy and practice for LAYP;
- iii) Develop a contemporary safety and wellbeing model for LAYP.

Four research objectives were defined, including to:

- i) Conduct in-depth interviews with a sample of 25 current and/or former LAYP who have recently left a placement;
- ii) Investigate LAYP's perceptions of a range of key characteristics of their looked after experience;
- iii) Investigate LAYP's perceptions of their safety and wellbeing whilst in their previous placement;
- iv) Identify conceptual, policy and practice implications for safeguarding LAYP.

1.8.2 The research design

The research design is framed by a paradigm which perceives young people as highly informed experts on their daily life (Alderson and Morrow, 2004, p. 10).

As noted above, the research was designed to engage LAYP who had recently left a looked after placement, and to investigate their perceptions of their experience of being looked after in their last placement. The technique was described as 'exit' research, as it was designed to investigate participants' perceptions of their experience of being looked after in their previous as opposed to their current placement. The participant sample could therefore comprise participants who matched the following categories:

- i) After leaving their previous placement they continued to be looked after and were living in a subsequent placement;
- ii) After leaving their previous placement they discontinued being looked after and were therefore living in a non-looked after context.

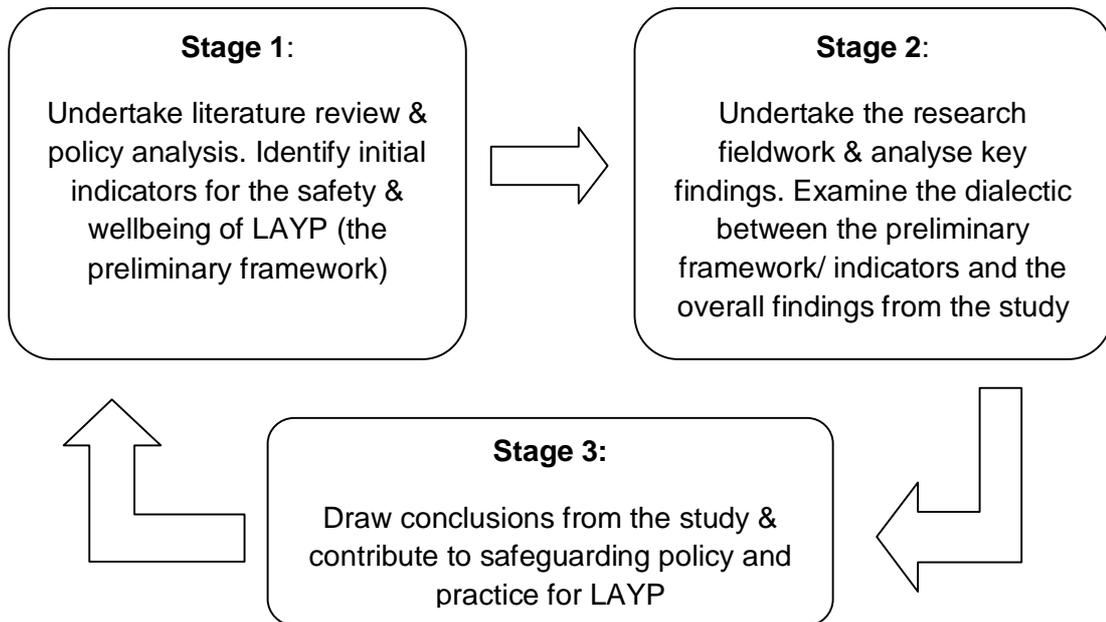
Thus, the study was clearly differentiated from studies which examine the phenomena of LAYP leaving care.

Applications for ethical approval to undertake the research were submitted to and subsequently approved by the CSLA and the University of Portsmouth. Ethical considerations for the research are examined in Chapters Four and Eight.

The study applied a case study design to the fieldwork which was conducted in one local authority using in-depth, structured and semi-structured interview methods. The study was based on an interpretivist epistemology, reflecting the research aims of investigating participants' perceptions of their safety and wellbeing during their looked after experience.

Figure 1.1, overleaf, summarises the key stages of the research.

Figure 1.1: Key stages of the research



Due to the relatively small-scale nature of the study, and consistent with the recognised limitations of the methodology, there was no intention to generalise the findings. However, Figure 1.1 illustrates the iterative nature of the study with each stage subsequently informing the next; and the implications for future policy, practice and research, further examined in Chapter Nine. The research design is further examined in Chapters Four and Eight.

1.9 Conclusion

The analysis of the research and policy context relating to the safety and wellbeing of LAYP has highlighted a number of key considerations pertinent to this study.

Key issues regarding the safety of LAYP have been well documented, with a lesser emphasis on the direct experiences and perceptions of LAYP about what makes them feel safe than on the organisational and policy responses to successive inquiries and research in this area. The emergence of a safeguarding agenda in policy and in the research literature is noted.

The concept of wellbeing has also gained in prominence in recent years, both in policy formulation and in research, and in associated developments designed to identify key variables and indicators in order to measure the wellbeing of LAYP and monitor progress in improving their outcomes and life chances.

In view of the identified topicality of the research, its relevance to the CSLA and the need for knowledge and theory generation in this field, a proposal for the study was developed in collaboration with the CSLA and a young person consultant.

The lack of a framework that promotes and facilitates research in this field has been noted. In particular the lack of comprehensive indicators for measuring degrees of and impacts on the safety and wellbeing of LAYP was identified.

A framework on which to base the study was developed, following a preliminary review of the literature and discussions with the CSLA and the young person consultant. This framework comprised six key domains of safety and wellbeing, and was used to both shape the design and research methods, and organise the research including the analysis of findings. Specific lines of enquiry for each of the six domains were also identified, ensuring that those aspects of central importance to LAYP formed the focus of the research. The contextual and contemporary relevance of the study is further examined in Chapter Two.

1.10 Navigating the Thesis Chapters

The thesis is organised into three main sections.

Section 1, Setting The Scene, incorporates Chapters One, Two and Three. Chapter One has contextualised the research by examining the background to and topicality of the field of research, including important definitions and conceptualisations of safety and wellbeing. It introduced the preliminary framework for understanding and promoting the safety and wellbeing of LAYP, and concluded with an explanation of the aims, objectives and design of the research. Chapter Two undertakes a predominantly contemporary analysis of social policy and legislation relating to the safety and wellbeing of LAYP. Chapter Three reviews the literature and previous research on the safety and wellbeing of LAYP.

Section 2, The Research Study, incorporates Chapters Four, Five and Six. Chapter Four expands on the research design and examines the methodological and epistemological underpinnings of the research. Chapters Five and Six report on the research findings, including: an analysis of the profile of participants and their experiences of being looked after; and an analysis of participants' perceptions of their safety and wellbeing whilst being looked after.

Section 3, Interpretation and Conclusions, incorporates Chapters Seven, Eight and Nine. Chapter Seven relates the research findings to previous research and literature, and interprets how the findings contribute to knowledge in this field. Chapter Eight examines the key issues and lessons emerging from undertaking the research, and the effectiveness of the study against the aims and objectives outlined in Chapter One. The thesis concludes with Chapter Nine, which examines conclusions drawn from the study, their implications for policy and practice, and the contribution the study makes to contemporary safeguarding developments. Gaps in the research are noted and future research requirements in the field are identified.

Section 1: Setting The Scene

Chapter 2: Analysis of Key Social Policy and Legislative Developments for Looked After Young People

2.0 Summary

This chapter begins by examining the relationship between the development of social policy and legislation and the safety and wellbeing of LAYP. The impact of welfare models developed in the 19th and 20th centuries on attitudes towards vulnerable children and young people and the role of public care is examined. Key social policy and legislative developments in the latter years of the 20th century are analysed and their impact on the safety and wellbeing of LAYP examined. The dissonance between the formulation of social policy for LAYP and its effective implementation is highlighted, and the implications examined. The chapter concludes with an analysis of the potential implications of the recent change of UK government on social policy in the research area.

It is argued that to effectively examine the topic of contemporary approaches to and priorities for the safety and wellbeing of LAYP, it is essential to understand the research topic within its historical and contemporary social policy and legislative context. Petrie et al. (2006) claim that welfare regimes particularly impact upon the experience of LAYP and their families (p. 6). The different political ideologies of successive governments are therefore a critical feature of this context. This chapter analyses the journey from 19th century child welfare policy through to the election of a coalition government in May 2010.

2.1 Historical Perspectives of Social Policy Relating to LAYP

This section examines the key developments in policy and legislation which it is argued have impacted upon policy and practice regarding LAYP. It spans numerous defining periods of political and policy focus, from the poor law and child welfare policy of the 19th century to the present day, examining the potential implications of the recent formation of a coalition government following the May 2010 general election. This review applies four value perspectives to the social policy analysis, including: laissez-faire, state paternalism and child protection, modern defence of the birth family and parents' rights, and child rights and child liberation (Fox-Harding, 1997, p. 9).

2.1.1 19th century and early 20th century child welfare policy

Child welfare policy for much of the late 19th century was consistent with the laissez-faire perspective, based upon the premise that the state plays a minimal role and that power is located within families unless there are exceptional reasons to supersede it (Fox-Harding, 1997, p. 9).

The concept of 'less eligibility' – the expectation that provision for young people in public care should not exceed the standards experienced by young people from compatible backgrounds – was evident and resonates with contemporary policy, practice and media debates on the topic (Jackson, 2006, p. 11). The prevailing punitive attitude towards parents was reflected in the then typical severance strategy, which resulted in relationships between children and young people in public care and their parents being discouraged and reunification therefore infrequent. The nature of relationships between LAYP and their families remains topical in current social policy discourse.

The growth of state welfare provision for children and families and the continuation of a severance strategy were consistent with the model of state paternalism and a child protection perspective dominant in the early 20th century (Fox-Harding, 1997, p. 9). Under this model:

State intervention to care and protect children is legitimised but state intervention is invariably authoritarian and family bonds undervalued
(Fox-Harding, 1997, p. 9)

The death of 12-year-old Dennis O'Neill from abuse and neglect – unusually for that era, in foster care – raised serious concerns for the safety and wellbeing of LAYP. The Monkton Report (1945) inquired into the death of Dennis O'Neill, and made procedural recommendations for strengthening the regulatory framework of foster care, criticising local authority staff for not meeting the emotional needs of LAYP and stressing the importance of:

Warm and caring relationships (Jordan, 2007, p. 41)

The critique of state care standards in 1945 clearly relates to the research topic on the contemporary safety and wellbeing of LAYP.

The Curtis Report (1946) followed, making recommendations relating to placement stability, education and shortage of foster care placements (Jackson, 2006, p. 13). The subsequent 1948 Children Act reinforced the prominent role of the family and foster care in preference to residential care placements, reflecting an ideology that would continue to dominate LAYP policy and practice in the UK. Hendrick (1996) notes the strong child welfare focus of the Act, consistent with a broader understanding of a 'welfare state' (p. 287). However, despite these principles, the placement pattern continued to be dominated by large residential institutions.

2.1.2 The development of child care policy and commissioning practice (1960s and 1970s)

An emerging critique of institutional care for LAYP in the 1960s, the promotion of foster care and the emerging awareness of institutional abuse contributed to a decline in residential placements during this period. A similar institutional critique was applied across many European countries. Dreano (1998) cited in Petrie et al. (2006) applied this critique to French institutions, and drew attention to these services:

Prioritizing their own maintenance and preservation, their rigidity and egocentricism (p. 11)

This latter point resonates with the contemporary institutional critique, which claims that some organisations and institutions have a predominant focus on perpetuating the organisation than on meeting service users' needs.

The death of Maria Colwell in 1973 had an important impact on the nature and direction of social policy relating to LAYP during this time. Maria Colwell was an eight-year-old girl who was killed by her stepfather after being returned from foster care to the care of her mother, against Maria's wishes. The Inquiry report identified practice and policy shortfalls and raised concern at:

The overlooking of a child's clearly expressed preferences (Fox-Harding, 1997, p. 65)

The response to the Inquiry included an emphasis on tightening procedures, consistent with a model of state paternalism and child protectionism (Fox-Harding, 1997, p. 9). The following 1975 Children Act developed the rights of LAYP to be heard, and changed the predominant role previously afforded to birth parents:

It reversed the focus on the birth family as always being the preferred option (Hayden, Goddard, Gorin, and Van Der Spek, 1999, p. 25)

Crimmens and Milligan (2005) note that the number of LAYP placed in residential care peaked in 1976. There was an increasing disillusionment with residential care at this time, mainly due to rising costs, which contributed to the contraction of residential provision and an increased focus on foster care placements (p. 20).

In the late 1970s, the National Children's Bureau set up a working party, under the chairmanship of Professor Roy Parker, to consider the care of LAYP. It examined the role of the state in and developed the concept of the corporate parent:

The term corporate parent developed to emphasise expectations that the state should show similar levels of interest and concern to those of most birth parents (Kirton, 2009, p. 110)

The term remains disputed and was subject to increased social policy and legislative attention in subsequent decades.

2.1.3 Social policy impacting on LAYP in the 1980s

This period was characterised by several developments concerning the rights of children and their parents (Fox-Harding, 1997) and was generally indicative of:

The modern defense of the birth family and parents' rights (p. 9)

The Cleveland Inquiry (1986) was undertaken in response to 121 children being taken into care in Cleveland over a six month period, on the grounds of suspicion that they had been subject to child sexual abuse. The report, consistent with (Fox-Harding, 1997, p. 9) a model which upholds the position and rights of the birth family, recommended:

Greater consideration be given to the rights of parents (Butler-Sloss, 1988)

The United Nations Convention on the Rights of the Child [UNCRC] (United Nations, 1989) upheld the principle of children and young people being cared for within their own families. However, the convention also stated the rights of LAYP to participate in

decision making (Article 12) and to protection from harm (Articles 19 and 20). The impact of the UN convention on the lives of LAYP is disputed. Shier (2001) notes a dissonance between its rhetoric and its implementation, suggesting that:

Article 12 (UNCRC, UN 1989) has been widely violated and disregarded in respect to the lives of LAYP (p. 108)

The 'new right' ideologies of the Thatcher administration based on free market economics, the promotion of family responsibility and a reduced state role were consistent with the laissez-faire model found in 19th century child welfare policy (Fox-Harding, 1997, p. 9). Hafford-Letchfield (2006) notes the emergence of managerialism during this period, as business and consumerist ideology were increasingly applied to public sector services (p. 12-13). It is suggested that this development would eventually have a significant impact on the model of care and social work provided to LAYP within contemporary social policy.

Fox-Harding (1997) notes the pressure on legislation and policy to proceed in two directions at once from the latter part of the 1980s into the 1990s. This involved both a move towards the better protection of children and young people, and a greater focus on better protection of the parent (p. 177). The Children Act 1989 developed the concept of the corporate parent by incorporating duties which were defined as the responsibility of the local authority as a corporate entity.

The Children Act 1989 placed a responsibility upon local authorities to develop complaints and representations procedures – a managerial and procedural response to successive inquiry reports highlighting concerns of LAYP for their safety and wellbeing. The complaints and representation element of the Children Act 1989 also reflects a change in ideological direction from state paternalism towards a rights-based model (Fox-Harding, 1997, p. 9).

2.1.4 Social policy impacting on LAYP in the 1990s

An important change was noted in the early 1990s from a predominant concern with intra-familial abuse to a growing concern with extra-familial abuse (Parton, 2006, p. 42). Two of the 31 inquiries held between 1973 and 1982 were concerned with the abuse of LAYP; seven of the 28 inquiries held between 1983 and 1992 concerned the abuse of LAYP; and five of the nine inquiries held since 1993 concerned the abuse of LAYP in residential care and children in nursery schools (Corby, Doig and Roberts, 1998, p. 383).

The incremental awareness of the concept of institutional abuse that developed through the 1980s and – as noted in Chapter One – the inquiries of the 1990s, together provided substantial evidence that LAYP had been subject to abuse in a range of residential care contexts. Notable examples include: ‘Pindown’ (Staffordshire County Council, 1991); Leicestershire Children’s Homes (The Kirkwood Inquiry, Leicestershire County Council, 1993); and the abuse of children and young people in residential care in North Wales (Waterhouse, 2000).

In response to these mounting concerns, both Utting (1991) and Warner (1992) made recommendations focusing on developing the children’s residential care workforce. Utting (1997) also made recommendations regarding the inspection, regulation and setting of standards. This dominant focus on management and organisational issues, with a lesser focus on practice and the direct care experience of LAYP, could be argued to reflect the emerging impact of managerialism during this era.

Corby, Doig and Roberts (2001) claim that recommendations from inquiries have barely impacted on social policy that relates to LAYP in residential care, and draw the conclusion that social policy has been unable to make a significant impact on the quality of residential care provision (p. 167-168). Further analysis of inquiry reports, the range of abuse experienced by LAYP and the role of both adults and children and young people as perpetrators of abuse, is undertaken in Chapter Three.

The impact of the Children Act 1989 upon social policy has been complex and contested. Some aspects of a laissez-faire model are evident (Fox-Harding, 1997, p. 10), for example in the principle of non-intervention in both public and private law. There are also examples of a paternalist and protectionist approach (Fox-Harding, 1997, p. 40), for example in widening the grounds for care and emergency protection proceedings to include the risk of significant harm as well as harm already inflicted (Section 31 and Section 44 of Children Act 1989), and in the principle that the child’s welfare is paramount. Berridge and Brodie (1998) in a study of LAYP in residential care found that that some staff felt the rights the Act had afforded LAYP were excessive and disempowered them and others were supportive and felt that LAYP should have a stronger voice (p. 134).

The social policy and legislative support for foster care in preference to residential care, noted in Section 2.2.4 above, continued into the latter decades of the 20th century. The family focus of foster care, ongoing criticism of institutional care and the high costs of

residential provision combined with the series of high profile institutional abuse inquiry reports, all contributed to the continued decline in the use and supply of residential care. Kahan (1994) noted that:

The use of residential care has waxed and waned and waxed again depending on the fluctuations of professional and political theories and fashions and changing pressures on national resources (p. 4)

The relationship between children and young people's residential care and foster care has remained a contested subject in academic, professional and social policy literature. Whilst the preference for foster care has been consistently reflected in social policy and practice, there appears to be some evidence that many LAYP would choose a residential placement in preference to foster care (Milligan and Stevens, 2006, p. 24). Thus, it can be argued that the consistent stance adopted by social policy on the relationship between the two placement contexts does not necessarily reflect the diverse preferences of the LAYP population.

Although the pre-war institutional critique was generally shared across Europe, the emerging ideological models of practice and provision since then differ between European states. For example, as noted in Chapter One, some European countries consider residential care as the placement of choice and have considerably higher rates of placement in residential care than in the UK (Petrie and Simon, 2006, p. 119).

2.2 Policy and Legislative Developments for LAYP under New Labour – the Latter 20th Century

The latter part of the 1990s saw the election of a Labour administration – New Labour – which during its term(s) in office oversaw the formulation and implementation of numerous policy and legislative reforms regarding LAYP.

2.2.1 The emergence of the Third Way and the investment model

The election of the Labour government in 1997 was a key turning point in social policy and legislative development, with arguably a greater, direct focus on LAYP:

[New Labour] linked social justice to support for and investment in, economic growth within a market economy (Alcock, 2003, p. 206)

The Third Way model adopted similar approaches to those used in Germany and the USA at this time (Alcock, 2003, p. 206). The model signified a period of intensive state interventionist social policy developments, consistent with aspects of state paternalism and child protection (Fox-Harding, 1997, p. 9). The investment model adopted by New Labour was concerned with investment based on future economic worth and productivity, and would have a powerful influence on the social policy response to LAYP. The investment model can be criticised for conceptualising LAYP in terms of future productivity, with less focus on the quality and impact of their current experiences. The impact of care on the future of LAYP is clearly important, but the concerns that LAYP repeatedly raise for their safety and wellbeing suggest there is also a need to consider their present situation.

2.2.2 Modernisation, measurement and managerialism

The Modernising Social Services White Paper (DH, 1998a) drew specific attention to LAYP in two ways. First, to the abuse of LAYP evidenced from institutional abuse inquiries; and second, to the poor outcomes for LAYP who leave the looked after system. McLaughlin (2007) defines the New Labour modernisation agenda as the:

Broad intention of the state to transform the nature of social services from a welfare agency run by professionals, allegedly too much in their own interests to a customer centred organization run by professional managers (p. 5)

The principle of quasi-markets, which had also been applied to the public sector by former Conservative administrations, was a central feature of the New Labour modernisation agenda. Garrett (2009) conceptualises the embrace of market ideology in children services as neo-liberalism. Garrett (2009) cites Harvey (2005) as claiming that:

Neo liberalism holds that the social good will be maximized by maximizing the reach and frequency of market transactions (p. 14)

Carey (2006) argues that this phenomenon has had a major impact on the development of social work services, identifying a market hegemony which has resulted in:

A sustained emphasis placed upon accountability, efficiency, performance and audit (p. 2)

A second, major feature of the focus on modernisation and reform has been the development of outcome measurement, now a dominant characteristic of contemporary social policy relating to LAYP. New Labour adopted the key features of the Looking after Children system, an early example of the application of outcomes and principles of measurement to LAYP (Ward, 1995, p. 67). Using this system, objectives were set individually for each young person based on their assessed need, with the aim of improving their personal outcomes. Knight and Caveney (1998) criticise the system for adopting white, middle class normative assumptions about parenting, and a checklist approach which reinforces the bureaucratic elements of being looked after (p. 29). The system also had a political dimension of monitoring the performance of local authorities in a period of heightened awareness of institutional abuse (Parton, 2006, p. 75).

Outcome measurement in general has an overtly political dimension, as highlighted by Kirton (2009):

The internal dynamics of managerialism... are enforced by an external regime emanating from central Government (p. 178)

Thus, targets are set and achievement is monitored by external audit or inspection. Outcome measurement is undertaken predominantly but not exclusively by central government, with official statistical collection coordinated by the Department for Education (formerly Department for Children, Schools and Families). This includes placement stability, academic performance, health, employment and training, and youth offending. The subsequent publication of league tables introduces a further competitive element to this model.

The anticipated benefits of performance and outcome measurement appear to include performance improvement, as a result of providing explicit standards, for care; transparency through external audit; and comparative analysis of outcome data achieved for LAYP with those achieved for non-LAYP.

Conversely, the major criticism of this approach is that the outcome measures used tend to reflect government priorities rather than the priorities and experiences of LAYP; official outcome measures predominantly focus on quantifiable phenomena to the exclusion of qualitative and experiential phenomena. Official outcome data therefore provide little insight into the nature and impact of (for example) significant relationships, the extent of participation and inclusion of LAYP, or the quality of their care. They also generally fail to

account for pre-entry experience. In addition there is very little evidence that the achievement of targets translates reliably into improved outcomes for LAYP (Lawlor, 2008, p. 17). Finally, current, published outcome measures provide little insight into LAYP's perceptions of their safety and wellbeing.

2.2.3 The state as corporate parent

As noted above, the social policy focus on LAYP has increased since the 1970s. The notion that public care has 'failed' has helped maintain the focus of responsibility on the state. It can be argued that the emphasis on permanence in the 1970s resulted in a lack of focus on the quality of care provided by the state (Kirton, 2009, p. 109), and the Children Act (1989) confirmed the corporate parent role. However, the key aims of the modernisation agenda for LAYP of safety from institutional abuse and improved preparation for leaving care placed considerable emphasis on the role of the corporate parent in improving longer term outcomes. New Labour adopted a prominent role for the corporate parent which was consistent with its strong state interventionist ideology. The role of the corporate parent during this era reflects the state paternalism and child protection perspective (Fox-Harding, 1997, p. 9). This social policy perspective was reflected in the definition of the corporate parent during this era:

The corporate parent is where the responsibility and accountability for the wellbeing and future prospects of children in care ultimately rest
(DfES, 2007b, p. 7)

The role can therefore be linked closely, in social policy, to a responsibility for ensuring the safety and wellbeing of LAYP. However, the state has also been subject to continued criticism for achieving poor levels of corporate parenting. The White Paper, Care Matters (DfES, 2007b) perpetuated the central role of the corporate parent and, again, attempted to increase its effectiveness.

Interestingly, in spite of this continued emphasis on the role of corporate parent by the state, there is no consensus on what the role entails for LAYP. Bullock et al. (2006) are critical of the assumption of homogeneity of LAYP implicit in the concept, and claim that the heterogeneity of the population demands a diversity of corporate parent roles according to the particular category of each young person in care (p. 1347). At the same time, there is a body of opinion which strongly criticises the role. Sergeant (2006) concludes from an analysis of the poor outcomes of the care system that:

2.2.4 The impact of managerialism on social work practice with LAYP

An integral element of performance management has been the development of standards and indicators by which performance can be measured. The Personal Social Services Performance Assessment Framework [PAF] was introduced by the New Labour administration in 1999 (DH, 1999b). Relevant performance indicators for LAYP included measurement of placement stability, numbers and timeliness of assessments and reviews, and foster and adoption activity.

National Minimum Standards [NMS] for fostering and residential care were first introduced under the Care Standards Act 2000 (and updated and circulated in draft for consultation in 2009). This was followed by the National Service Framework for Children, Young People and Maternity Services [Children's NSF] in 2004 (DH, 2004b). The NSF is a generic framework for all children but differentiates categories of children in 'special circumstances' including current and former LAYP. Both the NMS and the Children's NSF incorporate policy expectations that relate explicitly to the safety and wellbeing of LAYP. Importantly, they reflect two key elements of social policy for LAYP under New Labour: clear expectations of participation and inclusion; and a proscriptive and proceduralised social policy perspective. Views diverge on the content and role of these standards and their impact. Chase, Simon and Jackson (2006) identify an advantage of the NSF as:

It placed children and young people at the heart of services (p. 4)

The content of both frameworks is comprehensive, but a question remains over the extent to which they have improved the experience of and outcomes associated with being looked after. Poor leaving care outcomes have formed a major element of the modernisation agenda examined above, and highlight the close association between looked after and post-looked after experiences, and the conceptualisation of LAYP as socially excluded (further examined in Section 2.3.8).

The Children Leaving Care Act 2000 increased LAYP's rights to extended support after leaving care, and introduced new planning and assessment procedures. The Leaving Care Act 2000 was also important in challenging the assumption that LAYP should achieve independence at the age of 16 (Chase et al., 2006, p. 4). Further changes to leaving care would be incorporated into the Children and Young Persons Act 2008.

Arguably one of the most significant outcomes of this increased focus on markets, performance management and measurement is a predominantly managerialist model of social work. A key critique of managerialism in relation to services for LAYP is the notion that it has a de-personalising effect on both the care and services they receive. Gilligan (2000) conceptualises the process as one of de-humanisation, which reduces the exercise of professional judgement and places a dominant focus on following prescriptions and procedures (p. 270). Thus, one implication of this conceptualisation is the predominance of technocratic aspects of the role with less emphasis on the relational aspects of the role. For example, Le Grand (2007) claims that the organisational arrangements established in many local authorities, that require a change of social worker at certain stages of the looked after experience, create a discontinuity of relationships (p. 20).

The de-personalising and detaching influence of managerialism can be seen to impact on social work with LAYP in two ways. First, a focus on technocratic tasks appears to divert social workers and carers from time spent with LAYP. Second, it places less value on relationship building and more value on the adherence to technocratic expectations. Jordan (2007) claims that relationships are the predominant source of value that contributes to the wellbeing of LAYP, and is critical of the managerial and procedural ideology of contemporary UK social work paradigms for their diminished focus on relationships (p. 46). Consequently, Jordan draws a correlation between relationships with LAYP and the enhancement of their wellbeing, and considers that this is in juxtaposition to the dominant, managerialist paradigm. It can be argued that the effectiveness of contemporary social policy reforms is significantly reduced because of the impact of managerialism upon relationships between LAYP and their carers. Gilligan (2000) claims that the development of effective social work services to LAYP would require significant reform of this managerialist UK social work paradigm (p. 274).

2.2.5 The Quality Protects programme

The Quality Protects programme (DH, 1998b) ran from 1998 for five years, and was a major social policy initiative associated with the safety and wellbeing of LAYP. It reflected the New Labour government's conceptualisation of LAYP as a socially excluded group and identified three key priorities. The first was to ensure that LAYP were protected from harm; the second, to raise the quality of care so that it is as close as possible to the care provided by loving and responsible parents; and the third, to improve the life chances of LAYP during and following the period of being looked after. Hayden et

al. (1999) analyses the link between Quality Protects and the Looking after Children Project as a:

Transferral of the 'looking after children' approach from the individualistic, child focused level of monitoring onto the broader canvas of local authority and public policy (Hayden et al., 1999, p. 50)

The initiative was based on a centrally driven and proceduralised managerialist perspective, representative of a model of social policy development that became established during the New Labour era. The initiative also reflected New Labour's commitment to consultation with LAYP on key social policy developments:

Views of children and young people were prioritised in the Quality Protects Programme (Parton, 2006, p. 179)

2.2.6 Participation of LAYP in policy and strategic service development

Views diverge on the participation of LAYP in strategic service development. Beresford (2003) identifies consumerist and democratic approaches to participation in strategic service development. The consumerist approach is based on managerialist and consumerist principles and infers no redistribution of power, whereas the democratic approach allows for influence on decisions that improve the quality of people's lives and infers an overall redistribution of power (Beresford, 2003). Carr (2004) suggests that participation in strategic service development has resulted in a power shift with a move away from a paternalistic towards a partnership model (p. 14).

Cowden and Singh (2007) however, contest the notion of a power shift, arguing that within the consumerist approach institutions define service user involvement through a collaborative arrangement between themselves and groups of professional users. Within this context, the institutions retain control and involvement is based on 'commodification' of participation, a term which denotes the contribution of service users as a commodity to be purchased and used at the discretion of the organisation (p. 16). The benefits to LAYP are also contested.

2.2.7 The conceptualisation of LAYP as a socially excluded group

The concept of social exclusion was applied to LAYP by New Labour and remains disputed. Levitas (2005) identifies three 'discourses' around social exclusion: redistributive; moral underclass; and social integrationist (p. 7). The integrationist

discourse focuses on the reintegration of excluded people into mainstream society in general and the labour market in particular, and is most consistent with the New Labour investment model. The definition of social exclusion adopted by the New Labour Social Exclusion Unit in 1997 was criticised for offering too narrow a conceptualisation of social exclusion, focusing on the causes of exclusion rather than the experiences of and outcomes experienced by socially excluded people.

The categorisation of LAYP as socially excluded has arguably contributed to these young people achieving a more prominent position on the political agenda, and an increase in policy activity associated with this group. Hill, Davies, Prout and Tisdall (2004) identify two elements of social exclusion which are particularly pertinent to the experiences of LAYP. The first relates to the impact of poverty, and the second relates to social stigmatisation (p. 79). As noted in Chapter One, the backgrounds of LAYP are dominated by poor socio-economic circumstances including unemployment, low income, poor housing, poor health and family breakdown (Kendrick, 2005, p. 8). This definition of social exclusion clearly applies to pre-entry experiences. However, it can also be argued that due to ongoing relationships and identification with their families, it can also be applied to some LAYP post-entry. Bullock (2000) cautions against a generalised application of the conceptualisation of social exclusion to all LAYP, due to the diversity of individual circumstances, the length of looked after episodes and varying links with family (p. 36).

Social stigmatisation refers to the process by which particular social groups are marginalised or omitted (Hill et al., 2004). McNeish and Newman (2002) found that all LAYP had experienced stigmatisation in their daily lives, evidenced by insensitive attitudes and negative stereotyping (p. 79). It could be argued that certain aspects of the looked after system have a socially excluding impact, for example for LAYP who are in receipt of poor quality care. However, there is a need to be cautious about taking too narrow a view with regard to poverty and social stigmatisation which on its own fails to fully consider broader elements of the looked after experience which may impact on social exclusion, for instance, placing LAYP out of their local authority area can also isolate and exclude them from their social and family networks (Bullock, 2000, p. 36). It can also be argued that the recent growth in single person children's homes can isolate the looked after young person from other children and young people.

A comparative analysis of social work models suggests that the differing ideological perspectives of welfare regimes can impact on the socially excluding potential of the

looked after experience. In a European comparative research study, Petrie et al. (2006) found that residential care in England was more socially excluding than in Denmark and Germany, relating this finding to different social work paradigms within these countries (p. 132). Hamalainen (2003) explains this difference by claiming that the underlying principles of social pedagogy prevalent in northern European countries are socially inclusive (p. 76). Hatton (2008) notes that social work perspectives in the UK vary significantly in their response to social exclusion, and identifies the redistributive model evident in Denmark as most likely to result in the engagement, empowerment and inclusion of socially excluded groups such as LAYP (p. 32).

As the above analyses illustrate, LAYP's experiences of social exclusion can impact significantly on their perceptions of their own wellbeing. Social exclusion as a conceptualisation can be applied to the often deprived and excluding pre-entry experiences, young people's continued links with an often socially excluded home environment, and the socially isolating nature of some looked after experiences.

2.2.8 Developments in planning and placements

The Education Protects Programme (DH, 2000) was initiated with the aim of supporting local authorities to raise consistently poor educational outcomes for LAYP. It developed the expectation that each LAYP should have a Personal Educational Plan [PEP] and linked the principle of effective educational planning with improved personal outcomes. PEPs became an integral element of the care planning process, and this focus on planning systems was reflected in subsequent social policy developments for LAYP.

The term 'choice' has become a politically significant feature of the New Labour modernising agenda, central to health, education and social care policy and practice over the past decade. Its application to social care in general and LAYP in particular is characterised by a good deal of conceptual confusion.

The Choice Protects initiative (DH, 2002b) aimed to increase placement choice for LAYP, and drew links between placement choice, poor outcomes and safety from abuse. Utting (1997) had claimed that limited placement choice could increase the risk of abuse. The initiative focused on poor placement stability, a key concern of the Quality Protects initiative (DH, 1998c). The initiative can be criticised for its predominant focus on local and regional placement commissioning strategies, and its limited focus on choice exercised by LAYP based on assumptions that developing a mixed economy of welfare

would contribute to increased placement choice. The impact of choice and educational experiences on wellbeing is examined further in Chapter Three.

During the period up to the 1990s, a diversity of organisations in the UK have provided children and young people's residential and fostering services – including central and local government, voluntary, faith-based and private enterprises. In the last decade, consistent with New Labour's commitment to neo-liberalism, UK foster care and residential care has moved from being primarily provided by the public sector to primarily provided by the private sector. One major outcome of this trend is that the majority of LAYP are now living in placements commissioned by their corporate parent, but not owned or managed by it.

There appears to be no data which links ownership to outcomes for and experiences of LAYP. The trend towards diversification of ownership and the major expansion of the private sector contrasts the UK with a number of other EU countries who have moved from predominant state provision to delivery by not-for-profit organisations (Pringle, 1998, p. 40).

Foster care in the mid-1990s was frequently deemed to be in a state of crisis, evidenced by poor recruitment and retention rates, and high placement breakdown rates – concerns relating to policy initiatives such as Quality Protects (DH, 1998c) and Choice Protects (DH, 2002b). The key concerns have been levels of remuneration; support; professionalisation versus voluntarism of the foster carer role; and service specialisation (Kirton, Beecham and Ogilvie, 2007, p. 1207). Thus, contemporary foster care provision is characterised by a diversity of models and perspectives within an ongoing context of shortage of supply relative to demand. In particular, there is a dominant, consistent and ongoing theme of professionalisation of the foster care role, and an increasing specialisation of the task.

In 2004-2005 there was a significant growth in the number of children's homes registered for one person (Commission for Social Care Inspection [CSCI], 2007, p. 1). Children's homes accommodating less than four young people were not required to be registered prior to 2001. By 2005, there were 645 one- or two-place children's homes in England, representing a third of all registered children's homes (CSCI, 2007, p. 76). Concern has been expressed for the socially excluding impact of one-person registered homes and out of authority placements (CSCI, 2005, p. 76).

The DH (1998d) found a reduction in the average size of children's homes to seven young people, noting that half of all children's homes placements were smaller than the average larger foster home, causing a blurring of boundaries between foster care and residential care (p. 7).

In summary, it can be seen that significant changes have taken place in the ownership and nature of provision of key services for LAYP. No research could be identified which investigated the impact of increasing privatisation of services for LAYP on their safety and wellbeing.

2.2.9 The quality of the children's residential care workforce

Concerns for the quality of staff employed in children and young people's residential care were expressed in each of the major inquiry reports into the abuse of LAYP in the 1990s. Concerns about recruitment and training were the predominant staffing issues identified in 'Pindown' (Staffordshire County Council, 1991), Utting (1991), Warner (1992), Leicestershire Children's Homes (Leicestershire County Council, 1993), Utting (1997) and Waterhouse (2000).

The New Labour administration introduced vetting and criminal records checks for all employed and voluntary staff involved with LAYP. Both Utting (1991) and Warner (1992) drew a relationship between the poor quality of care they found some LAYP had received and the low qualification rates of staff. Petrie et al. (2006) found the proportion of trained staff working in residential care settings was significantly greater in European countries than in the UK (p. 39). Cameron and Boddy (2008) conclude that:

Aspects of staff education and practice related directly to young people's well being, such that a pedagogic approach was associated with lower levels of disadvantage (p. 222)

Subsequent developments in staff recruitment strategies are noted, but the level of training and qualifications have remained at a low level. Comparative research suggests a link between levels of training, qualification and outcomes. It can be argued that social policy related to the recruitment and training of residential care staff has a clear relationship to the safety and wellbeing of the LAYP that they support.

A key principle of the modernisation agenda was that the registration of the social care workforce would increase standards of care for vulnerable groups, including LAYP. As a

result, the title 'social worker' has been protected by law in England since 1 April 2005; and qualified social workers and social work students expected to register (General Social Care Council [GSCC], 2009). This registration function is due to end in 2012, with the abolition of the GSCC and transfer of regulation duties to the Health Professions Council.

Importantly, the direct impact of registration on residential child care provision appears minimal as most residential care staff lack a social work qualification, the basis for registration (Crimmens and Milligan, 2005, p. 25). Thus, strategies introduced under the modernisation agenda to improve children's workforce standards may not have significantly impacted on the standards of care for LAYP placed in residential care.

2.2.10 Implications of globalisation

The increased numbers of unaccompanied asylum seeking children [UASC] during the early years of the 21st century (see Chapter One) highlights the global context of LAYP and affirms its heterogeneity.

Up until this time, it had generally become the norm for older UASC to be provided with services by the local authority without being legally looked after. A criticism of this practice was that it left UASC vulnerable, in that they were denied the safeguards and rights inferred by being a LAYP (Wade, Mitchell and Baylis, 2005, p. 7). The court judgment, *Berhe and others v Hillingdon London Borough* (2003) – referred to as the 'Hillingdon Judgment' (2003) – confirmed that UASC would in the future be ascribed 'looked after' legal status (Kohli and Mitchell, 2007, p. 18). Thus, the legal and social policy context of UASC has developed incrementally over this decade. UASC are frequently given a period of temporary leave to remain in the UK which can subsequently impact on their perceptions of safety, stability and permanency planning (Kohli and Mitchell, 2007, p. 27).

2.2.11 Every Child Matters 2003 and the Children Act 2004: the emergence of a safeguarding agenda

The broader conceptualisation of child protection and the increased application of the term 'safeguarding' examined in Chapter One, derive from the Children Act 1989 and a report produced by the Home Office: 'Safe from Harm: A code of practice for safeguarding the welfare of children in voluntary organisations in England and Wales' (Smith and Home Office, 1993). Although the term safeguarding had been introduced earlier, Frost and Parton (2009) claim that the report *People Like Us* (Utting, 1997) –

although focusing on the safeguarding of LAYP from institutional abuse – encapsulated the concept of safeguarding for all children. The report:

Underlined the importance of the concept for public policy and practice by ensuring every child's physical and emotional health, education and sound social development (p. 64)

The inter-agency guidance Working Together to Safeguard Children (HM Government, 2006; HM Government, 2010a) also located safeguarding within a wider conceptual framework than child protection, incorporating broader responsibilities to promote welfare consistent with New Labour social policy over the decade (Parton, 2006, p. 105).

The death of Victoria Climbié in 2000, and subsequent Inquiry by Lord Laming (Laming, 2003) into her death, had a significant impact upon social policy development in the 21st century. Victoria, who had not been looked after at the point of her death, had been abused and murdered by her great-aunt and her partner.

Every Child Matters followed the Laming Inquiry (Laming, 2003) into the death of Victoria Climbié, partly as a response to Laming but also developing an agenda of 'early intervention and effective protection' that pre-dated Climbié. The term 'Every Child Matters' became a feature of subsequent government social policy initiatives and, consistent with its preventative and protective perspectives, identified five key outcomes which should be applied to all children (see Figure 2.1, ECM Outcomes).

Figure 2.1: ECM outcomes

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Achieve economic well-being

Every Child Matters, DH, 2003

Although the relevance of ECM indicators to LAYP is clear, the potential impact of this universal initiative on LAYP remains unclear. In an attempt to construct a universal approach, it can be argued that ECM is limited in the account it takes of social and structural inequalities. The social and economic profile of the contemporary LAYP population is examined in Chapter One, which argues for LAYP to be considered as a diverse but discrete group with specific needs.

This policy response represents the continuation of the procedural, managerialist and bureaucratic social policy model, and attracted criticism which questioned whether the nature of the changes set out would subsequently improve outcomes for all children and young people (Appleton and Stanley, 2008, p. 1).

The central aim of the Children Act 2004, which followed ECM, was to encourage the integrated planning, commissioning and delivery of services and improve multi-disciplinary working. It introduced Local Safeguarding Children Boards which would have statutory powers, unlike their Area Child Protection Committee [ACPC] predecessor. Some ACPCs had been subject to criticism for their ineffectiveness in ensuring that child protection procedures were applied to LAYP.

Corporate Parenting Boards were also established with the objective of coordinating services for and consulting with LAYP. Ofsted (2008b) found that corporate parenting boards had raised the profile of LAYP but noted considerable variation in their impact between local authorities (p. 36). The establishment of a Children's Commissioner for England was incorporated into the Children Act 2004, although the role was limited by its inability to pursue individual complaints from LAYP (Stein, 2006a, p. 18).

The Act aimed to develop inter-professional collaboration by structurally integrating social work services for children and families with education services, to form Children's Services Departments and Children's Trusts. The Act reflects an assumption that changing structures and integrating services will enhance coordination and subsequently improve outcomes (Hoyle, 2008).

The Audit Commission (2008) found that 31 per cent of Directors of Children's Services were confused about the purpose of Children's Trusts and that there was little evidence that Trusts had improved outcomes for children. Thus, it remains unclear how, or if, the new organisational configuration for children's services will impact on the safety and wellbeing of LAYP.

2.2.12 Changes to the regulation and inspection of services for LAYP

As noted above, external audit and inspection are key features of a managerialist approach, which requires independent scrutiny to ensure local compliance of central government targets. Arrangements for the inspection and regulation of services for LAYP have been subject to significant change during the last decade. The responsibility for inspection and regulation functions transferred from local authorities to the National Care Standards Commission, which then became the Commission for Social Care Inspection in April 2004. CSCI incorporated the regulatory duties previously undertaken by the Social Services Inspectorate [SSI], the SSI/Audit Commission Joint Review Team, and the National Care Standards Commission [NCSC]. In April 2007, the responsibility for regulating children's social care services, incorporating services for LAYP, transferred from CSCI to Ofsted, latterly renamed the Office for Standards in Education, Children's Services and Skills.

Both ECM and the Children Act 2004 were based on the assumption that greater integration of inspection mechanisms are essential in driving an improvement in the planning, accountability and performance of local services (Barker, 2009, p. 17). Since 2005, Joint Area Reviews [JARs] have performed this integrated function, inspecting children's services in specific local areas every three years. JARs were replaced by Common Area Assessments [CAA] – a universal assessment process for councils – from 2009 (abolished by the recently elected coalition government post-April 2010).

It can be argued that an important element of effective inspection and audit is to ensure that LAYP are safe and their wellbeing promoted. The government inspectorates,

however, have been criticised for failing to recognise the scale and extent of historic institutional abuse (Stein, 2006a):

Inspectors unintentionally colluded with an adult institutional perspective, with insufficient focus on engaging and listening to children and young people (p. 14)

In a review of child protection services in England, Laming (2009) found a lack of child protection knowledge amongst Ofsted inspectors had eroded their ability to challenge the status quo (p. 62). It can therefore be questioned whether the inspectorial and regulatory framework is effectively measuring and monitoring key issues related to the safety and wellbeing of LAYP. Morgan (2005) defines an imperative of effective inspectorial and regulatory regimes as asking LAYP what they experience and perceive (p. 99).

2.2.13 Care Matters and the Children and Young Persons Act 2008

The Care Matters [CM] social policy initiative was a further attempt to improve outcomes for LAYP, building on the Quality Protects initiative (Department of Health [DH], 1998c). Although some outcomes for LAYP had improved under this programme, the government and groups representing the interests of LAYP remained dissatisfied with progress. The process of developing the Care Matters policy, consistent with previous New Labour initiatives, consulted widely with LAYP, reflecting their commitment to the participation of LAYP in social policy and legislative development.

Consultation on the CM Green Paper started in 2006 and associated legislation was enacted in November 2008. It constitutes a significant social policy development for current and former LAYP, and is part of the continuum of social policy development which extends the preventative focus of ECM and perpetuates performance management consistent with the investment model of New Labour and their commitment to neo-liberalism. The initiative also combines concerns with the experience of being looked after with a concern for post-looked after outcomes. This perspective can be contrasted with previous outcome measures which predominantly measured post-looked after outcomes, with less emphasis on the quality of the looked after experience.

Kirton (2009) identifies corporate parenting as the primary focus of the Care Matters initiative (p. 123). It confirms responsibility for corporate parenting with the Director of

Children's Services and the Lead Member for Children's Services, and sets up a range of communication and consultation mechanisms between LAYP and the CSD.

Personalisation and externalisation also emerge as two key conceptual themes (Kirton, 2009, p. 123). Personal budgets, a central feature of the personalisation agenda, aim to personalise the LAYP experience by increasing the choice and control service users have over their care budget and care experience (e.g. to purchase private education). Personalisation is also intended to address the criticisms of bureaucracy and managerialism characteristic of previous reforms of the looked after system. Externalisation refers to the strengthening of the independent reviewer role and the proposal to pilot GP-type social work practices [SWP] for the provision of social work services to LAYP. Garrett (2009) suggests the SWP pilot and the potential to access private education for LAYP reflects a renewed commitment to neoliberal market ideology (p. 136).

The Act incorporates key areas of policy that relate to broad issues of the safety and wellbeing of LAYP relevant to the study, including: increasing stability and consistency of care; improving educational attainment and experience; increasing transparency and effectiveness of care planning; and ensuring LAYP are not forced to leave care before they wish (DCSF, 2008d, p. 2-3).

2.3 Dissonance between Policy Development and Implementation

This chapter has so far examined the extensive social policy and legislative activity that has taken place over the last decade relating to the safety and wellbeing of LAYP. Although legislation, policy and procedural safeguards for children and young people living away from home have improved over the decade, the effective implementation of such reforms has been more problematic (Stuart and Baines, 2004, p. 1).

Minogue (1983) cited by Becker and Bryman (2004, p. 34) defines policy implementation as:

Translating decisions into events... of getting things done (Minogue, 1983, p. 17)

As noted above and at the time of writing, the Children and Young Persons Act 2008 has recently been implemented and effectiveness of its implementation has yet to be evaluated.

LAYP involved in the consultation stages of the Care Matters legislation and policy development were broadly supportive of the government agenda for change, but cynical that the proposals would result in effective implementation and positive outcomes for LAYP (Department for Education and Skills, 2007a, p. 17). It can be argued that this attitude reflects a dissonance between contemporary social policy developments for LAYP and low levels of effective implementation and resultant outcomes.

Poor or patchy policy implementation is not a new phenomenon. Lipsky (1980) was critical of the social policy implementation process, and conceptualised social workers and other social care professionals as 'street level bureaucrats':

The decisions of street level bureaucrats, the routines they establish and the devices they invent to cope with uncertainties and work pressures effectively become the public policies they carry out (p. xii)

Thus, the social worker plays a critical role in interpreting social policy and, crucially, constructing social policy at practice implementation level. Lipsky examines the organisational context within which social workers practice, and concludes that it limits their aspirations and ideology (p. xii). The critique is limited in its focus on social workers, as it could be argued that a broader range of people associated with LAYP should be considered.

The gap between social policy and its implementation may also be explained by examining the content and ideological underpinnings of social policy formulation. It can be argued that New Labour's focus on neo-liberalism and managerialism contributes to its policies having a limited impact, by virtue of the increased levels of bureaucracy and performance management associated with this model. Additionally, an examination of the organisational context of social work and the behaviour of front line professionals and carers – typified by a lack of emphasis on key relationships – reveals that these features may also contribute to the dissonance between policy for LAYP and its implementation.

2.4 Impact of a Coalition Government from May 2010

A coalition of Conservatives and Liberal Democrats formed a government after the general election in May 2010. It is not yet clear what impact this coalition will have on social policy for LAYP, but some key principles can be examined and speculated upon. Thus far, the Coalition has prioritised economic considerations over social considerations, such that services to LAYP will receive no extra funding or reduced funding. They are committed to the notion of a small state, consistent with some elements of the laissez-faire perspective and in contrast with the state paternalism and child protection perspective of New Labour (Fox-Harding, 1997, p. 9). One possible implication is that less emphasis may be placed on the corporate parent role. Elements of personalisation reflected in the Care Matters reforms may be supported, but these may be implemented through an agenda of individualisation rather than the power shift from professionals to service users dominant in the personalisation reforms of New Labour.

It can be argued that the Coalition appears to be committed to the principles of externalisation and neo-liberal market principles promoted by New Labour, which may result in further privatisation of services for LAYP. It is not yet clear what the Coalition perspective on performance management may be, but it is likely to involve an essentially deregulated framework in contrast to the external inspection and audit frameworks adopted under New Labour. This may impact on the role of external audit and inspection of services for LAYP.

Coordinating mechanisms such as Children's Trusts and Local Children Safeguarding Boards may be abolished in an attempt to reduce layers of central and local government. The consequent impact on safety and wellbeing for LAYP will be shaped by what, if anything, replaces them. The impact for LAYP of Coalition social policy on managerialism will be critically important, and may determine if social work services to LAYP become predominantly relational or procedurally based.

2.5 Conclusion

This chapter has examined key developments in policy and legislation which have impacted upon policy and practice regarding the safety and wellbeing of LAYP. This analysis spanned numerous defining periods of diverse political and policy ideologies, from the poor law and child welfare policy of the 19th century to the present, potential implications of the recently formed coalition government.

Significant policy and practice developments have been noted as the result of key concerns about the safety of LAYP from abuse, following the Inquiry reports of the 1980s and 1990s.

These concerns have been shown to have impacted in a number of ways, most notably in the pattern of placement provision moving away from institutionally-based residential care placements to an increased reliance on foster care. A continuing focus on procedures and managerialist policies has also been noted, particularly during the late 1990s and early part of the 21st century with the policy, legislative and regulation reforms of the New Labour administration spanning the years 1997 to 2010. The key features of this managerialism include a focus on the poor outcomes experienced by LAYP and the development of indicators, standards and performance frameworks in order to measure and monitor progress in improving these outcomes. Less attention has been paid to the cultural and attitudinal changes required to change practice and experience of LAYP in all aspects of their life.

An ongoing dissonance between policy development and its effective implementation was noted, resulting in successive policy initiatives and regulatory changes having little impact on the outcomes and experiences of LAYP. Despite this ongoing rhetoric-reality gap, the profile of LAYP has been raised and the focus on safety from abuse of all children and young people (not just those who are looked after) maintained through more recent inquiries and reviews into the deaths of Victoria Climbié and Peter Connolly.

Chapter Three develops this analysis of social policy and legislative developments into a broader review of the literature on safety and wellbeing.

Section 1: Setting the Scene

Chapter 3: Review of Literature on Safety and Wellbeing

3.0 Summary

This chapter reviews the literature on the safety and wellbeing of LAYP, organised on the basis of the six domains of the preliminary framework on LAYP's safety and wellbeing (Chapter One).

The literature review examines knowledge on the research topic based on the five sources of knowledge in social work (SCIE, 2003): policy, research, user knowledge, organisational knowledge and practice knowledge (p. 30).

The review of literature is divided into two main sections: Section 3.1 covers the literature on safety from abuse; and Section 3.2 covers the literature on wellbeing. Section 3.3 summarises the key findings from the review; and reflections on undertaking the review (for example to inform the research design) are presented in Section 3.4.

3.1 Safety from Abuse

The review of literature on safety from abuse begins with a consideration of key conceptual issues relating to the topic, from the incidence and implications of historic institutional abuse in the 1990s; the development in understanding of abuse in institutional and non-institutional contexts; the prevalence and impact of peer violence; LAYP's perceptions of their safety from abuse; through to an analysis of the relationship between being listened to and complaints procedures.

As noted in Chapter One, there has been a lack of conceptual clarity around the terms applied to the abuse of LAYP. The term 'institutional abuse' was applied as historic abuse had been predominantly found in residential care contexts. As it became evident that the abuse of LAYP was not exclusive to residential care, the term institutional abuse became conceptually confusing and failed to account for both institutional and non-institutional contexts.

A number of studies (Gil, 1982; Kendrick, 1998; Stein, 2006a) have since developed a typology of different domains or aspects of institutional abuse, with the main dimensions being individual abuse, programme sanctioned abuse and system outcome abuse.

These dimensions extend the parameters of abuse of LAYP from a predominantly individual phenomenon to one which has wider organisational and systemic implications. These dimensions will be applied to the review to assist analytical clarity and rigour.

3.1.1 The abuse of LAYP in a historical context

As noted in Chapter One, research on the topic of institutional abuse had been mostly unavailable up until the late 1990s. In the absence of available research, official Inquiry reports have been the predominant source of evidence of the abuse of LAYP. Inquiry reports will be critically appraised at the end of this section.

As noted in Chapter Two, numerous official inquiries were conducted into the safety and wellbeing of LAYP in the latter part of the 20th century. In order to achieve a focused analysis, a sample of reports from inquiries in the 1990s are examined below.

The 'Pindown' Inquiry (Staffordshire County Council, 1991), Leicestershire Children's Homes (Leicestershire County Council, 1993) and the Inquiry into abuse of children and young people in residential care in North Wales (Waterhouse, 2000) were key inquiries which impacted on the contemporary understanding of abuse of LAYP. Four common themes have been identified from an analysis of these reports:

- i) The reports identify individual abuse perpetrated by adults on LAYP. The Pindown Inquiry (1991) found emotional abuse of LAYP due to deprivation of liberty combined with an abusive 'quasi behaviour modification' regime. The Leicestershire Children's Homes Inquiry (1993) found sexual and physical abuse combined with a repressive regime of 'regression therapy' and chastisement. The Waterhouse Inquiry (2000) found sexual and physical abuse of LAYP, and a neglectful and dismissive regime which failed to follow up complaints of abuse from LAYP. Thus, the combinations of individual and programme sanctioned abuse demonstrate that individual abuse has been found within highly problematic organisational contexts.
- ii) Corby, Doig and Roberts (2001) in an analysis of Inquiry reports into the abuse of LAYP found that regimes lacked child centeredness and that most failed to listen to complaints that LAYP had made about abuse (p. 93). The inability to listen was often linked to ineffective complaints procedures. A combination of individual abuse and programme sanctioned abuse was identified in each of the reports.
- iii) As noted in Chapter Two, the Inquiry reports and additional safeguarding reviews (Utting, 1991; Warner, 1992; Utting, 1997) all made comprehensive, system-level recommendations for change. They predominantly focused on complaints, inspection

and regulation, inter-agency collaboration, workforce development and the status of residential care. Thus, the formal response to individual and programme level abuse was mostly directed at the systems level. Thus it can be argued that the reports provide evidence of an inter-relationship between individual, programme and system levels of abuse. Utting (1991), Warner (1992) and Utting (1997) were government-initiated reviews with an independent chair and a key task of following up issues and concerns raised in institutional abuse inquiries.

- iv) Utting (1997) although particularly concerned with abuse in residential care, also identified risks of abuse in both institutional and non-institutional placement contexts; and claimed that abuse did take place in foster care but the prevalence was unknown (p. 35). Thus, the assumption that abuse of LAYP was synonymous with institutional abuse became conceptually incoherent, which can be seen to be a significant development in understanding the contexts where LAYP can be at risk of abuse.

The reports can be criticised for adopting and failing to challenge the dominant assumptions of managerialism by making predominantly procedurally based recommendations. However, they can also be attributed with having developed knowledge of the abuse of LAYP at a time when research evidence was minimal.

3.1.2 Development of understanding about the abuse of LAYP

The Inquiry reports provide detailed, important information on the abuse of LAYP in the absence of other sources. Butler and Drakeford (2005) examined scandals and moral panics and their relationships across a diversity of service user groups, including a review of the socially constructed nature of inquiries. They propose the concept of the 'master narrative' arguing that information generated by Inquiry reports should be seen as socially constructed, arguing that the public nature of the inquiry process should not be confused with neutrality or objectivity as the authors and chairs were appointed by the government:

The master narratives of dominant institutional and political interests are framed, as are Inquiry reports themselves, in a habitual discourse of common sense objectivity as though the account they offer is the only version of events (p. 235)

As noted in Chapter Two, the conclusions and recommendations of the Inquiry reports predominantly focused on organisational and management solutions to the abuse and

the poor quality that they found. They tended to reflect dominant assumptions of managerialism and infrequently challenged them.

As noted above (Section 3.1.2), Waterhouse (2000) upheld the validity of allegations of sexual and physical abuse and claimed that abuse had been 'widespread' (para. 55.10.1). Conflicting views can be found as to whether the abuse can be described as 'widespread'. Organisations representing LAYP claim there is evidence of widespread abuse perpetrated during past decades that went mostly undetected (Care Leavers Association, 2008). Smith (2008) challenges the notion of 'widespread' institutional abuse and argues that the supporting evidence is weak (p. 32). Smith's critique is partially based on the potential influence of the concept of the master narrative (Butler and Drakeford, 2005) examined above. Additionally, Smith (2008) asserts that the presumption of widespread abuse is either based on self report or small-scale studies by child protection professionals, neither of which provides data from which generalisations can be made. Crucially, the Care Leavers Association (2008) and Smith (2008) adopt conflicting perspectives on the definition of evidence and, inevitably, generalisation from the evidence. The former claims self report constitutes valid evidence and the latter claims neither self report nor small-scale research provides evidence from which generalisations can be made (p. 32). Thus, the estimation of the extent of institutional abuse remains contested.

Two specific areas identified as aiding the understanding of the abuse of LAYP are highlighted below:

i) The notion of power and abuse

The relationship between power and abuse can be examined within theoretical paradigms. Colton (2002) conceptualises the position of LAYP who were subject to institutional abuse as one of powerlessness, and compares this position to 19th century poor law ideology towards powerless and excluded groups:

Victims are seen as less than fully human by their oppressors who in the absence of effective internal and external monitoring wield almost absolute power (p. 37)

Ferguson (2007) analysed the systematic child abuse found in Catholic-run children's institutions in Ireland (Department of Health and Children, 2009, p. 1) and argues that LAYP were treated harshly due to their poverty and because they were

frequently victims of familial abuse, which was viewed with moral disapproval, such that LAYP were regarded as:

The moral dirt of a social order (p. 132)

Thus, the differential of power and the perception of the position of children and young people from deprived and abusive backgrounds are argued to be important elements of the abuse against them. The implication is that redressing the power differential and the perception of LAYP in society is necessary if subsequent risk of abuse is to be avoided.

ii) *The contemporary incidence of abuse of LAYP*

Estimating the incidence of contemporary abuse of LAYP at present is problematic due to the differing definitions of abuse applied and the absence of central statistical records available for analysis. Thus, there is no consensus on prevalence. Small scale research is a source of information. As noted in Chapter One, Hobbs et al. (1999) found a higher incidence of abuse of LAYP compared with the all-children population (p. 248). This study was a retrospective documentary analysis of paediatric records over a five-year period, including 133 LAYP in foster care and 25 living in residential care. The study was based on referrals for paediatric examination and as such has a number of limitations: the study does not report on the outcome of the referral, is dependent on referred data, and does not include the views of LAYP. Although the study can be criticised methodologically it is, however, one of the few studies which has attempted to evaluate the prevalence of abuse of LAYP.

Gallagher (2000) found 65 substantiated cases of institutional abuse across five local authorities during a five-year period, which accounted for 3 per cent of all child sexual abuse referrals during this period. Of these, 34 per cent were from foster care and 14 per cent from residential care. The researchers conclude that the data indicates child sexual abuse is not a statistically major problem, but acknowledge that this data may underestimate the actual incidence (p. 799). The study involved the documentary analysis of child protection records and focused on sexual abuse; it did not include other forms of institutional abuse. The study was not restricted to LAYP due to the diversity of institutional contexts included in the study.

Both of the above studies can be criticised for using methodologies restricted to official records. Most abuse Inquiry reports in the 1990s found that numerous

allegations of abuse were not heard and would therefore not have been represented in child protection referrals. The use of a methodology that does not account for the views of the child or young person is therefore problematic.

Measuring prevalence via research has proved problematic. The estimation of LAYP's own safety has become an important way of estimating prevalence of abuse and examined further in 3.1.5 below. A dimension of the conceptual difficulty is whether estimation of prevalence includes abuse perpetrated by other young people – examined below.

3.1.3 Contemporary perspectives on violent and aggressive behaviour between children and young people

Historically, Inquiry reports have identified adults as the perpetrators of individual abuse against looked after young people. Towards the end of the 1990s there was growing recognition of the risk of abuse to LAYP posed by other children and young people. The understanding of violent and aggressive behaviour perpetrated against looked after young people has developed over the last decade, and this section analyses the literature on conceptual problems associated with the topic and the development of the perceptions of LAYP about violent and aggressive behaviour.

Firstly, there is a lack of conceptual clarity about violent and aggressive behaviour towards LAYP, which makes analysis of the subject complex and comparison between studies problematic. The literature, research and Inquiry reports generally differentiate between 'peer abuse' and 'bullying'. Bullying refers to physical or psychological threat or attack, including attacks on or theft of children's personal property; and peer abuse predominantly denotes a sexual threat or attack (Barter et al., 2004, p. 5). The research was undertaken in 14 residential units with 71 young people and staff using semi-structured interviews and vignettes. The study was restricted to residential care which makes generalisation to the wider LAYP population problematic. However, it can be argued that the researchers contribute significantly to the development of theoretical knowledge. The broader body of literature on this topic generally infers that bullying is less serious than peer abuse, thus potentially understating the impact bullying has upon LAYP (Utting, 1997, p. 105; Barter et al., 2004, p. 5). This study argues for conceptualising peer abuse and bullying as 'peer violence' and measures the level of violence on a continuum including physical violence, sexual violence and verbal attacks and insults (p. 31-41). This is a conceptually clear approach which is not reflected in other aspects of the literature. Whilst there is a risk of understating the impact of bullying,

most research and social policy documents differentiate between serious physical and sexual assaults by peers and lower level bullying. The terms 'peer abuse' and 'bullying' both appear to be consistent with the dimension of individual abuse (Gil, 1982, p. 9; Kendrick, 1998, p. 170). In addition, there is little research material on peer abuse and bullying that focuses on the perspective of LAYP (Barter et al., 2004, p. 4). The majority of research focuses on bullying and less on peer abuse, and on LAYP in residential care with limited insight into the experiences of LAYP in foster care.

The following three points illustrate this more detailed understanding of the contemporary incidence of abuse:

i) Nature and prevalence of peer abuse and bullying

The mix of LAYP in the same placement who have been subject to abuse and those who have perpetrated abuse has been a feature of major inquiries and research (Utting, 1991; Utting, 1997).

Sinclair and Gibbs (1998) in a large study of LAYP in residential care concluded that fellow residents rather than staff were the main sources of physical and sexual abuse (p. 197). This was a comparative and longitudinal study, involving 223 children and staff in 28 residential homes in five local authorities. The study triangulated methods and data sources including interviews, questionnaires and documentary analysis.

