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## **Introduction**

Family is a central concept in child welfare policy and practice. This includes attempts to support children and young people to remain in the care of their families, reunifying children and families following out-of-home placement when possible and facilitating the vast majority of alternative care arrangements through foster family homes and homes with extended family members (Font and Gershoff 2020). Likewise, a key concern of child welfare practice is to ensure a ‘legally permanent, nurturing family for every child and youth’ (Font and Gershoff 2020, p. 7) whether achieved via birth families, foster care or adoption.

In acknowledgment of the difficult, disrupted and /or altered experiences of family for young people with out-of-home care experience (hereto referred as care-experienced), this paper explores how young people understand and conceive of family. The paper will firstly summarise key developments in the sociology of the family and then provide an overview of what is known specifically in relation to care-experienced children and young people.

## **Developing conceptualisations of family**

Historically, the study of family was conceptually framed by those within the functional tradition, for example, Cheal (2002) who focussed on the roles fulfilled by members. Functionalists saw blood and marital ties as creating stability, with family being important for socialising children, as units of production and caring for the elderly. Functionalism highlighted the benefits and functional aspects of family, rarely acknowledging that families’ dysfunction and fracture (Kinsbury and Scanzonie, 2009).

The term ‘family’ itself is however contested in sociological discourse. UK policies around family tended to privilege certain types of family, in particular a white, middleclass, nuclear, heteronormative ideal type (Edwards, McCarthy, & Gillies, 2012). Concern about the normative implications of idealising the ‘family’ has led some researchers to argue for a more inclusive concept (Boddy, 2019). Williams (2004), for example, referred to ‘families’ in the

plural, recognising the diversity of living arrangements outside of the nuclear structure, suggesting that families have always been varied and heterogenous. McCarthy (2012) recognises the multiple meanings of 'family' and suggests that no matter their shape and constitution, they are rooted in a sense of belonging, shared memories, and of connected selves. Thus, there has been a move away from functional understandings of family of nuclear structures bound by blood ties or legal bonds.

Morgan (2011) similarly recognised the limitations of traditional notions family structure. Instead of a static concept, Morgan emphasised the *doing* of family and referred to the more dynamic term of 'family practices'. Morgan (1996) uses the metaphor of the kaleidoscope, with the 'emphasis on shifting patterns of relationships' (p. 187). Family practices are by nature unbounded and suggest movement and change, offering an alternative understanding of family as static, bounded by blood ties and legal relationships. Related to this, Smart (2007; 2011) argued for a new conceptual field of personal life:

We know that people relate meaningfully and significantly to one another across distances, in different places and also when there is no pre-given or genetic or even legal bond (2007, p.7).

Smart (2007: 2011) conceptualises family as new connections, new commitments with an element of choice about who one views as family, leading to more fulfilling and more meaningful bonds. Thus, 'choosing' family may signify a new and deeper type of commitment, over and above that afforded to blood and legal ties. New connections and commitments were also highlighted by Brannen and Nilson (2005: 426) who emphasised the importance of this interconnectedness for society more widely:

The interaction and interconnectedness of individuals are what constitutes the social fabric of all social institutions, what constitutes society.

From children's perspectives, Mason and Tipper's (2008) sociological study of how young people create and define kinship, found they were highly creative in their 'reckoning' processes in making sense of their relatedness to others, with symbolic and idealised notions often remaining those 'we live by' (p.443). There was an acceptance of 'proper' genealogical kin, whilst this did not denote closeness. Importantly, children's 'like family relationships' are highly valued forms of kinship. They concluded there is a dearth of studies of children's kinship experiences, with the need for studies of more diverse childhoods. Tasker and Granville's (2011) study of children's views of family in lesbian-led households found children and adults tended to agree as to who was in their family, depicting a core, surrounded by a wider network that included biological and non-biological kin. Backett- Milburn et al. (2008) undertook a study of young people whose parents had substance use difficulties and looked at how children 'got by' without parents to look after them. They posited that 'the need to exercise love and care' was perhaps as important as receiving it (p. 447). Wilson et al.'s (2012: 112) paper on the same study noted how sociologists have often 'flattened' or avoided the 'messiness of love and loss'. They noted the difficulty of finding discourses to explain the transgressions of not maintaining contact with often vulnerable parents and highlighted the tenacity of idealised notions of family closeness and moral obligations.

