

The Experience and Influence of Positive Relationships in Care Leavers

Jemma Chambers

2014

Supervisors:

Professor Neil Frude

Dr. Liz Andrew

Dissertation submitted in partial fulfilment of the D.Clin.Psy. at Cardiff University and the South Wales Doctoral Programme in Clinical Psychology

Acknowledgements

First, I would like to thank all of the young people who took part in my study. I really value their courage to share such personal experiences and hope that my study does justice to the information they have generously provided. I would also like to thank the staff at ‘Skills for Living’ who helped me to meet with these young people.

I am really grateful to my supervisors, Neil and Liz. They have patiently guided and supported me through the process, especially with some last minute drafts.

Finally, thanks to my love, Chris. Always supportive and available with a laugh. No more theses, I promise!

Abstract

Poor long term outcomes have been documented for individuals growing up in the care system. These outcomes have been associated with early maltreatment within birth family relationships, which impinge on the individual's development. However, supportive relationships have repeatedly been found to act as a protective factor for individuals who are in care. The aim of this study was to explore care leavers' experiences of positive relationships and the impact that they had on the achievement of developmental needs. Rather than considering one type of relationship, the current study focused on how an individual's developmental needs were met, possibly through multiple relationships.

Eleven young people were recruited from a care-leaver service and took part in a semi-structured interview about their experience of positive relationships in the fulfilment of developmental needs. Interpretative Phenomenological Analysis produced three superordinate themes from the participants' experiences: Attachment – being able to engage with a variety of attachment figures, yet still experiencing emotional dysregulation and relationship problems from early insecure attachments; Impact of Care System – which may exacerbate attachment problems or provide a safe haven for development; and Developmental Needs – how developmental needs were met through relationships or the barriers to them.

These results were discussed in relation to how the emotional and relational effects of early insecure attachment was likely to be further impacted upon through experience of the care system. The specific influence of trust and rejection appeared throughout the results and this was discussed in relation to service development and interventions focusing upon relationship needs.

Contents

Chapter 1 – Introduction	1
1.1 Chapter Overview	1
1.1.1 Definition of Care-leaver	1
1.2 Children in Care	2
1.3 Outcomes for Individuals Leaving Care	3
1.3.1 Physical, Sexual & Mental Health	4
1.3.2 Education and Employment	6
1.3.3 Crime and Homelessness	7
1.3.4 Policies and Services for Young People from/in Care	8
1.4 Resilience	9
1.4.1 Academic Achievement and Resilience	10
1.4.2 Transition Out of Care and Resilience	10
1.4.3 Mental Health and Resilience	11
1.4.4 Building Resilience Through Relationships	12
1.5 Developmental Needs	12
1.5.1 Love and Security	13
1.5.2 New Experiences	17
1.5.3 Praise and Recognition	19
1.5.4 Responsibility	20
1.6 Summary	23
1.7 Systematic Review: Important Elements of Relationships Developed with LAC	24
1.7.1 Search Strategy	24
1.7.2 Search Terms	24
1.7.3 Inclusion and Exclusion Criteria	24
1.7.4 Search Process	25

1.7.5 Summary of Included Studies	27
1.7.6 Quality of the Research	32
1.7.7 Narrative of the Quality Review	32
1.7.8 Summary	39
1.7.9 Narrative Synthesis of Theoretical Findings	40
1.7.10 Theoretical Models Guiding Research	40
1.7.11 Evidence Base	41
1.7.12 Summary	50
1.7.13 Implications for Future Research	51
1.8 Summary and Study Focus	51
Chapter 2 – Methodology	53
2.1 Chapter Overview	53
2.2 Aims and Research Questions	53
2.3 Overview and Justification of Qualitative Methodology	54
2.3.1 Development of the Qualitative Method	54
2.3.2 Comparison of Qualitative and Quantitative Methods	55
2.3.3 Comparison of Various Qualitative Methods	56
2.4 Interpretative Phenomenological Analysis (IPA)	56
2.4.1 Phenomenology	57
2.4.2 Hermeneutics	58
2.4.3 Idiography	59
2.5 Ensuring Quality in IPA Research	60
2.6 Participants	65
2.6.1 Inclusion Criteria	66
2.6.2 Exclusion Criteria	66
2.6.3 Demographic and Care Pathway Information	66
2.7 Written Materials	67

2.7.1 Participant Invitation Letter	67
2.7.2 Participant Information Sheet	67
2.7.3 Consent Forms	67
2.7.4 Participant Data Sheet	68
2.7.5 Semi-Structured Interview	68
2.7.6 Debriefing Letter	69
2.7.7 Ethical Considerations	69
2.8 Procedure	70
2.8.1 Recruitment	70
2.8.2 Interview	70
2.8.3 IPA Analysis	71
Chapter 3 – Results	76
3.1 Chapter Overview	76
3.2 Superordinate Theme 1: Attachment	77
3.2.1 Attachment Subordinate Theme 1: <i>Available Attachments</i>	78
3.2.2 Attachment Subordinate Theme 2: <i>Relational Impact</i>	82
3.2.3 Attachment Subordinate Theme 3: <i>Emotional Impact</i>	88
3.3 Superordinate Theme 2: Impact of Care System	90
3.3.1 Impact of Care System Subordinate Theme 1: <i>Style of Support</i>	91
3.3.2 Impact of Care System Subordinate Theme 2: <i>Repeating Dysfunctional Attachment</i>	94
3.3.3 Impact of Care System Subordinate Theme 3: <i>Providing a Safe Place</i>	98
3.3.4 Impact of Care System Subordinate Theme 4: <i>Maintaining Family Relationships</i>	99
3.3.5 Impact of Care System Subordinate Theme 5: <i>Isolation</i>	101
3.4 Superordinate Theme 3: Developmental Needs	103
3.4.1 Developmental Needs Subordinate Theme 1: <i>Needing a Secure Base</i>	103
3.4.2 Developmental Needs Subordinate Theme 2: <i>Responsive Teaching</i>	106

3.4.3 Developmental Needs Subordinate Theme 3: <i>Impending Adulthood</i>	107
3.4.4 Developmental Needs Subordinate Theme 4: <i>Role Models</i>	110
3.4.5 Developmental Needs Subordinate Theme 5: <i>Personal Resources</i>	111
3.5 Summary	113
Chapter 4 - Discussion	116
4.1 Chapter Overview	116
4.2 Research Findings in Relation to the Existing Literature	116
4.2.1 Attachment	116
4.2.2 Impact of the Care System	120
4.2.3 Developmental Needs	123
4.2.4 Summary	126
4.3 Clinical and Service Implications	128
4.4 Strengths and Limitations of the Study	131
4.4.1 Methodology and Design	132
4.4.2 Recruitment and Sample	132
4.4.3 Data Collection and Analysis	133
4.4.4 Ensuring Credibility	134
4.5 Implications for Theory and Future Research	135
4.6 Conclusion	136
References	138
APPENDICES	154
APPENDIX I - Search Terms Used in the Systematic Review	154
APPENDIX II - CASP criteria	155
APPENDIX III - Table of main themes, subthemes and further descriptions from studies included in the systematic review	160
APPENDIX IV - Extracts from Reflective Diary	164
APPENDIX V Example extract of analysis of transcript	167

APPENDIX VI – Ethics Committee Decision Letter	170
APPENDIX VII – Semi-Structured Interview	172
APPENDIX VIII – Participant Data Sheet	175
APPENDIX IX – Participation Invitation Letter	176
APPENDIX X – Participant Information Sheet	178
APPENDIX XI – Consent Form	184
APPENDIX XII – Debriefing Letter	186
APPENDIX XIII – Gatekeeper Letter	188

TABLES

Table	Page
1.1 Summary of Qualitative Studies Included in the Systematic Review	28
1.2 Quality Framework of Qualitative Studies	35
1.3 Frequency of Different Types of Supportive Relationship from Three	42
1.4 Occurrence of Overarching Themes Across Included Studies	43
3.1 Individual Participant Characteristics	76

FIGURES

Figure	
1.1 The Systematic Review Search Process	26
3.1. Diagram of Superordinate and Subordinate Themes	75

Chapter 1 – Introduction

1.1 Chapter Overview

The aim of the study reported in this thesis is to examine positive relationship experiences for individuals who have spent time in Local Authority Care. Several areas were of specific interest: who such relationships were with, what areas of development they affected and whether different relationships with different people contributed to different areas of development. In addition, care leavers who did not think that they had experienced positive relationships in their lives and through their care were asked what they would have wanted.

This chapter provides an overview of the literature relevant to the study. It begins by looking at young people who have left or who are in the process of leaving local authority care, including the difficulties they experience as children, how these difficulties impact on their later life and how some display resilience despite their experiences. The protective factor of relationships is then further explored including the areas of relationships that aid children's development. Finally, a systematic review gathers information on the sources and qualities of relationships that have been important for individuals who have been in care.

1.1.1 Definition of Care-leaver

The research population for the current study consisted of care leavers. The Children Leaving Care Act 2000 describes an 'eligible child' as aged 16 or 17, who has been 'looked after' by a Local Authority for a period that amounts to 13 weeks or more, which began after 14 years of age and ended after 16 years of age. This Act was implemented so that individuals leaving care would be safeguarded and assisted by the Local Authority to transition to independence until the age of 21 (or up to 24 if the individual remains in higher education or training).

A 'looked after' child is defined by the Children Act 1989 as a child who has been looked after by a Local Authority due to a care order (where the Local Authority shares parental responsibility with a parent or guardian), under section 20 of the Act

(a voluntary placement where parental responsibility remains with the parent or guardian) or under an emergency protection order for more than 24 hours.

Throughout this thesis the following definitions will be used:

YPLC: Young People Leaving Care: depicting care leaver/s, as defined above.

LAC: Looked After Child/ren: depicting a child/ren who is/are still under the care of a Local Authority as defined above.

LAC/FC: Looked After Child/ren in Foster Care: depicting many study populations consisting of a looked after child/ren, who is/are placed in foster care.

These definitions will also be used when describing research from outside of the UK using comparable populations.

1.2 Children in Care

The number of LAC is monitored by local and national governments. Figures from the Welsh Government are most specific to the current study population of YPLC from South Wales. The Welsh Government (2014) reported the rates of LAC on care orders or who had accommodation provided for them by their Local Authority between 1st April 2012 and 31st March 2013. The total number of LAC during this period was 5,769, which was an increase of 0.8% on the previous year, reflecting an upward trend increase of 23% over the previous 5 years. The number of LAC represented a rate of 91 per 10,000 of the population aged under 18 in Wales, compared to 59 per 10,000 in England (Department for Education, 2013).

Children who are admitted to care tend to come from backgrounds of material and social deprivation (Bebbington & Miles, 1989). Although the different countries within the UK do not currently measure deprivation on comparable scales (UK Statistics Authority, 2011), a study adjusting the different UK countries' index of multiple deprivation found Wales to be the most deprived (Office For National Statistics, 2012), which may influence the rate of LAC. Figures showing an increasing care population, at a relatively higher rate in Wales than in England, suggest the need to gain further understanding about this population and how they may be supported.

There are several different forms of care placement and reasons why children are placed in care. The majority of LAC in Wales (Welsh Government, 2014) were placed in foster care placements (77%), with others placed for adoption (4%), placed with their own parents or someone with parental responsibility (9%), living independently (2%), in residential schools (1%), secure units, children's homes and hostels (4%), or in 'other placements' (2%). The number of children who entered Local Authority Care during this 12-month period was 2,023, at a similar level to the previous 2 years. Sixty percent of new placements were due to social services engagement because of abuse or neglect. Other reasons why children began a term in care under the Local Authority were parental illness, disability or absence (7%), family in acute stress or dysfunction (27%), socially unacceptable behaviour (4%), or 'other reasons' (2%). Thus, the majority of LAC were in foster care placements, and a high percentage of them had experienced maltreatment in the homes from which they were removed. The high rate of childhood maltreatment experienced by care leavers is likely to be associated with the many poor outcomes these individuals report and display (Barth, 1990; Courtney, Dworsky, Ruth, Havlicek & Bost, 2005; Courtney Sdyles, Miranda, Zinn, Howard & Goerge, 2005b).

1.3 Outcomes for Individuals Leaving Care

Individuals entering the care system are likely to have already been exposed to many risks associated with poor long-term outcomes (Jones, Everson-Hock, Papaioannou, Guillaume, Goyder, Chilcott *et al.*, 2011). This issue was recognised by the Department of Health who commissioned the development of guidance from the National Institute for Health and Clinical Excellence and the Social Care Institute for Excellence to improve the physical and emotional health of LAC (National Institute for Health and Care Excellence: NICE, 2010). However, outcome studies addressing potential life consequences for YPLC, upon which evidence based guidance is developed, have been criticised for: short follow-up time periods, covering limited areas of the young people's lives and only being available for English samples (Simon & Owen, 2006). A more recent review of correlational data on YPLC was conducted by Jones and colleagues (Jones *et al.*, 2011). Overall, the main outcome areas they identified as important in YPLC were physical health, mental health, sexual health, employment, crime, achievement and risk taking behaviour. Each of

the major outcome research areas for LAC will be examined in more detail below, including UK samples where available.

1.3.1 Physical, Sexual & Mental Health

Individuals with a history of being a LAC/FC display poorer health outcomes than those without. For example, a history of LAC/FC makes it twice as likely for adults to be receiving social income support for disability due to poor physical or mental health over the last year, including a higher rate of health conditions such as asthma, diabetes, hypertension, stroke, heart disease/failure, cancer or epilepsy (Zlotnick, Tam & Soman, 2012). LAC/FC are also at higher risk for contracting sexually transmitted infections and human immunodeficiency virus (HIV) than peers who are not in foster care (Ahrens, Richardson & Courtney, 2010). YPLC are also more likely to have higher levels of drug use compared to the general population, especially during times of transition into hostels (Ward, Henderson & Pearson, 2003). These areas of health suggest particularly poor outcomes for YPLC.

Even though poor health outcomes in YPLC have been documented, researchers have reported that services are not meeting their needs. Robertson (2013) conducted a review of 20 studies and found that barriers to sexual health care for LAC/FC included: either a lack of child welfare policies or policies not being adhered to; barriers to service use; lack of collaboration between child welfare and medical professionals; and limited information given to the young people about their sexual health. Similarly, drug services were not believed to be sufficiently integrated into YPLC's care plans (Ward *et al.*, 2003). Therefore, better acknowledgement of the health problems experienced by YPLC is needed and this should be reflected in relatively easy service access.

LAC have also been shown to have a higher rate of mental health service need. A series of studies of mental health prevalence rates across Great Britain for children and adolescents (aged 5-16) were conducted by Meltzer and colleagues (Green, McGinnity, Meltzer, Ford & Goodman, 2005), which allowed comparison of rates of mental health disorder for LAC in England (Meltzer, Corbin, Gatward, Goodman & Ford, 2003), Scotland (Meltzer, Lader, Corbin, Goodman & Ford, 2004a) and Wales (Meltzer, Lader, Corbin, Goodman & Ford, 2004b). The rate of mental health

disorder (according to International Classification of Diseases 10th Revision: World Health Organisation, 2001), across 7,977 children in private households (aged 5-16) in Great Britain was 10%, with 4% having anxiety or depression, 6% conduct disorder and 2% hyperactivity (Green *et al.*, 2005). In comparison, data collated from 119 LAC (aged 5-17) from Wales reported rates of 49% with a mental disorder, with 10% having anxiety or depression, 42% having conduct disorder and 12% hyperactivity (Meltzer *et al.*, 2004b). These results were not significantly different to those collected for LAC in Scotland (Meltzer *et al.*, 2004a) and England (Meltzer *et al.*, 2003). Thus, overall, the mental health disorder rates for LAC were substantially higher than for children from private households.

While the mental health needs of LAC is higher than that of the general population, it has also been found that mental health service needs increase with age (Leslie, Landsverk, Ezzet-Lofstrom, Tschann, Slymen & Garland, 2000). A study looking specifically at older LAC/FC (age 17) in Missouri found that the majority had accessed mental health services during their lifetime (94%) and that a large number (66%) were currently receiving services (McMillen, Scott, Zima, Ollie, Munson & Spitznagel, 2004). A history of maltreatment may be the underlying cause of mental health needs rather than exposure to the care system itself. Life course theory suggests that events that occurred in childhood may lead to adverse consequences in adulthood, especially when they occurred during a critical time period (Zlotnick *et al.*, 2012). Individuals with a history of sexual abuse were more likely to access mental health services than those with a history of neglect (McMillen *et al.*, 2004). Another study also found a higher rate of mental health service utilization amongst LAC/FC who experienced 'active' (sexual or physical) abuse compared to 'passive' (neglect or caretaker absence) maltreatment (Garland, Landsverk & Hough, 1996). This finding may be a reflection of the tendency for individuals to engage in more externalising behaviours the more severe the abuse (Jackson, Gabrielli, Fleming, Tunno & Makanui, 2014), thus attracting service attention. Therefore, although mental health service needs are likely to increase as a LAC becomes older, there may be individuals whose mental health needs are overlooked due to more internalised symptoms.

A particular area of mental health problems amongst those who have experienced abuse and neglect is depression and suicidal behaviour. Suicidal behaviour and depression have been found to be 3 times more likely in young people with a history of maltreatment than those without (Brown, Cohen, Johnson & Smailes, 1999). A history of sexual abuse is specifically related to an increase in risk of repeated suicide attempts (Brown *et al.*, 1999). Thus, the mental health impact of childhood maltreatment is likely to be shown by frequent high risk behaviours.

1.3.2 Education and Employment

Individuals from the care system have been reported to have lower achievements in education. Longitudinal data comparing LAC/FC to a matched group of youth found that the LAC/FC displayed a higher rate of high school dropout and were less likely to achieve high school qualifications (Blome, 1997). These results were attributed to less financial help, more discipline problems and more education disruption due to moving schools for the LAC/FC. Trends in England were similar. The Department for Education (2013) reported that, despite some recent reductions in the disparity between LAC and their peers, LAC continue to present with lower educational attainment. For example, 15.5% of LAC achieved GCSE A* to C in maths and English, compared to 58.7% who were in their birth family home. Thus, LAC have been shown to underperform relative to their peers in school, which can then lead to comparatively low rates of employment and earnings (Stewart, Kum, Barth & Duncan, 2014).

Childhood maltreatment can also influence an individual's educational attainment. A sample of 93 maltreated LAC/FC was compared to 54 controls in Oregon (Pears, Kim, Fisher & Yoerger, 2013). Results showed that the maltreated LAC/FC displayed lower affective (feelings towards school) and cognitive (skill mastery and effort) school engagement than controls and that lower engagement was found to mediate academic performance in late elementary school. Overall, the evidence suggests lower achievements for LAC/FC, which is likely to be related to maltreatment.

1.3.3 Crime and Homelessness

Transitions out of care have been associated with poor outcomes such as homelessness and crime (Barth, 1990). The involvement of the American Child Welfare System in a young person's life has been associated with a two fold increase in the rate of illegal activity, leading to criminal charges (Jonson-Reid & Barth, 2000). Similarly, data from a sample of YPLC from Nevada showed that 45% had experienced legal trouble since leaving care, 41% had spent time in local jails, 26% had criminal charges and 7% were currently in prison (Reilly, 2003). The pattern was similar for YPLC in England. Blades, Heart, Lea and Willmott (2011) found that LAC are over-represented in English prisons, with 27% of the adult prison population and between a quarter and a half of 15 to 18 year olds in prison having experience of the care system. These figures compare to less than 1% of the childhood population being LAC in 2011. Difficulties such as incarceration and homelessness for YPLC have been attributed to individuals feeling unprepared for independent living (Courtney & Piliavin, 1985, 1998).

It may not be the effect of foster care that impacts upon an individual's likelihood to become involved in crime. Runyan and Gould (1985) compared two samples of maltreated young people: adolescent LAC/FC for three or more years and adolescents from private households. Their overall findings suggested that foster care did not increase the level of criminal activity. Instead, Jonson-Reid & Barth (2000) have found that removal of a young person at risk of maltreatment from their home to foster care reduced rates of juvenile offending amongst 'at risk' youth placed into foster care between the ages of seven and eleven, rather than being left in their original home. Therefore, the research suggests that it is the element of childhood maltreatment, which is highly represented in LAC, rather than exposure to the care system itself, that contributes to the likelihood of criminal activity.

Outcome studies of LAC suggest poor long-term prospects in the areas of health, education, employment and crime. However, studies that have examined the underlying causes of these poor outcomes have consistently highlighted the role of childhood maltreatment (Garland *et al.*, 1996; Pears *et al.*, 2013; Runyan & Gould, 1985), rather than contact with the care system (Jonson-Reid & Barth, 2000).

1.3.4 Policies and Services for Young People from/in Care

Poor outcomes of YPLC have been recognised by law and policy. The Looked After Children's Act (2000) was implemented to help assess and assist in young people's transition out of the care system, safeguarding and promoting their welfare until at least the age of 21. The 'Care Matters' white paper by the Department for Education and Skills (2007) provided proposals for change for local government and professionals in an attempt to decrease the gap between outcomes for children in care and those who are not. Also, the Children and Young Persons Act 2008 outlined a statutory framework for Local Authorities to ensure that LAC in England and Wales received high quality care and services, by improving placements and improving educational achievement. The NICE guidelines for LAC (2010) recommend that young people leaving care should have access to specialised leaving-care services dedicated to promoting their psychological and social well-being. These guidelines outline the potential cost savings that these services could create, through reducing spending on incarceration, unemployment benefits and health services.

Leaving care services have been developed since the mid-1980s to assist with needs of accommodation, finance, careers and support networks (Biehal, Clayden, Stein & Wade, 1995). Staff have reported a number of positive changes for the young people from these services, including: increased access to education, employment and training; improved access to financial support; an increase in supported accommodation; the introduction of pathway planning; more formal interagency work; and improved funding for leaving care teams (Broad, 1998 ; Dixon, Lee, Wade, Byford & Weatherly, 2004; Hai & Williams, 2004). Research has outlined some positive outcomes for care leavers including stability in accommodation associated with enhanced wellbeing (Wade & Dixon, 2006); better coping due to leaving care preparation (Dixon & Stein, 2005); and enhanced social networks increasing self-esteem (Biehal *et al.*, 1995). However, services to address the mental health needs of this population have been less successful, particularly during the transition out of care (Stein, 2006). Despite the perceived success in leaving care services, this success lies within the context of the poor outcomes described in the

previous sections and the potential need for more trauma focussed services due to the impact of maltreatment.

1.4 Resilience

As noted above, a large proportion of individuals come to the care system due to maltreatment in the form of neglect and abuse (Welsh Government, 2014).

Subsequent poor outcomes may then stem from the experience of maltreatment from the care leaver's family of origin, or from maltreatment within the care system itself (Courtney et al., 2005b). A study of Dutch out-of-home care facilities found higher prevalence rates of child sex abuse compared to the general population, with residential care having the highest prevalence (Euser, Alink, Tharner, vanIjzendoorn & Bakermans-Kranenburg, 2013). Thus, some LAC removed from their homes due to maltreatment may be victimised in the care facilities designed to look after them. Childhood abuse and neglect can have long term consequences such as adult chronic low mood, personality disorders and alcohol misuse (Horwitz, Spatz Widom, McLaughlin & White, 2001).

Some of the research reviewed above suggests that poor outcomes in care leavers are due to the impact of childhood maltreatment rather than contact with the care system (e.g. Jonson-Reid & Barth, 2000; Runyan & Gould, 1985). An alternative way to look at outcomes for YPLC is to assess their positive gains rather than their poor outcomes. The concept of resiliency was outlined in Rutter's (1987) paper as the mechanism by which an individual can make positive gains in their lives despite exposure to adversity and risk. He described four main processes that were protective: "1) reduction of risk impact, 2) reduction of negative chain reactions, 3) establishment and maintenance of self-esteem and self-efficacy, and 4) opening up of opportunities" (p. 316. Rutter, 1987). This paper marked a change in focus from risk factors to protective factors in psychiatric and psychological research (Rutter, 1987). A substantial body of research on protective factors contributing to resilience in LAC has been conducted and this will now be explored.

1.4.1 Academic Achievement and Resilience

The area of academic achievement has been the focus of resilience research in younger LAC. This may be due to the relatively low rates of resilience measured amongst this population compared to the general population (Flynn, Ghazal, Legault, Vandermeulen & Petrick, 2004). Healey and Fisher (2011) looked at protective factors associated with favourable outcomes in middle childhood with a sample of 35 LAC/FC for more than 3 months between the ages of three to five years. They found that the favourable outcomes of emotional regulation and school adjustment were correlated with developmental status (including attention and executive functioning), lack of environmental stress during early childhood foster care experiences and a significant positive attachment relationship. A UK study of 193 children aged between seven and fifteen years found that 16% met 'positive exception criteria,' that is, they scored above average on indices of school attendance and achievement and lower on childhood psychopathology (Rees, 2013). The positive exception criteria were significantly associated with regular contact with parents and mainstream school attendance, showing the importance of maintaining contact with the individuals' birth family.

Resilience has also been examined for those individuals who stay in education longer. For 44 young adults who were previously LAC and stayed in education beyond secondary school, protective factors were found to include a sense of competence, having future goals, social support and being involved in community service activities (Hass & Graydon, 2009). The three studies above demonstrate the importance of significant relationships and social support in relation to educational achievement. Education itself can also be a protective factor, with research suggesting that successful adaptation to independent living three years after leaving care is associated with a commitment to further education (Jones, 2011).

1.4.2 Transition Out of Care and Resilience

The impact of resilience has been considered as especially important during times of transition for YPLC. Two studies from the USA defined resilience in relation to factors including: employment, education, stable housing, avoidance of substance misuse, criminal activity and early parenthood (Daining & DePanfilis, 2007; Jones,

2012). Daining and DePanfilis (2007) looked at resilience in a sample of 100 individuals who left care during the previous year. The following factors significantly predicted resilience in the multiple regression analysis: female gender, older age at exit from care, lower levels of life stress, social support from family and friends and spiritual support. Jones (2012) found similar factors correlated with resilience: older age at exit from care, independent living skills competence, availability of social support and maintaining contact with former foster parents. Both of these studies support the findings from the education outcome literature, that remaining longer in care is associated with better outcomes (Hook & Courtney, 2011; Stewart *et al.*, 2014). In addition, both support the findings relating resilience to social support and relationships.