Barter et al. (2004) note the appropriate focus on adult perpetrated abuse in the historic abuse inquiries in the 1980s and 1990s. However, they contrast this with the developing evidence of peer violence and also conclude that:

LAYP in residential care are most often at risk from other young people
(p. 11)

Both of the above studies are restricted to residential care. However, the finding that children and young people posed the main risk of abuse contrasts with the predominantly adult-perpetrated abuse found in Inquiry reports. The issue of placing LAYP with diverse and potentially conflicting needs together is examined later in this chapter in relation to 'choice' (Section 3.2.1).

In a consultation exercise, the Children's Rights Director (2004) found that LAYP felt positive about the mechanisms for protecting them from abuse from adults, but were

more critical of mechanisms to protect them from abuse from other children and young people (p. 18).

This analysis of the literature suggests LAYP feel that the risks of abuse from adults have been appreciated and managed, but the risks of abuse from other children and young people have not been fully recognised and managed.

ii) *Frequency and impact of bullying in foster care and residential care*

Utting (1997) found that LAYP in both foster care and residential care experienced bullying, and found incidents of bullying by foster carers' own children – thus drawing attention to bullying within and across both placement contexts (p. 105). A consultation undertaken by the Children's Rights Director, England also found bullying in both contexts. Just under a third (27 per cent) of respondents residing in residential care reported being bullied, compared to 16 per cent in foster care (Children's Rights Director, England 2007d, p. 22). A further consultation investigating bullying undertaken by the Children's Rights Director for England (2008c) found slightly lower rates of bullying, and a similar differential between foster care and residential care. The criteria for inclusion were children and young people living away from home and extended to a small number of children in need who were not LAYP. Thus, close comparison with studies with an all-LAYP sample would be problematic. Whilst the Children's Rights Director for England is appointed by the government it is emphasised that the post is independent of government and advises government on the views of LAYP.

Barter et al. (2004) found that most LAYP living in residential care had experienced verbal attack, and over half reported experience of physical attack, attacks on personal property or invasions of personal space and low levels of sexual violence (Barter et al., 2004, p. 205). Barter et al. (2004) develop a conceptual framework of peer violence as a continuum, which although not readily compatible with other studies, provides insight into the pervasive impact of bullying and violence from the perspective of LAYP.

Ofsted (2008d) found high levels of concern from LAYP about bullying in inspections of services for LAYP, and rated 7 per cent of children's homes inspected as inadequate in providing protection from bullying (p. 20). This report synthesises the views of LAYP from inspection findings within a national framework, an outcome which is difficult to achieve through research.

In a policy review commissioned by an organisation representing the views of LAYP, Whiteford (2005) found that bullying was a significant feature in the lives of LAYP by virtue of either experiencing it or fearing it (p. 75). In addition to experiencing bullying, this and other studies also note that the fear of bullying is highly distressing. The Children's Rights Director (2008c) found 20 per cent of LAYP participating in a consultation exercise worried a lot or most of the time about bullying (p. 30). Utting (1997) found the fear of bullying did not clearly correlate with the incidence and actual experience of bullying (p. 106).

Stanley (1999) drew a relationship between bullying and a bullying culture in some residential contexts:

Where interactions between residents contribute to maintaining hierarchies that place the staff firmly at the top of the pecking order (p. 30)

Other studies also found that organisational cultures have both positive and negative impacts on the lives of LAYP (Sinclair and Gibbs, 1998, p. 197). The presence of bullying cultures in placements can be related to programme sanctioned abuse (Gil, 1982, p. 10; Stein, 2006a, p. 15).

iii) Adult response to bullying

Adult responses to bullying have been evaluated by a small number of studies. Whiteford (2005) found that most bullying situations improve through residential care staff's considered assessment and response to bullying (p. 77). Cameron (2007) in a European comparative study found that bullying was dealt with more effectively as an integrated element of the social pedagogue role compared to the practice found in English children homes in the study (p. 140). Thus, it can be argued that different social work models may have a significant impact on how incidents of bullying are routinely managed.

3.1.4 Looked after young people's perceptions of their safety from abuse

As noted in Chapter One, limited research has been undertaken on the perceptions of LAYP on their safety from abuse.

In a consultation exercise, the Children's Rights Director (2007b) identified 'keeping children safe' amongst the three priorities that LAYP wanted local authorities to include

in their care pledge to them (p. 14). Whiteford (2005), in another consultation exercise, found a similar priority attached to safety and protection by LAYP (p. 75). These statements provide some evidence of the significance that many LAYP attach to their safety. Two further key issues are highlighted from the literature below:

i) Measurement of feeling safe and unsafe

Timms and Thoburn (2003) found 78 per cent in their study felt safe in care. More females than males felt unsafe, and younger respondents were more likely than their older peers to feel safe (p. 108). The study found that those who felt unsafe had predominantly felt unsafe from carers, concluding that:

Some groups of children were more likely to feel safe when in care than others (p. 28)

The study involved 725 LAYP from diverse placement backgrounds using postal questionnaires. It was restricted to LAYP who had experienced court proceedings, and did not report placement classification. Thus the research was not able to differentiate between placement context and perceptions of safety.

The Second Joint Chief Inspectors' Report on arrangements to Safeguard Children (Commission for Social Care Inspection, 2005a) found that most LAYP in residential care felt safe, but the extent to which they felt safe varied significantly within and between establishments (p. 46-47). The Third Joint Chief Inspectors' Report on Arrangements to Safeguard Children (Ofsted, 2008a) also found that most LAYP felt safe, but that many also expressed concern for their personal safety and from being bullied in secure accommodation and in foster care (p. 4). Utting (1997) also identified the risk of abuse to LAYP in foster care (p. 35).

These findings are important and relevant to the thesis' examination of safety and wellbeing. They conclude that safety is important to LAYP and that LAYP were found to feel mostly safe, but those that felt unsafe did so in a range of placement contexts identifying peers and carers amongst the key factors for feeling unsafe.

ii) What made young people feel safe?

Timms and Thoburn (2003) found a link between close attachments and feeling safe (p. 30). The Children's Rights Director England (2004) also found that many LAYP felt at greater risk when looked after by people they did not know:

Being dumped with people you don't know (p. 17)

These findings provide important insights into LAYP's perceptions of the lack of safety related to unfamiliar carers and care contexts. It provides evidence of a link between trusting relationships with carers and feeling safe. Timms and Thoburn (2003, p. 108) found that feeling safe is a major factor in enhancing LAYP's sense of emotional wellbeing. The findings are closely related to the research aim and provide some evidence that feeling safe from abuse has a link with trusting relationships.

3.1.5 The relationship between being listened to, complaints procedures and safety from abuse

As noted above, a consistent theme from inquiries into institutional abuse was that LAYP had told adults about the abuse they had suffered, but that these adults had failed to listen to them. Six key findings are of relevance to the thesis research:

i) Listening to looked after young people

The National Service Framework for Children, Young People and Maternity Services [NSF], (DH, 2004) emphasises the importance of listening to LAYP in relation to participation in decision making; and to ensuring safety by highlighting the fear that some LAYP may experience in communicating about abuse. The guidance draws a relationship between listening and safety of looked after young people (2004a, p. 147).

Kahan (1994) also reiterates the right of LAYP to be listened to within residential contexts, and differentiates between listening within 'every day life' and listening within formal decision making structures (p. 65). Kahan's distinction is important as many strategies recommended by Inquiry reports, for example complaints procedures, focused on listening through formal structures.

McLeod (2008) claims that LAYP generally felt social workers did not listen to them. She partly explains this by identifying the differing definitions of 'listening' adopted between adults and LAYP. Social workers referred to listening as predominantly being about respecting and empathising, whereas young people felt:

If no action followed, they were not really been listened to (p. 21)

Thus, McLeod (2008) conceptualises effective listening for LAYP as listening and hearing, which combines listening and subsequent action from adults (p. 21). Thus, an argument is presented that there is frequently a dissonance in the expectation of what constitutes 'listening' between LAYP and social workers.

No research on the effectiveness of others' listening, including carers, was identified. Studies which examined the people that LAYP would approach if they felt unsafe provide some insight into listening, but do not explicitly address the issue.

The Children's Rights Director for England (2008a, p. 32) found in a consultation exercise that 46 per cent of the LAYP involved would tell a friend if they were being bullied, followed by a member of school staff (34 per cent) and their parents (32 per cent). Barter et al. (2004) also found that looked after peers were identified, but importantly they identified that choice of support was highly influenced by who LAYP felt they could trust (Barter et al., 2004, p. 32).

Thus, the findings appear to establish a link between trust and LAYP feeling that someone is likely to listen to them. Petrie et al. (2006) compared 'listening' between UK social work and social pedagogic models, and found that dialogue within social pedagogy is a key element of interpersonal communication which facilitates listening. (p. 26). Thus, the concept of listening within social pedagogic models relates closely to ideological elements of respect and reciprocal learning, in contrast with UK managerialist models of social work which do not strongly integrate underlying principles of communication.

ii) Complaints systems

As noted above, complaints procedures have featured significantly in the recommendations from contemporary Inquiry reports and safeguarding reviews into the abuse of LAYP (Utting, 1991; Staffordshire County Council, 1991; Utting, 1997; Waterhouse, 2000). They can be conceived of as a managerialist response to the finding that some LAYP's expressed concerns had not been listened to, and that they had subsequently been left vulnerable.

Frost and Wallis (2000, p. 111) cite Freeman (1983) who identifies three dimensions of complaints procedures:

- Welfare rights of LAYP and the statutory requirement for local authorities to develop complaint systems. The policy and legislative framework for complaints is examined in Chapter Two.
- Protection rights which explicitly relate to complaints about protection (p. 111). Utting (1991) also claimed that strong complaints procedures should provide looked after young people with protection from the state (p. 41). Thus, a link can be identified with system outcome abuse (Gil, 1982, p. 11; Stein, 2006a, p. 16). Frost and Wallis (2000) found that protection issues were the predominant category of complaint (2000, p. 118).
- Social justice and the rights of LAYP to participate in key issues which impact upon them. Frost and Wallis (2000) found participatory issues were the least frequent category of complaint (p. 118).

The study applied documentary analysis to complaints records, individual and group interviews with LAYP across diverse care settings, and questionnaires to 'independent persons' involved with an advocacy project. The research was commissioned by an advocacy project independent from the local authority. Whilst dated, the triangulated methods appear robust and the study continues to be a key source of research material on LAYP's perceptions of the relationship between complaints procedures and safety and wellbeing.

iii) Accessibility of the complaints process

The accessibility and formats of complaints are examined in some studies. Frost and Wallis (2000) are critical of the format and structure of many complaints systems which they regard as mostly rigid and inaccessible to LAYP (p. 120). The UK Children's Commissioners (2008) confirmed the inaccessibility of procedures and claimed that complaints procedures do not exist in some care contexts (p. 17). Some attempts have been made in government guidance to lessen the focus on complaints procedures as structures, relating them to wider professional and organisational cultures of listening and learning (DfES, 2006c, p. 3). The impact of this change in emphasis remains unclear in the literature.

iv) Differential awareness of and inconsistencies in complaints procedures

Higher rates of awareness about complaints procedures have been found amongst LAYP living in residential care compared with those placed in foster care (Utting, 1997, p. 184). Frost and Wallis (2000) found that 93 per cent of the sample of LAYP

living in residential care settings were aware of complaints procedures compared with 20 per cent living in foster care (p. 114). As the original objective of the complaints procedure was to provide a framework for listening to LAYP to provide protection from abuse, this suggests that a child or young person placed in foster care could be less aware of a key strategy for keeping them safe.

v) *Children and young people's perceptions of complaints systems*

A significant element of the above analysis is concerned with processes and procedures for making a complaint. However, Frost and Wallis (2000) found that LAYP are generally less focused on the details of the process and more concerned about the impact that complaining will have on their problem (p. 123). They conclude that:

For those who made a complaint, the current procedure does not command much credibility (p. 127)

The key issues for lack of credibility included time lapses in processing complaints; insufficient information on the progress of a complaint; and insufficient tangible change resulting from the complaint (Frost and Wallis, 2000, p. 127). They note a correlation between negative experiences of complaints systems and generally negative feelings towards the Social Services Department (p. 124). Thus, it can be argued that an analysis of the perceptions that LAYP have of complaints systems should be seen within the context of their more generalised experiences of being looked after.

vi) *Relationship between formal procedures and informal mechanisms*

Utting (1997) identifies the benefits of informal methods for resolving problems as they arise (p. 185). Parry, Pithouse, Anglim and Batchelor (2006) found a disparity between complaints officers and managers in their classification of complaints as formal or informal. The significant finding was that complaints categorised as informal generally had less satisfactory outcomes for complainants, often leaving them feeling frustrated and not listened to (Parry et al., 2006, p. 11). Thus, the study suggests that there are differing perceptions of formal and informal complaints mechanisms which may impact negatively on the experience of using the complaints system; perceptions of outcomes of the process; and their relationship with safety and wellbeing. The study involved individual interviews and focus groups with complaints officers and LAYP who had made a complaint across 22 local authorities.

The study highlights the tension between formal and informal parts of the system, but is limited in its application to the thesis as it focuses on adults' perspectives.

3.2 Literature on Looked after Young People's Wellbeing

This section reviews the literature on the wellbeing of LAYP. It examines participation; placement continuity and stability; educational wellbeing; health and damaging behaviours and risks; and relationships.

3.2.1 Participation

This section examines the literature on the participation of LAYP in key decisions about their care arrangements and broader aspects of their life. The literature covered included some of the key conceptual frameworks for understanding and measuring participation, as well as the key social and political contexts influencing the participation of LAYP. These are critiqued in the following eight points:

i) The social and political context of participation

The term participation is frequently used in relation to LAYP but often lacks conceptual clarity. Lansdown (2010) notes some of the conceptual difficulty arising from the tension between the wide application of the term in the UK to describe general social engagement, and its more specific relationship to the rights of children to express their views and for them to be taken seriously under Article 12 of the UN Convention on the Rights of the Child (UN, 1989, p. 13). Whilst Article 12 is frequently quoted, it is argued, other articles – including Article 5 – further develop the notion of transfer of responsibility for decision making from adults to children:

Participation is a fundamental human right and a means through which to realise other rights (Lansdown, 2010, p. 13)

Thus, this analysis argues that participation is a component of safety and wellbeing, and also a means by which safety and wellbeing can be realised and developed.

Further conceptual confusion has resulted from the interchangeable use of the term in relation to participation in policy and strategic children's service development, and participation of LAYP in decision making about their own lives (Gilligan, 2004b, p. 67). Contemporary literature on the participation of LAYP in the last decade has focused significantly on participation in strategic policy development, and to a lesser extent on participation in decision making which impacts on LAYP directly.

As noted in Chapter One, children and young people are increasingly seen as social actors in their own right (Percy-Smith and Thomas, 2010, p. 1). Thomas (2002) notes that such developments have contributed to changes in the way that children's autonomy in relation to adults is perceived:

Children are not simply objects of other people's actions but subjects of their own (Thomas, 2002, p. 20)

Thus, it is argued that the change in perception of children as competent actors in their own lives has implications for their involvement in making decisions about their lives. Consistent with Thomas (2002), Shier (2001) disputes claims that children are not interested in participating in decisions that affect them, and argues that the notion is contradicted by numerous reports where LAYP have strongly expressed a desire to participate more in making decisions that directly affect them (p. 12).

Thomas (2002) also found, in a study on the participation of LAYP in decision making, that they prioritised 'wanting to be listened' to and awarded least priority to 'getting what I want'. Thomas concludes that LAYP want dialogue with adults where neither determined the outcome (p. 152). Thus, a key finding is that the process of participation can be as important to LAYP as the outcomes of participation (p. 160). Thomas undertook two studies on the extent of participation by children and young people in decisions about their care involving 120 and 225 cases respectively, applying combined methods of interviews and pre-coded questionnaires which collected quantitative and qualitative data.

Conversely, some of the literature found that the outcomes of participation were critical variables in how LAYP rated the effectiveness of their participation in decision making:

You can talk and talk and talk but if nothing gets done it's no good
(Young person quoted by the Children's Rights Director, 2007b, p. 20)

Thus, for some LAYP the outcomes of participation are more important than the process.

Petrie et al. (2006) found that LAYP in English children's homes felt significantly less satisfied with their participation in making everyday decisions about their lives in residential care compared with their peers in Germany and Denmark (p. 128). The finding suggests that dominant social work models may impact on the experiences that LAYP have of participation in decision making.

Skuse and Ward (2003) also found that LAYP were not generally consulted about major decisions that could affect their future, and generally felt that an improved dialogue around decision making would have resulted in improved outcomes for them (p. 159). This study involved interviews with 49 previously LAYP and follow up interviews with 25 young people. The study therefore examined decision making for children and young people whilst looked after, from the perspective of former LAYP. This limits comparison with studies where respondents are currently looked after.

Sergeant (2006) examined local authority decisions to move LAYP from their placements, and noted an absence of their participation in decisions which were predominantly resource based and not child centred (p. 6). In addition, the UK Children's Commissioners' Report to UN Committee on the Rights of the Child, (2008) found that LAYP report low levels of participation in decision making, particularly in relation to placements (p. 17).

ii) Types of decisions in which LAYP wish to participate

Thomas (2002) examined the types of decisions which were important to LAYP. Some were similar to the concerns of most young people, but others such as 'family contact' and 'where I live' were particular to LAYP (p. 136).

In a consultation exercise with LAYP (Children's Rights Director for England, 2007a, p. 18), participants reported that they wanted to be involved in placement decisions as they often had clear views of where they would feel safe. The wish for involvement in placement decisions was a consistent theme from the literature.

iii) Choice exercised by looked after young people

The issue of choice relates closely to an examination of participation in decision making. As noted in Chapter Two, the concept of choice has become a significant contemporary social and political ideology. Sinclair and Gibbs (1998) found that 40 per cent of their sample of young people residing in children's homes said they had been given a choice over their admission to the placement (Sinclair and Gibbs, 1998,

p. 45). The Children's Rights Director England (2005) found 65 per cent of LAYP had not exercised any choice when they moved into their current foster home (Children's Rights Director, 2005, p. 5). Thus, the amount of choice exercised over placements was found to vary considerably. The level of participation associated with choice was not specified in either study.

iv) Knowledge of and participation in care planning

Care plans and planning relate closely to decision making, and have been and continue to be seen as important formal mechanisms to ensure effective decision making and planning is undertaken for each LAYP. Shaw (1997) found just over half of the LAYP participating in a large national study felt that they did have a care plan, whilst many others were unsure. LAYP placed in residential care and those who had been in placement for less than six months showed a lower rate of awareness of care plans. The study found care plans had minimal impact on the everyday lives of the LAYP in the study (p. 33). The study can be classified as research (Wallace and Wray, 2006, p. 92) which involved 2000 LAYP through the use of postal questionnaires. The study did not report if or how respondents had participated in constructing their plan. Timms and Thoburn (2003) found a higher rate of awareness of care plans, with 71 per cent of respondents who knew what their care plan was, 65 per cent who had participated in constructing the plan, and 35 per cent who had not (p. 107). It is not possible from these studies to deduce the degree of participation in these processes.

v) Barriers to participation

The UK Children's Commissioners' Report to the UN Committee on the Rights of the Child (2008), identified two main barriers to children's participation in decision making: strategic barriers, for example complaints policies that are unsuitable for use by young people; and attitudinal barriers that are unlikely to be removed until children are perceived as having rights (p. 13). Kirby, Lanyon, Cronin and Sinclair (2003) affirmed the importance of positive attitudes and found a positive link between effective participation in decision making and a supportive, trustful and mutually respectful environment (p. 86).

vi) Heterogeneity and participation

The literature generally reflects an emphasis on the heterogeneity of LAYP and cautions against homogeneous assumptions in relation to participation in decision making. Sinclair (2004) emphasises the need to recognise the heterogeneity of the

population of LAYP, and cautions against generalisations about participative capabilities and requirements (p. 109). Thomas (2002) also cautions against generalisation, and constructs a typology of 'positions' that LAYP may adopt in their involvement in decision making, including: assertive, dissatisfied, submissive, reasonable and avoidant positions (p. 170). This typology deepens understanding of the different ways in which LAYP choose to participate, including some which could also be misinterpreted as demonstrating differing levels of motivation to participate.

vii) Evaluating participation

Several models have been devised which attempt to evaluate the effectiveness of participative processes. The original model was devised by Arnstein (1969, p. 214) to measure effectiveness of participation in municipal decision making, later developed by Hart (1992, p. 8) to more explicitly apply to the analysis of participation of children and young people.

The literature generally recognises the benefits of these models in conceptualising differences between participation and consultation, but they are now subject to some criticism. The assumption that all participative activities should aim for the top rung of the participation ladder (Hart, 1992, p. 8) is now regarded as contested and somewhat simplistic. Shier (2001) adopts a differential perspective which asserts that different levels may be appropriate for different tasks (p. 114); this model provides a set of indicators for participation but these do not explicitly relate to the LAYP context.

Some models of participation have been criticised for being overly linear, failing to capture the multi-dimensional nature of participation of LAYP in decision making (Thomas, 2002, p. 174). Thomas (2002), in an attempt to respond to the linear criticism conceptualises participation as a climbing wall which can extend vertically and horizontally, and therefore be more responsive to the needs of individual children and young people in the process of participation (p. 176). Tisdall (2010) argues that the models frequently fail to address the tensions inherent in participation (p. 319). The original participatory models can be criticised for their limited ability to conceptualise the complexity of participation for LAYP, for example the relationship between outcomes of participation and implications of non-engagement through ineffective participatory processes.

viii) Power and participation

The literature on the participation of LAYP is consistently clear that it is not possible to effectively examine participation without placing it in a social and political context. Hill et al. (2004) claim that childhood in the UK is denoted by a state of powerlessness, dependency on adults and no autonomy as a social group (p. 89), which can be classified as theoretical (Wallace and Wray, 2006, p. 80).

In an analysis of how power can be applied to the outcomes of participation, Parton (2006) argues that in order for children and young people to feel safe, their voices have to be heard but they also have to be:

Given more control about what happens to them once they have raised their voice (p. 186)

Hirschman (1970) developed a social and political model of participation based on economic and consumer power and behaviour. The model conceptualised 'exit' and 'voice' as two distinct responses to dissatisfaction with the quality of services or products. Exit denotes an economic phenomenon where customers stop buying the product; voice denotes a political phenomenon where customers express their dissatisfaction directly through management structures or through more generalised forms of protest (p. 4).

As noted in Chapter Two, the market and managerial model of public services perceives those who are in receipt of services as consumers and latterly as customers. LAYP do not exercise choice over their corporate parent and exercise little choice over everyday issues in their looked after lives. Thus, when the notion of exit is applied to LAYP it is not to explore alternative market options, but is more likely to manifest in LAYP disconnecting and disengaging from the organisation or corporate parent. Conversely, voice could be considered as an alternative response to dissatisfaction and a strategy of involvement, contrasted with passivity of the exit strategy (Hirschman, 1970, p. 39). Voice is based on the premise that those in receipt of services will be able to marshal some influence or bargaining power (Hirschman, 1970), such that:

If customers are sufficiently convinced that voice will be effective, they may well postpone exit (p. 39)

Hirschman considers that exit and voice are not mutually exclusive but, as noted above, represent contrasting economic and political positions. Thus, the implication for an analysis of participation and safety and wellbeing is important. If LAYP are not able to effectively participate in decision making, it can be argued that there becomes a greater propensity to exit which is likely to be expressed by LAYP becoming detached and disengaged. Conversely, effective participation may contribute to LAYP being empowered to achieve voice.

The literature does not generally examine the explicit relationship between participation and safety. Lansdown (2006) however develops the relationship by arguing that effective participation can empower children and young people to contribute to their own protection (p. 149).

Thus, it can be argued that power is a key element of effective participation. Power in Hirschman's analysis is an essential element of the achievement of voice. There is little consensus on the definition of voice in the literature on participation. However, there is an increasingly strong argument that 'voice' achieved through effective participation is inextricably linked to power and has a positive relationship with safety and wellbeing.

3.2.2 Placement stability and continuity

This section reviews the literature that examines the impact of placement changes from the perspective of LAYP. As noted in Chapter Two, there has been considerable social policy focus on placement stability but a less explicit focus on continuity. Jackson and Thomas (1999) distinguish between stability and continuity, where stability is defined as the child remaining in the same place and continuity is the maintenance of stable networks (p. 66). This literature highlights:

Compelling evidence that instability and many changes of placement are extremely damaging to children (p. 7)

A number of key studies have found instability to have a predominantly deleterious effect on the welfare and development of LAYP (Berridge, 1985; Berridge and Brodie, 1998). These findings contributed to the Modernising Social Services agenda (DH, 1998a, 1998b) and the Quality Protects initiative (DH, 1998c). The impact of placement instability and discontinuity on LAYP was a prominent example of the development of the

concept of system outcome abuse (Gil, 1982, p. 11; Stein, 2006a, p. 16). Jackson and Thomas (1999) note the attention previously given to the sexual abuse of children and argue that instability is also a significant source of harm (p. 4). The classification of placement instability and discontinuity as abusive introduced a new perspective to the abuse of LAYP.

As noted in Chapter Two, the incidence of placement stability has become a key outcome measure for LAYP. Consistent with New Labour performance measurement ideology, a government target states that 16 per cent of LAYP or less should experience three or more placements during one year. The proportion of all looked after young people nationally who had three or more placements steadily decreased from 16 per cent at 31 March 2001 to 13 per cent at 31 March 2005, and 10 per cent at 31 March 2009. Despite these improvements, stability has remained a major focus of social policy developments for LAYP and is a key feature in the Care Matters agenda (DfES, 2006e; DfES, 2007b). The outcome measure can be criticised for not including an evaluation of the impact of placement changes from the perspective of LAYP.

Two related areas of particular concern include:

i) Stability, continuity and quality of care

The analysis of stability has predominantly focused on LAYP for whom a permanent placement is the key aim. However, Bullock et al. (2006, p. 1346) highlight the heterogeneity of the LAYP population and the consequence that for some LAYP the aim may be permanence whilst for others it may not be permanence in a looked after placement. The diversity of needs of LAYP are further evidenced by the short duration of many looked after episodes and the frequent transition between home and placement experienced by many LAYP (DH, 1998d, p. 11). It could be argued that this places greater emphasis on the need for stability and continuity, but not necessarily on placement stability alone.

In an analysis of research on long term foster care, Schofield (2009) found evidence to confirm the value of stability but argues that the quality of care provided by carers has a more critical relationship with outcomes of security, self esteem and resilience (p. 1). Thus, Schofield cautions against simplistic relationships being drawn between stability and better outcomes, and places greater emphasis on the quality of care experienced by LAYP. This appears to be an important finding as there is little benefit to be derived from continuity or stability in a placement that gives LAYP poor

quality of care. It can be argued that that LAYP who have experienced poor quality of care and abuse in placement benefit little from placement stability or continuity. Jackson and Thomas (1999) conclude that there is a complex, interdependent relationship between stability and continuity and that the provision of basic stability does not necessarily imply the needs for continuity are met (p. 19-20). Gilligan (2009) notes the interdependent relationship between stability and continuity in contributing to the development of resilience and therefore also to wellbeing (p. 24).

ii) Children and young people's views of stability and continuity

Much of the research examines the implications of instability and discontinuity in relation to permanence, and less which investigates the impact of placement instability and discontinuity where permanence is not the explicit aim. The literature on placement stability and discontinuity from the perspective of LAYP remains limited. Some policy sources communicate the views of LAYP on stability and continuity effectively. The evidence from the literature examined suggests that the negative impact of both discontinuity and instability on education, friendships, links with the community, relationships with carers and loss of contact with pets is high. Thus it can be suggested that there is a deleterious impact on safety and wellbeing. The literature provides little evidence that the improvement in government stability targets has impacted positively on the experiences of stability or continuity, and therefore enhanced the safety and wellbeing of LAYP.

3.2.3 The importance and quality of relationships

This section highlights nine key areas where the literature emphasises the links between key relationships with family, friends, social workers and carers, and LAYP's safety and wellbeing.

i) Relationships and wellbeing

As examined in Chapter One, relationships are included as one of the key domains in some wellbeing frameworks, and excluded from others. Thus, the role of relationships in the measurement of wellbeing is contested. Jordan (2007) is critical of the economically orientated measurements of wellbeing, and conceptualises relationships:

As the primary component of wellbeing (p. 5)

UNICEF (2007) in a large comparative study of all children and young people populations in 21 industrialised nations found relationships with family to be the most important determinant of wellbeing, followed by relationships with friends (p. 41). The study identified an important link between relationships and wellbeing, but also noted methodological difficulties in measuring relationships across the countries in the sample (p. 22).

Dixon and Stein (2003) in a study of 107 care leavers and a follow up of 61 care leavers, found a positive correlation between a lack of positive social relationships and poor wellbeing and low self esteem (p. 14). The study examined the views of care leavers, but demonstrates the retrospective importance of relationships for children and young people during a care episode. In a consultation with LAYP, Watson (2004) found that relationships with family and friends were ranked as being of critical importance to them (p. 3).

Thus, the literature identifies relationships for looked after young people as being of critical importance. The key relationships identified are family, friends, social workers and carers.

ii) Social pedagogy and managerialism

This section examines the impact of dominant social work models on relationships. As noted in Chapter One, the increasingly globalised context of UK social work has seen a growing awareness of European models of social work policy and practice, which have provided an opportunity to critique the UK model against comparative models.

Social Pedagogy is applied in continental Europe, and combines social and educational principles. In the UK, the model is generally examined in the context of children's residential care but can apply to a range of care contexts, including foster care placements and work with children and young people in the community. Two key principles of social pedagogy are identified which relate to the research topic. The first is the methodology, which is child centred and focuses on the looked after child or young person as a whole person. Second, the practitioner sees herself/himself in an inclusive relationship with LAYP (Petrie et al., 2006, p. 23). The model is therefore based on holistic, relational and socially inclusive principles.

It can be argued that these elements are an antithesis to the UK's dominant, managerialist model of social work. Pedagogues are not expected to adhere to technical procedures, as in the dominant UK model, but are expected to use professional judgement to resolve problems (Cameron, 2007, p. 145). This relational focus is significantly different from the procedural focus of UK social work. Hatton (2008) develops a critical comparative analysis between UK and pedagogic models, and argues that a focus on pedagogy would enable UK social work to regain person centred and humanistic approaches lost in the new professional, managerialist culture (p. 14).

Laming (2007) claims that social pedagogy has the potential to develop the ECM agenda for LAYP, and identifies the central, holistic principle as a key advantage (p. 15). As noted in Chapter Two, a project to pilot social pedagogy in the UK was launched under the Care Matters initiative, to test the applicability of the model to UK social work. At the time of writing, the project has not yet been evaluated.

iii) Relationships with family

The right of LAYP to retain their family relationships is stated in Article 8 of the UNCRC (UN, 1989).

In a three year study of LAYP living in foster care, Sinclair et al. (2005) found that views on family relationships were diverse, reflecting the heterogeneity of LAYP (p. 152). Their views on family relationships divided into four categories: first, those who wanted to live with their birth family and not retain a relationship with their foster carers; second, those who wanted to live with their birth family and retain a relationship with their foster carers; the third group wanted to remain in their foster placement and see more of their families; and the fourth group saw their futures as separate from their birth families – either through adoption or developing their own independence (p. 152). The study involved and followed up 596 looked after young people in foster care using postal questionnaires and in-depth case studies. Both stages of the study investigated the views of LAYP and were restricted to foster care placements, which makes comparison with children and young people in other placements problematic. However, the findings demonstrate the dilemmas faced between birth family and foster carers, and how these differentiate them from many of their non-looked after peers.

The Children's Rights Director for England (2009) found that LAYP predominantly

identified living away from their families and missing them as the 'worst feeling of being in care' (Children's Rights Director for England, 2009, p. 8).

Thus, feelings towards family are often strong but, as Sinclair et al. (2005) found, views on how they perceived future relationships with their family were extremely varied, reflecting dilemmas between relationships with foster carers' families and their own families.

Hill (2000) undertook an analysis of research during the 1960s and 1970s which found that LAYP in residential care saw little of their families, and relationships were not generally proactively supported – with the outcome that:

Only the most dedicated managed to stay in touch (p. 34)

A consultation exercise with LAYP undertaken in response to the White Paper Care Matters (DfES, 2007a) also found that children and young people attached high importance to their relationships with family and friends and, significantly, that links with family provided a continuity of relationships for some participants within the context of placement instability (DfES, 2007a, p. 31). This is a particularly important finding which suggests that family relationships are sometimes seen to counterbalance the instability and discontinuity of the looked after system. The Children's Rights Director for England (2007a) found that 60 per cent of LAYP identified their parent(s) as their first choice to contact if someone was harming them (2007a, p. 10).

Thus, the literature identifies a general importance attached to family relationships, a diversity of views of relationships with their families, and evidence of a link for some LAYP between family relationships and protection from individual abuse (Gil, 1982, p. 9; Kendrick, 1998, p. 170).

iv) Frequency of contact with family members

Sinclair and Gibbs (1998) found fairly high rates of satisfaction with contact between LAYP in residential care and their families. Approximately two-thirds saw their families as much as they would have liked, and a third did not see them enough (p. 159). This study used structured interviews with a follow up questionnaire with 223 LAYP from 48 children's homes. As the study focused on residential care, this makes comparison with research involving LAYP in a broader range of settings problematic.

In a large national study of looked after young people, Shaw (1997) found lower rates of satisfaction with family contact. Approximately half of the study's participants reported dissatisfaction with family contact and generally wanted more contact (p. 31).

v) Relationships with siblings

A growing awareness of the significance of sibling relationships for LAYP was noted in the literature. Jackson (2009) describes sibling relationships as highly significant to LAYP:

Losing touch with your brothers and sisters is one of the worst things that can happen as a result of coming into care

Kosonen (2000) found that 77 per cent of children and young people separated from their siblings wanted more contact (p. 136) and that many participants thought their siblings would play an important role in their lives in the future, concluding:

Sibling relationships are vitally important for the sake of children's long term welfare (p. 138)

Kosonen (2000) examines these phenomena in respect of LAYP living in residential care. Thus, it can only be speculated that the findings would also apply to children and young people in foster care and other care contexts. The study involved 69 children using a questionnaire method.

The review of literature highlighted that little research differentiates family relationships between adult and sibling relationships. McParlin (2009) also notes the lack of focus on sibling relationships for many LAYP in residential care, and adopts a resilience perspective by relating the retention of positive sibling relationships with increased levels of resilience.

vi) Relationships with friends

The rights of looked after young people to develop friendships and free association is stated in Article 15 of the UNCRC (UN, 1989). The Children's Rights Director for England (2007a) found that 13 per cent of LAYP would tell their friend first if someone was harming them, second to parents at 60 per cent (p. 10).

Ridge and Millar (2000) found that LAYP highly valued their friendships, which were felt to provide intimacy and sociability, and to be socially integrating and protective experiences. However, they also found that they were difficult to sustain within the context of the volatility of many looked after placements (p. 168).

The relationship between retention of friendships and perceptions of safety is found in both of the above studies. Ridge and Millar (2000) further develop this analysis by identifying a relationship between friendships and social inclusion (p. 170).

Petrie and Simon (2006) found a significant variation between England and Denmark in the frequency of contact between LAYP and their non-looked after friends. The study applied the test of a friend having stayed overnight with them in the previous four weeks, and found a rate of 1 percent in England and 29 percent in Denmark (p. 129).

The stigmatising and excluding outcome of the requirement that CRB checks are undertaken on the families of friends before a looked after young person can stay overnight has been powerfully articulated by LAYP in numerous fora (Children's Rights Director, 2004, p. 20). The above findings appear to provide further evidence of the socially inclusive social work ideology incorporated in social pedagogic models, and the less inclusive ideology of dominant UK social work models.

Friendships and their continuity can also be related to the literature on the impact of placement instability and discontinuity on educational wellbeing examined above. Friendships, particularly those made through school, were found to be frequently disrupted due to placement changes (Sergeant, 2006, p. 17; Jackson and Thomas, 1999, p. 4). The literature review revealed limited research material on friendships and social networks from the perspective of LAYP and their links with safety and wellbeing. In addition, the majority of the comparative studies relate to residential care. Relationships with friends were found to be protective, inclusive and normalising elements that are valued by LAYP.

vii) Relationships with social workers

This section examines the relationship between LAYP and the implications for safety and wellbeing, including an analysis of perceptions of the impact of the corporate parent role and the implications of the managerialist model of UK social work.

Contemporary social policy has continued to place additional responsibility on the corporate parent role in an attempt to improve outcomes and quality of care. Timms and Thoburn (2003) found that LAYP generally differentiated between carers who were responsible for their day to day care and social workers who were responsible for key decisions (p. 15). Thus, it can be deduced that social workers provide the interface between LAYP and the corporate parent role.

Gilligan (2000) notes the paradox that as pressures and complexity of practice have increased, social workers are expected to focus less on their professional judgement and relationships, and to increasingly follow prescriptions (p. 270).

viii) Perceptions of social workers

A much quoted statement from the Care Matters consultation (DfES, 2007a) relates the perspective of LAYP:

There's too much corporate and not enough parenting (p. 12)

There appears to be a general consensus in the literature that consistent relationships between LAYP and their social workers promote good outcomes for children and young people. McLeod (2008) found that LAYP felt that this relationship was important to them, and that they wanted their social worker to be a friend and equal, acknowledging that both statements pose professional dilemmas for social workers. However, on analysis the key components were respect, empowerment and commitment to human dignity, which are consistent with social work values (p. 13).

The amount of time that social workers spend directly with looked after young people remains a key issue in social work. The increase in managerial aspects of the role in the last decade has resulted in procedural tasks being prioritised over direct work with LAYP. Luckock and Lefevre (2008) note that:

It is now exceptional for social workers to undertake direct work with children (p. xvii)

The Children's Rights Director for England (2007e) found that finding the right placement was the most important task of the social worker, and that social workers continue to spend limited periods of time alone with LAYP during placement visits,

impeding their ability or willingness to raise sensitive issues and concerns (Children's Rights Director for England, 2007e, p. 14). This finding highlights a relationship between placement decisions, lack of close confidential relationships with social workers and an inability to share important issues. It also relates to some of the institutional abuse inquiry findings, and cross-references to the analysis of literature on listening in Section 3.1.7. The findings also substantiate the predominant role that LAYP ascribe to their social workers in ensuring their safety and wellbeing.

Le Grand (2007) found some strong relationships but predominantly little or no relationships were formed due to the high turnover rates of social workers and insufficient time allocated to LAYP (p. 15). As noted in Chapter Two, the government commissioned a pilot study to introduce 'social work practices' modelled on general practice, to provide social work services to LAYP (DCSF, 2008c, p. 2). Thus, the pilot will provide an opportunity to measure the perceptions that LAYP have of their social worker under different social work commissioning models.

Thus, some of the expectations that LAYP have of their social workers, in relation to their safety and wellbeing, focus on establishing relationships which facilitate listening and actions relating to identified concerns. The above evidence suggests that these expectations are not consistently met for most looked after young people.

ix) Relationships with carers

In a consultation exercise with LAYP, the Children's Rights Director for England (2004) found that trusting relationships with carers was important for LAYP in feeling safe; conversely, being looked after by carers who they do not know well caused worry and distress for LAYP and made them feel unsafe (p. 19). The key point emerging from the consultation was that unfamiliarity and lack of relationships led to LAYP feeling unsafe.

Developing this theme of familiarity, a predominant finding in the literature on permanence planning for LAYP is the importance of secure attachments between LAYP and their carers. In a review of research with adults who had been formerly looked after in foster care, Schofield (2009) found that relationships within foster families were highly valued and that the continuation of these relationships into adulthood was identified as important (p. 2).

The Secure Base Star model developed by Schofield and Beek (2006) conceptualises the components of effective parenting provided by foster carers, with an emphasis on the facilitation of attachments in permanency placements. An earlier version of the model can be criticised for omitting a domain which denotes the significance of family relationships, but latter versions include a family membership domain which covers foster family relationships as well as relationships with birth families (Beek and Schofield, 2006, p. 35). This model encourages the development of appropriate family attachments (p. 47). Thus, family membership can be seen to extend to a wider group of LAYP than those who require permanency, and it is recognised that different aspects of the family membership domain will apply for each LAYP reflecting the heterogeneity of the LAYP population. Schofield emphasises the interactivity between the domains which are collectively crucial for the wellbeing and social functioning of LAYP (Schofield, 2009, p. 3). In summary, the model can be used to conceptualise the important link between secure relationships with carers in all care contexts and wellbeing; and the link between the dual relationships many LAYP have with their carers and family members, and wellbeing.

Cameron (2007) compares the role of residential care workers in the UK based on the concept of 'responsibility', with the German residential care worker role known as 'betreuer', which translates as:

Someone who cares for you, looks after you (p. 136)

She found that these contrasting models resulted in significantly different experiences of being cared for and that the pedagogic model facilitates staff to relate to LAYP at a deeper emotional level than the English residential care model (p. 136).

The views of LAYP towards physical contact are not well researched. However, the issue has continued to challenge the social work profession in general, and carers in residential care and foster carers in particular. Petrie et al. (2006) found 32 per cent in Denmark, 20 per cent in Germany and 8 per cent of staff in England said they had provided physical comfort through cuddling (p. 78). Petrie et al. (2006) argues that the lack of direct physical contact provided within most aspects of the looked after system in the UK constitutes deprivation for LAYP (p. 155). This finding is important but is based on an analysis of reports from carers rather than the perceptions of LAYP, and was restricted to residential care. However, it provides insight into the

different experiences of LAYP regarding physical contact with their carers across different social work and care models.

3.2.4 Educational wellbeing

The literature on educational wellbeing examined covered the conceptualisation of educational wellbeing and educational outcomes, the role of Personal Education Plans, the relationships between educational and care experiences, and the key characteristics of educational experiences and educational aspirations.

i) Conceptualisation of educational wellbeing

As noted in Chapter One, educational wellbeing is one of the domains in the UNICEF wellbeing indices (UNICEF, 2007, p. 2). This measure extends the definition of education beyond educational attainment to incorporate a more holistic perspective of a child or young person's experience of education (UNICEF, 2007, p. 2).

Key characteristics reflecting the poor educational experiences of LAYP at the beginning of the decade included: high rates of exclusions, being bullied, large periods of schooling being missed, poor levels of attainment and poor outcomes (Social Exclusion Unit [SEU], 2003, p. 12).

Consistent with the New Labour investment model, a relationship was made between poor educational outcomes and future social exclusion (SEU, 2003, p. 9). The model can be criticised for a predominant focus on the future implications of disadvantage and less focus on the immediate impact of poor educational experiences.

As examined in Chapters One and Two, comparative educational outcomes data has been a key tool for measuring the achievement of educational targets and comparing them with the non-LAYP population. The key outcome measure for comparative analysis is the achievement of five A*-C grades at GCSE. Based on these outcome indicators, progress has been made; however, as outcomes for the whole child population have improved the differential between the two groups has remained relatively unchanged (Lepper, 2008, p. 11).

Consistent with many outcome measures for LAYP, the application of contemporary educational measures is subject to critique. It can be contested whether these outcomes, or outcomes based on other educational attainments, are more applicable to LAYP (Lawlor, 2008, p. 16). Such outcome measures can also be criticised for

failing to measure the perceptions and experiences of education that provide insight into LAYP's safety and wellbeing. Outcome measures are also frequently criticised for their failure to account for pre-entry experiences. Stein (2006b) argues that education, careers and health and wellbeing of LAYP will be shaped far more by what happened to them in their home, schools and communities prior to entry.

ii) Personal Education Planning

Personal Education Plans with an individual education target were introduced in 2000 to increase the effectiveness of planning and inter-professional collaboration, with the overall objective of improving educational outcomes. Jackson and Sachdev (2001) in an analysis of research and practice relating to LAYP, found general improvements in educational support but inadequacies in planning and targets setting (Jackson and Sachdev, 2001, p. 3).

The Third Joint Chief Inspectors' Report on Arrangements to Safeguard Children (Ofsted, 2008b, p. 36) also found significant inconsistency in the quality of educational planning arrangements, individual care plans and support with PEPs. This finding is notable in the light of the managerialist ethos that associates increased planning arrangements with improved educational outcomes. Hayden (2005) found approximately half of LAYP participated in educational planning meetings and that achieving meaningful participation in planning was a challenge. However, she also noted that techniques in addition to participation in meetings were being used to develop PEPs with LAYP (p. 347). The study applied a multi-exploratory method to investigate the quality of PEPs; the data on LAYP's participation in educational planning was not published. The literature review found minimal research which links educational planning to improved outcomes and improved educational wellbeing.

iii) Educational Aspirations

Within the context of poor educational outcomes, Boyce (2002) examined educational attainment from the perspective of LAYP and found over half the sample expressed a positive aspiration to achieve academically (p. 10). The study was a consultation exercise, involving 180 LAYP from a diversity of placement contexts, and commissioned by an organisation that supports and represents the interests of LAYP. Milligan and Stevens (2006) also conclude that a significant majority of LAYP wish to participate in education and aspire to achieve academically (p. 96).

Hirsch (2007) undertook an analysis of studies which examined the impact of deprivation on educational attainment on all children and young people, and concluded that children from deprived and non-deprived backgrounds shared an equal belief in the benefits of education. However, children and young people from deprived backgrounds felt anxious and lacked confidence about school. This latter point can be argued to relate to the experiences of many LAYP.

In contrast to the aspirations that many LAYP have to achieve educationally, Jackson and Sachdev (2001) found low expectations and aspirations amongst the professionals responsible for their care and education:

Social workers and teachers generally have low expectations of the educational abilities and potential of young people in care (p. 3)

In a longitudinal study of LAYP who progressed to higher education, Ajayi and Quigley (2006) found the positive role of the corporate parent to be an important variable in progression to higher education (p. 81). Importantly, the study found that whilst their background profiles were similar to the overall LAYP population, participants were differentiated from their peers by being placed with a foster carer who:

Became strongly committed to them and who gave high priority to their education (p. 80)

Thus, the key variable was the relationship between this sample of LAYP and their carers.

Petrie and Simon (2006) found significantly higher rates of staff engagement with LAYP about their education in Germany and Denmark than in England. The researchers attributed the difference to the commitment to education in European social pedagogic education and staff training (p. 125).

iv) The relationship between placement experience and educational wellbeing

Sinclair, Baker, Wilson and Gibbs (2005) found a strong relationship between wellbeing and positive educational experiences:

Life outside the current placement (school) was very important for life within the placement... children who were happy in school did better in their placement (p. 242)

The study found that LAYP who had positive educational experiences were less likely to display socially problematic behaviour, including offending behaviour (Sinclair et al., 2005, p. 242). The study involved 596 LAYP in foster care across seven local authorities using postal questionnaires. The data on school experience was based on carers' perceptions, a limitation of the research due to the potential for bias without an element of triangulation with the views of LAYP.

Jackson and Thomas (1999) note the negative impact of placement instability and discontinuity on relationships with adults and peers at school (p. 67). Gilligan (2009) examines the important social role that education can perform in the development of peer relationships and their contribution to resilience, but also notes the potential threats posed by placement discontinuity (p. 48).

Thus, educational wellbeing appears to have important links with overall wellbeing: the benefits derived from positive educational experiences can incorporate a sense of achievement and sense of inclusion; and educational wellbeing can have a close relationship with positive experiences within placements.

3.2.5 Health and damaging behaviours and risks

This section examines the literature on LAYP's health (focusing on health outcomes), plans, and the prevalence of/potential for risky and damaging behaviours including offending behaviour and going missing from placement.

i) Health

The aim of the search on health was to examine key outcome measures and the experience of LAYP in their own health, including health plans; and the relationship between experiences of health, safety and wellbeing.

The literature on health outcomes includes data on immunisations and routine teeth and health checks, all of which have improved in most local authority areas. In 2008-2009, 84 per cent of LAYP had up to date immunisations, and 86 per cent had teeth checks and a full health assessment (DCSF, 2010). Data on health outcomes including routine health checks, dentistry and immunisations is collected via

Departmental indicators within the Performance Assessment Framework [PAF] (DH, 1999b).

Simon and Owen (2006) criticise this narrow conceptualisation of health and wellbeing, arguing that the health needs of LAYP are invariably multi-faceted (p. 38). Data on a wider range of outcome indicators, for example information on mental health and wellbeing, pregnancy and parenthood, were not routinely collected via PAF indicators (Simon and Owen, 2006, p. 27).

Small-scale research studies have provided data on a broader range of health outcomes. Scott, Ward and Hill (2008) found evidence of predominantly good physical health amongst LAYP that is not dissimilar to the non-looked after population. However, rates of mental health problems amongst LAYP are significantly higher than their non-looked after peers. Gibbs et al. (2005) reported that LAYP aged 11-15 years old were four to five times more likely to have a mental health problem than those living in private households (p. 213). The White Paper, Care Matters (DfES, 2007b) confirms similar proportions of diagnosed mental health problems between the LAYP and non-LAYP populations (p. 6).

Scott et al. (2008) argue that where poor health is experienced by LAYP, it can be frequently linked to socially excluding pre-entry family experiences (Bebbington and Miles, 1989) and the predominantly neglectful and abusive reasons for becoming looked after (DCSF, 2010). In addition to pre-entry variables, placement stability and continuity were found to improve health outcomes, and conversely placement instability and discontinuity were found to impact negatively on health outcomes.

Outcomes for former LAYP are frequently used as a means of evaluating the effectiveness of health care whilst being looked after. It is clearly problematic to draw precise links between health during the period of being looked after and health after young people have left care. Broad (2005) found that one-third of participants felt that their care had had a negative effect on them since leaving care, and two-thirds reported no effect (p. 85). Broad (2005) also found that many former LAYP reported that stress had a significant impact on their health and lives, and that this was attributable to their current circumstances as well as their pre-entry and looked after experiences (p. 90). This study used a combination of structured interviews, semi-structured interviews and focus groups. Broad (2005) notes that although the study focused on health and wellbeing, participants argued that broader issues such as

abuse, violence, bullying, crime and care history also impacted on their health and wellbeing (p. 90).

Thus, although the thesis research is concerned with the looked after experience, it can be argued that the separation of pre-entry, being looked after and post-looked after stages may miss key inter-relationships between the stages.

As examined in Chapter Two, social policy initiatives over the last decade have reflected a commitment to improve health outcomes for LAYP. Recent social policy developments have adopted a more holistic interpretation of the health of looked after young people, by acknowledging the links between secure attachments with carers and social and leisure networks which also promote health and wider wellbeing (DfES, 2007b, p. 6).

ii) Records and plans

Health records have been identified as important to LAYP, principally for having a record of their family health and genetic conditions which may impact on their own health. Health records were found to have been disrupted by placement instability and discontinuity (Scott et al., 2008, p. 39). Variations in the quality of supporting plans and records were noted in The Third Joint Chief Inspectors' Report on Arrangements to Safeguard Children (Ofsted, 2008b, p. 36).

The literature reviewed predominantly focuses on processes and structures that promote better outcomes, and makes minimal reference to health from the perspective of LAYP, their inclusion and participation in their own health. The National Children's Bureau's Healthy Care Programme (NCB, 2010) is an audit and planning initiative designed to improve health outcomes for LAYP, and also covers their participation and inclusion.

The health of LAYP is closely connected with their wellbeing and safety. However, the degree to which LAYP feel included in concerns for their health, which may have a strong bearing on the nature of the relationship between participation, inclusion and health, is generally insufficiently addressed in the literature examined in this review.

iii) Offending behaviour

Simon and Owen (2006) in an analysis of small-scale research studies found that offending rates within the LAYP population were approximately 9 per cent or three times the rate for non-looked after young people (p. 34). Official data for 2009 also reported a similar rate and ratio of caution and conviction amongst LAYP aged 10 to 17 years compared with their non-looked after peers (DCSF, 2009d). In a study of children's homes, Sinclair and Gibbs (1998) found that 40 per cent of young people with no cautions received one after six months of living in a children's home (p. 178).

Similar questions emerge in relation to health to those examined above in Section 3.2.4 on educational well-being. The extent to which offending behaviour is associated with the predominantly poor and excluded backgrounds of many LAYP, as opposed to the looked after experience, is unknown (Hayden, 2007, p. 68). As noted above in relation to education and health, there is a growing body of researchers who claim that insufficient emphasis is placed on the impact of pre-entry variables. This, it is argued, can lead to a disproportionate emphasis and responsibility on the care system to compensate for frequently distressing and abusive pre-entry experiences.

Several issues make offending behaviour whilst being looked after more complex to evaluate. Children and young people may not be convicted of offences committed prior to being looked after until they have entered the looked after system. Some measures may therefore inaccurately attribute offending to the care experience, and not fully account for the impact of pre-entry criminal behaviour (Lawlor, 2008, p. 16). In addition, misdemeanours committed in residential care are more likely to be referred to the police than by families in a domestic context. Thus, some local authority residential care policies may result in more criminal convictions for LAYP than for their non-looked after peers (Lawlor, 2008, p. 16).

Thus, whilst the literature examining outcome measures indicates higher offending rates amongst LAYP, the picture associated with these outcome measures is contested. Additionally, there is little analysis of offending behaviour from the perspective of LAYP, who may have a view on the relative impact of pre-looked after and looked after experiences. The links between offending behaviour and safety and wellbeing are examined below.

iv) LAYP who go missing from placement

The literature indicates that a greater prevalence of LAYP go missing than children and young people who are not looked after. However, the rate that LAYP go missing from placement varies between and within studies. Rees and Lee (2005) found that LAYP were around three times more likely to have run away overnight (30.5 per cent) than young people living with their families (p. 11-12). The study involved 11,000 young people aged 14 to 16 years old, using self report questionnaires. The study covered the total young person population for a defined geographical area, and identified LAYP as a discrete group. The self report methodology has some limitations of reliability, but also has advantages in achieving anonymity, facilitating a large scale study and opportunity for comparative data between LAYP and non-LAYP populations.

In a study of LAYP who had gone missing from foster care and residential care placements, Biehal and Wade (2000) found that more LAYP went missing from residential care than foster care, and that rates of going missing varied significantly from 25 to 71 per cent between residential placements and local authorities (p. 213-214). The research involved mapping 210 LAYP and interviewing 270 LAYP aged 11 to 16 years old who went missing from foster care and residential care placements across four local authorities. The study found comparison between rates of LAYP who had gone missing from foster care and children's homes was problematic due to the use of different data collecting and reporting methods used in the respective placements.

v) The reasons for going missing and risks encountered

The reasons for going missing are complex and multi-faceted. Wade, Biehal, Clayden and Stein (1998) synthesise the reasons into three main categories: young person centred, placement centred and family centred reasons (p. 114). They found that it was rarely possible to identify simple and singular reasons for going missing, describing the reasons for going missing as:

[A] *complex interweave of reasons* (p. 114)

The significant placement-centred reasons were identified as: bullying, feeling unsettled in placement, peer pressure and feeling there were few consequences to going missing. Family centred reasons included: wanting to be with their family, attempting to engineer a return to live with their family, and family related problems.

The person centred reasons included pre-entry and current placement experiences. Pre-entry reasons were frequently linked to poor boundaries at home and adjustment to new expectations; current placement reasons were frequently associated with feeling unhappy, poor attachments to carers and feeling no-one would care if they went missing (Wade et al., 1998, p. 130).

Biehal and Wade (2000) found that the culture and regimes in some children's homes were important variables that impacted on the rates at which children and young people went missing (p. 213-214). This finding can be seen to relate to programme level issues, some of which may be consistent with programme sanctioned abuse (Gil, 1982, p. 10; Stein, 2006a, p. 15).

The key risks identified with going missing were: offending, sleeping rough, sexual exploitation including prostitution, substance misuse, increasing detachment from placement and school, and a weakening of relationships with carers (Biehal and Wade, 2000, p. 217-218). Rees and Lee (2005) found that 8 per cent of the total young person population reported being harmed whilst missing, often associated with sleeping rough or staying with strangers (p. 19). The researchers conclude, however, that there is a need to further develop understanding and conceptualisation of risks related to going missing (p. 20).

In summary, two key relationships emerge from the literature relating to going missing and safety and wellbeing, namely the reason for going missing, and the risk that LAYP are subject to when they go missing.

3.3 Synthesis of Findings from the Literature Review

This section synthesises the key findings from each of the preceding sections, distilling the pertinent points for the thesis study.

3.3.1 Key findings relating to safety from abuse

An estimation of the contemporary prevalence of the abuse of LAYP was found to be highly problematic, due to definitional and methodological problems. Conceptual difficulties in differentiating between terms such as bullying, peer abuse and peer violence make comparison between studies and social policy documentation problematic. The abuse of LAYP can be understood by conceptualising it as an inter-relationship between individual abuse, programme or sanctioned abuse and system outcome abuse.

Historic abuse of LAYP was found to relate closely to powerlessness and social marginalisation. Inquiry reports found regimes in residential care which were insensitive to children's needs, lacked child centeredness and did not listen to concerns of abuse from LAYP. The predominant focus on adults as the perpetrators of abuse has developed into a recognition that other children and young people pose a predominant risk of harm from particular types of abuse. Bullying and the fear of bullying were found to have a significant impact on the safety and wellbeing of LAYP experienced in all placements, but less frequently in foster care compared with residential care.

The limited overall evidence from the literature on LAYP is that most LAYP feel safe, but some do not. Some literature reviewed refers to the perceptions of safety of looked after young people, but often did not specify the reasons for their feeling safe or unsafe. Close trusting relationships appeared to contribute significantly to feeling safe. LAYP felt unsafe in a diversity of placements, thus developing the awareness of risk of abuse beyond historical institutional contexts.

Important differences were found in LAYP's and social workers' expectations about the constituent elements of listening, which often result in LAYP feeling that they are not listened to. Social pedagogic models (more common in European countries than in the UK) explicitly relate effective listening to actions and behaviours that promote wellbeing.

Complaints procedures are predominantly used by LAYP in response to protection issues and a greater awareness of complaints procedures was found amongst LAYP placed in children's homes than those placed in foster care. LAYP generally rate the effectiveness of complaints systems as poor.

3.3.2 Key findings relating to participation

A lack of conceptual clarity was found in the definition of participation ranging from general engagement to engagement in specific decision making, and between participation in strategic service development and decisions about young people's own lives. There is evidence of increased recognition of LAYP as competent social actors, and evidence that they are generally motivated to be involved in decisions about their own lives.

The literature generally reflects poor experiences of participation based on the process and outcomes of the participation process. A lack of synergy was noted between

changes in societal views of children as competent social actors, and experiences of participation in decision making. The power imbalance between adults and LAYP was found to be a key element in this analysis of participation, as it frequently impacts negatively on the effectiveness of the experience of participation and on the lives of LAYP.

Typologies for the measurement of participation have added to the analysis which differentiates between effective and tokenistic levels of participation. The typologies do not fully encompass the complex inter-relationship for LAYP between participation, outcomes, power, engagement, safety and wellbeing.

The process of participation was found to contribute to wellbeing. Effective levels of participation in decision making can facilitate LAYP to share their expertise, which may contribute to placements where they will feel safe and well cared for.

3.3.3 Key findings relating to placement stability and continuity

The differentiation between stability and continuity has improved the conceptual clarity of this aspect of safety and wellbeing, but important inter-relationships between them are evident. The concepts, however, do not apply to LAYP uniformly and need to be examined in light of the heterogeneity of LAYP. Some researchers argue that quality of care in placement is a more pertinent measure of safety and wellbeing than placement stability. Placement instability and discontinuity have been conceptualised as system outcome abuse (Gil, 1982, p. 11; Stein, 2006a, p. 16) and this contributes to the understanding of their abusive impact on LAYP. A good deal of evidence was found that instability and discontinuity disrupt important relationships. Limited literature was available which examined the impact of instability and discontinuity on safety and wellbeing from the perspective of LAYP.

3.3.4 Key findings relating to relationships

The absence of trusting relationships for some LAYP has been historically related to their inability to report institutional abuse. Thus, the absence of trusting relationships may be a risk to ensuring safety, and positive relationships may conversely help to ensure safety. Relationships are at the centre of social pedagogic models, compared with UK managerial social models which generally prioritise procedures over relationships.

Placement instability and discontinuity was found to pose additional threats to the sustainability of relationships; some family relationships were felt to counter the instability and lack of continuity experienced within the looked after system.

The procedural and managerial focus of social work was found to contrast with LAYP's expectations of a close consistent, trusting relationship with their social worker. The dominant, contemporary social work model does not address the deficiencies in listening to LAYP highlighted in Inquiry reports. Importantly, the social work role has a clear responsibility for the corporate parent responsibilities of ensuring safety and wellbeing. The evidence from a broad range of sources found that this expectation, although met in some instances, is not consistently achieved. LAYP have diverse requirements of their emotional relationship with carers, and dual relationships with family and carers can be a cause of tension.

3.3.5 Key findings relating to educational well being

Educational outcomes for LAYP have improved but have not consistently kept pace with improvements in the non-LAYP population. Educational performance measures do not generally reflect LAYP's views on what is important to them, and do not reflect the broader concept of educational wellbeing. There are inconsistencies in the implementation of PEPs, which aimed to strengthen educational planning and subsequently improve outcomes for LAYP. Little research was found that examines the relationship between educational planning, participation and outcomes for LAYP. Some evidence was found that LAYP have similar educational aspirations to their non-looked after peers, and that carers generally do not have high aspirations for LAYP. Those LAYP who progress to higher education are differentiated by having highly committed foster carers. Placement discontinuity and instability impact negatively on educational wellbeing, particularly upon relationships made through school. Important links between positive educational experiences, positive placement experience and overall wellbeing were found.

3.3.6 Key findings relating to health, and damaging behaviours and risks

Health outcome measures for LAYP generally show some recent improvements, but these measures are limited in the range of phenomena they capture. LAYP experience disproportionately higher rates of mental health problems compared with their non-looked after peers. Former LAYP also report higher levels of stress, which they often link to pre-entry and looked after experiences. Family health records are highlighted as being important to LAYP, but are sometimes incomplete or non-existent and often adversely

affected by placement instability and discontinuity. The review found little evidence of LAYP being active participants in their own health care.

Offending rates for LAYP are significantly higher than for the non-looked after population, and links between pre-placement offending and offending during placement remain unclear. The looked after system may be held disproportionately responsible for behaviour which can be tracked back to pre-entry behaviour and pressures. Some local authority procedures may disproportionately criminalise some behaviours in comparison to non-LAYP living with their families.

The prevalence of LAYP going missing from placement is significantly higher than for non-LAYP, and higher for LAYP in children's homes compared with foster care placements. The reasons for going missing are predominantly multi-dimensional, inter-related and include young person, family and placement based reasons. The key relationships to safety and wellbeing can be identified as the direct risks encountered whilst missing; the impact of detachment and disengagement from going missing; and the underlying reasons for going missing.

3.4 Reflections following the Literature Review

The study adopted a narrative review strategy in synergy with the epistemological assumptions of the study, responsive to the changing policy and legislative context of the research area. Narrative and systematic review strategies are often compared to explain both strategies: systematic reviews tend to adopt a relatively narrow focus and are often less comprehensive than narrative reviews (Gilbert, 2008, p. 68); and sources incorporated into narrative reviews are likely to be broader than those covered by systematic reviews. A narrative review was adopted to maximise the contribution of a diverse range of sources to the analysis of safety and wellbeing, consistent with the five sources of knowledge identified in Section 1.0 (SCIE, 2003, p. 30). The narrative strategy is also suited to the inductive relationship to theory formulation, and to the interpretative epistemological perspective adopted. The following issues arising from the review relate to the five sources of literature examined, offering a critique of each one in relation to coverage and relevance to the thesis.

i) Research: Relatively little primary research was found on the topic of safety and wellbeing of LAYP which focuses on the perceptions of LAYP. There is a general lack of research on institutional abuse but some contemporary research on peer abuse; the former topic is addressed largely through official Inquiry reports. There is

a gap in research which examines adult perpetrated abuse, and a gap which examines individual, programme sanctioned abuse and system outcome abuse. There is a developing body of research on participation, although relatively little research that examines the impact and outcomes of participation for LAYP. There is a growing research base which has examined the perception of LAYP about their experience of being looked after.

ii) Policy: A good deal of outcome data was available through policy sources. However, the predominant focus on identifying and measuring outcomes in this literature is subject to critique, and generally does not communicate the perspectives of LAYP. The literature was highly dependent on reports of inquiries into the abuse of LAYP and government policy documents. The outcome of consultation exercises have become an important source of the perspectives of LAYP. Although consultation exercises may use similar methods to that of research, it was not clear whether the methodological and ethical standards of social research were applied, thus affording them the status of 'policy' and not 'research'.

iii) User knowledge: Organisations representing LAYP have adopted an important role in the communication of the perspective of LAYP on the research topic. Additionally, consultation exercises have also been a key source of user knowledge on the topic. Similar questions to those raised above apply, relating to the methodological and ethical standards applied to consultations and the consequent rigour involved in the design and application of these studies.

iv) Practitioner knowledge: Relatively little practitioner knowledge was found on the research topic. This, combined with the thesis focus on the perceptions of LAYP, meant that this source was the least relevant and productive in eliciting material for consideration in this review.

v) Theoretical knowledge: The contribution of knowledge from theorists was an important source of literature, and aided the development of conceptual and theoretical frameworks in this study.