In summary, developments in the sociology of the family have moved beyond functional or traditional ideals (Morgan, 2011), yet despite expanded conceptions of family, traditional ideals and concepts continue to resonate. As Smart acknowledges 'it is futile to think of banning the terminology of family .....because the associated ideas will not go away, because they resonate with a host of cultural and personal meanings' (Smart 2007;187). In this way, traditional conceptualisations of family often remain the dominant norm (Priest, 2021). This can be troubling for those who do not grow up in 'traditional families', such as care-experienced young people.

## **Family relationships for care-experienced young people**

Developments in the sociology of the family are of relevance for care-experienced young people who are likely to have encountered difficult, disrupted and altered family relationships. For example, many young people who are removed eventually return (at least to some extent) to their birth parents (Sinclair et al., 2005), yet over a quarter of those who return to birth families in the U.S. re-enter out-of-home care (Wulczyn et al., 2020). Similarly, a recent report from the Children's Commissioner in England showed the propensity for young people to experience numerous moves across foster homes (Children's Commissioner, 2022). In this way, broadened concepts of families and family life may be helpful to young people whose experiences do not conform to traditional norms. As argued by Holland and Crowley (2013) 'sociological studies of diverse families have helped combat stigma by demonstrating that children can thrive in a range of circumstances if they have opportunity to form positive relationships with adults and siblings' (p.64). However, the extent to which more flexible definitions resonate or normative ideas remain dominant is an important consideration.

Previous research has provided important insights into how care-experienced young people manage relationships with birth family and others. For example, Goodyer's (2011) qualitative interviews with twenty-two looked after children in the UK (ages 9-17) found that they had six different ways of positioning themselves between birth and foster families. For some children a sense of belonging was felt equally across birth and foster families, others felt wholly or predominantly connected to either their birth or foster family, while the remainder felt a lack of belonging to either. Likewise, Holland and Crowley (2013) highlighted the significance of birth family and their emotional co-presence (even when they were not having direct contact) for young people in out-of-home care, suggesting they may still be present positively or negatively despite their absence. Boddy (2019) too reflected on the continuing significance of

birth family relationships beyond childhood for children looked after with memories being both positive and negative, not necessarily polarised.

When starting new families of their own, Sting and Groinig (2020) noted the significant role that birth parents can play for care-experienced young people. Sting and Groinig suggest that biographical experience and memory are some of the means to connect with family' traditions and practice, being particularly important for identity formation and resilience. Related to this, relationships with key figures may be of significance for health and well-being, as McWey et al. (2010) found that continued contact with birth mothers was marginally associated with lower levels of depression in young people and significantly associated with less externalising behaviours.

Previous research has also highlighted challenges with birth family relationships for care experienced young people. Fargas-Malet and McSherry (2021) noted young people can have complex and contradictory feelings towards birth families, and in a longitudinal study of care leavers aged 15-18 ( $N=21$ ) Driscoll (2019) found that experiences of loss, separation and rejection affected all participants. Likewise in an early study by Biehal and Wade (1996) young people leaving care in England experienced varied relationships with birth family members. While continuing or renewed connections was the experience of some, for others, extended family members and foster carers constituted more problematic relationships.

Looking beyond birth family relationships, Spencer and Pahl (2006) suggest that friendships among care-experienced youth are chosen and there are differing levels of commitment within these friendship type relationships. They describe the way in which friends become 'family like' because of elements of responsibility, continuity and love. However, in their review of the evidence, Roesch-Marsh and Emond's study (2022) noted the rules and cultures of the care system and the use of professional power placed constraints on the making and keeping of friends.