1.4.3 Mental Health and Resilience

Resilience is a concept that has classically been related to research on mental health problems (Rutter, 1987). This has been reflected by the resilience literature on mental health protective factors for LAC. Adolescents currently in an out-of-home placement have been found to have higher levels of mental health distress, associated with more risk factors (suicidal risk, mental health distress) and less protective factors (feeling parents or other adults care about them and school connectedness) than a comparison group of their peers (Harpin, Kenyon, Kools, Bearinger & Ireland, 2013). Another study looked at risk and resilience factors in 564 adults who had previously been in foster care and diagnosed with a physical or mental impairment (Anctil, McCubbin, O'Brien & Pecora, 2007). A multiple regression showed that self-esteem was predicted by living with foster parents who were perceived as helpful and with receiving mental health services. However, unstable foster care placements were associated with a greater likelihood that mental health diagnoses would persist into adulthood. Therefore, overall, these two studies also show the presence and importance of relationships in individuals' mental health.

All of the studies looking at resilience factors LAC and YPLC were conducted in the USA. While there are differences in the American and British care systems (Stein, 2006), the repeated presence of relationships and social support as important factors for resilience in all of these studies cannot be ignored.

1.4.4 Building Resilience Through Relationships

The need for high-quality parenting and sensitive support provided by carers in order for LAC to deal with parental rejection, abuse and neglect has been recognised (Cameron & Maginn, 2008). Although, the parent-type relationship has been emphasised in research and therapy, other avenues of repair, such as friendships and romantic relationships, have also been cited as important (Myers, 2000). In addition, the importance of positive relationships to help repair damage from childhood trauma has been recognised in the therapeutic arena with the ‘reparative relationship’ (e.g. schema therapy; Young, Klosko & Weishaar, 2003). The ‘necessary and sufficient’ qualities of helping relationships for change have been known and validated since the work of Carl Rogers (1957). The next section of the introduction explores what a child needs from relationships in order for healthy development to occur, which may not have been available for LAC.

1.5 Developmental Needs

Children have a variety of developmental needs whilst growing up, which may have been interrupted or not provided for LAC due to the experience of abuse or neglect. Pringle (1986) assessed the research base to determine children’s developmental needs and how these were met within relationships. She stated that there were time sensitive periods within a child’s life when rapid growth occurred, when environmental influences were at their greatest. These sensitive periods were from birth to six years old and then during puberty. During these sensitive periods more growth is experienced in physical, intellectual, emotional and social and educational development than during other time periods. The sensitive periods can depend on the environment, for example, a strong emotional relationship needs to be developed between the mother and infant within the first 24 months. Similarly, walking and talking tend to occur at similar ages for children and if speaking has not been learned by the age of 5 or reading by 10, then it is unlikely that a normal speech or reading ability will be achieved. These skills can be built afterwards, but it will be more difficult and slower. Pringle (1986) stated that the different elements of learning were interwoven and indivisible in child development and she defined four areas of needs in children for healthy development: love and security, new experiences, praise and recognition, and responsibility. Each of these areas of need will now be

explored, comparing Pringle's (1986) definition of what is required to fulfil these needs with relevant research including LAC where available.

1.5.1 Love and Security

1.5.1.1 The Need for Love

The area of children's need - love and security - was outlined by Pringle (1986). She described the child's need for love involving an experience from birth of a stable, continuous, dependable and unconditionally loving relationship by parents (or carers), with a rewarding relationship between the parents themselves. The pervasive feature of parental love is that the child is valued unconditionally, leading to the development of self-approval and self-acceptance. The love is communicated through unconditional affection, responsive care and protection. Relationship experience begins between the child and mother and then extends to the child and father. The formation of expanding relationships leads to a realisation of personal identity and worthiness. This experience then forms the foundation for other relationships including friendships, working relationships and finally, the individual's own family and children.

1.5.1.2 How the Need for Love May Not be Met

Pringle's (1986) description of what a child needs through love defines the 'secure attachment' relationship, which involves an attuned interaction between the main caregiver and baby, leading to the development of a positive and integrated sense of self (Stern, 1985). 'Attachment' research has also considered the styles of relationships between mother and child that are unlikely to meet the infant's needs, whereby insecure attachment may develop. Insecure attachment can involve a child fulfilling their mother's unmet attachment needs, rather than the mother focusing on their child's care (Bowlby, 2005). Four different types of attachment styles were found through research examining a mother's responsiveness and the child's reaction (Ainsworth & Witting, 1969; Bowlby, 2005; Main & Hesse, 1990). These are:

- Secure – responsive mother and the child explores.
- Ambivalent – the child is uncertain if the parent will be responsive and is therefore clingy.

- Avoidant – the child expects to be rebuffed when seeking care, becomes emotionally self-sufficient, or narcissistic, with a false sense of self.
- Disoriented/disorganised – the child's reactions to its mother are unpredictable as the mother may be found to be abusive/ neglectful, bipolar or erratic, suffering grief or had themselves suffered abuse as a child.

The type of relationship developed with those providing care is believed to be stable into adulthood because early relationships provide a template for later relationships (Bowlby, 2005; Main & Hesse, 1990; Bartholomew & Horowitz, 1991).

1.5.1.3 LAC Alternative Ways to Gain the Needed Love

Later research has suggested that attachment styles may not be as static as was first thought. Children can develop a different style of attachment with alternative caregivers to their attachment style developed with their mother (Howes & Oldman, 2001; Goossens & VanIjzendoorn, 1990). This is important for LAC, who are likely to have experienced insecure attachment due to the high rate of abuse and neglect (Welsh Government, 2014). LAC have been found to be able to take on their foster or adoptive mother's attachment style when infants (aged under 20 months: Dozier, Stovall, Albus & Bates, 2001) and young children (aged four to eight: Steele *et al.*, 2003). Further, caregiving is not restricted to parents and can be provided by multiple caregivers (Howes, 1999) including fathers (Brown, Mangelsdorf & Neff, 2012), grandparents, day care providers (DeSchipper, Tavecchio, Van Ijzendoorn, 2008), teachers (Verschueren & Koomen, 2012), foster and adoptive parents (Dozier, *et al.*, 2001; Steele, Hodges, Kaniuk, Hillman & Henderson, 2003), who may take the role of alternative or additional caregivers. These results suggest that children's attachment styles are less constant than originally assumed, yet this has major implications for placing maltreated children with individuals who have their own insecure attachment or unresolved mourning, which may limit the level of secure attachment development in the child (Steele *et al.*, 2003).

1.5.1.4 The Need for Security

Pringle (1986) described how responsive care introduces the child to the social world through maintaining their sense of security. The parental care protects the baby from the environment and reassures them, creating a more confident individual, analogous

to the 'secure base' parents provide as described by Bowlby (2005). The child begins with short journeys away from the secure base, knowing that they can return if they require reassurance or experience anxiety, fatigue or illness (Bowlby, 2005). This sense of security remains in adulthood, whereby those who are emotionally stable know that they can still rely on their parent's availability, whilst having their autonomy respected (Bowlby, 2005). Security appears to be the primary need of children, before they can begin to focus on learning and respond to the emotional and social communications of their caregivers (Porges, 1997; Schore, 2001). Separation from the attachment figure or an insecure attachment is likely to produce anxiety and anger as the child attempts to regain security (Bowlby, 2005). Bowlby (2005) linked disruption of the attachment relationship in childhood to later adult psychological disturbance.

1.5.1.5 LAC Security in Relation to Birth Family

LAC are unlikely to have experienced continuity of care, thus not fulfilling the need of security described as important by Pringle (1986). Removal from the family home may be difficult for LAC due to the loss of birth family relationships, even if outside agencies have deemed the child to be at risk (Herrick & Piccus, 2005). Therefore, frequent visitation between the child and their birth parents is recommended in an attempt to develop secure attachment for the child with both birth and foster parents, even though the visits can heighten the stress of the separation (Haight, Kagle & Black, 2003). While maintaining contact with birth parents can increase the young person's wellbeing during their time in care placements, research has suggested that foster parents can find visitations disruptive to the placement and the development of their own relationship with the young person (Sanchirico & Jablonka, 2000). Some foster parents may even view the birth parents negatively, as people who maltreat children, which often marks hostility between the foster and birth parents (Palmer, 1995). This can lead to a difficult situation in which the child in foster placement tries to manage these relationships (Sanchirico & Jablonka, 2000). In some cases the LAC may experience conflict of loyalty between their birth and foster parents (Leathers, 2003). Therefore, while it has been found to be advantageous to maintain birth family relationships and to keep in touch with their original 'secure base', the maintenance of such contact can also place strain upon the LAC.

The sense of grief and loss of identity experienced by LAC as a result of being removed from their birth family can often be reduced if the LAC are able to maintain sibling relationships, either through placement together or regular contact (Herrick & Piccus, 2005). Research with 152 adolescents in foster care found evidence that positive sibling relationships were protective as they could moderate the effects of trauma on internalising symptoms (such as anxiety, depression, withdrawal and somatic complaints: Wojciak, McWey & Helfrich, 2013). It has been suggested that the young people themselves could contribute to discussions about being placed with their siblings and the propensity for this arrangement to increase their feelings of security (Herrick & Piccus, 2005). Therefore, maintaining positive sibling relationships appears to be an important strategy for helping individuals placed in care to maintain a sense of security.

1.5.1.6 Developing Morals and Emotional Regulation through Security

The social development of children through relationships was considered important by Pringle (1986) for both moral development and self-control. The baby comes to recognise its mother and to enjoy her presence, and views her delight as a reward. Disapproval in the context of loving relationships can be communicated idiosyncratically without words and makes the child anxious as it is the temporary withdrawal of affection and attachment behaviour (Bowlby, 2005). Pringle (1986) viewed security as relating to the standards set on behaviour, which need to be consistent between individuals if the child is to develop principles. Reasoned discussion leads to the development of 'moral insight,' whereby inner-directed morals involve feeling shame for something the child knows their parent (and later others) would disapprove of.

Emotional regulation is also determined by the security of the parent-child relationship. A secure attachment consists of attuned communication including affect attunement, that is, nonverbal communication of emotion, between parent and child, which helps with the development of emotional regulation (Schore, 2001). A secure attachment has been linked to the healthy development of brain areas associated with stress responses, enabling the child to cope better (Schore, 2001). The communication progresses to include verbal interactions, which tend to be open and direct in a secure attachment (Kobak, 1999). Gottman (2011) recognised how

different types of parenting may also have a negative impact upon the development of emotional regulation. He found that parents dismissing and invalidating a child's emotions led to the child dismissing their own emotions. Disapproval of a child's emotions led to the child experiencing difficulty trusting their own judgement, feeling like there is something wrong with them and having difficulty regulating emotions, problem solving, concentrating and developing friendships. He also stated that children need limits set on their emotional expression and need guidance on their management if they are not to have difficulties calming down, concentrating and making friends. Thus, the security and responsiveness of the parent-child relationship is likely to have a large impact upon how children come to recognise and manage their own emotions.

1.5.1.7 Summary

Overall, the developmental need of love and security (Pringle, 1986) has attracted the most research. The research base on attachment supports Pringle's model about what children need in terms of love in the form of a secure attachment and security in the form of a secure base and it also provides information about types of relationships that form when these needs are not met (e.g. Bowlby, 2005). It is unlikely that LAC will have achieved the needs of love and security in their birth homes. However, attachment relationships have been shown to have the potential for change and provision from individuals other than birth parents (Howes, 1999). However, maintaining contact with the birth family can be protective through maintaining a sense of security (Herrick & Piccus, 2005).

1.5.2 New Experiences

1.5.2.1 The Need for New Experiences and Learning

'New experiences' was a second area of developmental need described by Pringle (1986), as they enable cognitive growth. There is a strong urge in children to learn and explore, to gain mastery in movement, examine objects, crawling, walking, speaking, reading etc. Novel stimuli motivate the child for further exploration and learning. Too much stimulation causes fear and withdrawal, too little causes boredom and apathy. The optimum level is desirable. Learning how to learn brings joy and mastery – showing the link between emotion and learning, which has been

found to be important in neural pathway development in relation to learning experiences (Greenough, Black & Wallace, 1987). The child experiences their own joy and that of their parents' pleasure, reinforcing their willingness to learn. If learning and exploring is disapproved of, discouraged or punished, it is likely that the result will be passivity, fearfulness, frustration or irritability, with little joy or satisfaction. Responsiveness to education depends on inborn capacity, environmental opportunity and encouragement. The child's potential for learning may be developed in full, it may be disorganised or it may remain unrealised according to opportunities. The child explores both the objective outside world and the subjective internal world of thoughts and feelings through play and language.

1.5.2.2 Experiential Learning and Developmental Phases

The literature on experiential learning considers learning to be a continuous process rather than a set of stages. This theory places importance on experience in learning, that is, the interaction of the individual with their environment builds their knowledge (Kolb, 1984). Lewin (1942) believed that experience was required to validate and test abstract concepts and that feedback enabled learning to occur. Then the individual could use this knowledge to make predictions about the future (Dewey, 1938). Later, Piaget (1950) constructed a theory of cognitive development that included four stages between birth and adolescence including: sensorimotor - involving sensory experiences; pre-operational - consisting of symbolic thinking through pretending; concrete operational - developing problem solving and logic; and formal operational - enabling abstract deductive reasoning. Thus, development moves from a concrete to an abstract view of the world and from an egocentric view to an internalised reflective capacity. Each of the stages of cognitive development occurs during different age ranges and development from one stage to the next is contingent upon achieving the previous stage. Piaget (1950) stated that emotion was related to intellectual development, thus unresolved emotional conflict at one level of development may hinder thinking at the next level. Thus, other areas of need such as love and security would also be considered important for cognitive development.

1.5.2.3 The Impact of Relationships on New Experiences and Learning

Relationships play an important role in the task of learning (Wubbels, den Brok, van Tartwijk & Levy, 2012). Within the context of schools, the student-teacher relationship can be critical for student motivation and performance (Wentzel, 2012). Relationships with teachers tend to be built upon the template of the original parent-child relationship and can therefore be conceptualised using attachment theory (Wentzel, 2012). Hess and Shipman (1965) examined the influence that the mother-child relationship had on the child's subsequent ability to learn. They contended that a child's ability to learn was socialised through early communication with their mother. They found that authoritarian teaching styles meant that the child had not had sufficient exposure to a wide range of alternatives for problem solving to aid learning strategies. Thus, the relationship between mother and child is likely to impact upon later abilities to learn from new experiences.

1.5.3 Praise and Recognition

1.5.3.1 The Need for Praise and Recognition for Motivation

Praise and recognition were considered an important area of developmental need outlined by Pringle (1986). Success and praise by important adults provide an incentive for the child to develop the myriad of skills needed to become an adult. Here the important relationships drive the child's ability to learn. Minimal expectation contributes towards the child adopting a low level of effort and achievement; overly high expectation can result in a child feeling discouraged and therefore making little effort. Pringle (1986) suggests that there is an optimum level of expectation for each child's abilities. Mistakes and failure are an integrated part of learning. The child who is made anxious about mistakes may become more concerned about avoiding anxiety than recognising and profiting from the failure.

The utility of praise has been questioned in the research literature, to the extent of stating that it can stifle the development of autonomy (e.g. Faber & Mazlish, 1996). In a review of the literature, Henderlong and Lepper (2002) concluded that sincere praise can enhance children's motivation when it is moderated by the following conditions: when the praise does not involve labelling the child in a way that they could interpret as negative, when autonomy is promoted, when perceived

competence and self-efficacy are heightened without undue use of social comparison and when realistic standards and expectations are conveyed. Thus, sensitive and responsive use of praise can increase a young person's motivation.

1.5.3.2 The Impact of Relationships on Praise and Recognition

Pringle (1986) acknowledged the role of teachers in rebuilding the foundation for the child's self-esteem and attitude to learning. The teacher may optimistically recognise unrealised potential for development regardless of previous judgements, even from parents. A child's self-concept is developed through others' views. The attitude to learning determines how effectively the child will learn as much as their actual ability. External recognition is required up to adolescence as success in itself is not enough of a reward for younger children.

The educational impact of a teacher, as recognised by Pringle (1986), was supported by later research. A study of 113 children suggested that a child's academic self-concept was related to the quality of their relationships with their teacher, whereas general self-concept was related to the quality of their attachment with their mother (Verschueren, Doumen & Buyse, 2012). In addition, research has supported the idea that teachers may constitute an additional attachment figure, without the strength of an attachment bond with a parent, if they are sensitive to the child's needs (Verschueren & Koomen, 2012). Thus, there is scope for alternative and additional relationships with teachers rather than parents fulfilling the developmental needs of praise and recognition.

1.5.4 Responsibility

1.5.4.1 The Need for Responsibility and Developing Autonomy

The final area of children's developmental need described by Pringle (1986) was responsibility. The development of responsibility begins with personal independence through personal care, i.e. feeding, washing and dressing, as the child wants to model their parent's behaviour. As the child grows older, independence is encouraged through increasing freedom in physical movement, play and clothes, choice of friends, hobbies, career and eventually marriage partner. Children also need relationships with others who are equal to them. Age similar peer groups promote

autonomy and independence. Within peer groups individuals can fulfil the social and psychological function of feeling distinct from other groups and generations. During adolescence a great deal of emotion is invested in peer-group relationships.

1.5.4.2 LAC Overdevelopment of Autonomy

The development of autonomy, that is the ability to regulate one's own behaviour, leading to independence, is critical during adolescence and has been linked to attachment with parents and peers (Noom, Dekovic & Meeus, 1999). However, taking autonomy to the level of 'vigilant self-reliance' has been seen in YPLC (Samuels and Pryce, 2008). In a study by Samuels and Pryce (2008), a sample of 44 YPLC in the USA reported feeling alone in the world due to their life experiences such as the absence of their parents and the finite nature of foster care. This led to the development of self-reliance through the need to provide their own security and 'emotional autonomy' that emerged from experiences of emotional insecurity and interpersonal disconnection. The authors found that the participants' expression of strength through surviving trauma showed it in terms of their becoming emotionally self-reliant, rather than developing skills to enlist support. This mechanism could then impact on the individual's ability to connect with others and develop interpersonal relationships. Thus, while autonomy is an important protective factor in adolescence, when taken too far in the form of 'vigilant self-reliance,' it can impact negatively on relationships.

1.5.4.3 LAC and Developing Autonomy Through Peer Relationships

Being placed in care may also affect peer relationships, which Pringle (1986) states are important for developing autonomy and independence. Adolescence is a time when attachment bonds become important again as the process of becoming independent begins (Pringle, 1986). If an individual has an insecure attachment with parents, which is likely for young people in care (Howe & Fearnley, 2003), this may well impact on later peer relationships, especially in adolescence (Cooper & Cooper, 1992). A study of 216 undergraduates found that insecure attachment was negatively associated with levels of perceived social support and attachment to friends (Blain, Thompson & Whiffen, 1993). Thus, the attachment strain associated with being in care is likely to limit the level of support LAC are able to access with their peers.

1.5.4.4 Responsibility and Advice

The development of responsibility was described by Pringle (1986) as happening within an environment of advice, so that decision making can be developed within the child. This can be done whilst guiding the child, not necessarily agreeing with all of their choices. Children need a framework of guidance and limits – knowing what is expected or permitted and what the rules are – together with the reasons, such as the interests of themselves or others. A distinction must be made between a disapproval of the behaviour and rejection of the child. Children learn about the values, standards, concerns and ambitions of influential others from their lives. The only lasting and effective force for influencing their beliefs and behaviour is through modelling, rather than verbally stating beliefs. Pringle (1986) stated that training for responsibility involves: defining the problem, providing or finding the necessary information, assisting in weighing it up and predicting the likely consequences of alternative choices. The decision must be made by the young person who must then be allowed to cope with the outcome. The adult should not interfere with the choice (unless it could prove disastrous) and should stand by the youngster and advise if things go wrong.

Social Learning Theory (Bandura, 1971) posits that new behaviours are developed either through direct experience or through observing the actions of others, known as modelling. Through watching another's behaviour an individual can learn to behave in a similar way without taking the risk of initial experimentation themselves. They are more likely to try the behaviour themselves if they viewed the outcome as positive. In an experimental test comparing the power of advice and modelling, participants were found to take the advice rather than to copy another's behaviour (Celen, Kariv & Schotter, 2010). However, this laboratory study is unlikely to replicate the power of modelling behaviour from significant individuals in young people's lives.

1.6 Summary

The importance and variety of relationships that relate to developmental needs outlined by Pringle (1986) are the focus of this study. Pringle's framework of developmental needs will provide the context for the different areas in which relationships can have a positive influence on the LAC population, whose lives have involved significant disruption.

Pringle's (1986) model identifies four areas of developmental need all of which may rely crucially on interpersonal relationships. Though birth family relationships may continue to be important for some LAC (Herrick & Piccus, 2005) and are suggested to be the optimum relationships through which developmental needs may be met (Pringle, 1986; Bowlby, 2005), a variety of research has suggested that many areas of developmental need may be met through additional or alternative individuals (e.g. Howes, 1999). The research on developmental needs clearly shows the critical role of relationships as the medium for child development, providing a context for the protective nature of relationships and social support. The systematic review that follows explores the elements of supportive relationships with LAC that have been found to be positive.

1.7 Systematic Review: Important Elements of Relationships Developed with LAC

A systematic review of the literature was conducted to explore current understanding of important elements of relationships experienced by, or with, LAC. The systematic review question was:

What are the important elements of relationships for LAC?

The aim of this review was to critically evaluate the current literature using a formal framework. The following section includes: an outline of the search strategy and process; a description of included studies; an assessment of the quality of the included studies; a synthesis of the findings from the field of research and implications for future research.

1.7.1 Search Strategy

Five electronic databases were searched on the 8th April 2014 using the OVIDSP platform to identify relevant studies:

- Cardiff University Full Text Journals
- AMED (Allied and Complementary Medicine)
- EMBASE (Excerpta Medica dataBASE) 1947-present
- Ovid Medline ®1946 – present
- PsycINFO 1806 –present

1.7.2 Search Terms

Three general search term areas were: ‘foster care’ and ‘relationship’ and ‘protective’ (see Appendix I for full listing of variants). Search terms were combined using Boolean operators such as ‘and’ ‘or’

1.7.3 Inclusion and Exclusion Criteria

The aim of this review was to identify important characteristics of relationships for LAC. Qualitative research was considered the most appropriate to address the review

question, to consider the full experience of relationships. The exclusion and inclusion criteria were:

Inclusion Criteria:

- Qualitative research.
- Participants who were currently, or who had been, involved in the care system.
- A focus on the qualities of interpersonal relationships.

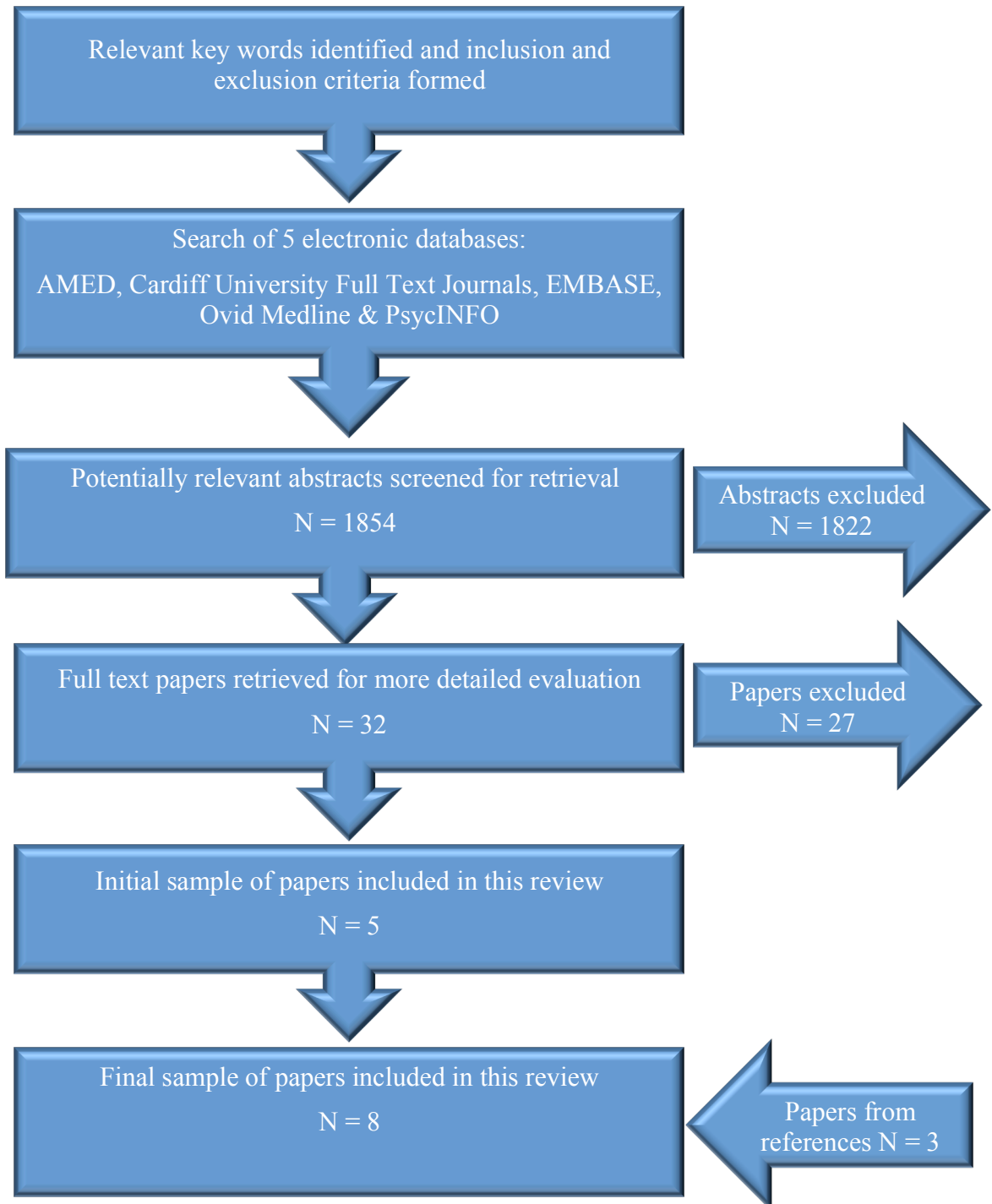
Exclusion Criteria:

- Not published in a peer review journal.
- Not in English language.
- Example case studies.
- Sociocultural relationships.
- Intervention evaluation.
- Data collected with the aim of psychometric development.