The research aims and objectives were revisited in light of this review. A relatively small amount of literature was found on both safety and wellbeing from the perspective of LAYP. Thus the review confirmed that the research topic was under-researched and the aims of the study were appropriate. The preliminary framework on safety from abuse and

wellbeing was also reviewed and found to be appropriate for conducting the research, organising the thesis and analysing data. The frameworks' domains (Chapter One, Table 1.5) provided a useful structure for examining the literature on safety and wellbeing; and the additional focus of the study (Chapter One, Table 1.6) provided an explicit focus within each of these domains.

Section 2: The Research Study

Chapter 4: Research Design and Methods

4.0 Summary

This chapter focuses on the design and methods of the primary research with LAYP undertaken in the study. It starts by examining the contemporary context of research with vulnerable groups of children and young people; it explains the adoption of the interpretivist epistemological perspective, the inductive approach adopted to knowledge and theory generation, the inclusion of young people in the research, the literature review search strategy and the principles of reflexivity applied in the research. The study adopted a case study design, and the research was applied social research and used structured and semi-structured interview methods to collect quantitative and qualitative data. The measures applied in the study are examined and the development of a typology for the measurement of participation is explained. Key ethical considerations of consent, confidentiality and avoidance of harm are examined. The chapter ends with an explanation of the dissemination of the findings, and of the data analysis techniques used in the study.

4.1 Theoretical and Epistemological Considerations

This section explains the theoretical and epistemological issues relevant to the topic, and how these informed the study design and methods. As examined in Chapter One, significant contemporary developments have influenced how children and young people are viewed within research practice. This reflects wider societal changes, and essentially represents a shift from young people seen as objects of research to a perspective where they are regarded as competent experts of their own worlds and active participants in research (Alderson and Morrow, 2004, p. 10). McLaughlin (2007) links developments in respecting service users' perspectives in social work to the growing importance of the user focus in research (p. 90). There has been a consequent increased participation of young people in research. The thesis study embraced this perspective and was committed to the inclusion of LAYP, and for their expertise to be respected and valued. Greater involvement of young people in research can:

Rescue them from silence and exclusion and being represented as passive objects (Alderson, 2000, p. 24)

All aspects of the primary research were designed to achieve effective involvement of and communication with LAYP. The engagement of a young person consultant to the project helped to ensure that the design of the research was responsive to the diverse needs of participants. This aspect is examined in Section 4.1.4.

4.1.1 The interpretivist paradigm

As noted in Chapter One, the research aimed to investigate the experiences and perceptions of LAYP relating to their safety and wellbeing. It was therefore essential that the epistemological assumptions of the research were consistent with and subsequently promoted these aims. The interpretivist paradigm discounts the scientific notion of objective facts in the study of social research and presupposes that reality is a social construct, assuming:

Knowledge is then not something 'out there' to be discovered but something derived and created from the experiences of the social actors
(McLaughlin, 2007, p. 29)

Interpretivism is generally explained by contrasting it with positivism, which seeks causality, and is based on the premise that the role of social research is to develop abstract theory (Gilbert, 2008, p. 138). Gilbert (2008) also argues that whilst purist positions exist regarding these two paradigms, there is a more flexible and pragmatic approach that can be adopted whereby researchers see the value of both approaches (Gilbert, 2008, p. 137-138). Thus, the two paradigms can be conceptualised as existing at different ends of the same continuum, with various points along the continuum that can be chosen as appropriate for the study in question.

The interpretivist perspective was applied, being consistent with the research aims, and enabling the researcher to examine the socially constructed world of LAYP. Interpretivism also requires the researcher to place the interpretations of the social world of the participants into a theoretical framework. Thus, the theoretical stance adopted by the researcher could impact on their interpretation of the research participants' contribution to the research.

Interpretivism does not preclude the inclusion of other perspectives in the research. However, the aim of the research was not to investigate other people's perspectives or compare the views of LAYP with others, for example social workers or carers. This feature could be criticised as a failure to consider others' perspectives. However, it is

argued that the views of LAYP have validity in their own right and do not require comparison with other groups to validate them. In addition, it is argued that this aspect of the research contributes to the promotion of LAYP's inclusion in policy and practice development, a key gap noted in Chapter Two.

4.1.2 Inductive research

As noted in Chapters One and Three, the research adopted an inductive approach to knowledge and theory generation consistent with the epistemological assumptions of the interpretivist paradigm, discussed above.

The inductive approach is commonly contrasted with the deductive approach to knowledge and theory formulation. The deductive approach is generally seen as compatible with the positivist paradigm where theory is formulated before the research is undertaken, whereas theory is formulated as an outcome of the research in the inductive approach (Bryman, 2008, p. 11):

Interpretivist researchers are more likely than deductive researchers to change their view on theory or literature as a result of the analysis of data (Bryman, 2008, p. 94)

One advantage for the study was that inductive approaches facilitate a flexible and responsive form of knowledge and theory generation. Thus, the inductive approach was applied to develop knowledge and theory of safety and wellbeing, and to contribute theory and knowledge to the contemporary safeguarding debate.

4.1.3 The application of grounded theory

Consistent with the inductive approach to knowledge and theory formulation, the research adopted grounded theory for data analysis and the generation of knowledge from qualitative data derived from the research. Grounded theory is widely applied to the analysis of data, which emerged from the work of sociologists Glaser and Strauss (1967). This framework countered the scientific methodological and epistemological assumptions dominant in the middle of the last century (Charmaz, 2006, p. 6). Corbin and Strauss (2008) develop Glaser and Strauss's original work by applying the term:

[...] in a more generic sense to denote theoretical constructs derived from qualitative analysis of data (p. 1)

This definition in part responds to doubts that grounded theory actually results in the formulation of theory. A key advantage of grounded theory is that it provides a systematic and coordinated procedure for data analysis and theory generation. One disadvantage is the belief that it is unrealistic to be expected to suspend pre-existing theory and assumptions during its application (Robson, 2002, p. 192). The application of grounded theory for data analysis will be examined in Section 4.4.

4.1.4 The involvement of service users in research

Dominelli and Holloway (2008) highlight the importance of placing service users in a central position within research design, including:

The pre design stage, data collection, analysis and dissemination...
(p. 1021)

The application of the concept of 'user involvement' in research has been subject to a lack of conceptual clarity, as it may refer to inclusion in research as participants and research subjects, or inclusion in the research process for example in the design, planning and implementation of the research.

The study aimed to involve LAYP by employing two strategies incorporating both positions. First, the research asked LAYP their views on their safety and wellbeing, thus respecting their own experience and expertise. Second, a young person was engaged in the design of the study to ensure service users' views were gathered and incorporated into all stages of the research. One limitation of the consultancy relationship is that the researcher retains power in the relationship with no guarantee that the views of the consultant will be acted upon (McLaughlin, 2007, p. 97). The researcher was aware of this limitation and mitigated the power imbalance wherever possible.

4.1.5 The literature review search strategy

The search strategy adopted for the review of literature on safety and wellbeing was complex, for two related reasons. First, the diversity of the elements covered by the preliminary framework for safety and wellbeing of LAYP, all of which required examination in order to meet the aims of the research; and second, the range of search strategies employed to access this diverse range of sources and cover these elements (SCIE, 2003, p. 30). Applied Social Science Index and Abstracts [ASSIA] and Social Care Online (care data) databases produced the most effective results for the review.

Some important sources of views of LAYP were not accessible via databases and required individual searches.

4.1.6 Reflexivity

Reflexivity denotes an awareness of social research as a social process and a social activity, with the ability to demonstrate and reflect upon the factors which have contributed to the social production of knowledge (Jupp, Davies and Francis, 2006, p. 169). Two key elements of reflexivity can be identified which are pertinent to the research. First, reflexivity allows an assessment to be made of the impact of the design and conduct of the research on the validity of the research (Jupp et al., 2006, p. 169). Second, the process encourages researchers to reflect critically on knowledge generated by the research and take into account the notion that:

Knowledge is made rather than revealed (Taylor and White, 2000, p. 199, cited in McLaughlin, 2007, p. 37)

Reflexivity in social research can be related to the established practice of reflexivity in social work practice, which also differentiates between reflection in the action of practice and reflection on practice (Thompson, 2005, p. 146). The Economic and Social Research Council [ESRC] (2005) upholds the expectation that researchers in social work should be able to demonstrate their ability to reflect on their own and others' roles in the research process (para. 4.1). As it could be predicted that the research was likely to involve complex social processes, it was considered that the application of reflexivity to the process and the knowledge generated from the research would be beneficial.

4.2 Research Design

This section explains the rationale for the design and selection of research methods adopted in the study.

4.2.1 The case study design

The research applied a case study design in order to facilitate an intensive examination of a sample of LAYP within the CSLA. This setting equates with the most common use of the case study design, invariably a location such as a community or organisation (Bryman, 2008, p. 53). Robson (2002) considers the case study to be a flexible research strategy, designed to:

Develop detailed, intensive knowledge about a single case or small number of related cases (p. 89)

Robson (2002) identifies a further characteristic as retaining the case in context (p. 89). The context is an important feature for the research, as the study was focused on a specific local authority looked after population. The case study design also facilitates the application of a range of data collection methods (Robson, 2002, p. 36), an advantage for this study which is examined later in Section 4.2.5. The corresponding disadvantage of the design is that it makes generalisation of findings more problematic (Gilbert, 2008, p. 36). As the study did not aim to generalise the findings, this limitation was not considered relevant to the study:

It is not the purpose of the research design [case study design] to generalize to other cases or to populations beyond the case (Bryman, 2008, p. 57)

The case study design can be contrasted with experimental designs which are frequently referred to as the randomised experiment, or randomised controlled trial [RCT]. Within this model, research participants are randomly assigned to an experimental group which receives the intervention, or a control group which does not receive the intervention (Robson, 2002, p. 116). One of the main arguments in favour of experimental design is that it provides 'hard evidence'. It is therefore frequently supported by proponents of evidence-based social work practice who argue for a scientific and rational base for social work knowledge. Thus, it can be argued that the positivist epistemological assumptions found in experimental designs can be contrasted with the interpretivist paradigm adopted for the research.

McLaughlin (2007) argues against the use of experimental design due to the complexities of many social work contexts, making control of the environment problematic (p. 77). D'Cruz and Jones (2004) question the extent of the demand for measurement in social work and highlight the ethical implications of 'manipulating' research participants in order to fit such research parameters, emphasising the need for research designs that promote anti-discriminatory and anti-oppressive practices (p. 97).

The experimental design was not adopted for the research as these criticisms have considerable strength; it is not compatible with the aims and objectives of the research and not consistent with the aim of investigating the views of one group (the sample of

LAYP in the CSLA). The epistemological assumptions of the experimental design were not consistent with the interpretivist epistemological paradigm adopted by the research.

4.2.2 Applied social research

As noted in Chapters One and Two, there is an identifiable dissonance between the formulation and implementation of social policy in the UK concerning LAYP. The research design recognised this phenomenon and aimed to contribute to this debate; a key objective of the research was to identify the implications of the findings for policy and practice. The CSLA was also committed to applying the findings to develop local policy and practice for LAYP (see Chapter One). Clarke (2001, p. 31) cites Rossi and Whyte (1983) as stating:

Applied social research consists of the application of sociological knowledge and research skills to the acquisition of empirically based knowledge of applied issues (p. 8)

Rossi and Whyte (1983) focus on the application of sociological knowledge within the applied social research model. However, the research aimed to develop a broader range of knowledge and theory relating to the safety and wellbeing of LAYP, with the objective of contributing to the contemporary safeguarding debate. The Social Care Institute for Excellence [SCIE] (2005) emphasises the importance of social care research in generating knowledge which can be effectively applied to practice; and the increased likelihood of this occurring when research is based on clear knowledge and understanding of the practice that it is aiming to improve (p. 13). This was a key concern for the CSLA in the research.

It is argued that the design of the study is based on the topical relevance of safety and wellbeing for LAYP outlined in Chapter One, examined in-depth in Chapter Three. Both chapters identify policy and practice issues that require change. The rationale behind the research aim of informing safeguarding policy and practice was the contribution to reducing this dissonance between policy formulation and implementation for LAYP.

4.2.3 Research method

A data collection method was adopted combining a structured interview schedule with a semi-structured interview technique consistent with the case study design, the aims and epistemological assumptions of the research. The aims and topic of the research required a method where interaction between researcher and participant would be

achieved. Thus, non-interactive methods, including questionnaires, were considered inappropriate.

The researcher initially considered the use of focus groups and interviews as epistemologically appropriate methods consistent with the research aims and objectives and the case study design (Robson, 2002, p. 89). Focus group methods comprise a group interview involving a small number of participants who share key characteristics, facilitated by a researcher. The method uses interaction between group members to achieve a joint construction of meaning (Bryman, 2008, p. 474). These interactive elements were felt to be appropriate to the research topic and the potential needs and characteristics of the participant group although confidentiality between participants would have posed an ethical issue. However, the method was rejected due to the practical difficulties of convening a focus group of looked after young people within the Case Study Local Authority who simultaneously met all of the inclusion criteria set for the research. Meeting the criterion of having recently left a looked after placement proved to be particularly problematic, as the flow of potential participants who met the sampling criteria was variable and inconsistent.

The interview method has the advantage of enabling social interaction between the researcher and research participant. The personal nature of the research topic highlighted the need for face to face contact and personal interaction. The researcher's ability to pick up verbal and non-verbal communication from the young person was an important consideration in this decision, as it could be used by the researcher to help the participant feel comfortable and allow the researcher to identify any signs of distress or discomfort (see also Section 4.2.11). The disadvantages of the method include a potential lack of standardisation between interviews, which can raise questions of reliability. In-depth individual interviews are also frequently time-consuming, deterring some potential research participants, and resource intensive (Robson, 2002, p. 273). The method does not allow the benefits of interaction between participants provided by the focus group method. However, based on an analysis of the advantages and disadvantages, and in consultation with the young person consultant, the interview method was selected as the most appropriate research method for this study.

4.2.4 The combination of structured and semi-structured methods

Types of interview methods are frequently differentiated by the extent to which structure is applied to the interview format (Gilbert, 2008, p. 246). A key consideration in selecting

the degree of structure was that it should allow the research to be responsive to the diverse levels of understanding and communication requirements amongst the sample.

The research schedule comprised a set of questions contributed by the researcher, the LAYP consultant and the CSLA. The CSLA had previously used a LAYP satisfaction survey (Viewpoint, 2001) and was interested in developing some of the questions associated with this feedback system. The design of the interview schedule therefore required an element of compromise in order to achieve the research aims and accommodate views of key stakeholders. As a result, a large number of questions were formulated to achieve this synthesis of topics, and specific issues identified.

The structured interview method has the advantage of accommodating large numbers of questions within a standardised structure. Alternatively, an unstructured interview format has the advantage of enabling flexible communication techniques, but the disadvantage of achieving little standardisation (Robson, 2002, p. 270). The semi-structured interview method, also known as a semi-standardised interview method, is located between structured and unstructured methods; the interviewer has a list of questions or topics to follow but has discretion to be flexible and introduce prompts into the interview as required (Bryman, 2008, p. 438).

A combination of a structured interview schedule and semi-structured techniques were employed. A formal interview schedule was used to ensure all of the questions were covered in the interview; the semi-structured method was used to help participants understand the question, allowing prompts for further comment in order to develop the depth of qualitative data generated.

At the design stage, the researcher considered the possibility of introducing an additional research method in order to vary data sources and achieve triangulation. A number of methods, including documentary analysis of case files, were considered. However, it was concluded that this method was not consistent with the aims of the study in investigating the views of research participants. Whilst triangulation of data from interviews and focus group methods would have been consistent with the aims of the study, focus group methods were not employed for the reasons examined above. Thus, the combination of the research aims, the epistemological assumptions of the research and the logistical constraints of the study resulted in the outcome of applying one research method.

4.2.5 Mixed methods

The term 'mixed methods' is applied where two or more methods are used, or two or more types of data are collected within a research project (Gilbert, 2008, p. 126).

The use of qualitative and quantitative data historically reflects the polar opposite epistemological positions of induction and deduction, positivist and interpretivist approaches. A more flexible and pragmatic approach to these differences has evolved and a renewed interest in mixed methods has developed (Gilbert, 2008, p. 127).

The study used a single interview method which combined the collection of quantitative and qualitative data. The use of mixed methods within the case study design was felt to be compatible and appropriate:

Case studies are frequently the sites for the employment of both qualitative and quantitative methods (Bryman, 2008, p. 52)

Gilbert (2008) differentiates between the integration of methods where each data set is given equal weighting, and a combination of methods where one set is given higher priority (p. 135-136).

The study adopted an integrated approach as both methods were complimentary and each contributed to investigating the views of research participants on their safety and wellbeing.

A consistent format was followed for each interview. Each participant was asked each question from the structured interview schedule. Participants' responses to these questions were recorded manually by the researcher during the interview. The semi-structured method was applied to assist the participant in understanding the question where necessary, and to invite commentary and expansion of responses to the structured questions. All but one of the interviews were also audio-recorded and transcribed. The completed research schedules therefore generated quantitative data (relating to participants' responses to the structured questions) and qualitative data (relating to participants' additional, free form responses). Thus, two data sets were generated by the study and were subsequently subjected to analysis (see Section 4.4).

The study could be replicated by another researcher who utilised the research schedule and applied similar techniques for clarifying questions and prompting expansion of responses (see also Section 8.1.4).

4.2.6 Formulation of the interview schedule

May (2002) claims that successful interview studies are:

Fundamentally dependent on the prior construction of a theoretically informed and user friendly interview schedule (p. 2002)

The interview questions were formulated with an awareness of the intrusive potential of this type of research, and sought to minimise intrusion for participants (Social Research Association, 2003, p. 25).

The process of formulating the interview questions involved three, non-linear stages:

- i. The interview questions were designed to reflect the research aims and objectives, the epistemological assumptions of the study, the outcomes of an initial literature review and the preliminary framework for safety and wellbeing (see Chapter One).
- ii. As Miles and Huberman (1994) advocate, the process of formulating interview questions should ensure that prospective participants and researchers reach explicit agreements about shared expectations of the research (p. 47). The views of the researcher, the CSLA, the young person consultant to the study and the research ethics committee's recommendations and requirements influenced the content of the interview schedule and reflected a degree of compromise between stakeholders.
- iii. It was critical that the interview schedule would facilitate data collection in a manageable form to enable effective data analysis (May, 2002, p. 2004). Each of the interview questions was preceded by an opportunity for participants to comment freely without reference to a measure or indicator. This element of the research schedule was designed to maximise the benefits of the interpretivist paradigm and generate qualitative data.

4.2.7 The use of measures and indicators

Measures are essentially used where responses can be relatively and unambiguously counted, whereas indicators are used to tap less quantifiable concepts (Bryman, 2008, p. 145).

A small number of measures were used in the interview schedule to collect essentially factual data; indicators were applied to collect both qualitative and quantitative data. Indicators can be differentiated between single and multiple indicators. Some single indicators were used, such as a simple closed question where it was felt this would help achieve clarity on a complex issue. The potential disadvantage of single indicators is that they can be over simplistic and generalised. Correspondingly, multiple indicators (for example Likert scales) were used which incorporate several indicators to provide a wider range of potential issues to be examined relating to specific concepts (Bryman, 2008, p. 147). Thus, a combination of single measures and multiple indicators were used in the study.

As noted in Chapter Three, existing typologies for the measurement of the effectiveness of participation were criticised for failing to take sufficient account of the variables that explicitly impact on the participation of LAYP. Thus, a typology was developed by the researcher which measures the inter-relationship between participation, the outcomes of participation for young people, the power differential between adults and LAYP, and engagement as opposed to disengagement and detachment (see Figure 4.1, and Appendix 23). The concepts of exit and voice examined in Chapter Three were applied to measure the overall outcomes and impact of participation.

Figure 4.1: Typology for measuring the effectiveness of LAYP’s participation in decision making

Degree of participation	Propensity to exit or voice?	Impact on safety and wellbeing
Stage 5: LAYP achieve voice-influence and bargaining power, feel fully involved in decision making, a creative dialectic occurs with adults, outcomes reflect & develop their contribution	Exit 1 2 3 4 <u>5</u> Voice	Low 1 2 3 4 <u>5</u> High
Stage 4: LAYP are consistently involved in decision making, feel listened to, make decisions in partnership with adults, see outcomes that reflect their contribution	Exit 1 2 3 <u>4</u> 5 Voice	Low 1 2 3 <u>4</u> 5 High
Stage 3: LAYP are generally involved in decision making, generally feel listened	Exit 1 2 <u>3</u> 4 5 Voice	Low 1 2 <u>3</u> 4 5 High

to, generally feel they have some impact on outcomes		
Stage 2: LAYP have little involvement in decision making, sometimes feel listened to, see little evidence that they have any impact on outcomes	Exit 1 <u>2</u> 3 4 5 Voice	Low 1 <u>2</u> 3 4 5 High
Stage 1: LAYP do not feel involved in decision making, do not feel listened to, are likely to disconnect and disengage.	Exit 1 <u>2</u> 3 4 5 Voice	Low 1 <u>2</u> 3 4 5 High

4.2.8 Access to research participants

Whilst attitudes to listening to young people and perspectives towards young people as research participants have developed in the last decade, some researchers have experienced conflict between these approaches and the practicality of gaining access to LAYP for research purposes.

Hepinstall (2000) undertook research with LAYP and found variation in access between the two Social Services Departments involved. She concluded that barriers to access were often based on adults' perceptions of LAYP as requiring protection from research, with the outcome that some potential research participants were prevented from participating in research (p. 868). Gilbert (2008) identifies the professionals and administrators who play this role as 'gate keepers' and acknowledges the critical role they play in allowing or preventing participation in research (p. 152). The ethical implications of protection from and inclusion in research are examined in Section 4.3.

The researcher did not generally experience problems in gaining access to potential research participants as access was an element of the original agreement for the research between the researcher and the CSLA. However, the sampling method did result in some potential manipulation by the CSLA, whereby the authority could identify those LAYP whom they felt met the inclusion criteria for the study.

4.2.9 Sampling

The sampling frame comprised all LAYP who met the inclusion criteria for the study. The inclusion criteria set for the study were as follows:

- i) All participants will have recently (previous 3 months) left a looked after placement. The CSLA contacts the researcher as soon as a placement move/change occurs;

- ii) A placement is defined as a looked after episode of 24 hours or more;
- iii) All participants participating in the research will have been looked after by the CSLA during their last placement;
- iv) All participants would be within the age group of between nine years and eighteen years;
- v) Children and young people with a diagnosed learning disability would not be included in the study. It was acknowledged that this group would have important views and experiences that would benefit from research in its own right. In addition, the need for a fully accessible and inclusive design and approach to research involving LAYP with a learning disability was considered to be beyond the scope of this study.

The sampling method attempted to militate against bias as far as possible, such that:

- All LAYP who met the inclusion criteria were referred to the study;
- There was no attempt to manage the sample in order to reflect the characteristics of a larger population – for example the CSLA whole population, which would be consistent with quota sampling;
- There was a random element to sampling in that there was no control or influence over which child or young person from the whole looked after population in the Case Study Local Authority would leave a placement and subsequently meet the inclusion criteria for the study.

The sample was selected using purposive sampling where potential participants are selected on the basis of a particular characteristic. This is a widely used method in qualitative research where insight is sought into a target population where criteria are applied (Gilbert, 2008, p. 512). Thus, the target population was those LAYP who fulfilled the above inclusion criteria.

4.2.10 The pilot study

A pilot or pre-test is generally undertaken in the early stages of research design, for example, to test the interview schedule and establish whether any questions cause discomfort or are difficult to understand, and the overall response to the interview (Bryman, 2008, p. 247).

A pilot study was undertaken with a young person who met the inclusion criteria for the study, resulting in the addition of several questions and revision of terminology. The

interview schedule originally included the option for participants to draw a picture that communicated a message about their looked after experience. Feedback from the pilot study indicated that the combination of the questions and graphic would be too demanding, so this element was dropped. The pilot would have benefited from experimentation with open and closed questions, to test out the relative benefits of each technique.

4.2.11 Conducting the interviews

Alderson and Morrow (2004) argue that ethical considerations inform the best of effective research practice, including the use of active listening to demonstrate mutual respect and the principles of inclusion (p. 52). Thus, it is essential that the conduct of the researcher reflects an integration of ethical principles.

May (2002) refers to the principle of securing the help of strangers, and identifies the need for the researcher to have a strong belief in the value of the study and a warm but persistent approach (p. 21). It was felt that the researcher would need to project a strong commitment to the research and be persistent in securing participant interviews.

As noted earlier in Section 4.2.2, achieving an understanding of how LAYP communicate most effectively was a fundamental consideration of the interview design. O’Kane (2000, p. 136) identifies the power imbalance between the researcher and young person as having an impact on communication. Thus, establishing the right of the young person to participate or not participate was an important part of the process of establishing the power of the participant. Careful consideration was given to verbal and non-verbal communication in order to pick up and respond to cues given by the young person. Active listening techniques were used to ensure the participant felt their views had been heard and understood by the researcher. The venue of the interview was also important, as it needed to provide a combination of privacy and sufficient transparency to ensure both participant and researcher felt safe. Proximity between researcher and participant was known to be important, therefore seating arrangements were made where researcher and participant were on the same level, not too close and not too distant (Alderson and Morrow, 2004, p. 52). Permission was sought from each participant for the interview to be tape recorded, explained in an introductory letter (see Appendix 2). Continuation of the interview was not contingent upon this permission being obtained.

4.3 Ethical Considerations

The study required ethical approval from the University Departmental Research Ethics Committee and the CSLA Research Ethics Committee.

Applying Alderson and Morrow's (2004) model of respect, inclusion and protection (p. 62-63), it is felt that the ethical approval process placed a greater degree of scrutiny on the protection implications for potential participants, than on the inclusive and emancipatory benefits of their participation in the research. In addition, the University Research Ethics Committee initially required clarification that the researcher was independent from the CSLA and would not be subject to pressure in any respect. Revised documentation was submitted which addressed the balance of inclusion and protection and confirmed the researcher's autonomy. Approval was subsequently granted by both the University and the CSLA.

4.3.1 The use of ethical frameworks

Ethical codes are commonly used to provide guidance on ethical practice for researchers. The Research Governance Framework for Health and Social Care (DH, 2001) had not been fully implemented by the ethical approval stage of the study, hence the research applied the British Association of Social Workers [BASW] Code of Ethics (2002). The Joint University Council Social Work Education Committee [JUCSWEC] (2010) Code of Ethics for Social Work and Social Care Research has subsequently been published, but was not available at the time of the research. The researcher is a qualified social worker, registered with the General Social Care Council [GSCC] and a member of the British Association of Social Workers, and is therefore subject to the GSCC code of practice and BASW Code of Ethics (2002). The BASW Code of Ethics (2002) comprises a series of statements differentiated by values and principles, summarised as follows:

Social work practice should both promote respect for human dignity and pursue social justice, through service to humanity, integrity and competence (BASW Code of Ethics, 2002, para. 3.0)

Banks (2004) differentiates between ethical principles, ethical aims and ethical rules which state how the principles should be achieved (p. 109). The BASW Code of Ethics (2002) is based on a slightly differing conceptualisation involving ethical principles and duties that are consistent with Banks's conceptualisation of ethical rules (2004, p. 108). Social workers undertaking research are expected to comply with both the general values and principles of this Code and, additionally, to the specific ethical responsibilities attached to the research task (see Section 4.4.4).

Domminelli and Holloway (2008) criticise a number of ethical frameworks and protocols applied in social work research and practice for perceiving vulnerable groups (including children) as subjects of research, and for their primary focus on the accountability of funders and regulators rather than on the participants (p. 1013-1018). Alderson and Morrow (2004) also criticise traditional ethical frameworks based on duties, rights, utilities, harms and benefits, arguing that these traditional approaches do not sufficiently address the contemporary research context with children and young people:

If social research ethics is to review complex details seriously, it has to take greater account of relationships, power and emotions (p. 55)

O’Kane (2000) undertook research that focused on facilitating looked after children to express their views about decisions which affect them. She acknowledges that participatory approaches can be applied to a broad diversity of research settings, and used a strategy for addressing power imbalances. She uses participatory techniques that enable children and young people to talk about the issues that affect them, explaining that effective participatory research is not limited to techniques alone but requires:

A commitment to ongoing processes of information sharing, dialogue, reflection and action (p. 137)

O’Kane (2000) considers that participatory approaches are consistent with the interpretivist perspective and fall within the post-positivist or constructivist paradigm (p. 137).

Thus, several commentators argue that the use of participatory methods can help resolve a number of ethical dilemmas in research with children, and can also enhance the validity and reliability of research findings consistent with the aims of the research.

4.3.2 Achieving a balance between inclusion in research and protection from research

As noted in Chapter Two, current and former looked after young people were categorised as a socially excluded group by New Labour immediately after their election in 1997.

Alderson and Morrow (2004) note that children and young people are one of the groups most excluded from research (p. 60). Some of the reluctance to include LAYP in research can be attributed to the perception of them as a vulnerable group with a homogenous need for protection. Thus, some of the arguments for protecting young people from research translate into practice where adults are more likely to alert children to risks associated with research and be more confident in refusing to participate or withdraw from research than young people; and that children and young people may be less resilient to harm from research (Alderson and Morrow, 2004, p. 60). However, as noted above, the benefits of young people being heard through their participation in research is generally accepted as a positive development. Thus, Alderson and Morrow (2004) suggest that the focus of concern for children's involvement in research should be:

Less on children's supposed vulnerabilities... but more on how to design ethical, lower risk research with children and young people
(p. 61)

The research design attempted to achieve a responsible, ethical balance between protection and inclusion, guided by the principle that looked after young people have the right to participate in research designed to hear their views. The research design attempted to incorporate strategies which, whilst recognising potential risks, sought to identify, manage and subsequently lower these risks.

4.3.3 Protecting and supporting research participants from potential harm

The researcher accepted full responsibility for protecting participants as far as possible from potential harmful effects of the research. It is accepted that consent from participants and parental consent does not absolve the researcher from the obligation to protect participants from harm resulting from participation in the research (The Social Research Association, 2003, p. 35). Stress and/or loss of self esteem are identified as potential causes of harm which may be applicable to participation in research (The Social Research Association, 2003, p. 35).

The researcher's knowledge of the field of research indicated that some participants would have had distressing childhood experiences, potentially prior to or whilst being looked after. It was therefore important for prospective participants to be fully informed about the research in order to make a decision about whether or not to participate. Participants were provided with comprehensive information about the research at the

point of initial contact in the form of a letter, and again at the start of each interview. It is important to ensure that research participants are protected from abuse by interviewers. The researcher undertook all participant interviews and had a clear enhanced Criminal Records Bureau check, which offered some degree of reassurance that the researcher was safe to interview LAYP.

The research design acknowledged that some questions would refer to emotionally sensitive issues. Two methods were identified for responding to potential emotional distress. The first was to use an empathetic and sensitive interview style, within which signs of upset would be discussed in the interview, with time available after the interview to help resolve distress. It is recognised that research interviews in this field, based upon interpretivist epistemological principles, have the potential to generate highly emotional responses and feelings in participants. Lee-Treweek (2000) considers that researchers in this context require the skills to deal with this level of emotional intensity, and occupational groups such as social workers tend to have:

A well defined role through which to understand and organize their responses to the distress of those they meet (p. 128)

Thus, the research design anticipated intense emotional responses from some participants. It was felt that the researcher's professional social work skills would assist in managing this element of the research safely and productively for participants, who were also provided with the option to contact the researcher to further discuss areas of concern that may have emerged during or after the research interview. Additionally, participants could use a pre-arranged system for contacting an independent organisation for further support (Appendix 2).

McLaughlin (2007) reiterates the importance of the researcher not confusing the researcher role with that of advisor, counsellor or social worker (p. 65). This is particularly important in the type of research undertaken in the study where emotional issues were likely to arise in the interview. This was also relevant as the researcher is a qualified social worker and it was therefore necessary to differentiate between his researcher and social worker roles. The researcher was not performing a social work role whilst undertaking the research, but did apply his social work skills in undertaking the research with LAYP.

4.3.4 Protecting and supporting the researcher from potential harm

The issue of risk and potential harm to the researcher is generally given little consideration in the literature on ethical issues arising in social research methods. Lee-Treweek and Linkgole (2000) claim that:

Researchers' safety and welfare is often thought through in a cursory manner in an ad hoc fashion once in the field (p. 1)

Within the research context, unfounded allegations of inappropriate or abusive behavior were identified as a potential source of risk to the researcher. The research interview would form the first physical meeting with the potential participant, meaning the researcher and participant would not benefit from a previously established relationship. In order to provide some protection to both the participant and the researcher, a strategy was adopted whereby a participant interview would not take place unless a competent adult was on the same premises. This strategy formed a pre-condition for each interview and was incorporated into documentation sent to potential participants and carers in advance of the research interview. The objective of this strategy was to create a sense of connection between the participant interview and an adult on the premises, whilst also ensuring that the interview felt private to the participant and interviewer. It was essential to achieve a balance between transparency and privacy that would create a safe, professional environment for all parties. The researcher undertook a brief risk assessment for each interview visit, and made some minor adjustments to ensure a door was left open and that the researcher was visible from outside of the room.

As noted above, the research design anticipated intense emotional responses from some participants. Lee-Treweek (2000) considers that some researchers are deterred from involvement in this type of research due to the fear of emotional entanglement and highlights the need for good support and supervision for researchers who are engaged in emotionally complex or dangerous research contexts (p. 128). Appropriate support and supervision arrangements for the researcher were established during the early stages of formulating the research design.

4.3.5 Consent

The issue of achieving consent by and for looked after children to participate in research is complex. Robson (2002) asserts that consent formalities are essential both in terms of negotiating terms of participation with participants and referring back to the consent document in the event of a problem occurring within the research process (p. 380).

Bryman (2008) identifies the issue of informed consent as one of the most contested areas within social research ethics (p. 121). The term 'informed consent' is typically used to denote a position where prospective research participants:

Should be free to choose to take part or refuse having been given the fullest information about the nature and purpose of the research
(Gilbert, 2008, p. 150)

Alderson and Morrow (2004) consider that informed consent is fundamentally about how prospective research participants understand the proposed research (p. 96). This can be related to O'Kane's work (2000) noted earlier, which differentiates research with children from research with adults based on key differences in children's understanding and experience of their world, and the ways in which children communicate (p. 136). It was necessary to make a judgement that each young person selected for the sample was able to fully comprehend the nature of the research, and subsequently be competent to provide informed consent. The ethical approval process adopted a protectionist stance and required confirmation by the child or young person's social worker of their competence. This introduced the potential for sample bias, examined further in Chapter Eight.

Within the context of contemporary developments in research, where children and young people are increasingly regarded as informed experts on their own lives, it can be argued as appropriate to gain only children's consent for their participation in research and not additionally parental consent (Alderson and Morrow, 2004, p. 95).

Bogolup and Thomas (2005) undertook cross-cultural dialogue between the US and the UK on the ethical arguments for achieving parental consent for research with children and young people in foster care. They conclude that the way children and young people are treated as research participants frequently reflects the prevailing academic culture. The notable differences in academic cultures observed are summarised as the:

US academic culture which often stresses the fiduciary relationship between parents and developing children and a UK academic culture which places more emphasis on children's competence and independence (p. 271)

Thus, the UK research referred to above was designed to maximise children and young people's participation, inform parents about the research and invite questions but did not seek formal written agreement from birth parents. The US research required consent of a birth parent.

The CSLA in their corporate parent capacity played a key role in facilitating the inclusion and consent of LAYP in the research. The philosophical tensions and potential for sample bias can be noted where LAYP are being asked for their perceptions of the quality of care and protection provided by the corporate parent, who is also required to consent for them to participate in the research. The CSLA supported and encouraged participation from LAYP which appeared to militate against some of the potential for sample bias, examined in Chapter Eight. Where the young person continued to be looked after, it was felt to be a responsible ethical position for the CSLA, in its corporate parent capacity, to provide parental consent and confirmation of the young person's competence to give informed consent.

Thus, the consent strategy for the research can be summarised as follows:

- i) All participants must consent to participate in the research, and were asked to sign a form confirming their consent to participate in the research and that they would be free to withdraw at any time before or during the interview.
- ii) If a participant continued to be looked after by the Case Study Local Authority, a social worker or equivalent person from the case study local authority needed to provide confirmation that the LAYP was competent to provide informed consent to participate in the research.
- iii) If a participant continued to be looked after by the case study local authority, a senior representative of the case study local authority must provide parental consent (on behalf of the local authority) for the young person to participate in the research.
- iv) If a participant was no longer being looked after by the case study local authority, a person with parental responsibility must provide parental consent for the young person to participate in the research.
- v) If a participant was no longer being looked after by the case study local authority, a person with parental responsibility must provide confirmation that the young person is competent to provide informed consent to participate in the research.

The expectation for achieving this level of adult consent contrasts with the notion that young people should be perceived as competent experts in their own lives. Whilst

participatory models of research uphold this perspective, this is not fully reflected in the research ethics approval process which emphasises organisational accountability and protection of children and young people from the research process. The rights of LAYP to participate in research and the potential emancipatory benefits receive less emphasis (Dominelli and Holloway, 2008, p. 1018). It was acknowledged that the local authority or a person with parental responsibility could prevent a looked after young person from having the opportunity to participate in the research.

The research design was based on the premise that participants had the right to clear and comprehensive information about the research compiled in language that was appropriate to their age and developmental stage. A copy of the consent form was made available for the participant to read prior to the interview, and the researcher also read out the contents at the beginning of each interview to ensure that differing preferences for understanding information were met. The participant was asked to sign two copies of the document, one for his/her retention and one for the researcher to retain (Appendix 2).

4.3.6 Confidentiality, anonymity and risk

The research data was not concerned with the individual identities of participants, but with the data they generated. The study was therefore unconcerned with individual identities. Bryman (2008) states the importance of ensuring confidentiality of all data including personal records in order to protect participants' rights to confidentiality (p. 118). An undertaking was made to participants that confidentiality of information would be maintained.

However, an exception to this norm was in the event of information arising in the interview which indicated that the participant or others may be at risk, or if it appeared that the law had been broken. It was made clear that in these cases, this information would be passed on to the relevant authorities, in the introductory letter, the consent form and verbally in the introduction to the interview. A protocol for this process was agreed and a Senior Manager within the CSLA, unconnected with the operation of the research, was nominated to receive information consistent with the above criteria.

The identity of potential research participants was known to a minimum number of people within the CSLA during the sampling and consent processes. Thus, it is accepted that there were some limitations to the concept of anonymity within the research design. The CSLA, however, was unaware of the identities of LAYP who finally participated in

the research and all research data was anonymised by allocating a research code. The researcher avoided any information which would identify the participant in the data analysis and dissemination of findings. Data was stored according to strict protocols of confidentiality consistent with the Data Protection Act 1998 (HM Government, 1998). Thus anonymity and confidentiality were applied rigorously at all stages, subject to the limitations of the research design.

4.3.7 The consideration of rewards and incentives to participants

There is a good deal of debate about whether payment should be made to children and young people who participate in research. Alderson and Morrow (2004) identify four classifications of payments to young research participants: reimbursement for expense (for example, fares); compensation for time; appreciation for participants' assistance; and incentives to participate (p. 71). The researcher considered the dilemma of whether a reward or incentive should be made to participants, and following discussion with the young person consultant resolved the issue by not making a material reward or providing an incentive to participate.

4.4 Analysis of the Research Data

As noted above, the research was designed to collect qualitative and quantitative data and detailed consideration was given to how data would be analysed. This section examines the methods used to analyse i) the qualitative data; and ii) the quantitative data.

i) Analysis of the qualitative data

The research adopted grounded theory for the analysis of the qualitative data collected in the research, involving a system for coding and interrogating the raw data in order to identify key emergent concepts and dominant themes. Coding is a key process in grounded theory which involves raising the raw data to a conceptual level (Corbin and Strauss, 2008, p. 66). Although there are differences between theorists on coding practice, there is general agreement that analysis develops from codes and that coding is an emergent process. Charmaz (2006) describes coding as a process where the researcher actively and creatively engages with the data (p. 59).

Charmaz (2006) identifies initial and focused stages of coding. In initial coding, the researcher undertakes a detailed analysis of the data and retains an open-minded approach in order to generate new ideas and provisional codes (Charmaz, 2006, p. 47-48). These codes are generally known as 'emergent concepts' and are the basis

upon which theory is eventually formed (Bryman, 2008, p. 544). Selective or focused coding requires the researcher to make decisions about which initial codes make the most analytic sense in order to categorise the data (Charmaz, 2006, p. 57). Categories may group several concepts and aim to achieve a higher level of abstraction than the concepts are able to do separately (Bryman, 2008, p. 544). Thus, data generated by the research participants was coded by generally applying initial and focused coding techniques, and analysed for the identification of emergent concepts and categories. A large number of emergent concepts were identified by initial coding, which were refined through a second stage of focused coding. Further analysis identified clusters of commonly occurring concepts, which were subsequently formed into a smaller number of emergent categories.

Grounded theory has become a commonly applied approach to the analysis of qualitative data, but has been subject to criticism for three key reasons. The first is that it involves a highly proceduralised process of analysis which risks losing some of the context and meaning from the data. The researcher did not feel that this criticism applied to the analysis of the research data, and that the emergent concepts and categories facilitated effective conceptualisation of participants' experiences. Second, grounded theory encourages researchers to suspend belief in previous theory, which Silverman (2006, p. 96) claims fails to acknowledge theories that help to inform the initial stages of the coding. Third, the theory building aspect of grounded theory is contested by many researchers who claim that the processes of grounded theory do not lead easily onto formulation of theory.

These two criticisms (disbelief of existing theory and the theory building capacity of grounded theory) were both upheld by the researcher's experience of applying grounded theory to the qualitative data analysis. An example which addresses both of the above criticisms was the application of exit and voice as a significant theorisation within the thesis. The researcher related the emergent concept of disconnected and disengaged to the pre-existing theory of exit and voice (Hirschman, 1970, p. 4). The emergent concepts and subsequent categories were therefore combined with existing theory to generate knowledge specific to the research context. Based on this example, disbelief of pre-existing theory would have been inappropriate, and the application of grounded theory did not generate theory but did contribute to the process of generating knowledge.

ii) Analysis of the quantitative data

Quantitative data analysis is frequently differentiated between exploratory and confirmatory forms of analysis. Exploratory approaches seek to find out what the data is saying, whereas confirmatory approaches establish whether the data is what was expected, for example, set against a theory (Robson, 2002, p. 399). Exploratory data analysis [EDA] is a contemporary exploratory data analysis model which uses predominantly diagrammatic forms of analysis to make inferences between variables. Exploratory approaches to data analysis are commonly applied to flexible research designs including the case study design where both qualitative and quantitative data are collected (Robson, 2002, p. 399).

The quantitative data collected in the research was subjected to exploratory data analysis using Excel and Statistical Package for the Social Sciences [SPSS] software. The exploratory data analysis approach was considered appropriate for the level of statistical analysis required for the research. The Excel software proved to be limited due to the restricted interactivity it was able to achieve within the data. SPSS facilitated an in-depth examination of the inter-relationships between the data. The researcher received technical assistance with the statistical analysis and retained sole responsibility for the analysis.

The disadvantage of this form of analysis is that it does not include more statistical tests such as tests for probability. However, the inter-relationships between the data were of key interest to the study, thus this further level of analysis was not required.

Overall it is argued that the exploratory approach, combined with the application of grounded theory, achieved a depth of data analysis consistent with the aims and epistemological assumptions of the research.

iii) Integrating the analyses of the two data sets

Each data set was analysed separately, as described above, to ensure a thorough analysis of the different types of information gathered from the research. The two sets of findings were then examined to identify comparative and contrasting findings, and the degree of complementarity. This process identified that findings from each data set were complementary and mutually reinforcing. Chapter Eight examines this process of analysis, highlighting how it informed the conclusions of the study and generated new knowledge (Section 8.1.6).

4.5 Dissemination of Findings

The researcher has a clear responsibility to ensure that when the findings are disseminated, they are reported accurately:

Avoiding distortion whether by omission or otherwise, including any findings which reflect unfavorably on any influential body or research sponsor, on the researcher's own interests or on prevailing wisdom or orthodox opinion (British Association of Social Workers, 2002, para. 4.4.4, subsection 2.4.6)

It is recognised that dissemination of research findings is a clear ethical responsibility upon the researcher. The research objectives reflect this responsibility. The retention of intellectual property with the researcher was designed to ensure that the researcher could exercise discretion over dissemination and publication of the research findings (McLaughlin, 2007, p. 67).

The findings were disseminated to the CSLA and young people who participated in the research. Presentations on the findings and methodological and ethical implications of the study have been made at national conferences and international symposia, and articles relating to specific aspects of the research are currently being developed.

4.6 Conclusion

The recent development of research undertaken about and with vulnerable groups of young people has been reviewed to better understand the effectiveness, challenges and ethical considerations associated with different designs and methods employed. The underpinning theoretical and epistemological perspectives underpinning the choice of design/method have also been considered.

This analysis has revealed a number of issues which have informed the research study and highlighted ongoing concerns that are relevant to the findings and their dissemination, examined in Chapters Five, Six and Seven. Key amongst these issues is the central, guiding principle of involving looked after young people in research as experts in their own world. Thus, an interpretivist and inductive design has been adopted in the research, which focused on the experiences and views of LAYP at all stages of the research process.

This approach also informed the application of a case study design, ensuring that a rigorous and detailed examination of the safety and wellbeing of LAYP was achieved. This design was compatible with the aims and objectives of the Case Study Local Authority which wished to undertake research with looked after young people leaving a placement as part of ongoing improvements to the quality of care and individual outcomes.

Consistent with the choice of design, a single interview method was applied to the research, enabling a flexible approach to social enquiry with research participants, and facilitating the generation of both quantitative and qualitative data. The use of structured questions and semi-structured interview techniques allowed for standardised data items and experiential data, as well as maximising engagement and understanding of the LAYP participants.

The researcher worked with a young person consultant at all stages of the research design, including a pilot study to test the content and structure of interview questions. Early dissemination of the research findings has confirmed that this central feature of the research has increased its likelihood of being translated both into policy and practice: LAYP have endorsed the research and its findings, and national and international audiences of practitioners and policy makers have engaged in a dialogue about the process and the content.

Data generated by the research study was analysed by using exploratory data analysis and grounded theory methods. The methods enabled a large amount of data to be analysed in a systematic manner in order to generate both knowledge and theory. The key findings are further examined in Chapters Five and Six.

Section 2: The Research Study

Chapter 5: Findings – the Participants and their Experiences of Being Looked After

5.0 Summary

This is the first of two chapters which examine the findings of the research interviews, covering participants' characteristics and general experiences of being looked after. Chapter Six examines participants' perceptions of their safety and wellbeing.

Chapter Five begins, in Section 5.1, with an analysis of the characteristics of participants by age, gender and ethnicity, placement category, and placement frequency compared with the total population of the CSLA and national data. Section 5.2 focuses on participants' experiences of being looked after by examining their knowledge of why they were looked after; their experiences at entry to placement; their experience of happiness; the amount of privacy they experienced, their experience of planning; their evaluation of the corporate parent role; their experience of facets of managerialism and the impact this has on their safety and wellbeing.

5.1 Characteristics of Participants

This section examines the characteristics of the participant group by age, gender, ethnicity and placement classification. A comparative analysis between the participant sample and the looked after population of the CSLA and England is undertaken on key data. The objective of comparison is to achieve further contextualisation of the sample in relation to relevant populations. The study design did not aim to replicate the CSLA or England LAYP populations or be representative of them.

5.1.1 Young people's age, gender and ethnicity

Nearly two-thirds of the sample were male (60 per cent, 15) and just over one-third was female (40 per cent, 10). This compares with 58 per cent males and 42 per cent females in the LAYP population of the CSLA at 31 March 2005 (Looked After Children data, CSLA, March 2005); and 55 per cent males and 45 per cent females in the LAYP population for England at 31 March 2005 (DfES, 2005b). The sample therefore marginally over represented males (Table 5.1 below).

Table 5.1 Gender distribution of sample cross-referenced by participant sample, CSLA (2005) and England LAYP populations (2005)

Gender	Participant group	CSLA	England
Male	60%	58%	55%
Female	40%	42%	45%

Source: Case Study Local Authority data: CSLA (2005); England data: DfES (2005b)

The age range of participants was 9-17 years, with a mean age of 13.7 years. This age range (9-17 years) represents 62 per cent of the CSLA LAYP population at 31 March 2005 (Looked After Children data, CSLA, March 2005), and is the same proportion (62 per cent) of the England population at 31 March 2005 (DfES, 2005b). Ages were organised into three cohorts of: 9-11, 12-14 and 15-17. Males were fairly evenly distributed across these age cohorts. Females were less evenly distributed and were not represented in the 9-11 cohort. Thus, the female cohort of the sample was disproportionately older than the male cohort (Appendix 3 and Appendix 4).

Most participants (88 per cent, 22) classified themselves as White British. Thus, 12 per cent of the participant sample identified themselves as having an ethnic background other than white British (Appendix 5). This compares with 22 per cent of the looked after population in the CSLA (Looked After Children data, CSLA, March 2005), and 21 per cent of the looked after population in England (DfES, 2005a), as illustrated in Table 5.2 below. Thus, the participant sample under represented children and young people from an ethnic minority background compared with the CSLA and England LAYP populations.

Table 5.2 Ethnic background cross-referenced by Sample, CSLA and England looked after populations 31 March 2005.

Location	White British	Ethnic background other than white British	Totals
Research Sample	88%	12%	100%
CSLA	78%	22%	100%
England	79%	21%	100%

Source: Case Study Local Authority data: CSLA (2005); England data: (DfES, 2005d)

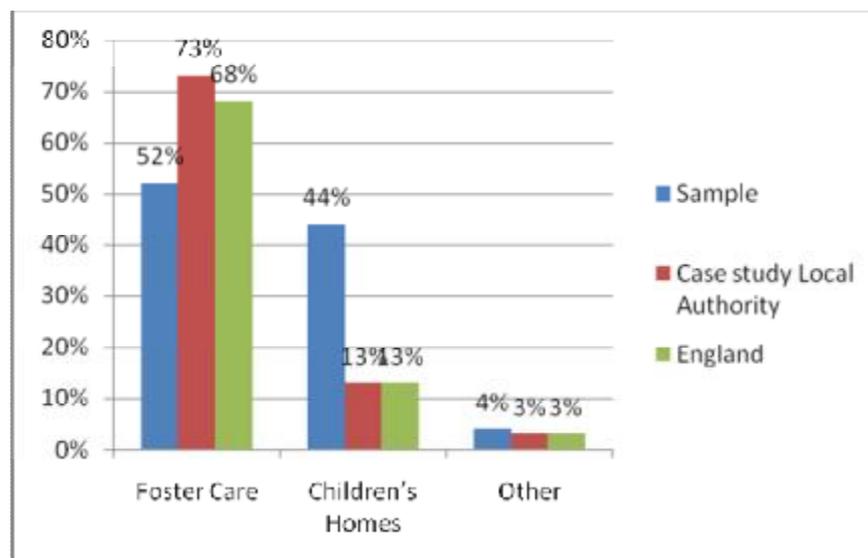
One participant had the status of being an unaccompanied asylum-seeking child when originally looked after. There were 2,900 looked after UASC in England at 31 March 2005, which represents 4.8 per cent of the total LAYP population (DfES, 2005c). There

are no comparable statistics for UASC who were looked after by the CSLA during this period.

5.1.2 Classification of previous placement

Just over half of participants (52 per cent, 13) reported their previous placement as foster care, with the majority of the remaining sample (44 per cent, 11) as children’s home, and (4 per cent, 1) as supportive lodgings (Appendix 11, Table 1). This compares with 73 per cent placed in foster care, 13 per cent in children’s homes and 3 per cent ‘other’ in the CSLA as at 31 March 2005 (CSLA, 2005) and 68 per cent in foster care, 13 per cent in children’s homes and 4 per cent ‘other’ in England (DfES, 2005b). Table 5.3 below summarises this comparative data.

Table 5.3 Comparison of placement classifications between the research sample, the CSLA (2005) and England LAYP populations (2005)



Source:

Case Study Local Authority data: (CSLA, 2005)

England data: (DfES, 2005e)

Thus, the CSLA had a slightly higher rate for foster care placement than England, and comparable rates for children’s homes placements. All three data sets were roughly comparable on the ‘other’ categories. The research sample therefore under represents foster care placements and over represents children’s home placements compared with the CSLA and England LAYP populations. The implications of this imbalance are examined further in Chapter Eight. As noted above, the study did not aim to replicate or be representative of other local or national LAYP populations.

The age cohorts were unevenly distributed within these placement classifications. Most participants in the age range 9-11 years were placed in foster care; most participants in the age range 12-14 years were placed in children’s homes; and most participants in the age range 15-17 years were placed in foster care. Predictably, the participant who had been placed in supportive lodgings was within the 15-17 year age range (Table 5.4 below and Appendix 11, Tables 2, 3 and 4).

Table 5.4 Placement classification cross-referenced with age

Classification of previous placement	ages 9 -11	ages 12-14	ages 15-17
Foster care	4	3	6
Children’s Home	1	6	4
Other	0	0	1

Similar proportions of male and female participants were placed in foster care, but more males than females were placed in children’s homes as indicated in Tables 5.5 and 5.6 below.

Table 5.5 Placement classification cross-referenced with gender

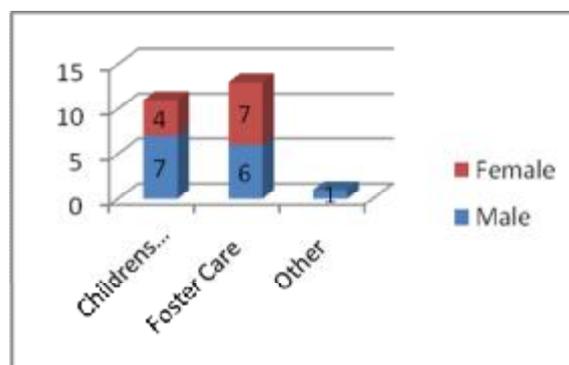


Table 5.6 Placement classification cross-referenced with gender and age

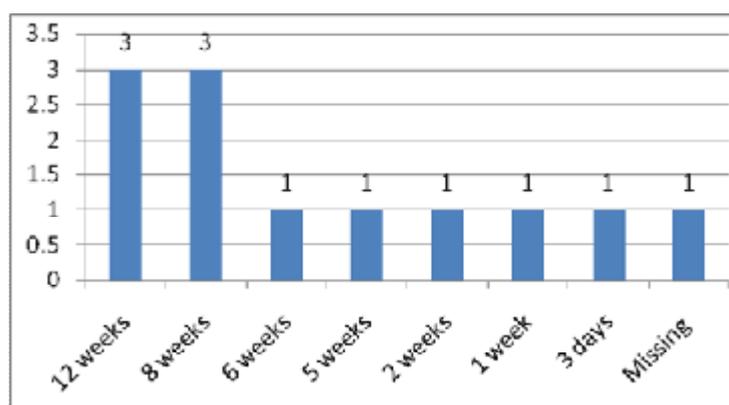
Placement classification	Male			Female		
	ages 9 -11	ages 12-14	ages 15-17	ages 9 -11	ages 12-14	ages 15-17
Foster care	3	1	2	1	2	4
Children's Home	1	5	1	0	1	3
Other	0	0	1	0	0	0

The placement profile of the participant group changed between their previous and current placements. The number of foster care and children’s home placements had decreased and the number of placements at home with a family member and independent living placements had increased (Appendix 11, Table 1 and Table 2). Four participants were no longer looked after by the CSLA when interviewed for the research.

5.1.3 Duration of previous placement

The duration of participants’ previous placement ranged from three days to in excess of five years (Appendix 6, Table 1). Approximately half of participants experienced a placement duration of less than six months, as indicated in Table 5.7 below. Approximately half of this latter group had been in their previous placement for up to eight weeks, and approximately half for between eight and 24 weeks (Appendix 6, Table 2 and 3).

Table 5.7 Duration of previous placement – less than six months



5.1.4 Overall time participants had been looked after

The overall time participants had been looked after ranged between three days to 12 years. The sample was fairly evenly distributed over the four time classifications used in

the research (Appendix 7). Slightly more participants had been looked after for a period between two and five years, than each of the other time classifications.

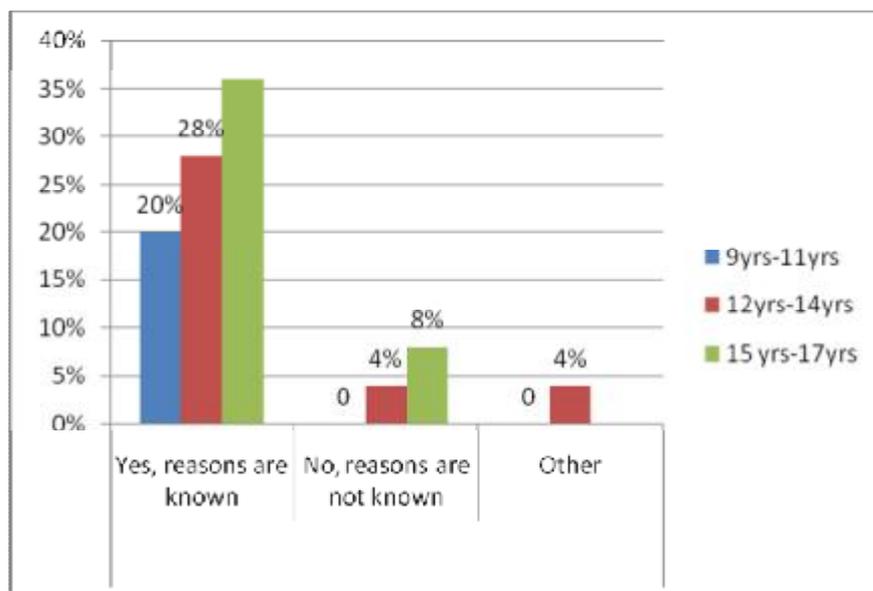
5.2 Experiences of Being Looked After

This section examines participants' perceptions of their looked after experience.

5.2.1 Knowledge and understanding of the reasons for being looked after

Most participants (84 per cent, 21) knew why they had been looked after (Appendix 8). An age differential was identified in the participant group, with younger participants being generally aware of the reasons for being looked after and those in the older cohorts being less or unaware (Table 5.8 below):

Table 5.8 Participants' knowledge of reasons for being looked after, cross-referenced with age cohort



Some participants were confident and clear about the reasons for being looked after. Two key factors emerged in this element of the research, namely whether participants had a clear sense of their own self history; and whether they had experienced or perceived they had experienced effective engagement and inclusion in decision making. Thus, the clarity of reasons for being looked after appeared to contribute to a sense of recent self history.

Yes, [aware of the reasons] *because my Mum explained to me loads of times* (Participant 2)

Participants who appeared unclear about the reasons for being looked after fell into two categories:

- Participants who reported that they did know the reasons for being looked after, but introduced significant degrees of qualification into their reports;
- Participants who reported being unaware or unsure of the reasons.

As well as being in the older age cohorts, participants who were unaware of the reasons had also experienced longer periods of being looked after, with a total of between two and five placements each. Additionally, participants who were unaware of the reasons for being looked after also reported that they were insufficiently involved in decision making that concerned them:

I can't really remember to be honest, I think it was because my Dad wasn't very nice to me, all I know is that he put me in care... he was just nasty to me. I wasn't told and I never asked, I've heard lots of things over the years (Participant 21)

As indicated above, an emergent concept of a fragmented sense of self history was noted in relation to some participants who appeared to lack clarity of understanding about the reasons why they had been or were looked after. This inability to clearly recall the reasons appeared to impact negatively on their understanding of their self history.

A further emergent concept, closely associated with the above, concerned the lack of participation and inclusion in decision making and information sharing. For several participants it appeared that their lack of confidence and partial knowledge was related to ineffective participation in pre-placement and post-placement information sharing, decision making and planning.

One participant reported *some* knowledge of the reasons for being looked after, indicating that such information was not readily available and that the onus was on the participant to request it.

I sort of know yeah... well, it's not clear but I can ask people (Participant 25)

Thus, the research found a relationship between levels of knowledge and effectiveness of participation and inclusion in decision making and information sharing.

5.2.2 Experience of entry into placement

LAYP may enter care in an unplanned crisis, or it may be anticipated and planned. However, irrespective of the route and nature of entry, strong mixed feelings are engendered around this experience (Shaw, 1997). Some participants entered their previous placement direct from their birth families, and others from a previous looked after placement.

Applying a multiple-indicator measure to which participants could add, approximately two-thirds of the sample described negative experiences and one-third described positive experiences of entry to placement. The terms added by participants (in 'other category') generally denoted negative experiences (Appendix 9, Table 1, and Appendix 9, Table 3). More males than females and participants from the two older age cohorts selected their own terms. Some participants used a combination of both positive and negative terms to describe their experience, for example combining 'relieved, frightened and shaky' thus demonstrating the emotional complexity and the tensions of the entry experience.

Only male participants chose the term 'confused' to describe their admission experience, as indicated in Tables 5.9 and 5.10 below.

Table 5.9 Perceptions of entry cross-referenced by gender

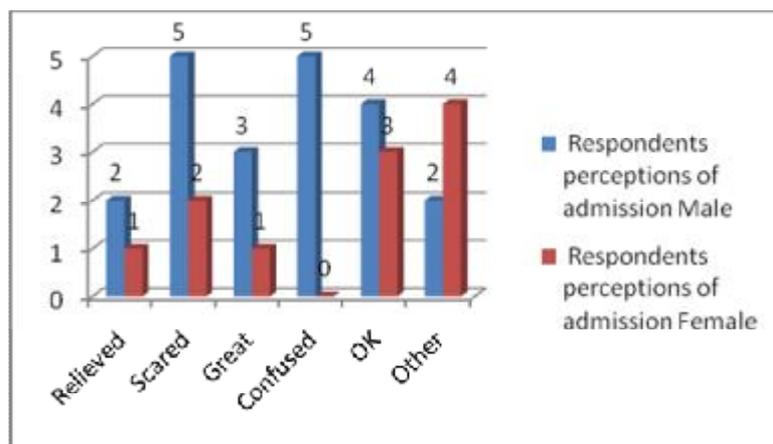
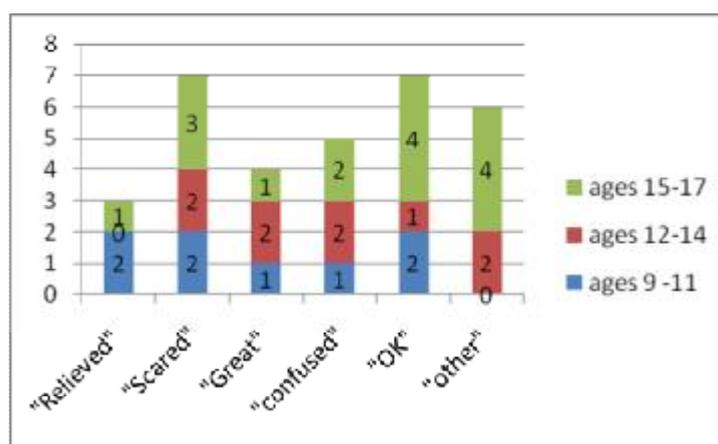


Table 5.10 Perceptions of entry cross-referenced by age cohort



Seven key factors were identified from these experiences, as follows:

i) Distress at the point of entry to placement

Some participants described high states of distress at the point of entry to their previous placement. The responses differentiated between feelings associated with the social and emotional context of entry to placement, for example separation from family, and feelings about the forthcoming placement. Some participants related to one, and some to both categories. Some participants were angry that they were told in an insensitive way where they were going to be placed. They felt that they did not receive acknowledgement of their views and preferences, which seemed to mostly focus on wanting to be placed within their families. These findings cross-reference with findings on choice and involvement in decision making (Chapter Six, Sections 6.2.1 and 6.2.2).

ii) Feelings associated with the social and emotional context of being looked after

For some participants, distress at entry to placement related to the family context which some participants had left prior to their admission. One participant (Participant 23) was upset as a result of a distressing family event and had subsequently felt safe at entry to placement.