## **Summary**

Whilst previous research has provided important insights into care-experienced young people's relationships with birth family members, understandings and meaning of family as a concept have received little research attention. Gwenzi (2022) pointed out, there is a gap in the research literature in relation to care leavers' understanding of 'family' which extends more widely to the care-experienced population, including those who return to birth families, as well as those who age out of care. By asking young people (aged 18-22) with varied care experiences and outcomes how they conceive of family, we hope to start closing this gap. Key study questions included:

- What do care-experienced young people understand by the concept of family?
- Do care-experienced young people's conceptualisations of family resonate with developments in the sociology of the family?
- What are the implications for policy and practice?

## **Methods**

### **Participants**

Participants included young adults (ages 18-22) from a mid-size Western state in the US who had been enrolled in the Fostering Healthy Futures (FHF) longitudinal study during pre-adolescence. The FHF study has two sub-studies: (1) a randomised controlled trial (RCT) of an intervention for preadolescents in foster care and (2) a longitudinal risk and protective factors study that includes participants in the RCT as well as those who were ineligible for the RCT. The current study is focused on the broader sample; that is, all participants in the risk and protective factors study who completed the young adult interview. The study does not seek to examine the impact of the intervention, as over a fifth of participants in the current study were not enrolled in the RCT (see Taussig et al., 2014, 2022 for additional information on sample characteristics and study design).

Participants were recruited for the baseline interview of the FHF study if they were 9-11 years old and living in any type of out-of-home care. County child welfare agencies provided a list of all eligible children and then letters introducing the study were sent to families, followed by recruitment calls a week later. Participation was voluntary. Over 90% of children and families agreed to participate.

The young adult interview, which is the focus of this study, occurred an average of 9.4 years after the baseline interview. All study participants who were between the ages of 18-22 ( $N=243$ ) during the follow-up study time period were recruited and 215 were interviewed (88.5% retention rate). Of the 28 not interviewed, 13 were unable to be located or recruited, seven declined participation, and eight aged out of the eligibility criteria before they were able to be interviewed. The follow-up interview was held face to face or via the telephone. The “define family” question, which is the subject of this paper, was not administered to eight participants or their responses were unable to be transcribed (due to audio difficulties). Thus, the final sample for this study was 207 participants.

Almost half of the study participants were female (47.9%) and the remainder male. Slightly over half (54.0%) of the participants identified as Latinx/Hispanic, 48.8% as White, 28.8% as American Indian (indigenous US population), and 27.4% as Black/African American (non-exclusive categories). Participants’ mean age in young adulthood was 19.5 years ( $SD = .94$ ). The majority of participants (88.8%) identified as heterosexual/straight in young adulthood. Forty-nine participants (24%) had become parents themselves. It is important to recognize that although 100% of the sample is care experienced, the majority of youth had attained child welfare-defined permanency before turning 18, with only a quarter (26.5%) of the participants reporting that they aged out of care. Based on self-reports in young adulthood about their living experiences while growing up, 87.9% had lived with one or more relatives, 75.8% had lived in



non-relative foster care, 52.6% had lived in congregate or group care, 45.2% had reunified with birth families, and 27.2% had experienced adoption (non-exclusive categories).