1.7.4 Search Process

The search generated 2,609 titles, which became 1854 once duplicates were removed. The titles and abstracts of these studies were evaluated according to the inclusion and exclusion criteria, leaving 32 studies. Full text copies of the 32 studies were gathered and further examined according to the inclusion and exclusion criteria and this left five qualitative studies to be reviewed in depth. Three further studies were identified through searching the reference sections of the original five selected studies, leading to a total sample of eight studies (See Figure 1.1 for an outline of the search process).

Figure 1.1 The Systematic Review Search Process



1.7.5 Summary of Included Studies

Descriptions of each of the studies included in this review are presented in Table 1.1. An account of the studies, including the characteristics of the participants, the design and method is provided below.

1.7.5.1 Samples

Five of the studies were conducted in the USA and the remaining three within the UK. The pattern of location suggests that that the results would be most relevant to western, English-speaking societies and might not be transferrable to other cultures. The study samples consisted mostly of individuals who were currently or had been looked after in the foster care system. One study also included interviews with advocates (Osterling & Hines, 2006), and another study included only the views of foster carers (Oke, Rostill-Brookes & Larkin, 2011). These two studies enabled views from the other side of the relationship to be contrasted with the views of LAC. Of the 7 studies that included LAC/FC, sample size ranged from 7 to 189, with a mean of 54.6. Within the studies that included LAC/FC, 6 reported gender, and one did not, making the average percentage of females in those 6 studies 65.7%.

1.7.5.2 Design and Method

All studies included in this review used qualitative data, although two also collected quantitative data (Collins, Spencer & Ward, 2010; Osterling & Hines, 2006). Qualitative methodologies varied from low quality, vaguely specified methodologies and analyses such as ‘preliminary qualitative analysis’ (Barnes, 2007; Schofield, 2002), qualitative descriptive analysis (Collins, Spencer & Ward, 2010) and content analysis (Osterling & Hines, 2006), to higher quality qualitative methodologies and analyses including theoretical thematic analysis (Ahrens, DuBois, Garrison, Spencer, Richardson & Lorano, 2011), thematic analysis (informed by relational-cultural theory: Munson, Smalling, Spencer, Scott & Tracy, 2010), grounded theory (Greeson & Bowen, 2008) and interpretative phenomenological analysis (Oke, Rostill-Brookes & Larkin, 2011). The less formal methodologies and analyses generally produced descriptive results, whereas the philosophically and theoretically underpinned methodologies produced more rigorous and integrated results.

Table 1.1 Summary of Qualitative Studies Included in the Systematic Review

No.	Author/s	Country	Aim	Sample			Method (design, data collection, data analysis)	Results/main themes	Discussion	Quality Rating
				Gender	Age	Care Status				
1.	Ahrens, DuBois, Garrison, Spencer, Richardson & Lozano (2011)	USA	To extend understanding of the function of important, naturally occurring non-parental adult relationships for young adults who have been in foster care.	23 total: 14 female, 9 male.	Mean age: 19.9	Current or former youth in foster care.	<p><u>Recruitment:</u> through 4 non-profit agencies serving current or former foster youth. Purposive and snowballing strategies.</p> <p><u>Design:</u> Qualitative (semi-structured interview).</p> <p><u>Data Collection:</u> tape recorded and transcribed.</p> <p><u>Interview Schedule:</u> Identification of mentors and role, impact, contact, adaptation to adulthood and transition from care and barriers to relationships.</p> <p><u>Data Analysis:</u> Theoretical thematic analysis: identifying patterns and themes according to existing theory. Triangulation reported.</p>	<p>Supporting previous research themes:</p> <ul style="list-style-type: none"> - Barriers and facilitators to the ongoing relationship - Developmental impacts of the relationship. - Supports provided by the adult. <p>New themes:</p> <ul style="list-style-type: none"> - Barriers and facilitators to forming the initial relationship. - Influences on the length and quality of established relationships - Relationship impacts - Unmet needs 	Evidence provided for the social, cognitive and affective processes that mentoring relationships can strengthen in youth in and from foster care. Therefore, Rhodes' developmental model of youth mentoring was supported and expanded upon. Elements of the relationship that were important to the youth were outlined. Concluded that non-parental adult relationships can be an important source of support for foster care youth.	15/20
2.	Barnes (2007)	UK	To explore young people's experiences and views about work undertaken with children's rights and social care professionals	20 total: 11 female, 9 male.	12-20.	9 total: 6 had been in both foster and residential care, 2 residential only, 1 foster only. 0.5-14 years looked after.	<p><u>Recruitment:</u> purposive sample from 4 Children's rights projects in Midlands UK.</p> <p><u>Design:</u> Qualitative</p> <p><u>Data Collection:</u> Interviews, including 'trigger' materials and scenarios.</p> <p><u>Interview Schedule:</u> focused on experience of contact with children's rights workers and social care workers.</p> <p><u>Data Analysis:</u> Preliminary qualitative analysis.</p>	<ul style="list-style-type: none"> - Care and respect – in relation to working towards an outcome. - Young people's attitudes to professionals. - Young people's dilemmas. - Ethics of care and children's rights workers. 	The preliminary findings reflected appreciation of the caring relationship with rights workers, yet highlighted some difficulties in representing the young person's rights and concerns.	9/20

Chapter 1 - Introduction

3.	Collins, Spencer & Ward (2010)	USA	Examining the sources and nature of social support for youth transitioning out of foster care.	96 total: 60 female and 36 male.	Age: 19	Youth transitioning out of foster care.	<p><u>Recruitment:</u> Initial mailing via state agency requesting participation and informal mailings via relevant agencies. Interested participants called a hotline.</p> <p><u>Design:</u> Quantitative (evaluation of outcomes) and Qualitative (closed ended survey items and open ended qualitative items).</p> <p><u>Data Collection:</u> Interviews in person.</p> <p><u>Interview Schedule:</u> Sources of support and characteristics of support.</p> <p><u>Data Analysis:</u> Descriptive analyses of qualitative descriptions of supportive relationships.</p>	<p>Sources of support:</p> <ul style="list-style-type: none"> - Professionals - Birth family - Mentors. <p>Characteristics of support:</p> <ul style="list-style-type: none"> - Acceptance of the young person - Constant encouragement - Reliability - Ability to provide assistance when needed. 	The findings suggested that many foster youth have connections with supportive individuals.	13/20
4.	Greeson & Bowen (2008)	USA	To examine foster youth's naturally developed relationships with mentors, their components, benefits and origin.	7 female from ethnic minorities.	Mean age: 16.3 years. 13-20	Currently living in foster care facility, with a relative, or previous foster care experience.	<p><u>Recruitment:</u> 1. Via Department of Social Services recruitment meetings. 2. Via a high school potential youth identified and then approached by the Director of Learning.</p> <p><u>Design:</u> Qualitative (semi-structured interview).</p> <p><u>Data Collection:</u> digital recordings, then transcribed. Using semi-structured interview schedule.</p> <p><u>Interview Schedule:</u> Questions about the relationship: who with, duration, origin, feelings, impact and experience of foster care.</p> <p><u>Data Analysis:</u> Grounded theory: open coding, saturation, axial coding, selective thematic coding, theory generation. ATLAS/ti software used.</p>	<ul style="list-style-type: none"> - Relationship characteristics that matter: trust, love and caring, like parent and child. - Support I receive: emotional, informational and appraisal. - How I've changed. - Thoughts on my future. - What I think about foster care. 	Information was gathered about foster care youth's experience and the important components of mentoring relationships. This supports findings that natural mentor relationships may be of more benefit than programmatic ones. These relationships may be protective for youth exiting foster care.	15/20

Chapter 1 - Introduction

5.	Munson, Smalling, Spencer, Scott & Tracy (2010)	USA	To explore the nature and qualities of non-kin natural mentoring relationships in youth about to leave foster care.	189 total: 123 females 66 males.	Age 19	Older youth exiting the foster care system.	<p><u>Recruitment:</u> Participants taken from a larger longitudinal study of ‘aging out’ of foster care including 9 interviews over 2 years.. Participants identified themselves as having a natural mentor. Original recruitment reported elsewhere.</p> <p><u>Design:</u> Qualitative interview questions.</p> <p><u>Data Collection:</u> Relevant question responses taken from larger dataset transcripts.</p> <p><u>Interview Schedule:</u> Questions about the mentor including: how met, who they are, why they get along, why they listen, example of advice.</p> <p><u>Data Analysis:</u> Thematic analysis informed by relational-cultural theory. ATLAS/ti software used.</p>	<ul style="list-style-type: none"> - Types of natural mentors. - Qualities of these mentors: personality, understanding, similar to youth. - Qualities of the natural mentoring relationships: consistency, longevity, trust, authenticity, respect, empathy. - Nature of support: keeping on track, instrumental support, informational support, emotional support. 	The results gave preliminary information about who natural mentors were, their roles, the qualities of the adults and their relationship and the forms of support they gave.	17/20
6.	Oke, Rostill-Brookes & Larkin (2011)	UK	To explore the relationship elements between foster carers and youth in placements with unexpected good outcome.	7 female foster carers, and two male partners looking after 5 boys and 2 girls.	Looked after people age 12-17. Mean age: 16.5. Foster carer mean age: 57.	Current foster carer placements.	<p><u>Recruitment:</u> Foster carers recruited from a Local Authority. Voluntary participation after initial approach and discussion.</p> <p><u>Design:</u> Qualitative (semi-structured interview)</p> <p><u>Data Collection:</u> Recorded and transcribed interview lasting ½ to 2 hours.</p> <p><u>Interview Schedule:</u> Experience of foster caring, impact of own life events, meaning of family and belonging, experience of relationship with young person and reflections on the young person’s future.</p> <p><u>Data Analysis:</u> Interpretative Phenomenological Analysis</p>	<ul style="list-style-type: none"> - ‘My’ child – ‘clicking’, belonging in the family and parental regard. - Jam in the sandwich – working alongside Local Authority and birth family. - Repair and rebuild – the craft of fostering. - Sticking with it – tenacity and hopefulness. 	This study suggested the importance of recognising when placements ‘click’ and nurtured. Carers should be trusted to re-parent. Findings suggest relationship building interventions and recognition of birth families.	15/20

Chapter 1 - Introduction

							using triangulation from 3 researchers.			
7.	Osterling & Hines (2006)	USA	The study explored the experiences of youth and advocates from a transition to independence programme.	Year 1: 7 advocates 4 foster youth. Year 2: 11 advocates, 3 foster youth. Gender unknown.	Youth Mean age: 16.3	Youth due to transition from foster care.	<u>Recruitment:</u> Quantitative: Youth identified through administrative database of transition programme. Their advocates approached them about the study. <u>Qualitative:</u> advocates phoned and invited to take part and then approached their assigned youth to ask if they would take part. <u>Design:</u> Quantitative descriptive data and qualitative (focus groups and interviews) <u>Data Collection:</u> Survey. Focus groups and interviews audiotaped and transcribed. Lasted 45-60 mins. <u>Interview Schedule:</u> Semi-structured interview guide used. <u>Data Analysis:</u> Quantitative descriptive data and qualitative content analysis.	Youth: - Nature of relationship with advocate. - Types of changes the youth experienced since working with the advocate. - Preparation for independent living. - Recommendations for programme. <u>Advocates:</u> - Nature of relationship with youth. - Challenges experienced while working with youth. - Types of changes the youth has experienced since working with the advocate. - Youth's preparation for independent living. - Recommendations for the programme.	Mentoring programmes may help buffer at risk youth from negative outcomes when they emancipate from the foster care system. Mentor and youth relationships are an important ingredient of this process.	12/20
8.	Schofield (2002)	UK	The study aim was to explore the possibility of secure attachment and family membership through foster care.	40 total: 30 female and 10 male.	4 age 18-19, 10 age 20-22, 15 age 23-25, and 11 age 26-30.	Individuals who had spent at least 3 years of their childhood in one foster placement.	<u>Recruitment:</u> Through child care social workers, family placement social workers, foster care organizations, Children's Rights Officers and advertisements in journals. <u>Design:</u> Qualitative <u>Data Collection:</u> Interviews that were transcribed. <u>Interview Schedule:</u> No information. <u>Data Analysis:</u> Qualitative analysis.	- To love – feel love and security to raise self-esteem. - To act – to learn and develop autonomy and internal locus of control. - To think – aware of others thoughts, regulate affect and plan. - To belong – becoming part of the family. - To hope – feel secure, resilient, have self-esteem and efficacy and cope.	The theoretical and qualitative model can help guide resources and social work practices to promote security, self-efficacy, resolve loss, promote family membership and resilience.	8/20

1.7.6 Quality of the Research

The need to legitimize qualitative research by devising relevant quality guidelines was recognised in the late 1990's (e.g. Elliott, Fisher & Rennie, 1999). Recently devised guidelines by the Critical Appraisal Skills Programme (CASP: 2010) were used to assess the studies that were identified through the current systematic review (see Appendix II for a list of the criteria). Each of the ten criteria was scored between two (when the criteria were fulfilled) and zero (when there is no evidence of the criteria). Each of the ten areas of quality is listed in Table 1.2 for each of the eight studies in the review.

1.7.7 Narrative of the Quality Review

The eight studies included in the review were rated between eight and seventeen according to the CASP (2010) criteria.

1.7.7.1 Research Aims, Methodology and Design

All eight of the studies provided a clear aim for the research, which was justified in terms of its importance and relevance to the current literature and practice. It was also appropriate for all of the studies to use qualitative data to address their aims, which were to ascertain individuals' experiences of relationships. The area of research design appeared to polarize the studies, with four scoring two (Ahrens *et al.*, 2011; Greeson & Bowen, 2008; Munson *et al.*, 2010; Oke *et al.*, 2011) and four scoring zero (Barnes, 2007; Collins *et al.*, 2010; Osterling & Hines, 2006; Schofield, 2002). This disparity was due to either reports of an explicit qualitative methodology or vague and undefined methodology.

1.7.7.2 Recruitment and Data Collection

All of the studies described appropriate recruitment strategies for the aims of the research. However, Munson and colleagues (2010) referred to a previous paper, which described recruitment strategies from a larger original study from which their data was accessed (McMillen, Scott, Zitna, Ollie, Munson & Spiznagel, 2004). Within the original paper, these authors were one of only three studies (also Collins *et al.*, 2010; Osterling & Hines, 2006) to provide the rate at which potential

participants agreed to participate. Collins and colleagues (2010) were the only researchers who also gave explanations about why some participants chose not to take part. Identification of participants was usually through services that supported YPLC, thus being purposive samples, or from larger studies examining LAC. Only one study also included a 'snowballing' recruitment strategy (e.g. Ahrens *et al.*, 2011), but the details of this were not provided.

The quality of information about data collection in the studies was varied. A common theme was for incomplete information about the content of the interview, with only three studies providing ample information in the article (e.g. Ahrens *et al.*, 2011; Greeson & Bowen, 2008; Munson *et al.*, 2010). In addition, only one study mentioned monitoring saturation during the interviews (e.g. Ahrens *et al.*, 2011).

1.7.7.3 Reflexivity

Researcher reflexivity was an area of quality that was particularly low across all of the studies, with none of them achieving a score of two. Several of the studies did not consider the potential for researcher bias (e.g. Greeson & Bowen, 2008; Munson *et al.*, 2010; Schofield, 2002). No position statements were made in any of the articles to outline the researcher's background and its potential influence, beyond one study that noted the white, female, middle class composition of the research team (e.g. Ahrens *et al.*, 2011) and another researcher acknowledging their Clinical Psychologist role within the service from which data was collected (e.g. Oke *et al.*, 2011). In contrast, another study used a young people's advisory group that consulted on recruitment, methods, interview design and findings interpretation, but this was considered in a service user involvement role rather than in relation to researcher bias (e.g. Barnes, 2007). If there was a focus on researcher bias, it was usually made in reference to data analysis, where multiple analyst opinions were used (e.g. Ahrens *et al.*, 2011; Osterling & Hines, 2006;).

1.7.7.4 Ethical Issues

Several of the articles did not report any consideration or implementation of ethical standards (e.g. Ahrens *et al.*, 2011; Barnes, 2007; Schofield, 2002). Where ethical issues were reported, it was in relation to either informed consent and confidentiality afforded and explained to participants, or University/Service ethical approval, with

only three studies reporting both (e.g. Collins *et al.*, 2010; Greeson & Bowen, 2008; Munson *et al.*, 2010).

1.7.7.5 Data Analysis

Poor quality reflexivity within the reviewed studies meant that none of the studies achieved a top score for data analysis. As none of the studies included position statements, the researchers did not report addressing their personal influence on the analysis and presentation of the results. Other areas were included by most of the studies, such as outlining a clear procedure for analysis, supporting findings with suitable quotes and acknowledging researcher bias in the form of multiple analysts. Two studies only included supporting quotes for their results, as there was no information about the analysis process or the influence of researcher bias (e.g. Osterling & Hines, 2006; Schofield, 2002).

1.7.7.6 Findings and Value of Research

All of the studies reported their findings in relation to the original research question and with reference to current literature and many related the findings to policy and service provision. However, some studies were not explicit as they reported their findings as areas of interest, rather than empirically determined categories, often reflecting the lack of a specific methodology for analysis (e.g. Barnes, 2007; Collins *et al.*, 2010). Discussion about transferability of the results occurred in only five of the studies (e.g. Ahrens *et al.*, 2011; Barnes, 2008; Collins *et al.*, 2010; Munson *et al.*, 2010; Osterling & Hines, 2006).

Table 1.2 Quality Framework of Qualitative Studies

Author/s	Aims	Methodology	Research Design	Recruitment	Data Collection	Reflexivity	Ethical Issues	Data Analysis	Findings	Value	Total Score
	Was there a clear statement of the aims of the research?	Was a qualitative methodology appropriate?	Was the research design appropriate to address the aims of the research?	Was the recruitment strategy appropriate to the aims of the research?	Was the data collected in a way that addressed the research issue?	Was the relationship between researcher and participants adequately considered?	Were ethical issues taken into consideration?	Was the data analysis sufficiently rigorous?	Was there a clear statement of findings?	How valuable is the research?	
1. Ahrens, DuBois, Garrison, Spencer, Richardson & Lozano (2011)	<u>SCORE: 2</u> Clear aim, importance and relevance stated, following a comprehensive and focussed literature review.	<u>SCORE: 2</u> The study sought to examine participants' subjective experience of developing relationships.	<u>SCORE: 2</u> Justification and explanation for design and theoretical thematic analysis given.	<u>SCORE: 1</u> Sources of recruitment described and justified, although specifics of snowballing and purposive sampling not outlined and no information on participation rates	<u>SCORE: 2</u> The setting for data collection was justified and clear information about semi-structured interviews, audio recording and transcribing provided. Saturation monitored during interview.	<u>SCORE: 1</u> The female, white, middle class status of interviewers and researchers was noted for its influence on results but not adequately considered.	<u>SCORE: 0</u> Details about ethical standards not given.	<u>SCORE: 1</u> Clear procedure of the analysis reported. Quotes in results. Researcher bias briefly commented upon.	<u>SCORE: 2</u> Explicit reporting of findings. Themes sought to support existing theory, but new themes and variation within themes noted. Respondent validation and multiple analysts reported. Discussed referring to research question.	<u>SCORE: 2</u> Contribution of research to existing knowledge outlined. Hypotheses about implementing findings provided. Limitations of specific sample acknowledged.	15/20
2. Barnes (2007)	<u>SCORE: 2</u> Clear aim, importance and relevance stated.	<u>SCORE: 2</u> The study sought to examine participants' subjective experience and views of working with	<u>SCORE: 0</u> No justification of the research design, no specific method outlined.	<u>SCORE: 0</u> A purposive sample was selected, but information on why particular participants selected and uptake not	<u>SCORE: 1</u> Data was collected from relevant projects, by interview, although the content of interviews not	<u>SCORE: 1</u> Young people's advisory group used for recruitment, methods, interview design and	<u>SCORE: 0</u> Details about ethical standards relating to the study were not given.	<u>SCORE: 1</u> No description of analysis process. Sufficient data used to support findings. No comment on researcher	<u>SCORE: 1</u> Findings reported under headings, but not explicitly themes. Respondent validation reported.	<u>SCORE: 1</u> Results discussed relating to relevant ethical and philosophical stances, for example,	9/20

Chapter 1 - Introduction

		children's rights and social care professionals.		given.	provided. The form of the data also not stated.	findings interpretation. Researcher's position and role not stated.		influence, but young people's advisory group and accounts from professionals used to balance analysis and results.	Findings discussed relating to research question.	balancing rights and care. Sample not representative of whole UK acknowledged.	
3. Collins, Spencer & Ward (2010)	<u>SCORE: 2</u> Clear aims, importance and relevance stated, following a comprehensive and focussed literature review.	<u>SCORE: 2</u> Appropriate qualitative methodology to explore the types and nature of supportive relationships experienced by foster youth.	<u>SCORE: 0</u> Fairly simplistic analysis and thus limited research design.	<u>SCORE: 2</u> Recruitment was appropriate and geographically wide for the research question. Information about why some participants did not take part.	<u>SCORE: 1</u> Interviews method of data collection. Location of interviews and specific content not known, but areas stated. Form of data not clear. Saturation not discussed, but interview completeness mentioned.	<u>SCORE: 0</u> No discussion about interviewer or researcher role and bias.	<u>SCORE: 2</u> Informed consent gained, service approval of the study gained and confidentiality ensured.	<u>SCORE: 1</u> Little description of analysis process. Some interview quotes in results. Two analysts coded data and third resolved discrepancies.	<u>SCORE: 1</u> Themes from the data not clear – listed at end of section. Findings discussed in relation to the original research question.	<u>SCORE: 2</u> Discussed in relation to research question, service provision, literature, limitations of generalizability and future areas of research.	13/20
4. Greeson & Bowen (2008)	<u>SCORE: 2</u> Clear aims, importance and relevance stated, following a comprehensive and focussed literature review.	<u>SCORE: 2</u> This study sought to explore foster youth's experience and natural mentor relationships, thus qualitative methodology was appropriate.	<u>SCORE: 2</u> The research design was justified. Grounded theory was described as the method used.	<u>SCORE: 2</u> Sources of recruitment were described and relevance of participants justified. However, rate of participant uptake was not discussed.	<u>SCORE: 2</u> Data was collected at sites convenient for participants. Semi-structured interview questions included. Digital recordings, transcribed.	<u>SCORE: 0</u> No indication of consideration of researcher bias.	<u>SCORE: 2</u> University ethical approval gained, informed consent outlined.	<u>SCORE: 1</u> Grounded theory analysis process described. Sufficient quotes used to illustrate findings. No indication of considering researcher bias.	<u>SCORE: 1</u> The findings are explicit in terms of themes found, relation to literature and research question. No mention of credibility checks.	<u>SCORE: 1</u> Contribution of research findings related to current literature. Implications for practice outlined, but not future research or transferability of results.	15/20

Chapter 1 - Introduction

5. Munson, Smalling, Spencer, Scott & Tracy (2010)	<u>SCORE: 2</u> Clear aims, importance and relevance stated, following a comprehensive literature review.	<u>SCORE: 2</u> Qualitative methodology was suitable to explore individuals' experience of natural mentoring relationships.	<u>SCORE: 2</u> Justification of the theory informing the thematic analysis and description of procedure.	<u>SCORE: 2</u> Recruitment stated in original paper (McMillen <i>et al.</i> , 2004) – appropriate identification of participants and participation rates stated.	<u>SCORE: 2</u> Data collection stated in original paper (McMillen <i>et al.</i> , 2004) – Participants interviewed at home via interview. Interview questions stated.	<u>SCORE: 0</u> No information about researcher role and bias with participants.	<u>SCORE: 2</u> Ethical issues stated in original paper – University ethics committee approval and informed consent gained.	<u>SCORE: 1</u> Description of analysis process and quotes used in results. Researcher analysis bias addressed through multiple analysts and consensus on results, but researcher position not considered.	<u>SCORE: 2</u> Findings are explicit, more than one analyst used and findings discussed relating to research question.	<u>SCORE: 2</u> Results discussed relating to current literature and new areas for research identified. Policy and practice not discussed. Transferability discussed.	17/20
6. Oke, Rostill-Brookes & Larkin (2011)	<u>SCORE: 2</u> Clear aims, importance and relevance stated, following a comprehensive and focussed literature review.	<u>SCORE: 2</u> A qualitative methodology was appropriate as the study focussed on foster carers' experience of providing unexpected good placement outcomes and stability.	<u>SCORE: 2</u> A description of IPA procedure given and rationale about the utility of qualitative methodology for gaining participants' perspective.	<u>SCORE: 2</u> Full explanation of participant selection, voluntary participation and stringent inclusion criteria. No information about uptake rate.	<u>SCORE: 1</u> Data collected at locations convenient for participants. Interview based on available schedule and outlined extra areas. Interviews recorded but not mentioned how. No discussion of saturation.	<u>SCORE: 1</u> Researcher acknowledged their role as Clinical Psychologist in the service and pre-existing relationships with participants, but did not reflect on the impact of this.	<u>SCORE: 1</u> University ethical approval gained. No details about informed consent or confidentiality.	<u>SCORE: 1</u> A brief description of IPA analysis process. Sufficient interview data used to support themes. Three researchers analysed same data to reduce bias.	<u>SCORE: 2</u> The findings are explicit. More than one analyst. Findings discussed in relation to original research question.	<u>SCORE: 1</u> Researcher discusses the contribution of the findings to current policy, practice and literature. No new areas of research identified or how research may be transferred to other populations.	15/20
7. Osterling & Hines (2006)	<u>SCORE: 2</u> Clear aims, importance and relevance stated alongside a review of relevant literature and	<u>SCORE: 2</u> Qualitative methods were appropriate to examine the experiences of the youth and mentors in a programme.	<u>SCORE: 0</u> Nothing is stated about the research design beyond 'qualitative' and 'content analysis.'	<u>SCORE: 1</u> Participant selection was described and justified. Participation rates revealed but not discussed.	<u>SCORE: 1</u> Data were collected through interview and focus groups. Little information on interview	<u>SCORE: 1</u> There was no consideration about the relationship between the researcher and participants. However,	<u>SCORE: 1</u> Informed consent, confidentiality and anonymity given and explained to all participants.	<u>SCORE: 1</u> Inadequate description of analysis process and how themes derived. Quotes from data used to	<u>SCORE: 2</u> The findings are explicit and discussed in relation to the research question. Results also independently	<u>SCORE: 1</u> Results discussed in relation to current literature and informing mentoring programmes.	12/20

Chapter 1 - Introduction

	policy.				schedule content.	results were independently reviewed.		qualify themes. No consideration of researcher bias.	reviewed.	Transferability of results to other areas of the programme discussed. No future research areas.	
8. Schofield (2002)	<u>SCORE: 2</u> Clear aims, importance and relevance stated alongside a review of relevant theory.	<u>SCORE: 2</u> The research sought to answer the research question about foster experience of individuals and how it contributed to their lives.	<u>SCORE: 0</u> Nothing is stated about the research design beyond 'qualitative.'	<u>SCORE: 1</u> Sources of recruitment were appropriate, although no detail about the process.	<u>SCORE: 0</u> No information on data collection beyond 'interviews'.	<u>SCORE: 0</u> No consideration of the relationship between the researcher and participants.	<u>SCORE: 0</u> Consideration of ethical issues was not reported.	<u>SCORE: 1</u> No information about the analysis process. Some data was presented to support the findings. No information on bias.	<u>SCORE: 1</u> Findings are explicit and discussed with reference to the literature and original research question. No discussion about credibility of findings.	<u>SCORE: 1</u> The researcher discusses the findings in relation to current practice, policy and literature. No information on future research or transferability of results.	8/20

1.7.8 Summary

All of the studies included in this review reported useful and interesting data in an attempt to achieve a fuller understanding of relationships involving LAC. However, only four of the studies achieved an overall quality rating of 15 or more out of 20 (Ahrens *et al.*, 2011; Greeson & Bowen, 2008; Munson *et al.*, 2010; Oke *et al.*, 2011). Perhaps the trend of later publishing dates, compared to the lower quality studies, reflects an increase in the quality of qualitative studies generally. In addition, the four higher quality studies used formal qualitative methodologies including: thematic analysis, grounded theory and interpretative phenomenological analysis. Even so, none of the studies reported sufficient researcher reflexivity, potentially undermining their results and not enabling the reader to position the results in relation to the researchers.