Thus, a significant inter-relationship was identified between the social and emotional context of being looked after and feelings of safety derived at admission.

I was upset, because [described a significant family event], I was upset to be honest with you but I felt safe in there (Participant 23)

iii) Impact on family relationships

An emergent concept of fear of loss of relationship with family was noted in this element of the research. Some participants experienced complex emotions relating to separation, and fear of the loss of relationships with family members.

Relieved, really scared and really frightened about... not seeing my Dad any more and my Mum (Participant number 1)

iv) Participation and inclusion

An emergent concept of positive participation and inclusion was noted in the analysis of data in this element of the research. The small number of participants who had experienced participative and inclusive pre-placement preparation appeared significantly more positive about their entry to placement than others who had not experienced this level of preparation. It appeared to provide some reassurance which reduced their level of fear and apprehension of unknown variables. One respondent who experienced a planned entry to placement appeared engaged in the process and had been reassured by the resulting familiarity and predictability:

Dunno, because it was all planned, so I knew that I was going there, so, wasn't really, so it was all right because I knew everything that was going on (Respondent 17)

These reports are consistent with stages three and four of the preliminary typology for the measurement of participation of LAYP, indicating medium to high levels of participation; medium to high propensity to voice; and generally high levels of safety and wellbeing (Appendix 23).

Correspondingly, participants who did not experience participation in planning or choice in the placement found their entry experience predominantly negative. The emergent concepts of lack of participation were noted. One participant had not wanted to leave the placement before her previous one, did not feel she that she exercised choice or influence over the decision to move, and was concerned about the loss of established relationships with other LAYP and carers:

I don't know, I felt a bit sort of down because I was leaving the children's home and I liked it there (Participant 15)

Another respondent who experienced an unplanned entry admission illustrated this emergent concept of lack of inclusion and participation:

No, just this woman that picked me up from my house and took me to [foster carer's name] and that was it, I didn't see or speak to anyone
(Participant 16)

Another participant who had experienced an unplanned, emergency foster care placement felt that the lack of inclusion and participation contributed to her feeling of embarrassment:

I don't know I just felt kind of embarrassed in someone else's home
(Participant 17)

These perceptions are consistent with stages one and two of the preliminary typology for the measurement of participation of LAYP, indicating no or low levels of participation; high propensity to exit; and low levels of safety and wellbeing (Appendix 23).

v) *Feeling unsafe and fear of bullying*

Fear and apprehension of unknown variables in the forthcoming placement was a contributing factor to some negative feelings about entry. One respondent feared harm from bullying and was threatened by the scale and activity in the children's home in which he was placed. This reflects the emergent concept of bullying and risk of harm:

Well, I had just come home from school and there were all these people I didn't know, they moved me to this big building full of loads of kids screaming and shouting and swearing at me in there and before I knew it, I had been in there a couple of days, they nicked all my toys and broke them all (Respondent 21)

vi) *The impact of previous placement on entry experience*

One respondent had been placed in secure accommodation prior to his previous placement and was positive about his subsequent entry to a children's home, describing his feelings as 'happy' and 'great'. Thus, in this instance, positive feelings

towards the placement were closely related to negative feelings of the previous placement and less clearly related to positive aspects of the forthcoming placement.

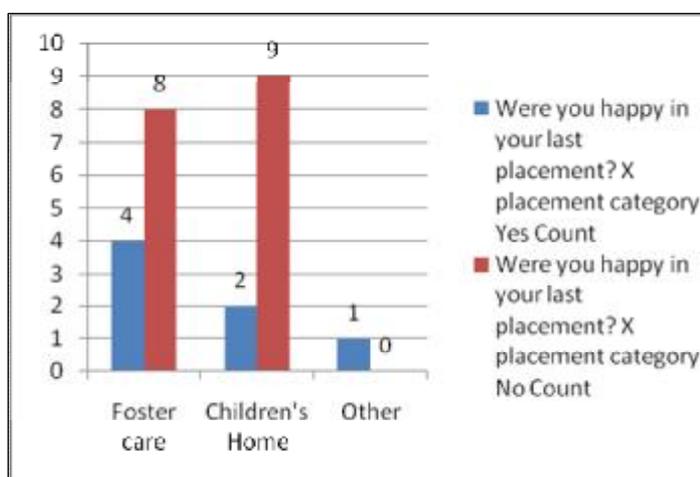
vii) Relationship between entry experience, safety and wellbeing

Participants' experiences of entry to placement were often complex and intense, reflecting both positive and negative relationships to safety and wellbeing. Negative relationships were associated with a strong sense of apprehension on entry into placement, an emergent concept in the analysis. These experiences were influenced by participation and inclusion in pre-placement planning, events leading to participants becoming looked after, feelings about the placement they had just left, concerns that key relationships would be lost, and fears for their safety in the prospective placement.

5.2.3 Experience of happiness in placement

Most participants (68 per cent, 17) reported that they were not happy in their previous placement (Appendix 29, Table 1). Participants' ratings of their happiness and unhappiness in previous and current placements were fairly evenly distributed between children's home and foster care placements (Table 5.11 below). In contrast, most participants (64 per cent, 16) reported that they were happy in their current placement (Appendix 29, Table 3), and most participants (72 per cent, 18) reported that they had wanted to leave their previous placement (Appendix 29, Table 2).

Table 5.11 Ratings of happiness in previous placement cross-referenced by placement classification



The reasons for unhappiness were predominantly placement related. They were inevitably closely inter-related and grouped as follows:

Placement context: Several participants were unhappy with their placements. One participant did not want to be placed in a children's home:

Just didn't like being in a children's home (Participant 20)

Boredom: Boredom was perceived as an important phenomenon for some younger participants and appeared to generally relate to feeling under-stimulated. Participant 13 related his boredom to the incompatibility with his peers in the children's home placement:

It was boring and no kids of my age (Participant 13)

Restrictive procedures and rules: Examples included rules that restricted contact with friends, family and sleepovers, a finding that cross-references with findings on relationships with friends (Section 6.2.5). Participant 25 perceived himself as unhappy because of rules and their implementation:

[I was unhappy] because I was never allowed to do anything unless I had to tell them and ask them. I couldn't do my own thing unless they knew about it (Participant 25)

Bullying: Several participants cited bullying as the reason for feeling unhappy. Two concepts emerged relating to bullying and happiness: the deleterious impact of bullying on participants; and adults not intervening to stop the bullying:

[Unhappy] because I got beaten up (Participant 3)

Good relationships with family were a source of happiness for some participants. Separation from family and its impact on family relationships emerged as an important contributing factor for unhappiness:

Well, yeah I was [happy] but, no I wasn't really because I wanted to be here with my brother (Participant 23)

5.2.4 Experience of privacy

Most participants (60 per cent, 15) reported having sufficient privacy and (32 per cent, 8) reported insufficient privacy or ambivalence (Appendix 30).

Relationships between placement classification, age and privacy were noted. Most participants who reported they had experienced sufficient privacy had been placed in foster care. Most participants who had experienced insufficient privacy had been placed in children's homes. Participants in the 15-17 year cohort were particularly positive about their experience of privacy. Participants in the 12-14 year cohort were the most likely age cohort to report insufficient privacy (Tables 5.12 and 5.13 below).

Table 5.12 Participants' evaluation of privacy. Yes, enough privacy; cross-referenced by placement classification and age cohort

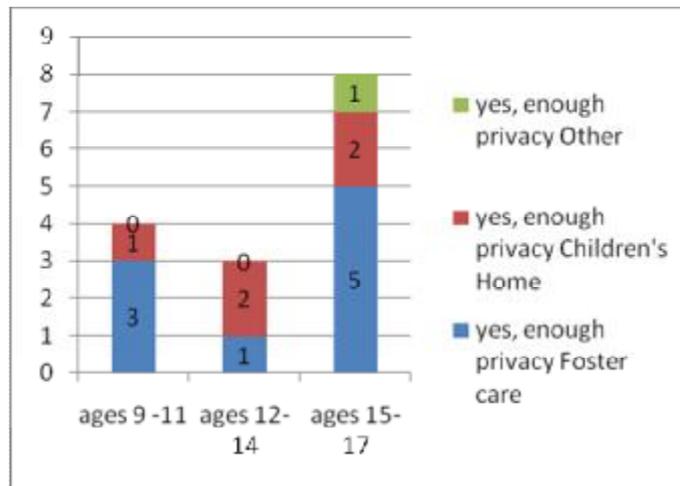
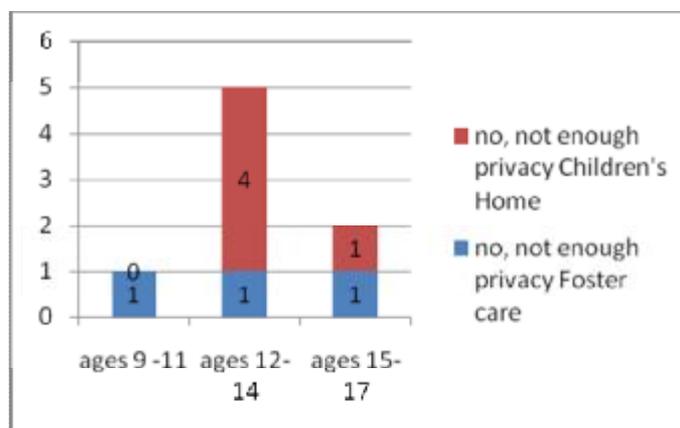


Table 5.13 Participants' evaluation of privacy. No, not enough privacy; cross-referenced by placement classification and age cohort



Choice and control, particularly relating to bedrooms, emerged as a significant variable in how participants rated their privacy and as an emergent concept. Several participants who had their own rooms and exercised some choice and control over access to their room reported positive evaluations of privacy:

Yeah, we all had our own room and it had a key on it and a lock
(Participant 24)

Many participants who reported insufficient privacy had shared a bedroom at some stage in their last placement; there was a general feeling that having to share a bedroom eroded privacy:

No, not at all [not enough privacy] because I shared a room with two other girls, I didn't get no privacy at all (Participant 15)

Some participants were not able to exercise choice or control over staff or other LAYP's access to their rooms and felt this impacted on their experience of privacy. For some participants, choice and control over their bedroom was not a static phenomenon but changed significantly during the placement:

To start with when I shared a room [didn't get enough privacy] but then when I had my own room later I got more privacy... then after about a year I think I got my own room (Participant 22)

Lack of choice was identified as an emergent concept in this element of the research.

One participant felt the large numbers of LAYP in the children's home had impacted on his privacy. Another participant found that designated quiet areas afforded little privacy for meetings:

Not when it concerns meetings and things. There was a quiet room, but it didn't have a lock on it and people would be banging on the door and trying to get in and stuff (Participant 21)

One participant felt that his privacy had not been respected because staff in a children's home insisted on listening to his conversations with other LAYP. He was angry and

disaffected by this regime, and critical of the rules provided as an explanation for listening to his conversations:

If me and my mates wanted to speak somewhere they [staff] would come over and have a little nose or if we told them to go away they would say 'no we have a right to listen to what you have to say'
(Participant 12)

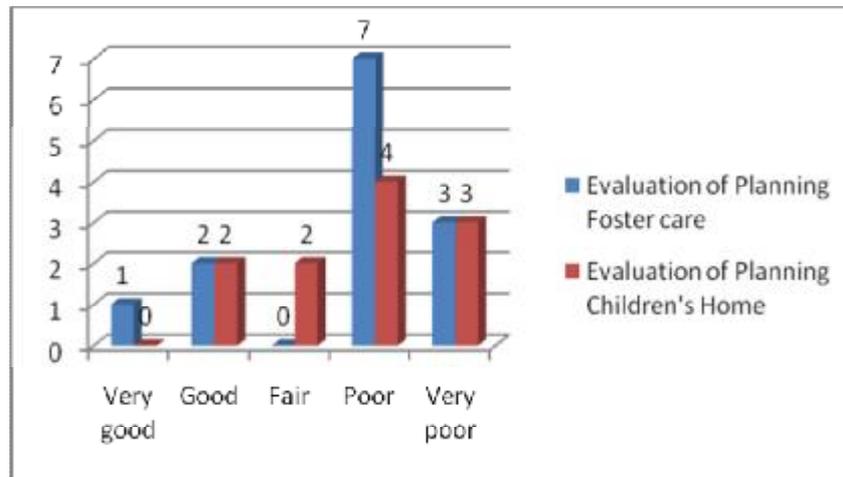
One participant considered that he received insufficient privacy in activities related to washing and bathing. He felt he was assisted by his foster carer in bathing and regarded this as unnecessary due to his age, perceiving this to be an infringement of his privacy (Participant 8; these concerns had been investigated by the Children's Services Department prior to the interview).

5.2.5 Experience of planning

The Third Joint Chief Inspectors' Report on Arrangements to Safeguard Children (Ofsted, 2008b), conceptualises planning arrangements as a key safeguarding indicator for LAYP (p. 35-38). The Children and Young Persons Act 2008 develops a relationship between effective care planning and improved outcomes for LAYP. The research examined respondents' perceptions of planning at both general and specific levels, and the relationship between planning and safety and wellbeing.

Applying a multiple-indicator measure, most participants (68 per cent, 17) evaluated general levels of planning in their last placement as 'poor' or 'very poor'. Considerably fewer participants (20 per cent, 5) evaluated planning as 'good' or 'very good' (Appendix 10, Table 1). Both children's home and foster care placements received relatively poor evaluations in this respect. One respondent placed in foster care evaluated planning as 'very good', however the largest grouping who were placed in foster care evaluated planning as poor, as highlighted in Table 5.14 below.

Table 5.14 Evaluation of general level planning cross-referenced with placement category



All males in the 9-11 years cohort who were placed in foster care evaluated their planning as poor or very poor (Appendix 10, Table 2). Approximately two-thirds of all participants reported that they did not have a care plan (Appendix 10, Tables 4 and 5). A small group of participants were familiar with the general terminology of key plans, and appeared confident that plans were in place. Two important relationships were observed in relation to planning:

i) Relationship between evaluation of planning and outcomes

An emergent concept noted in this element of the research was the lack of outcomes experienced from planning. Some participants differentiated between the presence of plans, the process of planning and the outcome of plans. Several participants were critical of plans which had been in place that had not been followed through, and/or had resulted in unsatisfactory outcomes:

Planning for the future, very poor, there was no plans really, I mean there have been plans made but no one, you know, they haven't stuck to any of them (Respondent 21)

One respondent related their evaluation of poor planning to the outcome of not having been able to return to live with his family:

If they planned well I would have been back with my Mum ages ago (Respondent 7)

Several participants related poor planning and poor outcomes of planning to instability in social work staffing:

Yeah... nothing was really planned... they never saw the same person twice; and before they saw [name of social worker] who was actually very good, but she left at the critical time (Advocate for Participant 23)

Thus, some participants perceived the outcome of planning as the key variable in their evaluation of effective planning.

ii) Lack of participation and disengagement

Some participants were familiar with the terms associated with planning. Those that identified with both the concept and terminology of planning tended to see this as a process usually undertaken in meetings, predominantly undertaken by their social worker and generally not with their participation. Ineffective levels of participation and inclusion was an emergent concept in this element of the research:

Poor [planning], she [name of social worker] made it all for me... she said you're going home and that was the end of it (Participant 24)

Many participants were not familiar with the concept of planning and were confused by its associated terminology:

That [planning] was confusing, very confusing (Participant 1)

Many participants appeared detached from the planning process; many responses symbolised a disengaged relationship with plans and with planning. The experiences of most participants appeared consistent with stages one and two of the preliminary typology for the measurement of participation of LAYP, indicating no or low levels of participation; high propensity to exit; and low levels of safety and wellbeing (Appendix 23). These issues are further examined in Chapter Six.

5.2.6 Experience of the role of corporate parent

The role of the corporate parent has become an increasingly important focus of contemporary LAYP social policy initiatives. The research examined respondents' evaluations of the CSLA as their corporate parent, and the relationship between this role and their perceptions of safety and wellbeing.

Approximately two-thirds of participants felt they had not received a good service from their corporate parent (Social Services, the CSLA); approximately one-third felt that they had received a good service (Appendix 12). Those participants who felt they had received a good service were predominantly placed in foster care.

Four key findings emerge from the analysis on the role of corporate parent:

i) Participants' conceptualisation of the corporate parent

Participants did not generally conceptualise or differentiate the corporate parent role from the social worker role. Participants generally equated social workers with the CSLA and subsequently, the corporate parent.

ii) Lack of participation and inclusion

An emergent concept noted in this element of the research was the lack of participation and inclusion which, as noted above, participants related to the social work role. Examples that illustrate this emergent concept include not being aware for some time that a social worker had been allocated to them; a lack of inclusion in social work practice at the point of entry to placement; exclusion from decision making; and not feeling listened to. The experiences of most participants appeared consistent with stages one and two of the preliminary typology for the measurement of participation of LAYP, indicating no or low levels of participation; high propensity to exit; and low levels of safety and wellbeing (Appendix 23).

iii) Disconnected and disengaged

Disconnection and disengagement was identified as an emergent concept, evidenced with some participants by highly oppositional attitudes to the CSLA. Several examples highlight the resentment felt by participants at the control exercised over them by the CSLA, resulting in a distanced and disengaged relationship:

No, I think they are evil [CSLA]... I don't know, they are just very annoying and I don't like them... No, I just don't like Social Services because they try and run your life, it's annoying (Participant 17)

iv) Social workers and the corporate parent

Consistent with the tendency of participants to identify or associate the corporate parent role with the social work role, some replication of perceptions of social workers and the corporate parent were noted. The main analysis of relationships with social workers is explored in Chapter Six, Section 6.2.5. However, with respect to participants’ experiences of being looked after, the relationship between participants’ evaluation of their corporate parent and their safety and wellbeing is noted, which was inextricably linked with participants’ perceptions of social workers and their role in promoting safety and wellbeing.

5.2.7 Experience of rules and procedures

As noted previously in the thesis, the UK looked after system is dominated by a managerialist paradigm within which procedures and rules perform a key role. Significant facets of the paradigm were introduced into the looked after system in response to the poor quality care and or abuse of LAYP. The research examined respondents’ experience of rules and procedures and their relationship to safety and wellbeing.

Most respondents perceived rules and procedures as making them feel ‘fairly safe’ and ‘fairly well cared for’ (Appendix 14, Tables 1 and 2). Participants who felt ‘fairly safe’ were predominantly male and distributed across the three age cohorts. More females, who were predominantly in the older age cohort, than males felt that rules and procedures made them feel ‘very safe’ or ‘safe’. More males, who were predominantly in the two younger age cohorts, than females felt rules and procedures made them feel ‘unsafe’ or ‘very unsafe’. Table 5.15 illustrates this finding:

Table 5.15 Respondents’ evaluation of the relationship between procedural facets of the looked after system and perceptions of safety, cross-referenced with age cohort and gender

Do the rules around being in care make participants feel safe?	ages 9 -11		ages 12-14		ages 15-17	
	Male	Female	Male	Female	Male	Female
Very safe	0	0	1, 4%	1, 4%	1, 4%	3, 12%
Safe	1, 4%	0	0	1, 4%	0	0
Fairly safe	3, 12%	0	3, 12%	1, 4%	3, 12%	3, 12%
Unsafe	1, 4%	0	2, 8%	0	0	0
Very unsafe	0	0	0	0	0	1, 4%

Three specific findings are highlighted from the data:

i) *The quality and quantity of rules and procedures*

Participants were predominantly concerned about the content of rules and procedures they were subject to, reporting little concern about the quantity of rules and procedures.

ii) *Impact of rules and procedures on feeling safe and well cared for*

Participants differentiated between those rules and procedures they were generally positive and generally negative about, and the impact of these rules and procedures on their safety and wellbeing. Several participants also incorporated both positive and negative perceptions about rules and procedures:

There were some good rules that I thought were OK and there were some very bad rules from the Stone Age (Participant 21)

The generally positive evaluation of rules and procedures divided into two groups. First, some participants' perceptions of safety and being cared for were derived from the existence of rules with less apparent importance attached to their content. One participant described deriving a feeling of 'comfort' from the presence of rules and procedures (Participant 14). Second, some participants felt safe as the application of rules and procedures placed boundaries around the intimidating behavior of other LAYP in placement:

There were some rules that were good to stop people from doing things [bullying] otherwise they wouldn't listen (Participant 21)

Many negative evaluations of rules and their impact on safety and wellbeing were related to an emergent concept of equity and normality in this element of the research. Participants generally wanted to be seen as 'normal'. Thus, rules and procedures that differentiated them from their non-looked after peers and siblings, and/or stigmatised them, did not enhance feelings of safety or wellbeing. These findings cross-reference with findings on participants' relationships with carers (Chapter Six).

Examples provided by participants included pocket money and the rules requiring Criminal Record Bureau [CRB] checks prior to sleepovers:

It's like if you go to a mainstream school, you can't then go over to sleep over at a mate's house until their parents are police checked and it just makes life harder I think (Participant 22)

One respondent felt that the rules he was subject to were iniquitous in comparison to his non-looked after siblings:

It's a bit unfair because my brother and sisters don't have those rules (Participant 1)

One participant felt that rules had not been applied consistently and equitably within placements or between placements (Participant 23).

iii) Disconnection and disengagement from rules and procedures

Disconnection and disengagement was identified as an emergent concept in relation to participants' perceptions of rules, procedures and feeling safe. The disengagement experienced by participants ranged from a neutral and distanced perspective (Participant 7), to a more oppositional and confrontational perspective (Participant 17):

I don't really care [about the rules and policies] (Participant 7)

Doesn't make any difference... It [the rules and policies] annoys me sometimes... I'm not saying I'm not being cared for, I'm saying that it pisses me off (Participant 17)

5.3 Conclusion

Chapter Five has highlighted the importance of understanding the characteristics of LAYP and their experiences of being looked after, as well as their perceptions of safety and wellbeing. The findings on perceptions are further examined in Chapter Six.

Specific issues noted from the analysis of the experiences of being looked after include:

- Most participants were aware of the reasons for being looked after;

- Those who were unaware of the reasons had a fragmented sense of their own self history, and had experienced low levels of participation and inclusion in decision making;
- Participants reported predominantly negative experiences of entry to their previous placement. Many reported a complex combination of perceptions which reflected fear of losing family relationships and fear for their safety in their forthcoming placement;
- Participants who had positive experiences regarding their entry to placement had generally participated in pre-placement planning and decision making;
- Most participants had been unhappy in their previous placement but most were happy in their current placement. Family and placement based reasons predominantly impacted on happiness;
- Privacy was closely related to choice and control over participants' own bedroom;
- Generally poor levels of planning were experienced, often based on outcomes. Planning was familiar to some participants but confusing to most;
- Little evidence was found that planning enhanced feelings of safety and/or wellbeing;
- Most participants did not evaluate the corporate parent role positively. The impact of the corporate parent role on safety and wellbeing was mostly synonymous with the social work role relating to safety and wellbeing. A lack of effective participation and inclusion was evident in relation to both roles, and resultant feelings of disconnection and disengagement were reported;
- Participants generally derived some feeling of safety and wellbeing from the rules and procedures and were predominantly concerned with their content and what this represented in terms of equity and normality;
- Most participants could identify someone who looked out for their safety and wellbeing; this was predominantly a family member.

Section 2: The Research Study

Chapter 6: Findings: Participants' Perceptions of their Safety and Wellbeing

6.0 Summary

This second findings chapter focuses on participants' perceptions of their safety and wellbeing in their previous placement. It examines the research findings against the six domains of the preliminary safety from abuse and wellbeing framework (in Chapter One) It starts with participants' perceptions of safety from general and specific forms of harm; perceptions of being listened to; complaints and representations systems and key people who looked out for safety and wellbeing. The wellbeing findings include; participation in decision making; placement stability/instability and continuity/discontinuity; experiences of/influences on educational wellbeing; quality of relationships; effectiveness of health related planning; and participants' evaluations of their propensity towards risky and damaging behaviours.

The chapter ends with a summary of the emergent concepts and categories identified as a result of interrogating the findings. A discussion and interpretation of these findings follows in Chapter Seven.

6.1 Safety from Abuse

The concept of safety is embedded in a number of wellbeing frameworks (for example UNICEF, 2007) and the key policy initiative, Every Child Matters (DfES, 2003). As noted in Chapter One, the contemporary analysis of the safety of LAYP links conceptually and historically with institutional abuse perpetrated against LAYP in the 1990s (Staffordshire County Council, 1991; Leicestershire County Council, 1993; Waterhouse, 2000).

The term 'harm' was used in interviews to allow participants to discuss a range of issues relating to safety that they may be uncomfortable in associating with abuse. Forms of harm were examined using the criteria for developing a child protection plan for children deemed to be at risk of harm (HM Government, 2010a, p. 38-39). The research examined participants' perceptions and ratings of their safety from harm at general and specific levels.

6.1.1 Perceptions about general levels of safety

Applying a single-indicator measure (Yes/No), approximately two-thirds of the sample reported that they had felt safe in their previous placement and approximately one-third had not felt safe (Appendix 16, Table 1). Those who had felt safe and those unsafe were evenly distributed between foster care and children’s home placements, resonating with concerns expressed by Utting (1997) about the protection of LAYP in different care contexts. Those who felt safe and those unsafe were fairly evenly distributed by age. Two participants in the 9-11 age cohort had felt unsafe in foster care, two participants in the 12-14 age cohort had felt unsafe in children’s homes, two participants in the 15-17 age cohort had felt unsafe in foster care, and two from this cohort had felt unsafe in children’s homes (Appendix 16, Table 2; and Tables 6.1 and 6.2 below):

Table 6.1 Feeling safe, cross-referenced with placement classification and age cohort

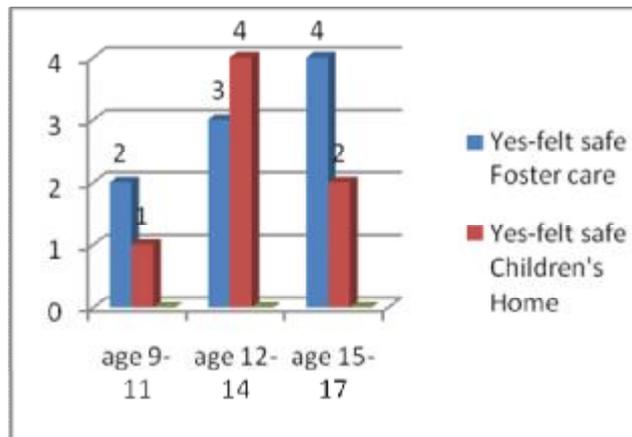
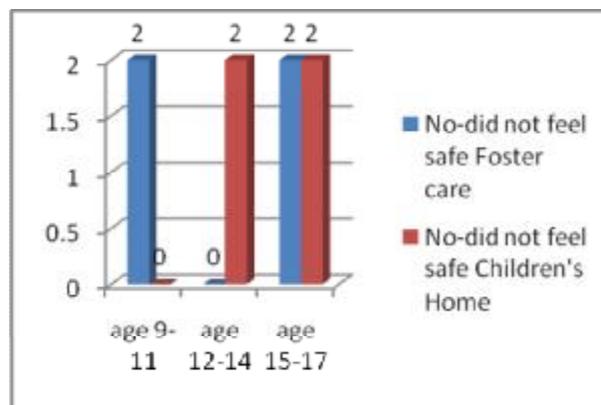


Table 6.2 Not feeling safe, cross-referenced with placement classification and age cohort



Applying a multiple-indicator measure (Likert scale), most participants selected fairly safe (44 per cent, 11) which is significantly more qualified in comparison with the single

indicator measure. Those who reported feeling unsafe or very unsafe remained constant under both measures. The range of ratings relating to 'feeling safe' extended under this multiple-indicator measure, as follows:

i) *Feeling safe from harm*

Feeling safe from harm was identified as an emergent concept, with the main reasons for feeling safe relating to the presence of staff and protection from outside risks of individual harm (Gil, 1982, p. 9; Kendrick, 1998, p. 170).

I felt safe because there were staff (Participant 13)

I felt safe as if to say that no one could get in there and harm me or stuff like that (Participant 15)

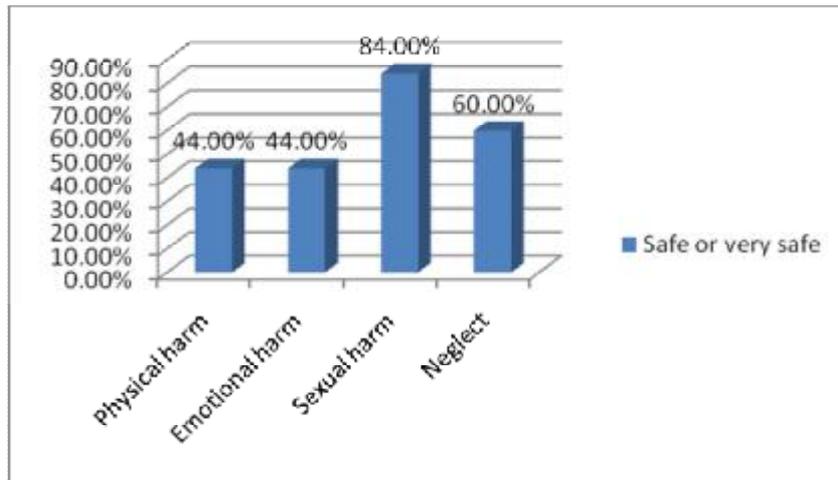
ii) *Feeling unsafe from harm*

Feeling unsafe from harm was also identified as an emergent concept in this element of the research. The sources of harm were, as noted above, generally related to individual harm (Gil, 1982, p. 9; Kendrick, 1998, p. 170). Harm perpetrated by carers and bullying perpetrated by other LAYP, were identified as the main sources of harm. Marginally more participants identified harm from bullying than harm from carers.

6.1.2 *Safety from specific forms of harm*

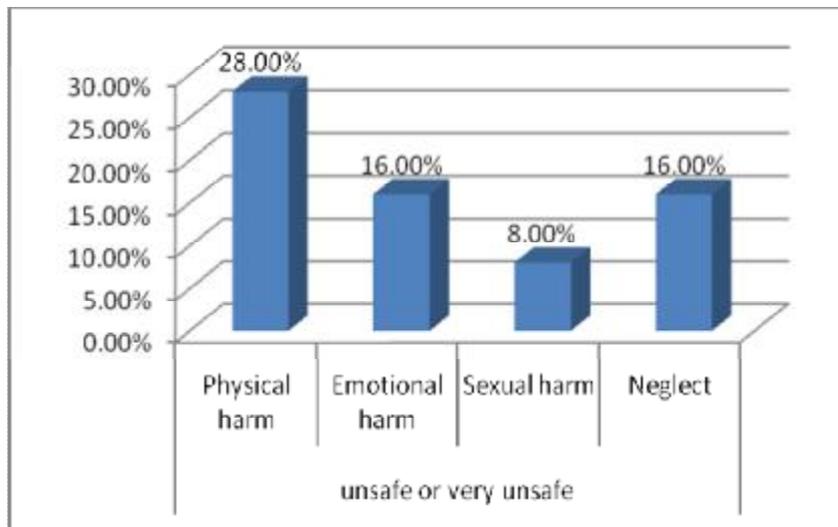
The two multiple-indicator measures 'very safe' (1) and 'safe' (2) were combined, indicating that the highest level of perceived safety was from sexual harm, as Table 6.3 indicates.

Table 6.3 'Feeling safe' or 'very safe' from the four categories of specific forms of harm



The two multiple-indicator measures of 'unsafe' and 'very unsafe' were also combined, indicating that the highest level of perceived risk of harm was from physical harm, indicated in Table 6.4 (Appendix 16, Table 4).

Table 6.4 Feeling 'unsafe' or 'very unsafe' from the four categories of specific forms of harm

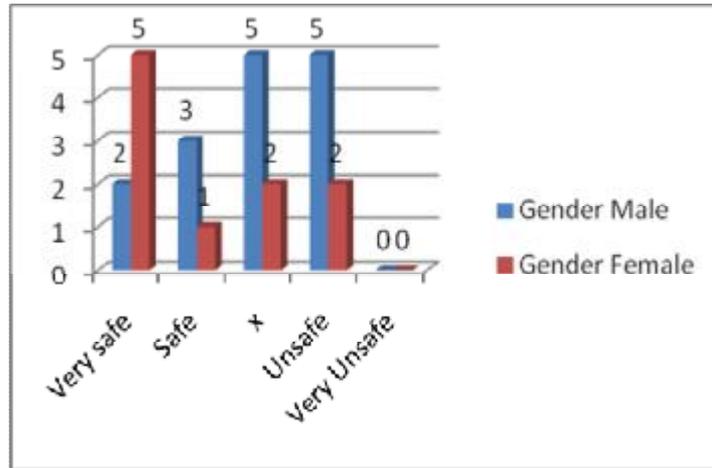


Eight dimensions of safety and harm experienced by LAYP are drawn out from the analysis of findings, and examined in the following points.

i) Safety from physical harm

Female participants generally reported feeling safer from physical harm than their male peers (Table 6.5 below). No significant relationship was found between age cohort and safety from physical harm (Appendix 16, Table 5).

Table 6.5 Safety from physical harm, cross-referenced by gender



ii) Bullying and physical harm from carers

Several sources of harm were reported. The two emergent concepts in this element of the research were harm from carers, and harm from bullying. In relation to harm from carers, participants reported physical harm from foster carers and children’s home staff. Participants identified restraint, being hit and being threatened by a carer as key sources of harm from carers. One participant reported feeling very unsafe from physical harm from a foster carer.

Yeah they [foster carer] threatened me (Participant 8)

Some concerns appeared to relate to participants’ placements prior to their previous placement. The concerns of one participant were subject to ongoing investigation by the CSLA. Other concerns raised in the research were appropriately investigated prior to the interview. Several participants drew a relationship between physical harm and bullying. Bullying was identified as an emergent concept in this element of the research, reflecting the importance attached to the experience of bullying by a number of participants. As Chapter Three outlines, the terms ‘bullying’ and ‘physical harm’ are complex, lacking conceptual and definitional clarity. Thus participants often referred to physical harm but not bullying, when their responses indicated that they

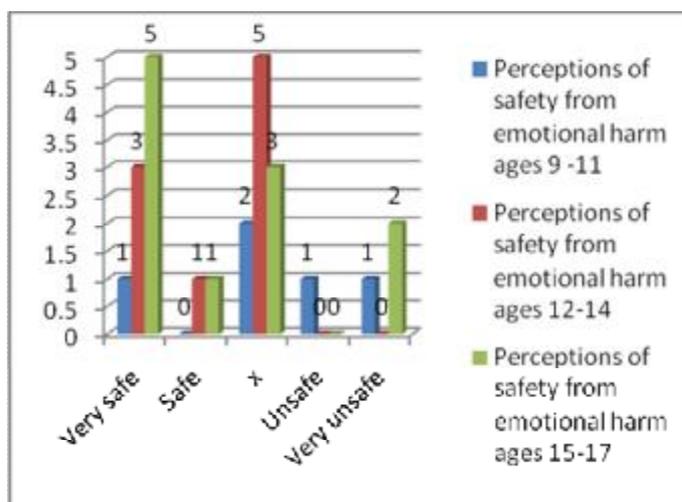
had experienced a form of bullying. See (viii) in this section for an examination of the findings on bullying.

The failure of adults to protect LAYP from bullying was an emergent concept in this element of the research. Several participants felt they were at high risk of emotional harm as a result of bullying and in particular the failure of carers and social workers to protect them from bullying.

iii) Safety from emotional harm

No significant relationship between gender and safety from emotional harm was noted (Appendix 16, Table 6). The two oldest age cohorts reported feeling safer from emotional harm than the youngest cohort. However, participants in both the oldest and youngest cohorts reported feeling very unsafe from emotional harm, as indicated in Table 6.6 below. Participants who rated their safety from emotional harm as ‘unsafe’ or ‘very unsafe’ were predominantly placed in foster care.

Table 6.6 Safety from emotional harm cross-referenced by age cohort



Whilst some participants had experienced good emotional relationships with carers, those who reported poorer emotional relationships identified these relationships as a source of emotional harm. The emergent concept of being disconnected and disengaged was noted in relation to some participants who had experienced such relationships. Thus, the outcome for some participants who had experienced emotional harm was to present as disconnected and disengaged. However, it was clear that participants did not share a homogeneous expectation of emotional care or emotional relationships with carers. One participant contrasted the relatively low level

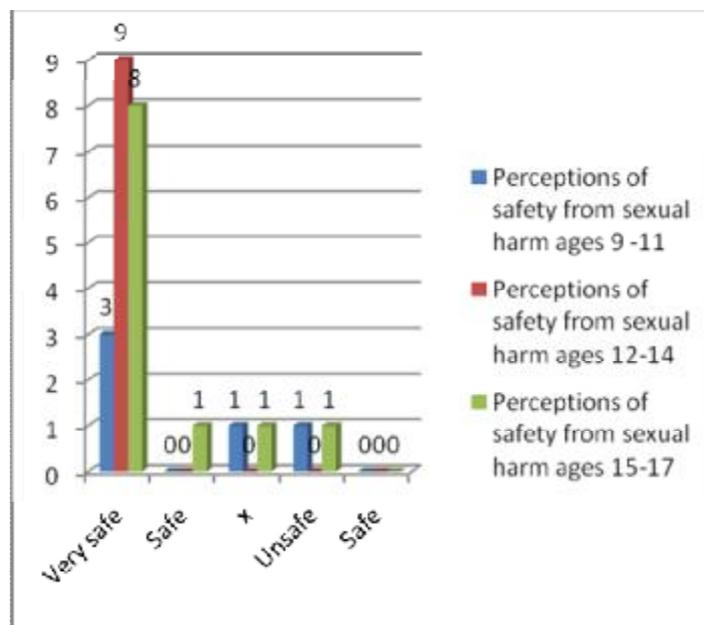
of emotional care she experienced in her previous foster care placement with the higher levels enjoyed in her current kinship care placement.

Well, I suppose with her [foster carer] I didn't see that place like that, where as now who I live with now [kinship carer] I do, but there, I didn't feel emotional about it at all (Participant 15)

iv) Safety from sexual harm

High levels of safety from sexual harm were noted. No discernable relationship between gender and safety from sexual harm was apparent (Appendix 16, Table 7). There was little differentiation between age cohorts, although the middle age cohort reported the highest ratings of safety from sexual harm. The two participants who reported feeling unsafe from sexual harm were from the oldest and youngest cohorts, and had been placed in foster care and children's homes respectively. Children's homes and foster care placements were equally represented by participants who reported feeling safe from sexual harm.

Table 6.7 Safety from sexual harm cross-referenced by age cohort



v) Feeling safe from sexual harm

An emergent concept from this element of the research was feeling safe from harm. Participants generally felt safe because of protection from carers. One participant felt she was able to protect herself from sexual harm and was not looking to adults to protect her:

What, as in like saying the carer could be some kind of pervert? Well, one, there wasn't a man around the house... no I was pretty OK... well, I'd rip his bollocks off wouldn't I? (Participant 17)

vi) Feeling unsafe from sexual harm

A small number of participants reported they had been subjected to sexual harm. An emergent concept from this element of the research was feeling unsafe from harm. Other LAYP and foster carers' own children were identified as sources of sexual harm. One participant (Participant 8) felt very unsafe from sexual harm, alleging that he was inappropriately touched by a young person who was a member of the foster carer's own family (this allegation had been investigated appropriately prior to the interview). No examples of sexual harm from adults were identified. One participant reported an incident where another LAYP had been subject to sexual harm. One participant reported an incident involving sexual harm between a male LAYP and a female LAYP. She considered that this incident was managed appropriately by carers and felt safe as an outcome:

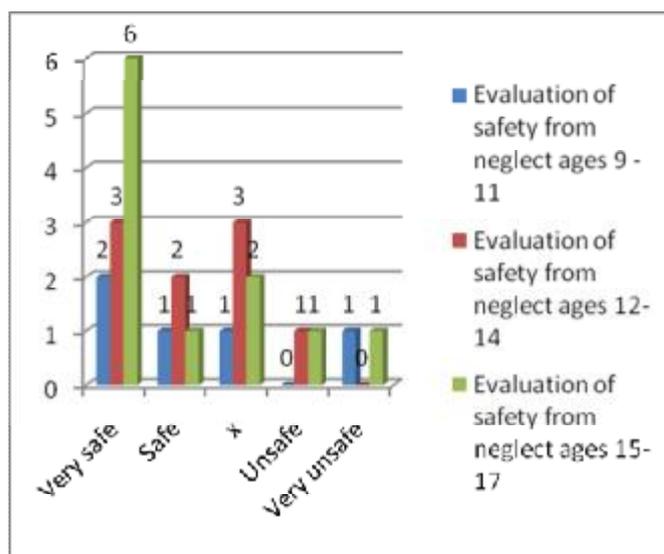
Very safe but there was one incident where one of the boys done something to one of the girls but he got changed homes (Participant 24)

Few participants had experienced sexual harm in their previous placement. The few that had were distressed by it. Most participants derived feelings of safety from adults who protected them, or who managed effectively those situations involving other LAYP and sexual harm.

vii) Safety from neglect

Participants in the oldest age cohort generally reported feeling the safest from neglect, as illustrated in Table 6.8 below. Female participants reported marginally higher levels of safety from neglect than their male peers (Appendix 16, Table 8). Children's homes and foster care placements were equally represented by participants who reported feeling unsafe from neglect.

Table 6.8 Safety from neglect, cross-referenced with age cohort



Participants' reasons for feeling unsafe from neglect focused on inadequate standards of care, poor relationships with and insufficient attention from carers. The emergent concept of mechanistic and detached care was noted in this element of the research. Adults were predominantly reported as a source of harm through neglect. One participant was critical of the low level of care demonstrated by some carers:

Well they didn't care, I don't think they did. I just think they done their job to get the money – they pretend to care about us (Participant 25)

Another participant felt their level of care had been neglectful, being deficient both in depth of relationships and attention:

All the time I wasn't paid attention never, there wasn't much attention paid to me at all really. I was left to sit in my room, all it would be is 'tea's ready [name of participant]' or 'someone's on the phone for you' but other than that you were just left... very little attention unless I asked for it... towards the end they would just relax, they come in, sit down, have a cup of tea, get the paper out and read it, the paper right up until 10 o'clock and the kids would come and go as they pleased, that's it, they weren't really interested in what we were doing (Participant 21)

Participant 17 described this type of carer as 'coffee cup carers', symbolising a detached, non person-centred model of care.

Several participants who felt unsafe through neglect described similar mechanistic and detached forms of care. Some participants pointed out that this was not always a consistent phenomenon, and fluctuated between carers and different aspects of their placement.

The phenomenon where participants were disconnected and disengaged was identified as an emergent concept in this element of the research. This predominantly applied to a small participant group who had rated their risk of harm through neglect as high and, as outlined above, felt they had been subject to distant and mechanistic care.

viii) Safety from bullying

Bullying was identified in the literature review as a key concern for LAYP. It is recognised that there are conceptual complexities in defining bullying and its relationship with and differentiation from other forms of harm. The cross-reference between findings on physical harm and bullying demonstrate these conceptual difficulties. The researcher was aware of these complexities and examined participants' assessments of the relationship between bullying and perceptions of safety. Consistent with this conceptual complexity, participants differed in how they defined bullying and whether their experiences equated with bullying:

I wouldn't say bully me because she [foster carer's daughter] was a little din, but she used to, well I suppose you could say it was bullying (Participant 15)

Well he robbed my room once, but that's all the bullying that happened there, not like physical (Participant 12)

Oh what a little bit of spitting that ain't bullying (Participant 7)

Although several participants were unclear in their conceptualisation of bullying, most participants who felt they had been bullied described behaviour which can be categorised as verbal bullying and physical violence (Children's Rights Director for England, 2008c) consistent with individual abuse and consistent with harm (Gil, 1982, p. 9; Kendrick, 1998, p. 170).

Applying a multiple-indicator measure, the study found that most participants (56 per cent, 14) did not experience bullying in their previous placement, but a significant group of participants (44 per cent, 11) reported being subject to a range of bullying experiences. Most participants who had experienced bullying also reported not feeling safe in placement in other parts of the research. However, some participants who had experienced bullying also reported feeling safe in other parts of the research.

Children’s homes and foster care placements were equally represented by participants who reported bullying and those that did not report bullying (Appendix 17). Significantly more male participants reported being bullied than females; and more participants in the 9-11 age cohort reported being bullied than not bullied in their previous placement. Conversely, more participants in the two older age cohorts reported not being bullied than being bullied in their previous placement.

Table 6.9 Frequency of bullying experienced

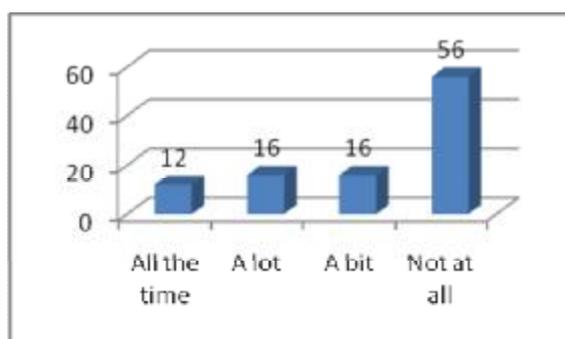


Table 6.10 Frequency of bullying, cross-referenced by gender and age

Participants' evaluation of their experience of being picked on or bullied in their previous placement	Age group of participant					
	ages 9 -11		ages 12-14		ages 15-17	
	Gender		Gender		Gender	
	Male	Female	Male	Female	Male	Female
All the time	0	0	0	1	1	1
A lot	2	0	2	0	0	0
A bit	2	0	0	0	1	1
Not at all	1	0	4	2	2	5
Other	0	0	0	0	0	0

Some participants felt safe from bullying, an emergent concept in the research. Those participants who had experienced bullying were clear that this had been distressing and intimidating, supporting an emergent concept of harm from bullying.

Some participants felt unsafe from a generally intimidating and threatening care context. Whilst some of this group had direct experience of bullying, others had not:

Well there were things going on round the building and I didn't feel safe in that environment while there were fights and break-ins and stuff and smashing the place up (Participant 18)

Participants identified other LAYP in placement as the predominant perpetrators of bullying, followed by members of the foster carer's family and young people in the community. Of the three participants who experienced bullying all of the time, two identified the perpetrators as young people who were members of their foster family, and one identified the perpetrator as a looked after peer in a children's home.

For some participants, the experience of bullying had been consistent and for others this experience was intermittent. Participant 21 reported his distress resulting from a combination of intimidating behaviour and bullying over a prolonged time period:

Oh most definitely, that's what most of my complaints were about [bullying]... It goes through a period, it's like waves, it builds up, it's lots of destruction and damage in the house and bullying, then it goes down and it's fine, all fine for a couple of months or say a year, it's fine, nothing, no one bullies or does anything. Then it builds up and builds up and goes on... (Participant 21)

This was a vivid description of an intense overall experience in placement. The bullying was intimidating and the anticipation of it resuming when it was not evident was distressing. Other participants indicated that bullying had been a 'norm' within their last placement and they had to some extent adapted to it or had been expected to adapt to it:

They did at the beginning [bully]... yeah really and now I can handle it (Participant 25)

Some participants evaluated their carers and social workers as not protecting them sufficiently from bullying. Thus, adults' failure to protect LAYP from harm was an emergent concept. As noted in Chapter Five, most participants felt that social workers played a fairly active role in looking out for their safety. However, significantly fewer participants felt that direct care providers such as foster carers and children's home staff looked out for their safety.

Participants' reports of bullying appeared consistent with the conceptualisation of individual abuse (Gil, 1982, p. 9; Kendrick, 1998, p. 170). The norm of bullying and corresponding, inadequate adult responses reported in some placements appeared consistent with the conceptualisation of programme or sanctioned abuse (Gil, 1982, p. 10; Stein, 2006a).

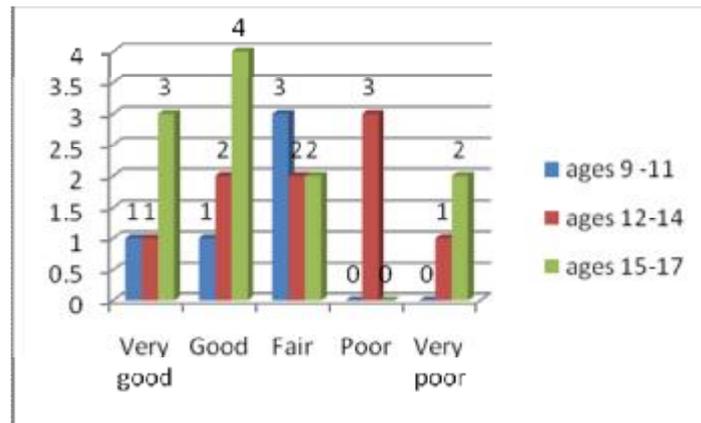
Some participants identified putting a stop to bullying as a key individual and programme change that would improve safety and quality of care (Appendix 31).

6.1.3 Being listened to and being heard

Institutional abuse inquiries in the 1980s and 1990s consistently found that looked after children and young people had told adults about their abuse, but little effective action to protect them had resulted. As noted in Chapter Three, McLeod (2008) found that effective listening for LAYP is a combination of listening and subsequent action from adults (p. 21). Participants' evaluation of being listened to was therefore a critical indicator of their wellbeing and safety.

Applying a multiple-indicator measure, the study found approximately half of participants felt generally well listened to; approximately a quarter felt fairly well listened to; and approximately a quarter did not feel well listened to (Appendix 18, Table 1). Participants in the lower age cohort rated listening as generally positive; the 12-14 cohort was fairly evenly distributed between positive and negative ratings; the 15-17 cohort was predominantly positive, but included two participants who rated listening as very poor (Table 6.11 below). The two main placement classifications were fairly evenly distributed across the scale.

Table 6.11 Being listened to in last placement, cross-referenced by age cohort



i) Feeling listened to and heard

Feeling listened to and heard was an emergent concept in this element of the research and for participants, being listened to was consistent with being heard (McLeod, 2008, p. 28):

Well, if you had something to say then they would listen to you because they had the idea like that everyone had a chance to be listened to and stuff like that... they did listen very well (Participant 24)

Some participants felt well listened to and indicated that this was the norm in their previous placement. These reports are consistent with stages three and four of the preliminary typology for the measurement of participation of LAYP – indicative of medium to high levels of participation, medium to high propensity to voice and generally high levels of safety and wellbeing (Appendix 23).

Conversely, not feeling listened to was also identified as an emergent concept. Some participants did not feel listened to and frequently related the effectiveness of being listened to with poor quality of outcomes that had been achieved for them. Thus, for several participants in this group, being listened to was not consistent with being heard (McLeod, 2008, p. 28). The importance of tangible outcomes for participants emerged in several other elements of the research:

Social services and here [current placement] don't listen to my views, they don't listen, they listen as in stand there and listen but when it comes to going back to it they have completely forgot about it (Participant 12)

A relationship was identified between the concept of not feeling listened to and the emergent concept of being disconnected and disengaged. Some participants who were disconnected and disengaged were overtly angry at not being listened to, while others appeared more passive. Participant 19 was angry at not feeling listened to by his carers and presented as disconnected and disengaged:

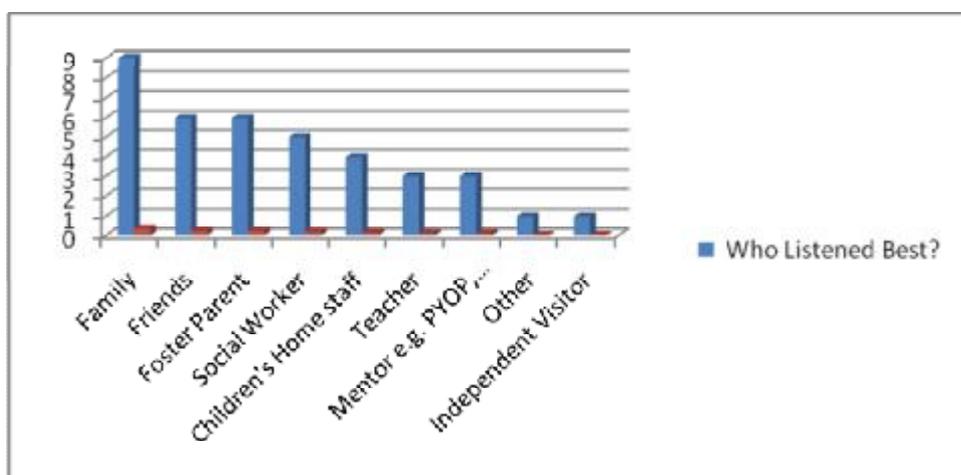
They never listened to you, even just like say for instance you say ‘that’s a chair there’ they would argue until they were blue in the face and say ‘no it ain’t a chair there’, they were just dins (Participant 19)

These perceptions appeared consistent with stages one and two of the preliminary typology for the measurement of participation of LAYP, indicative of no or low levels of participation; high propensity to exit; and low levels of safety and wellbeing (Appendix 23).

ii) Who listened to participants most effectively?

Most participants felt they were listened to by someone. One participant, however, did not feel that anyone listened to him effectively and related this evaluation to his belief that no one listened to his claims of being bullied in his previous placement (Participant 25). Applying a multiple-indicator measure, to which they could add if they wished, participants prioritised family followed by friends and foster carers as the three main parties who listened to them most effectively (Table 6.12 below):

Table 6.12 Who listened to participants most effectively



Some participants referred to family generically and did not further define the term. Other participants made reference to specific family members including parents, grandparents, siblings and extended family, as people who listened to them most effectively:

It would have to be my sister (Participant 17)

These diverse definitions of 'family' reflect the heterogeneity of the sample and the importance of conceptualising the looked after population as heterogeneous (Bullock et al., 2006, p. 1346).

One participant who reported friends as listening to her most effectively, referred to effective listening as good communication with people who are on the same wavelength, and differentiated between child-focused and adult-focused communication:

No my friends listened to me but everyone else in there like me social worker and children's home [staff] listened to the bits that they thought was important but the things that we thought was important, they don't listen (Participant 12)

Several positive examples of being listened to by friends and family were compared by participants to examples where carers and social workers had not listened effectively. The prioritisation of friends, family and foster carers was noted as important in the light of their limited power and impact on decision making within the looked after system. The implications of this phenomenon for LAYP's safety and wellbeing are examined in Chapter Seven.

6.1.4 Knowledge and application of complaints and representation systems

Complaints and representation systems have played an increasingly important role in UK social policy on the safety and wellbeing of LAYP, consistent with the New Labour consumerist paradigm.

They emerged as a key element of managerial and procedural recommendations by inquiries into institutional abuse, in response to LAYP having told adults about the abuse they had experienced with no resultant action taken.

The following four factors were examined in relation to this aspect of safety:

i) Knowing how to access help

Most participants (64 per cent, 16) felt they would have known what to do if they had been worried or unhappy in their placement; just over a third (36 per cent, 9) was unsure or would not have known what to do (Appendix 21, Table 1). There was a fairly even distribution between participants from the two main placement classifications (Table 6.13 below). Participants who were unaware of what they would do were fairly evenly distributed between placement classification and age cohort. Most participants who were unsure or did not know what to do had been looked after for periods in excess of two years, apart from one participant who had been looked after for three days.

Table 6.13 Participants knowing what to do if they were worried or unhappy, cross-referenced by age and placement classification

Placement classification	If participants were worried or unhappy about something would they have known what to do?								
	No			Not sure			Yes		
	Age group of participant			Age group of participant			Age group of participant		
	9 -11	12-14	15-17	9-11	12-14	15-17	9 -11	12-14	15-17
Foster care	1	0	1	1	0	2	2	3	3
Children's home	0	1	1	0	1	1	1	4	2
Other	0	0	0	0	0	0	0	0	1
Totals	1	1	2	1	1	3	3	7	6

The key strategies identified by participants who reported that they would have known what to do if they had been unhappy or upset, included contacting the Children's Services Department, a social worker or a foster carer:

I would have rung up Social Services... I would have rung for help
(Participant 2)

Some participants, however, reported uncertainty and a lack of confidence in what to do in the event of feeling unhappy or upset in placement:

No, well I would have spoken to [foster carer's name] but I wouldn't know... not sure (Participant 16)

Sort of yeah... No, not really (Participant 25)

One participant stated that he would have absconded from placement if he was unhappy or worried, demonstrating that – as noted in Section 6.2.6 – harmful and risky behaviours were found to be a likely response to some areas of dissatisfaction within the looked after experience:

Yeah, I would have done a runner (Participant 1)

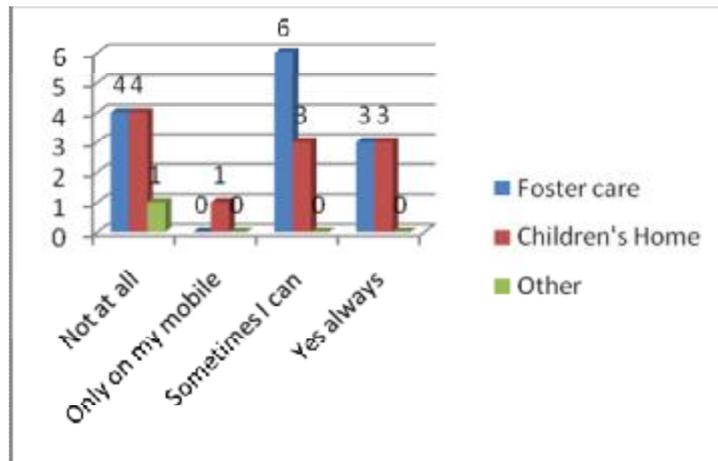
One participant who was subject to an unplanned, emergency placement was not clear what to do if worried or unhappy, and also reported feeling ‘scared’ at entry to the placement. Another participant (Participant 8) expressed concerns about the care he received in his last placement, and also felt unaware of what to do. A further participant, whilst clear about what to do, reported feeling unsure of her ability to follow this guidance. This suggests that knowledge of what to do in such circumstances is only one stage of the process of accessing help in order to ensure safety and wellbeing:

Because like I would have known to speak to someone if I was upset, but knowing me I would have like had a fit... I wouldn't have done it, I know what's right but I don't always do what's right (Participant 17)

ii) Confidential access to a telephone

Participants were equally divided between those who sometimes had confidential access to a telephone and those who did not have any access (Appendix 21, Table 3). Participants in this group who reported that they sometimes had access were predominantly placed in foster care. Participants who had full confidential access and no confidential access were equally divided between the two main placement classifications, as outlined in Table 6.14.

Table 6.14 Participants' evaluation of confidential access to a telephone



A relatively small group of participants reported having unqualified confidential access. Most perceived confidential telephone access as problematic in varying degrees. Mobile phones were not generally regarded as a reliable means of communication as participants did not consistently have the resources to 'top up' credit. There was no consensus on the concept of confidentiality and its application in respect of telephone access:

There is a telephone that you can use but it's not what I call private. It's in the quiet room and the quiet room has the computer games in it so lots of kids want to go in there and before we had the quiet room it was even worse because it was in the hallway so there was kids running up and down the stairs the whole time or walking past (Participant 21)

Yeah, I could actually... Yeah but sometimes no (Participant 1)

One participant who had concerns for his safety and quality of care in his previous foster care placement, reported feeling that his calls were listened to by the foster carer:

Yeah, I was trying to phone someone and she [kept] listening (Participant 8)

Problematic, confidential telephone access for some participants was described as part of the hectic routine in some placements and not seemingly significant. For a small group of participants, problematic access related to not feeling listened to and

was significant. The emergent concept of not feeling listened to was reinforced in this element of the research.

iii) Knowledge and use of complaints systems

Participants reported a high level of general knowledge of how to make a complaint (84 per cent, 21, see Appendix 22, Table 1), and a more limited, specific knowledge of the CSD complaints procedure (64 per cent, 16, see Appendix 22, Table 2).

Participants who were unaware of how to make a complaint through CSD procedures were most likely to be within the older age cohort, and most likely to have been placed in foster care (Appendix 22, Table 3 and Tables 6.15 and 6.16 below). Some participants felt they had not been provided with information on the procedure, and others felt that they had been provided with information but were unclear of its contents. One participant, who had not been aware of the CSD complaints procedure, claimed that she had not been provided with information about the procedure in order to avoid her complaining against her social worker:

No, never heard of it, [CSD complaints procedure] probably because [name of social worker] knew that I would put in a complaint against her
(Participant 24)

Table 6.15 Yes – heard of the CSD complaints procedure, cross-referenced by age cohort and placement classification

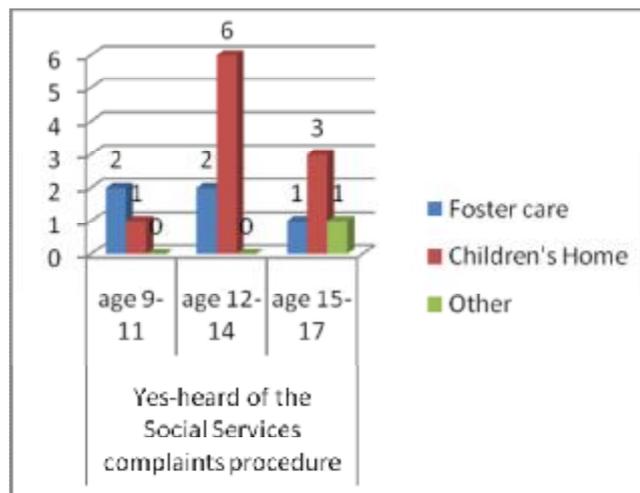
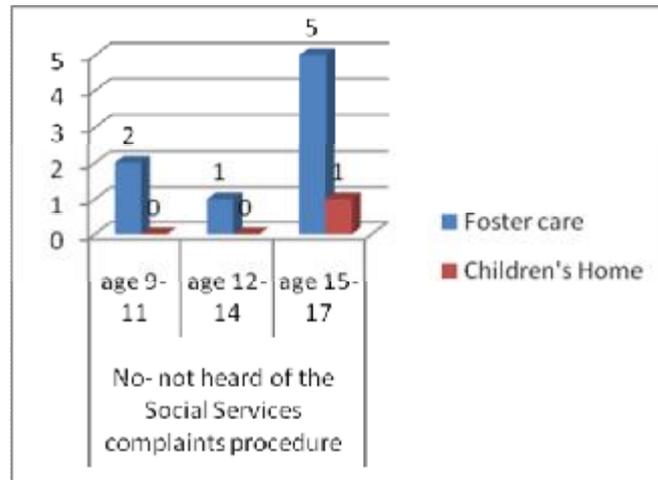


Table 6.16 No – not heard of the CSD complaints procedure, cross-referenced by age cohort and placement classification



A significant group of participants (40 per cent, 10) reported that they had used the CSD complaints procedure in their previous placement. This figure was disproportionately high when compared with complaints data for the whole LAYP population within the CSLA for this period (CSLA, 2005). One explanation considered by the researcher is the interpretation of the term 'complaint' and the differentiation between formal and informal systems. Thus, a significant proportion of participants who had felt they had made a complaint had not formally done so via the complaints procedure according to CSD data. It is felt that the differing uses of terminology may have impacted on the results of this element of the study. This will be examined further in Chapter Seven.

All complaints that participants reported that they had made related to protection issues, with no reference to participatory issues. The complaints generally divided into two categories: the largest group related to complaints of bullying and harm perpetrated by other LAYP in placement; the second main group related to complaints of harm perpetrated by carers.