## **Procedure**

The current study was approved by the university institutional review board and participants provided informed consent. Participants were typically interviewed in a public place in a private room (e.g., at a library, recreation centre). Those who lived out of the area at follow-up were interviewed by phone. Participants received \$100 for completing the 3-4 hour interview. In the US it is very customary to pay participants for their time, so this was deemed by the human subjects committee to be fair and non-coercive compensation. We do not believe that this impacted the data collected, as participants were told that they could skip any questions and that this would not affect their payment. We understand there are cultural differences in paying participants for their time to participate in studies. The open-ended question used in this study was asked at the end of the interview. The question was read aloud by the interviewer and the response was audiotaped. We wanted to allow personal meanings to be captured by the narratives of young people, as a means to reflect everyday life (Smart, 2007). Thus, the researchers did not prompt or probe after the interview question was posed, allowing for uninterrupted narrative by young people. Being unprompted allows people to identify personal meanings of family, not just social or cultural. Unprompted narrative also gives agency to young people, for example, how much or little to include, and allows for social or personal worlds to be reflected on, as messy and confusing, without clarification or shaping by the researcher. Some gave short, succinct answers, but the longest narrative spans one and half pages. Responses varied in length, ranging from a single sentence (seven words) to more detailed discussion (in excess of 900 words). However, the majority of responses were the length of a short paragraph (around a hundred words). Responses were transcribed and de-identified prior to coding.

## **Measure**

### ***‘Define Family’ Qualitative Question***

A project-designed measure that consisted of 15 open-ended questions sought to gather participants’ thoughts and appraisals of a host of issues, both related to their care experiences as well as other life events. The question that was coded in the current study was, *How do you define family?*

## **Analysis**

Braun and Clark’s (2009) five stage model of qualitative analysis was followed including (i) familiarisation with the data by reading through transcripts, (ii) generating initial codes, (iii) searching for themes, (iv) reviewing themes, and (v) defining and naming themes. As the researchers analysing the data were not from the USA, after the initial reading of transcripts, a US researcher clarified some of the language and terminology with them. Data were indexed and coded by one researcher, a second re-read the data and verified the initial codes. A coding frame was then developed. Two researchers undertook a further reading of the data to refine and identify any additional codes. The analysis of the data enabled meanings of family to be categorised in relation to young people’s circumstances. We considered whether participants returned to birth parents and their parental status in our analysis, in order to explore whether these circumstances impact understandings and meanings of family. In dividing the data in these two ways (a) whether they had become parents (b) whether they had ever returned to live with birth family, the themes were then confirmed.

## **Results**

No differences in themes were observed as a function of parental status or return to birth family. Therefore, the results are given here for the full sample.

### **Unconditional love and acceptance**

Many of the young people talked about family in terms of feelings. Love was the most recurrent feature of young people's responses and was mentioned 81 times and by 61 respondents (30%):

*[What defines family] 'It's love.'*

*'Love...pretty much that's it. Treating people right.'*

The association of love with family, and with 'treating people right' may stand in contrast with experiences of abuse and neglect that young people may have experienced but could also refer more generally to daily interactions and the provision of care. One young person used the word 'cherish' along with the word love, suggesting that what was important, was feeling valued, with an appreciation of their unique individuality:

*'Um, family is people you care about, um, doesn't have to be blood, that love you and respect you and they cherish you and they're there for you. And, no matter what happens, they won't judge you or look down on you'.*

The unconditional aspect of love from family was also present in many other quotes,

*[I] 'define family by people you love unconditionally.'*

*... 'I think family is, is basically, people who would love you no matter what you do. And basically care for you no matter what you do'.*

The suggestion of being there ‘no matter what’ emphasises continuing availability and dependability. The absence of judgement and the enduring nature of care were consistently highlighted as important attributes of family,

*‘People who don't give up on you’.*

*‘Like, with my foster family I consider them like a second family. They were there, they really helped me through, you know, all my struggles. And they never really gave up on me. They didn't really judge me, you know, so, yeah’.*

These young person emphasise the nature and quality of the relationship in definitions of family. The sticking with people through thick and thin, especially when they were struggling was seen as a key constituent of caring and of family,

*‘The people that are there for you regardless. The people that don't disown you, the people that are willing to work with you, the people that struggle with you but are still there for you. Not the people that need everything perfect’.*

*‘It's the people who are there for you. The people who are there for you when you've fallen and you can't get up’.*

In the first quote, the young person highlights the importance of family accepting that they are not perfect, understanding their foibles, and remaining supportive when the going gets tough. Related to this, the second emphasises ‘being there’ even when you have fallen or failed, acknowledging the many difficulties they have to face. Acceptance and dependability may be especially important given the fractured relationships young people experienced in their earlier lives.