Some researchers have fought against quality frameworks for qualitative research, stating that they cannot be applied to the vast range of different underlying philosophies (Boschner, 2000). What the current review has shown is that those studies that use a formal qualitative methodology were reported in a higher quality manner. Perhaps the most important area of quality in research, to safeguard participants, is maintaining ethical standards. It was therefore surprising that several of the studies in this review did not report their ethical procedures and standards, which might suggest that they did not adhere to any. All of the research in the current review was conducted in the UK and USA, countries that have clear ethical standards relating to research that need to be maintained. According to the Committee on Publication Ethics (COPE: Rees, 2011), details of ethical approval and informed consent is required for publications for studies in humans, which should be sought by the journal and the peer reviewers. The dissemination of potentially unethical research calls into question not only the research itself but the integrity of the journal that publishes it. It is also potentially damaging to the reputation of qualitative research.

Considering the range of quality in the studies found during this systematic review, studies with a quality score below ten (less than 50%) will be excluded from the following synthesis of theoretical and clinical findings below.

1.7.9 Narrative Synthesis of Theoretical Findings

Four of the six studies included in the narrative of the systematic review explored the qualities of naturally occurring mentoring relationships with YPLC, particularly during the time of transition out of care to independence. These four studies were conducted from the perspective of the YPLC. The other two studies looked at relationships between foster carers and LAC that were unexpectedly successful from the view of the foster carers and the relationship between YPLC with advocates, gathering data from both perspectives.

1.7.10 Theoretical Models Guiding Research

Only three studies explicitly used a theoretical model to inform their research. Munson and colleagues (2010) recognised the lack of theoretical underpinning to natural mentoring research and applied relational-cultural theory (Miller, 1976). This theory proposes that relationships need to be nurtured and built on respect, mutuality, empathy and authenticity, which can lead to psychological growth through openness to new experiences and by providing safety from negative emotions such as contempt and humiliation. The cornerstones of respect, authenticity and empathy from this theory closely align with Rogers' (1957) core conditions for successful helping relationships. Therefore, Munson *et al.* (2010) grounded their study in research findings including elements of relationships that have much evidence to support their importance.

Ahrens and colleagues (2011) used a pre-existing model developed by Rhodes (2005) outlining the way in which mentoring relationships support positive outcomes. This model explained mentoring relationships in terms of the bond that is formed (including trust, empathy and mutual benefits) and the beneficial types of support (provisions of guidance and advice, emotional support, role-modelling and instrumental assistance), which could then lead to gains in socio-emotional, cognitive and identity development domains. In turn, these gains were predicted to mediate improvements in psychological, behavioural and educational outcomes. The

mentoring relationships were also shown to be moderated by factors such as: length and quality of the relationship, the mentor's professional background, the young person's past relationships with caregivers, social competency, developmental stage and current family and community context.

Resilience was a concept drawn upon by Osterling and Hines (2006), defined as "successful adaptation despite risk and adversity" (p. 3. Masten, 1994). Their focus on what underpins or contributes towards positive outcomes was related to successful transition from foster care to independence and the role of a mentor and the strength of the relationship.

Social support, particularly during times of transition from foster care to independence, was a theoretical area that underpinned the studies by Collins *et al.* (2010) and Greenson and Bowen (2008). Having an adult as social support was seen as protective and these researchers wanted to look at the protective aspects of good relationships, although they did not allude to the resilience literature.

In a similar vein, Oke and colleagues (2011) wanted to examine 'what works' with respect to stable foster placements and how this could inform service provision and policy. Instead of basing their research on established theory, they concentrated on the constructs of 'commitment' and 'belonging,' which they believed had been alluded to in previous research, yet had not been formally operationalised.

Commitment involves responsiveness, emotional bond and commitment to the child and how these feed into future hopes for that child. Belonging refers to a sense of origin or an emotional connection to a social group or physical location. A tension between belonging and a need to differentiate grows as the young person gets older (Grosso & Nagliero, 2004). Therefore, Oke *et al.* (2011) took the opportunity to explore loosely formed concepts through their study.

1.7.11 Evidence Base

Four of the six studies reviewed looked at natural mentoring relationships. All reported with whom these relationships occurred; yet Ahrens *et al* (2011) only provided the types of relationship (family members, professionals or adults informally involved with the youth) and did not report the frequency of these within

the sample. Table 1.3 shows the types of mentor/supportive relationships and their frequency within the sample from the other three studies.

Table 1.3 Frequency of Different Types of Supportive Relationship from Three Studies

STUDY	Collins <i>et al.</i> (2010) Natural mentors who are not caregivers (n = 65)	Munson <i>et al.</i> (2010) Unrelated natural mentors (n = 189)	Osterling & Hines (2006) Someone to ask for help or advice (n = 52)
Mentor/support type			
Birth family member (Parent or sibling)	4 (6.2%)	n/a	27 (52.9%)
Extended family (aunt, uncle, grandparent, stepparent, cousin)	12 (18.5%)		
Friend	5 (7.7%)	7 (3.7%)	35 (68.6%)
Child welfare professionals (foster parents, placement staff, social worker, professional mentor)	22 (33.8%)	67 (35.4%)	46 (90.2%)
Community Members (coach, neighbour, teacher, other adults)	22 (33.8%)	100 (52.9%)	42 (82.3%)

As Table 1.3 shows, a variety of people fulfilled the role of support or natural mentor for the YPLC. The most frequently occurring types of individuals from all of the studies were child welfare professionals and community members, perhaps reflecting that a more formal relationship was necessary to nurture the aspirations and needs of the YPLC.

A comparison of the different elements of the supportive relationships that the participants experienced across studies was conducted. Walsh and Downe (2005) suggest comparing themes between studies through a table. This was conducted with the themes from the studies included in the review, to uncover similarities between

the studies. As Collins *et al.* (2010) did not explicitly produce themes, their summary of characteristics from the data will be used instead. A list of the themes, subthemes and further descriptions is available in Appendix III. The themes were examined for reoccurring similarities, producing overarching themes for discussion. Sometimes a single theme from a study contained more than one of the overarching themes and therefore was included more than once. Each of the overarching themes will then be explored in the context of the relevant studies shown in Table 1.4.

Table 1.4 Occurrence of Overarching Themes Across Included Studies

Study Overarching theme	Ahrens <i>et al.</i> (2011)	Collins <i>et al.</i> (2010)	Greeson & Bowen (2008)	Munson <i>et al.</i> (2010)	Oke <i>et al.</i> (2011)	Osterling & Hines (2006)
Security, Love & Trust			*	*	*	*
Fear of Rejection	*					
Genuineness	*			*		
Acceptance	*	*		*		
Empathy				*	*	
Similarity/ Rapport	*			*		*
Continuity/ Reliability	*	*	*	*	*	*
Responsive to Needs	*	*				*
Development/ Change	*		*		*	*
Encouragement		*				*
Support	*		*	*		*
Preparing for Life	*					*
System Limitations	*		*		*	*

1.7.11.1 Security, Love and Trust

Features of a secure attachment relationship, security, love and trust (Bowlby, 1980) were themes apparent in four of the studies. In Greeson and Bowen's (2008) study of naturally developed mentors, the YPLC described the relationship characteristics that mattered as: 'trust', 'love and caring' and 'like parent and child'. The young people described the development of trust over time, leading to the formation of a relationship similar to that of parent and child. Similarly, YPLC in Munson *et al.*'s (2010) study also provided the theme of 'trust'. From the perspective of foster carers with unexpected successful placement outcomes, Oke *et al.* (2011) explained that their theme 'My child – clicking, belonging to the family and parental regard' referred to parental commitment to the child and falling in love with them. Osterling and Hines (2006) also found that from the perspective of mentors, trust needed to be developed over time, before the mentors could begin the focus of their work with the YPLC. Therefore, the cornerstone of attachment, security, love and trust, was seen as an explicit theme in four of the six studies, recognised by both sides of the relationship including YPLC, their foster parents and mentors.

1.7.11.2 Fear of Rejection

Perhaps providing the alternate view, Ahrens *et al.* (2011) captured the overarching theme of fear of rejection from their sample of YPLC. Their theme 'barriers to the initial connection' described fear on the part of the YPLC regarding emotional risk, indebtedness, being failed and not living up to their natural mentor's expectations once the relationship had developed. These themes may be more descriptive of insecure attachments (Bowlby, 2005) and the barriers that need to be overcome before the relationship forms. Similar to the evidence from studies that included a 'security, love and trust' theme, trust took time to develop.

1.7.11.3 *Genuineness*

Genuineness appeared to capture themes from two of the included studies: in the Ahrens *et al.* (2010) study the sub-themes of ‘authentic displays of affection/emotion support by the adult,’ ‘adult opens up/shares their own experiences,’ ‘adult goes beyond the prescribed relationship’ and in the Munson *et al.* (2010) study ‘authenticity,’ as an important element of the mentoring relationship. This element of the relationships described between YPLC and their mentors meant that they felt comfortable within the relationship and believed that their mentor would be predictable and had showed that they cared about them. Integration, or congruence, within a relationship, being able to be yourself, thus denoting genuineness, has been recognised as one of the three core relationship conditions for an effective helper (Rogers, 1957).

1.7.11.4 *Acceptance*

Being accepted was a theme found, in one form or another, by researchers in three of the studies, all exploring YPLC’s experience of mentoring/supportive relationships. Ahrens *et al.* (2011) found that the YPLC described experiences that were captured in the sub-theme of ‘adult respects youth and their past experience.’ Collins *et al.* (2010) also described acceptance of the young person as important in the relationship. Finally, Munson and colleagues (2010), found a theme of ‘respect’ important to the young people. They relished being respected for “who they are.” Acceptance is another of the three core relationship conditions conducive to change outlined by Rogers (1957). He coined the term ‘unconditional positive regard’ to denote a warm acceptance of the individual and their experience.

1.7.11.5 *Empathy*

Two studies reported themes that related to the concept of empathy. Munson *et al.* (2010) described the theme of ‘empathy’ within their data as the YPLC stated that they felt understood within the context of their complex lives. Being known and understood then enabled them to feel more accepted by their mentors. From the angle of foster carers talking about their relationships with LAC, Oke *et al.* (2011) talked about empathy in their theme ‘Jam in the Sandwich’ relating to working alongside the local authority and birth family. Within this theme they described

foster parents empathising with the LAC about the impact of contact with their birth family and their own willingness to make commitments to aid the process. Even though only two of the studies reported themes that explicitly included empathy, this is the third core condition of helping relationships outlined by Rogers (1957).

Empathy is the experience of the individual's world and awareness of it 'as if' it were your own, and contributes to an interpersonal atmosphere that is highly conducive to change.

1.7.11.6 Similarity/Rapport

The issue of feeling similar and developing rapport within a relationship was echoed in themes from three of the included studies. Ahrens *et al.* (2011) described 'shared characteristics between the youth and adult' as a sub-theme within the theme 'facilitators of the initial connection,' which included issues such as shared interests and similar cultural background, sense of humour, or shared experience of the foster system. These similarities then facilitated the initiation of the relationship. Similarly, Munson *et al.* (2010) included the sub-theme 'similar to youth' within the theme 'qualities of mentor.' This included similarities in personalities, interests, life experiences and backgrounds. From the aspect of the advocates, Osterling and Hines' (2006) study reported building rapport with the young people and enjoying recreational activities together. It may be that feeling similar to someone with whom they were developing a relationship enabled the young people to feel accepted more easily and then to build trust.

1.7.11.7 Continuity/Reliability

The issue of continuity and reliability within relationships with YPLC was the only overarching theme that emerged in all of the studies. Ahrens *et al.* (2011) described a sub-theme relating to continuity and reliability around formal arrangements, 'mechanism in place to maintain regular contact.' This sub-theme was part of the more general theme 'facilitators of the ongoing relationship' and described ongoing meetings with their mentor relating to other goals and interests. Collins and colleagues' (2010) participants described some supportive relationships with people other than professionals, often involving extended family, where the length of the relationship and 'constant presence' of that person appeared to be an integral part of

its strength. In Greeson and Bowen's (2008) study, the YPLC expressed their perceived continuity and reliability in their relationships with their mentor through the theme 'thoughts on my future.' In this theme they described seeing a role for their natural mentor in their future. Munson and colleagues (2010) similarly described the sub-themes of 'consistency' and 'longevity' in the qualities of their mentor relationship. For the foster carers themselves, the theme of 'sticking with it' described a determination to make the relationship work, not giving up on a child who has been unsuccessful in previous placements (Oke *et al.*, 2011). Finally, Osterling and Hines (2006) described themes from both the YPLC and their mentor relating to continuity and reliability. The YPLC valued their mentor being dependable and consistent and the mentors also recognised their need to be consistent in the maintenance of the relationship. The presence of themes relating to continuity and reliability in all of the included studies suggest that it is a very important element in relationships with YPLC.

1.7.11.8 Responsive to Needs

Being responsive to an individual's needs was expressed in themes from three of the included studies. This concept was evident in several of the sub-themes in Ahrens *et al.*'s (2011) theme of 'facilitators of the ongoing relationship' including: 'adult helps youth understand what to expect,' 'adult plans activities that incorporate the youth's interest,' 'adult displays confidence' and 'adult is responsive to the youth's needs.' Collins *et al.* (2010) reported an important part of the relationship with a mentor as their ability to provide assistance when needed, thus being responsive. Similarly, the advocates in Osterling and Hines' (2006) study explained that they needed to be responsive to the YPLC's learning needs regarding what they needed to achieve before becoming independent.

1.7.11.9 Development/Change

YPLC, their foster carers and advocates acknowledged the change that resulted from the supportive relationships. Ahrens and colleagues (2011) focused on the developmental aspects of change including 'socio-emotional development,' 'cognitive development' and 'identity development.' The YPLC described how their natural mentors had contributed to their development in these areas, specifically

including: healthy relationship skills, managing emotions, planning, problem solving and independent living skills. Greeson and Bowen (2008) reported a theme, 'how I've changed' depicting how mentors had helped young people gain positive changes in their lives such as academic achievement and improved relationships. From the foster carer aspect, change related to their role in the relationship with respect to re-parenting, setting boundaries and repairing the relational damage the child had experienced and enabling them to develop. This was captured in the theme, 'repair and rebuild' (Oke *et al.* 2011). Osterling and Hines (2006) noticed the concept of change from both the aspect of the YPLC and their advocates in the theme 'types of change in the youth since working with the advocate' seen in both samples. The young people described change in relation to their emotional management and communication that had enabled them to develop better relationships. The advocates recognised that the young people felt better, but focused more on practical changes such as educational achievements and becoming independent. This theme shows the capacity for change within functional relationships.

1.7.11.10 Encouragement

Collins *et al.*'s (2010) sample stated that constant encouragement was important in their supportive relationships. Similarly, the young people from Osterling and Hines' (2006) sample reported that encouragement was one of the key elements of their relationships with advocates.

1.7.11.11 Support

The concept of support was apparent in themes from four of the studies. Ahrens *et al.* (2011) listed a variety of support sub-themes under the theme, 'supports provided by the adult,' including: 'tangible support,' 'emotional support,' 'serving as a role model,' 'guidance/advice' and 'support as a parental figure.' This variety of support helped the young people navigate their lives in new ways. Greeson and Bowen (2008) also listed a variety of support under the theme, 'support I receive,' including the sub-themes: 'emotional support,' 'informational support,' 'appraisal support' (offering an opinion) and 'instrumental support' (day to day support in activities). Similarly, Munson and colleagues (2010) listed a variety of support sub-themes under the theme of 'nature of support' including: 'keeping youth on track,'

‘instrumental support,’ ‘informational support’ and ‘emotional support.’ Finally, the YPLC from Osterling and Hines’ (2006) study noted that their advocate being supportive was an important feature of their relationship. Thus, these studies acknowledge a wide range of support, covering similar areas between studies. Although support was not as explicitly reported in the other two studies, it was present in other themes such as encouragement and the support inherent in building an attachment relationship.

1.7.11.12 Preparing for Life

Preparing for life was a relationship characteristic noted in two of the studies. Ahrens *et al.* (2011), identified the sub theme, ‘independent living skills’ under the theme ‘unmet needs’ as some of their participants experienced difficulties such as homelessness regardless of their mentoring relationships. The theme ‘preparation for independent living’ appeared for both the YPLC and their advocates, as this was the nature of the service provided. The young people took a practical view on meeting their needs such as getting a job and bank account, whereas the advocates expressed this theme by assessing the individual’s learning needs and introducing the relevant new experiences and opportunities.

1.7.11.13 System Limitations

The context within which the relationships were formed, the care system and its impact, was expressed in themes from four of the studies. In Ahrens *et al.*’s (2011) study, the ‘logistical barriers’ sub-theme was part of the theme ‘barriers to the ongoing relationship,’ and related to the experience whereby a young person would lose contact with a mentor due to a foster placement change, or from transitioning out of the care system. In Greeson and Bowen’s (2008) study the YPLC described how their experiences of instability within the system contrasted with the relationships they had developed with their mentors in the theme ‘what I think about foster care.’ Foster parents’ experience of system limitations was expressed in the theme ‘jam in the sandwich’ explaining their role alongside the local authority and birth parents (Oke *et al.*, 2011). They reported going against social service beliefs, by fighting for success with a young person labelled as being difficult to place, yet the services were also seen as important for support. The foster carers also had to

hold the relationships with the young person's birth parents, recognising the difficulty that this could cause for the young person. Finally, the advocates from Osterling and Hines' (2006) study described difficulties gaining resources within the child welfare system in the theme 'challenges experienced while working with the youth.' Thus, overall, the theme of system limitations covered many different ways in which the care system could impact upon relationships experienced by individuals placed in care and those working with them.

1.7.12 Summary

The range of themes shown in the studies from this review provides a comprehensive overview of the important elements of relationships experienced by YPLC and some of the people with whom these relationships were developed. Having the views of the young people, their advocates and foster carers provides validation for themes that were experienced from both sides of supportive relationships. The variety of themes expressed within each study may convey the level of theoretical expectations and methodological rigour with which the study was conducted. For example, Ahrens and colleagues (2011) produced the widest variety of themes as they were looking for specific themes to validate a pre-existing model (Rhodes 2005); however, they were also vigilant to new themes and used these to extend the model. In comparison, the lack of variation in themes in Collins *et al.*'s (2010) study, which were drawn from the paper rather than formally defined, reflects the paucity of theoretical underpinning, examining the ill-defined concept of social support with little information about the methodology, reflecting this lower quality study. Overall, the strength of the themes represented within the studies may be assessed by that particular study's quality rating and the overall agreement between different studies.

Qualitative research has often been published in journals that tended to originally focus on quantitative research. This has led to qualitative publication adopting the traditional quantitative format (introduction, method, results and discussion), whereby the research question is couched within existing theory, which may even provide the framework for the qualitative analysis. This format is in contrast to some qualitative methodologies, which encourage openness to findings, where the researcher attempts to hold back on preconceived ideas so that they may truly hear what the participant has to say in a naïve and curious manner (e.g. Willig, 2001).

This approach may not be compatible with researchers who are building a research base in a certain area and certain methodologies acknowledge the role of theory in qualitative analysis (e.g. thematic analysis, Smith *et al.*, 2009). The CASP guidelines do not rate the quality of qualitative research based upon the introduction section – instead, the value of the research is judged depending upon discussion of the contribution of the findings to existing research, practice and policy (CASP, 2010). Therefore, maybe qualitative research needs to change in its publication format to more accurately represent the characteristics of high quality research.

1.7.13 Implications for Future Research

The majority of the studies reviewed here have focused upon mentoring relationships from the perspective of the YPLC (Ahrens *et al.*, 2011; Collins *et al.*, 2010; Greeson & Bowen, 2008; Munson *et al.*, 2010), with two studies looking at the perceptions of foster carers (Oke *et al.*, 2011) and advocates from the aspect of both YPLC and the advocates themselves (Osterling & Hines, 2006). Most of the studies examining young people's experience explicitly looked at the time of transition from care (Collins *et al.*, 2010; Munson *et al.*, 2010; Osterling & Hines, 2006), during a time when transition was likely to be happening (mean age of participants 19.9: Ahrens *et al.*, 2011) or with a very specific population (e.g. minority females; Greeson & Bowen, 2008). Transition out of care is a time when the young people need to be developing specific skills for independent living and also dealing with the stress of leaving the care environment. Future research could look at how relationship needs are fulfilled throughout the individual's lifetime, and a retrospective focus is taken by participants in the current study. The issue of gaining relationship needs through multiple people, rather than a specific few, also warrants further investigation. Again, by taking a need focussed perspective the current study seeks to address the variety of people who can fulfil the developmental and relationship needs of the young person.

1.8 Summary and Study Focus

Research evidence reviewed in the Introduction Chapter has suggested that LAC are a growing population, particularly in Wales (Welsh Government, 2014; Department for Education, 2013), who warrant further understanding due to reported poor long

term outcomes (Jones *et al.*, 2011) and the limited success of services implemented to improve them (Stein, 2006). The resilience literature repeatedly suggests that relationships are a protective factor for LAC and lead to improved outcomes (e.g. Jones, 2012). Although relationships involving maltreatment appear to be the underlying reason for poor outcomes in LAC (Garland *et al.*, 1996; Pears *et al.*, 2013; Runyan & Gould, 1985), supportive and positive relationships may have a reparative and protective capacity (Cameron & Maginn, 2008). Therefore, the role of positive relationships in YPLC's lives is the focus of the current study.

Pringle's (1986) framework for the needs of children was used to explore the areas of love and security, new experiences, praise and recognition, and responsibility and how these might or might not be met through relationships in the YPLC's lives. Previous research promotes attachment with the birth mother as the most important relationship (Bowlby, 2005), which may be limited for YPLC. However, later findings have indicated that attachment relationship styles may not be as static as once considered and that additional and alternative relationships may be very effective for the child to meet their developmental needs (Howes & Oldman, 2001; Howes, 1999). Rather than restricting the examination of positive relationships to a single example, as was the case with studies in the systematic review, the current study sought to examine whether an individual's developmental needs might be met through multiple relationships. The research questions and the methodology used to address these issues will be presented in Chapter Two.

Chapter 2 – Methodology

2.1 Chapter Overview

The Methodology Chapter will begin by outlining the aims of this thesis and the research question. A justification of the qualitative methodology used, Interpretative Phenomenological Analysis (IPA), follows, arguing that it is the most appropriate methodology to explore the research question rather than quantitative or other qualitative methods. A look back at the development of qualitative analysis and the philosophies that IPA draws upon will provide the next focus of this chapter. The sample will then be introduced. The methods of data collection and instruments utilised will then be described, followed by an account of the procedure of the data collection and analysis.

2.2 Aims and Research Questions

The aim of this study is to explore care leavers' experiences of positive relationships whilst growing up and the effect that they have had. This study used a qualitative research methodology to enable exploration of open primary research questions, which is positioned within the participant's realm of knowledge or epistemological position (Smith, Flowers & Larkin, 2009):

What were care leavers' experiences of positive relationships?

If positive relationships existed, what was their influence?

If there was a lack of positive relationships, what would care leavers have wanted?

The secondary research questions engage with existing theory, rather than testing hypotheses, and are explored during interpretation of the qualitative data (Smith *et al.*, 2009).

The first secondary research question draws upon attachment theory and literature about the provision of care services:

Who were the positive relationships with?

The second secondary research question area was drawn from child development literature, from the model of children's developmental needs by Pringle (1986) including love and security, new experiences, praise and recognition and responsibility:

Which areas of developmental needs were met through relationships?