Participants reported generally poor experiences of the CSD complaints procedure. The emergent concept of lack of effective participation and inclusion was identified in this element of the research, relating to two sub-groups of participants: those who were unaware of the procedure, and those who were aware of the procedure but found their experience of using it was not inclusive or participatory. Participants who had used the complaints procedure generally evaluated it by the predominantly negative outcomes achieved. Poor outcomes and lack of outcomes was identified as

an emergent concept, where a number of participants who claimed they had made a complaint felt dissatisfied with the outcomes of the complaints process:

Nothing happened... I wasn't very happy with it... it was rubbish
(Participant 11)

Well it don't never get anywhere anyway if you make complaints so it is hardly any point in making them (Participant 15)

One participant felt the outcomes of the procedure were unsatisfactory and that he had not understood the technical stages of the process:

It never used to do much when I used to make complaints of the bullying that used to go on. I mean I never used to take it any further than the first stage because I didn't know that there were stages, all I used to know was that there was just you sent a complaint in and it was dealt with didn't realise there was a stage one, two and three
(Participant 21)

Many participants who felt they had used the procedure were angry and disillusioned at the outcome of their complaint. This is consistent with the emergent concept of disconnection and disengagement.

Participants' reports of their experiences in making a complaint appeared consistent with stages one and two of the preliminary typology for the measurement of participation of LAYP, indicative of no or low levels of participation; high propensity to exit; and low levels of safety and wellbeing (Appendix 23).

iv) Relationship between the complaints procedure and perceptions of safety

Most participants (72%, 18) did not feel that the complaints procedure made them feel safe, as indicated in Table 6.17 below.

Table 6.17 The relationship between the complaints procedure and perceptions of safety, cross-referenced by gender and age

Does the existence of the complaints procedure make participants feel safe?	Age cohort of Participant					
	ages 9 -11		ages 12-14		ages 15-17	
	Gender of Participant					
	Male	Female	Male	Female	Male	Female
Yes	1	0	2	1	0	0
No	4	0	2	2	3	7

Participants who reported that the complaints procedure made them feel safe were predominantly male, had been placed in children’s homes and were within the two younger age cohorts. No participants of either gender from the oldest age cohort felt there was a positive correlation between the complaints system and feeling safe. Several participants felt the procedure made no difference to their perceptions of safety.

One participant felt able to communicate dissatisfaction indicating the complaints procedure was therefore not necessary and made no impact on their safety:

It doesn't make a difference... I don't know, if I want to say something then I would just say it anyway without the complaints procedure
(Participant 18)

6.1.5 Key people influencing participants’ safety and wellbeing

This section examines participants’ perceptions of key people who played a role in their safety and wellbeing in their previous placement. The data was collected by applying a multiple-indicator measure to which participants could add if they wished. Most participants identified one or more people who they felt looked out for their safety and quality of care. One participant (Participant 13) did not identify anyone who performed this role. Most participants identified one or two people, and a small number identified more than two key people. Participants generally identified the same roles for both safety and wellbeing. Some minor divergences were noted, for example, marginally more participants identified foster carers who looked out for quality of care than for their safety (Appendix 32, Tables 1 and 2). Participants reported a range of what ‘looking out for safety’ and ‘quality of care’ meant to them:

What like I got my toiletries and shit like that... oh, my foster carer
(Participant 17)

The roles undertaken by people identified by participants divided into two general groups:

- A predominantly reactive role where the identified person responded to concerns expressed by participants. This formed the predominant group.
- A predominantly proactive role where the identified person initiated concern and action.

6.2 Wellbeing

As noted in Chapter One, the term 'wellbeing' is commonly used but its definition is varied and contested. The wellbeing of children and young people is increasingly defined using a set of multiple and wide ranging indicators, illustrating its breadth of meaning and the range of factors which may influence young people's perceptions (UNICEF, 2007). The lack of 'situation specific' indicators for LAYP was noted in Chapter One, and a preliminary framework for the research developed. This section examines participants' perceptions of their wellbeing using this framework focusing on: inclusion and participation, particularly relating to decision making; placement continuity and stability; educational wellbeing; quality of relationships; health and damaging behaviours and risk.

6.2.1 Inclusion and participation

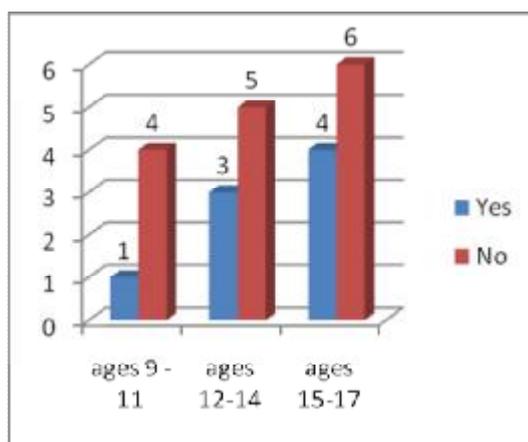
This section examines participants' evaluations of their involvement and participation in decision making across four key issues including aspects of their care and major life events:

i) Involvement in decision making

Key social policy guidance (The National Service Framework for Children, Young People and Maternity Services, DH, 2004b), and children's rights legislation including Article 12, The United Nations Convention on the Rights of the Child (UN, 1989) consistently reinforce the importance of involving children and their families when making decisions about them. The Third Joint Chief Inspectors' report on arrangements to safeguard children (Ofsted, 2008b) draws a relationship between participation in decision making and safeguarding (p. 35-38).

Applying a single-indicator measure, most participants did not feel that they had been sufficiently involved in important decisions about them (Appendix 19). Participants in the 9-11 age cohort reported the lowest levels of involvement in decision making compared with the two older cohorts (Table 6.18).

Table 6.18 Sufficiency of involvement in important decisions, cross-referenced by age



There was no significant difference between participants who had been placed in foster care and those placed in children's homes.

Several attitudes to participation in decision making were noted. Thus, there was no consensus on expectations or style of involvement. Applying Thomas's (2002) typology of attitudes to involvement in decision making, the key positions identified were 'dissatisfied', 'assertive' and 'reasonable' (p. 171).

In summary, although some participants rated their participation in decision making as positive, most participants reported low levels of participation in decision making. The experiences of most participants appeared consistent with stages one and two of the preliminary typology for the measurement of participation of LAYP, indicative of no or low levels of participation; high propensity to exit; and low levels of safety and wellbeing (Appendix 23).

ii) Sufficient participation in decision making

Several participants reported satisfaction with levels of participation in decision making. One participant felt involved in operational decisions within the children's home placement. These reports appeared consistent with stages three and four of the preliminary typology for the measurement of participation of LAYP – indicative of

medium to high levels of participation and medium to high propensity to voice (Appendix 23). Few examples were noted of high levels of participation in making key personal decisions. Thus, a differentiation between participation in operational decisions and personal decisions was noted.

iii) *Insufficient participation and inclusion in decision making*

Lack of participation and inclusion in decision making has been identified as an emergent concept in this element of the research, reflecting the predominantly negative experiences that participants reported about their involvement. Most experiences of participation in decision making related to involvement in an event, usually a meeting. Many participants seemed unsure about their entitlement to access meetings and generally felt excluded from them:

No [not sufficient involvement in making decisions] when they have a meeting they never invite me (Participant 7)

Those participants who attended meetings experienced differing levels of involvement. Most participants who attended meetings where decisions were made felt their views were not fully considered, and generally reported low levels of participation. Perceptions of being 'talked about' in meetings were not uncommon. Thus, not feeling listened to was an emergent concept in this element of the research:

Oh no not in that sense [sufficient involvement in decisions]... like when we have meetings and staff talk about me (Participant 15)

The emergent concept of disconnection and disengagement was reinforced in this element of the research, reflecting that some participants who felt insufficiently involved in key decisions had projected a disillusioned and detached perspective.

The emergent concept of lack of outcomes was also noted; some participants reported participation in some decision making but felt their views were not fully considered when final decisions were made. Thus, sufficiency and effectiveness of involvement were based on a combination of involvement in the process of decision making, and the outcome of involvement in decision making. This is a consistent theme in the research and can be seen to relate to similar findings related to planning and being listened to. Some of the key findings of involvement in decision

making can also be seen to cross-reference with findings on planning (see Chapter Five) and being listened to (this chapter, Section 6.1.3).

iv) Decision making and placements

Thomas (2002) differentiates between involvement in decisions prior to and post entry to care (p. 41). Participants' experiences of involvement in decision making were predominantly related to placement and placement choice. For most participants, this was post entry to the looked after system. Placements were clearly pertinent to many participants, considering that they had all recently experienced a placement change. Participant 11 expected to be told where he was going to live and reported a low level of involvement in decision making:

Because they don't tell me most of the time [where Participant is going to live] I don't know where I am going (Participant 11)

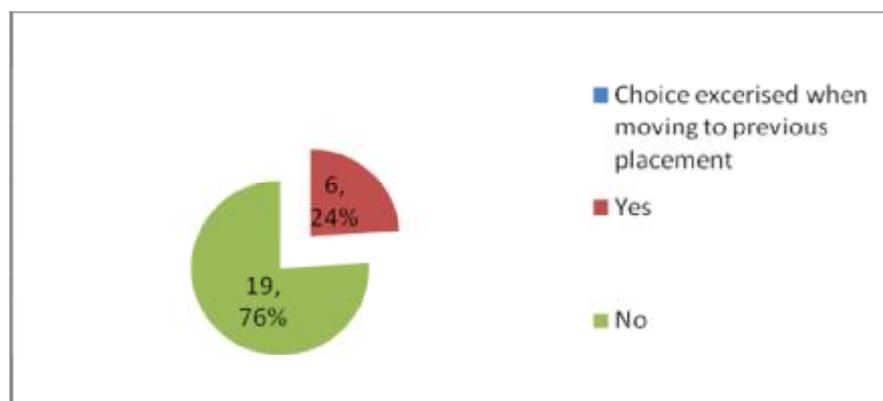
Thus, a relationship was noted between lack of inclusion in decision making and lack of placement choice. Some participants were resentful that they were insufficiently involved in making decisions about placements where they were subsequently unhappy, felt unsafe or poorly cared for.

6.2.2 Evaluation of choice

Choice has become an important issue in contemporary society in general and in child care placements in particular. As noted in Chapter Three, Utting (1997) drew a critical relationship between the lack of choice and risk of abuse from a carer (p. 40).

Most participants reported that they did not exercise choice in whether they moved placement, or the placement they moved to (see Table 6.19).

Table 6.19 Choice exercised when moving to previous placement (combines choice over moving placement and choice over which placement moved to)



Participants who felt that they did exercise choice over moving or placement were predominantly female, in the 15-17 age cohorts and evenly distributed between the main placement classifications (Appendix 20, Tables 2, 3, 4 and 5). One male participant in the 9-11 age cohort reported that he exercised choice over a foster care placement (Appendix 20, Tables 4 and 5). No participant in the two younger age cohorts of either gender who moved to children's home placements reported that they exercised choice over moving or choice over placement.

A small group of participants reported that they exercised choice over moving, choice over placement, and good levels of participation and inclusion in decision making processes.

I wanted to move, I didn't have to, just thought it would be nice to get out of [children's home name] because of all the bullying (Participant 2)

One participant was critical of the CSLA Children's Services policy whereby she had to move placement at a prescribed age, and therefore did not exercise choice in whether to move, although she did exercise choice over the placement she moved to (Participant 22). These reports appeared generally consistent with stages three and four of the preliminary typology for the measurement of participation of LAYP – indicative of medium to high levels of participation; medium to high propensity to voice; and generally high levels of safety and wellbeing (Appendix 23).

This finding relates to the previously identified emergent concept of lack of choice. Several participants who did not exercise choice were angry at their perceived lack of

choice. Several participants felt they would not have chosen the placements where they ultimately felt unsafe or not well cared for. Some participants were critical of the way that some placement changes and entry to placement were handled. This issue is further examined in Chapter Five:

Nope, [no choice] they said you're moving, pack your bags and we'll come and pick you up in a minute (Participant 12)

No choice – I was put in a taxi and taken there and that was it (Participant 21)

No, I was told I was going to a foster place (Participant 17)

Several participants were critical of the lack of choice they had been able to exercise as they wanted to be placed with family members. For some participants, the lack of participation associated with no choice was critical. Several participants who had not exercised choice gave examples of how they had 'created choice' by absconding from placement or refusing to return to a placement in which they were unhappy. Thus, the emergent concept of damaging and risky behaviours was noted.

6.2.3 Placement stability and continuity

Placement stability constituted a key domain of the Quality Protects Initiative (DH, 1998c) and has become an important indicator of quality at personal, programme and systems levels. The research examined participants' experience of placement frequency and their evaluation of its impact upon their safety and wellbeing. Three key findings were identified:

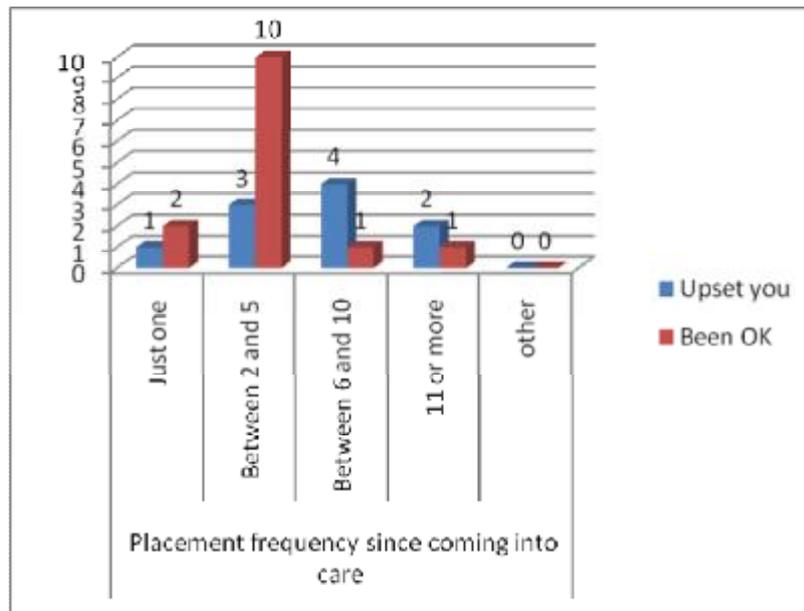
i) Overall placement frequency experienced by participants

Approximately half of the sample (56 per cent, 14) experienced between two and five placements in their overall looked after career. Participants who had experienced between six and 10 placements (20 per cent, 5) formed the second largest category (Appendix 13). The sample mean for overall placements was 6.1, significantly higher than the 4.5 mean for the equivalent group within the whole CSLA population of LAYP (CSLA, 2005). Possible explanations for this disparity are examined in Chapter Seven.

ii) Impact of placement frequency

Approximately half of the participants (56 per cent, 14) evaluated their experience of placement frequency as 'OK'. Most participants in this group had experienced between two and five placements (Table 6.20):

Table 6.20 Participants' evaluation of the impact of placement frequency, cross-referenced by placement frequency



Participants who had been upset by their experience of placement frequency were evenly distributed across all placement categories. Although participants who had experienced high placement frequency were generally more likely to have found this upsetting, there were exceptions to this general pattern. One participant who had experienced one placement reported being upset by the frequency, and another participant who had experienced in excess of 11 placements rated this experience as 'OK'. One participant drew a relationship between high placement frequency and negative impact on confidence to live in future foster care placements:

Upset me [the number of placements experienced] in a way because I sort of think in my head now that every foster placement that I go to isn't going to work out (Participant 12)

The impact on friendships, particularly those made via school was reported as the predominant reason for being upset by placement moves:

Well, I don't like moving really much because like you make a friend in one place and the next minute you're like oh I'm moving so you can't see them again (Participant 25)

Several participants commented that placement frequency had impacted negatively on their family relationships. The emergent concept of discontinuity of relationships with family and friends was noted. No participant made reference to the impact of placement frequency on relationships with carers.

iii) Fragmented sense of self history and disconnection

The participant group was divided between those who easily recalled placement frequency and those who found recollection problematic. Inevitably, participants who had experienced a high frequency of placements and complex transitions between home and placement generally found recollection more problematic:

I dunno, I've had quite a few really, I can't remember (Participant 20)

I've been to my Mum's, to Social Workers, to my Mum's, to foster carers back to my Mum's... It's been three years of mixtures... It's very hard, my life (Participant 2)

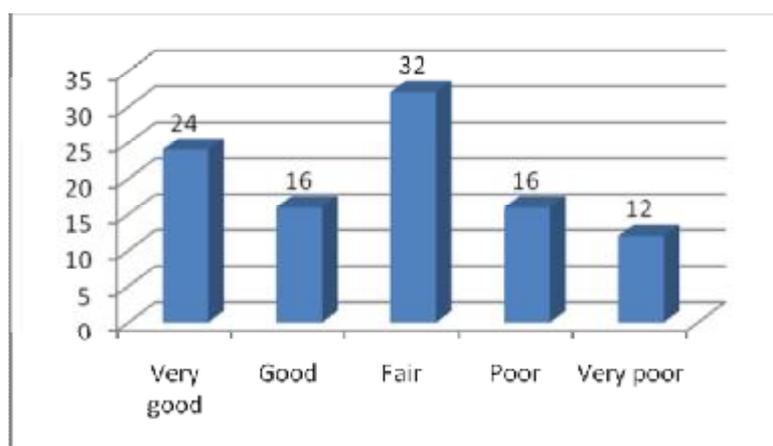
This finding supports the emergent concept of a fragmented sense of self history.

6.2.4 Educational wellbeing

The education of LAYP has become a critical comparative outcome measure for the evaluation of programme and system quality, focusing on performance criteria including attendance and examination results. This research developed a broader perspective by examining the experiences of education in relation to wellbeing (and vice versa). This included participants' perceptions of educational quality and planning, and the relationship between key educational roles and safety and wellbeing.

Applying a multiple-indicator measure, most participants (32 per cent, 8) evaluated the education they experienced in their previous placement as fair. Participants generally rated their educational experiences as positive, although approximately one-quarter of the sample rated their experience as poor or very poor.

Table 6.21 Participants' evaluation of their education



Some participants had a diversity of educational experiences whilst in their previous placement, demonstrating the dynamic nature of the educational experience over the duration of some placements:

The first school I was at was when I moved in [name of children's home] was good, in between that [school name] was very bad, very poor and then [name of specialist learning facility] I would say was fair
(Participant 17)

Some participants experienced a range of specialist and mainstream educational arrangements with both positive and negative outcomes.

Three specific findings are highlighted below:

i) Participation and inclusion

Several participants experienced periods of little or no education during their previous placement and were critical of this. Some of these periods related to placement changes. Most participants expected to participate in full-time education and were clear that carers expected them to be in full-time education and attend school. Participants generally based their evaluation of educational experiences on their school attendance. No participant made an explicit reference to examination or performance.

A relationship was noted between educational wellbeing and positive support from carers in improving attendance and school work:

Very good because they [children's home staff] got me back into school
(Participant 20)

Very good... I think I got better [at going to school] because at night time we had to go to bed at nine or ten and I would be sat in my room with nothing to do at night so I would do my school work or something
(Participant 24)

Most participants related to the socially inclusive and participative elements of attending school, emphasising friendships in particular. Thus, participation and inclusion was an emergent concept in this element of the research. As noted in relation to findings on placement stability and continuity (see Section 6.2.3) participants identified changing schools and losing friends at school as a key negative outcome of placement change. The impact of placement moves on friendships made via school is examined further in the findings on friendships in Section 6.2.5.

ii) Relationship between teachers, other educational staff and safety and wellbeing

Approximately one-quarter of participants identified teachers as looking out for their safety and quality of care. Teachers were ranked fourth after family, friends and social workers in looking out for safety and quality of care. Education welfare officers were perceived as playing a minimal role in looking out for participants' safety, and no role in looking out for their quality of care. Few participants identified teachers as amongst people who listened to them best. Education Welfare Officers were not identified by any participants as listening to them best.

iii) Planning and preparation for employment

As examined in Chapter Three, Personal Education Plans were developed in order to improve educational outcomes for LAYP. Most participants reported that they did not have a Personal Education Plan whilst in their previous placement (Appendix 10, Tables 4 and 5). Participants who did not have a plan were equally distributed across the main placement classifications. Participants reported little involvement in, value or interest from educational planning. The findings did not indicate that the Personal Education Plan was perceived as playing a significant role in enhancing participants' educational wellbeing.

The one participant for whom preparation for employment was applicable, was negative about the lack of proactive support from school and children's home staff:

They [school staff] have never spoken to me about jobs or anything... very poor they [children's home staff] never, ever said [participant's name], what job do you want? (Participant 17)

As this was the only participant for whom preparation for employment applied, it is difficult to draw a conclusion from this single experience. However, it is notable that this evaluation of preparation for employment contrasts with participants' generally positive reports of their carers' attitudes towards inclusion in education.

6.2.5 Quality of relationships

UNICEF (2007) identifies family and peer relationships as a central element of wellbeing. Jordan (2007) asserts that social relationships are critical to a relational model of wellbeing. The inquiry reports into the institutional abuse of LAYP of the 1990s emphasised the lack of relationships with people who would listen, believe and help them (Stein, 2006a, p. 12).

This section presents an analysis of data on the quality of key relationships with family, friends, social workers and carers – organised under the ten key features identified in the analysis:

i) Family relationships, safety and wellbeing

Participants identified family as the key group who looked out for their safety and quality of care (Appendix 32, Tables 1 and 2). Correspondingly, relationships with family members were identified as an emergent concept in this element of the research. A plurality of definitions of 'family' emerged, with participants identifying nuclear and extended family networks as important to them. Some participants clearly defined the family relationships they wished to maintain:

No, I would like to have seen them more often... well, I didn't want anything to do with my Mum but I kept in touch with my sister... well I kept in touch with my sister but no one else (Participant 17)

My Nan and family really (Participant 15)

My Mum and Dad yeah (Participant 2)

For several participants, worry about the welfare of siblings appeared to be the motivating factor for wanting more family contact. One participant felt contact arrangements were unfair and articulated a sense of sadness at the lack of contact with a younger sibling (Participant 25).

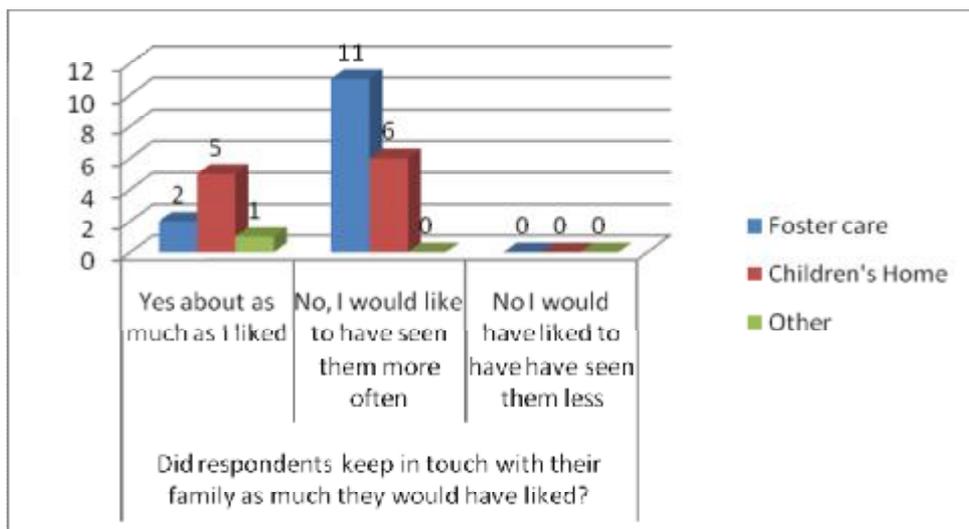
Participants reported family members playing both proactive and reactive roles in relation to their safety and quality of care. More females (32 per cent, 8) than males (20 per cent, 5) prioritised family as looking out for their safety and quality of care.

ii) Frequency and quality of family contact

Most participants (68 per cent, 17) would have liked to have seen their family more often. A small group (32 per cent, 8) were generally satisfied with the frequency of contact; no participant reported wanting less contact.

Participants placed in foster care were generally most dissatisfied with the frequency of their family contact. Participants placed in children’s homes were fairly evenly divided between being satisfied and dissatisfied with the frequency of family contact, as illustrated in Table 6.22 below:

Table 6.22 Participants’ evaluation of the frequency of contact with their family, cross-referenced by placement classification



Inevitably, many participants had strong and complex feelings around family contact. One participant, who reported that he had not had as much contact as he would have liked, was ambivalent about whether he would have liked more contact:

I would and I wouldn't (Participant 12)

Participants who had contact which was reciprocated by family members were generally positive about this contact:

So I was talking to them and then I was phoning my Mum so I was always on the phone (Participant 16)

For some participants, placement outside of their community area had made family contact more problematic. Some participants had become estranged from some family members but enjoyed contact with other members.

iii) Choice and inclusion in decisions about family contact

Some participants had been included in decisions about contact, exercised some choice, and seemed generally satisfied with family contact arrangements. The emergent concept of choice was noted, and levels of participation appeared consistent with stages three and four of the preliminary typology for the measurement of participation of LAYP (Appendix 23).

Conversely, some participants were critical of their inclusion in decisions about family contact, felt they exercised little choice and were dissatisfied with the frequency of family contact. This finding supports the emergent concept of lack of choice. Several participants reported that their family contact was subject to restrictions imposed by the Children's Services Department and seemed unclear why these restrictions were in place.

Several participants reported feeling ambivalent about contact with their families and indicated that they would have benefited from support on what they felt to be complex and important issues.

iv) Encouragement from carers to maintain family contact

Most participants (52 per cent, 13) felt that their carers had generally encouraged them to keep in touch with their family. Significantly, (32 per cent, 8) participants felt

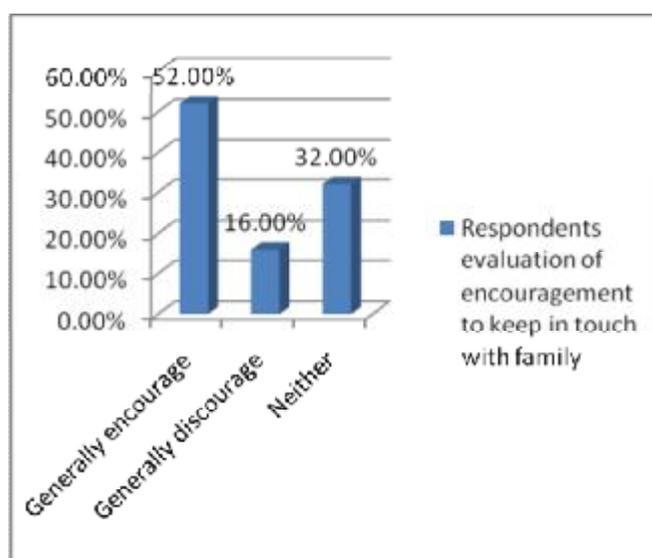
their carers neither encouraged nor discouraged family contact (Table 6.23 below). A small group (16 per cent, 4) felt their family contact had been discouraged.

Participant 23 reported strong encouragement from carers to maintain family contact:

Yeah, they said keep in touch, it will keep you sane... they let me phone family or friends or whatever (Participant 23)

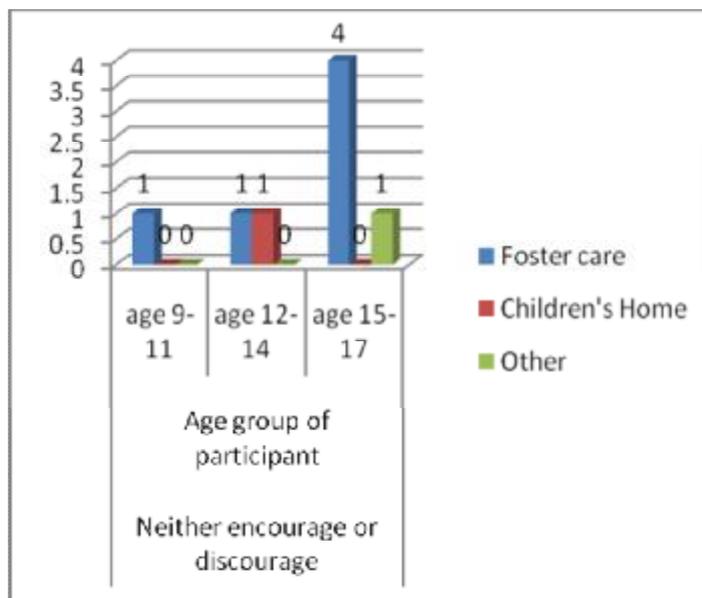
Participants in the two older cohorts who were placed in children's homes reported the highest levels of encouragement to maintain contact with their families (Appendix 24, Tables 1, 2 and 3).

Table 6.23 Participants' evaluation of encouragement from carers to maintain family contact



Most participants who felt they had been neither encouraged nor discouraged to maintain contact with their family were predominantly placed in foster care, and mostly within the older age cohort (Table 6.24 below).

Table 6.24 Participants' perception of neither encouragement/discouragement to maintain family contact, cross-referenced by age cohort and placement classification



Participants 15 and 21 evaluated their carers as neither encouraging nor discouraging family contact:

There wasn't anything, if you wanted to phone your Mum you did, if you didn't they weren't bothered... there wasn't anything (Participant 21)

Neither really, she [foster carer] wasn't like really bothered... she didn't do anything to encourage me, I used to moan that I didn't see them [family] and she used to turn a blind eye to it (Participant 15)

The emergent concept of lack of participation and inclusion regarding family contact was noted in this element of the research. Many of the participants in this group reported a detached, passive and mechanistic style of care. Thus, the emergent concept of mechanistic and detached care was found. Additionally, the emergent concept of disconnection and disengagement was noted. Each of these emergent concepts can be seen to relate to the analysis of findings on perceptions of harm through neglect, examined in Section 6.1.2.

The lack of interest in family relationships from some carers is noted, particularly in the context of the importance that many participants attached to family members listening to them and looking out for their safety and quality of care.

v) Relationships with friends, safety and wellbeing

Participants identified friends as the third most significant group who looked out for their safety and quality of care (Appendix 33, Tables 1 and 2). Friends were reported as playing a marginally more prominent role in looking out for safety than for quality of care. These friends appeared divided between friendships established prior to being looked after and those developed subsequent to being looked after. Friends made through school were identified as important people who looked out for participants' safety and quality of care:

My best friend did, and [named a family member] (Participant 16)

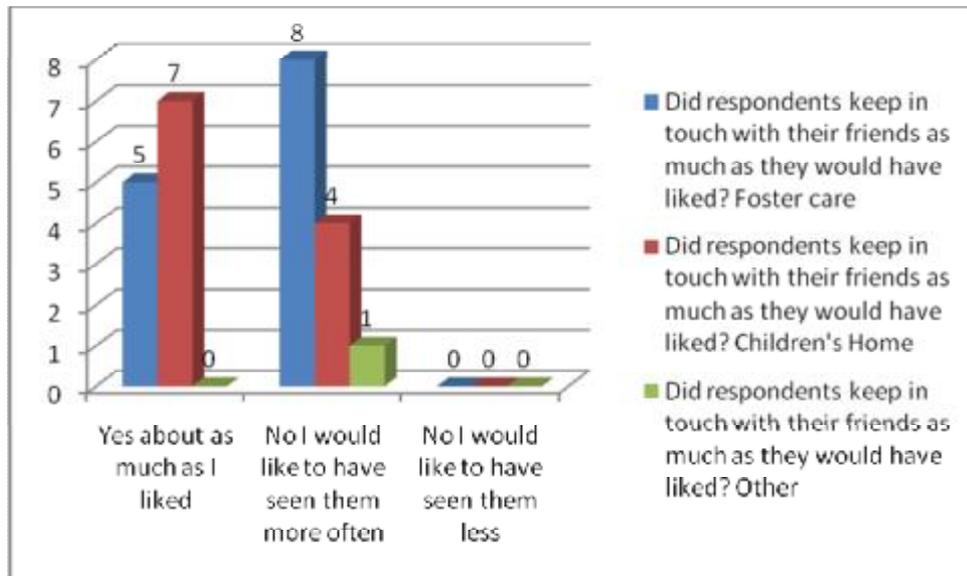
Yeah most of my friends (Participant 12)

Participants reported that friends played predominantly proactive roles in relation to safety and quality of care. Thus, a substantial group of participants reported that friends played a significant role in both listening to them and looking out for their safety and quality of care.

vi) Frequency and quality of contact

Participants were fairly equally distributed between having seen their friends as much as they would have liked, and not having had as much contact as they would have liked (Appendix 25, Table 1). More participants who had been placed in foster care expressed dissatisfaction with their contact with friends than those placed in children's homes, as Table 6.25 below illustrates. This trend is similar to that found in relation to family contact.

Table 6.25 Did participants keep in touch with their friends as much as they would have liked, cross-referenced by placement classification



vii) School, placement frequency and encouragement from carers

As noted in Section 6.2.4 on educational wellbeing, some participants perceived school as providing a critical link with friends. Placement change involving a change of geographical location was identified by some participants as a threat to continuity of friendships made via school and friendships in the community:

No, I would like to have seen them more often... because I never got the chance to go out because it [placement] was so far away (Participant 15)

Discontinuity of friendships was a significant concern to a number of participants and was identified as an emergent concept in this element of the research.

Most participants (44 per cent, 11) reported that their carers generally discouraged contact with their friends, and a small group (20 per cent, 5) felt their carers generally encouraged contact. Consistent with the finding on family relationships, some participants (36 per cent, 9) felt contact with their friends was neither encouraged nor discouraged (Appendix 25, Table 2).

Younger participants in children's homes appeared to be slightly less encouraged by carers to retain contact with friends than those placed in foster care. Levels of discouragement and neither encouragement nor discouragement were roughly

evenly distributed between the two main placement classifications. Those participants who perceived their carers as neither encouraging nor discouraging contact mostly described care contexts characterised by a general lack of interest in them, mechanistic forms of care and passivity towards their contact with friends.

These evaluations cross-reference with similar perceptions found in relation to family contact (i-iv above) and in participants' perceptions of their safety from neglect (see Section 6.1.2):

They didn't even have that much time to go and say 'go and see your friends today'. I'm being honest with you, everything they done was come in the front door and go in the office, stay in there, cook a bit of dinner, eat the dinner and stay in the office, that's all they done... They weren't interested in what I do (Participant 19)

One participant felt that in a short, emergency placement, carers were more concerned about her contact with family and did not engage with her about contact with friends:

They didn't say anything about my friends it was more about my family (Participant 16)

Some participants perceived carers' encouragement to keep contact with their friends as conditional upon their acceptable behaviour:

Yeah... because we ain't in the building 24/7 just like being bored and stuff... they even got us bus tickets so we could go and see our friends... but we only got that if we had been good (Participant 24)

Participants who were discouraged from contact with their friends were generally placed with carers who restricted access to friends, because they viewed the friendships as problematic and potentially related to risk. Participants were generally critical when restrictions on contact with friends were applied.

viii) Disconnection, disengagement and continuity of friendships

Disconnection and disengagement has been identified as an emergent concept. In this element of the research it is related to several variables. Some participants

found friendships generally problematic to maintain after becoming looked after, typically as a result of logistical variables associated with distance and transport. Some participants indicated that they felt stigmatised for being looked after, which impacted on the continuity of pre-looked after friendships:

I would have liked to have seen them [friends] more often... I had quite a few friends before I moved to [name of Children's Home] but when I moved there no one kept in touch (Participant 21)

Some participants did not explain why friendships did not continue, but were concerned about this, and appeared disconnected and disengaged as a result:

*I didn't see them [friends] any more [after being looked after]
(Participant 10)*

Well, I was in there for four to eight weeks and I never spoke to none of my friends, never, and I'm not lying either (Participant 17)

As noted above, some restrictions on contact with friends appeared related to risk, although there was disagreement between the CSD and participants on the interpretation and evaluation of risk. Most participants contested the rationale that restrictions placed on their friendships were in their best interests.

ix) Choice and inclusion in decisions about contact with friends

Some participants had exercised choice and had been included in decisions about contact with friends, and seemed generally satisfied. These reports appeared generally consistent with stage three of the preliminary typology for the measurement of participation of LAYP – indicative of medium levels of participation; medium propensity to voice and exit; and medium levels of safety and wellbeing (Appendix 23).

Most participants who were dissatisfied with their contact with friends did not appear to have participated or been included in making decisions about contact with friends. These reports appear consistent with stages one and two of the preliminary typology for the measurement of participation of LAYP – indicative of no or low levels of participation; high propensity to exit; and low levels of safety and wellbeing (Appendix 23).

x) Relationships with social workers

As noted in Chapter Three, contemporary reports highlight the centrality of the social work role in safeguarding LAYP, and are critical of the variable quality of social work provided (Ofsted, 2008c, p. 37). The following examine the findings on key elements of participants' relationships with their social worker and the implications for safety and wellbeing.

Allocation of a social worker: Most participants (72 per cent, 18) had an allocated social worker for the entirety of their previous placement. A small group (8 per cent, 2) did not have an allocated social worker (Appendix 26, Table 1). The mean social workers allocated per placement was 1.48, with a standard deviation of 1.159 (see Table 6.26 below). The mean social workers allocated to participants since becoming looked after was 3.76 with a standard deviation of 3.689.

Some participants easily recalled the number of social workers they had been allocated whilst for other participants, recollection was more problematic. The emergent concept of fragmented sense of self history was noted in this element of the research, and in relation to participants' recollection of the frequency of placements they had experienced (see Chapter Five):

Quite a lot, I guess about six really, it's been a lot, an awful lot
(Participant 17)

Those participants who had experienced a high frequency of change in social worker were generally critical of this experience, and felt that it had impacted on their ability to make relationships with their social worker. The participants who did not have an allocated social worker during their placement wanted one, and had experienced emergency/unplanned placements for which they felt unprepared.

Relationships with social workers, safety and wellbeing: Social workers were identified by participants as the second most significant group in looking out for their safety and quality of care (Appendix 33, Tables 1 and 2). Some participants qualified their answers by defining discrete elements of the placement where their social worker played a significant role in looking out for their safety and quality of care. Participant 8 felt that the social worker took his concerns about safety seriously towards the latter part of the placement, but not in the former part. One participant

identified an ex-social worker as playing a key role in ensuring safety and quality of care.

Quality of relationships with social workers: Some participants enjoyed good relationships with their social worker. The emergent concept of good relationships with social workers was noted in this element of the research. However, most participants rated their relationships with social workers as generally poor. Thus the associated emergent concept of poor relationships with social workers was also apparent. Three key variables which impacted on quality of relationships were identified as: frequency of contact; quality of communication; and outcomes delivered. These are examined below:

Frequency of contact and its impact on relationships:

Most participants (56 per cent, 14) saw their social worker every month, a small number weekly, one participant less than every three months and, as noted above, two participants did not see a social worker during their placement (Appendix 26, Table 3). Most participants (64 per cent, 16) were critical of the frequency of contact with their social worker and did not feel they saw their social worker as often as they wished (Appendix 26, Table 4). Several participants were critical that contact with their social worker had been limited to the beginning and end of their placement, and had wanted consistent contact throughout. Many participants who had experienced infrequent and irregular contact interpreted this as their social worker not caring about them. Infrequent and irregular contact was often perceived as a barrier to the development of a good relationship between participants and their social worker:

No, I didn't really see any one [social worker] I saw... some bloke, can't remember his name... he came round once to do that review thing and then I saw [name of another social worker] she was really nice but she wasn't around very long either (Participant 15)

Sufficient contact was felt important for establishing good relationships, which some participants felt would have helped social workers to spot issues of safety and quality of care. One participant who was dissatisfied with the frequency of social work contact wanted more contact so that that he could discuss bullying:

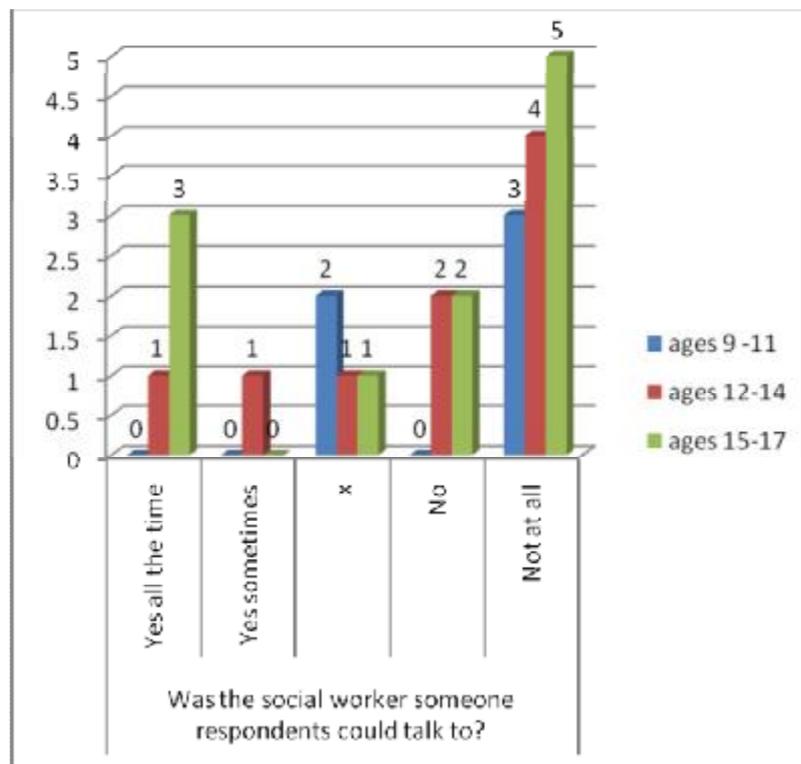
So I could tell them what was going on so they could do something
 (Participant 3)

Thus, a relationship was drawn in some reports between frequency and consistency of contact, the (in)ability to form good relationships, and social workers not picking up on concerns of safety and quality of care.

Quality of communication:

Participants generally reported poor levels of communication with their social workers. Most participants (64 per cent, 16) felt that their social worker was not someone they could talk to (Appendix 26, Table 5). Generally, participants in the youngest age cohort reported poorest levels of communication, although participants who felt unable to talk to their social worker were represented in each of the age cohorts (see Table 6.26).

Table 6.26 Participants' evaluation of whether their social worker was someone they could talk to, cross-referenced by age cohort



Several participants reported good communication with their social worker, which was facilitated when the social worker applied methods that engaged them:

I really used to like the way he used to do it, he'd say 'put a list of answers down and you choose the best one out of it, the best outcome'
(Participant 21)

Some participants associated unavailability of and infrequent contact with their social worker with poor levels of communication. This finding cross-references with the relationship between frequency of contact with social workers and quality of relationship. Many participants wanted to get to know their social worker and feel confident in the relationship in order to share personal issues:

I wouldn't talk to them [social worker] about anything personal because I didn't really know them (Participant 23)

Er, I would like to see her and you know do things because you need to get to know a person, you need to know a person and become a friend as it were... before they can start asking you private questions, going into your life (Participant 21)

An inter-relationship was detected between consistency of contact, the quality of relationship established and the subsequent level of effective communication achieved.

Communication was also reflected in participants' evaluation of how their social worker listened to them:

He [social worker] wasn't ever there to talk to and didn't listen
(Participant 11)

As noted in Table 6.12, a small proportion of participants (20 per cent, 5) rated social workers as listening to them best; overall, social workers were ranked fourth after family, foster parents and friends. A significant group of participants (40 per cent, 10) felt that their social worker looked out for their safety and their quality of care (Appendices 14 and 15), which appears to contrast with the findings on listening (see Section 6.1.3) which awarded social workers a lower rating.

Outcomes delivered:

Several participants evaluated their relationship with their social worker based on the criterion of the outcomes experienced. This group rated these experiences negatively, and was critical and angry at the lack of or poor outcomes achieved for them. Examples included promises and commitments made by social workers that were not always effectively delivered:

No fucking shit... Because they don't do nothing for you, they are here to help, but what do they do? Nothing, they sit on their jack in the office and do nothing... yes, because they say they are going to do something but then they don't (Participant 19)

The emergent concept of not feeling listened to was important in this element of the research.

The importance of outcomes developed as a theme in the research and cross-references with other findings on participants' views of their corporate parent (Chapter Five) and outcomes from participation and being listened to (Sections 6.1.3 and 6.2.1).

Relationships with carers: The term 'carer' refers to direct care providers including foster carers, residential care workers in children's homes and a supportive lodgings provider. Participants did not generally evaluate carers as performing a prominent role in looking out for their safety and quality of care (Appendix 32, Tables 1 and 2). Foster carers were rated marginally higher in looking out for participants' quality of care than children's home staff. Several participants rated their relationships with carers against a criterion of protection from bullying, and were critical of carers for not acting upon and stopping the bullying they felt they had been subjected to:

They bullied me and they [children's home staff] done nothing about it (Participant 3)

As noted above in Section 6.1.3, participants generally rated the way that carers listened to them as poor.

The quality of relationships with carers was an emergent concept from this area of the research. Within this emergent concept, the role of carers in looking out for quality of care predominated over looking out for participants' safety.

Evaluation of treatment from carers: Applying a single-indicator measure, most participants (76 per cent, 19) reported that they had been treated fairly by carers in their previous placement (Appendix 27, Table 1). Those participants who felt they had been treated fairly and those unfairly were equally distributed between the two main placements classifications (Table 6.27).

Table 6.27 Participants' evaluations of the fairness of their treatment by carers cross-referenced by placement classification

Placement	Participants' evaluation of whether they were treated fairly		
	Yes	No	Other
Foster care	10	3	0
Children's Home	8	1	2
Other	1	0	0

Several participants felt that their experience of fairness varied between carers, and that this was impacted upon by staff changes in children's homes placements. Thus, they were unable to provide a definitive evaluation of fairness from carers overall during the previous placement:

Sometimes they did [treat Participant fairly] and sometimes they didn't, fifty-fifty, 'Yes' and 'No'. It sort of balances itself out. I was treated very, very, very poorly by some [children's home staff] (Participant 21)

Duration of placement did not appear significant, as the placement duration varied from less than six months to in excess of five years.

Applying a multiple-indicator measure, most participants (44 per cent, 11) evaluated the quality of their care as 'fair'. Equal proportions of participants rated their care as good or very good, and as poor or very poor (Appendix 27, Table 2). Variations between placement classifications were not significant.

Equity of treatment by carers: One participant rated her treatment in her last placement positively, in contrast to a previous placement. Thus, treatment from

carers was partly evaluated by using previous placement experience as a comparator:

I was treated good yeah... she [foster carer] treated me kushty

(Participant 23)

Equity emerged as a key factor in participants' evaluation of their carers' treatment. One participant based her evaluation upon the equality of her treatment in comparison to that of other members of the foster family:

'No... she always took her daughter's side' (Participant 15)

Another participant also rated equity as important, reporting he was treated fairly as he received pocket money comparable with his peers. Fairness was generally measured by the equality of treatment in comparison to others. Equity and normality was therefore an emergent concept in the analysis of relationships with carers.

Quality of relationship with carers: Some participants reported close relationships with their carers and others reported more distanced and mechanical relationships. Detached and mechanistic care was noted as an emergent concept and also noted in findings on neglect and emotional harm (see Section 6.1.2). The minority of participants who felt they had been subject to these forms of harm reported a lack of depth in their relationships with carers. This level of detachment was also evidenced in high levels of passivity from carers towards participants' relationships with their family and friends (see Section 6.2.5). Levels of passivity towards relationships with friends were fairly evenly divided between those who had been placed in foster care and those placed in children's homes. However, significantly higher rates of passivity towards relationships with family were reported by participants who had been placed in foster care.

Participants did not refer to disruption in the continuity of relationships with carers when they rated the impact of placement frequency.

6.2.6 Health, and damaging behaviours and risk

This section examines participants' awareness of and evaluation of plans designed to ensure the health of LAYP is addressed; the risks of and issues associated with

offending behaviours; and experiences of and factors influencing participants who go missing from placement.

i) Awareness of health plans

Two-thirds of participants felt they did not have a plan to ensure their health was looked after (Appendix 10, Table 2). Participants reported generally low levels of participation in planning. Slightly more participants in foster care than children's homes reported low levels of awareness about health plans. Participants generally reported low levels of participation in planning, consistent with stages one and two of the preliminary typology for the measurement of participation of LAYP, indicative of no or low levels of participation; high propensity to exit; and low levels of safety and wellbeing (Appendix 23).

ii) Offending behaviour

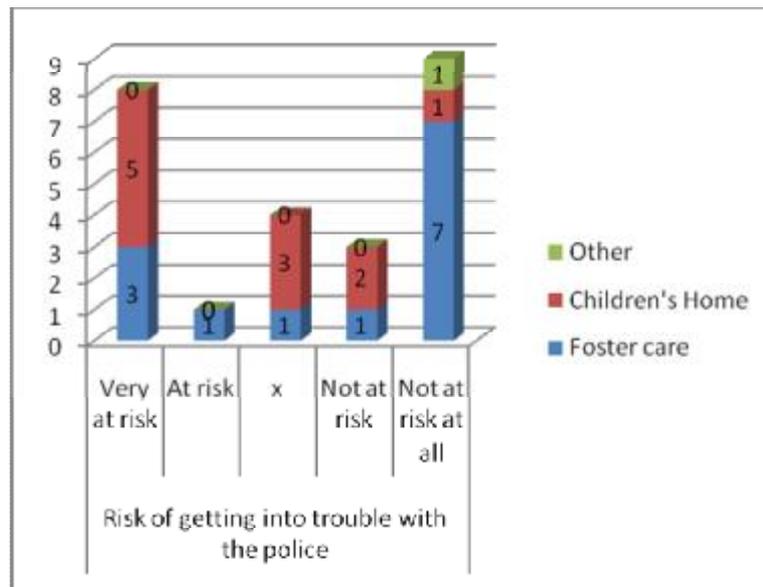
As noted in Chapter Three, LAYP above the age of criminal responsibility are approximately three times more likely to be cautioned or convicted of an offence than non-looked after young people (DCSF, 2009d). Offending behaviour is considered as a key measure of wellbeing (UNICEF, 2007, p. 2) and safeguarding (Ofsted, 2008b, p. 35-38).

Applying a multiple-indicator measure and combining the highest risk categories and lowest risk categories, most participants (48 per cent, 12) perceived themselves to be at no risk of offending; and slightly fewer participants (36 per cent, 9) perceived themselves to be at high risk of offending (Appendix 28, Table 1).

iii) Relationship between risk of offending and previous offending behavior

As noted above, fairly equal proportions of participants reported high and low risks of offending in their previous placement. Several participants evaluated their risk of offending as being of no or very limited risk. The emergent concept of little or no damaging and risky behaviour was noted. Conversely, for those participants who reported high risks of offending, the emergent concept of damaging and risky behaviour was noted in this element of the research. Some differentiation by age, gender and placement classification was noted. All participants who perceived themselves to be at high risk of offending were male, predominantly in the 12-14 year age cohort and placed predominantly in children's homes (see Table 6.28).

Table 6.28 Risk of offending behavior whilst in previous placement, cross-referenced by placement classification



Some participants reported a link between their offending and the offending behaviour of other LAYP in their previous placement. Some participants appeared to perceive offending behaviour as a norm in their previous placement, particularly those who had been placed in children’s homes:

I was a good boy before I went into a children’s home. I had never been arrested in my life before I went in a children’s home... go in a children’s home and I used to get arrested every day, children’s homes are bad
(Participant 7)

Some participants reported involvement in offending behaviour either prior to being looked after or prior to the previous placement. One participant reported offending behaviour as the main reason for being looked after, and felt that her risk of offending had decreased in her previous placement and since becoming looked after.

One participant who identified a relationship between placement context and risk of offending, compared risks in the varying care contexts he had experienced. He considered himself to be at higher risk in his previous rather than his current placement:

Yeah, I got in trouble with the police more there, than I do here
(Participant 7)

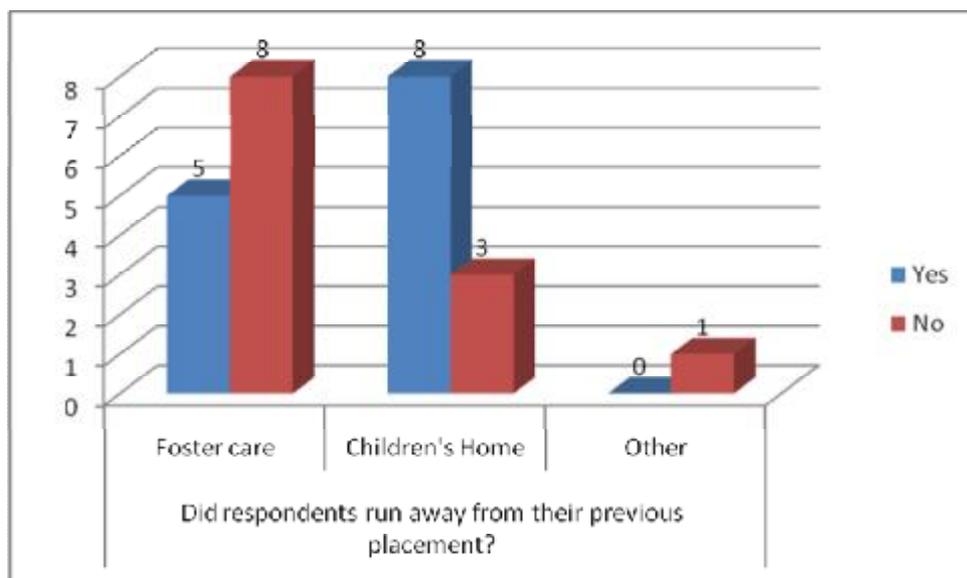
Several participants reported police involvement which had been initiated by staff in children's homes. One participant reported police involvement resulting from a fight with another LAYP in placement (Participant 5), but it was not clear if this referred to the previous or a prior placement.

iv) Missing from placement

Approximately half the sample reported that they had run away from their last placement (Appendix 28, Table 2). Most participants who ran away did so on one or two occasions, although some ran away more frequently. One participant estimated running away on approximately one hundred occasions during the previous placement (Appendix 28, Table 3). It is noted that some self report studies can overestimate such behaviours. Rates reported in the study are inconsistent with DCSF data for the CSLA for this period, which record that no LAYP ran away from placement during the period of the research (DCSF, 2005).

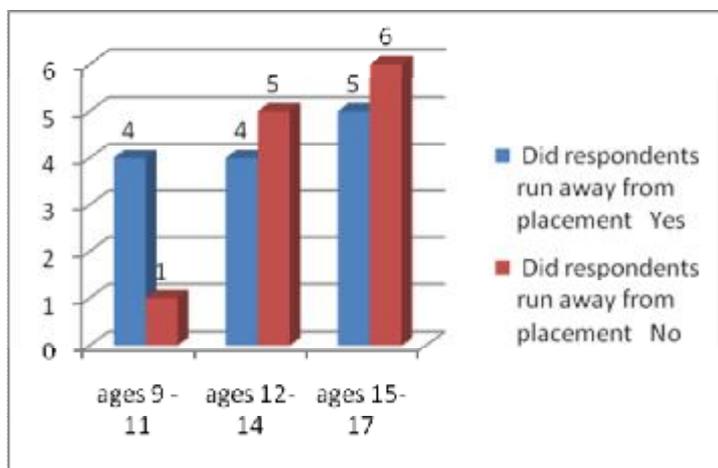
Participants ran away from both placement classifications, but more ran away from children's homes placements (32 per cent, 8) than foster care placements (20 per cent, 5), as illustrated in Table 6.29 below.

Table 6.29 Participants missing from placement, cross-referenced by placement classification



Participants who went missing were distributed across the three age cohorts, with the greatest number from the 9-11 age cohort (Table 6.30):

Table 6.30 Risk of running away, cross-referenced by age



More male participants than female participants reported going missing (Appendix 28, Table 4).

v) *Reasons for going missing from placement*

The reasons for going missing were analysed against the variables of placement, family and individual reasons (Wade et al., 1998, p. 116). The reasons were complex and predominantly related to environmental variables within the placement – including bullying from other LAYP, and going missing when feeling upset or unhappy in preference to using formal complaints and representation procedures. Participant 1 went missing to his family on five occasions, but it was not clear if family or placement centred variables were the key reasons for running away. Most participants who had run away appeared to be distanced from their previous placement and key relationships within it. Disconnection and disengagement was identified as the emergent concept in this element of the research.

6.3 Conclusion

This chapter has analysed participants’ perceptions of their safety and wellbeing, building on the analysis presented in Chapter Five.

The use of grounded theory, in combination with the exploratory data analysis using SPSS, has enabled the researcher to analyse the complexity and diversity of participants’ experiences and perceptions of safety and wellbeing.

Figure 6.1 demonstrates the relationship between emergent concepts and emergent categories identified in the analysis. Emergent concepts are the detailed considerations, the recurring phenomena identified from the data, and emergent categories are identified by grouping these concepts into conceptually abstract themes (Charmaz, 2006, p. 91).

Figure 6.1 Emergent concepts and categories relating to LAYP’s safety and wellbeing

Emergent category	Emergent category	Emergent category	Emergent category
Feeling safe	Inclusion & participation	Continuity & quality of relationships	Sense of self (& self history)
<i>Emergent concept</i>	<i>Emergent concept</i>	<i>Emergent concept</i>	<i>Emergent concept</i>
Feeling unsafe from harm	Lack of participation in key decisions	Continuity/discontinuity of relationships with family	Stigma of being looked after
Safety from harm (especially due to protection from carers)	Participation in key decisions	Continuity/discontinuity of relationships with friends	Fragmented sense of self history
Harm from carers	Disconnected and disengaged	Positive /negative relationships with carer	Equity and normality
Harm from bullying	Choice/lack of choice	Mechanistic and detached care	Lack of planning
Adults’ failure to protect from harm (especially bullying)		Positive /negative relationship with social worker	
Feeling listened to and being heard			
Not being listened to/not being heard			
Damaging and risky behaviours			
Poor/lack of outcomes			
Having someone who looks out for you			
Not having someone who looks out for you			
Placement frequency and type			
Feeling apprehensive on entry to placement			

These emergent categories comprise the 'key components of safeguarding and wellbeing for LAYP' which is the basis of the contribution made by the research to safeguarding policy and practice in Chapter Nine. The findings from Chapters Five and Six will be subject to discussion and interpretation in the following chapter.

Section 3: Interpretation and Conclusions

Chapter 7: Discussion on the Research Findings

7.0 Summary

This chapter examines the findings and themes arising from the analysis of the research. It revisits the background of the participant group and draws together different aspects of the study by considering new areas of knowledge to contribute to the safety and wellbeing of LAYP. The findings of the study are compared to previous research and key themes arising from the literature review and policy analysis, in order to consider the extent to which this research supports or contradicts previous findings.

The chapter is organised into sections which reflect the six domains of the preliminary framework for understanding safety and wellbeing. Section 7.1 examines the experiences of being looked after including key characteristics and backgrounds of participants; and their perceptions of their safety and wellbeing whilst in their previous placement. Section 7.2 analyses the findings on participants' perceptions of safety including: safety from general and specific forms of harm; listening; complaints and representation. Section 7.3 examines the findings about inclusion and participation covering inclusion in decision making and choice. Section 7.4 looks at placement stability and continuity, and its impact on LAYP's safety and wellbeing. Section 7.5 considers the relationship between educational wellbeing, safety and wellbeing. Section 7.6 examines findings on the quality and continuity of relationships including relationships with family, friends, social workers and carers. Section 7.7 examines participants' perceptions about their health, damaging behaviours and risks including planning for health, offending behaviours and going missing, and the findings from the study are interpreted. Finally, Section 7.8 interrogates these analyses in the light of the four categories and emergent concepts identified as a result of these analyses, and examines these against the six domains of the preliminary framework used to organise, conduct and analyse the study.

7.1 Experiences of Being Looked After

This section of the chapter examines the research findings on participants' experiences of being looked after and their relationship to safety and wellbeing, from the background and profile of participants, their knowledge and understanding of being looked after and their entry into their previous placement, through to their experiences of happiness and privacy, and incorporating experiences of the corporate parent role and managerialist

facets of the looked after system. The implications for the safeguarding debate are synthesised and examined at the end of this section.

7.1.1 Background and profile of participants

The sample was over represented by participants who had been in residential care and under represented by those in foster care, compared with local and national data. The sample was also under represented by children and young people from an ethnic minority background compared with local and national data. Participants comprised a broad age range and significant diversity of looked after experiences based on the length of their looked after careers, placement length and placement frequency. Some variations between the profile of the sample, the case study local authority and national data were expected due to the small numbers involved and the sampling strategy applied in the study. The variations were not felt to have a significant impact on the validity of the findings. As stated in Chapter One, and Chapter Four, the study did not aim to replicate or be representative of either the CSLA or national LAYP populations.

7.1.2 Participants' experiences of being looked after

This section focuses on participants' knowledge and understanding of why they were looked after and their experiences of entry to placement.

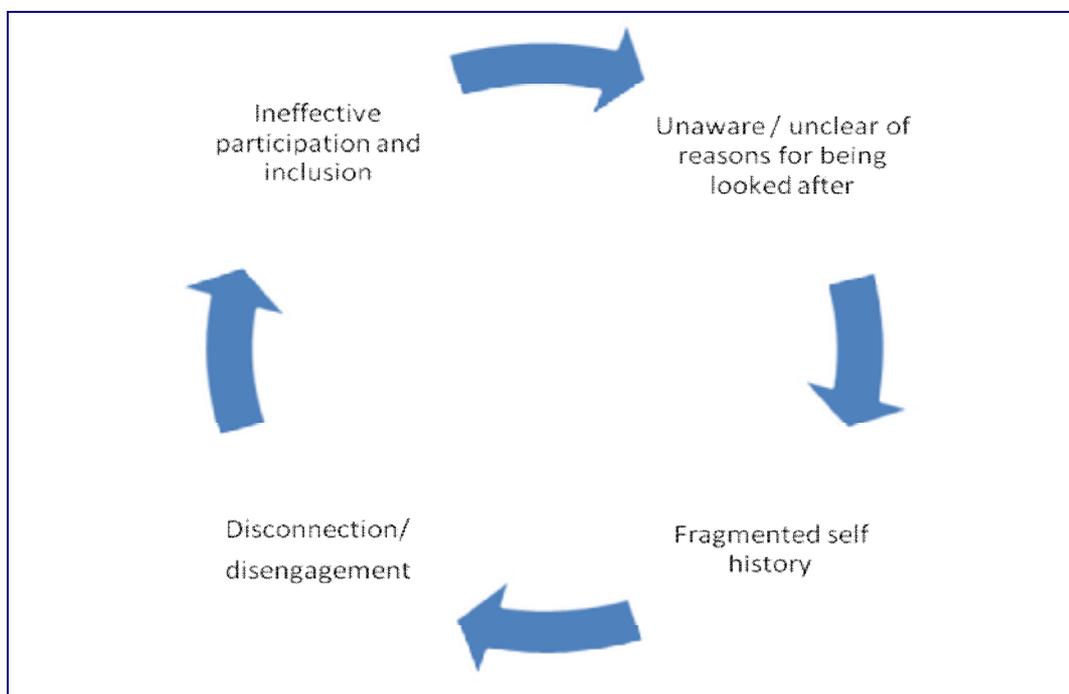
i) Knowledge and understanding of the reasons for being looked after

The study found that most participants felt they knew the reasons why they were or had been looked after. However, some of those who reported that they knew the reasons also indicated some ambivalence during the interview and subsequently questioned their own understanding. The single-indicator measure may have therefore provided a higher rate than the qualitative data (their commentary) indicated. Participants in the younger cohorts were more likely to be clear about the reasons than participants in the older cohorts.

Previous studies found a range of knowledge and understanding of the reasons for being looked after. The most comparable study methodologically, was Baldry and Kemmis (1998) whose questionnaire-based survey involving 71 children and young people over the age of five years in foster care and residential care found comparable rates to the thesis research (p. 132). The age range of the studies did, however, differ which makes close comparison problematic. Other studies which also investigated the reasons for being looked after were methodologically incompatible with the thesis research and found generally lower rates than the study.

Participants who had not known, not understood or not been confident of the reasons for being looked after, generally appeared disconnected and disengaged. A relationship was found between not knowing or understanding the reasons for being looked after, a fragmented sense of self history, disconnection and disengagement, and low levels of participation in decision making and planning, which could subsequently impact on self and self identity. This finding indicates that a sense of self and self identity is a factor of LAYP's wellbeing. This relationship is represented in Table 7.1.