### *Caring for and caring about*

The examples above highlight the emotional elements of family. Some young people discussed love and family in terms of the way care was shown and given:

*'Family to me is people you love, not by choice, but just you love them because of what they do for you and because of how they do for you'.*

Not only did people who were family demonstrate care, they did so in a tailored way, thoughtfully and carefully. Thus, it was not only what family do for you and vice versa, but *how* they do it, the quality of that care. This distinction can be seen as between 'caring for and caring about'. We see examples of caring for in a practical sense,

*'Well now, how I define family is people that will do anything for you. Keep food and clothes on your back. That's how I define family'.*

In this quote, the *doing* of family includes reference to more functional aspects of family such as the provision of food and clothing. In addition, the 'doing anything' suggests something beyond this, going the extra mile. In this way, care is not boundaried or conditional, but reflects a depth of relationship that goes beyond necessities. Related to this, others described 'caring about', which emphasises the emotional content of caring, and the feelings it garners in the young person, which is suggested as more reciprocal,

*'I got lucky enough to get [name of foster parents] as my last, last foster parents, and they were like, they were the foster parents you want, the ones that actually care about*

*you, and you can call them mom and dad, and, and their children feel like your siblings, and they really accept you into your house. And, it's not about blood; it's about the who, those people who care about you and the people that you care about'.*

*'But a sense of family is nice to have, like the feeling of it, not just the concept of it, but the feeling of it is important. People making you feel wanted and loved and accepted and people at least trying to care for you and sympathise with you'.*

Both of these quotes discuss family as a feeling, as caring about. While living with foster carers facilitates a family environment for a young person, this does not mean it will necessarily 'feel like' family. This is only possible in the emotional connections forged with others which communicate love and acceptance.

Other examples of involvement that communicated family to young people, included care that was selfless, by people who wanted to see them succeed,

*'Um, family is there for when you need help, support, um, in reality they don't want nothing in return, but just to see you succeed. Um, yeah, that's it'.*

*'When I was with my family I don't consider my biological family to be my real family. It's my foster family and adoptive family who are my real family, because they want to see me progress in life, they want to see me do something with my life instead of just sit there....., like they believe in me so I can believe in me- instead of having family members that don't believe in you at all and they have no sense of confidence in you, yea'.*

In both examples, family meant individuals who believed in the young people, wanted the best for them, and wanted to see them progress. In the latter quote, a distinction is made between

the biological family who didn't offer this and the 'real' family that did. Such comparisons were frequent features within the data, it is to consideration of blood ties that we now move.

### ***Family blood ties***

When seeking to describe and define 'family', young people made reference to the presence or absence of blood ties. For a small minority blood ties were central to the concept of family:

*'I define them as by blood, you know? It doesn't matter if you're only half siblings or you're 5<sup>th</sup> cousins or something like that, if you guys are really by any type of blood at all then you guys are family and you gotta stick with them no matter what'.*

*'My legitimate blood family, and those are the people who I feel like it's an obligation to look out for them, like my brothers and my auntie and my grandma and my uncles and stuff.'*

For the two participants above, blood ties are fundamental to their notions of family and come with obligations to 'stick together' and / or 'show respect'. The second quote is noteworthy in its reference to 'legitimate', the recognised and legally sanctioned meaning of family, with other types being potentially less legitimate and less acceptable. While this young person later discussed other close 'family-like relationships' with friends, blood relatives were prioritised and their status for the young person and society was distinguishable. In these examples, the importance of blood ties is recognised over and above the nature or quality of the relationship. Despite this, the absence of references to relationships with blood relatives was notable from the data overall, with less than 10 young people out of 207 referring to their relationships with birth parents. Complex relationships with blood ties were also apparent as some young people

made distinctions between blood ties, and who was within and outside of their personal conceptualisations of family:

*'I could say like, yeah I have a mom, I have a dad. But my family is only my siblings'.*

*'But I think me and my family, I don't define them as family. My siblings are another situation, cause I love all of my siblings. I'm the oldest out of 10. So, with that being said, I care for my siblings more than anything in the world.'*

In both examples above, relationships with siblings were important to participants and retained the status of family whilst birth parents did not. This might be because birth parents had breached the fundamental obligations of 'sticking together', whereas siblings had not. Thus, they could still be considered and cared for as family. Nevertheless, only 15 young people (7%) spontaneously reported close relationships with siblings.

### ***Beyond blood ties***

In contrast to the importance of blood ties, recasting family conceptualisations was much more common. Blood ties may provide the origins of family definitions and retain importance, but the status of family is not static, instead dependent on the on-going quality of relationship and connection. Such sentiments were repeatedly present across the data and many of the young people did not consider birth parents or blood ties necessarily as family:

*'DNA doesn't make a family'.*

*'I'm just related to them by blood, but they don't really know me'.*



Here the young person notes how little their birth parents ‘know them’, and were *just* blood relations, suggesting this is far less important than knowing and understanding. Feeling not known or understood is isolating and difficult; young people were able to be open with their feelings of loss, of what they felt should or could have been. Many of the young people talked about family as those people who ‘know them’, suggesting a durability of relationship and a deeper understanding of the essence of the person, more than any biological connection. Related to this, some young people differentiated between blood relatives and family as being very different concepts, implying that family was far more important,

*‘So...family? Well... I mean there, there are blood relatives, and then there is family’.*

Whilst initially some felt that blood ties were important, on further consideration this was reviewed, and participants reflected that love did not necessarily follow on from biological connections,

*‘You know, family, you need to love them because they're blood... well no, no I really don't need to love you at all’.*

Even though birth parents were related biologically, some saw this as in name only, rather than being real family,

*‘I guess family are the people that are closest to you, and they understand you. Because you know, like with my biological family they can still be my family but they're not really my family they're just, that's just labels’.*

In the quote above, whilst blood connections legitimised notions of family, they are rejected in this example, merely reflecting accepted social labels. Here again we note that those who can be considered as family ‘understand you’, those who have taken time to find and value their individual uniqueness. For most young people it was whether people both knew and understood them, as well as caring about them that were important characteristics of someone who could be called family, rather than any biological connection,

*‘Um, those who care about you. Blood relation or not, it doesn’t really matter’.*

Important here is that for many young people in this study, the recasting of new constellations or blueprints of families, are people who are chosen rather than assigned,

*‘I have who I consider my sisters or brothers because they’ve been really good friends, so I’ve adopted them but we’re not blood-related in any kind of way. And then I have foster parents that I consider aunts and uncles’.*

Friends who provide support and can be supported, created reciprocity which led to the deepening of relationships,

*‘It’ll probably be, you know, like my now ... one of my best friends ... like, I mean, I treat him like he’s my brother ... and he treats me like I’m his brother...’.*

As one young person succinctly summarises,

*'Like, um, I don't think of myself as having a family. Uh, to this day, my family members are my friends, uh...yeah, that's how I define family'.*

Yet while this young person and others were able to conceive of family outside of normative ideals, this was not possible for all. In the following example, the unstable and absent relationships with birth parents is interpreted as not having or experiencing family, resonating feelings of loneliness and isolation,

*'Well...I really can't define family for you. I haven't had a family, I have a mother that's in and out of my life, my dad's been gone...so I don't know his side of the family. So I really can't define family for you'.*

This section has explored the range of ways in which care-experienced young people define who is within and outside of their family. Normative and idealised conceptualisations of family were often mentioned as something against which to compare their own experiences. For a minority, blood ties were fundamental to conceptualisations and were imbued with a sense of obligation and loyalty. For others the absence of birth family relationships was understood as not having a family. However, more commonly young people prioritised relational quality with definitions of family, and this moved beyond blood ties. Rather than being obligated by blood ties, many young people expressed choice over who they consider part of their family and had rejected those who had breached expectations.