At what time of their life were different developmental needs met?

The methodology used to explore these research questions and to fulfil the aims of this study will now be described.

2.3 Overview and Justification of Qualitative Methodology

To answer the research questions and fulfil the aims of this study a qualitative methodology was required. The qualitative research approach has been described as attempting to capture the richness of human experience (Ashworth, 2003). To quantify data would be to lose the "less tangible meanings and intricacies of our social world" (p. 8, Finlay, 2011). Historically, research in psychology has varied in its methodological approach moving between the richness of human experience and objective scientific discovery.

2.3.1 Development of the Qualitative Method

Ashworth (2003) described the development of the discipline of psychology and the methods of analysis. He stated that psychology was originally concerned with attempting to understand the internal world of experience, which through behaviourism and cognitivism moved from an introspective to an objective methodology. Simultaneously, phenomenology and existentialism rose in the world of philosophy and began to form some fundamental concepts for psychological methodology. Later, Allport challenged the experimental method, wishing to broaden psychological research methods to include idiography, with individuals considered as unique cases who perceive the world around them, similar to the phenomenological and existential view. Constructionism followed, producing an alternative qualitative focus from individuals as perceivers to constructors – how they construct the social world around them. Hermeneutics then went on to consider

the role of the researcher in the interpretation of data, acknowledging their own viewpoint, or construction, intersecting with the data they interpret. Postmodernism took this idea further, stating that everything we perceive is through our own personal construction of it, shaped by culture (social constructivism), standing in contrast to the modernist assumption that an objective truth exists.

2.3.2 Comparison of Qualitative and Quantitative Methods

The exploratory research questions for the current study seek to explore human experience, thus fitting with the phenomenological, existential and idiographic views. Thus, a qualitative method was considered most appropriate. Finlay (2011) describes the differences between qualitative and quantitative research:

Aims – qualitative research is exploratory and inductive rather than seeking to explain and prove as in quantitative research.

Method – qualitative research explores subjective interpretations of the world using, for example, interviews, observation or focus groups. In contrast, quantitative research strives for objectivity, usually using experiments or psychometric data collection.

Researcher's Role – the qualitative researcher acknowledges their socially constructed role and the influence they have in the co-construction of data and therefore reflexively explores these dynamics. The quantitative researcher seeks to gather data objectively, being detached and neutral, attempting to eliminate researcher bias.

Findings – from qualitative research tend to be complex, rich and ambiguous, expressed through words, whereas quantitative findings tend to be numerical, with a focus on scientific rigour.

A step away from the objective, predetermined quantitative methodology was required for the current study to gain further understanding of individuals' experiences. Finlay (2011) draws attention to qualitative research conducted in a phenomenological manner falling in the middle of a continuum of science and art, whereby structure and texture may both be attended to.

2.3.3 Comparison of Various Qualitative Methods

Specifically, Interpretative Phenomenological Analysis (IPA) is a qualitative methodology that seeks to understand an individual's lived experience. It was expected that the participants' experiences in this study would be widely varied, for example, from relationships with family of origin to those with foster carers or support workers. What appeared important was to glean the meaning, impact and sense the participants made of these experiences, the phenomenology, rather than the overarching process and themes/theory, as would be elucidated through grounded theory (Charmaz, 2003). The grounded theory approach seeks to generate a theoretical level account of a specific phenomenon, using relatively larger samples than IPA (Smith *et al.*, 2009). In contrast, IPA offers a more detailed nuanced analysis of the lived experience of individuals (Smith *et al.*, 2009), which was considered more appropriate to consider relationships in the current study, which were likely to be diverse and complex. IPA was chosen over other phenomenological approaches as it is interpretative, compared to Giorgi's phenomenological approach, which is more descriptive. Thus, IPA considers the richness across each individual case, including divergence and convergence (Smith *et al.*, 2009).

2.4 Interpretative Phenomenological Analysis (IPA)

Phenomenology is a philosophy concerned with reflecting upon the specific qualities of an individual's "lived world," giving insight into the human condition (Finlay, 2011) and provides the cornerstone of IPA. A milestone in the development of IPA was a paper by Smith in 1996 (Smith, 1996). His aim was to introduce a qualitative approach centred in psychology to capture the experiential. Early IPA work was mostly in Health Psychology in the UK, but has spread to be employed in other areas of psychology such as clinical, counselling, social and educational psychology and has also spread geographically across the world (Smith *et al.*, 2009). Smith, Flowers and Larkin (2009) describe IPA as a qualitative approach with three significant theoretical features: 1) examining how people make sense and significance of their life experiences, being phenomenological; 2) interpreting, which is informed by hermeneutics; 3) and examining the detail of every case, to understand every individual's experience, thus it is idiographic in nature. These three theoretical areas will now be explored in more detail

2.4.1 Phenomenology

Three main philosophers contributed to the phenomenological perspective: Husserl, Heidegger and Merleau-Ponty (Finlay, 2011; Smith et al., 2009). Smith and colleagues (2009) believe that Husserl's work informed IPA with respect to researcher reflection (*reflexivity*) and setting aside our own preconceptions (*bracketing*) whilst attempting to understand the experience of another.

Husserl, famously stated that we should "go back to the things themselves" (p. 12. Smith *et al.*, 2009). He believed that we needed to side-step our own preconceptions when trying to understand another's experience through using a *phenomenological attitude*. One must be *reflexive*, acknowledging our own perception including the thoughts, values, goals or meanings involved, to acknowledge the taken for granted aspect of experiencing the world (Smith *et al.*, 2009).

The technique of *bracketing* is useful for a researcher conducting IPA, whereby their past or theoretical knowledge is left aside, so that they can immerse themselves in the experience of the participant (Finlay, 2011). To do this requires deep reflection to view the phenomenon with curiosity and 'disciplined naiveté' (Giorgi, 1985). Through 'scientific phenomenological reduction' researchers aim to be fully present during the participant's description, to heighten the present, whilst holding their own past knowledge, usually theoretical or scientific knowledge of existence of the phenomenon (Giorgi, 1985).

Heidegger, who began as Husserl's student, stated that we exist within a social world *intersubjectively* amongst others, where things are made meaningful through practical activities and relationships, which limit our freedom, understandings and reflectivity (Finlay, 2011). Conforming and sharing social norms were described as inescapable (Finlay, 2011). Some researchers have noted that not everything is bracketed during IPA research. For instance, the implicit rules of social interaction still apply. The researcher and participant both engage in the shared focus of the research topic, with shared cultural meanings, which are not bracketed (Ashworth, 1996).

Merleau-Ponty developed the concept of Heidegger's situated and interpretative qualities of what we know about the world to emphasise our *embodied* relationship

to the world, which led to an individualised perspective (Smith *et al.*, 2009; Finlay, 2011). He believed that whilst we can empathise, we cannot share another's experience as we inhabit our own body. Thus, for IPA Merleau-Ponty places the body as a central element in experience.

2.4.2 Hermeneutics

Hermeneutics is the theory of interpretation, which originated from the practice of interpreting texts. It is important for IPA because the researcher is often attempting to interpret the meaning underlying what the participant explicitly states. Smith *et al.* (2009) describe two double hermeneutics in IPA. The first double hermeneutic involves how the researcher makes sense of what a participant is saying about a particular phenomenon. The researcher views everything through their own lens but must try to access the participant's experience through the participant's description. Thus the participant's meaning making is first-order and the researcher's is second-order. The second double hermeneutic originated from the work of Ricour, whereby theoretical perspectives are used to enlighten the phenomenon described in the original experience. Thus, the researcher tries to understand the participant's experience, whilst analysing and trying to make sense of it.

Finlay (2011) described Heidegger's contribution to hermeneutics. Heidegger believed that it is only through language and its interpretation that our experience of being can be understood, which is influenced by our own history. He suggests that instead we prioritize what is to be interpreted above our own preconceptions.

Heidegger describes the *hermeneutic circle* whereby to understand a part of something you must look at the whole, and to understand the whole you must look at the parts, which is inherently circular (Smith *et al.*, 2009). In the process of interpretation we begin with our own implicit pre-understandings from our socio-cultural background and then we must be open to discover something new. This then creates a 'resistance' when initial understandings are challenged, which then leads to an interpretive revision of the fore-understanding. Through the process of going round in this circle understanding is deepened.

When conducting IPA, interpretation is aided through reflection of one's own preconceptions during the analysis, utilising a cyclical approach to bracketing using

the *hermeneutic circle*. Smith (2007) describes this as a process originating from his own preconceptions, based upon experience and expertise. These preconceptions are then acknowledged and bracketed (as far as possible) to enable him to hear and engage with the participant's experience.

2.4.3 Idiography

Idiography is a shift from most 'nomothetic' psychology, as it considers the particular rather than the group or population. In IPA this is conducted firstly through the detail and depth of analysis and secondly through "understanding how particular experiential phenomena (an event, process or relationship) have been understood from the perspective of particular people, in a particular context" (p. 29. Smith *et al.*, 2009), thus acknowledging the complexity of human psychology. From a phenomenological view, experience is embodied within the individual, and is thus idiographic. However, it also considers the embedded nature of the individual within society and culture and relationships. Thus IPA may make use of single case studies, especially at the beginning of studying a phenomenon, when the 'particulars' are important to remain attuned to human experience (Galton, 1883, in Allport, 1951). Further cases may be drawn together from small purposive samples for additional analysis to enable tentative shared and distinct themes to be explored (Smith *et al.*, 2009).

Overall, IPA has drawn on several strands of philosophy, with some disagreement and development over time within the different areas. Smith, Flowers and Larkin (2009) see the different philosophical views as complementary: Husserl's intrapsychic view; Merleau Ponty's concern with embodiment; Heidegger's focus upon existentialism. They see IPA as "attempting to further the intellectual current of phenomenology in the context of psychology" (p. 34. Smith *et al.*, 2009), whereby psychology often involves cognitive, affective and existential foci. Thus, utilising the amalgamation of philosophical ideas, the current study will follow Smith, Flowers and Larkin's (2009) guidelines for conducting IPA.

2.5 Ensuring Quality in IPA Research

Ensuring that qualitative research attained a particular standard of quality became a focus during the 1990s and 2000s, when the health professional community began to recognise the utility of this style of research (Malterud, 2001). Medical professionals who had previously relied on the standards of quantitative enquiry and the gold standard of randomised controlled trials required information about how to use the different standards applied to qualitative studies involving tentative interpretations rather than rigorous evidence (Stiles, 1993).

Willig (2001) states that each of the qualitative methods needs to be evaluated against its epistemological position, varying from “naïve realist” to “radical relativist”. Within this epistemological gradient, IPA was classified as a “contextual constructionist” approach. Thus, it must be evaluated according to how successfully the observations have been grounded within the contexts that generated them. In order to be quality research the contextual constructionist type of study needs to address issues of reflexivity, acknowledging and demonstrating how the researcher’s perspective and position influenced the research and results (Willig, 2001).

Several sets of criteria have been collated against which the quality of qualitative studies can be assessed. For example, Henwood and Pidgeon (1992) developed seven criteria designed to ensure the rigour of qualitative research, while enabling idiosyncrasy and creativity in the research and analysis process. A more recent set of seven guidelines were developed by Elliott, Fischer and Rennie (1999), which will now be outlined according to the current study.

2.5.1 *Owning One’s Perspective*

The researcher should own their perspective by disclosing their own values and assumptions so that readers can interpret the analysis, which has been conducted through the researcher’s eyes (Elliott *et al.*, 1999). This reflexive stance has been recognised by other authors’ quality standards in qualitative research. Stiles (1993) suggested that the researcher should disclose their orientation, which includes their expectations for the study, preconceptions, values and theoretical orientation. In addition, Yardley (2000) stated that the researcher should acknowledge the social

context of their relationship with participants, to show how this relationship might have influenced the research. The process of reflexivity needs to continue throughout the research process (Malterud, 2001). In this way the researcher's contribution to and participation in the research process is explicit and acknowledges their position during interpretation.

In the current study, the researcher's perspective was acknowledged through a position statement to outline their personal and professional position in relation to the research (see below). How their perspective developed throughout the research process was also captured through developments in the reflective diary (Appendix IV). The researcher also engaged in a bracketing interview with other trainee clinical psychologists engaging in IPA analysis. A bracketing interview is used to explore the impact of the researcher's personal and professional background during the data collection and analysis, thus providing an indication of how their assumptions and experiences may be influencing the "construction of knowledge" (Rolls & Relf, 2006). The interview took place after data collection, during analysis, to elucidate the role and influence of the researcher's assumptions, expectations and values preceding data collection and how these changed during the research process.

Researcher's Position Statement

I am a white middle class female aged 36 years old. I was older than all of the participants in this study. I grew up in North West England, have lived in various locations around the UK, in Australia and settled in South Wales 6 years ago. Most participants lived their entire lives in South Wales, with a couple of exceptions who originally came from England.

I am married and currently pregnant expecting our first child, thus I currently don't have experience of being on the parenting side of positive relationships. However, I do have beliefs about prioritising a child's needs and making sure they have a supportive and rich growing up environment in which they can be cherished and can flourish.

I come from a blended family. My mother came to the marriage with my father with a three year old daughter. My father also had three sons from his previous marriage (age 8-11 at that time) who lived with their mother. The oldest two sons were

adopted. From a young age, when I asked the pertinent question, “why do all the boys [my brothers] have different coloured hair?” I was told by my mother that the oldest two were adopted and I accepted the premise of non-birth parents raising children. It is something that I have accepted without question in relation to my brothers’ relationships with me. Thus, I have experience of the family dynamics in relation to birth, adoptive and step-parents, similar to some of the participants.

The bracketing interview revealed that my pre-conceived views on the permanence of adopted family were in contrast to many participants’ experience of the fostering system, where they felt the finite nature and distance from their carers.

My personal development whilst growing up was relatively secure. My parents developed stricter boundaries on behaviour and public appearance than I have developed myself, yet I was able to maintain these boundaries in relation to achieving a good education.

The bracketing interview revealed that I experienced the security necessary for academic development, whereas several participants described difficulty engaging with learning as they felt insecure within their care environment.

Overall, I have a variety of personal experience relating to multiple families coming together and the impact of how well this enables the potential for positive relationships to form. I have definitely felt the impact of significant positive relationships with my parents and sister whilst growing up and to a lesser extent with my brothers, due to limited contact. However, I have also become aware of the limitations of the positive relationships I experienced due to the individuals’ own personal difficulties, which I believe has led to an element of self-sufficiency within myself.

I am currently in my final year of clinical psychology training and my elective placement is in an adult mental health setting. I have focussed upon the Cognitive Analytic Therapy (CAT) Model during this placement, thus I am primed to notice the influence of parent figure-child relationships, particularly in relation to attachment. I do not currently have contact with any individuals who have experience of the care system in my current post. However, I spoke to many individuals who had experience of the care system, who were currently in prison

during my PhD in Criminology and whilst working for the Prison Service in South Wales. This made me aware of the long term impact of people not receiving the level of care and attention that would prepare them to maintain society's rules. I have a strong belief in attempting to understand someone's past and context in relation to adult vulnerabilities.

The research area was developed in collaboration with my clinical and academic supervisors, one of whom runs the service from which the data was collected. The topics chosen reflected my interest in the role of relationships in development, probably influenced by my growing interest in adult mental health and the CAT and attachment models. The research area also enabled me to explore my curiosity about people's resilience in the face of difficult and sometimes damaging environments. This interest began during interviews for my PhD examining the assault offence process of male and female offenders in Victoria, Australia, which included exploring the participant's background for suggestions about what made them susceptible to violent behaviour.

Prior to the current study I believed that the role of the main caregiver was key to an individual's propensity for development. However, during the research process my view changed due to reports from participants about their attachment and development seeking natures, which enabled them to find the relationships and develop the skills they needed from many different sources.

2.5.2 Situating the Sample

The researcher is required to describe the participants and their life circumstances so that readers may assess the relevance and applicability of the findings (Elliott *et al.*, 1999). This element of quality is similar to external validity, as it identifies the limitations of applying the findings to other samples, beyond the context of the current study (Malterud, 2001). In the current study demographic information about participants' age, gender and care pathway were provided (see below, 2.6.3).

2.5.3 Grounding in Examples

Examples of the data should be used to demonstrate the analytic procedures used and the understandings developed, to address the fit between the researcher's

interpretations and the data (Elliott *et al.*, 1999). Yardley (2000) described how transparency relating to the interpretations' fit with the data may be shown through using participant quotes. In the current study, quotes were used to illustrate the themes from the data reported in the results. The quotes used illustrated the breadth and individual experience of participants in relation to each theme. A transcript extract outlining the research process is also available (Appendix V).

2.5.4 Providing Credibility Checks

Elliott and colleagues (1999) state that the researcher should check the credibility of their analysis by referring to others' interpretations of the data or re-analysing the data using a different method of analysis. During the current study, supervision was utilised to ensure credibility of the analysis, through supervisors looking at the analysis process and checking drafts of the results.

2.5.5 Coherence

The data should be presented in a way that shows both the structure of the data and nuances in the data (Elliott *et al.*, 1999), thus creating a convincing story of the data and its analysis (Yardley, 2000). In addition to supervision of the study, the results were presented in Chapter Three with both a table of the themes elicited from the data and quotes from participant interviews, to outline the nuances and variation within the themes.

2.5.6 Accomplishing General Versus Specific Research Tasks

Elliott and colleagues (1999) warn that studies need to show fidelity to the research task. Thus if exploring a particular phenomenon an appropriate range of cases need to be explored, or, if exploring an individual case it needs to be explored systematically. The current study sought to examine the phenomenon of the experience and influence of positive relationships experienced by care leavers. To achieve this, a range of participant accounts were sought and the variety of participants has been outlined in demographic information.

2.5.7 Resonating with readers

Finally, the quality of a qualitative research study may be enhanced through the presentation of the material, so that it stimulates resonance in the reader and expands their understanding (Elliott *et al.*, 1999). Smith, Flowers and Larkin (2009) write about the “third hermeneutic level” in IPA, which is the imagined reader of the project who is trying to make sense of the researcher trying to make sense of the participant. Resonance with the reader may also be enhanced through an awareness of related literature, so that the reader may draw upon other theories to develop the research interpretations (Yardley, 2000). This area of quality was addressed through the literature review of relevant material in the Introductory Chapter One. The results were then compared to other literature in the Discussion Chapter Four. Supervision of the study and write-up also enabled clarification of the material for other readers.

2.6 Participants

A purposive sample was collected from the Action for Children, Skills for Living Project, in South Wales, which provides services for YPLC. Participants were chosen from this service so that the phenomenon of positive relationships in YPLC could be explored. Participants were also selected on their predicted ability to reflect on personal experience, as this was desirable to take part in the study interview. Samples for IPA are collected purposively, as a particular phenomenon is being explored (Smith *et al.*, 2009).

Thirteen potential participants were identified from the Action for Children, Skills for Living Project by the head of service and support workers. Twelve agreed to take part in the study, one potential participant declined participation as they did not wish to talk about themselves. Eleven individuals participated in the study, as one was not available for interview at the agreed appointment time. Smith, Flowers and Larkin (2009) recommend between four and ten interviews for professional doctorates. Therefore, eleven participants is generally considered adequate for similarity and difference, convergence and divergence analysis (Smith & Osborn, 2008).

2.6.1 Inclusion Criteria

Individuals could participate in the study if they:

- Were aged over 18.
- Displayed capacity to provide informed consent.
- Consented to take part in the study.
- Were defined as a care leaver according to the Children Leaving Care Act 2000 (see 1.1.1 for definition).

2.6.2 Exclusion Criteria

Exclusion criteria were outlined for the processes of data collection and analysis, however, in the current study they were not operated on.

Potential participants would have been excluded if they displayed an inability to provide informed consent due to capacity issues such as intoxication or inadequate levels of understanding required to understand the purpose of the study, what is required for participation or possible adverse consequences. The researcher was vigilant to the potential participant's ability to provide informed consent to participate in the study.

A participant's data would have been excluded if they could not access thoughts or feelings about past and potential positive relationships, as the effect of early trauma can impact an individual's memory (Cordon, Pipe, Sayfan, Melinder & Goodman, 2004). All participant data for the current study was sufficient for analysis.

2.6.3 Demographic and Care Pathway Information

The sample included nine female and two male participants. The average participant age was 19.55 years (range 18-22; SD 1.97). The average age when first taken into care was 9.73 years old (range 4-15; SD 4.47), with the average time spent in care of 8.09 years (range 3-15; SD 4.83). Most participants experienced foster care, which was classed as either temporary or permanent, yet when older than 16, some participants experienced B&B placements, shared accommodation and/or supported living. The average number of placements was 8.36 (range 2-26; SD 7.15), with the average longest placement being 6.33 years (range 1-14; SD 4.40).

2.7 Written Materials

2.7.1 Participant Invitation Letter

An invitation letter (see Appendix IX) was sent out by the researcher or given to potential participants by support workers or the team psychologist. It explained the title of the project, the voluntary nature of participation, estimated duration of the interview and how plans would be made to meet for the interview. The purpose of this letter was to enable potential participants to have time to consider whether they wished to participate before arranging the interview.

2.7.2 Participant Information Sheet

The participant information sheet (see Appendix X) was provided with the invitation letter and again at the interview. The participant information sheet outlined: the purpose and scope of the study; why they had been approached to participate; the fact that participation was voluntary and could cease at any time during the interview process; what their participation would involve; the potential benefits and disadvantages of participation; provisions for adverse effects of participation; confidentiality, plans for the results of the research study; the research sponsor and avenues to report concerns or complaints.

2.7.3 Consent Forms

The potential participant was guided through the consent form (see Appendix XI) after the participant information sheet and asked if the interview could begin. The consent form covered several areas of consent including: an understanding of what participation would involve; the fact that participation was voluntary and could be withdrawn; avenues to lodge concerns; security and confidentiality of data; the limits of confidentiality if risk was disclosed; support for adverse consequences; and the choice to agree to take part in the study. If the potential participant agreed to take part in the study then they signed and dated the consent form prior to the interview.

2.7.4 Participant Data Sheet

In addition to the interview, some contextual and demographic information was obtained including: the participant's age, gender and pathway through care placements (see Appendix VIII)

2.7.5 Semi-Structured Interview

In IPA, the objective is to talk to people who can give rich personal accounts of the phenomenon being investigated (Smith *et al.*, 2009). In-depth interviews and diaries are considered the best way to access phenomena or 'experiences' (Smith *et al.*, 2009). For rich data the participant needs to be able to reflect, develop their ideas and express their concerns. Semi-structured interviews have been the preferred method for collecting this type of data (Reid, Flowers & Larkin, 2005). A semi-structured interview schedule helps to guide the researcher towards the areas they wish to explore with the participant so that the research question may be analysed. Whilst the schedule is a useful guide it also allows the researcher to pursue areas of interest that the participant mentions that may not have been anticipated, but are of importance. The current semi-structured interview schedule contained three to six major questions for each interview area, with supplemental questioning being responsive to the conversation developing with the participant (See Appendix VII: Smith & Osborn, 2008). The semi-structured interview explored the four areas of 'needs' in children's lives, as defined by Pringle (1986): love and security, new experiences, praise and recognition and responsibility. In each of the four sections of the interview the participant was asked if they had positive experiences, who these were with and how this had influenced and affected them. Finally, the participant was asked further questions about individuals who featured in their positive relationships such as: the nature of their relationship, how it was formed, what was different about this relationship to others, the positives and negatives of the relationship and how they believe that this relationship had impacted upon their life and on their view of others.

If the participant stated that they had not experienced a satisfactory positive relationship in a particular area of need a second section of the interview explored what the participant would have wished for, including: how someone significant to

them could have behaved differently, if additional people were needed in their lives and how they imagined a positive relationship would have impacted upon their world view and functioning.

The semi-structured interview was piloted with one YPLC, who commented on the relevance and clarity of the questions. The YPLC stated that she found all of the questions understandable and clear when read out to her, even though she experienced dyslexia.

2.7.6 Debriefing Letter

The participant was taken through the debriefing letter following the interview (see Appendix XII). It thanked them for their participation and reiterated what would happen with the data that they had provided, enquired whether they required extra support due to distress from the interview, reassured them regarding confidentiality and invited them to receive a summary of findings from the study.

2.7.7 Ethical Considerations

Ethical approval was gained from Cardiff University School of Psychology Research Ethics Committee prior to commencement of data collection (see Appendix VI for Ethics Approval Letter). No additional approval was required, such as National Research Ethics Service for the National Health Service (as the study participants were not recruited through UK Health Departments) or from the Social Care Research Ethics Committee (as they recommend student research to be reviewed by University Research Ethics Committees).

This study looked at positive relationships experienced by individuals who have involvement in the care system, which may involve sensitive topics, particularly if the individual had negative experiences. To conduct this study ethically it was therefore essential to use several ethical procedures. The study was not conducted until the researcher was sure that informed consent was gained with an individual who displayed capacity to do so. Informed consent ensured understanding of the level of confidentiality, what the study involved and potential adverse consequences and how these would be supported (Smith *et al.*, 2009: for more detail please see the information sheet and consent form, Appendix X and XI).

On a positive note, Finlay states:

“Phenomenological research is potentially transformative for both researcher and participant. It offers individuals the opportunity to be witnessed in their experience and allows them to ‘give voice’ to what they are going through. It also opens new possibilities for both researcher and researched to make sense of the experience in focus” (p. 10. Finlay, 2011).

Indeed, the power of individuals’ stories being witnessed has been recognised in Narrative Therapy (Payne, 2006).

2.8 Procedure

2.8.1 Recruitment

Following ethical approval participants were recruited through the “Skills for Living” project, run by Action for Children, for YPLC. Dr Liz Andrew, the Clinical Supervisor of the project, is the Clinical Psychologist and Clinical Lead. She provided a gatekeeper letter acknowledging her support for the project (see Appendix XIII). She liaised with the team to identify suitable participants from the caseload who would be able to amply reflect upon their experiences. The potential participants were then either sent or given the participant invitation letter (Appendix IX), with the information sheet (Appendix X) enclosed. If a potential participant stated that they wished to participate, arrangements were either made with their support worker to support their travel to the Skills for Living offices or a home visit was arranged with the researcher in accordance with Cardiff and Vale University Health Board lone worker policy.