Table 7.1 Relationship between lack of knowledge and understanding of the reasons for being looked after and impact on wellbeing



This finding is compatible with Rose and Philpot (2005) who also found that self and self identity are critical components of emotional wellbeing (p. 50). Consistent with this finding, Gilligan (2005) argues that resilience is developed when LAYP:

Deal with the past, cope with the present and prepare for the future
(p. 111).

Thus, a clear understanding of the reasons for being looked after can be related to LAYP's current and future wellbeing. A clear knowledge and understanding of the reasons for being looked after can help build a sense of self history, and of self and

self identity, which can help build resilience and subsequently impact positively on wellbeing. Conversely, a lack of knowledge and understanding of the reasons may impact negatively on wellbeing.

There is a social policy expectation that the planning process should communicate important information to LAYP and ensure it is understood. The study found that planning did not generally perform this function for participants.

ii) *Experience of entry to placement*

Participants reported predominantly negative experiences associated with entry to their placement, comprising complex tensions between positive and negative feelings. Many participants had experienced distressing personal circumstances, including separation from family or previous carers, prior to entry to placement. Many participants were fearful and apprehensive of unknown variables in their forthcoming placement. Participants who had entered in an emergency appeared to feel the most exposed and scared. Several participants described being 'dumped' at their placement and experienced the practice as insensitive and dismissive of their feelings.

Pre-planned entry involving the establishment of some relationship with carers and effective participation in the process were found to provide some reassurance against fear and apprehension of unknown variables. Conversely, ineffective participation and inclusion in decisions surrounding unplanned and emergency placements contributed to participants' fear and apprehension.

The findings are compatible with a consultation exercise by the Children's Rights Director England (2007b, p. 11) and research undertaken by Shaw (1997, p. 28) who both found relationships between negative experiences of entry and insufficient preparation and support at entry.

Distressing personal circumstances, fear of separation from key relationships and fears about safety in the forthcoming placement impacted on LAYP's perceptions of safety and wellbeing at the point of entry to placement. Ineffective inclusion and participation prior to and at entry appeared to impact negatively on their perceptions of safety and wellbeing. Correspondingly, effective inclusion and support at entry impacted positively on their perceptions of safety and wellbeing.

7.1.3 Experience of happiness in placement

Happiness is a highly subjective measure, not included in any of the generic wellbeing frameworks identified in Chapter One, but one which is examined in depth by some organisations working with the all-children population to develop holistic wellbeing indicators (New Economics Foundation and Action for Children, 2009). It was felt to be an important measure to include in this study to contextualise the experience of being looked after.

Participants were mostly unhappy in their previous placement and conversely most were happy in their current placement. The research context should be taken into consideration as the research related to the previous placement that many had wanted to and subsequently did leave.

The variables identified for being unhappy were predominantly placement related but were also closely connected to family reasons. The change in happiness rates between previous and current placement are notable. Placement can be interpreted as being a major variable in participants' ratings of their own happiness.

No research could be located that explicitly related to LAYP's perceptions of happiness. Cameron and Maginn (2008) examined pre-care and corporate parenting related issues, and argue for an 'authentically warm parenting caring model' (p. 1168). The model aims to improve parenting experiences, and enhance wellbeing and other key outcomes for LAYP and therefore, it is argued, such a model is designed to also impact on happiness.

Participants' unhappiness in placement appeared to impact negatively on their wellbeing and, conversely, improved levels of happiness in the current placement appeared to have a positive impact on wellbeing. Thus, there is an intrinsic relationship between happiness and wellbeing; and a relationship between the variables that impact on happiness, or unhappiness, and wellbeing.

7.1.4 Experience of privacy in placement

Most participants were generally positive about the privacy they experienced. More participants in the older age cohort and those placed in foster care than in children's homes were positive about their privacy. The study found cultural and structural dimensions to privacy:

i) Structural dimensions of privacy

Participants who had their own room in children's homes felt that it afforded them some protection from bullying from other LAYP. The National Minimum Standards for Children's Homes do not reflect the preference for single rooms identified in the study, but state the need for LAYP to have both privacy and companionship (DCSF, 2009b, p. 72). The National Minimum Standards for Fostering make no reference to privacy (DCSF, 2009c).

ii) Cultural and attitudinal dimensions of privacy

The study found a relationship between privacy and rules on rights of association. The participant whose lack of privacy related to invasive personal care presented as distressed and bewildered. In a study of consultations during social care inspections, Morgan (2005) found that all age groups of LAYP value privacy (p. 96). The thesis research findings are compatible with this finding but found that quite differing reasons for privacy emerged by age, which ranged from rights to privacy to a wish for age-respectful and age-sensitive personal care. Cultural and attitudinal variables were found to impact on structural variables within the placement. Having one's own bedroom was found to be very important but rules and attitudes towards access by staff and other LAYP were identified as key inter-related variables.

Thus, structural variables including having one's own room impact significantly on feeling safe from bullying. Attitudes which respected and promoted privacy contributed to feelings of safety and wellbeing. Carers' attitudes which were felt to conflict with rights to privacy impacted negatively on feelings of safety and wellbeing. Contemporary social policy does not adequately reflect the importance attached to privacy by participants and the relationship found between privacy and feelings on safety and wellbeing.

7.1.5 Experience of planning

The high level of dissatisfaction found with plans and planning was based on many participants not understanding either their plans or the planning process; poor outcomes achieved as a result of planning; and generally low levels of participation and inclusion in planning using the preliminary typology for the measurement of participation of LAYP (Appendix 23). Many participants appeared detached and disengaged from the planning process, consistent with a high propensity to exit according to this typology.

The thesis research found lower levels of awareness of key plans than other comparable research. Baldry and Kemmis (1998) found 57 per cent of their participants reported having a care plan (p. 29-30). Timms and Thoburn (2003) found that 71 per cent of LAYP were aware of their care plans (p. 107). The study had a larger sample and wider age group than the thesis research, and was restricted to participants who had become looked after through court procedures. Thus, methodological differences limit the value of comparison. The Children's Rights Director, England (2006a) found three-quarters of LAYP in a consultation exercise knew that they had a care plan (p. 29).

Planning did not appear to have been predominantly experienced by participants as being person centred. These experiences contrast with contemporary person centred planning methods, used with diverse service user groups (Bowers, Bailey, Sanderson, Easterbrook and Macadam, 2007; Sanderson, 2010). Importantly, the focus of person centred planning is less on the planning process but more on engaging with the person about their future:

Assisting people to work out what they want, the support they require and helping them get it... it is not person centred planning that matters as much as the pervasive presence of person centred thinking
(Sanderson, 2010)

The lack of aspiration was noted in relation to planning and again, can be argued to contrast with the aspirational ethos of person centred planning. This finding contrasts with Laming (2007) who considers that the state should be ambitious on behalf of LAYP (p. 10).

The low levels of effective participation in planning processes contributed to disconnection and disengagement and were generally indicative of a greater propensity to exit than voice.

The thesis findings differ from other studies, perhaps reflecting inconsistencies and variability in national care, health and education planning noted in social policy guidance (Ofsted, 2008b, p. 36). The low levels of participation in planning found in the research also conflict with the current legislative and social policy focus on planning which anticipates that LAYP will participate with consequent improvements in quality and outcomes (Ofsted, 2008b, p. 36). It could be argued that fulfilling the bureaucratic and

managerialist expectations placed on planning per se has superseded a proper consideration of the young person's experience of and inclusion in planning.

Planning was not generally experienced as being person centred, and did not appear to engage participants in discussions about their past or their future aspirations. Little evidence was found that participants had aspirations for the future or that anyone else had aspirations for them. Plans and planning were mostly associated with meetings, often experienced as confusing, which did not generally appear to make a positive contribution to their perceptions of safety and wellbeing.

7.1.6 Experience of the corporate parent role

The study found that most participants did not feel they received a good service from the CSD of the CSLA. Participants generally equated social workers with the CSD, and consequently their corporate parent. They did not conceptualise the corporate parent role or differentiate it from the social worker role. Low levels of participation and inclusion and high levels of disengagement and disconnection were reported in relation to the corporate parent role, consistent with participants' rates of their inclusion and participation in relation to the social work role, examined later in this chapter (Section 7.3).

The critique of the state as corporate parent is well documented and is frequently evidenced by poor outcomes for current and former LAYP. The findings of the thesis research are consistent with Sergeant (2006) who also found generally negative perceptions of the corporate parent from LAYP (p. 2). However, as noted in Chapter Two, Bullock et al. (2006) found that the heterogeneity of the LAYP population reflected diverse interpretations of the corporate parent and that generalisations about the role are problematic (p. 1347). Thus, differing expectations of the corporate parent and their role in ensuring safety and wellbeing may reflect the heterogeneity of LAYP.

Significant elements of New Labour social policy, latterly through the Children and Young Persons Act 2008, have aimed to improve outcomes for LAYP by strengthening the corporate parent role, as examined in Chapter Two. The prominent role of the corporate parent in social policy and legislation is not always discernable from the social worker role. The research was conducted before the Care Matters reforms were implemented, therefore the impact of additional avenues of communication for LAYP that have since developed (such as children in care councils and corporate parenting boards) remain unclear.

7.1.7 The experience of rules and procedures

The impact of rules and procedures was examined in the study in the light of their prominent role in social policy reforms of the looked after system over the last decade. The study found that rules and procedures had a moderate impact on participants' feelings of safety and wellbeing. Some positive relationships were found between rules and safety and wellbeing where rules were felt to place boundaries around bullying behaviours of other LAYP, and subsequently appeared to increase feelings of safety and wellbeing. For other participants, there was no discernable relationship between rules and safety and wellbeing.

Participants were generally concerned about the equity and normality of rules and procedures, particularly in comparison with their non-looked after peers and siblings. The content of rules was found to be of more concern than their quantity.

Sinclair (2005), who researched LAYP placed in foster care, also found normality to be a key concern (p. 50). Petrie and Simon (2006) confirm the predominance of rules and procedures under the UK managerialist paradigm in contrast to German and Danish practices (Petrie and Simon, 2006, p. 130). Whilst this study confirms the difference between these systems, it does not explicitly examine the relationship between managerialism and safety and wellbeing from the perspective of LAYP.

The moderate relationship found between rules, safety and wellbeing is significant given the importance attached to rules and procedures within the UK managerialist paradigm. Rules that were seen as mechanisms by which adults maintain order and provide protection from bullying and aggression impacted positively on perceptions of safety and wellbeing. Equity of rules and the normality they infer compared with non-looked after peers and siblings contribute to the perception of being treated fairly or unfairly, and were felt to contribute to wellbeing.

7.2 Perceptions of Safety from Harm

This section examines the study's findings on general perceptions of safety including perceptions of specific forms of harm and bullying, complaints and listening. As noted in Chapter One, the importance of safety is reflected in various contemporary wellbeing models (DfES, 2003; CSLA, 2006; UNICEF, 2007, p. 2; Stein, 2009, p. 115). Participants generally prioritised individual safety over programme or system level safety (Gil, 1982;

Kendrick, 1998; Stein, 2006a). The study also found that most participants were keen to engage in conversations about their safety.

However, a number of conceptual complexities were apparent in several areas of this aspect of the research. The lack of a clear differentiation between bullying and physical abuse caused some replication of results in the area of bullying and physical harm. The study found that participants applied a range of definitions of bullying, compatible with the lack of conceptual clarity between peer abuse and bullying found by Barter et al. (2004) in research on peer violence. This confusion also raises questions about ambiguity of meanings, which have implications for safeguarding practice. If LAYP find it difficult to distinguish between physical harm and bullying, it will require social workers, carers and the looked after system to both clarify and handle these issues with great sensitivity to ensure that young people are safe from harm, and are able to identify when or if they are likely to be harmed. The methodological issues raised by this complexity are further examined in Chapter Eight.

In addition, most participants had felt safe in their previous placement but one-third had felt unsafe. This finding is marginally lower than the 71 per cent of LAYP found by Timms and Thoburn (2003, p. 28) in a large scale national survey. This finding can be interpreted in two ways. First, a substantial group of participants felt safe and second, a significant group of participants had not felt safe. This is important in the light of the reasons for being looked after examined in Chapter One, Introducing the Research, which were predominantly associated with child protection. The thesis research also found that participants felt both safe and unsafe from harm in foster care and in children's homes. This finding is compatible with national studies (Ofsted, 2008a, p. 4; Utting, 1997, p. 28) which found that LAYP reported concerns for their safety in diverse placement contexts. The study confirmed that feeling unsafe is not therefore a discreetly historical, institutional phenomenon.

7.2.1 Participants' perceptions of safety from specific categories of abuse

The study found a variation in participants' perceptions of safety, measured against the categories of physical, sexual, emotional harm, neglect and bullying. As noted above, questions on bullying were separated from questions on physical harm but the inter-relationships between the two concepts were apparent.

Four key issues emerge from the analysis of findings relating to this aspect of the research:

- i) Participants generally felt most protected from sexual harm and least protected from physical harm. A small number of participants felt that they had been subjected to physical harm by carers, including harm caused by restraint, being hit and being threatened by a carer. Other LAYP in the placement seemed to be the predominant perpetrators of other forms of physical harm, which mostly comprised bullying. Thus, the crossover between physical harm and bullying can be seen. This pattern is compatible with findings by Sinclair and Gibbs (1998, p. 197) and Utting (1997, p. 105), with the former's findings reflecting narrow definitions of physical and sexual harm which perhaps lead to a relatively narrow perspective on who may be the sources of harm. The finding that LAYP may be the predominant perpetrators of these specific forms of harm is clearly important, as it contrasts with the adult-perpetrated individual abuse which was the focus of inquiries into institutional abuse in the 1990s. It may also contribute to more effective safeguarding from harm.
- ii) Participants who felt unsafe from emotional harm and neglect identified bullying, failure to protect from bullying and poor emotional relationships with carers as the causes. In a review of what works in interventions for emotional maltreatment, Barlow and Schrader-MacMillan (2009) also relate bullying to emotional abuse. They consider emotional abuse to be potentially damaging child maltreatment because the perpetrator is invariably the person responsible for the child achieving developmental tasks.
- iii) Participants' reasons for feeling unsafe from neglect focused predominantly on inadequate standards of care, poor relationships with carers and insufficient attention from carers. Participants who felt neglected and did not feel they had their emotional needs effectively met, reported a mechanistic, non person-centred model of care. Several participants appeared angry and detached as a result of being cared for under this model. The criticism of some participants at the quality of their emotional care can be contrasted with European social pedagogic models, as noted in Chapter Three and Section 7.6.4. Whilst relationships do not easily fit within the dominant UK models of social work, relationships are at the heart of social pedagogic models. Thus, it is suggested that the detached, mechanistic model of care is more reflective of the procedural model of UK social work. It was possible to identify the mechanistic model of care as causing individual harm, influenced by programme level variables that resulted in this being sanctioned as an acceptable and appropriate model of care (Gil, 1982, p. 10; Stein, 2006a, p. 15).

iv) Reference has been made, above, to the importance of bullying that emerged in relation to physical harm in the study. As a discreet form of harm, the study found slightly more than half of the sample had not experienced bullying, and slightly less than half reported being subject to a degree of bullying. Those who had experienced bullying were predominantly male, from the younger cohort and equally distributed across placement type. The finding relating to prevalence of bullying in foster care is important as it challenges assumptions that it is a form of harm confined to residential care.

Several participants equated bullying to a cultural norm within the placement environment, to which they had to adapt. The acceptance of this phenomenon as a norm seemed to reflect low expectations of quality of care and safety, and some participants' low self esteem. The findings on the prevalence of bullying in residential care are comparable with Barter et al. (2004) who found similar levels in a sample of 71 LAYP (p. 205). This study was confined to LAYP in residential care with a slightly wider age range than the thesis study, which makes comparison problematic. The Children's Rights Director (2007d) found a lower rate of bullying in foster care than reported in the thesis research (p. 22). It is notable that little research has been undertaken on LAYP's perspectives on violence towards them (Barter et al., 2004, p. 204).

The study found two key dimensions to the perceptions of the impact of bullying. First, the impact of bullying for some participants was intensely distressing and intimidating. For one participant these experiences covered an extended period of time but not at a consistent level of intensity. Living in fear of bullying seems to have had a distressing and corrosive effect. The 'waves' of bullying and intimidation described by one participant resonates with the developmental group work stages of forming, storming and norming. Second, some participants perceived their carers and social workers as not protecting them from bullying and regarded their response as inadequate. Thus, there was also an impact from not being listened to and subsequent inaction from adults.

Whilst many participants made it clear that they would contact friends and family in the event of being harmed, most who had been bullied held carers and social workers responsible for failing to ensure their safety from bullying. Some participants felt they had experienced an inadequate response to bullying, which impacted

adversely on their confidence and trust in their relationships with both carers and social workers. The outcome for some participants was that the bullying continued and that they felt devalued by not being listened to. The research found little evidence of adult intervention on bullying (Whiteford, 2005, p. 77). The Children's Rights Director Report (2008c, p. 35-36) found that adult intervention can be experienced negatively by some LAYP and, for others, impact positively on their experience of bullying.

7.2.2 Who looked out for participants' safety and wellbeing?

The study found that most participants were able to identify someone who looked out for their safety and wellbeing, prioritising family, social workers and friends. Importantly, one participant did not identify anyone. It is a significant finding that LAYP who are mostly living away from their families identified family as their key source of support and protection. The meaning of this finding could be analysed extensively. However, as the research is based on the interpretations of LAYP, it is argued that the finding has validity. The finding is comparable with findings by the Children's Rights Director England (2007a, p. 10) which also identified that LAYP prioritised family as a source of help in the event of being harmed. Close comparison between the studies is problematic due to significant methodological differences. This finding has implications for the role of families in ensuring safety, which will be further examined in Chapter Nine.

The research found little evidence of participants being empowered to participate in their own safety. This contrasts with Lansdown (2006) who claims that the safety of LAYP is increased when there is a redistribution of power for ensuring safety between adults and LAYP. This analysis appears consistent with the theoretical assumptions of the typology developed in the thesis for the measurement of the effectiveness of the participation and inclusion of LAYP, and the subsequent impact on their safety and wellbeing (Appendix 23).

Close and trusting relationships with family, social workers, carers, and friends were found to be protective and contributed to LAYP feeling safe in their placement. This finding is compatible with a finding from a study undertaken by the Children's Rights Director England (2004, p. 17) who also identified the protective properties of close relationships and the increased feeling of risk associated with carers with whom they did not have a close relationship. Timms and Thoburn (2003, p. 30) also found that relationships can perform a protective function.

7.2.3 Feeling listened to

Most participants felt they were listened to by someone, but significantly one participant felt listened to by no-one. Half the sample felt listened to effectively and achieved degrees of inclusion consistent with stages three and four of the preliminary typology for the measurement of participation of LAYP (Appendix 23, Table 2). Half the sample experienced being listened to with varying degrees of ineffectiveness, consistent with stages one and two of the preliminary typology. The study found that family, friends and foster carers were prioritised as listening most effectively. This is an important finding as it demonstrates the importance of family, social networks and family-based carers, rather than professionals, as listening most effectively. It is notable that groups identified as listening most effectively are relatively powerless within the looked after system, which may have implications for acting on the views of LAYP.

Participants in the lower age cohorts generally reported more positive experiences of being listened to than older participants. The reports of low levels of being listened to can be compared with social pedagogic models where listening is an integral element of the relationship between LAYP and carers, and is also found to link explicitly to protection (Petrie et al., 2006, p. 25). Thus it is argued that different models of social work place differing values on listening.

Strong evidence was found in the study that effective listening is a combination of listening and subsequent action from adults. This focus on outcomes is comparable with McLeod (2008) who conceptualised the relationship between listening and outcomes (p. 21). Findings in the thesis research relating to participants who did not feel listened to are consistent with the inquiry reports into historic abuse, which found the failure to listen to LAYP was a recurring theme (Corby et al., 2001, p. 93).

Reports of higher levels of listening in the thesis study reflect expectations in the National Minimum Standards for Fostering (DCSF, 2009c, p. 10) and the National Minimum Standards for Children's Homes (DCSF, 2009b, p. 9). Conversely, the lower levels of listening reported by participants conflict with these expectations.

7.2.4 Complaints and representation

The relationship between safety from abuse, listening, and complaints and representation systems have historical roots in the inquiry reports and safeguarding reviews into institutional abuse of LAYP conducted in the 1990s. It was found that claims of abuse from LAYP had not been listened to nor acted upon. Complaints systems were introduced as the managerialist response to not being listened to. Five specific issues relating to complaints and their relationship to safety and wellbeing have been examined, below:

i) Access to help

The study found that most participants were aware of how to access help if they had felt unhappy or worried, and a small group who were unaware – which included a young person who had been placed in an emergency and who had felt vulnerable. This highlights the vulnerability of those in the study who had unplanned, emergency placements. Carers and social workers were identified as key sources of help, in contrast with the predominant role that participants felt their family played in looking out for their safety and wellbeing (see Section 7.6.1). Contemporary developments in communication technology may address some of the difficulties found in confidential access to a telephone. It was clear that some participants wanted additional support in order to apply guidance and access help.

ii) Knowledge of how to make a complaint under the SSD complaints procedure

The study found that most participants felt they knew how to make a complaint, and a smaller proportion knew about the CSD's complaints procedure. The finding that more participants who had been placed in children's homes knew of the CSD complaints procedure than those in foster care, is generally compatible with several studies. This differentiation was also highlighted in a review of safeguards of children in public care (Utting, 1997, p. 184). Frost and Wallis (2000) also found a significant differential (p. 114) with higher levels of knowledge in residential care and lower levels of knowledge in foster care than the thesis study. As differing methodologies were used in the two studies and a significantly larger sample was used in the Frost and Wallis study (2000), a detailed comparison is problematic. The general trends of differential knowledge seem compatible and significant in their relationship to safety and wellbeing. It was not always clear from where participants had initially derived information on complaints, and not always fully clear that knowledge had been derived during the previous placement. This was particularly difficult to determine with participants who had experienced high placement frequency.

iii) Frequency and use of the Children Services complaints procedure

The study found a high use of the CSD complaints procedure, which conflicted with records of complaints held by the CSLA (CSLA, 2005). The study concluded that the discrepancy reflected an ambiguity in the relationship between informal complaints and complaints made under formal complaints procedures. Parry et al. (2008) found a tension between formal and informal means of handling complaints, reflected in differential use of formal and informal systems between practitioners and managers (p. 11). Stuart and Baines (2004, p. 2) questioned the format and accessibility of representation and complaints information available to LAYP, which also contributes to such misunderstandings.

The complaints procedure was reported to have been used predominantly for protection issues, which comprised protection from bullying from other LAYP and protection from carers due to neglect and restraint techniques. The predominance of protection issues was consistent with findings identified by Freeman (1983, p. 43-47) and Frost and Wallis (2000, p. 118). A small number of 'provision' based complaints were reported in the thesis study, which mostly related to dissatisfaction with social work contact. Frost and Wallis (2000, p. 118) found a higher percentage of provision based complaints than in the thesis study. No rights or participatory based complaints were reported in the study, which is notable and in conflict with the high levels of dissatisfaction with participation found in the study. The reasons for this may be due to confusion over complaints procedures, and may also reflect low expectations of/for participation – thus this would not be regarded as a legitimate area for complaint. Frost and Wallis (2000, p. 118) also found a small amount of rights and participatory based complaints. A close comparison between the two studies is problematic due to the larger sample in Frost and Wallis (2000), including the study's examination of upheld complaints filed by LAYP.

The thesis research examined participants' own perceptions of complaints, which appear to have been significantly affected by the relationship between formal and informal complaints. The researcher chose not to probe participants on whether their understanding of a complaint was consistent with the CSLA definition of a complaint under the complaints procedures; consistent with the interpretivist perspective adopted by the study, participants' perceptions were accepted and their legitimacy was not questioned. It is therefore argued that the research effectively captured participants' perceptions and experience of making a complaint.

iv) *The relationship between complaints procedures, safety and wellbeing*

Participants expressed little confidence in complaints procedures and generally felt that the existence of complaints procedures did not make them feel safe. This finding should be considered in light of the conceptual confusion found between formal and informal procedures. The research concludes that complaints procedures are not predominantly perceived as a credible device to communicate concerns about safety and wellbeing. This finding is significant and conflicts with the historical relationship between protection from institutional abuse and the statutory requirement to implement complaints procedures within the Children Act 1989. There was no comparable research explicitly relating complaints procedures to perceptions of safety. However, consistent with the general conclusion, Frost and Wallis (2000) also found a similar lack of credibility of the complaints procedure with the LAYP in their study (p. 123).

v) *Relationship between outcomes, inclusion, participation and representation*

A strong relationship emerged in the study between key components of participation and outcomes for participants. The study found that poor outcomes often contributed to feelings of disconnection and disengagement. Most participants who felt ineffectively listened to were also critical of the low or poor outcomes resulting from being listened to. This finding seems consistent with the conceptualisation of being listened to combining listening and subsequent action from adults (McLeod, 2008, p. 21). This finding is also comparable with Parton (2006) who claims listening incorporates hearing the voices of LAYP, and that this process requires young people achieving more control once their voices have been heard (p. 186). This position is consistent with the relationship between power and outcomes formulated within the preliminary typology for evaluating the effectiveness of LAYP's participation (Appendix 23). Involvement in decision making was often assessed on the basis of the poor outcomes achieved from the involvement. Thomas (2002) found that '*getting what I want*' was amongst the least important aims of involvement in decision making (p. 153). The thesis research found an importance attached to a tangible and identifiable relationship between their input into decision making and the subsequent decision. Participants who claimed they had used the CSD complaints procedure were often angry with what they perceived to be poor outcomes. These findings reflect Frost and Wallis (2000) whose research also found that LAYP were generally less concerned about the process of complaints, but more concerned with the resultant impact on their problem (p. 123).

7.2.5 Implications of the findings for LAYP's safety and wellbeing

Various definitions and interpretations of bullying and physical abuse identified in the study highlight the conceptual complexity of these issues. Conceptual complexity increases analytical complexity and can make comparison with other research and other sources of evidence problematic. However, it also elicits a number of important findings that merit attention, both in terms of further research but importantly in relation to policy and practice development relating to LAYP's safety and wellbeing. Key points relating to the safety of LAYP arising from this element of the research include:

Most participants felt safe but a significant proportion reported degrees of feeling unsafe. Participants felt safe and unsafe in foster care and residential care, confirming the analysis of risk of harm to LAYP beyond institutional contexts. Participants felt most safe from sexual harm and least safe from physical harm (this measure of physical harm also included bullying).

Carers, other LAYP and foster carers' own children were identified as sources of harm, with most experiences of physical harm being perpetrated by other children and young people. Detached, mechanistic and unemotional relationships with carers were perceived as a cause of emotional harm and harm through neglect. Trusting relationships with families, carers, social workers and social networks were found to contribute significantly to LAYP feeling safe.

The experience and fear of bullying was distressing and intimidating, and had a significant impact on LAYP's feelings of safety and wellbeing. Additionally, adult responses to bullying, which were frequently experienced as inadequate, communicated messages which impacted negatively on perceptions of safety and wellbeing. Carers and social workers were seen as predominantly responsible for ensuring or failing to ensure safety from bullying.

A significant group of participants in the study did not feel effectively listened to, an important finding in the light of the historic relationship found between listening and safety explained above. Many participants attributed effective listening to a combination of the process of being listened to and the practical outcome of being heard. Family, friends and foster carers were identified as the most effective listeners. This is an important finding, particularly in the context of the relative powerlessness of these groups within the looked after system.

Most participants felt they knew how to get help if they needed it, but relatively few felt they had confidential access to a telephone. Generally high levels of awareness of complaints procedure were found, with more participants in children's homes aware of complaints procedures than their peers in foster care. Participants placed in emergency and unplanned circumstances were found to be particularly vulnerable due to their lack of knowledge and strategies for accessing help. Although high levels of awareness of how to make a complaint were found, there was confusion between informal and formal complaints. The main reason for making complaints related to concerns for protection. The low number of complaints relating to participation contrasts with the high levels of dissatisfaction with participation and inclusion found in the study.

Participants expressed little confidence in the complaints procedure and most felt that the existence of the complaints procedure did not make them feel safe. In addition, most participants did not feel that complaints procedures facilitated listening, consistent with inquiry report recommendations.

7.3 Inclusion and Participation

As noted in Chapter Three, the UNCRC (United Nations, 1989) infers rights of participation on children and young people. However, it can be questioned whether the convention has impacted positively on the experiences and outcomes of participation for LAYP. Contemporary social policy reflects high levels of commitment to the participation of LAYP. Again, it can be questioned whether developments designed to increase the participation of LAYP have resulted in consistently improved experiences and outcomes. Conceptual confusion has been found between participation at a strategic, service development level and participation in issues that directly and personally affect the individual young person.

As noted in Chapters Three and Four an inter-relationship between participation, outcomes, power, engagement and safety and wellbeing was found in the study. The study found that existing typologies for evaluating participation did not measure these elements or their inter-relationship sufficiently for LAYP, and that a situation specific model was therefore required. The concept of condition specificity and the benefits of a 'situation specific' model were examined in Chapter One, Introducing the Research.

A typology for evaluating the effectiveness of the participation of LAYP was constructed and applied to the analysis of all participatory elements of the research (Appendix 23), and the experiences of using this typology are analysed in Chapter Eight.

7.3.1 Inclusion and participation in comparative social work models

The study found strong links between participation, inclusion and safety and wellbeing. The low levels of satisfaction with participation and inclusion found in the study can be related to a critique of the dominant managerialist model in UK social work, which is at odds with the principles of participation and inclusion. Alternatively, other social work models, including European social pedagogic models, promote and integrate principles of participation and inclusion. Thus, it could be argued that alternative models may achieve more effective participation and inclusion.

7.3.2 Inclusion and participation in decision making

Four specific issues relating to LAYP's involvement in decision making were identified from the analysis of the thesis findings.

i) The decisions and aspects of decision making that are important to LAYP

The most frequently mentioned decisions that participants wanted to be directly involved in predominantly related to placements, with decisions about family contact having a lesser focus. Thomas (2002, p. 136) found these key issues differentiated LAYP from most non-LAYP. This finding from the thesis research should also be considered in the context of the group having recently experienced a new placement, which may have resulted in placement decisions having additional importance for some participants. The study found high levels of dissatisfaction from participants about their involvement in important decisions concerning them. This finding is compatible with Skuse and Ward (2003) who also found low levels of participation in important decisions that could affect their future (p. 159). The low levels of satisfaction regarding their inclusion in decision making are particularly striking when compared with participants' generally high levels of motivation for more effective participation found in the study. This finding is consistent with Shier (2001, p. 12).

ii) Participation and age

The lowest levels of participation in decision making were reported by participants in the lower age cohorts who, interestingly, also reported the most positive experiences of being listened to. As noted above, this may be explained by the finding that those who had listened best were relatively powerless stakeholders in the decision making process, and therefore positive levels of listening did not necessarily impact directly on participation in or outcomes of decision making.

iii) Experiences and attitudes to involvement in decision making

The most positive experiences of involvement in decision making, consistent with stages three and four of the preliminary typology for the measurement of participation, mostly concerned involvement in operational decision making in children's homes. Many participants perceived decision making concerning them individually as synonymous with meetings, where they were not always clear about their entitlement to attend or their role if they did attend. Participants did not feel central to decision making or that decision making processes were easily accessible or understandable. The complexity of strategic opportunities for influencing decision making caused participants to feel overwhelmed and confused. Experiences of involvement in individual decisions were predominantly consistent with stages one and two of the preliminary typology for evaluating the effectiveness of LAYP's participation (Appendix 23).

iv) Relationship between decision making, wellbeing and safety

The relationship between participation in decision making and safety and wellbeing generally reflected the two key dimensions of process and outcome. Those participants who had positive experiences of involvement in decision making appeared engaged and empowered by the process of participation and seemed satisfied with the outcomes of decisions. Positive experiences of the process and outcomes of decision making could therefore be argued to have a predominantly positive relationship with safety and wellbeing. Conversely those LAYP who felt their participation in decision making was insufficient appeared disempowered, detached and disengaged from both the process and the outcome of decision making. Thus, a negative relationship with safety and wellbeing was found. It was clear that many participants had considerable knowledge of placement options within the CSLA and had views on which placements they would have chosen and not chosen to ensure their safety and wellbeing. This finding is compatible with studies undertaken by Wright et al. (2006, p. 11) and the Children's Rights Director England (2007a, p. 18) which found similar relationships between participation in decision making and enhancing safety. This finding was also consistent with the findings on choice, below.

7.3.3 Choice

The analysis of choice can be seen to relate closely to decision making, as examined in Chapters Two and Three. Utting (1997, p. 41) argued that poor placement choice had a definable relationship with both safety and wellbeing. The Choice Protects initiative (DH, 2002b) aimed to improve outcomes for LAYP by developing placement choice.

The concept of choice is increasingly central to contemporary UK social policy, thus it was important to examine the relationship for LAYP between choice and safety and wellbeing.

Two specific features of choice emerged from this analysis:

i) Frequency of choice

The study found that some participants had exercised choice about whether they moved and where to when they moved to their previous placement, but most had not exercised choice (Appendix 20). The limited previous research predominantly investigated choice of placement as opposed to decision to move placement. Sinclair and Gibbs (1998) found slightly higher rates of choice of placement exercised by LAYP living in residential care (p. 45). The sample was restricted to children's home placements which makes close comparison between the studies problematic. The Children's Rights Director England (2006b) also found slightly more placement choice than in the thesis research (p. 11). The study had a similar respondent profile but differed methodologically which makes close comparison problematic. Both of the above studies examined admission to current placements whereas the thesis research examined choice relating to previous placement. The findings appear consistent with contemporary social policy statements which found placement choice limited for most LAYP (Ofsted, 2008d, p. 36).

ii) Impact of choice

Participants who had exercised an element of choice were generally engaged by this experience and projected a positive sense of wellbeing. Several participants who did not exercise choice were angry and appeared disempowered and detached, and indicated that they would engage in risky and damaging behaviour. Some participants drew a relationship between being in a placement they did not choose, and being subject to bullying. Thus, a dimension of safety in relation to choice was detectable in some participants and cross-references with the finding discussed in 7.3.2 (iv). The finding is also comparable with the study conducted by the Children's Rights Director England (2007a) which found that LAYP are likely to know where they will feel safe (p. 18). Thus a clear relationship between choice and safety and wellbeing emerged. This finding can also be related to the principles of children and young people being experts in their own lives, as examined in Chapter One, Introducing the Research.

7.3.4 Implications of the findings on inclusion and participation for safety and wellbeing

The inter-relationship between participation, outcomes, power and engagement, and safety and wellbeing is an important finding, and formed the conceptual basis of the typology for the measurement of participation (Appendix 23). Effective participation that increased voice and decreased the propensity to exit was found to have a positive relationship with safety and wellbeing. Conversely, ineffective participation which decreased voice and increased the propensity to exit had a negative relationship with safety and wellbeing. The study found few examples of participation in the study consistent with stages three and four of the typology and predominantly found levels consistent with stages one and two of the typology.

The study found that participation and choice were closely connected for participants. Participants demonstrated high levels of motivation for increased, effective involvement in decisions that concern them. Many of the decisions where participants wanted increased involvement and to exercise choice were closely related to their current and future safety and wellbeing. Participation and choice appeared to have symbolic value, communicating messages of worth and empowerment to LAYP. Participation and choice also related to practical arrangements, often about where they were going to live and where they felt they would be safe and well cared for. The low levels of participation were found to be consistent with the managerialist model of UK social work which places less focus on participation than European social pedagogic models.

7.4 Placement Stability and Continuity

The study examined the impact of placement frequency and its relationship with safety and wellbeing and did not attempt to examine the more complex issues around stability. The study found higher rates of placement frequency in comparison with the whole CSLA population of LAYP (CSLA, 2005). This may be explained by the small sample in the study and the disproportionate effect of high placement frequency reported by two participants. The thesis research examined overall placement frequency in order to contextualise it within the total looked after experience.

7.4.1 Impact of placement frequency

The study found a complex range of perceptions about placement frequency. In general, those who had experienced the highest frequency reported being upset by it. However, some experiences of high frequency were evaluated fairly positively and low frequency

evaluated negatively, demonstrating that a clear relationship between high frequency and negative evaluation is problematic. It can be interpreted that tolerance of high placement frequency may be partially explained by low expectations and perceptions of high frequency and discontinuity as a norm. The relationship between high placement frequency and poor quality experience has been consistently addressed in contemporary social policy (The Quality Protects initiative, DH, 1998c; Care Matters Green Paper, DfES, 2006e and White Paper, DfES, 2007b; Children and Young Persons Act 2008).

7.4.2 The relationship between stability and continuity and their impact on safety and wellbeing

Most participants had felt unhappy and wanted to leave their previous placement, which made placement stability in such circumstances clearly undesirable. Participants who had been upset by placement discontinuity described the impact on the continuity of friendships, school and general connectedness as their key concerns. It was notable that participants made minimal, explicit reference to the impact of placement moves on the continuity of relationships with carers. However, this may partly reflect the design of the research, which was undertaken after placement changes had taken place that many participants had said they wanted. The general findings are compatible with Jackson and Thomas (1999) who identified a similar range of components of placement continuity and discontinuity (p. 66).

The link found between placement discontinuity and loss of confidence for future placements provides some insight into the impact of the experience of placement frequency on future relationships. The finding is compatible with Gilligan (2009) who conceptualised a strong link between positive relationships made in current and previous placements, the development of resilience and the subsequent impact on future wellbeing (p. 22).

The problems that some participants experienced in recollecting the number and sequence of placements appeared indicative of a fragmented sense of self history, which potentially had an impact on their sense of self and self identity. This phenomenon was also found in relation to some participants who did not have a clear understanding of the reasons for being looked after, which was examined earlier in this chapter.

7.4.3 Implications of the findings on placement stability and discontinuity for safety and wellbeing

The impact of placement discontinuity on wellbeing was complex and partially influenced by the low expectations that some participants had about stability and continuity. Some tolerance of high placement frequency was found, which may be indicative of low expectations and accepted norms of high placement frequency. Placement discontinuity impacted on the continuity of education and friendships. High placement frequency appeared to contribute to a fragmented sense of self history, which may subsequently impact on LAYP's sense of self and self identify. Thus, varying degrees of placement discontinuity impacted negatively on feelings of wellbeing. The explicit link between placement discontinuity and safety was less clear from the study.

7.5 Educational Wellbeing

The study examined participants' perceptions of their education and the impact of planning on their educational experience. As noted in Chapter Two and this chapter, the relationship between planning and better outcomes has been a prominent underlying assumption of contemporary social policy for LAYP.

7.5.1 Participative and inclusive elements of educational wellbeing

The study found predominantly positive reports of general educational wellbeing. Most participants expected to be in receipt of full-time education and felt their carers had supported this aim. Those participants who had not attended educational provision were generally critical of not being able to attend. The study found a diversity of educational experiences during the previous placement, which indicated that educational wellbeing for some participants was not a static or homogenous phenomenon. The generally high level of motivation for involvement in education found was consistent with the high levels identified by Boyce (2002, p. 12) and Milligan and Stevens (2006, p. 96). However, both studies researched LAYP in residential care, and not the mix of placements represented in the thesis research. Thus, close comparison between the studies is problematic.

Participants made limited reference to their educational performance, a finding that can be contrasted with UK government performance measures. Conversely, the participative and inclusive benefits of education, particularly friendships, were found to be a key concern for participants. As noted above, the study found placement frequency impacted on educational wellbeing; discontinuities in relationships with friends and feelings of normality and equity were important, negative outcomes of placement frequency on educational wellbeing. Thus, a relationship was found between placement discontinuity

and relational aspects of educational wellbeing. Jackson and Thomas (1999, p. 67) and Gilligan (2009, p. 48) also found a close inter-relationship between placement continuity and positive, continuous educational wellbeing.

The study therefore found educational wellbeing generally contributed to overall perceptions of safety and wellbeing. This conclusion is consistent with Sinclair et al. (2005) who also found a strong relationship between wellbeing and positive educational experiences. This large scale study reported the views of carers and not LAYP and was limited to foster care placements (p. 242), thus, close comparison is problematic.

Whilst inclusion in educational was found to be important, education staff were not evaluated highly for looking out for participants' safety and wellbeing or listening to them effectively. It could be deduced that the inclusive elements of education were more important than the relationships with the adults associated with education.

7.5.2 The impact of personal education plans on educational wellbeing

Low levels of awareness of personal education plans were found, in contrast with the generally high levels of educational wellbeing identified. It could be interpreted that there does not appear to be a positive relationship between education wellbeing and personal education plans. Hayden (2005) found low levels of participation of LAYP in the development of their PEPs (p. 351) which may be consistent with the low levels of awareness of PEPs found in the thesis research. The social policy emphasis upon planning and improved outcomes was not reflected in the reported perceptions of participants. The one participant for whom preparation for employment applied reported a negative experience, which reflected low employment aspirations, low confidence and a subsequent sense of disconnection and disengagement.

7.5.3 Implications of the findings on educational wellbeing for safety and wellbeing

Key points from the findings about LAYP's perspectives of their educational wellbeing include the following:

- Where LAYP had positive experiences of being included and participating in their education and the social networks gained through school, these appeared to contribute positively to wellbeing.

- Placement discontinuity and frequency impacted negatively on LAYP's wellbeing by disrupting the continuity of key relationships, and by emphasising feelings of inequality and abnormality in comparison to non-looked after peers.
- Personal Education Plans (PEPs) did not seem to feature highly for LAYP, either in terms of their awareness of them generally, or as contributing factors in their educational wellbeing.
- Poor preparation for employment contributed to a low level of aspiration and a high level of disconnection and detachment for one participant.

7.6 Relationships

The importance of relationships can be seen to be a critical element of the research. The dominance of managerialism has been highlighted in the analysis of social policy developments (see Chapter Two). The consequence is a UK social work model for LAYP that is predominantly focused on procedures, rules and measurement which is essentially antithetical to relationships. This model has been compared with social pedagogy and its predominant focus on relationships. This section examines the findings on relationships with family, friends, social workers and carers and their connection with safety and wellbeing.

7.6.1 Family

Relationships with family was a predictably complex and emotional issue for many participants. The study found a diversity of views on the definition of family and a diversity of views towards their families.

Firstly, the thesis research found generally high levels of motivation for family contact and high levels of dissatisfaction about contact with their families. Participants placed in foster care were most dissatisfied with their family contact. Shaw (1997) found similar patterns with a slightly lower rate of dissatisfaction (p. 31). Research undertaken by 'A National Voice' (2006) found higher rates of dissatisfaction with sibling contact (p. 8). Close comparison between the two studies is problematic, as the 'A National Voice' research examined specific sibling relationships whilst the thesis research examined generic relationships. Those participants who were dissatisfied with contact appeared to feel powerless to improve contact. Some of this group had restrictions on contact imposed by the CSD. These participants were generally unaware of or disagreed with the rationale for restriction which were mostly experienced as confusing and unjust.

Second, the study found most participants felt fairly encouraged to retain family relationships with most positive encouragement found from children's home staff. The group that had experienced detached and mechanistic care, mostly in foster care, reported passive and disinterested attitudes towards their family contact. This finding is interesting in light of Hill (2000) who found that family relationships reduced when not actively encouraged (p. 34-35). Thus, the implication for fragile and volatile relationships under this model of care is problematic. This approach towards family relationships can be contrasted with social pedagogic models which generally adopt a more collaborative and inclusive stance towards the families of LAYP than found in the UK social work model (Petrie et al., 2006, p. 98). The differences in methodology and placement classifications researched make close comparison problematic. Some participants had ambivalent feelings about contact with their families. Reflecting on the research process, the researcher felt that several participants were not familiar with being asked their views on this topic and appeared to welcome the opportunity. It was concluded that they may benefit from additional support from carers and social workers to explore these complex issues.

As noted above, in Section 7.2.2, the study also found that participants generally identified their family as listening to them best and as looking out for their safety and quality of care. More females than males felt that their families looked out for their safety, and participants in the older cohorts felt their families listened to them best. This general finding is comparable with a study undertaken by the Children's Rights Director for England (2007a) which also found that LAYP identified their family as first choice of contact if someone was harming them (p. 10). In a review of research on placement stability and continuity, Jackson (2002, p. 42) identifies a positive relationship between the presence of family networks and placement stability and continuity. The prominent role of family for many participants in their ongoing safety and wellbeing is an important finding, which contrasts with the high levels of dissatisfaction reported with the amount of contact with families, and the passivity and disinterest to family contact experienced by some participants from their carers.

7.6.2 Friends

Relationships with friends were important to most participants, enabling them to form crucial links with social networks, and contributing to feelings of normality.

Participants were generally more satisfied with their contact with friends than with their families. Similar to the findings on family relationships, participants who had been living

in foster care were generally less satisfied with their contact with friends than their peers in children's homes. The importance of contact with family and social networks is reflected in guidance on care plans (The Care Matters White Paper, DfES, 2007b, p. 130; the Children and Young Persons Act 2008). Thus, contemporary social policy adopts a strategic and procedural approach in expecting that these key relationships are maintained.

A relationship between dissatisfaction with contact with friends and disengagement was found. As for family, explanations for restrictions placed on contact with friends were generally ineffective, not understood, contested by participants and appeared to have been made with minimal participation of participants. Difficulties in maintaining friendships often contributed to disengagement and a propensity to exit.

Although they felt more positive about their contact with friends than family, participants felt less encouraged to maintain contact with friends than with their families. Participants placed in children's homes were less encouraged to keep contact with friends than their peers in foster care. The passive attitude by carers towards family relationships was also noted in LAYP's relationships with friends in both placement contexts. This finding is consistent with Petrie and Simon (2006) who found that LAYP in England experienced lower frequencies of contact with their social networks than other European countries in this comparative European study (p. 129).

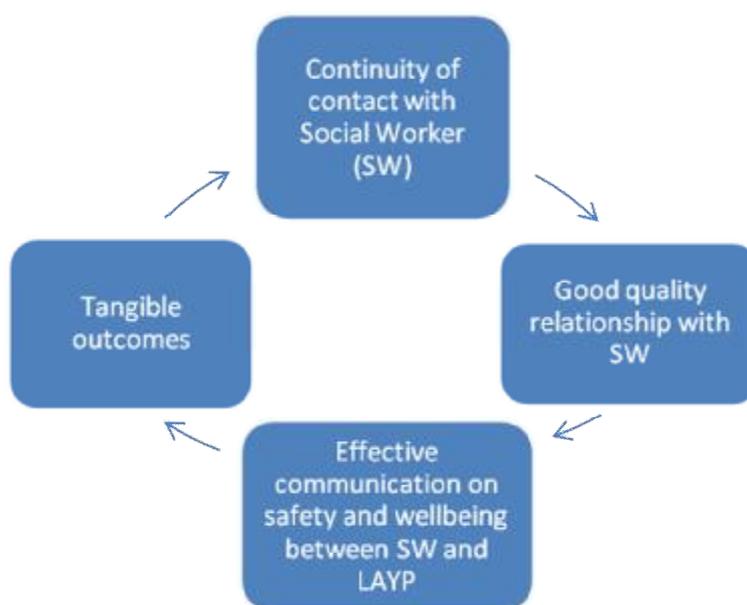
A clear relationship was found between friends, safety and wellbeing. Dissatisfaction with contact with friends or restrictions on friendships contributed to LAYP's disengagement and negative impacts on wellbeing and safety. Friends played important roles in listening and looking out for participants' safety and quality of care. This is comparable with a study undertaken by the Children's Rights Director for England (2007) which found similar prioritisation (p. 10). The findings are also comparable with studies by Ridge and Millar (2000, p. 168) and Gilligan (2000, p. 272) which found relationships with friends were often protective, inclusive and contributed to building resilience.

7.6.3 Social workers

Social workers were found to play a central role in safety and wellbeing for participants, invoking strong positive and negative feelings. Social workers were ranked second after family for looking out for safety and wellbeing.

Relationships with their social worker emerged as integral to participants' evaluations of social workers and their role in promoting safety and wellbeing. Many were critical of their relationship with social workers, and felt that a 'relationship' was a pre-condition to feeling confident enough to share personal issues including concerns over quality of care and bullying. Continuity of contact, effective communication and tangible outcomes were identified as integral elements of a close trusting relationship (Table 7.2).

Table 7.2 Inter-dependent elements of the relationship between LAYP and their social workers



Thus, important links were found between the quality of and trusting relationships with social workers, and a willingness and confidence to discuss concerns for participants' safety and wellbeing, which were found to comprise the following key elements in this model:

- i) **Frequency and continuity of contact:** most participants had a social worker during the placement but the two participants who had not had a social worker felt unprepared for their unplanned placements. Regularity and frequency of contact were generally felt to be insufficient for developing and sustaining a trusting relationship.
- ii) **Effective communication:** most participants wanted a strong relationship with their social worker in order to feel confident to communicate personal information. Social workers were ranked after family, friends and foster carers for listening effectively.

This finding relates to the concept of communicative sensitivity (Thompson, 2009) which explains:

The impact of the social context on social work communication (p. 102)

iii) The importance of outcomes: as noted previously, the importance of outcomes for participants developed throughout the research. The study found that many participants were dissatisfied with outcomes as their social worker had not consistently fulfilled their commitments and promises. This finding also relates to the importance of outcomes found in the analysis of findings on listening and complaints.

These findings are comparable with Le Grand (2007) who found poor relationships between LAYP and their social workers (p. 15); and with Gilligan (2000, p. 270) and Jordan (2007, p. 46) who critique the managerialist paradigm and its negative impact on social workers' relationships with LAYP. Petrie et al. (2006) found the relational focus of social pedagogy facilitates a holistic perspective compared to the fragmentation of the managerialist paradigm. Hatton (2008) found that the managerialist paradigm militates against person centred and humanistic approaches (p. 14).

7.6.4 Carers

Carers were not evaluated highly in looking out for participants' safety and wellbeing. The close proximity of the research to a change of placement may have impacted on this finding. Two key findings were identified from the analysis of participants' responses:

i) Fairness, equity and normality

Participants reported generally high levels of fairness and middle range evaluations of the quality of care from carers, a similar finding for both foster care and children's homes. Participants who had experienced several carers in the same placement found their experiences of fairness differed between them. Principles of equity and normality were found to be key variables by which fairness in carers was evaluated. This finding cross-references with similar findings in the research on rules and procedures; and are comparable with Kahan (1994) who also found that LAYP in residential care prioritised fairness (p. 145-146). Close comparison is problematic as Kahan examined care provided to LAYP in a residential context, unlike the thesis which examined both main care contexts.

ii) Quality and depth of relationships with carers

The continuity of relationships with carers did not emerge as an important outcome of placement discontinuity although other relationships, particularly friendships, were felt to be affected. Again, recent placement changes experienced by all participants in the sample may have impacted on perceptions of carers.

Expectations of emotional attachments varied between participants, reflecting the heterogeneity of the sample. Participants who experienced detached and mechanistic relationships with their carers were generally critical of this model of care, and felt it had impacted adversely on their feelings of safety and wellbeing. This finding cross-references with findings on neglect and emotional harm. Several close and trusting relationships with carers were found which impacted positively on feelings of safety and wellbeing.

The research did not attempt to examine the depth of attachments to carers but found little evidence of attachments to carers, indicating these relationships were not associated with 'family membership' (Beek and Schofield, 2006, p. 35). The model is designed predominantly for evaluating attachments in permanent placements, but is transferable to all placements. The limited depth of relationships with carers found in the thesis research was consistent with Cameron's (2007) finding that carers' roles in English children's homes focused on 'responsibility' as opposed to the care and relationship focus of European models (p. 136). This study was restricted to residential care unlike the thesis research. However, it is argued an examination of the impact of different care paradigms upon the experience of being looked after is important.

Carers were not generally seen as listening well or actively looking out for participants' safety and wellbeing. Foster carers were evaluated marginally higher than children's home staff in these activities. Participants expected carers to protect them and were critical of carers who they felt failed to protect them from harm, for example from bullying. Although many participants rated family and friends as more important than carers in looking out for their safety and wellbeing, most seemed to want carers to be more active and were critical of carers who failed to protect them and promote their wellbeing. This finding is similar to those of institutional abuse inquiry reports, examined in Chapter Three, where carers also failed to protect LAYP from harm. This finding can also be compared with social and relational based social pedagogic models which were found to have dealt with racism and bullying more

effectively than procedurally based models in English children's homes (Cameron, 2007, p. 140). Thus, whilst this research is restricted to residential care, and close comparison is therefore problematic, it demonstrates that methods of intervention on key threats to safety differ between models with differing relational perspectives.

No comparable research could be identified which examined the experiences of relationships with carers across the placement classifications.

7.6.5 Implications of the findings on relationships for safety and wellbeing

Predictably, a plurality of definitions of 'family' emerged in the analysis, reflecting the heterogeneity of LAYP. High levels of motivation were found for more contact with family and friends, who played important roles in listening to participants and looking out for their safety and wellbeing. Friendships were found to play an important role in retaining links to social networks and increasing a sense of social connectedness and wellbeing. Despite degrees of separation, family relationships were found to be important to LAYP in key roles associated with safety and wellbeing. Participants placed in foster care felt most dissatisfied with contact with their family, and those in children's homes most dissatisfied with contact with their friends. The passivity from carers towards relationships with friends and family contrasts with the priority participants placed on them. Dissatisfaction with contact with friends and family contributed to disengagement and a propensity to exit. The rationale for restrictions on family contact was generally not understood and did not reflect effective participation in decision making.

Social workers were seen as important to LAYP for looking out for safety and quality of care, but high levels of dissatisfaction were found in other aspects of the role. Close trusting relationships were found to be necessary in order for social workers to be able to ensure LAYP's safety and wellbeing. Continuity of contact, effective communication and tangible outcomes were identified as integral elements of a close trusting relationship with their social worker, and a model developed to illustrate these critical interdependencies.

Carers were not evaluated highly in key areas of safety and wellbeing. However, participants expected carers to protect them, predominantly from bullying, and were critical when carers had not acted on their concerns. Poor responses to such concerns for safety can be compared with higher response rates from carers found in social pedagogic models. Key underlying principles of the relationship LAYP wanted with their carers included: fairness, equity and normality. The emotional depth of relationships that

participants wanted with their carers varied considerably. Participants who reported detached and mechanistic relationships with carers were critical of the lack of emotional depth, and felt their safety and wellbeing was adversely affected by them. This finding is consistent with the procedural focus of UK managerialist models of social work, and contrasts with the empathetic and discursive elements of relational models, for example social pedagogy.

7.7 Health, and Damaging Behaviours and Risks

The study examined participants' knowledge and experience of their formal health plans and potentially damaging behaviours, including offending and going missing from placement.

7.7.1 Health plans

The research examined participants' knowledge of formal systems for ensuring and maintaining their health. The low level of awareness found in relation to health plans was consistent with overall low levels of awareness of specialist plans. No comparable research could be found which also explicitly examined LAYP's knowledge of their health plans. Scott et al. (2008) reviewed health records and family health records of LAYP, and found high levels of incomplete documentation, identifying that the complexity of some health information, changes in social worker and discontinuity all contributed to this position (p. 38). Scott also found that some LAYP valued having knowledge of their family health records, which helped to explain the poor pre-entry health frequently experienced by LAYP (Scott et al., 2008, p. 39; Bebbington and Miles, 1989, p. 354).

The low level of awareness of health care plans found in the study conflicts with guidance contained in the National Minimum Standards for Children's Homes and Fostering, which expects health care plans to be completed for each LAYP and that they should be fully consulted on them (DCSF, 2009b, p. 24-25). It could be argued that this lack of knowledge of plans reflects the ineffective levels of participation found in other aspects of specialist planning. The thesis findings are consistent with the National Children's Bureau Healthy Care Programme ([NCB], 2010) which links effective health care planning to effective participation of LAYP in their own health.

7.7.2 Offending behaviours

The prevalence of offending behaviours and the risk of offending behaviours by LAYP, including pre- and post-entry experiences, are examined in this section.

The study found participants to be fairly evenly divided between high and low perceived risk of offending. Those who evaluated their risk of offending as high were predominantly male, placed in children's homes and in the mid-age cohort. The findings found similar rates to Sinclair and Gibbs (1998, p. 178) and higher rates than DCSF (2009d). Close comparison cannot be made as the thesis research examined the perceived risk of offending, whereas the above studies examined actual offending rates.

Both pre-entry and post-entry offending behaviour was reported. Some participants identified offending behaviour as the predominant reason for initially being looked after. Hayden (2007) also differentiates between pre-looked after and post-entry experiences and concludes that it is unclear which variable has most impact on offending (p. 68). Although the thesis research found that more male participants placed in children's homes reported a high risk of offending, it was not known whether the offending behaviour had commenced pre-entry or post-entry. It was therefore not possible to attribute higher risk to the placement context. However, some placements were evaluated by participants as presenting differing levels of risk related to offending. Some reports indicated that offending behaviour was accepted by LAYP as a cultural norm in some placements.

Several reports of carer-initiated police involvement were found in the study, which was the only reference to carers' responses to offending behaviour. This relates to the control end of the care-control continuum compatible with Lipscombe (2007) who examined the care and control dilemma, and the increasingly close relationship between fostering and the criminal justice system (p. 985). Some similarities can be found with Lawlor (2008) who concluded that the practice of involving the police in incidents in children's homes may differ from responses to non-LAYP, and may be a variable in the criminalisation of such behaviour (p. 16). Participants' reports of the risks of their own offending behaviour and the influence of others were interpreted as having a negative impact on their safety and wellbeing.

7.7.3 Going missing

Approximately half of all participants had gone missing from their previous placement with an average of two occasions and ranging up to 100 occasions. No explanation could be found for the discrepancy between rates reported in the study and nil rates recorded for the CSLA for this period (DCSF, 2005).

The researcher adopted a similar approach to that taken for complaints (see Section 7.2.4, iii), consistent with the epistemological assumptions and interpretivist perspective adopted by the study. Participants' perceptions on going missing were considered as legitimate; they were therefore not probed on their understanding of going missing and whether this was consistent with the CSLA definition. It is argued that the findings on going missing can be interpreted as an accurate and valid account of participants' perceptions and experiences.

More males than females went missing. Participants ran away from both placement contexts, but more from children's homes than foster care. The rates of going missing and gender differences are compatible with gender and range found by Biehal and Wade (2000, p. 213).

The risks to those who went missing were not examined in the study. However, the research literature identifies a range of risks and harm. Rees and Lee (2005) found 8 per cent of all children and young people who went missing were harmed whilst missing (p. 19). Other risks include offending, sleeping rough, sexual exploitation including prostitution, substance misuse, risk of detachment from placement and school, and weakening of relationships with carers (Biehal and Wade, 2000, p. 217-218).

Measured against individual, environmental, and family based factors (Wade et al., 1998), the study found predominantly environmental, placement related reasons for going missing including feeling unhappy, worried or fearful of bullying. The thesis research found that some participants would go missing if they were unhappy or worried in preference to using the complaints procedure. Biehal and Wade (2000) conclude that the reasons for going missing comprise a close inter-relationship of individual, environmental, family and pre-entry experience variables which cannot easily be conceptually separated (p. 222). This conclusion is consistent with the thesis research, which found a close inter-relationship between the causes reported. Some comparison can be made with research undertaken by Biehal and Wade (2000) and Wade et al. (1998) as similar conceptual models were applied and themes found. However, methodological differences including their use of official reports of going missing compared with self report accounts in the thesis research make close comparison problematic.

7.7.4 Implications of the findings on health, damaging behaviours and risk for safety and wellbeing

The research found low levels of awareness of health care plans, which appeared to reflect low levels of participation in LAYP's health care. The study found minimal evidence that health care plans or planning contributed to perceptions of safety and wellbeing.

Offending behaviour is a harmful behaviour which has an adverse impact on safety and wellbeing, and is impacted on by both pre-entry and post-entry looked after experiences. Participants experienced differing levels of risk of offending between placements. Going missing exposes LAYP to risk and potential harm whilst missing, increases detachment and impacts negatively on relationships in placement and school when LAYP return from going missing. The reasons for going missing are complex, inter-related and predominantly based on upset and distress. Going missing was found to be a response of several participants to being unhappy or worried, and was preferable to using formal complaints procedures. Thus, the act of going missing poses a risk to safety and wellbeing and the underlying reasons may also be seen as threats to safety and wellbeing.

7.8 Conclusions

Important knowledge and understanding has emerged from the analysis and synthesis of the findings from the research, previous studies and the literature. This concluding section distills the critical features of these findings. Chapter Nine then examines contemporary safeguarding in light of this analysis, drawing out the implications for policy and practice. The preliminary framework for LAYP's safety and wellbeing is revisited as part of this process, and the four overarching categories that emerged from the detailed analysis of findings are critically evaluated.

These four categories (feeling safe; inclusion and participation; continuity and quality of relationships; and a sense of self and self history) form the core elements of a model developed from the analysis of the relationships between the preliminary safety and wellbeing framework, these research findings and examination of the contemporary safeguarding debate.

7.8.1 Interpretation of the findings

The following points set out the interpretation of the findings presented in this chapter.

i) Experiences of being looked after

A number of key findings from the analysis of participants' experiences of being looked after shed light on subsequent findings outlined in this chapter, and their relationship to safety and wellbeing.

Knowing the reasons for being looked after is crucial to a development of self history and self identity for LAYP. Further to this, effective participation and inclusion in pre-entry planning and establishing relationships with prospective carers also impact positively on safety and wellbeing. However, planning is not generally experienced as being aspirational or person centred.

A related finding is that being happy is strongly related to being in the right placement. Privacy is important, as it is felt by LAYP to be a protecting factor against bullying, while also contributing to a general feeling of wellbeing. Similarly, rules contribute to safety and wellbeing when they protect LAYP from harm and are experienced as fair and equitable.

In terms of understanding LAYP's relationship with the corporate parent, it was found that the corporate parent role is perceived as being synonymous with the social work role in relation to safety and wellbeing.

ii) Safety from harm

The diverse definitions and interpretations of bullying and physical abuse identified in the study highlight their conceptual complexity. The study found most participants felt safe but a significant group experienced degrees of feeling unsafe in both foster care and residential care contexts. Carers, other LAYP and foster carers' own children were identified as source of harm, with most experiences of physical harm and bullying being predominantly perpetrated by other children and young people. The experience and fear of bullying emerged in the research as a key concern for many participants. The findings on prevalence, causes and placement contexts of feeling unsafe are important and have implications for safeguarding policy and practice. Trusting relationships with families, carers, social workers and friends contribute significantly to feelings of safety.

A significant group of participants did not feel effectively listened to. Family, friends and foster carers were identified as the three most effective listeners, an important finding in light of inquiry reports which found ineffective listening by professionals.

The main reason for making complaints related to concerns for protection and not participation, and contrasts with the high levels of dissatisfaction with participation and inclusion found in the study. The finding that complaints procedures did not generally make participants feel safe can also be considered in light of the historical importance attached to complaints procedures in ensuring safety from abuse.

iii) Inclusion and participation

The inter-relationship between participation, outcomes, power and engagement, and safety and wellbeing is an important finding. Effective participation that increased voice and decreased the propensity to exit was found to have a positive relationship with safety and wellbeing. Conversely, ineffective participation which decreased voice and increased the propensity to exit had a negative relationship with safety and wellbeing. It is suggested that the inter-relationship between these variables and the development and use of the typology have contributed to knowledge about safety and wellbeing. The study found that participation and choice were closely connected for participants. Participants demonstrated high levels of motivation for increased, effective involvement in making decisions that concern them. Many of the decisions where participants wanted increased involvement and to have exercised choice were closely related to their current and future safety and wellbeing.

iv) Placement frequency and stability/continuity

The impact of placement discontinuity on wellbeing was complex and partly influenced by the low expectations found on placement continuity. Placement discontinuity frequency impacted on the continuity of education and friendships. High placement frequency appeared to contribute to a fragmented sense of self history, which may subsequently impact on participants' sense of self and self identity.

v) Educational wellbeing

The participative and inclusive elements of the participants' educational experience appear to contribute positively to wellbeing, but as noted above, can be disrupted by placement discontinuity and subsequently emphasise feelings of inequality in comparison to their non-looked after peers.

vi) Relationships

Relationships with carers, family, friends and social workers were all found to have important links to safety and wellbeing. High levels of motivation were found for more contact with family and friends, who played important roles in listening to participants

and looking out for their safety and wellbeing. The passivity from carers towards relationships with friends and family contrasts with the priority participants placed upon them. Dissatisfaction with contact with friends and family contributed to disengagement and a propensity to exit, as did experiences of mechanistic and detached models of care. The social work role was seen as important in looking out for safety and quality of care but high levels of dissatisfaction were found due to the absence of close trusting relationships. Continuity of contact, effective communication and tangible outcomes were identified as integral elements of a close trusting relationship with social workers, and a model was developed to examine these critical interdependencies.

vii) Health, damaging behaviours and risk

Minimal evidence was found that health care plans or planning contributes to perceptions of safety and wellbeing. Offending behaviour was found to be a harmful behaviour which has an adverse effect on safety and wellbeing. Offending behaviour of LAYP is impacted on by both pre-entry and post-entry looked after experiences. High levels of going missing found in the study may impact on safety and wellbeing. Other studies have found that going missing exposes LAYP to risks and harm whilst missing, increases detachment and impacts negatively on relationships in placement and school when LAYP return from going missing. The reasons for going missing are complex, inter-related and predominantly based on upset and distress, and were found to be a response for several participants to being unhappy or worried. Thus, the act of going missing poses a risk to safety and wellbeing and the underlying reasons may also be seen as threats to safety and wellbeing.