### **Doing family differently**

Previous sections highlighted family imbued with notions of knowing, understanding, being present, available and reliable, and such attributes were possible from within and outside of blood ties. However, it is also important to note that young people sometimes discussed efforts

to do family differently. In these examples, young people made distinctions between the family they sought to create and enact, and the family they had experienced,

*... 'they [foster carer] pulled him [brother] down the hallway throw him in his room, the same way I explained to you that [name] would pull me across the living room. They'd do that drag him down the hall, stuff like that by his leg or something, throw him in his room, scream at him. ....I treated him like a human being. Personally, I think I treated him the way a parent is supposed to treat their child... Family doesn't scream and yank you down the hallway, family explains things to you. Let's you understand what you're doing. Accepts you back even if you've made a horrible mistake'.*

Here we see the young person being very clear about what family should not do, making clear distinctions between their own behaviour and that of the foster carer, recounting this as a painful memory. The example above stands in sharp contrast to the discussions above which conceptualised family in terms of love, care and acceptance. Here the young person is drawing on the foster carer as a social role model (Bandura, 1974) only in reverse. In this instance and others, young people referred to individuals and experiences which demonstrated how 'not to do' family. This was particularly apparent for participants who had children,

*'My family's never been there for me, like, the ones that were, all they did was abuse me and hurt me so it's like, I keep my family, like so far away I don't talk to none of my family. Like my family's my daughter. That's how I consider my family'.*

*'And I feel like a big thing with family is like if you're a mother or a father do whatever you can to make sure your kid doesn't grow up the way you did or you know teach them morals or values in life and how to respect people in general.'*

The comments of young people in this section show the propensity for young people to draw on such experiences as examples of *what not to do*. In the first example, the parent has separated themselves from family members and started afresh with her child. In the same vein the second quote highlights how important it is not to follow in the footsteps of negative role models and doing 'whatever you can' to ensure to model more positive experiences of family to their child. Importantly, while some young people were able to draw on negative experiences and relationships as examples of how not to do family, it is important to acknowledge that this was not the experience for others, who instead expressed some anxiety about being able to do family differently. For example,

*'I don't know. I've never really had family like that. I mean I'm experiencing a family now...I'm starting one, so I'm nervous. I'm scared that I'm not going to be a great mom...I don't know'.*

This comment suggests that the young person wants to create their own family and to do family differently. However, the nervousness also highlights the need for support and reassurance during this important transition.

## **Discussion**

The findings of this paper have provided valuable insights into how care-experienced young people conceptualise family. In responding to the question about how they define family, young

people talked hypothetically about defining and doing family but also drew on their own experiences to both compare and contrast with ideas of what family could and should be.

A myriad of family relationships and networks were described over the course of data collection, encompassing both biological and non-biological connections. The findings highlighted that few young people define family as solely confined to blood ties, but these were often seen as a foil, against which to compare their own experiences. The majority of participants described family in ways that extended beyond blood ties, encompassing wider conceptualisations of family, whereby relationships could be developed and forged, but also broken. This meant that in young people's constellations, some blood ties could be retained, with others not, along with new friends being brought into the 'kaleidoscope' (Morgan 1996:187). Our findings are consistent with those of Gwenzi (2020) who, in relation to care leavers, notes that young people 'conceptualize family in their own way' (p60).

Related to the tendency for inclusive family definitions, participants tended to prioritise relational quality over biological connections. Practical and physical care were sometimes associated with family, with young people valuing spending time together and the provision of items such as food and clothes. Yet in addition to this, emotional connections were repeatedly apparent, with family described as a feeling, and notions of love and acceptance imbued across the data. In this way, young people's descriptions of doing family echo Cameron and Maginn's (2009:22) concepts of caring for and caring about:

... 'caring for' is not the same as 'caring about' and while the former can mean providing the physical necessities of life, like safety, food, clothes, warmth and somewhere to sleep, the process of 'caring about' demands a subtle form of parental involvement that includes availability, thoughtfulness, responsibility, guidance and emotional investment.