2.8.2 Interview

During the interview meeting the researcher and potential participant went through the participant information sheet (See Appendix X). If the potential participant communicated that they understood the involvement and implications of participation, then they were taken through the consent form, to sign, if they were happy and deemed to have capacity to do so (See Appendix XI). The researcher and

participant then filled in the participant data sheet (See Appendix VIII) and conducted the interview (See Appendix VII). Following the interview the participant was taken through the debriefing letter (See Appendix XII).

2.8.3 IPA Analysis

The process of IPA is described as, “moving from the particular to the shared, and from the descriptive to the interpretative” (p. 79. Smith , 2009), with the principles of attempting to understand the participant’s view and how they make meaning of their experience within their context. Whilst Smith and colleagues state that IPA may be used in a creative, flexible and innovative way, they recognise the need for a heuristic framework for analysis for those new to IPA methodology. The results from IPA analysis will always be tentative due to the double hermeneutic of the researcher interpreting what they think the participant means. However, the systematic process of the analysis enables these interpretations to be assessed by the reader. Smith, Flowers and Larkin (2009) provide a detailed illustration of the analytic process utilised in IPA, which will be followed for the analysis of the data in the current study, involving six steps, which are summarised below.

2.8.3.1 Step 1: Reading and Re-Reading

The first step is for the researcher to immerse themselves in the data, by reading and re-reading the transcripts. This process enables the participant to become the focus of analysis through immersion in their story. It may be useful for the researcher to note their most powerful recollections and observations about the interview to help to bracket them off and contain the ‘noise’ generated by their own thoughts about the data. Re-reading the interview enables a structure of the transcript to emerge, whereby during the interview the participant may move between general explanations to specific experiences. The interpersonal process between the participant and researcher may also become apparent in later richer sections of conversation, with the broad and general at the beginning, to micro-details of events in the middle and bringing together at the end.

2.8.3.2 Step 2: *Initial Noting*

The second step involves examining the “semantic content and language use on a very exploratory level” (p. 83. Smith, Flowers & Larkin, 2009). With an open mind the researcher begins to note areas of interest within the transcript, which enables familiarity with how the participant describes and thinks about an issue. This process is not as structured as grounded theory, where each unit of meaning is analysed, instead, the aim is to develop comprehensive notes and comments on the interview transcript. The richer areas of the transcript will attract more comment. The notes help to develop a “descriptive core of comments” that have a phenomenological focus and stay true to the participant’s explicit meaning including phenomena of importance such as relationships, processes, places, events, values and principles and their experience of them. Alongside the descriptive core notes more interpretative notes will aid in understanding why the participant has these concerns, through attention to the language they use, the context within which they experience these concerns and through identification of more abstract concepts. This process helps the researcher to make sense of the pattern of meaning within the transcript. Smith *et al.* (2009) suggest three types of notation:

1) *Descriptive* comments that focus on the content of what the participant said at face value, acknowledging the objects that structure their thoughts and experiences. These comments tend to be about subjects that matter to the participant such as key objects, events or experiences, which are often highlighted by descriptions, assumptions, acronyms and emotional responses.

2) *Linguistic* comments that explore the type of language the participant uses. This area of comment includes pronoun use, pauses, laughter, repetition, tone and fluency. Metaphor, in particular, can be powerful as it links description with conceptual elements, opening up wider meaning.

3) *Conceptual* comments to engage with the transcript at a more interrogative and conceptual level. These comments may be interrogative to begin with. The questions that arise may be answered as understanding develops through the transcript, or may lead to further reflection, or to a more abstract level, but they may also not lead anywhere. Conceptual comments move away from the explicit dialogue of the

participant towards their overarching understanding of their experience. It involves discussion, reflection, trial and error and refinement for the researcher. It will draw on the researcher's own experience or theoretical knowledge, similar to Gadamerian dialogue, where your pre-understandings interact with your newly emerging understandings of the participant's world. This may involve the researcher drawing on their own perceptions and understandings to try and realise the meaning of key events and processes of the participant. A range of provisional meanings may be generated by the researcher's own experience of what the participant is describing, or if the researcher does not have this experience, the researcher may explore what they thought the participant meant. Or the researcher may explore the participant's meanings through logically questioning the construction of the participant's expression, for example by looking at their statement from a different angle.

As the researcher moves through the transcript they are likely to comment on similarities and differences, echoes, amplifications and contradictions stated by the participant. It is important to conduct analytic dialogue through the whole transcript, questioning the use of particular words, phrases, sentences, what they mean for the researcher and thinking about what they mean for the participant. It is important that the interpretation remains inspired by the participant's words rather than being 'imported from outside'. Thus, reflexive engagement is an important touchstone for the researcher throughout the analysis (Smith *et al.*, 2009).

2.8.3.3 Step 3: Developing Emergent Themes

The purpose of developing emergent themes is to reduce the volume of detail from the data, now including the transcript and the notes, by mapping interrelationships, connections and patterns between the notes. This process involves reorganising the original narrative flow of the interview. Smith and colleagues (2009) describe this process as a manifestation of the hermeneutic circle, where the original whole of the interview becomes a set of parts, which then come together to form another whole when writing up the analysis. This stage of the process also involves more interpretation of the phenomenon, thus drawing the researcher away from the participant's experience, with the analysis containing more of the researcher's interpretation. Yet the interpretation should stay true to the original discourse. Smith and colleagues (2009) explain, "Themes are usually expressed as phrases which

speak to the psychological essence of the piece and contain enough particularity to be grounded and enough abstraction to be conceptual” (p. 92. Smith *et al.*, 2009). The hermeneutic circle is relevant as the part is interpreted in relation to the whole and the whole in relation to the parts. The themes are derived both from the participant’s explicit meaning and from the researcher’s interpretations, which may include links to theoretical knowledge.

2.8.3.4 Step 4: Searching for Connections Across Emergent Themes

This step involves charting how the researcher thinks the emergent themes fit together. Not all emergent themes may be used in this stage of analysis, which may depend on the overall research question. Smith *et al.* (2009) list several ways that the researcher may look for patterns.

- 1) *Abstraction* - This involves looking for super-ordinate themes, that is putting similar themes together within a cluster.
- 2) *Subsumption* - Where a particular emergent theme becomes super-ordinate as it brings together other similar emergent themes.
- 3) *Polarization* - This process occurs when there are themes with oppositional relationships, rather than being similar, which also helps to organise the data.
- 4) *Contextualisation* – Connections may emerge through examining the contextual elements of the analysis, including temporal, cultural and narrative themes. These contextual elements may relate to significant key life events or specific narrative moments throughout the transcript and interpretation.
- 5) *Numeration* – The researcher may be interested in the number of times a theme occurs, which may somewhat indicate its relative importance.
- 6) *Function* – This technique involves looking at the specific function of emergent themes within the transcript for the experience of the participant, for example, positive or negative ways that the participant presents their ‘self’ within the interview, perhaps distinguishing the type of affect intended to be generated by the listener. This process may move away from the meaning given by the participant, but it also enables deeper interpretation of the data.

The strategies used with the data will depend upon what is suitable for the content. Notes should be taken by the researcher about how this stage of the analysis was undertaken in a research diary. The results from this level of analysis are usually helpfully represented within a table to show the super-ordinate themes and the emergent themes within them.

2.8.3.5 Step 5: Moving to the Next Case

Steps one to four are repeated on the next transcript and so on, for each participant within the sample. The next case is treated in its own terms to acknowledge each participant's individuality. The ideas from the previous transcript need to be bracketed at this stage to maintain the idiographic element of IPA.

2.8.3.6 Step 6: Looking for Patterns Across Cases

When superordinate themes have been produced for each participant connections across cases are made. This global process may cause some themes to be re-named and reconfigured for specific participants, moving the analysis to a more theoretical level as higher order concepts are discovered. Thus each case may share higher order concepts, yet still have unique idiosyncratic instances.

With larger samples, the case level detail may be less, so that emergent themes for the whole group may be amply examined. Thus, emergent themes may be found at the case level for each, with patterns and connections looked at for the whole sample together. In the current study, superordinate themes were generated for the whole sample after each case was individually analysed. The next Chapter, which presents the results of this study, will describe each of the superordinate themes, which will then be explored using quotes from individual interviews to retain the idiographic nature of the analysis.

Chapter 3 – Results

3.1 Chapter Overview

The Results Chapter presents the findings from the IPA analysis of the interview data collected from the 11 participants. Each of the 11 cases was initially analysed individually as a case study. The previous individual analyses were then combined to ascertain important themes that were pertinent across cases. This analysis resulted in three superordinate themes, each with several subordinate themes, see Figure 3.1.

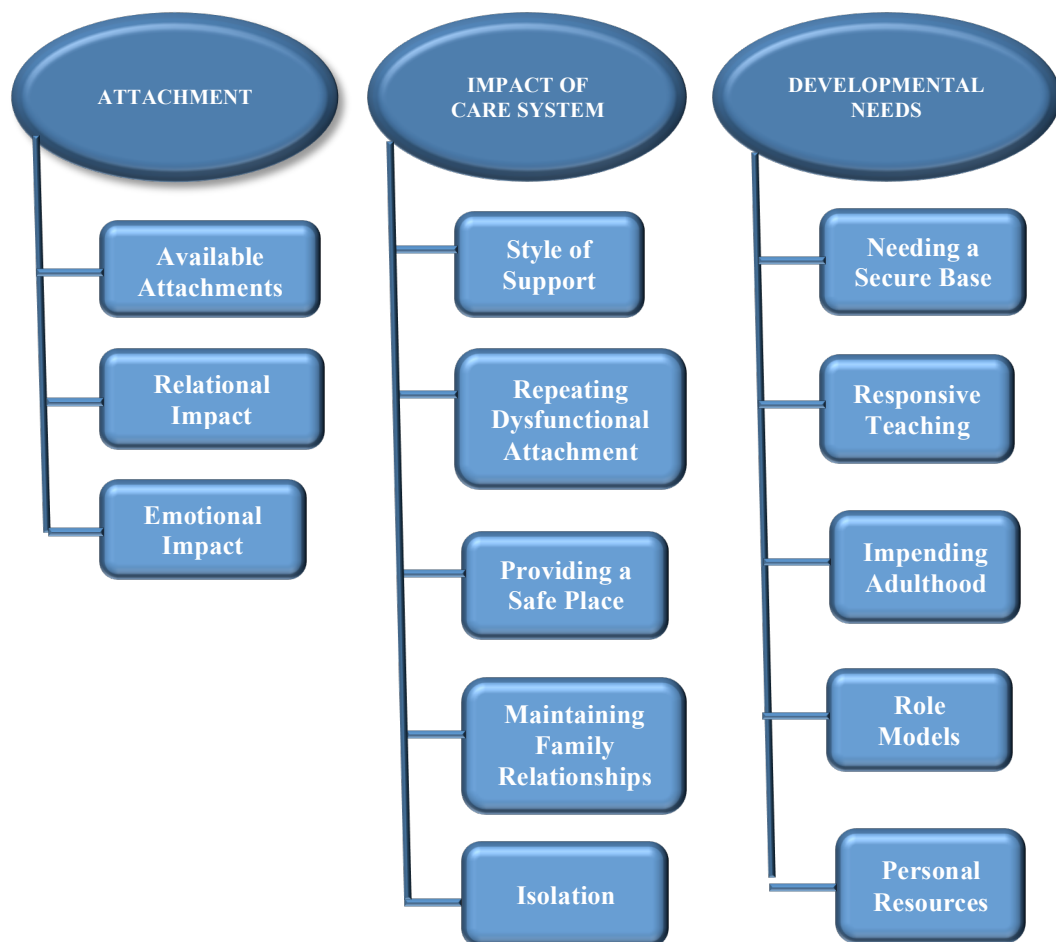


Figure 3.1. Diagram of Superordinate and Subordinate Themes

Each of the superordinate and subordinate themes will be described and illustrated with representative quotes from participant interviews. The range of perspectives

within each theme will be highlighted. The focus of the analysis was the impact of positive relationships upon the participants. A pertinent feature of the data was that by talking about positive relationships, the participants often expressed the difficulties and barriers they experienced in having their developmental needs met.

Words that have been added to the quotes to enhance the meaning or to remove distinguishing elements such as names and locations are added in [brackets] and omitted words, phrases or later text are indicated by

Participant (pseudonym)	Age when first in care	Years spent in care	Number of different placements	Longest placement	Person who they felt closest to
Amy	4	16	2	14yrs	Birth Mother
Bev	7	11	4	9yrs	Sister & Foster Mother
Caty	15	3	4	20months	Step Father & Sister
Deb	13	5	4	4yrs	Grandmother
Eve	12	6	8	4yrs	Social Worker
Fay	4	14	6	11yrs	Sister
Gia	13	3	15	10 months	Birth Mother
Hana	5	13	13	6yrs	Foster Parents
Ida	14	4	3	1yr	Foster Sister & Friend
Joe	6	10	26	8yrs	Support Worker
Ken	14	4	7	1 yr	Support Worker

Table 3.1 Individual Participant Characteristics

Table 3.1 includes some of the individual participants' characteristics (for mean figures please see the Method Chapter, 2.6.3 Demographic and Care Pathway Information). The participant's age when they first went into care, number of years they spent in care, number and longest placement information provides a context for the quotes of their stories that follow. All participants experienced foster care, with some also experiencing temporary accommodation, bed and breakfast, hostels and supported living.

3.2 Superordinate Theme 1: Attachment

The most prominent theme throughout the data related to attachment relationships. When participants were asked who they were close to and who had been there for them most of the time, their answers often reflected the quality and style of

attachment to the individuals who would be assumed to be their primary caregiver. The subordinate themes reflected the different aspects of attachment that the participants described, these included: *Available Attachments* and the *Emotional Impact* and *Relational Impact* of the attachment they experienced.

3.2.1 Attachment Subordinate Theme 1: *Available Attachments*

The variety of people participants felt closest to is listed in the last column of table 3.1. Some still felt closest to their birth parent, whilst acknowledging the limits to that relationship. Others felt closest to another family member, such as a step-parent or sibling. Alternatively, some participants felt closest to parental figures from outside of their family, such as foster carers. Finally, some participants described relatively short relationships with professionals later in their lives, which still provided an opportunity for them to begin to experience the trust and security they had not felt during their upbringing. A feature of the answers to the question of closeness to another was the capacity and propensity of the participants to develop close relationships when the right conditions arose.

Amy stated that she felt closest to her birth mother:

“We’ve always had a relationship throughout my stay in care. We’d always see her once a week. ... As I got older then I had a mobile phone so I could text whenever I wanted and as soon as I hit 18 I used to go into town with my mum and do some shopping. And now I live here my mum only lives [close by]. We see each other and we work with each other on the Thursdays and we do stuff together so. It’s pretty good”

Amy described the importance of maintaining her relationship with her birth mother. She emphasised this importance through repetition of the word “always,” suggesting that the weekly contact whilst she was in care was the focus of her week. The importance of this relationship was also in evidence by the increased contact with her mother once she became older and had more means of contact, by phone, and when she finally left the care system. Even though Amy’s mother was deemed an unsuitable parent and did not raise her, this quote shows how relationships with the individual’s mother can still be the most important and influential one that they have.

Gia also stated that the person she felt closest to was her mother, but at the same time she recognised the limitations of that relationship:

“Urm, I don’t know, I wouldn’t say she’s like the best relationship, but then I wouldn’t know or say who was. Urm I don’t know. I think I’m the main person, really, because like I’ve never, I’ve never had someone who’s been continuously there, my mum’s never been continuously there for me so, but apart from that I wouldn’t know who to say it was. Because no one’s really been there all the way with me.”

Gia displayed some hesitancy talking about the difficult aspects of her relationship with her mother by repeating “urm.” This may signify the difficulty of speaking negatively about the person who has been most important in her life. Gia appeared to recognise the importance of her relationship with her mother within the context of a lack of other consistent or continuous relationships in her life.

Other participants reported that they felt closest to other family members. These relationships often happened where another family member took on the role of main caregiver, due to birth parent inability or alternative focus. For Deb, her grandmother took on the main carer role whilst she was growing up:

“I was always close, my nan like brought us up because my mum was in work all the time... so my nan was always there from when I was like 1, 2 anyway. My nan taught me how to walk, my nan taught me how to crawl, do you know what I mean?”

Here, Deb described how the time she spent with her grandmother was key to their relationship. It was as if her grandmother made the attachment investment, being present for important developmental milestones, whilst her mother was investing in her career. This may have meant that Deb felt less valued by her mother as she was not prioritised. Deb later described how she moved away from her grandmother due to her mother beginning a new relationship. Again, it appeared that Deb felt undervalued by her mother:

“Then my mum kind of pushed me away when my stepdad come.”

A geographical move away from Deb's grandmother may have indicated a tension that her mother felt regarding the closer relationship between Deb and her grandmother. This passage also showed Deb feeling hurt that her mother was choosing something/someone else over her again.

For other participants, a sibling took on the parental role as Fay explained:

"My mother never really cared for me like, nobody else really cares for me, so, except my sister, so.... When I was little she used to look after me anyway. My mum didn't do anything. [My sister] used to like make my bottles and feed me, make my dinner. She was cooking my dinner when she was 8. So, she's had a lot of responsibility."

This quote denoted Fay being provided with an alternate caregiver. Similar to Deb, there was the investment that her sister made in their relationship. The strength of this sibling attachment was explained by Fay:

"My sister always says to me, oh we're really close, and I'm like, yeah, closer than all the others. Like none of the others are close to my sister, they don't go and see her as much as I do"

It appeared important to Fay that her relationship with her sister was special in comparison to her siblings. Fay was still investing in that relationship too. However, earlier experiences suggested a level of anxiety that Fay had about the relationship:

"When we went into care we were all separated and so like it was harder for her and like she used to look after us ...But I didn't see her much because obviously she was living in a different home and she moved in with us then and I cried when she left, I didn't like it. She moved out with her boyfriend and I didn't like it. And I don't like it when she goes on holiday, we were that close I'd cry if she goes away for the night, I didn't like it and she knows"

Fay described how difficult she found separation from her sister. She may have developed some attachment insecurity in her initial relationship with her mother, meaning that anxiety surfaced at the slightest threat of abandonment from her sister.

Some participants experienced their closest relationships with individuals outside of their family. However, it appeared that the participant was still attempting to experience family roles, as Joe described of a professional:

“She’s a good role model, she’s kind of like a mother figure, she would tell it to you straight, she would support you by any decision, if you’re wrong, she tells. ... all the good parts of it is I see her as a mother figure, she sees me as a son.”

Joe appeared to find the honest guidance that he experienced in this relationship fulfilling at least one aspect of what he expected of a mother. Communication and feedback appeared to be key in this important relationship developed later on in life. Ken also valued communication in the close relationship he experienced with support workers:

“If I’ve got any problems, I just go and speak to one of them, and they will just sit there and listen to me... but me and [the support worker are] really like, close friends.”

Here Ken depicted the quality of the relationship through the experience of being listened to. Communication appeared particularly important for close relationships developed later in life, on the cusp of adolescence and adulthood, as they tended to feature a quality of communication not experienced by the participant before as Ken explained:

“Well, with my mam, I can’t talk to my mam because she will shout and argue but with the staff here it will be good as gold, they will just sit there calm, just talk.”

The gender of the staff Ken described feeling closest to being female may also have fulfilled the needs he still had relating to the relationship with his mother.

The *Available Attachments* theme from the analysis has shown the variety of individuals that the participants have felt closest to. In essence, this theme answers the secondary research questions: Who were the positive relationships with? For some this was a birth parent, even if the relationship was not of a standard to meet all

their needs. For others, the closest relationship remained within the family, also developed whilst young, where someone else took on the primary caregiving role. For those participants who didn't experience a close relationship until later in their lives, the element of communication appeared important. It also shows the power of a relationship with a professional, in that individuals who had mostly experienced an insecure attachment still sought to have the need of closeness met if the right conditions were available.

3.2.2 Attachment Subordinate Theme 2: *Relational Impact*

The subordinate theme of *Relational Impact* denoted the effects that a lack of consistent stable attachments have had. Even where Amy described maintaining her closest relationship with her birth mother, the person traditionally ascribed the primary attachment role, there were still difficulties in that relationship leading to her stay in care. Even though the *Available Attachments* subordinate theme described people's capacity for developing close relationships, the *Relational Impact* subordinate theme acknowledged the difficulties and limitations in forming and maintaining relationships that the participants described. The *Relational Impact* was often described in terms of the parental relationship. This relationship appeared important even if this was not the person who the participant felt closest to.

Where the person that the participant described being closest to was a family member, the quality of the relationship showed a common theme of being give and take. Bowlby (2005) would describe the give and take as an 'inverse attachment,' whereby the caregiver seeks to have their own attachment needs met in the relationship rather than being a secure caregiver. Amy described what she found to be a positive aspect of her closest relationship with her mother:

"We're each other's rocks and we're always there. If someone comes and batters my mum I go and batter them back. And then we also, we're not mother and daughter relationship we're more like a sister relationship, which we both agree is better for us because I think [it] is a bit hard for her as well to remember the days when she was our mother and she was looking after us and then to be moved. So I think to be in that sister-ish relationship has made us even better because for us to

*carry on our relationship really.... just being there for me to talk to.
Yeah and just being there when I need her”*

Amy explained the security of the relationship she felt with her mother in terms of reliability and openness. However, the aspect of their relationship described above is bi-directional; she also provided this role to her mother. Amy acknowledged their equality by recognising their “sister like” relationship, but qualifies it with respect to the parental role being taken from her mother. Maybe the alteration in their relationship reflected the pain experienced by both mother and daughter by the disruption to their attachment relationship, so that it continually needed re-defining. Amy may not feel enough security in the relationship to be the sole recipient of love and care, instead, she must also provide some security for her mother.

For Gia, the inverse nature of the relationship with her mother, who she feels closest to, was taken a step further:

“I can talk to my mum about anything, but I think we’re more like friends than like a mother and daughter, my mum’s very selfish, so, I don’t know, like we do get on but then when I think it comes to like being a parent she’s not very good at it.... my mum will come to me for relationship advice, and that’s just weird.... but I’m used to it, she’s always been like it, so I don’t know. I think me and my mum are more like friends than anything. It’s just when we argue then when it comes to me needing anything from her.”

Gia described the nature of her relationship with her mother as “friends,” perhaps describing its tenuous nature, not as secure as a family or attachment relationship. She also experienced her mother as taking more than giving. Gia saw herself as giving more in the relationship. Her mother become hostile when she made requests for her needs to be met. Gia had insight into the un-parent like role her mother had, through conversations that may be considered inappropriate to have with your child. This relationship style might indicate Gia’s mother’s difficulty with the parenting role as she has not had her own needs for care and security met, something that she finds threatening when requested of her. Gia’s mother also appeared to find it difficult to have her own needs met in a functional way:

“She just went into this stage of like threatening to kill herself, but it was only to make me feel guilty for hurting her and wanting to move out. I don’t know, like, when mum like, she’s always tried to do things like to make me feel sorry for her and to make me feel guilty for doing certain things”

Gia described her mother as not being able to communicate what she wanted in a functional manner, maybe trying to position Gia into feeling the negative emotions she experienced herself.

An area important to the quality of attachments made is grief and loss (Bowlby, 2005). Caty felt closest to her step-father (whom she calls “dad”), but perhaps the difficulty she felt losing him when he died related to the rejection she may have felt from her mother, producing some anxiety about the stability of other attachments that she developed:

“I was very open with my dad. And he’s not here anymore. And then I couldn’t, it’s like, I tell my sister stuff, but like my dad was like my main one. I don’t really tell people that much anymore.”

Caty’s repetition of the word “anymore” suggests that the trust she had with her stepfather died with him. It may be that her sensitivity to rejection and abandonment from her mother meant that the close relationship she developed with her stepfather was vulnerable to any sense of rejection from him, including death. The relationship she had with him appeared somewhat idealised:

“There was never a dull moment with my dad. The only bad memory of my dad is his death, that’s the only bad memory I have of my dad. That’s it.”

Her need for her stepfather to be perfect in comparison to her mother may have compromised the stability of their relationship. A balanced view of an individual is conducive to a secure attachment style (Bowlby, 2005). Insecure attachment can lead to idealised relationships, which can cause difficulty with the grieving process (Bowlby, 2005).

Deb developed a stronger attachment relationship with her grandmother than with her mother. This dynamic may have created some ambivalence in her mother:

I wish she never let us be taken away from my nan because like, do you know what I mean me [moving away] lost me more time spending with my nan... . When we moved [away] I stopped speaking to my nan, my mum stopped us.

Deb had to experience the loss of her relationship with her grandmother due to moving away from her because of her mother. Further, she was not allowed to continue contact with her grandmother, perhaps showing the difficulty her mother experienced with not being Deb's primary attachment figure. Deb re-established contact with her grandmother whilst in care, but had to go through losing her again when she died:

“ When I get upset, like recently I've been upset, obviously, because she passed away and stuff, urm, like I'd always look up to the sky and like if I see a bright star I say that's my nan like, she's watching me. ”

Deb appeared to feel the second loss of her grandmother acutely, yearning to continue for contact with her and seeing signs of her grandmother as a form of comfort.

An insecure attachment can set up an inaccurate blue-print of what people are like (Bowlby, 2005). An element of an insecure attachment is a fear of rejection, which would be likely to have been accentuated by needing to go into care. A relationship strategy to deal with fear of rejection can be to reject first, as described by Gia:

“When I was in foster care I'd think like, how long is it going to be before someone else shows their true colours? So, I don't know, I think that's why I used to move around quite a lot because I'd get close to them and then think, oh, you'll be a bastard in the end anyway, I'm not going to like you and you're just going to end up like the rest. Then I'd run away, I'd want to move, because I used to, I dunno, I liked that feeling when you moved somewhere else, everything's new, you don't know where anything is and like I don't know you're like the new toy

and...then after like, I dunno, 2 or 3 months you're like kind of the furniture and you got kind of bored then, like, ah I want to go, nothing is exciting me anymore, I know where the glasses are, I know where the tea's kept."