7.8.2 Four emergent categories from the analysis of findings

As noted in Chapter Six, four emergent categories were identified from the emergent concepts. These categories therefore comprise the overarching themes identified in the research. Figure 7.2 demonstrates the relationship between these four categories and the six domains of the preliminary framework for LAYP's safety and wellbeing. Some of the domains link to more than one emergent category.

Figure 7.1 Emergent categories and initial domains of safety and wellbeing

Four emergent categories identified from the analysis of the research	Six domains of the preliminary framework of safety and wellbeing
Feeling safe from harm	Feeling safe from abuse; Placement stability and continuity; Being healthy, and avoiding damaging and risky behaviours
Inclusion and participation	Effective participation and inclusion; Placement stability and continuity; Educational wellbeing
Continuity and quality of relationships	Placement stability and continuity; Educational wellbeing; Quality relationships
Sense of self and self history	Placement stability and continuity; Quality relationships; Effective participation and inclusion.

The implications of and important learning to be drawn from this analysis are further examined in Chapter Nine.

Section 3: Interpretation and Conclusions

Chapter 8: Doing the Research: Key Issues Emerging from the Experience Undertaking the Research

8.0 Summary

This chapter reflects on and evaluates the methods applied in the research by examining their effectiveness in achieving the research aims (see Chapter One) and the key ethical issues relating to the study. It also considers specific, operational aspects of the research, and concludes with an evaluation of the effectiveness of the study measured against its aims.

8.1 Reflection on Methodological Issues

This section sets out the key learning from an evaluation of the design and methods employed in the thesis study in order to achieve the research aims.

8.1.1 Use of the interpretivist approach

The interpretivist approach adopted by the research was found to be appropriate. It was consistent with the perspective also adopted in the study that participants were experts of their own experience, and that it was their constructions that the study aimed to investigate. Pressure to counter-balance this approach by collecting the perspectives of other stakeholders (for example, professionals) was resisted as this was inconsistent with these central aims of the research. In addition, the preliminary review of literature completed to shape the final design (see Chapters One and Four), identified that little previous research had been undertaken which focused solely on the experiences and perceptions of LAYP about their safety and wellbeing.

Consistent with interpretivist approaches, the study has examined the perceptions and experiences of LAYP participating in the research. The findings are therefore valid to this sample of LAYP. In addition, consistent with inductive research, the analysis of these findings has also been examined and interpreted against the conclusions of the literature review in order to identify the implications for wider policy and practice development.

8.1.2 Issue specificity and the use of conceptual frameworks

A key dilemma in designing the research was whether generic or issue/condition specific frameworks were likely to be most appropriate for organising and undertaking the study. Generic models provided a basic conceptual framework but did not provide sufficient

analytical rigor to examine the specific needs and contexts of LAYP. It was concluded that generic, all-children wellbeing models and generic typologies for measuring participation did not provide a sufficiently robust conceptual framework for analysing the safety and wellbeing of LAYP. In response to this conceptual challenge, issue specific models were constructed with which to examine safety and wellbeing, and the participation of LAYP. Because of the range of issues covered within the sole focus of LAYP's perceptions of safety and wellbeing, these models are referred to as 'situation specific models'. This focus on specificity was further developed by synthesising the implications from the research for safeguarding policy and practice into a situation specific model for safeguarding from harm and promoting the wellbeing of LAYP. It is argued that the research developed a coherent conceptual approach to issue specificity.

The 'situation specific typology' for measuring the effectiveness of inclusion and participation of LAYP developed whilst finalising the research design (see Chapter Four) is consistent with other typologies that conceptualise effective participation as denoting the sharing of power. However, the typology developed in the research also identifies the potential for a creative dialectic between adults and LAYP. Other typologies do not generally examine the potential benefits of a collaborative relationship in decision making between adults and LAYP. Shier (2001) incorporates the need to support young people in the decision making process, but does not develop the analysis. Hatton (2008) examines creativity in social pedagogic practice, based on building relationships between pedagogues and LAYP, and conceptualises the relationship as an element of collaboration and empowerment (p. 3). Thus, it is argued that this collaborative relationship in decision making could be empowering for LAYP and achieve creative outcomes with them. The research found participants adopted a range of positions towards involvement in decision making, which this situation specific typology accommodates. Thomas's typology (2002, p. 170) was applied as the basis of the typology in order to conceptualise these positions and further examine the implications of the heterogeneity of the sample. Thomas found a broader range of positions than this study, which may be explained by the larger sample in his research.

8.1.3 User involvement in the research

The engagement of a young person consultant to the research informed and impacted upon the design of the study. The consultation process generated important ideas which were incorporated into the research. A wider group of current and former LAYP also advised on the method, design and format for dissemination of the findings to the study's participants. On reflection, some key aspects of service user participation and inclusion

applied in the thesis research could be strengthened in future research. The level of participation in the research can be compared with service user control, which denotes a relationship where power is located with service users and not the researcher (McLaughlin, 2007, p. 99). The research did not achieve this level and varied between stages three and four of the preliminary typology for evaluating LAYP's participation (see Chapter Four). Whilst the research benefited significantly from the young person's contributions, the final decisions and conduct of the study rested with the researcher and involved compromise between different stakeholders' priorities including the CSLA (see Chapter Four). Future research would benefit from a design which incorporates a higher level of participation from LAYP throughout the research, an issue which is further examined in Chapter Nine.

The pilot study proved to be particularly helpful for providing the researcher with the opportunity to incorporate service users' perspectives into the research process and design. These perspectives are unlikely to have been generated by the researcher or the research steering group without this contribution. The pilot study resulted in the addition of several questions (although note the earlier points about the number of questions involved) and revised phraseology to enhance clarity and comprehension.

8.1.4 Combining structured and semi-structured methods

The large quantity of questions in the research schedule was acceptable to most participants, but quite demanding and pushed concentration to the limits for some. The volume of questions may have limited some participants' additional commentary to some questions, indicating that fewer questions would be preferable in future studies.

The combination of single-measure and multiple indicators used in the study proved both productive and restrictive. The measures produced some clear and easy to interpret data. However, open questions may have facilitated further examination of key issues with some participants. It is felt that the research is likely to have benefited from greater use of open questions.

Although the interview schedule was tested in the pilot study, questions 5 (Frequency of placements), 43 and 45 (Encouragement to maintain contact with family and friends) were found not to have been well formulated. The options for frequency of placements in question 5 proved to be too restrictive for participants. The single-indicator measure used in questions 43 and 45 also proved to be too restricted and did not reflect the range

of views on this topic. Further use of open questions or multiple-indicator measures could have facilitated a more in-depth examination of this experience.

The separation of bullying from physical abuse was a dilemma for the research, as it is for other researchers in this field. The differentiation of these two issues was not clear to many participants with the outcome that the terms were often used interchangeably. Although one term could have been used to avoid this dilemma, it is likely that this would have elicited narrower responses from participants. The researcher concluded that the benefits of keeping and using both terms outweighed the deficits of any lack of conceptual clarity. The implications for safeguarding practice of this ambiguity of meaning (in relation to bullying and physical abuse) were examined in Chapter Seven.

The integrated use of semi-structured interview methods had a major advantage, in that the researcher was able to respond to the diverse needs of the participant group. Some participants benefited from a little more explanation of some questions than others, and the methodology enabled the researcher's responses to reflect participants' individual needs. The researcher was anxious to ensure that further explanation of a question did not introduce bias, and followed high ethical standards to enhance the process for participants whilst adhering to these guiding principles. The semi-structured method also enabled the researcher to probe for further comment which contributed to the depth of qualitative data generated.

Thus, the use of structured and semi-structured methods facilitated a systematic, and replicable, research process; an in-depth investigation of individual participants' perceptions and experiences; and enabled the generation and subsequent analysis of quantitative and qualitative data.

8.1.5 Consideration of alternative research methods

It is felt that the study would have benefited from a triangulation of methods, for example through the use of interviews and focus group methods. The use of focus groups may have placed less demand on the interview process and generated a greater diversity of data. The interactive element of focus groups may also have engaged some participants more effectively. However, a number of participants clearly enjoyed the one-to-one interview experience and the confidentiality it offered. As noted in Chapter Four, this option was considered at the design stage but it was felt that logistical issues made the application of a focus group methodology impractical for this study. The interview schedule was felt to reflect the epistemological position, aims and objectives of the

research. It was effective in both facilitating the collection of data, its organisation and its effective analysis. The use of a greater diversity of tasks within the interview, for example with some questions less dependent on verbal communication skills, would have suited several of the participants.

8.1.6 Undertaking the analysis of the research data

Each interview, with the exception of one where permission was withheld, was tape recorded and fully transcribed to facilitate analysis of the qualitative data. As noted in Section 4.4, the data was successfully coded by applying initial and focused coding techniques (Charmaz, 2006, p. 47-48 and p. 57).

This analysis identified 24 emergent concepts and four overarching, emergent categories. Grounded theory proved an effective data analysis technique in developing knowledge from the data. Although the process did not generate theory it did contribute to the application of pre-existing theory to the research topic. As also noted in Section 4.4, the expectation that pre-existing theoretical assumptions should be suspended in the application of grounded theory did not prove to be either productive or realistic. On the contrary, the use of grounded theory in the study both contributed to and developed pre-existing theory.

The exploratory data analysis technique was used to analyse the quantitative data generated by the thesis research, and was appropriate for the level of statistical analysis required. Excel software was initially used but was limited due to the restricted interactivity it was able to achieve within the data. The Statistical Package for the Social Sciences facilitated an examination of key inter-relationships within the data. The researcher received technical assistance with the application of the statistical analysis package, but undertook and retained sole responsibility for the analysis, interpretation and interrogation of data.

It is argued that the exploratory approach, combined with the application of grounded theory, achieved a depth of data analysis consistent with the aims and epistemological assumptions of the research. In addition, the process of examining the findings from analysing the qualitative and quantitative data sets contributed an in-depth understanding of the experiences and perceptions of the participants. For example, the quantitative data captured the number of placements reported by participants. The qualitative data analysis revealed that some participants had difficulty in recounting the number of placements experienced; these participants could not easily remember their

placement history or frequency, revealing a fragmented sense of self history which impacted upon their self identity. Thus, the combination of qualitative and quantitative data analysis was important in achieving a comprehensive understanding of participants' experiences of complex issues.

8.2 Ethical Issues in Conducting the Research

The researcher was aware that relatively little primary research had previously been undertaken which effectively incorporates the perceptions of LAYP, and that ethical considerations, including the process of obtaining formal ethical approval, have contributed significantly to this position. As outlined in Chapter Four, the study required formal ethical approval from the University Departmental Research Ethics Committee and the CSLA Research Ethics Committee. Whilst these processes guaranteed rigour and adherence to strict ethical codes of conduct, it is felt that the ethical approval process placed a greater degree of scrutiny on protection issues for potential participants than on the inclusive and emancipatory benefits of their participation in the research (Alderson and Morrow, 2004) – a key aim of the study itself.

It is argued that high ethical standards were achieved throughout the design, implementation and dissemination stages of the research, and all of the ethical requirements of the research were successfully met.

8.2.1 Avoidance of harm

A practical example of the application of the 'no harm' principle was the referral to the study of a young person who had indicated a wish to participate in the research. However, due to a recent and emotionally distressing experience in placement for this young person, the CSLA and researcher concluded that participation at the point of referral was not in the best interest of the young person. The judgement was predominantly based on the knowledge of the close proximity between the topic of the research and the young person's recent experience. The suggestion was made to the young person to defer involvement, which was accepted. Importantly, the issue was not based on the young person's competence to consent but on avoidance of harm. The young person subsequently participated in the research at a later stage. This example raises key questions around the self-determination of young people to participate in the research. However, the process felt appropriate, responsible and designed to be in the young person's best interests. The dilemma was made easier to resolve by being able to defer participation, and the professional experience of the researcher in negotiating with the young person about what was in their best interests.

No evidence was found during or after the interviews that any participant had suffered harm through participation in the research. On the contrary, as noted throughout the thesis, participants generally appeared positive that they had been asked for their views. Thus, it was felt that the research achieved the balance between protection from harm and empowerment to participate in the research. Although post-interview support was offered, none was accessed from the researcher. It is not known whether participants accessed support from the independent organisation set up for this purpose due to confidentiality of the referral process.

The protocol adopted by the study for managing information which indicated that a respondent or any other person had been subject to harm or was at risk of harm was felt to have been effective. All participants were informed of the protocol verbally and in writing. The researcher applied the protocol on several occasions during the research; these concerns involved alleged incidents of harm from carers. The researcher informed the participant in each case that this information would be communicated as agreed. The CSLA subsequently confirmed on each occasion that the allegations had been investigated.

A protocol was adopted to ensure that the researcher would not interview participants without another adult being on the premises where the interview took place. There were several interviews where the participant and the researcher were alone in rooms, which did add to the vulnerability of both parties. In these examples, participants generally took control of the process and selected locations where they felt that they could speak confidentially, which highlights the tensions inherent in balancing self-determination with protection. This was mostly accepted by the researcher with careful monitoring to ensure safety for both the participant and researcher.

8.2.2 Consent, confidentiality and rewards

The process for achieving informed consent from prospective participants appeared unproblematic. The information and process on consent seemed understandable and acceptable to the young people involved. There were no instances in the study where a young person was deemed unable to provide informed consent, and no evidence was detected that the consent process introduced bias into the sample.

Participants were reminded in writing prior to and verbally at the beginning of the interview, of their entitlement to discontinue the research interview at any stage and

subsequently withdraw from the study. One respondent did discontinue the research interview, indicating that he had lost patience with the large number of questions and the interview was quietly and respectfully concluded by the researcher.

The assurance of anonymity and confidentiality made with respondents and the CSLA was fully honoured. It was felt that high ethical standards of anonymity and confidentiality were maintained throughout the study, with the exception of information relating to risk referred to earlier, where the protocol agreed with the CSLA was used.

It remains unclear whether the decision not to offer rewards and incentives impacted negatively on the response rate for the study. On reflection, the decision not to offer rewards or payments was felt to be appropriate, consistent with the participatory principles of the research where participants consented freely to share their experiences and perceptions. Offering no payment or reward seemed paradoxically to place greater power with participants, as it avoided a 'commodified relationship' (Cowden and Singh, 2007, p. 16). A commodified relationship is where the researcher, or more commonly service provider, purchases the input from the service user whilst retaining power over it and how the information will be used.

8.3 Conducting the Research

The experiences of operationalising the research are examined in this section, including the response rate of participants, views of staff and carers from the CSLA, the inclusion criterion based on the 'exit principle', the use of reflexivity in the research and the paradoxical 'stranger effect'.

8.3.1 Response rate for the study

The response rate for the study was approximately 25 per cent. Consistent with the general characteristics of LAYP, the lives of prospective and actual participants were characterised by a significant amount of uncertainty and change. Going missing from placement, being arrested and having moved placement subsequent to referral to the researcher were among the practical difficulties encountered which impacted on prospective participants reaching the interview stage. They were accepted by the researcher as predictable facets of the study.

The flow of referrals to the research was intermittent and seemed to reflect the unpredictable numbers of LAYP who met the inclusion criteria for the research. The

inclusion criteria proved straightforward to interpret and apply by all those involved in the research.

8.3.2 CSLA staff and carers' views of the research

The researcher and a senior member of the CSLA conducted several briefing sessions for staff on the nature, aims and objectives of the research prior to its start date. Some staff members were critical of the research methodology which meant that social workers and carers were not going to be interviewed. The criticism appeared to be based on the view that participants' views should be balanced against carers' and social workers' views. It was explained that the key aim of the study was to obtain and understand perceptions from young people about their safety and wellbeing. The briefing sessions demonstrated a tension between staff who were sceptical of the aims of the research, and those who were supportive of the aims and felt that policy and practice could be developed as a result of hearing the views of LAYP. The political support from the CSLA for the research was particularly important in light of the more oppositional views held by some staff.

Variable levels of encouragement and support for LAYP to participate in the research were found from foster carers and residential care workers. These differential levels were picked up by the researcher impressionistically. However, they may offer partial explanation for the under representation of LAYP from foster care and the under representation of some children's homes within the CSLA. Further research should reflect on methods of communication to inform carers of the research and to further encourage their support for LAYP to participate. Disseminating the findings and implications of these to carers more widely may also improve their understanding of LAYP's perceptions, and the need for research which focuses on them.

A senior member of the CSLA facilitated the operation of the study and played a key role as 'champion' for the research, appearing to be respected by most staff and participants. On reflection, it is suggested that this role was a critical element in the successful operation of the research.

8.3.3 Exit research design

The design adopted by the research, whereby participants were interviewed about their previous placement, appeared to confuse some participants and liberate and empower others. Some participants were confused as they tended to direct their perceptions and experiences towards their current, not their previous, placement. The semi-structured

method assisted the researcher to re-focus the interview to the previous placement. Most participants did appear to be comfortable with the exit principle. It can be speculated that the emotional distance between the placement and research interview contributed to participants feeling sufficiently safe to be able to express their views and experiences. On balance, the benefits of the technique seemed to outweigh the deficits. The evaluation of the research method could have been aided by including a question or point of clarification on the exit principle.

8.3.4 Application of reflexivity

The reflexive enquiry approach was applied in several areas of the research. For example, participants were not asked why they had initially been looked after, but most chose to give this information and subsequently tell their story. As part of the reflective process, several explanations for this disclosure were considered. Perhaps the absence of this question felt artificial to these participants, given that the focus of the research was on their experiences of being looked after? As the researcher emphasised the importance of hearing the participants' own perspectives, it may have been important to some participants for the researcher to be aware of their background. Christiansen and James (2000) found that children were able to reflect on their experiences and practices as research participants:

In this way the children participating in the research appear not only as respondents but also as actively interpreting and shaping the research
(p. 5)

Thus, it could be suggested that the contribution that some participants made regarding their own experiences was part of their own reflective process. The reflexive approach was able to help the researcher identify where participants took control of the interview by choosing the experiences they wanted to share. This could be interpreted as an empowering aspect of the research, and one which clearly contributed to the research process.

This process could also have been impacted upon by the paradoxical 'stranger effect', which can occur when the rapport which may develop during in-depth social research interviews, combined with the structured and bounded context can increase the potential for disclosure (May, 2002):

By creating an impartial emotional space, the interviewer provides the opportunity for people to step back and reflect on their lives (p. 210)

May (2002) claims that this process is frequently experienced by interviewees as 'supportive and energising' (p. 210).

8.4 Dissemination of findings

The study met its obligations to disseminate findings in two main ways. First, findings were disseminated to participants by means of a briefing document covering the main findings of the research. The researcher consulted a small group of current and former LAYP to ensure that findings were communicated effectively. Second, findings were disseminated to the CSLA by means of a research report, incorporating a comprehensive analysis of the research findings and implications of these for policy and practice development.

Broader dissemination activities beyond the CSLA have also been undertaken including presentations on the method and the findings at national and international conferences.

8.5 Conclusion: Effectiveness of the Research

It was acknowledged at the design stage of the study that the findings of the thesis research could not be generalised to all LAYP. However, it is argued that the findings are transferable to other settings within the CSLA and to other Children's Services Departments. The case study methodology and the relatively small sample size were key factors in restricting the ability to generalise the findings to a larger population of LAYP. It was felt that the use of one methodology was a particular limitation of the research in this respect, but that this also enabled the research to meet other key objectives. It is therefore argued that the study effectively achieved the key aims outlined below:

- i) The study achieved the aim of investigating the perceptions of LAYP on their safety and wellbeing;
- ii) The findings of the study were related to the contemporary safeguarding debate and subsequently contributed to the debate;
- iii) The researcher developed a contemporary model for safeguarding from harm and promoting wellbeing with LAYP. It is argued that the study has contributed to the safeguarding debate on LAYP;

iv) The researcher also developed a typology for measuring and evaluating the effectiveness of the inclusion and participation of LAYP.

Chapter Nine further examines the outcomes of the research outlined above.

Section 3: Interpretation and Conclusions

Chapter 9: Conclusions and Implications

9.0 Summary

This chapter concludes the thesis. It addresses the second aim of the research by examining contemporary safeguarding developments regarding LAYP in light of the research findings; and contributing to safeguarding knowledge, policy and practice with the development of a new model based on the perceptions and lived experiences of LAYP.

The volume of social policy initiatives produced over the last decade reflects a political commitment to improve the outcomes and experiences of LAYP. The thesis has argued that whilst some outcomes have improved, there continues to be a dissonance between social policy formulation and implementation. In particular, it is not clear whether these improvements have impacted significantly on the experience of being looked after. The outcomes measures introduced under these policy initiatives were critiqued for insufficiently measuring variables that are most important to LAYP.

The study aimed to investigate a specific set of issues associated with safety and wellbeing, as noted in Chapter One. Thus, the conclusions do not address the full range of issues associated with safety and wellbeing, but focus on those examined in the study. The study found that some participants had positive experiences of feeling safe and having their wellbeing assured. Conversely, some participants had more negative experiences, where they felt their safety and wellbeing, in varying degrees, had not been assured.

The process of undertaking this research has involved the development and application of situation specific typologies and indicators for measuring the inclusion, participation and safety and wellbeing of LAYP. Four emergent categories identified from the analysis of the research findings (see Chapters Six and Seven) are used to organise the conclusions of the study, and the policy and practice implications of each category are considered. The emergent categories have also informed the development of the new model referred to above. This model is a significant outcome of the study which, it is argued, contributes knowledge and theory to safeguarding policy and practice. This contribution to knowledge is evaluated in Section 9.3, and gaps in research on the topic

are identified with proposals for future research, policy and practice development in Section 9.4.

9.1 The Emergence of ‘Safeguarding’ in Relation to LAYP

The concept of safeguarding was introduced in Chapter One and examined within a social policy context in Chapter Two, where its origins were traced back to earlier reviews of safeguarding arrangements for LAYP (Utting, 1997). Importantly, the concept of safeguarding has been developed in social policy to incorporate protection from abuse and welfare promotion (HM Government, 2010a, p. 31).

Four key points are addressed in relation to safeguarding developments.

9.1.1. Developments in safeguarding ‘post Utting’

A commonly applied benchmark, evident in the literature, is the measurement of developments in the effectiveness of safeguarding LAYP since Utting (1997). Key government reports (Stuart and Baines, 2004; Ofsted, 2008b) claim that safeguarding mechanisms for LAYP have been generally strengthened since Utting (1997). However, concerns have been expressed that these improvements have been inconsistent, in two key areas: the first relates to key groups of LAYP who remain vulnerable in some custodial and health settings (Stuart and Baines, 2004, p. 1); the second relates to geographical inconsistencies that have been identified in the application of safeguarding improvements. As noted in Chapter One, one in 10 children’s homes and fostering services were found to be inadequate in keeping LAYP safe (Ofsted, 2008d, p. 5). These reports generally note improvements in safeguarding mechanisms and procedures, but pose a challenge as to whether procedural developments have subsequently improved outcomes for LAYP.

9.1.2 Conceptualising safeguarding

A key consideration for contemporary safeguarding developments is whether the priorities identified by LAYP are sufficiently considered. This question will be discussed further in Section 9.2, in light of the research findings. ‘Staying Safe’ (DCSF, 2007d) was a universal initiative which aimed to build safeguarding in relation to the ECM outcomes. It claims that children and young people universally prioritise ‘staying safe’ and stresses the need to protect children:

At risk of abuse and neglect to stay safe... children and young people also need to have security, stability and be cared for by parents, carers and families (p. 6)

This safeguarding statement refers explicitly to both safety from abuse (abuse and neglect) and promotion of welfare (stability and security). Three levels of safeguarding are identified in 'Staying Safe', partly in response to the criticism that universal safeguarding initiatives do not sufficiently respond to the needs of specific vulnerable groups such as LAYP (DCSF, 2007d, p. 48). These three levels can be summarised as follows:

- i) Universal safeguarding, which aims to keep all children and young people safe;
- ii) Targeted safeguarding, which acknowledges that some groups are more at risk than others, and that policies and services should be targeted to these groups to help keep them safe from harm. It is argued that LAYP generally require this level of safeguarding because of their vulnerability, as found in the study;
- iii) Responsive safeguarding, which refers to children and young people who require a response when they are at risk of harm. LAYP would require this level of safeguarding in response to identified risks and needs (DCSF, 2008f, p. 7).

The model also identifies the potential impact on safeguarding of local, central and community variables. Thus it is argued that central policy, and local policy and practice are important dimensions of implementing safeguarding at each identified level.

Figure 9.1 illustrates these three levels of safeguarding, highlighting the need for a combination of responses at national, local and wider societal levels.

Figure 9.1 The three levels of safeguarding



(DCSF, 2008f, p. 6)

9.1.3 Protection and welfare promotion

The term 'safeguarding' – as noted previously – was introduced to conceptualise the inter-relationship between protection and welfare. Munro and Calder (2005) note that as the safeguarding agenda has developed, terms such as 'child protection' and 'child abuse' have become less prominent in government guidance and professional language (p. 439). It is notable that the three levels of safeguarding, above, do not refer to 'protection' or 'abuse' but do refer to harm.

The contemporary safeguarding debate differentiates between protection and welfare promotion, separating the two concepts whilst proposing that practice should integrate them (HM Government 2010a, p. 31). It is argued that the guidance does not integrate the two concepts into a whole, instead encouraging a coordinated application of the two separate concepts. This approach can be criticised as, if it promotes coordination rather than integration of these two aspects, a judgement will often be made as to *which* should be prioritised. For example, the Social Work Task Force (2009) prioritises safety and protection over welfare promotion (p. 67).

There appears to be a general consensus that safeguarding has a relationship with both protection and welfare promotion, but there is little consensus about the nature of this relationship. The researcher argues that the two elements exist as a close inter-relationship and need to be considered simultaneously.

9.1.4 Contribution to the contemporary policy and practice safeguarding debate – a new model

The thesis research has developed a model as an outcome of examining the relationship between the six domains of the preliminary safety and wellbeing framework, the research findings and the above examination of the contemporary safeguarding debate.

The new model is therefore an evolution of the preliminary framework and reflects contemporary knowledge and research on safety, safeguarding and wellbeing in the following key ways:

- The study found a range of sources of harm which pose considerable conceptual challenge – for example, conceptual confusion between bullying and physical abuse. The term ‘harm’ was therefore applied to incorporate physical, sexual and emotional abuse, bullying and harm through neglect; and to ensure that the relationship between safeguarding and harm was explicit.
- The term ‘safeguarding’ is applied in preference to protection. Safeguarding denotes an inclusive contemporary perspective which incorporates the continuum of universal, targeted and responsive safeguarding strategies (DCSF, 2007d, p. 6).
- The continued use of the term ‘wellbeing’ is important, ensuring that both generic and situation specific dimensions are accommodated. It is argued that the generic dimension contributes to normalising LAYP within the whole child population. The situation specific dimension incorporates the exceptional needs that LAYP may have which may not be shared with their non-looked after peers.
- The integration of safeguarding from harm and promotion of wellbeing within the model denotes an inter-dependent relationship between each of these dimensions. The model provides a conceptual framework for the contribution that the study makes to the contemporary safeguarding debate.
- The concerns for safety found in the study imply the need for predominantly targeted and responsive levels of safeguarding practice. However, the application of universal level safeguarding can also be applied as a preventative strategy for LAYP (DCSF, 2008f, p. 7). Local CSD policy should therefore support safeguarding practice for

LAYP at each level. Applying only responsive levels of safeguarding would fail to account for the inter-relationship between safeguarding and wellbeing dimensions.

9.2 The Centrality of LAYP in Safeguarding and Wellbeing Policy and Practice

The study concludes that a predominantly non person centred approach towards safety and wellbeing was experienced by LAYP participating in the research. Despite numerous social policy directives which promote the centrality of LAYP, the UK's managerialist social work model has not located LAYP at the centre of these developments. The study concludes that a person centred perspective to safeguarding from harm and promotion of wellbeing is essential, and currently lacking.

Child centredness is a term that is commonly used, but often without clear definition. Lawlor, (2008) defines the approach as:

Informed by a philosophy of valuing and respecting children as individual people in their own right with their own interests and abilities which acknowledges their competences and abilities to make decisions (Lawlor, 2008, p. 2)

This definition, however, depicts the relationship between LAYP and adults as somewhat passive. The thesis study found that if LAYP are to participate effectively, a redistribution of power is required in order to achieve a greater propensity to voice. Person centred perspectives and practices should therefore address power differentials.

Societal views of LAYP have been found to impact significantly on explanations for historical abuse. As noted in Chapter Three, Ferguson (2007) found that societal views towards LAYP as 'moral dirt' formed a rationale to justify institutional abuse (p. 132). Thus, it is argued that dominant societal views of LAYP may also significantly impact on the way they are perceived to *deserve* safeguarding from harm and promotion of their wellbeing.

The research findings confirm the heterogeneity of LAYP. Whilst some common principles apply to all LAYP, it was clear that each LAYP has individual safeguarding and wellbeing needs and aspirations. Person-centredness should therefore respect heterogeneity.

9.3 Implications for Future Policy and Practice

This section presents the key learning and conclusions drawn from the analysis of findings, organised by the four emergent categories, and examines the implications for practice and policy relating to safeguarding LAYP.

i) Feeling safe

The study challenges assumptions that LAYP are safe because they are looked after. Many participants felt safe and some felt unsafe in varying degrees across ages and gender, and in foster care and children's homes placements. All forms of harm were found to have a deleterious and distressing impact on the young people involved in the research. Physical harm and bullying were the main causes of feeling unsafe. Going missing was a harmful activity with multiple causes and consequences. The findings require a re-definition of 'harm' to reflect these perceptions of LAYP. Thus, poor quality of care, bullying and the deleterious impact of some programmes and systems may be conceptualised as harmful.

Carers were identified as the predominant cause of physical harm and other young people the predominant cause of bullying. Adults were expected to stop participants from being harmed. Family and friends were found to play a key role in listening and ensuring safety and wellbeing. The complaints procedures designed to protect LAYP from abuse were not found credible for communicating concerns for safety and wellbeing. Rules and procedures contributed to safety and wellbeing when they protected young people from harm and were seen as fair and equitable.

Implications for practice:

To effectively safeguard LAYP from harm, practitioners and carers will need to understand the diverse range of harm from which participants felt unsafe. Redefining harm could have significant, positive implications for effective safeguarding practice if based on LAYP's perceptions of harm.

Effective safeguarding practice requires an inclusive approach where LAYP are empowered to contribute to their safety, within which their expertise of their own lives is respected and harnessed. The practice of asking LAYP if they are safe within the context of trusting relationships is likely to contribute to effective safeguarding practice.

The combination of adult and young person perpetrators of harm found in the study may also require a revision of generally held assumptions as to who may cause harm. Harm perpetrated by other young people needs to be more explicitly incorporated into safeguarding practice.

The knowledge that LAYP identify friends and family as listening and looking out for their safety and wellbeing may require a revision of collaborative safeguarding practice. This collaboration should extend to the full range of professional, family and social networks in order to ensure effective safeguarding and promotion of wellbeing. LAYP's reports of poor listening from social workers highlights a need for a significant change in social work practice to ensure synergy between the expectations of listening between social workers and LAYP.

Key adults also need to be aware of the negative impact of harmful behaviour such as offending and going missing, and engage with LAYP on these issues. They also need to understand the underlying reasons for all harmful behaviour, and the relationship between pre-entry and post-entry variables. Targeted safeguarding practice on these sensitive issues is likely to be most effective when undertaken within a continuous and trusting relationship.

Safeguarding practice should re-orientate the current focus away from complaints procedures which generally lack credibility and effectiveness with LAYP. Safeguarding practice is likely to be most effective when focused on listening to the concerns that LAYP may have for their safety and wellbeing *and* achieving tangible outcomes in response to those concerns.

Implications for policy:

Child protection policies and procedures should reflect the views and perceptions of LAYP on the range of harm they feel subject to. This may require a redefinition of harm, as outlined earlier. In light of the general ineffectiveness of complaints procedures found in the study, their purpose, function and implementation require significant review. Two possible policy options include: the revision of procedures so they are understandable, accessible, facilitate effective listening, address protection, ensure participation and produce tangible outcomes; and/or a positive, person centred practice that effectively addresses the range of concerns LAYP may have for safeguarding and wellbeing.

ii) Effective participation and inclusion

Safeguarding from harm and promoting the wellbeing of LAYP is most likely to be effective when levels of participation and inclusion achieve a high propensity to voice and a low propensity to exit. A close inter-relationship was found between experiences of participation, outcomes of participation, power between adults and LAYP, engagement, safety and wellbeing. Most participants felt insufficiently involved, and were motivated to be more involved in decision making. The decisions in which participants wanted greater involvement included placements, and contact with family and friends, which closely relate to safety and wellbeing. Despite high levels of motivation to participate, predominantly low levels of participation were found, consistent with the propensity to exit rather than voice.

Consistent with the propensity to exit, many participants appeared disconnected and disengaged due to their disillusionment with the processes of participation or the outcomes derived from it. The low levels of participation found in the study were consistent with the managerialist model of UK social work, which places less focus on participation and inclusion than European social pedagogic models.

Participation and inclusion in pre-entry planning and preparation impacted positively on entry and post-entry feelings of safety and wellbeing. The absence of this involvement frequently left participants feeling ill-informed, frightened and vulnerable. Planning processes for health, education and care were generally experienced as non-inclusive and non young-person centred.

The participatory and inclusive elements of attending education were valued by most participants. Educational wellbeing was found to contribute to the continuity of key social networks.

Implications for practice:

Safeguarding and wellbeing are likely to be enhanced when LAYP are able to participate in decisions and activities that affect them. The implications for future practice are significant. Practice which facilitates participation at stages four and five of the preliminary typology for evaluating the effectiveness of the participation of LAYP (Chapter Four) requires a tangible relationship between participation processes and the outcomes of participation, and a power balance between LAYP and key adults. Effective levels of participation contribute to better decision making in relation to key decisions impacting on safeguarding from harm and

wellbeing, and can increase engagement and connectedness. The managerialist model of UK social work has not achieved high levels of participation and inclusion with LAYP. Alternative models such as social pedagogy, which integrate principles of participation and inclusion, may achieve more effective levels of participation and inclusion.

The complex emotions experienced by young people at the entry to being looked after require a greater degree of understanding and empathy from carers and practitioners. Participative and inclusive pre-entry planning and preparation should be introduced to reduce the distressing impact of entry. Health, education and care planning practice needs to be transformed to embody person centred approaches and move away from a focus on procedures and bureaucracy. The low levels of effective inclusion in health plans imply that more inclusive practice is required in order for health care planning to play a meaningful role for LAYP. Key practice decisions, for example about placements, should take full account of the inclusive and relational aspects for LAYP of attending and retaining continuity of education.

The research found low levels of understanding about the meaning of and participation in planning, which impacted negatively on participants' safety and wellbeing. Planning should be an inclusive process if it is to effectively contribute to positive safeguarding. This can be seen to contrast with planning undertaken in meetings, which were mostly experienced as excluding. To respond to the criticisms reported in the study, both the process of planning and the resultant plans need to be inclusive, understandable and meaningful to LAYP.

Implications for policy:

The policy implications for enhanced levels of inclusion are also significant. The current UK social work model has not effectively delivered social policy expectations of participation and inclusion of LAYP. The current UK social work model therefore needs to be reviewed, and a new approach adopted which integrates and promotes principles of and practices integrally associated with participation and inclusion. Current educational outcome measures will also require revision in order to reflect the inclusive and relational aspects of education valued by participants in the study.

Current health performance measures are predominantly based on objective indicators, whereas subjective measures (for example measures of LAYP's participation in health planning) may achieve a greater legitimacy from, and therefore engagement with, LAYP about their own health. Healthcare planning strategies would benefit from a greater emphasis on processes that are person centred and understandable to LAYP.

Finally, national and local policy should support care and practice which promotes aspirations from and for LAYP and encourage the adoption of inclusive planning processes which are less reliant on meetings (which participants experienced as excluding and adult centred) and more in tune with person centred planning approaches.

iii) Continuity and quality of relationships

Trusting relationships with families, friends, carers, and social workers contribute significantly to LAYP feeling safe and well cared for. Participants generally did not want to discuss personal issues with anyone with whom they did not have a trusting relationship.

Relationships with friends and family were prioritised over other relationships, evidenced in their prominent role in listening and looking out for LAYP's safety and wellbeing. Contact with friends and family was felt to be insufficient for most participants. The importance attached to relationships with family and friends was not generally supported by carers and social workers. Placement discontinuity impacted negatively on the continuity of friendships, relationships at school and in the community.

The social worker role was seen as important, but relationships with social workers were predominantly poor and did not reflect the trusting relationships most participants wanted. Continuity of contact, effective communication and tangible outcomes were identified as integral elements of a close, trusting relationship with social workers.

Establishing a relationship with prospective carers prior to entry impacts positively on safety and wellbeing during and after entry to placement. Detached, mechanistic and unemotional relationships with carers cause emotional harm and neglect, and contribute to participants becoming disengaged and disconnected. Fairness, equity

and normality were identified as the key underlying principles for good relationships with carers.

The procedural focus of the UK managerialist model was found to militate against the development of strong relationships.

Implications for practice:

The strong link found between close, trusting relationships and safety and wellbeing has significant implications for practice with LAYP. Practice will need to be transformed if it is to accurately reflect the centrality of relationships and facilitate LAYP to share their concerns within the context of trusting relationships. Practice that promotes relationships between LAYP, social workers, carers, their family and social networks is likely to reflect the wishes of most LAYP and subsequently promote safeguarding and wellbeing. The negative and positive impact of decisions on relationships, for example the consequences of placement moves, needs to be considered in light of the study findings. Decisions should therefore reflect the centrality of relationships found in the study.

Carers need to negotiate the emotional nature and content of relationships that LAYP require from them and change practices which are detached and unemotional, which are experienced as unacceptable and harmful. Social workers and carers should enable LAYP to identify important relationships in their lives, and support their continuation and development unless inappropriate.

Social workers need to develop close, trusting relationships with LAYP in order to fulfill their responsibilities for safeguarding and wellbeing. The cumulatively positive effects of such relationships are captured in Figure 9.2, which demonstrates the links between continuity of contact, quality of relationships and effective communication.

Figure 9.2 The impact on safeguarding and wellbeing of the inter-relationship between continuity of contact with social workers, quality relationships and communication



Implications for policy:

It is argued that managerialist models of social work are antithetical to relationships and can inhibit the development of key relationships (Jordan, 2007). Relationally based models are more likely to reflect the importance of relationships found in the study, and subsequently enhance practice that ensures safeguarding from harm and the promotion of wellbeing.

iv) Sense of self and self history

Having a clear understanding of the past was found to be important for building a sense of self and self history for LAYP. The combination of high levels of placement discontinuity and complex care arrangements made this difficult for many participants in the study. Thus, knowing and understanding key information may increase a sense of self, contributes to self identity, and may increase resilience and contribute to wellbeing. Key information includes: the reasons for being looked after; family history; placement sequences; and names of previous carers and social workers.

In addition, the research found a general lack of aspiration for the future which appeared to impact negatively on LAYP's sense of self and self identity; and that LAYP value feeling normal, and want to be treated fairly and equitably when compared with their non-looked after peers.

Implications for practice:

Practice with LAYP should reflect an understanding of the importance of a sense of self and self history, and facilitate their development. Narrative techniques such as 'narrative emplotment' (Lawler, 2008, p. 15) could be used to support LAYP to develop a personal journal that records and plots key life events, including memorable events and placement changes as defined by the young person. This process may help LAYP to synthesise their past and develop a self identity which may build resilience and promote their wellbeing.

The study found that participants mostly wanted to discuss personal issues with people with whom they had close, trusting relationships. As indicated earlier, relationally based practice is most likely to fulfill these expectations. This will inevitably require social workers to undertake direct work with LAYP which is consistent with young people's expectations of social workers found in the study. Social workers, as representatives of the corporate parent role, should encourage LAYP to have aspirations for their future, and also have aspirations for LAYP. Aspirations should be incorporated into personal journals, outlined above.

Practice should also reflect the importance that LAYP attach to feeling normal and being treated equitably and fairly. Rules and processes that are experienced as differentiating LAYP from their non-looked after siblings and peers are mostly evaluated as unfair and iniquitous. Thus, rules and procedures applied by practitioners and carers are more likely to contribute to effective safeguarding if they are demonstrably fair and equitable. Practice that promotes positive educational wellbeing can also enhance feelings of normality and equity with non-looked after peers. A challenge for practice is to achieve the balance between meeting individual needs of LAYP whilst respecting their preference for normality.

Implications for policy:

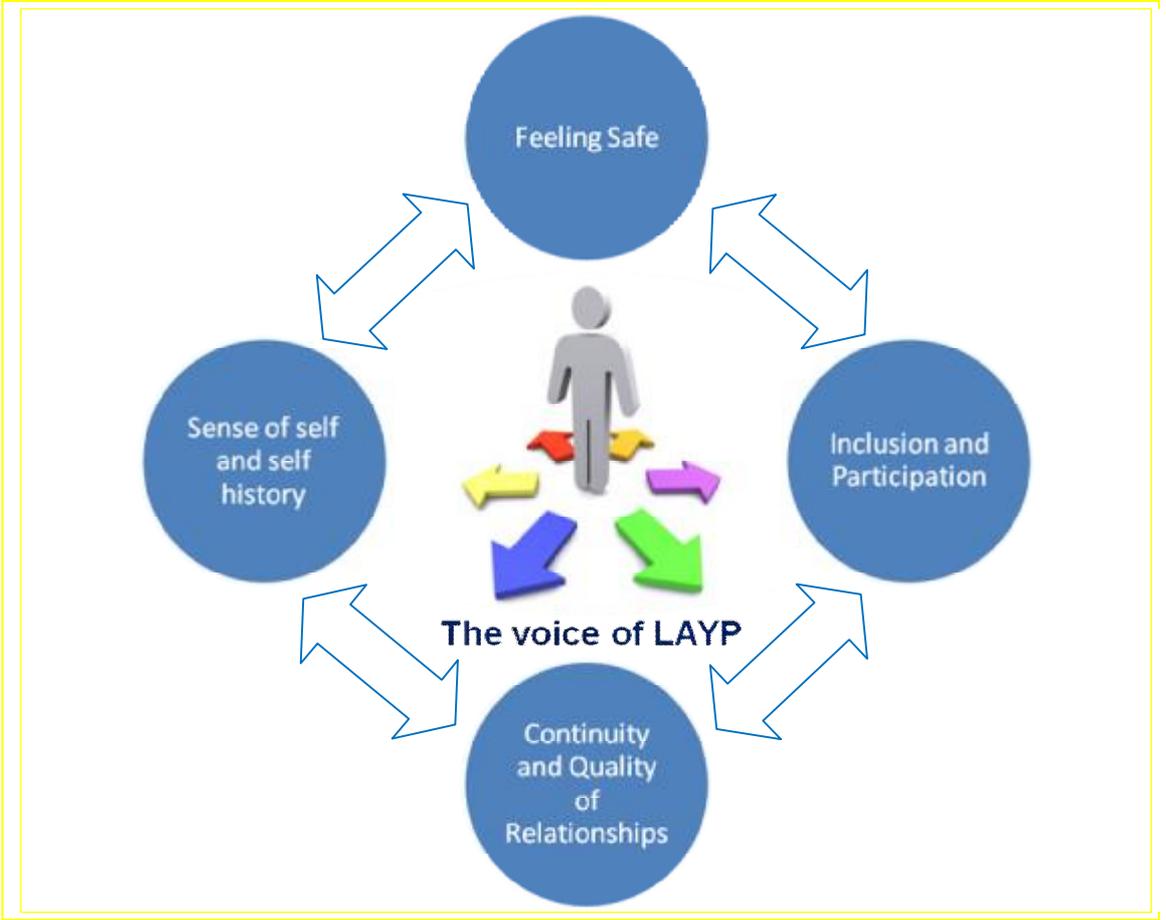
Local CSD policies should recognise and promote direct work with LAYP using narrative and other techniques within a framework of consistent, trusting relationships. Policy should reflect an expectation for the corporate parent to have aspirations for LAYP and to encourage and support their own aspirations. Local and national policy should promote and embed practice that integrates

meeting individual needs of LAYP with principles of normality, fairness and equity.

Figure 9.3 depicts the model developed as a result of synthesising this analysis based on the emergent categories, with the preliminary safety and wellbeing framework (see Chapter One). Importantly, it conceptualises LAYP as key actors and denotes safeguarding and promoting wellbeing as activities undertaken *with* LAYP. The centrality of 'voice' in this model will require substantial shifts in contemporary practice and policy. The inter-dependence of each dimension of the model is critical and reflects the close inter-relationships found in the study; in particular, it depicts the inter-dependent relationship between safeguarding and the promotion of wellbeing. It is a visual distillation of the conclusions of the research, and a critical contribution to safeguarding policy and practice.

Appendix 33 depicts the relationship between the six domains of the preliminary safety and wellbeing framework introduced in Chapter One, and the four components of this Safeguarding from Harm and Promotion of Wellbeing model illustrated in Figure 9.3.

Figure 9.3 Key components of Safeguarding from Harm and Promotion of Wellbeing for Looked After Young People



9.4 Contribution to Knowledge and Priorities for Future Research

This study contributes knowledge and theory generation to the limited amount of previous research on the topic from the perspective of LAYP:

- The critical inter-relationship between safeguarding from harm and promotion of wellbeing. The lack of person centred practice regarding LAYP's safety and wellbeing is found, and related to limitations with the UK managerialist social work model.
- The comparison of specific categories of harm contributes new knowledge. The redefinition by participants of poor quality care as emotional harm and neglect resulting from detached and mechanistic care also contributes to knowledge.
- The finding that complaints systems do not contribute to perceptions of safety challenges the prominence afforded to complaints procedures in response to the inquiry reports on historic abuse in the 1980s and 1990s.
- The role of family and friends in ensuring safety and wellbeing reiterates the centrality of relationships, in contrast with low levels of satisfaction with family contact.
- The findings of discouragement and passivity from carers towards contact with friends and family develops knowledge about carers' attitudes to relationships that were found to be centrally important to LAYP.
- The situation-specific models developed during the study provide new knowledge and tools to: analyse safety and wellbeing; assess the dimensions of voice and exit in measuring the participation of LAYP; and conceptualise key factors involved in safeguarding LAYP from harm and promoting their wellbeing.
- Attention has been drawn to European comparisons, in order to develop understanding of safeguarding from harm and promotion of wellbeing from the perspective of differing social work paradigms.

A number of gaps and priorities for future research and development have been identified in the analysis of study findings. These have been highlighted throughout the thesis, and are summarised below:

- Develop an action research project in partnership with LAYP, to evaluate the proposed model for safeguarding from harm and promoting wellbeing;
- Research to develop outcome measures that reflect LAYP's priorities for safeguarding from harm and promotion of wellbeing;

- Research on the relationship between empowerment as a result of engagement in and protection from research, relating to decisions by research ethics committees on the application for ethical approval to undertake research with LAYP. This should also have a development focus (action research) which then seeks to inform the practice of research ethics committees which can erect barriers to hearing the direct voice and perspectives of LAYP;
- Undertake research with LAYP in order for them to examine the impact of comparative social work models on safeguarding from harm and promotion of wellbeing.

A common feature of these research priorities is that they continue to expand the themes identified in this study, recognising that the perceptions of LAYP in contemporary research remain limited in number and scope. A second key feature is the need to involve LAYP as partners in designing and undertaking research, as well as research participants.

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APPENDICES

Appendix 1 Research Schedule

RESEARCH SCHEDULE

Introduction

Thanks for agreeing to answer some questions about your last placement in care. I will go over the important issues we have already discussed and that are covered in the letter I sent you:

- Ø You can still decide that you do not want to participate in the interview.
- Ø You can take a break in the questions at any time. You can end the interview at any time you wish.
- Ø Information you give will be kept confidential.
- Ø I will pass any information on that you give me that suggests you are at risk, someone else is at risk or the law has been broken.
- Ø Your name will not be linked with the information you give me.

a) Date of interview? .././..
b) Location of interview?
Background information:
1. Name?
2. How old are you?
.....Years
3. Gender
M <input type="checkbox"/> F <input type="checkbox"/>
4. How would you describe your ethnic origin?
Black African <input type="checkbox"/>
Black British <input type="checkbox"/>
Chinese <input type="checkbox"/>
Pakistani <input type="checkbox"/>
White British <input type="checkbox"/>
Black Caribbean <input type="checkbox"/>
Bangladeshi <input type="checkbox"/>
Indian <input type="checkbox"/>
British Asian <input type="checkbox"/>
Other <input type="checkbox"/>
Your views about your placement(s):
5. How many placements have you had altogether?
Just one..... <input type="checkbox"/>
Between 2 and 5..... <input type="checkbox"/>
Between 6 and 10 or more..... <input type="checkbox"/>
Comment if you wish
6. How long have you spent in care altogether?
Less than 6 months (specify) ----- <input type="checkbox"/>
Between 6 months and 2 years----- <input type="checkbox"/>
More than 2 years but less than 5 years--- <input type="checkbox"/>
5 years or more----- <input type="checkbox"/>
Comment if you wish.....
7. What type of placement have you just left?
Foster care----- <input type="checkbox"/>
Children's Home (specify)----- <input type="checkbox"/>
Secure unit----- <input type="checkbox"/>
Other ----- <input type="checkbox"/>
Comment if you wish.....
8. Were you given a choice of moving or not moving when you went to your last placement?

Yes----- <input type="checkbox"/>
No----- <input type="checkbox"/>
Comment if you wish
9. Were you given a choice about what placement you moved to?
Yes----- <input type="checkbox"/>
No----- <input type="checkbox"/>
Comment if you wish
10. How long did you spend in your last placement?
Less than 6 months (specify) ----- <input type="checkbox"/>
Between 6 months and 2 years----- <input type="checkbox"/>
More than 2 years but less than 5 years--- <input type="checkbox"/>
5 years or more----- <input type="checkbox"/>
Comment if you wish.....
11. Did you want to leave you last placement?
Yes----- <input type="checkbox"/>
No----- <input type="checkbox"/>
Comment if you wish.....
12. Were you happy in your last placement?
Yes----- <input type="checkbox"/>
No----- <input type="checkbox"/>
Comment if you wish.....
13. Where are you living now?
Foster care----- <input type="checkbox"/>
Children's Home (specify)----- <input type="checkbox"/>
Secure unit----- <input type="checkbox"/>
Your Family----- <input type="checkbox"/>
Other ----- <input type="checkbox"/>
Comment if you wish.....
14. Were you given a choice of moving or not moving when you went to the placement you are in now?
Yes----- <input type="checkbox"/>
No ----- <input type="checkbox"/>
Comment if you wish
15. Were you given a choice about what placement you moved to when you left your last placement?
Yes----- <input type="checkbox"/>
No ----- <input type="checkbox"/>
Comment if you wish.....

16. Are you happy in the placement you are in now?
Yes----- <input type="checkbox"/>
No ----- <input type="checkbox"/>
Comment if you wish.....
17. Do you feel that the number of placements you have had since coming into care has:
Upset you----- <input type="checkbox"/>
Been OK.----- <input type="checkbox"/>
Comment if you wish.....
Your views on safety and quality of care in your last placement:
18. Tell me how you felt when you arrived at your last placement? Did you feel? Tick as many as you wish.
Relieved----- <input type="checkbox"/>
Scared----- <input type="checkbox"/>
Great----- <input type="checkbox"/>
Confused----- <input type="checkbox"/>
OK <input type="checkbox"/>
Other----- <input type="checkbox"/>
Comment if you wish.....
19. What do you generally think of the way people treated you in your last placement?
1 Very good ----- <input type="checkbox"/>
2 Good----- <input type="checkbox"/>
3 Fair ----- <input type="checkbox"/>
4 Poor----- <input type="checkbox"/>
5 Very Poor----- <input type="checkbox"/>
Comment if you wish.....
20. Did any of the following people treat you well in your last placement?
Prompt- Refer to role prompt card
Comment if you wish...
21. Did any of the following people treat you poorly in your last placement?
Prompt- Refer to role prompt card
Comment if you wish.....
22. How would you generally describe the way people listen to you in care?
1 Very good----- <input type="checkbox"/>
2 Good----- <input type="checkbox"/>
3 Fair ----- <input type="checkbox"/>
4 Poor----- <input type="checkbox"/>
5 Very Poor----- <input type="checkbox"/>
Comment if you wish.....
23. Who listened to you best?

Prompt- Refer to role prompt card
Comment if you wish.....
24. Who listened to you worst?
Prompt- Refer to role prompt card
Comment if you wish.....
25. Did people responsible for your care generally treat you fairly?
Yes ----- <input type="checkbox"/>
No----- <input type="checkbox"/>
Comment if you wish.....
26. Did you run away from your placement?
Yes----- <input type="checkbox"/> (If yes, how many times)
No----- <input type="checkbox"/>
Comment if you wish.....
27. Did any one bully or pick on you in your last placement?
All the time ----- <input type="checkbox"/>
A lot ----- <input type="checkbox"/>
A bit ----- <input type="checkbox"/>
Not at all ----- <input type="checkbox"/>
Comment if you wish.....
28. If yes to above question, specify whom on prompt card?
Answer.....
29. Have you ever been treated differently because of your cultural identity or race by anyone while you were in your last placement? Explain term.
Yes ----- <input type="checkbox"/>
No ----- <input type="checkbox"/>
Prompt- Refer to role prompt card if yes
Comment if you wish.....
30. Did you feel safe in care whilst in last placement?
Yes ----- <input type="checkbox"/>
No ----- <input type="checkbox"/>
Comment if you wish.....
31. How safe did you feel in care in last placement?
1 Very safe----- <input type="checkbox"/>
2 ----- <input type="checkbox"/>
3 ----- <input type="checkbox"/>
4 ----- <input type="checkbox"/>
5 Very unsafe ----- <input type="checkbox"/>
Comment if you wish.....

32. How safe did you feel from physical harm in care in last placement? (Explain term)
1 Very safe ----- <input type="checkbox"/>
2 ----- <input type="checkbox"/>
3 ----- <input type="checkbox"/>
4 ----- <input type="checkbox"/>
5 Very unsafe ----- <input type="checkbox"/>
Comment if you wish.....
Prompt- what or who made you feel safe or unsafe from physical harm? (Refer to role prompt card if person)
Answer
Comment if you wish.....
33. How safe did you feel from emotional harm in care in last placement? (Explain term)
1 Very safe ----- <input type="checkbox"/>
2 ----- <input type="checkbox"/>
3 ----- <input type="checkbox"/>
4 ----- <input type="checkbox"/>
5 Very unsafe ----- <input type="checkbox"/>
Prompt- what or who made you feel safe or unsafe from emotional harm? (Refer to role prompt card if person)
Answer
Comment if you wish.....
34. How safe do you feel from sexual harm in care?(Explain term)
Very safe ----- <input type="checkbox"/>
2 ----- <input type="checkbox"/>
3 ----- <input type="checkbox"/>
4 ----- <input type="checkbox"/>
5 Very unsafe ----- <input type="checkbox"/>
Prompt- what or who made you feel safe or unsafe from sexual harm? (Refer to role prompt card if person)
Answer
Comment if you wish.....
35. How safe do you feel from being neglected in care? (Explain term)
1 Very safe ----- <input type="checkbox"/>
2 ----- <input type="checkbox"/>
3 ----- <input type="checkbox"/>
4 ----- <input type="checkbox"/>
5 Very unsafe ----- <input type="checkbox"/>
36. Tell me how you felt when you left your last placement? Did you feel?
Scared ----- <input type="checkbox"/>
Relieved ----- <input type="checkbox"/>
Confused ----- <input type="checkbox"/>
Great ----- <input type="checkbox"/>
Other ----- <input type="checkbox"/>
Comment if you wish.....

How well do Social Services work for you?
37. Do you know why you were/are in care?
Yes -----□
No -----□
Comment if you wish.....
38. Do you think you generally got a good service from Social Services?
Yes -----□
No -----□
Comment if you wish.....
39. Do you think the planning for you in your last placement was? (Clarify term)
Very good -----□
Good -----□
Fair -----□
Poor ----- □
Very Poor -- -----□
Comment if you wish.....
40. Did you feel that you have been involved sufficiently in important decisions about you?
Yes -----□
No -----□
Comment if you wish.....
41. Did you have any of the following plans?
Personal Education Plan?
Yes -----□
No -----□
Care plan?
Yes -----□
No -----□
A plan to ensure that your health was looked after?
Yes -----□
No -----□
Comment if you wish.....
42. Did you keep in touch with your family as much as you would have liked?
Yes, about as much as I liked -----□
No, I would like to have seen them more often -----□
No, I would like to have seen them less -----□
Comment if you wish.....
43. Did people in the placement generally encourage or discourage you to keep in touch with your family?
Generally encourage -----□
Generally discourage -----□

Comment if you wish.....
44. Did you keep in touch with your friends as much as you would have liked?
Yes, about as much as I liked -----□
No, I would like to have seen them more often -----□
No, I'd like to have seen them less -----□
Comment if you wish.....
45. Did people in the placement generally encourage or discourage you to keep in touch with your friends?
Generally encourage -----□
Generally discourage -----□
Comment if you wish.....
46. Do you think the education you have received whilst in care in your last placement has been?
1 Very good -----□
2 Good -----□
3 Fair -----□
4 Poor -----□
5 Very Poor-----□
Comment if you wish.....
47. What do you think of the preparation you have received in your last placement to get a job? (If applicable)
1 Very good -----□
2 Good -----□
3 Fair -----□
4 Poor -----□
5 Very Poor -----□
Comment if you wish.....
Question does not apply to me.
48. Do you think that you were at risk of getting into trouble with the police whilst in care in your last placement?
1 Very at risk -----□
2 -----□
3 -----□
4 -----□
Not at risk -----□
Comment if you wish.....
49. If you were worried or unhappy about something would you have known what to do?
No -----□
Not sure -----□
Yes-----□
Comment if you wish.....
50. If you were worried or unhappy about something in your last placement,

could you have used a telephone in private?
Not at all -----□
Only on my mobile -----□
Sometimes I can -----□
Yes always -----□
Comment if you wish.....
51. Did you know how to make a complaint if you wanted to?
Yes -----□
No -----□
Comment if you wish.....
52. Have you heard of the Social Services complaints procedure?
Yes -----□
No -----□
Comment if you wish.....
53. Does the existence of the complaints procedure make you feel safe?
Yes -----□
No -----□
Comment if you wish.....
54. Did you use the Social Services complaints procedure whilst in your last placement?
Yes -----□
No -----□
Comment if you wish.....
55. Do the rules and policies around being in care make you feel well cared for?
1 Very well cared for -----□
2 -----□
3 -----□
4 -----□
5 Very uncared for -----□
Comment if you wish.....
56. Do the rules around being in care make you feel safe?
1 Very safe -----□
2 -----□
3 -----□
4 -----□
5 Very unsafe -----□
Comment if you wish.....
57. Do you think any of the following people looked out for your safety?
Prompt- Refer to role prompt card
Answer.....
Comment if you wish.....
58. Do you think any of the following people looked out for the quality of your care?

Prompt- Refer to role prompt card
Answer.....
Comment if you wish.....
59. Do you generally think that people who were responsible for your care saw your safety as important?
Yes ----- <input type="checkbox"/>
No ----- <input type="checkbox"/>
Comment if you wish.....
60. What would have made you feel better cared for and safer in care?
Please comment here
61. Are you happy where you live now?
1 Yes ----- <input type="checkbox"/>
2 ----- <input type="checkbox"/>
3 ----- <input type="checkbox"/>
4 ----- <input type="checkbox"/>
5 No ----- <input type="checkbox"/>
About you and your Social worker:
62. Did you have a Social Worker whilst in care in last placement?
Yes all of the time ----- <input type="checkbox"/>
Some of the time ----- <input type="checkbox"/>
No, not at all ----- <input type="checkbox"/>
Please comment here
63. How many Social Workers did you have whilst in last placement?
Number
Please comment here
64. How many Social Workers have you had whilst you have been in care?
Number
Please comment here
65. How often did you see your Social Worker?
Every week ----- <input type="checkbox"/>
Every 2 weeks ----- <input type="checkbox"/>
Every month ----- <input type="checkbox"/>
Every 3 months ----- <input type="checkbox"/>
Usually a bigger gap than 3 months (How often)
66. Did you see your Social Worker as often as you would have liked?
Yes ----- <input type="checkbox"/>
No ----- <input type="checkbox"/>
Other
Please comment here
67. When you were in your last placement, was your Social worker someone you could talk to?
1 Yes, all of the time ----- <input type="checkbox"/>

2 -----□
3 -----□
4 -----□
5 No, not at all -----□
Please comment here
Your Final Remarks:
68. If you were in charge of all of the services for children in care, what 3 things would you change?
1.....
2.....
3.....
69. Draw a picture if you want that describes your care in last placement. (Provide blank sheet)
70. Please comment on your picture underneath it.
Thank you for filling in this form and sharing your views with me. Please feel free to contact me if you would like to talk through anything that has come up for you during this interview.
71. Social Services are keen to hear the views of young people. Would you be happy for me to contact you again to follow up any of the points you have made?
Yes -----□
No -----□
Please comment if you wish.....

Contact me on:
 Mobile: Provided to prospective participants
 The university: Provided to prospective participants
 Email>kim.bown@port.ac.uk

If as a result of this interview you would like to discuss any thing further, you can contact your social worker or an independent person at C3 (Explain function and purpose of C3 if required)

Appendix 2 Introductory letter and consent form

a) Introductory letter to prospective participants

(Letter 1 sent to young person after leaving placement and prior to interview)

Presented on University of Portsmouth headed note paper

Dear (name of young person)

Re. Research on young people's views of their care:

My name is Kim Bown, I work at the University of Portsmouth. I am a trained social worker and researcher. I am doing some research aimed at getting young people's views of being in care. I will be asking young people some questions about their care when in their last placement. I am doing the research in collaboration with (name of Case Study Local Authority). Social Services feel strongly that they want to know your views of being in care. Your comments will help them improve things for young people who are still in care.

Things you need to know about the research:

- It's entirely up to you whether you participate in the research – it's voluntary;
- We will arrange a time and place to meet that suit us both. I will normally visit young people where they are now living but we can discuss this.
- I will ask you some questions. I will explain anything you don't understand;
- You are free to refuse to answer any question;
- You are free to withdraw at any time;
- You don't have to write anything;
- I would like to tape the interview to make sure I don't lose any important bits of information. You are free to say you no to this if you prefer;
- Your answers will be kept strictly confidential and will be available only to members of the research team;

- I will pass on any information if I think you or someone else is at risk or if the law has been broken;
- I may use bits of what you say in my final report but I will not mention your name or include anything that identifies you.
- I will write a report at the end of the research for Social Services and a report for young people who have taken part in the research.

What do you have to do now?

Please contact me and let me know if you are willing to be involved. Just ask me if you have any other questions.

You can email, phone or text:

Telephone at the University: Provided to prospective participants

Mobile: Provided to prospective participants

Email: Provided to prospective participants

My address is on the letter heading.