Young people valued the ‘way’ that people cared for them and understood this to be durable and reciprocal. Young people also recognised that ‘caring about’ was emotionally different, similar to a study by Goodyer (2011: 112) where children noted the best foster carers were the ones ‘that care with their hearts’. Previous research has highlighted the problematic nature of relationships for young people within the child welfare system, as these can be experienced as temporary and contractual (Brown et al., 2019). Young people recognised that ‘caring for’ involved feelings, and an emotional commitment, and though it does not feature regularly in the literature (Smart 2007), feelings and love were mentioned frequently throughout the data, with love being used 81 times. Young people demonstrated a clear understanding of some of the basic characteristics and ingredients of what is required for bi-directional and reciprocal relationships.

Importantly, young people’s reflections also suggested actively drawing on past experiences in order to inform their own concept or enactment of family. The findings showed young people learning from both positive and negative role models, with these relationships providing blueprints of how to do and *not do* family. Previous research has highlighted that professionals can have concerns about the impact of young people’s experiences before and during care, on their ability to be parents themselves (Author 2021). However, the findings from this study suggest positive learning from family modelling (Bandura, 1974) with young people distinguishing between good and sub-standard care.

The findings of this study are consistent with sociological discourses of families and new constructions and ways of doing family (Smart 2007). As noted by Holland and Crowley (2013:64) ‘family can be self-defined, negotiated and have the potential to change’. Concurring with this assertion, as young adults, the participants in this study were reflecting on their experiences and to a greater or lesser degree had been able to recast, reconceive and reimagine ideas in respect of family. While more inclusive definitions and the prioritisation of relational

quality appeared positive for many, this was not the case for all, with some data suggesting ongoing or unresolved difficulties, including problematic relationships and painful perceptions of not having a family.

We believe the findings of our study make a valuable contribution to understandings of how care-experienced young people conceptualise family. We hope the findings will encourage further research into experiences of family for care-experienced individuals across the life course. Whilst acknowledging the scant research in this area, we believe the findings raise important questions for child welfare policy and practice.

Firstly, we would encourage reflection as to whether the policy and practice emphasis afforded to securing family permanency is sufficiently accompanied by sensitive and tailored support which helps young people make sense of difficult and painful family experiences. Whilst it is encouraging that the majority of participants were able to conceive of family beyond blood ties, it is important to acknowledge that feelings of sadness, anger, absence and loss were present in the data. Related to this, whilst articulating broadened conceptions of family, idealised views and expectations of family were nevertheless evident. Young people may benefit from considerations of the complex and evolving nature of family, as well as support to help express and work through difficult emotions. In a recent review of life story work practices by Hammond, Young and Duddy (2021), positive evidence of young person-led approaches and the provision of information surrounding care experience was noted, but so too was evidence of incomplete, insensitive and rushed practice. The extent to which life story work practices incorporate support for young people to resolve feelings related to family, see beyond traditional family ideals and /or instil hope in the potential for future families remains unclear. Secondly, we would encourage reflection on the relational opportunities afforded to young people in care as many have noted how difficult it is to maintain friendships (Rees et al., 2022). As shown by our data and others, non-biological relationships can be considered



family-like (Spencer and Pahl, 2006) and as a result, opportunities to forge and maintain relationships within and/or beyond blood ties should be prioritised for care experienced young people.

Finally, de-stigmatising conceptualisations of family that may differ from more traditional notions, especially those definitions that require birth relatives, would support care-experienced young people in accepting and embracing family in all forms and functions. In conclusion, we believe specific attention to family in terms of both concept and practice, has potential implications for encouraging agency, identity, belonging and well-being.

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