Gia's hesitancy in her description ("I dunno") sounded like she was verbalising a familiar pattern in her foster care experience for the first time. The pattern she described depicts a potential fear of becoming close to people because she either did not know how to be close to others, or feared their rejection, which might be unbearable. She appeared to require the distraction of novelty and the beginning of relationships to be able to tolerate them. Once the novelty wore off and the work of maintaining the relationships began, it became unbearable.

A fear of rejection from insecure attachment is also linked to an ability to trust others (Bowlby, 2005). When a foundation of trust has not been developed in a secure attachment relationship, the individual's resulting ability to trust others can be fragile. Bev explained her experience of trusting others:

"I did [trust to] a certain extent until I thought that [they would just go] away [and get] on with their lives and ... I think that's why I struggled with friends and stuff because the one friend I actually made, [we were] always together and then she kind of just went off and ... just ditched me ... for other friends and all and I didn't really trust a lot of people then. I don't know, things have just got a bit harder now."

It could be assumed that because Bev's ability to trust was so fragile and her sensitivity to rejection so acute from an insecure attachment, that what may be considered normal friendship politics had a significant effect on her ability to trust. Her investment in trusting her friend was a large one for her and when she felt that trust was broken it had a long lasting effect. She still felt unable to trust years later.

Bev's difficulty trusting and her likely insecure attachment appeared to have had an impact on her ability to develop relationships:

"To be honest, I've never felt really close to anybody as such... I appreciated [a foster carer] for fostering me after everything happened"

with my mum and I do really ... care for her but it's ... only when I wasn't very well that I felt close to people.

The only time Bev felt close to others was when she was vulnerable and required care and attention when she was ill. This strategy depicted a dysfunctional way for her to get her relationship needs met through her lack of experience of secure trusting relationships.

Both male participants talked about learning to develop trust later in their lives. This was what Joe had to say about developing trust for the first time with a support worker:

"It did take me a while to trust him completely...I gradually build it up... as the time grew we stayed in contact and as time grew we started sharing more information then."

Joe described the importance of time in establishing the trusting relationship, stating "as time grew" twice. The consistency and reliability of the support worker appeared important in the process of developing trust, qualities which perhaps either he did not experience before or was not receptive to.

In contrast, one participant, Ida, described thinking of herself as a trusting person due to her life experience:

"I think I'm quite a trusting person, I think just in general I do talk to most people about pretty much anything, most stuff...I think I've just always been like that, I think that like with my mum and the way I was brought up and like kind of the areas I was brought up around, it wasn't like I couldn't trust people... everyone was nice people, no one stole, no [one was] nasty."

Here Ida described several elements for being a trusting person. First, there was the trusting relationship with an attachment figure, her mother; second, being around other trustworthy people; and third, being in a secure environment. In this way she described forming an initial trusting attachment relationship which was put to the test around others and in an area where trust was prevalent.

The *Relational Impact* of the participant's attachment seemed to relate most strongly to their individual level of sensitivity to rejection and abandonment and their resulting ability to trust. A fear of rejection is likely to be increased as a result of entering the care system and may reflect the attachment difficulties that made it necessary. It would make developing future relationships and dealing with loss difficult. Whilst a lack of trust was not uniform throughout the sample, those who developed trust later in their lives may only have been able to do so as the intensity of the need for attachment reduced with age.

3.2.3 Attachment Subordinate Theme 3: *Emotional Impact*

The quality of attachments appeared to impact on some participants' ability to manage their emotions. Emotional reactions and behaviour can provide large and loud relational cues such as, "keep away" when angry, or "comfort me" when distressed, or alternatively, provide no cues for obtaining relational needs through lack of emotional expression.

An element in the development of emotional recognition and management is having your emotions recognised and validated by others whilst you are growing up, so that you come to recognise them yourself (Gottman, 2011). Instead, Gia described experiencing an invalidating environment whilst growing up and the effect that this had on her:

"Well people just used to call me a moaner as a kid like that 'oh you're whinging you moaner.' I was watching a video the other week and like I was crying because someone's broke my [toy]. I was about 3 or 4 in the video and everyone's laughing at me crying...And I thought, ah I was really upset about that, I only wanted this boy to get told off for breaking it, someone to fix it for me....[she would have preferred] comfort. Yeah. Which I never really had.

Gia expressed the belief that the invalidation of her feelings as described above led to her keeping her negative feelings to herself. She came to expect an unsupportive reaction to her distress; and therefore did not learn how to communicate distress or subsequently how to deal with emotions. She recognised her yearning for comfort,

which would have been an appropriate and productive reaction from those around a distressed child.

Fay also stated that she didn't have an outlet for her emotions as she didn't want to distress her sister:

"I try not to... because I don't want to put it on her because... she's married, she's got two kids and a house and a family and financially. She's on her own in all that crap, so I don't really want to [communicate my difficult emotions to] her... they tend to build up, they do, they build up in me and like after a while I just like have one big outburst. It could be angry. I could get angry and I just start kicking doors, act weird. Other times I'd just be like really sensitive and I'll just sit and cry."

Due to lack of an emotional outlet, Fay described becoming overwhelmed by her emotions and her resulting behaviour becoming uncontrollable. She explained the reason why she believed people within her family were emotionally fragile:

"It's just the breakdown of the family and like the fact that we were all separated and we didn't really [get] a bond with anyone and my brother suffers from psychosis now as well, my dad's got schizophrenia, it's just weird."

Fay described the impact of a family culture where the lack of bonds led to difficulties managing emotions. There was also the potential for a lack of models within the family showing how to deal with emotions in a functional way. Fay linked the lack of emotional management and attachment leading to serious mental health conditions for some family members. This may denote sensitivity to difficult environments (Linehan, 1993) and the distress inherent in their family unit. She ended saying "it's just weird," as if the enormity of the distress within her family was difficult to understand.

The above two participants described the difficulties they had in expressing emotions within either unsupportive or distressed families, which led to emotional outbursts for Fay. In contrast, other participants described how they had become shut off from

their emotions. Emotional disconnection is illustrated by the difficulty Eve described in putting her experiences and emotions into words:

“I have a job explaining [my emotions] to my social worker... It took 3 or 4 weeks for me to explain it to her and she was like that, what? And I was like, yeah...I’d have to sit down and have a good think about it first like.”

Eve’s experience showed the difficulty she experienced even putting her emotions into words. Even when she did communicate, she found that she was not understood.

Joe explained that he didn’t feel connected to his emotions:

“I wouldn’t say I have to deal with emotions, now, because [I probably don’t know in myself] what I’m feeling. I mean obviously you know you feel tired, hungry, but, that’s not a physical emotion....due to all, um, all my life and the way it’s been lived...you don’t want to feel any emotion anymore, so you just think, I’ll forget about it... It’s not an emotion that just comes to you any more...[I’ve] pushed them down so they don’t surface anymore and then just how you feel at that time.”

He described pushing down prominent feelings so that he didn’t have to experience the difficult emotions generated from his life. He then described how he could feel general emotions in reaction to current experiences, although these were likely to be muted due to the overall emotional suppression.

Overall, the *Emotional Impact* theme described two reactions to feelings of insecurity in attachment relationships: being unable to express emotions leading to a build-up of negative affect and suppressing emotions.

3.3 Superordinate Theme 2: Impact of Care System

LAC are likely to have been moved away from their family of origin because it did not satisfactorily meet their care needs. The most severe cases involve victimisation through either sexual, physical or emotional abuse or neglect, or a combination of several (Welsh Government, 2014). As described in the Superordinate theme **Attachment**, dysfunctional attachment impacted upon the current participants’

relationships with their family and other people. This superordinate theme described how their move into the care system had the potential to reinforce or repeat those dysfunctional attachment experiences, or to provide a safe haven away from them. The subordinate themes relating to the **Impact of the Care System** for the sample included: *Style of Support, Repeating Dysfunctional Attachment, Providing a Safe Place, Maintaining Family Relationships* and *Isolation*.

3.3.1 Impact of Care System Subordinate Theme 1: *Style of Support*

Different participants experienced different types of support from within the care system. Some experienced more practical support, whilst others experienced emotional support. It may have been that some carers and staff provided only one type of support, or it may have been that different participants were only receptive to different types of support due to their attachment difficulties.

Eve found that a social worker was supportive and facilitated her move to independence in a practical sense:

“She’d take me shopping and help me spend my money wisely....she was like, come on now you’ve got to start doing things on your own and I was like, yeah, sound, and then from that day onwards, I practically lived on, well, not on my own, like, but do you get what I mean?”

Eve previously described difficulty trusting people and a lack of close relationships. Within this context she found the practical support from her social worker very useful and the basis for a closer relationship than she had experienced before.

Amy described experiencing practical support from her foster family:

“Some of the decisions that they made on my behalf were wrong, but most of them were right, like I needed extra help from the school, they always pushed for that and funding to go on trips...and since I moved out [my foster father’s] bought me some cooking stuff, he buys me food now and again, picks me up to take me home for our Sunday dinner, so, he rings me up 2 times a week, to make sure I’m alright.”

Therefore, Amy was able to appreciate the life and opportunities that her foster family provided for her. However, she also believed that their support was lacking in other areas:

“I couldn’t really say what I wanted to say to them personally ... like if I was having problems I couldn’t speak to them about it which really cheesed me off. But then I just grew up to try and sort it out myself, which I managed to do most of the time.”

Amy expressed her frustration about not being able to share her problems with her foster parents by saying, *“it really cheesed me off.”* From her explanation it seemed that she wanted the emotional support, but did not find her foster parents receptive. In response to the lack of emotional support, Amy sought other avenues for this area of development, including a teacher:

“Well, she really encouraged me to be myself and put myself out there more and really to be more confident in myself....my teacher gave me criticism, but it was good criticism so ... ok, right, so I don’t do this again and I’m going to work harder at it and I really came out of my shell and I became a different person.”

Even though Amy didn’t experience the emotional support she wanted in her foster care environment, she was still able to make use of the opportunity for emotional support and development from a teacher at school. She found this relationship stable enough to take in and utilise constructive criticism for her own personal development. She described the change within herself, *“came out of my shell”* and *“became a different person”* being powerful and depicting a type of metamorphosis. Having her emotions validated and finding ways to manage them was an important part of the relationship that began facilitating her emotional development:

“My ...teacher, she sort of knew when I wasn’t myself, so she’d pull me aside and talk with me and let me go off for a couple of minutes so I could brighten myself up or work out what I needed.”

The relationship with the teacher and subsequent emotional development provided a platform for later professional support in emotional management:

“It really taught me not to bottle up my anger, let it out you know, but in a good way, ... but it taught me to control myself as well if I knew I was getting stressed. Go out, do some breathing exercises or even have a fag ... because it was sort of working out which was the best way for me to cope with what was happening at any given point.”

In this way Amy was supported in developing her emotional recognition and management, finding strategies that worked for her later in her life.

Hana talked about her experience in later foster placements where she began to develop the ability to talk about her problems, which she built upon during her later intimate relationship:

“Well it was nice because, like, where I was before they’d ground me and hit me and stuff like that and they moved me to another foster placement [where the foster carers] didn’t... they sat there and talked to me.”

Even though Hana had experienced unacceptable violent reactions to her behaviour in previous care placements she was able to develop the skill and respond to the alternative functional response of talking about her behaviour and emotions. The development of this skill was built upon in her intimate relationship, which she described as stable and secure.

The type of support the participants experienced varied between practical and emotional. It appeared that if opportunities for the needs of the participant were not provided within their foster placement then they could find them elsewhere. The type of support not only depended on the capabilities of the care system, it also depended on the responsivity of the individual. Whilst Hana was receptive to more functional ways of dealing with problems after experiencing punitive environments, Eve did not appear receptive to emotional support at the time she developed the relationship with her social worker, instead building the relationship upon a practical focus.

3.3.2 Impact of Care System Subordinate Theme 2: *Repeating Dysfunctional Attachment*

From the previous themes we have been building a picture of Amy. She experienced an equal relationship with her mother, with a sense that she became self-sufficient in dealing with her problems and emotions before learning emotional management through contact with a helpful teacher and services. This pattern may be described as an avoidant attachment style and was shown by the explanation she gave about relationship development whilst in care:

“I think it’s meant to be tough love with the foster carer when [they give you] love, but not so much that [you] feel completely reliant on [them]... [At] 18, we can stay or we have to go, so they’ve got to be tough and we’ve got to be sort of tough love as well, so we don’t get too mushy. So you know you’ve got that solid thing where you live on your own, you can be independent without having someone to look after you as well.”

Her experience of foster care and of not being able to share her feelings with her foster parents, because they did not facilitate it, had the potential to reinforce an avoidant attachment style. This was expressed by the feeling that foster care is finite, contracted, with an eye on the ending preventing a feeling of closeness. This kind of environment and view of it would potentially exacerbate someone’s protection against being rejected by not allowing themselves to become close to someone and to rely on them.

Even though Amy guarded against becoming close to her foster parents, alongside their interactions that were not conducive to her sharing feelings, she still yearned for their acknowledgement:

“[I’d] probably... try and get the praise from my foster parents as well as my mum so I’d work harder for my foster parents...[not receiving recognition] made me really feel worthless. Because my sister, they’ve always praised my sister more than what they ever did with me, and they always turned around and said, ‘she’s going to go far’ and I’d be sat there like, OK, I’ve got [international recognition for my achievements]. ‘Well done’ or ‘good job,’ it’s all I wanted.”

Here it appeared that Amy's mother's recognition of achievements and praise was forthcoming, whereas her foster parents held back. She realised the distance in her relationship with them when she compared her relationship with her foster parents to how they related to her younger biological sister who she was placed with. Her own achievements were not enough for her, she still wanted their praise and felt "worthless" without it. Even though Amy's mother provided praise, the self-sufficient and avoidant mind-set that she has developed in response to her attachment would probably have been activated by her foster parents' response.

Bev talked about how difficulties her foster mother experienced impacted on her care:

"Even though she's caring she, because she had a lot of problems herself that she hadn't dealt with, she can be really awkward and sometimes not very nice. She... started ... drinking ... quite a lot and ... they ... said that she wasn't looking after me properly and stuff and I felt ... to blame and I think that she kind of blamed me as well."

Bev stated above that she had not really felt close to people during her life. Even though she recognised her foster mother's difficulties, being in an "awkward" and "not very nice" situation day to day would not have helped her to overcome her lack of trust and relationship development with others. Bev was also moved from an unsafe situation with her birth parents on to another unsafe situation with a foster parent. Her lack of insight into the situation became apparent when she believed that not only was she to blame for her foster mother's behaviour, but her foster mother also blamed her. This may be an expression of Bev's sensitivity to rejection and abandonment and/or of limited opportunities for her to develop a sense of other people's actions and intentions separate to her.

Similarly, Eve expressed a difficulty trusting others. She first experienced a trusting relationship with her social worker:

"[The relationship] just felt different like, because I knew she would be there for me, when I needed her."

Her social worker had become someone that she could rely on. Later on, the impact of her social worker leaving the working relationship was profound:

“[I]got close to her ... could tell her everything, but then she had to leave ... I cried my eyes out then... that was really hard for me, like, letting her go... it really was.”

Here, Eve had taken a large step in even forming the relationship, building the trust, only to be left. It wasn't just a change of professionals for Eve, she probably felt abandoned, which she would potentially be vulnerable to with an insecure attachment, guiding her to keep emotionally distant from others due to a belief that they let you down. The end of her working relationship with the social worker and the pain she felt in response to this may well have reinforced her sense that people could not be trusted.

Hana described the insecurity of her foster placement and how it impacted on her lack of skill development when younger:

“Moving around all the time and nothing was ever secure and half of them are only in it for the money and, stuff that went on in certain places and stuff.”

Her sentiments echoed Amy's about the finite nature of foster care, but she seemed to feel even more detached from foster carers, believing they viewed her as a job rather than a person. The insecurity she was likely to have felt in her birth parents' home was then repeated in foster placements, by having to move a lot. Further, she suggested that the placements were unsafe, which may have meant even more unfavourable circumstances than those from which she had been removed. Hana experienced more supportive placements towards the end of her time in care, but the damage done in earlier placements was still apparent in her sense of anxiety:

“I always had a fear factor in me but I, like think ah what's going to happen if I'd done something naughty, but nothing would ever happen, it would be, like they talk me through everything.”

She appeared to have an immediate fear reaction, even though she was finally in a safe environment, showing the lasting effects of unsafe placements.

Joe talked about the insecurity of foster care:

“I was obviously close to them but then all foster carer homes break down. I mean you do have good times in there but you also have bad times. I mean they make the rules, you don’t like them, you make a habit of breaking them, they get tired of it and life just goes on ...as a kid you would always break those kind of rules wouldn’t you, you’d always try and stretch them so then the trust would finally stop.”

He appeared fatalistic about foster placements ending. Joe spoke about being close to foster parents, but there appeared to be some doubt in his mind about the relationships, probably stemming from an insecure attachment. He may have been testing foster parents’ commitment to him by breaking the rules, only to repeatedly receive the message that they did not want him, reinforcing his sense of rejection and the idea that people won’t trust him.

Gia also appeared to test her foster parents, becoming uncomfortable once the novelty of a new placement had ended and the time to start building a relationship loomed:

“I dunno, 2 or 3 months you’re like kind of the furniture and you got kind of bored then, like, ah I want to go, nothing is exciting me anymore... I’d keep running away and I used to shout at my social workers all the time, which like isn’t good. I feel horrible for doing it, urm it [would] take between a week and 2 weeks, like in the end the foster carers, I think, used to ring social services and be like, get out of my house, I don’t want to hear it anymore, so urm, yeah, I’d just play up until I was moved. I wouldn’t speak to them; I’d stay in my room. Ur, I don’t know, I used to hate packing all my stuff and then you’d see them and the front door and you just don’t want to make eye contact, you’d just think, right, well I’m good and you’d have to say goodbye. I absolutely hate saying goodbye to anyone though, because it reminds me

like I'm leaving, so I'm just like, I don't know, I really like cringe at saying goodbye to people, I hate it."

Gia spoke about being able to work the care system to move on when she believed that she became bored. However, this may be a sign that she protected herself from becoming close to foster carers. Her experience told her that they will reject her in the end, so she rejected them first, leading to them contacting social services. Even though Gia began to detach from the foster carers through lack of interaction, her difficulty saying goodbye belied her true feelings, that she probably really wanted to be accepted and cared for.

The finite and sometimes unsafe care environments that some of the participants spoke about were likely to have reinforced beliefs that they held about the world stemming from insecure attachment. Beliefs about rejection, abandonment and conditional care were in several instances supported and remained barriers to the formation of positive, nurturing relationships. Even when circumstances became safe and caring, it may have been difficult for some individuals to be receptive to them and have the space to develop considering the repetitive messages they have received before.

3.3.3 Impact of Care System Subordinate Theme 3: *Providing a Safe Place*

Some participants experienced the care system in a different way, as a refuge from their unsafe home environments. They were able to get rid of the preoccupation of keeping themselves safe and instead to focus on their own development. For others, their beliefs about abandonment and rejection once the contract ended was disconfirmed, perhaps altering their view about their foster carers.

Gia had previously sabotaged several previous placements, but then found a placement where she felt safe:

"They give me my own job, my own independence, so I went back in school, I had new friends. I had quite a bit of money, because I'd have my pocket money then I'd have my wages. So living with them, it felt like I was living on my own but I didn't. Like they were there, it was like a family sometimes there but then sometimes I was on my own. I had my

own balcony and ensuite, so it was like I had my own little flat, I had a massive bedroom, so yeah, when I lived with them I think I started to find my way.”

It seemed that the independence and space that she was given was beneficial. She could make choices about how much and when to spend time with her foster carers, perhaps making the environment less threatening than previous placements, where she felt the need to leave after the novelty had worn off. The independence and security she felt in this placement then gave her the opportunity to “find my way” and focus on her own development. It seems that the independence gained by having a job also fed into a sense of achievement and self-worth.

Amy saw foster placements as having an end-date at the end of the contract at 18. However, the relationship with her foster carers lasted past this time:

“Well, most Sundays I go up there or we go out for a meal and they took me out for my 21st.”

Her foster carers remained invested in her life, being the ones to celebrate her 21st, marking a milestone.

For both Gia and Amy the care system could be seen to initially reinforce insecure attachment styles. However, later evidence provided them with opportunities to alter their opinions and find some level of security.

3.3.4 Impact of Care System Subordinate Theme 4: *Maintaining Family Relationships*

A difficult element arising from entering the care system was *Maintaining Family Relationships*. Though social services deemed family care unsuitable, this statement did not automatically negate the relationships that the birth parents and their children had made. Being in care may also mean limited contact with parents, which might cause difficulties in maintaining the relationships that have been developed.

Fay talked about how it was difficult to maintain family relationships whilst in care:

“Over 11 years, yeah. I think social services made it hard as well...by ... making our contact less time. Like you used to have contact with all of us and mum on her own and then we’d have contact then again with dad on his own with all of us together. But like that would be once a month, so we’d only see our brothers and sisters once a month unless we were living with them. So that was difficult.”

Fay felt quite distanced from most of her family due to the experience of formal contact sessions being the only time they spent together. One contact session a week with each parent attended by all of their children meant that there was insufficient time to nurture individual relationships. She found that it was only now as a young adult that she had the freedom to start building relationships with her family members, such as her brother.

Amy spoke about the difficulty of balancing foster parent and parent relationships:

“If they started like being really nasty to my mum, when she she’d left from contact, I’d always stick up for her and shout back, and they didn’t like that, that I was defending my mum. Whereas they didn’t know that I was defending them really at the same time, which they never notice, which cheesed me off as well.”

Here Amy was trying hard to defend her mother to her foster parents. She appeared to be in a situation where her relationship with her mother was not supported. Yet she wanted to maintain this primary attachment. Her foster parents were also not aware that she defended them in turn to her mother. Through defending the alternate relationship, she may have been limiting the current relationship. She believed that maintaining her relationship with her mother caused the tension and lack of closeness to her foster parents. It would be interesting to know what the effect of her foster parents supporting her relationship with her mother would have had on her relationship with them. Would she have felt more accepted?

Hana felt that the balancing act she did between her mother and foster parents impacted on her opportunity to develop a more secure and legally recognised relationship with her foster parents:

“I didn’t know about my mum then, because I was told to read my notes but I didn’t read them, but I know nothing about my mum. I thought my mum was wonderful, magical person, just got took away, then, well she told me she was lying to me as well. Like [my foster parents] wanted to adopt me then and I said yeah but then my mum’d say no and I’d say yeah and try and keep both sides happy then and whatever each one wanted to hear then and it all blew up then. So.... I always wanted to be adopted, always always wanted to be adopted. Well I reckon it come too late, the right family come too late for me.”

Hana’s story suggests that in a way she thought she was too old when the opportunity for adoption arose because it meant that her choice played a large role in the process. She was clearly torn between pleasing both her mother and her foster parents who wanted to adopt. However, she also stated that she was too young for the decision, or not in possession of all of the facts necessary to make a valid decision, as it was important for her to maintain an idealised image of her mother, rather than to know the truth, which may have tipped the balance in favour of adoption. Her statement saying “always always wanted to be adopted” denoted the significance for that extra commitment that her foster parents were willing to make for her and the security that she would have valued.

Maintaining relationships with birth and foster families appeared to be a complex issue, especially when not supported by the parents or care system. It seemed that loyalty to either side was seen as possibly jeopardising the other relationship, which was not helped if the birth and foster parents saw each other as adversaries as well.

3.3.5 Impact of Care System Subordinate Theme 5: *Isolation*

The social stigma of being in care appeared to affect the wider world of some of the participants beyond their home life.

Amy described difficulty getting close to peers due to the isolation she felt in care:

“I think it was the fact is that I was one of the kids in care and I didn’t live with my parents and you had kids in school which lived with their mum and dad and they always got what they wanted or they had an

easier life or an easier run through life than what I did. I didn't really want to tell people 'yeah I was in care, been in care since I was 4 years old,' because I've said that once and someone has turned around and said 'oh where's your mother, oh, your mother was probably a drunk' and I was like 'no'.

Even if Amy didn't tell her school peers that she was in care, she still felt different from them. She felt that her life was a struggle and theirs wasn't. A lack of understanding from her school peers also probably reinforced a sense that others could not be trusted, and that the easier option was to withdraw.

The effect of being in care on peer relationships seemed very marked for Gia:

"When I was in high school I had a group of friends, urm, that I felt really close to and then when I went in foster care I just didn't have any friends at all, when I was 15. Like it was mad, because when I moved in with my dad, for like 2 or 3 months, I had this big group of friends again. It was really weird to feel wanted and a part of something. And then when I went back into foster care I didn't have that again. And then I did in school just for a few weeks and then it went again."

Gia's experience was striking, as every time she went into care she found that her friendships disappeared, but would reappear when she came back out of care. It was difficult to know if it was the reaction of her peers or her own receptivity to friendship whilst in care or a combination of both that fuelled this pattern. Even so, the isolation from both her family and peers during her time in care made it a lonely experience.

Eve described also feeling different to other children, but being able to develop a sense of camaraderie amongst others who were in care:

"[I felt different] because I was going into care ... and my mother wasn't there when I grew up ... So it was like that. Fair enough, I had my own set of friends ...and they understood me ... because they had gone through the same as me."

Something about the uncommunicated understanding of others who have also been in care, others were accepting and shared the experience of being in care was seen as bringing certain other people close.

Ida explained how the isolation of foster care formed the basis of a strong friendship:

“Me and [my friend] have been through a lot of the same sort of things. Obviously being in care and like, neither of our dads around and just all of that growing up so.... we relate to each other quite well.”

Similar to Eve, she was able to form a relationship with someone who had also experienced living within the care system.

Overall, it appeared that being in care was a socially isolating experience, probably associated with the stigma surrounding it for peers and the emotional strain experienced by those being placed in care. However, there did appear to be a strong sense of community and sense of belonging with others who had undergone the same experience, which could provide the basis for long-term strong constant relationships.

3.4 Superordinate Theme 3: Developmental Needs

The final superordinate theme was **Developmental Needs**, which encapsulated how the participants were either able to meet their developmental needs, or the barriers that hampered their development. The subordinate themes reflected the different aspects of **Developmental Needs** that the participants described, these included: *Needing a Secure Base, Responsive Teaching, Impending Adulthood, Role Models and Personal Resources.*

3.4.1 Developmental Needs Subordinate Theme 1: *Needing a Secure Base*

Bowlby (2005) states that the attachment figure provides a ‘secure base’ from which the child may go out and explore and learn. This also appeared to be pertinent for some of the participants.