Please feel free to discuss this letter with your social worker, carer or any one else.

I hope you agree to take part. We value your views and think young people's views are not always heard. This is a chance to make sure your views are heard!

Look forward to hearing from you.

Best wishes,

Yours sincerely

Kim Bown (Mr)

Senior Lecturer in Social Work

b) Research participants consent form

Presented on University of Portsmouth headed note paper

To be read out by the researcher to participants before the beginning of the interview.
(One copy of the form to be left with the respondent; one copy to be signed by the respondent and kept by the researcher)

My name is Kim Bown and I work at the University of Portsmouth. I am doing some research aimed at getting young people's views of being in care. I will be asking young people questions about their care whilst in their last placement. I have already given you a sheet, which gives more information about the research. I am doing the research with (name of case study local authority).

Thank you for agreeing to take part in the Project. Before we start I would like to emphasise that:

- It's entirely up to you whether you participate in the Project – it's voluntary;
- You are free to refuse to answer any question;
- You are free to withdraw at any time;
- Your answers will be kept strictly confidential and will be available only to members of the research team. I will pass on any information you give me if I think you are at risk, someone else is at risk or the law has been broken;
- I may use bits of what you say in my final report but I will not mention your name or include anything that identifies you.

Please sign this form to show that I have read the contents to you.

.....(Signed)
.....(Print name)
..... Date

Please send me a report on the results of the Project.

Yes No

Address for those requesting a research report:

.....
.....
.....

Please contact me if you wish at:

University of Portsmouth
St Georges Building
141 High Street
Portsmouth
PO1 2HY

Telephone: Provided to prospective participants

Mobile: Provided to prospective participants

Email: Provided to prospective participants

Kim Bown (Mr)

Senior Lecturer in Social Work

c) Letter sent to participants after research interview

Dear (Participants name)

Re Research on young people's views of their care:

Thanks very much for sparing the time to help me with my research. You came up with some thoughtful ideas that should help Social Services to improve things for young people in their care. I will provide a copy of the findings of the research to young people who have requested it. It is likely to be around June as the research is due to last for a year.

Please feel free to contact me if you would like to talk through anything that has come up for you during this interview on:

Email: Address provided to participants.

Telephone: Number at the University provided to participants.

Mobile: Number provided to participants.

The University: My address is on the letter heading.

As I explained at the interview, if you would like to discuss any thing with someone else, feel free to contact your family, friend, Social Worker or any one else you wish. If you want to talk to an independent person you can contact C3. C3 is a confidential service for young people and independent from Social Services. You can contact them on (number provided).

Again, thanks for taking part in the research.

Good luck for the future.

Best wishes

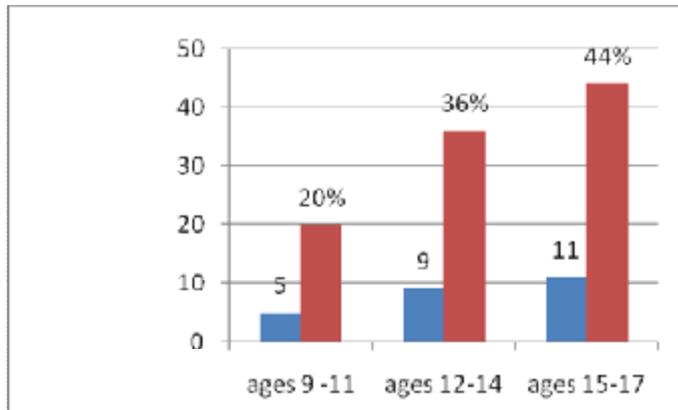
Yours sincerely

Kim Bown (Mr)

Senior Lecturer in Social work

Appendix 3 Profile of participants by age

Profile of participants by age



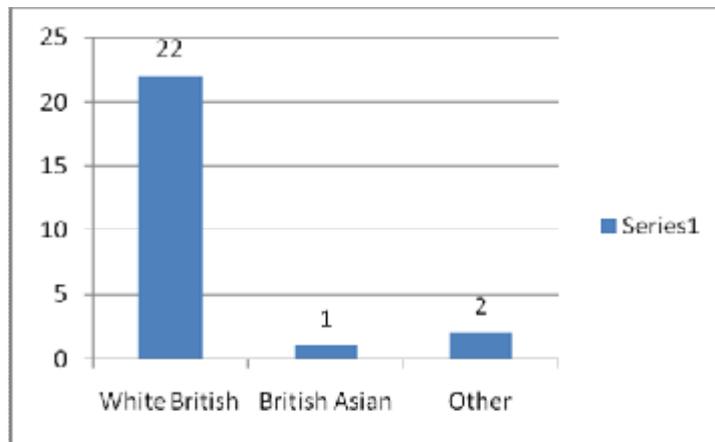
Appendix 4 Profile of participants by gender

Profile of participants by gender

Gender	Frequency	Per cent
Male	15	60
Female	10	40
Total	25	100

Appendix 5 Profile of participants by ethnicity

Profile of participants by ethnicity



Appendix 6 Duration of previous placement

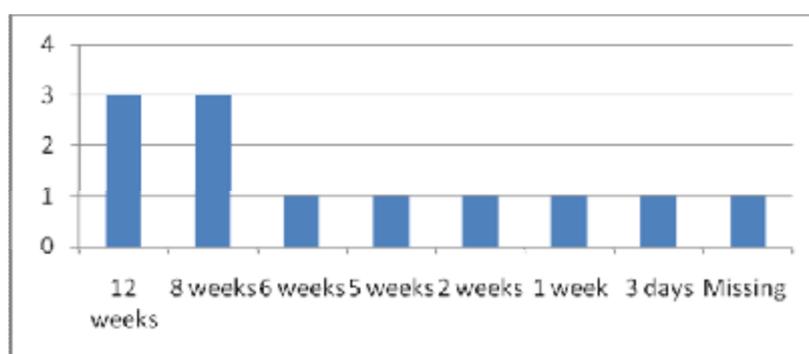
Table 1 Duration of previous placement

Length of time spent previous placement?	Frequency	Per cent
Less than 6 months	13	52
Between 6 months and 2 years	9	36
More than 2 years but less than 5 years	2	8
5 years or more	1	4
Total	25	100

Table 2 Duration of previous placement: less than 6 months

Length of time in previous placement less than 6 months	Frequency	Per cent
24 weeks	1	4
12 weeks	3	12
8 weeks	3	12
6 weeks	1	4
5 weeks	1	4
2 weeks	1	8
1 week	1	4
3 days	1	4
Missing	1	4
Total	13	52

Table 3 Duration of previous placement: less than 6 months

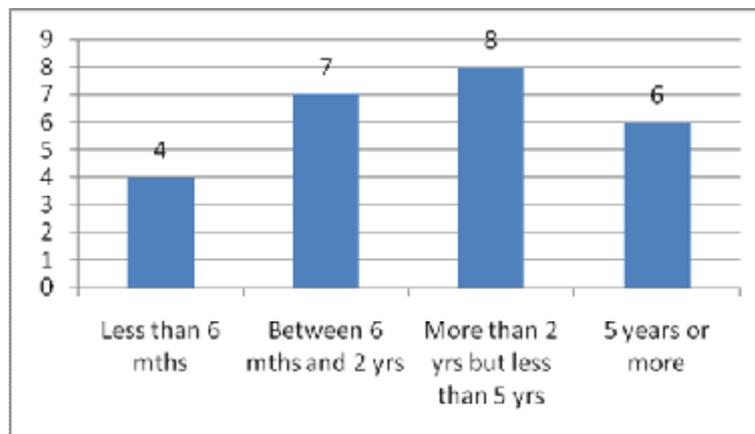


Appendix 7 Overall length of time participants had been looked after

Table 1 Overall length of time looked after

Overall length of time looked after	Frequency	Per cent
Less than 6 months	4	16
Between 6 months and 2 years	7	28
More than 2 years but less than 5 years	8	32
5 years or more	6	24
Total	25	100

Table 2 Overall length of time participants had been looked after



Appendix 8 Knowledge of reasons for being looked after

Knowledge of reasons for being looked after

Participants knowledge of the reasons for being in looked after	Frequency	Percent
Yes	21	84
No	3	12
Total	24	96
Question not answered	1	4
Total	25	100

Appendix 9 Perceptions of entry to placement

Table 1 'Other' terms selected by participants

'Other'	Frequency
embarrassed	1
upset	1
angry	1
unsettled	1
worried	1
a bit down	1
uncomfortable	1
shaky	1

Table 2 Perceptions of entry to placement, cross-referenced by placement frequency

Options	Total number of placements			
	Just one	Between 2 and 5	Between 6 and 10	11 or more
"Relieved"	0	3	0	0
"Scared"	1	4	2	0
"Great"	1	1	1	1
"Confused"	0	4	0	1
"OK"	2	4	0	1
"Other"	0	4	2	0

Appendix 10 Evaluation of general and specific levels of planning

Table 1 Evaluation of general level planning

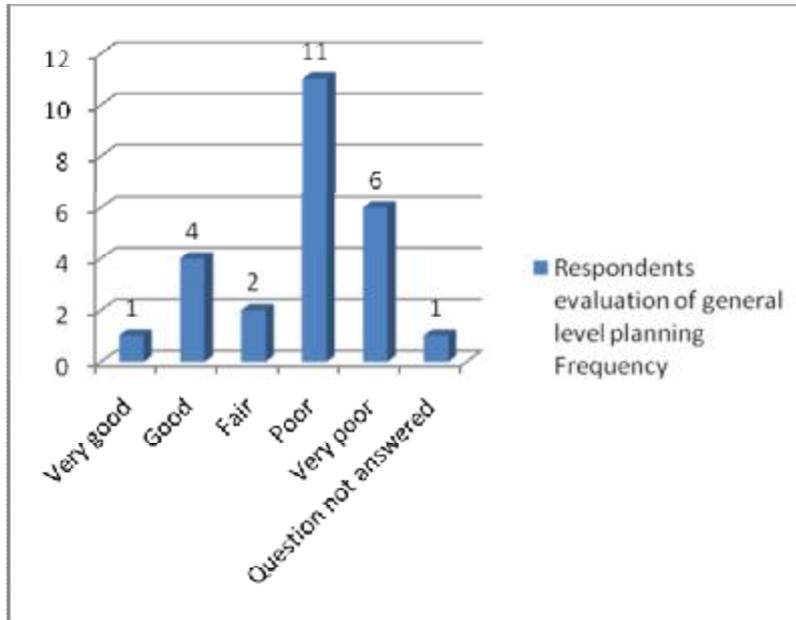


Table 2 Were specialist plans in place?

Were specialist plans in place?	Frequency	Percent
Personal Education Plan		
Yes	9	36
No	16	64
Care Plan		
Yes	10	40
No	15	60
A plan to ensure that your health was looked after?		
Yes	9	36
No	16	64

Appendix 11 Classification of current and previous placement

Table 1 Classification of previous placement

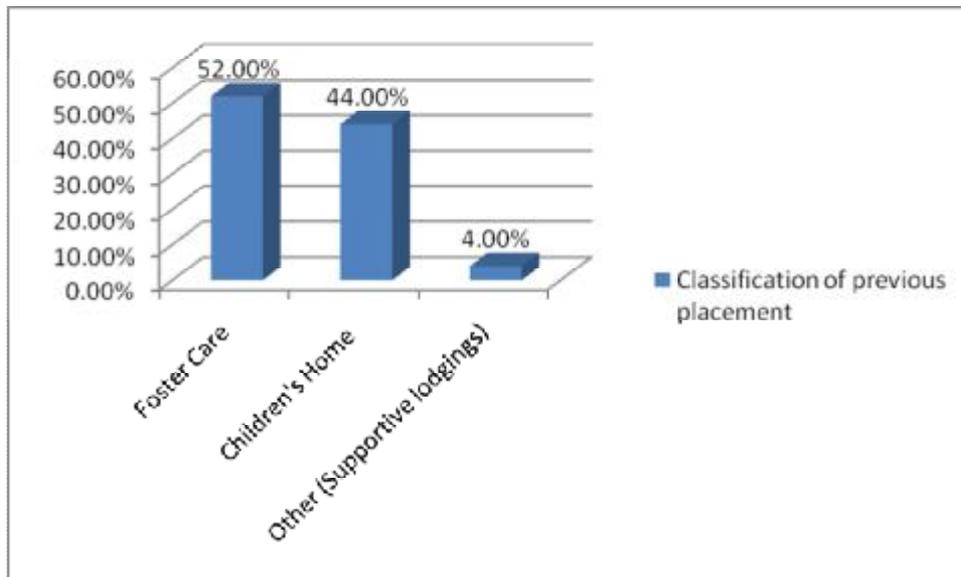
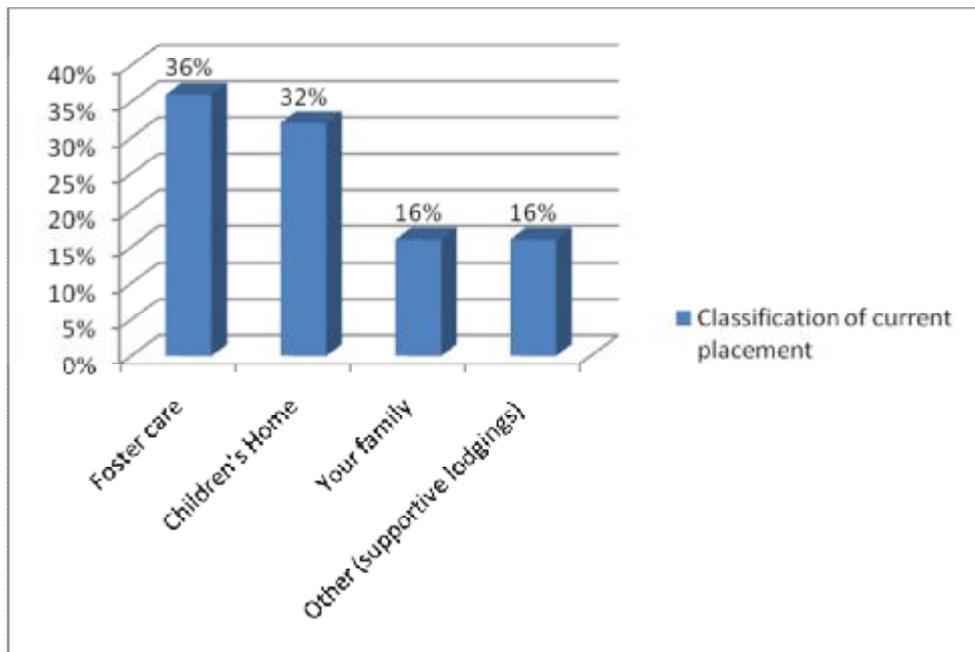
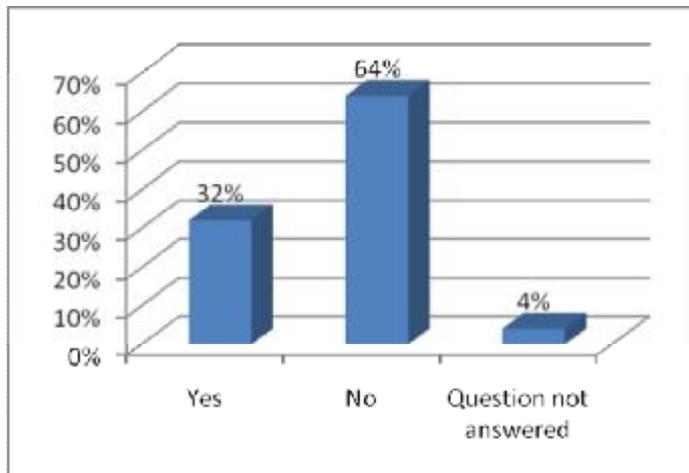


Table 2 Classification of current placement



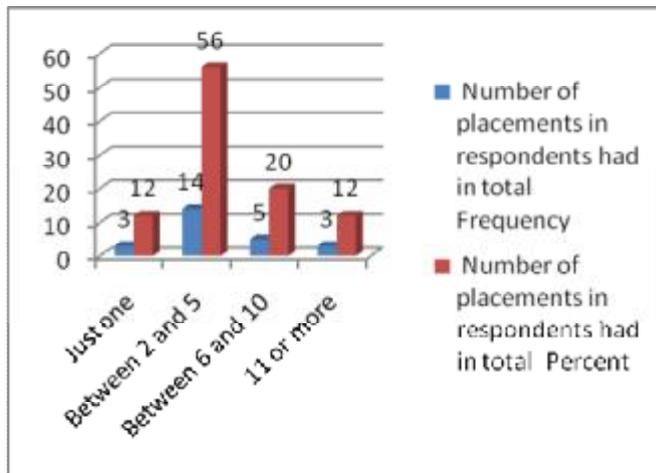
Appendix 12 Participants' evaluation of their 'corporate parent'

Did Participants generally get a good service from CSD?



Appendix 13 Overall placement frequency

Overall placement frequency



Appendix 14 The relationship between procedural facets of the looked after system and perceptions of safety and well being

Table 1 The relationship between procedural facets of the looked after system and perceptions of safety

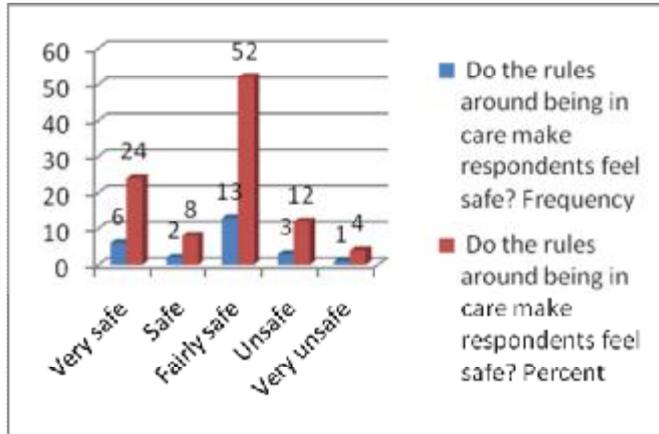
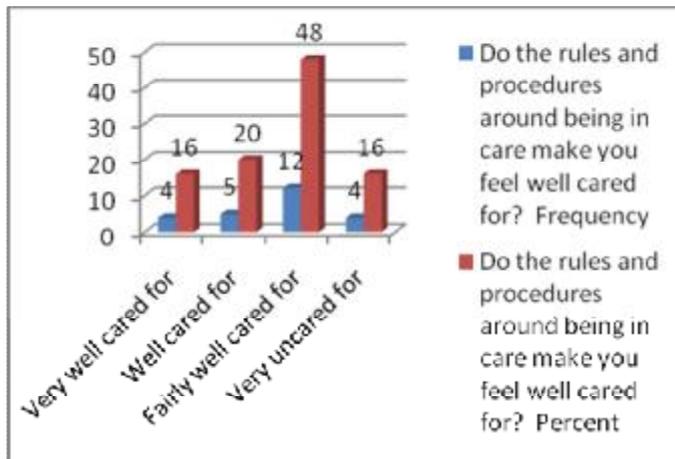
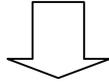


Table 2 The relationship between procedural facets of the looked after system and perceptions of feeling well cared for

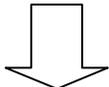


Appendix 15 Key theoretical stages of the research

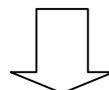
1. Construct a preliminary model separating concepts of safety and well being



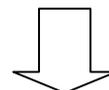
2. Analyze social policy and key findings from literature and research



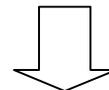
3. Undertake the research field work and analyse key findings



4. Dialectic between the preliminary safety and wellbeing model and the overall findings from this research study



5. Formulate safeguarding and wellbeing model for LAYP



6. Contribute to safeguarding policy and practice for LAYP

Appendix 16 Participants' evaluation of their safety in their previous placement

Table 1 Participants' evaluation of their safety in their previous placement?

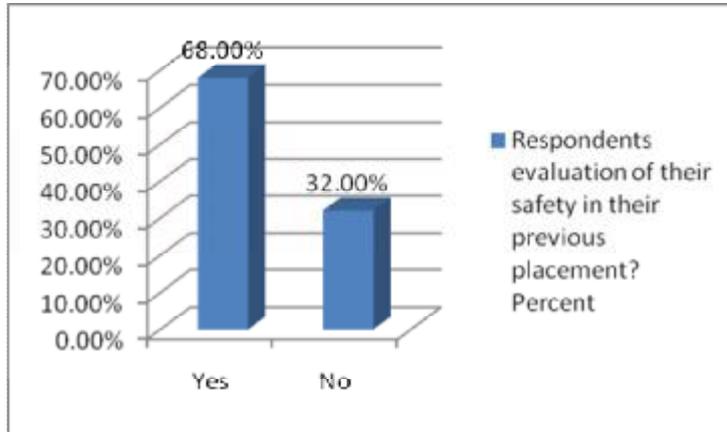


Table 2 Participants' evaluation of their safety in their previous placement applying multiple indicators

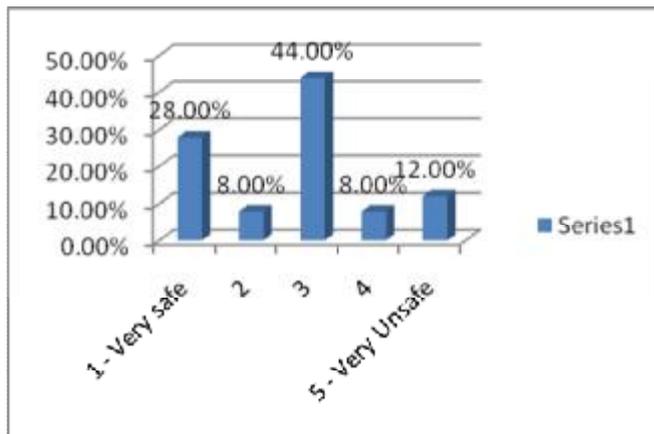


Table 3 Participants' evaluation of their safety in their previous placement cross-referenced by age cohort and placement classification

Ages	Participants' evaluation of their safety in their previous placement?				
	Yes-felt safe			No-did not feel safe	
	Previous placement?			Previous placement?	
	Foster care	Children's Home	Other	Foster care	Children's Home
9 -11	2	1	0	2	0
12-14	3	4	0	0	2
15-17	4	2	1	2	2

Table 4 Participants' evaluation of safety against the four categories of specific forms of harm applying multiple indicators

Perception of safety from harm	Physical harm		Emotional harm		Sexual harm		Neglect	
	n	%	n	%	n	%	n	%
1-Very safe	7	28.00%	9	36.00%	20	80.00%	11	44.00%
2	4	16.00%	2	8.00%	1	4.00%	4	16.00%
3	7	16.00%	10	40.00%	2	8.00%	6	24.00%
4	7	28.00%	1	4.00%	2	8.00%	2	8.00%
5-Very unsafe	0	0	3	12.00%	0	0	2	8.00%
Total	25	100%	25	100%	25	100%	25	100%

Table 5 Participants' evaluation of safety from physical harm cross-referenced by age cohort

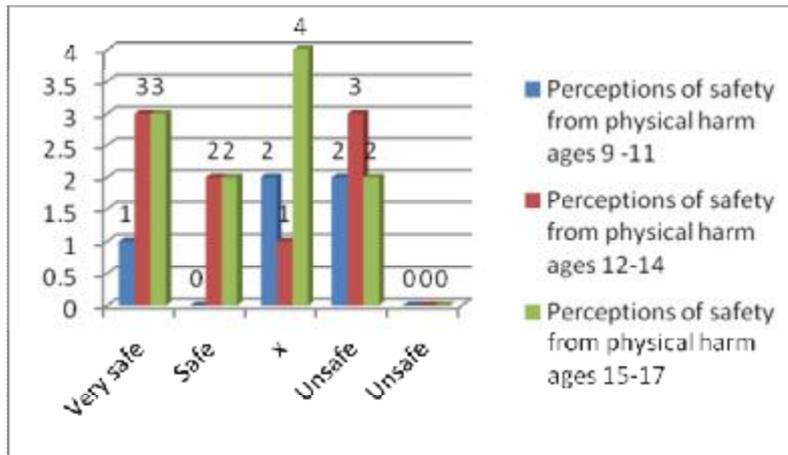


Table 6 Evaluation of safety from emotional harm cross-referenced by gender

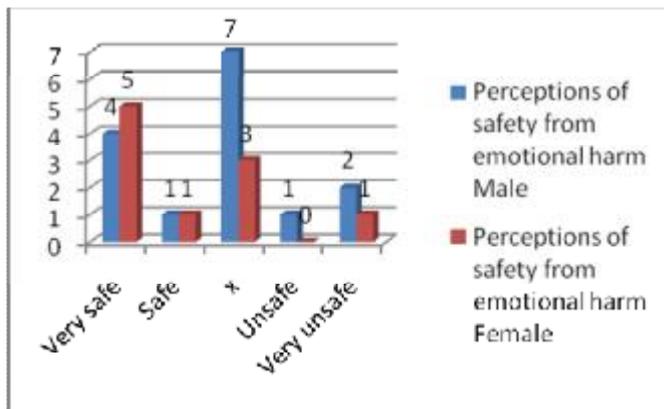


Table 7 Evaluation of safety from sexual harm cross-referenced with gender

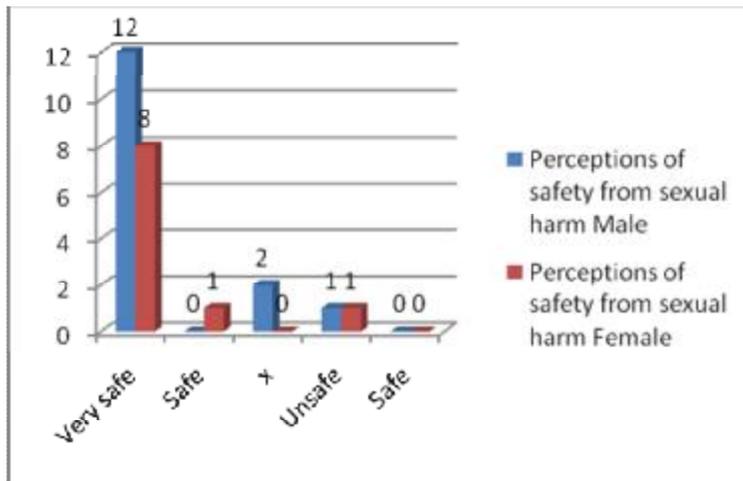
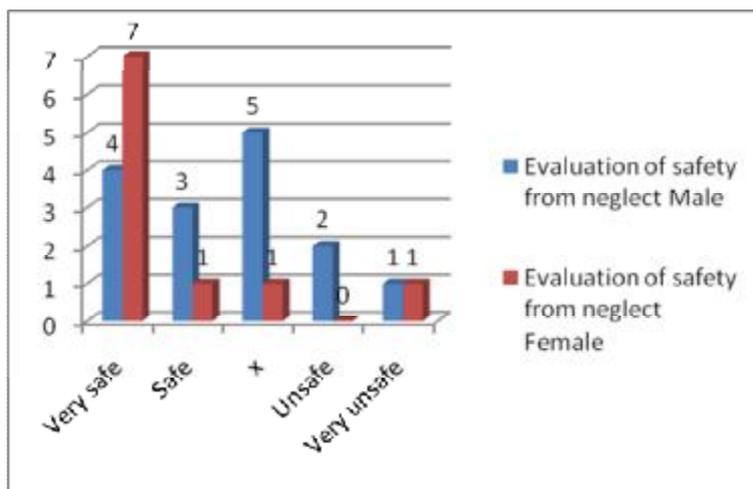


Table 8 Evaluation of safety from neglect cross-referenced with gender



Appendix 17 Evaluation of safety from bullying

Table 1 Perceptions of bullying cross-referenced by age

Participant's evaluation of their experience of being bullied in their previous placement?	Age group of participant		
	ages 9 -11	ages 12-14	ages 15-17
Experience of being bullied	4	3	4
No experience of being bullied	1	6	7

Table 2 Evaluation of bullying cross-referenced by age cohort 9 -11 and placement classification

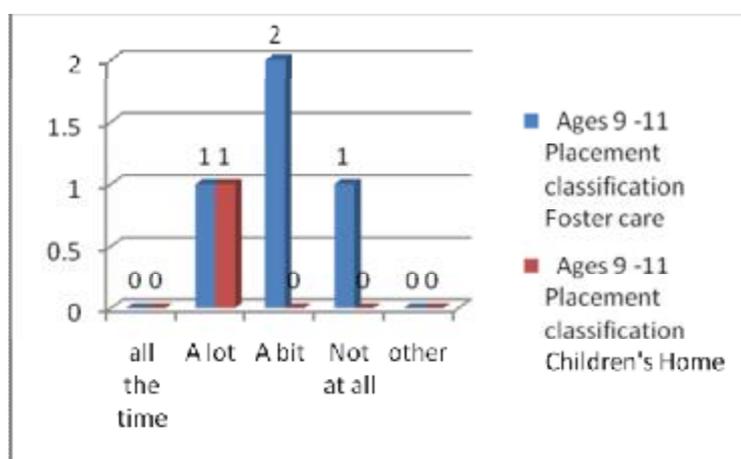


Table 3 Evaluation of bullying cross-referenced by age cohort 12-14 and placement classification

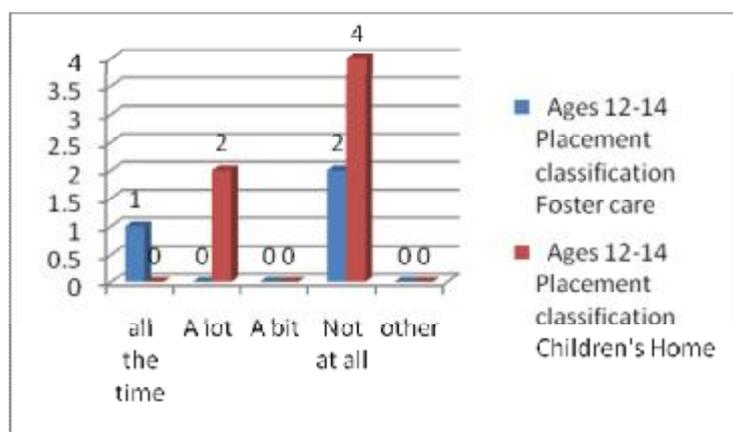
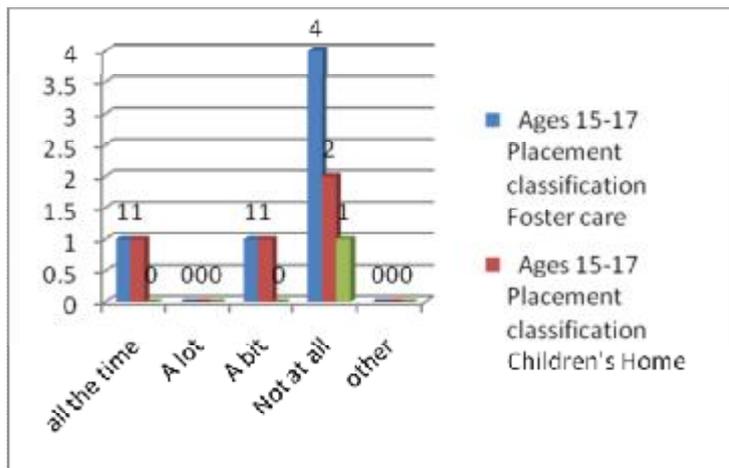


Table 4 Evaluation of bullying cross-referenced by age cohort ages 15-17 and placement classification



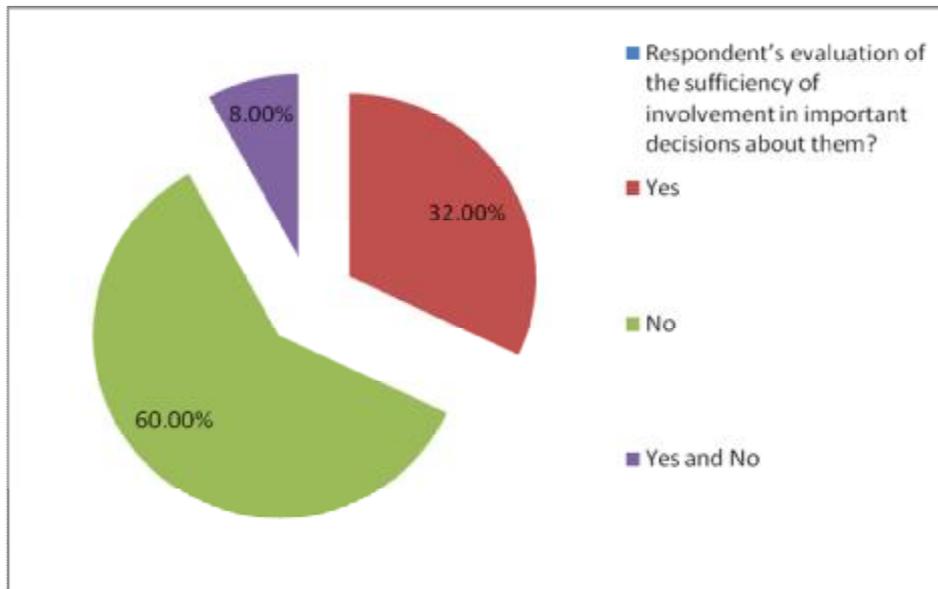
Appendix 18 Participants' evaluation of the effectiveness of being listened to

Participants' evaluation of the effectiveness of being listened to in their previous placement



Appendix 19 Participants' evaluation of the sufficiency of involvement in important decisions about them

Participants' evaluation of the sufficiency of involvement in important decisions about them



Appendix 20 Participants' evaluation of choice

Table 1 Choice exercised over last placement – foster care

Participants' evaluation of the choice they exercised when moving to previous placement?	Foster care					
	Male			Female		
	ages 9-11	ages 12-14	ages 15-17	ages 9-11	ages 12-14	ages 15-17
Yes	1	0	0	0	0	3
No	3	1	2	0	2	1

Table 2 Choice exercised over last placement – children's home

Participants' evaluation of the choice they exercised when moving to previous placement?	Children's Home					
	Male			Female		
	ages 9-11	ages 12-14	ages 15-17	ages 9-11	ages 12-14	ages 15-17
Yes	0	0	0	0	0	2
No	1	5	1	0	1	1

Appendix 21 Accessing help

Table 1 If Participants were worried or unhappy about something would they have known what to do?

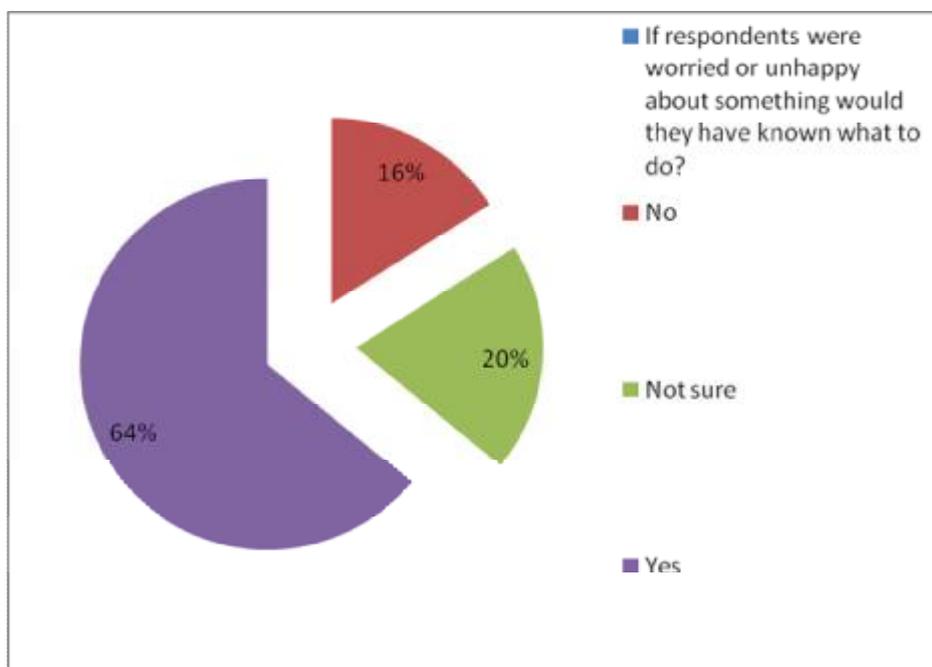
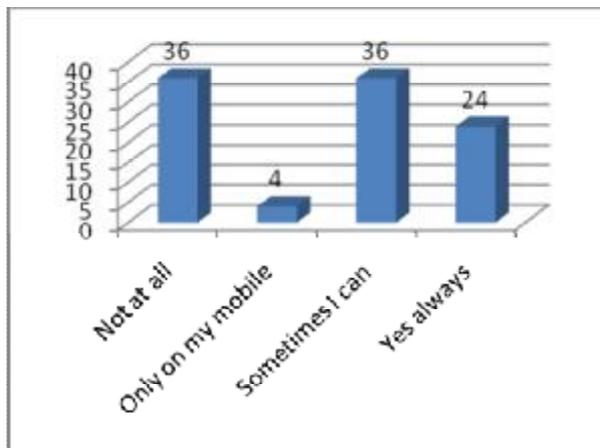


Table 2 If Participants were worried or unhappy about something would they have known what to do? Cross-referenced with age and placement classification

Placement classification	If Participants were worried or unhappy about something would they have known what to do?								
	No			Not sure			Yes		
	Age group of participant			Age group of participant			Age group of participant		
	9 -11	12-14	15-17	9-11	12-14	15-17	9 -11	12-14	15-17
Foster care	1	0	1	1	0	2	2	3	3
Children's Home	0	1	1	0	1	1	1	4	2
Other	0	0	0	0	0	0	0	0	1

Table 3 Participants' evaluation of their access to a telephone in private if they had been worried or unhappy about something in their previous placement?



Appendix 22 Knowledge and use of complaints procedures

Table 1 Participants' general knowledge of how to make a complaint?

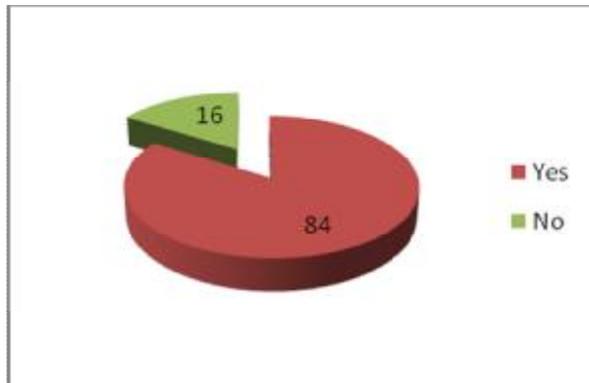


Table 2 Participants' specific knowledge of the Children's Services Department (Formerly SSD) complaints procedure?

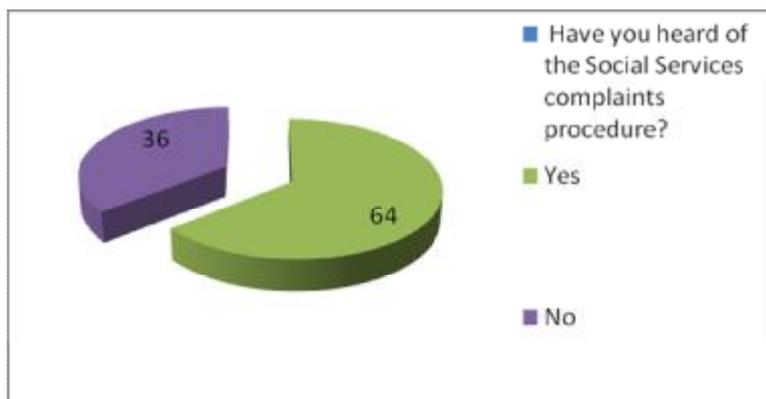
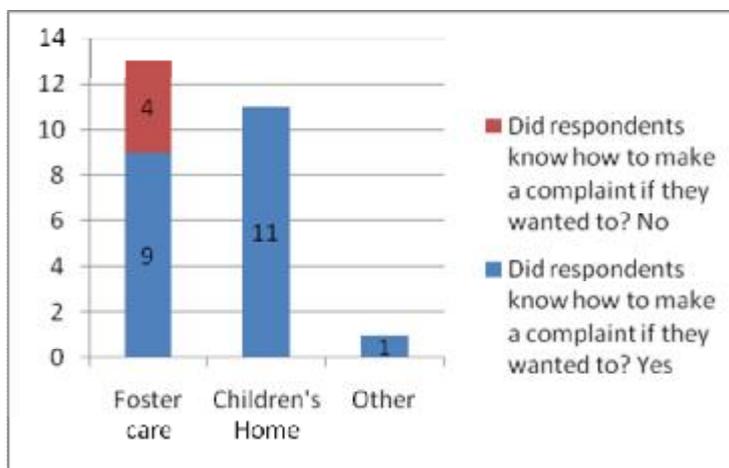


Table 3 Participants' knowledge of how to make a complaint cross-referenced by placement classification



Appendix 23 A typology for measuring participation

A typology developed in the research for the measurement of the effectiveness of the participation of LACYP in decision making and its impact on their safety and well being.

The typology examines the interrelationship between participation, outcomes, power, engagement, safety and well being.

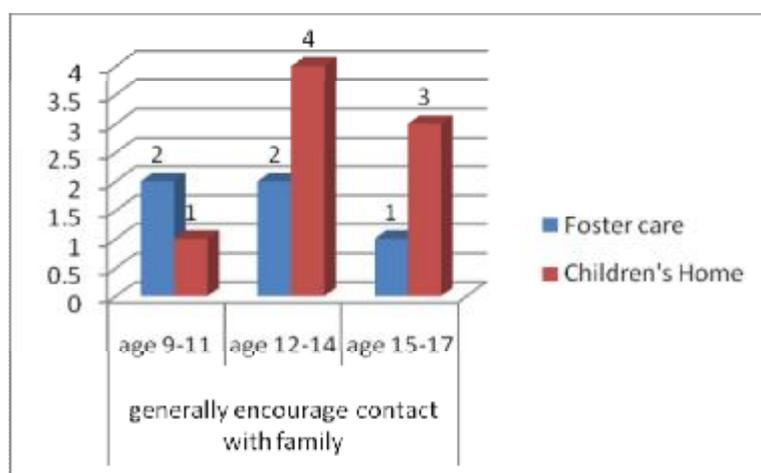
Degree of participation and relationship with outcomes	Voice or exit?	Impact on safety and wellbeing
Stage 5 LACYP achieve voice-influence and bargaining power. They feel fully involved in decision making processes. A creative dialectic occurs between adults and LACYP. Outcomes reflect and develop their contribution.	Exit 1234 <u>5</u> Voice	Low 1234 <u>5</u> High
Stage 4 LACYP are consistently involved in decision making processes, feel listened to, make decisions in partnership with adults and see outcomes that reflect their contribution.	Exit 123 <u>4</u> 5 Voice	Low 123 <u>4</u> 5 High
Stage 3 LACYP are generally involved in decision making processes, generally feel listened to and generally feel they have some impact on outcomes.	Exit 12 <u>3</u> 45 Voice	Low 12 <u>3</u> 45 High
Stage 2 LACYP have little involvement in decision making processes, sometimes feel listened and see little evidence that they have any impact on outcomes.	Exit 1 <u>2</u> 345 Voice	Low 1 <u>2</u> 345 High
Stage 1 LACYP do not feel involved in decision making processes and do not feel listened to. They disengage and disconnect.	Exit <u>1</u> 2345 Voice	Low <u>1</u> 2345 High

Appendix 24 Relationships with family

Table 1 Participants' evaluation of encouragement to keep in touch with family cross-referenced with age cohort and placement classification

Placement type	Participants evaluation of encouragement to keep in touch with family								
	Generally encourage contact with friends			Generally discourage			Neither encourage or discourage		
	Age group of participant			Age group of participant			Age group of participant		
	9 -11	12-14	15-17	9 -11	12-14	15-17	9 -11	12-14	15-17
Foster care	2	2	1	1	0	1	1	1	4
Children's Home	1	4	3	0	1	1	0	1	0
Secure Unit	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	1

Table 2 Participants who felt generally encouraged to keep contact with family cross-referenced by age cohort and placement classification



Appendix 25 Relationships with friends

Table 1 Did Participants keep in touch with their friends as much as they would have liked?

Did Participants keep in touch with their friends as much as they would have liked?	Frequency	Percent
Yes about as much as I liked	12	48
No I would like to have seen them more often	13	52
Total	25	100

Table 2 Participants' evaluation of the level of encouragement from carers to keep in touch with friends cross-referenced by age cohort and placement classification

Placement classification	Participants evaluation of the level of encouragement from carers to keep in touch with friends								
	Generally encourage contact with friends			Generally discourage contact with friends			Neither encourage or discourage		
	Age group of participant			Age group of participant			Age group of participant		
	9 -11	12-14	15-17	9 -11	12-14	15-17	9 -11	12-14	15-17
Foster care	0	1, 4%	2, 8%	3, 12%	1, 4%	1, 4%	1, 4%	1, 4%	3, 12%
Children's Home	0	0	2, 8%	1, 4%	4, 16%	0, 4%	0	2, 8%	2, 8%
Other	0	0	0	0	0	1, 4%	0	0	0
Totals	0	1, 4%	4, 6%	4, 6%	5, 20%	2, 8%	1, 4%	3, 12%	5, 20%

Appendix 26 Relationships with social workers

Table 1 Did participants have an allocated social worker whilst in their last placement?

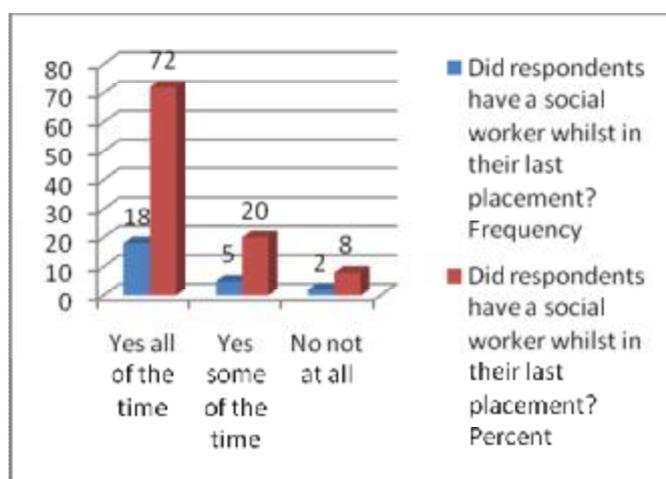


Table 3 Frequency of participants contact with their social worker

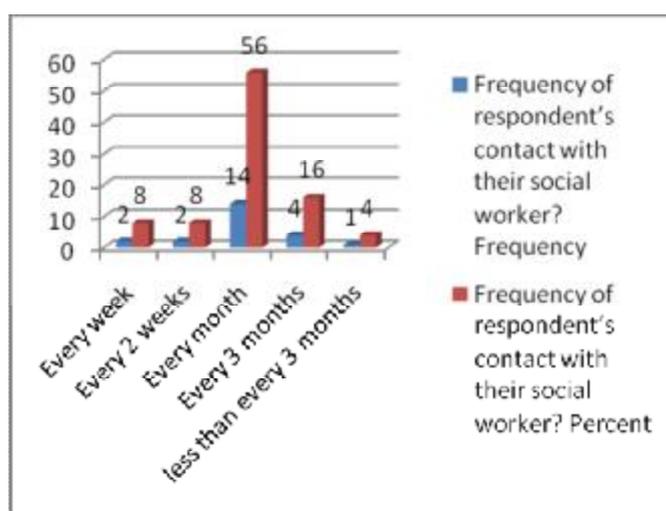
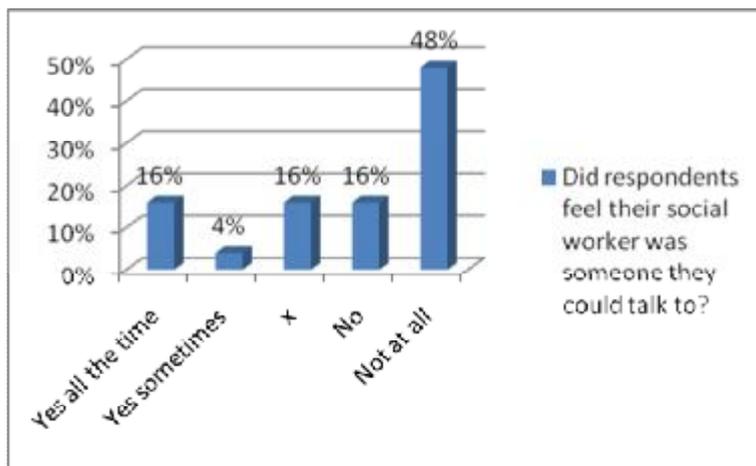


Table 4 Did participants see their social worker as often as they would have liked?

Did participants see their social worker as often as they would have liked?	Frequency	Percent
Yes	9	36
No	16	64
Total	25	100

Table 5 Was their social worker someone they could talk to?



Appendix 27 Relationships with carers

Table 1 Did participants feel they were treated fairly?

Did participants feel they were treated fairly	Frequency	Percent
Yes	19	76
No	4	16
other	2	8
Total	25	100

Table 2 Participants' general evaluation of their treatment by carers in their previous placement

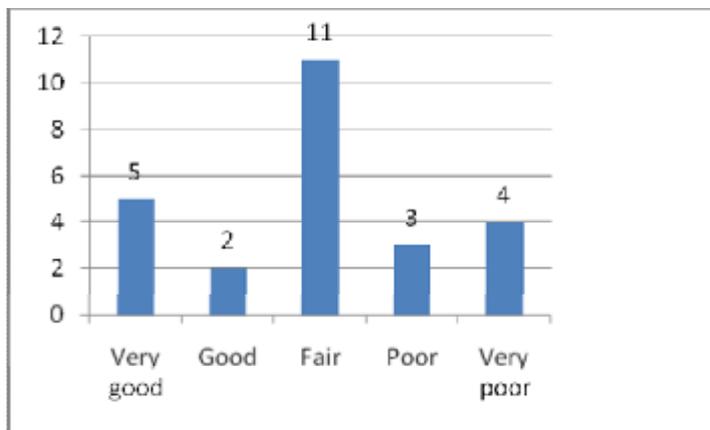
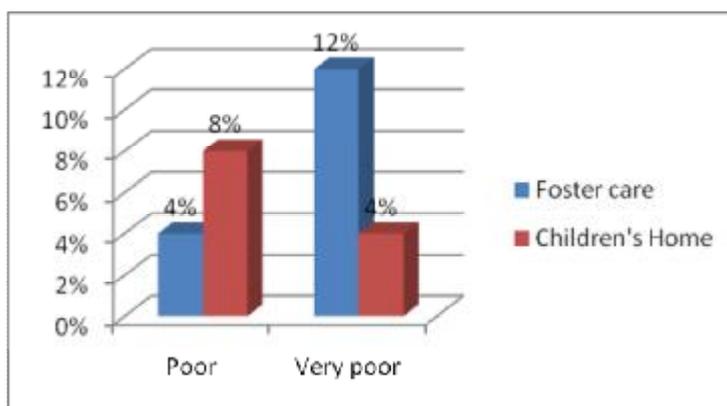


Table 3 Participants' evaluations of 'poor' and 'very poor' treatment by carers cross-referenced by placement classification



Appendix 28 Damaging behaviours and risks

Table 1 Participants' evaluation of their risk of getting into trouble with the police whilst in their previous placement?

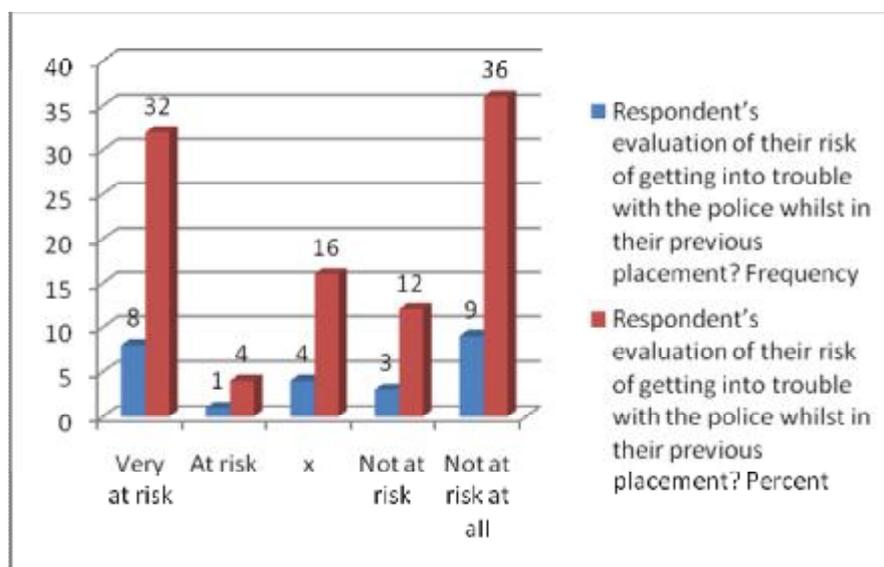


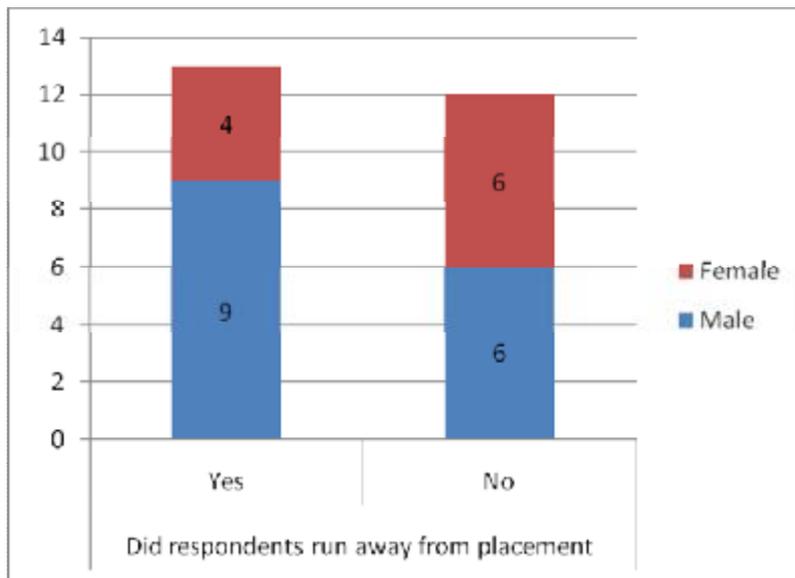
Table 2 Participants' reports of going missing

Did participants go missing from their previous placement?	Frequency	Percent
Yes	13	52%
No	12	48%
Total	25	100%

Table 3 Frequency of going missing

Frequency of going missing	Frequency	Percent
1	3	12%
2	2	8%
3	1	4%
4	1	4%
5	1	4%
14	1	4%
100	1	4%

Table 4 Participants' reports of going missing from their previous placement cross-referenced by gender



Appendix 29 Evaluation of happiness

Table 1 Evaluation of happiness in previous placement

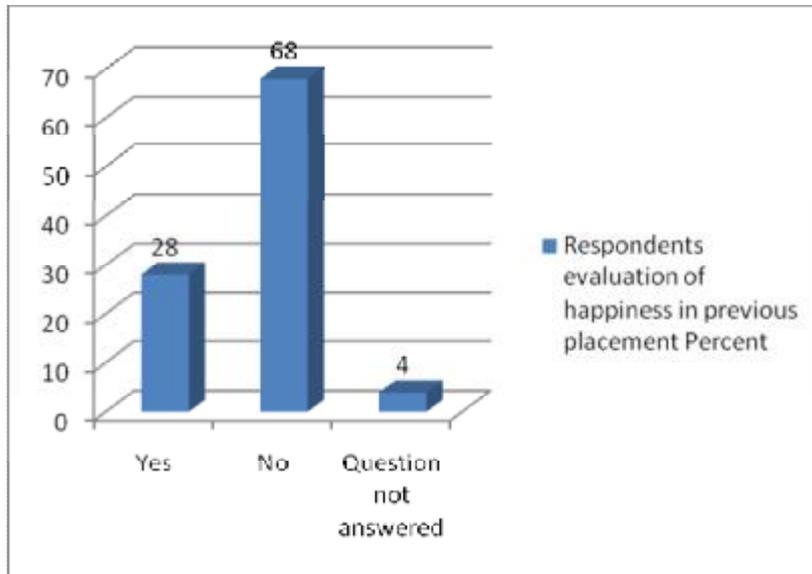
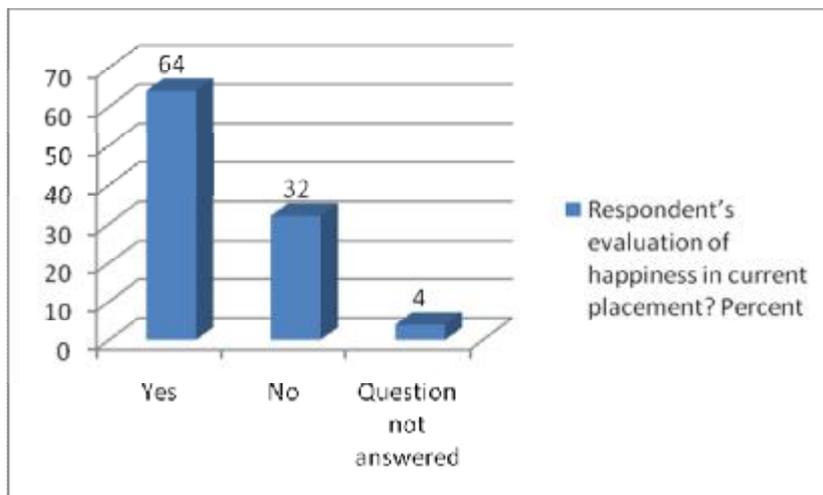


Table 2 Did participants want to leave their last placement?

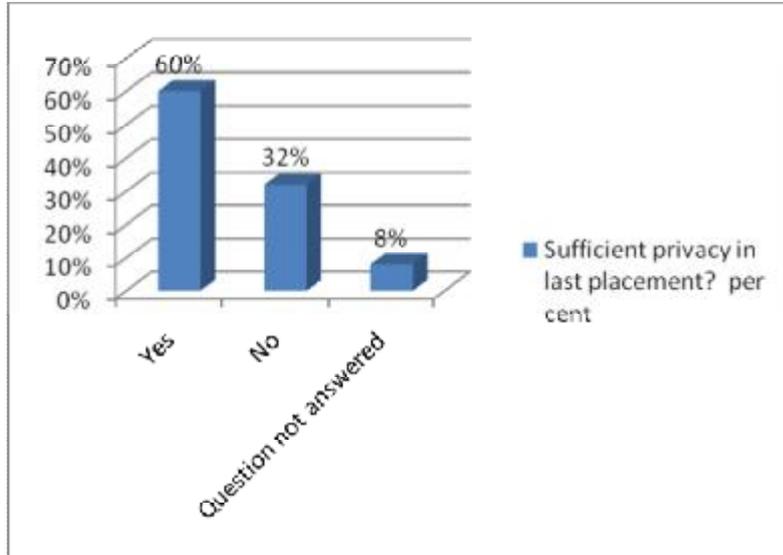
Did participants want to leave their last placement?	Frequency	Percent
Yes	18	72
No	5	20
Total	23	92
Yes and No	2	8

Table 3 Participants' evaluation of happiness in current placement?



Appendix 30 Evaluation of privacy

Participants' evaluation of sufficiency of privacy in their previous placement



Appendix 31 Changes identified by participants to improve safety and wellbeing:

Table 1 Changes identified by participants categorised by domains

1 INDIVIDUAL DOMAIN CHANGES:	
Key categories of change	Key changes
(1) Relationships	<ul style="list-style-type: none"> I. Improve relationships with family II. Improve relationships with carers who really care III. Improve relationships with social workers IV. Improve relationships with friends
(2) Leisure	<ul style="list-style-type: none"> I. More pocket money II. More trips III. More freedom to go out on own IV. More flexible bed time V. More leisure equipment in placement
(3) Protection	<ul style="list-style-type: none"> I. Other LAYP should stop bullying II. Other LAYP should stop stealing III. Other LAYP should stop damaging other LAYP's property
(3) Participation and inclusion	<ul style="list-style-type: none"> I. More choice over placement II. Listened to more III. More action and results from decisions and promises
2 PROGRAMME DOMAIN CHANGES:	
Key categories of change	Key changes
(1) Protection	Adults to stop LAYP being bullied
(1) Foster homes	Improve facilities in foster homes, bigger homes, nicer areas
(1) Placements	<ul style="list-style-type: none"> I. Separate age groups of LAYP in placement II. Recruit more foster carers in order to create increased placement choice III. Recruit better quality foster carers
(1) Relationships	<ul style="list-style-type: none"> I. Relationships with family should be encouraged II. Relationships with friends should be encouraged III. Relationships with social workers should be developed

3 SYSTEM DOMAIN CHANGES:	
Key categories of change	Key changes
(1) Policy and law	1. Keep children with their Mums and Dads 1. Abolish the care system 1. Abolish care orders 1. Be allowed to be independent from care at 16 years
(2) Social Workers	1. Abolish social workers 1. Get rid of poor social workers
(3) Placements	Abolish children's homes

Appendix 32 Participants' perceptions of who looked out for them

Table 1 Participants' perceptions of who looked out for their safety

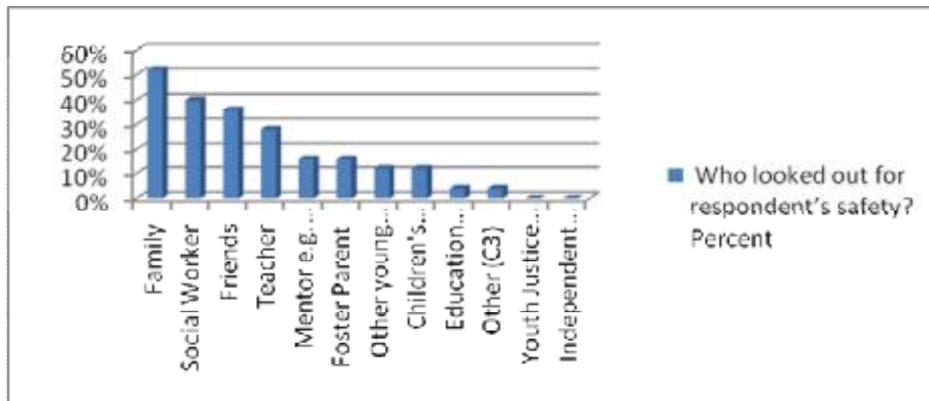
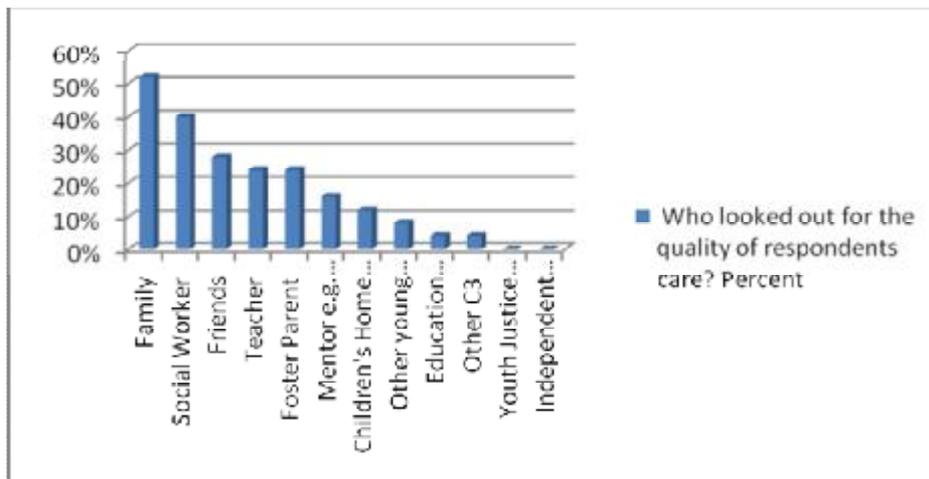


Table 2 Participants' perceptions of who looked out the quality of their care



Appendix 33 Relationship between domains of the preliminary Safety and Wellbeing Framework and components of the Safeguarding from Harm and Promotion of Wellbeing Model