Gia described how she didn't initially know who she wanted to be, but then her love of learning developed when she was in foster care and she was able to use the resources available to her:

“I didn't know where I fitted in like I wanted to be this person but I ... wanted to smoke and be on the streets drinking. But then on the other hand I wanted to be a dolly bird in school, friends in school, I wanted to be a social worker when I was older and then, like, in the middle I just wanted to stay at home and like be with my foster carer and her kids cleaning for her and eating dinner and reading books. So I don't know, like I didn't really know what I wanted. I didn't know how to balance any of that. And then when I was 15, I don't know, like [going on holiday] was really weird because ... when I came back I felt like a totally different person. But I don't know if that's because I'd seen like a different culture and the way people live and then again I did a lot of reading on holiday as well. I think going to foster care and like learning things from other people [helped]. So yeah, like I love learning anything.”

Gia was initially confused about her own sense of identity, perhaps from limited opportunities to develop whilst growing up. She stated that going on holiday with her foster parents was a turning point for her. Seeing other cultures, reading and interacting with other people helped her to work out who she wanted to be. Therefore, foster care not only gave her the opportunities for personal development but also the security from which she was able to focus on herself.

When asked what hampered her learning and what might have happened in her life if things had been different, Hana stated:

“[My learning was inhibited by] moving around all the time and nothing was ever secure...[if things had been different I] probably would have gone to university or something.”

Therefore, Hana recognised that the disruption she experienced during foster placements impacted upon her ability to learn. If she had experienced more security she believed that her life would have been different.

Ken talked about security in terms of the relationships he experienced in his most recent supported living compared to when living with his mother:

“Well, if I was to go back with my mam... we like argue all the time, but since I come out of that situation, this situation, everything’s calmed down and I know mostly it’s [a support worker that] I build a good relationship with ... well with all the staff really, but [two of the support workers are] the main one[s] I can talk to and build a good old relationship with.”

Living in a calm environment and developing good relationships enabled Ken to focus on college and his own career aspirations:

“When I was going [to college when] I was living back at home, I couldn’t go to college whatsoever...I didn’t like going at the time I was a teenager and I was like sod it like, you don’t need the education do you? But now I [fell] back on everything, so now I need to start back up again... because I was doing barbering when I was [originally] in college, but it was not for me, so now I need to go and do something with food and hygiene... I love doing cooking and all that so they told me to go for a cooking course, college.”

It seemed that Ken found it difficult to engage in learning whilst living in a volatile environment with his mother. However, due to his move to a “calm” environment, he was able to think about what he wanted to do and was encouraged by the support workers with whom he had developed a trusting relationship.

When asked if it was the situation or the time of his life that enabled the changes he experienced Ken stated:

“I’ve [been] put in a situation...that’s been really good for me. And urm, it’s like, everybody’s brilliant, but [a support worker is] the best one ever to have as a support worker...if I was to go back from before when I met [the support worker] everything probably be change, but since [I] met [the support worker] since I moved in, everything’s completely different.”

Therefore Ken attributed the changes he experienced to the supportive relationship and calm environment that he lived in rather than being an element of his maturation.

For some of the participants, the relationships that they developed in care or supported living provided the security for them to focus on their own personal development and make use of the opportunities available to them.

3.4.2 Developmental Needs Subordinate Theme 2: *Responsive Teaching*

Some participants described how they were helped with their learning through *responsive teaching*.

Caty described how her step-father used different techniques to help her learn, which were important as she experienced learning difficulties:

“I really developed because of my dad...[We’d] play number games and my dad used to read to me, tell me how to [spell] my name, just like different colours so I’d know which one was [which], it was really nice.”

Caty described how her step-father helped her to learn by using creative techniques to aid her understanding of spelling. He would also teach her through play, making it fun and engaging for her, which she appreciated. She also experienced constructive criticism and rewards for progress, helping her to learn:

“[My step father would] tell me how good I was doing and how great I was and how I could improve it if I wanted to and my sister would go out and buy me stuff, like chocolate. And my brother would shower me with hugs.”

There was support and security within the relationship for Caty to be able to make use of constructive criticism. Other family members also helped to encourage her with rewards.

Recognition of achievements was also important for Deb:

“When I got in to college, because I didn’t think I’d get in to college because I didn’t have any GCSEs, because I had so much going on I couldn’t concentrate on school and I couldn’t concentrate on my GCSEs

and stuff, urm, ... [my grandmother] said like, well done, you know and then when I had my flat in February she was like, I'm proud of you."

Deb believed that the difficult environment that experienced when she was younger impacted upon her exam grades. In the above passage she described how her grandmother encouraged her progress by recognising her achievements.

Deb also described how her grandmother was responsive to her learning needs and ability when she was younger:

"If I couldn't do it she would be like, you know, she would try and help me to do it like, challenge me and stuff, to say look you can do it. I was like, no I can't, and ... she'd be like, you can, go on... [If I made a mistake she'd] tell me not to get upset, try and do it again or don't feel like you're worthless, just try it again."

Deb described how her grandmother challenged her when learning and helped encourage her to build her learning in stages to attempt and complete new things. Her grandmother also showed empathy about Deb's emotional reaction to making mistakes, telling her, "don't feel like you're worthless" encouraging her to try again.

Some participants described experiencing responsive teaching when younger. They seemed to respond well to encouragement and a level of learning that was appropriate for their ability.

3.4.3 Developmental Needs Subordinate Theme 3: *Impending Adulthood*

Becoming an adult seemed to mark changes for some participants. It may be hypothesised that becoming an independent adult reduced the potency of attachment relationships, perhaps enabling space for development.

Amy summed up the different ways she has matured:

"I think with sport it has helped me build myself up, muscle wise and mind wise and emotional, and then drama was mind but a lot of it more emotional urm, and then ... physical as well, so sort of built me up everywhere and I'm more proud of [my emotional strength] than my

muscle size and because it's made me stronger than some of the best athletes in the world ...because I'm stronger than you because of what I've gone through. So it's sort of its bad but good in the same way for me."

Amy believed that she has developed physically, mentally and emotionally through her pursuits. However, she found the emotional growth the most fulfilling. When she stated "bad but good in the same way" she may be alluding to the difficulties she has faced in her life, which were bad, but being able to mature and grow in spite of them, showing her resilience, being good.

Amy had the opportunity to be in a leadership role by coaching children and she used this opportunity to pay forward what she has learned:

"My PE teachers as well got me into sport and started me off into athletics for a team, and urm, and my drama teacher then gave me the kick up the backside to sort of change my life and urm, and not to ruin it and do as much as I can when I can do it and now I'm passing that on to kids now so."

Not only did Amy have the opportunity to be in the teaching role for children in terms of their physical activities, she also described the importance of the emotional development she has been through to teach the children. In this way, she was able to become a role model herself.

The sense of responsibility for others also played a part in Joe's experience, when he found it to be an impetus for being responsible for himself:

"[I became responsible] when I came to live here. Because other than that I've stretched [other's trust] almost all of the time... As well as [cycling] myself over to [the next town] I also ride with 2 twins, that live in the building as well, so the warden trusts me to get them over there safely and to text her or to phone her when they are over there safe as well as myself and the same coming back... I'm able bodied in the building and a few people are not, in here, they rely on me to go out and get them stuff due to bad weather when they can't go out. So one day I

took the bike out by there, up [into town] when we had the snow. And obviously snow was covering pavements, roads, so I was riding in the middle of the road. So I know for a fact that I'm motivated to get up there, no matter how many times I fall off, I'm still motivated to get there."

Joe recognised that he developed responsibility in reaction to being responsible for others. He described caring for others who were less able and being very "motivated" to help them. He was then confident that others could rely on him.

A major motivator for a lot of the participants was being supported in their own decisions rather than being told what to do by the people who worked with them. This helped them to grow up and not become embroiled in the attachment struggle they had experienced within foster care.

Amy found it frustrating when she was not consulted on decisions about her life:

"Some of the decisions that they made on my behalf were wrong... not allowing me to talk at my LAC reviews and say what I wanted to be said."

This passage showed how out of control and disempowered some individuals might feel while in care. Decisions that they didn't agree with made about their life. However, when becoming older some participants found freedom in having their decisions supported, as Joe explained:

"If he was to make a decision but then I was to make the opposite, he may say 'it's your decision, if anything goes wrong with it, then take responsibility or take the action for that decision' ... that is what I was shown, take responsibility for your own decisions, don't go blaming others."

Joe was not only able to make his own decisions later in his life, he also learned a philosophy of responsibility for what he chose.

The onus of maturity also played a role in how someone was expected to act, as Ken described:

“They say to me, you’re a man now, you need to do your own thing. I said, ‘which I do.’ I say I got my mowing machine and I go all round the village, well, mostly old people, do all their grass cut.”

Through helping others, Ken was showing his support workers that he was mature and able to give to those less able than himself.

Becoming an adult seemed to play a role in some participants’ development. It provided opportunities to become responsible through being accountable for others less able than themselves. It also enabled them to become role models and teach others what they have learned themselves.

3.4.4 Developmental Needs Subordinate Theme 4: *Role Models*

Some of the participants spoke about the importance of role models in their lives. It was often the person whom they felt closest to who they looked to for a blueprint on how to behave.

Ken found that having his sister as a role model showed him what was possible in life, particularly since they had had a similar upbringing:

“I want to get my own place, soon, but it’s that confidence... I’ve been looking at quite a few houses, but now my sister’s got one I just want to be the same and get my own.”

Ken described being able to gain confidence for a difficult life transition through seeing his sister’s achievements. Fay also found her sister to be a role model:

“Because she’s like a caring person I might follow it, so I think maybe she’s rubbing off on me. So she’s like a good role model as well.... like I know one day I’m going to have what she’s got, obviously like house, family all that, a job... we’ve all had a similar upbringing.”

Even though Fay and her sister have experienced a difficult childhood, Fay gained hope from her sister’s life. She could aspire to her own house, family and job, because she knew that the difficulties she experienced in life didn’t have to hold her back.

In contrast, some people provided dysfunctional models for behaviour as explained by Gia:

“A few months ago if I felt angry or sad I just used to think ‘oh I’ll commit suicide,’ but that’s because when I was I think 10 my cousin commit suicide then my dad did when I was 16, then a year later my nan did.”

A family legacy appeared to leave Gia with the sense that suicide was a viable option for when things became difficult, she would just be continuing a family tradition.

The participants were probably exposed to a range of modelled behaviour, good and bad. What seemed to be important and productive was aspiring to the achievements others who had similar experiences had gained, showing what was possible in life.

3.4.5 Developmental Needs Subordinate Theme 5: *Personal Resources*

A significant resource for some participants was being able to rely on their own abilities. Whether this was developed as self-sufficiency in reaction to not being able to rely on others or through implementing what they had modelled or learned, it seemed important to have the resulting choices and freedom.

Amy explained that she became self-sufficient in response to not being able to rely on her foster parents:

“And I couldn’t really say what I wanted to say to them personally as well either, like if I was having problems I couldn’t speak to them about it, which really cheesed me off. But then I just grew up to try and sort it out myself, which I managed to do most of the time.”

This sense of becoming self-sufficient was important, maybe to reduce the vulnerability of relying on others or on a system that had previously let her down.

Fay described being quite self-sufficient in her learning at school:

“In school, like, I never really needed the help, so, I just done it all for myself, I’ve been independent since I was little. I’ve learnt myself how to do things.”

She described being independent when young. However, when faced with changes into adulthood, things appeared more complex:

“I sort of, like, I never used to like trying new things and everything, but now since I’ve moved into the hostels, I... have had to do things for myself and like obviously I’m not bothered by it because that’s my independence and that’s what I need to do, but I do a lot more now than I used to. Like I go out a lot more and I cope a lot more, and I eat a lot more.”

Therefore, being independent in an adult sense, rather than independently learning whilst a child, brought more challenges for Fay, she needed to develop and rely on personal resources of attempting new challenges. She needed to be able to rely on her own ability to look after herself.

Caty described how she had internalised what she gained from role models to become self-sufficient in learning:

“I try the easiest one first and then if I think I can do it I go on to a little bit harder or. It’s easier that way. I’m not going to put too much pressure on myself... I try new things, I don’t like trying new things but I have to as well.”

By going at her own pace she could protect herself from the disappointment and frustration of failure, being responsive to her own learning ability.

Gia stated that she was not given a choice about looking after herself due to difficult circumstances:

“I’ve looked after myself since I was 13, so, like I never depended on my mum... she started kicking me out every week and like I’d have nowhere to go and like I was sleeping on other people’s settees and missing school, and so I’ve learnt then that I had to grow up quickly.”

Essentially, Gia had to learn to look after herself from a young age, to make sure she had shelter and food. This meant that she missed other opportunities for

development. Overall though, she displayed great resilience and the ability to develop in ways that her mother had not:

“It’s my mum like, she just don’t know who she is, she’s constantly trying to like, figure herself out I think, whereas... I do kind of know who I am... Before, when I lived with my mum I was quite narrow minded, because my mum was quite stereotypical. So then, when I actually moved out and I lived with different people, I seen things from other people’s points of view. Like urm, I don’t know, like my mum don’t really consider other people’s feelings and hasn’t got much empathy, but when I lived with other people I learnt like to think of others and think of people’s backgrounds I suppose.”

Gia described her own personal resources and personal development as greater than those displayed by her mother. She was able to develop her own identity and empathy for other people. Through her own resilience she was able to make use of the opportunities she was exposed to, rather than staying within the mould her mother provided.

The *Personal Resources* theme depicted the participants’ ability to look after themselves and to make use of what they learned. It might be easy to assume that difficult home and care environments inevitably lead to the perpetuation of cycles of dysfunction. However, many of the young people have shown that they were able to look after themselves and to protect themselves enough to be open to future opportunities for relationships and personal growth.

3.5 Summary

The results provide an insight into YPLCs’ experience of positive relationships. Thus, the primary research question has been explored: What were care leavers’ experiences of positive relationships? Even though each participant could name someone who they have felt closest to, and showed a propensity to make *Available Attachments*, these relationships were contextualised within the difficulties they experienced from probable previous insecure attachment, as shown in the subordinate themes *Relational Impact* and *Emotional Impact*.

The next primary research question was also explored: If positive relationships existed, what was their influence? The influence appeared to be varied, from the positive relationship being a primary attachment figure, to someone who was available to help the young person develop trust for the first time in their life. There were also influences in different types of support described in the subordinate themes *Style of Support*, *Responsive Teaching*, *Role Models*.

Information relating to the final primary research question was seen throughout the subordinate themes: If there was a lack of positive relationships, what would care leavers have wanted? Wanting emotional support from birth and foster families was a presence in the data in the subordinate themes: *Emotional Impact*, *Impact of the Care System* and *Style of Support*. In addition, wanting to be accepted and feel cared for and secure arose in the subordinate themes: *Repeat Dysfunctional Attachment* and *Needing a Secure Base*.

The participants gave a variety of responses for the secondary research question: Who were the positive relationships with? Not only did the participants name many different sources of the person who they felt closest to in their lives including birth family, foster family and professionals, some were also able to make positive relationships with additional individuals to meet additional needs, such as emotional support.

The next secondary research question was based upon Pringle's (1986) model of developmental needs: Which areas of developmental needs were met through relationships? The superordinate theme **Attachment** suggested that the need for 'love and security' was only partially met in the participants' lives, due to the ensuing emotional and relational impact. The need for 'new experiences' was met for some participants through some positive relationships in the subordinate theme *Responsive Teaching*. However, for other participants it was a skill they had to learn themselves shown in the subordinate theme *Personal Resources*. The need for 'praise and recognition' was often not met, as shown in the subordinate theme *Repeating Dysfunctional Attachment*, but for other participants it constituted a part of *Responsive Teaching*. Finally, the need for 'responsibility' appeared to be met for some participants when they were becoming adults themselves, in the subordinate theme *Impending Adulthood*.

The final secondary research question was: At what time of their life were different developmental needs met? The developmental needs appeared to either have been somewhat fulfilled when participants were younger in relationships with those who they felt closest to, otherwise they seemed to be met much later in their lives, perhaps after the pressure of attachment relationships had reduced. For example, later in life trust was reported as difficult to build without previous experience shown in the subordinate theme *Relational Impact*. Similarly, 'new experiences' seemed to be a skill that had to be developed when living independently if not experienced when younger, as reported in the subordinate theme *Personal Resources*.

Therefore, all of the research questions have been explored through the IPA analysis results. These results will be considered in relation to relevant literature and suggestions for their implications regarding services and practice will be explored in the Discussion Chapter.

Chapter 4 - Discussion

4.1 Chapter Overview

This Chapter presents a discussion of the results in relation to relevant literature and theory. Then, the clinical and service implications will be addressed, followed by an examination of the strengths and limitations of this study. Finally, implications for future research will be outlined.

4.2 Research Findings in Relation to the Existing Literature

The aim of this study was to explore care leavers' experience of positive relationships and how these relationships have impacted upon their lives and development. This is the first study to focus upon developmental needs being met within relationships, enabling a wide variety of influential relationships from the young people's lives to be explored. The developmental framework also allowed relationships that influenced a specific area of development to be elucidated, by not restricting the definition of important relationships to one type of person in their lives, as in previous research (Ahrens *et al.*, 2011; Collins *et al.*, 2010; Greeson & Bowen, 2008; Munson *et al.*, 2010; Oke *et al.*, 2011; Osterling & Hines, 2006).

Three superordinate themes emerged from the data, **Attachment**, **Impact of Care System** and **Developmental Needs**, each containing several subordinate themes. Each of these themes will be discussed according to the literature on relationships and care system experience.

4.2.1 Attachment

The participants from the current study spoke about issues that related to attachment theory, making it a large focus of the overall findings. The superordinate theme **Attachment** consisted of three subordinate themes: *Available Attachments*, *Relational Impact* and *Emotional Impact*.

4.2.1.1 Available Attachments

Bowlby's work (2005) originally focused upon the maternal relationship as the most important attachment relationship in an infant's life. This corresponds with Pringle's (1986) model of developmental needs to 'love and security'. The current study explored relationship experiences of individuals who had been taken into Local Authority care, because the care provided by their parents was either insufficient or included maltreatment (Welsh Government, 2014). Thus, it was important to examine whether these individuals were able to have their developmental needs met through parental or other relationships. The subordinate theme *available attachments*, supported research showing that caregiving could be provided by different and multiple caregivers (e.g. Howes, 1999). There was a variety of people who the YPLC reported they felt closest to throughout their lives, including their birth mother, siblings, step parents, grandparents, foster parents, social workers, friends and support workers. The family relationships tended to be longstanding, from the individual's birth, something they wished to maintain when placed in care. Within these family relationships the individual tended to have taken on the mothering role, which was reflected by the attachment bond strength of that relationship. In comparison, the foster parent and professional relationships that developed appeared to provide the opportunity for additional or new trusting relationships to be established, if the conditions were right for the young person. Therefore, the data suggested that new important relationships could be developed later in the young person's life. The close relationships reported by the participants have the potential to support the protective factor for mental health resilience found in previous research of 'feeling parents or other adults care about them' (Harpin *et al.*, 2013). Thus, the data from the current study supported previous research suggesting that there are multiple people and opportunities during care leavers' lives for a close relationship to develop.

The time of life that the 'closest' relationship formed appeared important in relation to its qualities. Being able to rely on someone was reported as an important quality in close relationships developed in childhood, through that person investing time and care in the young person. These elements appear synonymous with the theme of continuity and reliability, which was the only theme present in all of the studies from

the systematic review, denoting relationships that had a future (Ahrens *et al.*, 2011; Collins *et al.*, 2010; Greeson & Bowen, 2008; Munson *et al.*, 2010; Oke *et al.*, 2011; Osterling & Hines, 2006). Elements of security, love and trust were also seen in secure attachment (Bowlby, 2005) and found in several of the studies from the systematic review (Greeson & Bowen, 2008; Munson *et al.*, 2010; Oke *et al.*, 2011; Osterling & Hines, 2006). For close relationships developed later in the young person's life, the element of communication was reported as important. This may have been an opportunity for the individual to experience 'intersubjectivity' for the first time later in their life, whereby both people share awareness within an interaction (Hughes, 2004). Or this pattern may have reflected a time in the young people's lives that was less charged with the intensity of attachment needs as they grew out of the adolescent period (Bowlby, 2005). The data from the current study therefore suggests that relationship needs differ during the life cycle, supporting the developmental aspect (Pringle, 1986).

4.2.1.2 Relational Impact

Even though all participants were able to name someone who they felt close to during their life, there was still evidence of the impact of a lack of consistent and stable attachments that affected their relationships. Those participants who maintained their relationships with their birth mother, or siblings who took on a parental role in their upbringing, described relationships with some qualities descriptive of secure attachment and some qualities that differed. There was an element of open communication and being accepted, a relationship quality previously cited as important for YPLC (Ahrens *et al.*, 2011; Collins *et al.*, 2010; Munson *et al.*, 2010) and important for trust in the attachment relationship (Bowlby, 2005). However, there appeared to be limits to the security of these relationships. Rather than being cared for and looked after by a more capable attachment figure, the participants described equal relationships, where they either shared the level of care or, in one case, were expected to provide a higher level of care to the other person. This dynamic appeared to feed into the development of self-sufficiency in those who maintained their original parental figure relationships. This style of self-sufficiency was also present in participants who did not feel that they could rely on those relationships at all. A quality named 'vigilant self-reliance,' whereby the

individual achieves emotional autonomy because they are not able to rely on others for emotional support has been described in YPLC (Samuels & Pryce, 2008). This trait has been cited as a double edged sword. On the one hand it contributes to resilience through the strength derived from being able to survive through trauma, but on the other hand it can also inhibit the development of connections needed for future supportive relationships (Samuels & Pryce, 2008).

Although participants' attachment styles were not formally assessed during the current study, elements of insecure attachment were apparent in the data. One example of this was the equal or inverse caring relationship, whereby the child fulfils the attachment needs of their caregiver (Bowlby, 2005). There was also a fear of rejection, which was often remarked upon in relation to future relationships, or through difficulty grieving for the loss of important relationships (Bowlby, 2005). In the current study, the sense of rejection was evident in descriptions of a fragility of trust that was developed. This is similar to the results from Ahrens *et al.* (2011), who reported a fear of rejection rather than secure attachment qualities.

4.2.1.3 Emotional Impact

The lack of consistent and reliable relationships was most pronounced in the data through the subordinate theme *Emotional Impact*, denoting the emotional impact of the participants' relationship experiences. Some participants described experiences of invalidation of their emotions, either directly through inappropriate adult reactions or through a family culture of not sharing emotions, similar to Gottman's (2011) dismissive and disapproving parenting styles. Two types of *Emotional Impact* described by the participants were a lack of emotional regulation and a lack of emotional expression. Linehan (1993) describes how the impact of an emotionally invalidating environment on a genetically sensitive individual can lead to an increase of emotional behaviours in the child. Specifically, the dilemma of 'unrelenting crises' and 'inhibited grieving' seems relevant to the patterns in the current data. Linehan (1993) described this dilemma experienced by individuals with emotional dysregulation as primarily occurring due to a chaotic lifestyle that compounds stressful events, leaving individuals with a highly emotional temperament constantly charged and vulnerable to even small stressors. The individual then switches to an alternate strategy, due to the social consequences of their emotional expression, and

attempts to balance the constant crisis through inhibited grieving, thus attempting to cut off from the experience and expression of extreme emotions. Therefore, the data depicted patterns of emotional dysregulation stemming from invalidating environments as described by the Dialectical Behavioural Therapy model (Linehan, 1993).

4.2.2 Impact of the Care System

The next superordinate theme, **Impact of the Care System**, consisted of five subordinate themes. Therefore, the findings from the current study displayed a wider picture of care system influence than seen in previous research. Only four of the studies from the systematic review displayed a similar area, *system limitations* (Ahrens *et al.*, 2011; Greeson & Bowen, 2008; Oke *et al.*, 2011; Osterling & Hines, 2006), which described how the instability of the foster care system impacted upon the development and maintenance of relationships.

4.2.2.1 Style of support

This subordinate theme described how different styles of support impacted upon the participants. Participants' narratives suggested that both emotional and practical support were important. The themes relating to support from the systematic review varied widely, for example including 'tangible support,' 'emotional support,' 'serving as a role model,' 'guidance/advice' and 'support as a parental figure' (Ahrens *et al.*, 2011). Similar variation was reported in three other studies (Greeson & Bowen, 2008; Munson *et al.*, 2010; Osterling & Hines, 2006). Therefore, the current study endorses previous findings that different types of support are important.

As the current study focused upon meeting developmental needs, rather than the impact of a single relationship, some participants reported gaining their unmet support needs through relationships with people in addition to those whom they felt 'closest to' or who had the primary caring role. For example, one participant who did not feel that she had her emotional support needs met through her foster parents was able to develop relationships with a teacher and within specialist services, which enabled the development of emotional regulation skills. This finding supports previous research indicating that important relationships can be formed outside of

the parent child dyad (Howes, 1999); can be of an alternative attachment style (Dozier *et al.*, 2001; Steele, *et al.*, 2003); and can be with supplemental attachment figures such as teachers (Verschueren & Koomen, 2012). This finding may point to a potential area of resilience in YPLC, involving an openness to develop specific relationships according to their developmental needs.

The type of support that the young person could tolerate also seemed to play a part. For example, for some participants an emotionally supportive relationship seemed too threatening following their experience of being rejected, they might be expecting this from other relationships (Bowlby, 2005). Therefore, a practical focus of support could involve the provision of the first building blocks of a secure relationship involving trust, reliability and consistency.

4.2.2.2 Repeating Dysfunctional Attachment

The possibility of trauma being repeated in the care environment has been recognised (Courtney *et al.*, 2005b). The influence of attachment theory on the data analyst was likely to have influenced the interpretation of the subordinate theme of *Repeating Dysfunctional Attachment*, which was not reported in any of the systematic review studies examining the qualities of care leavers' relationships. Even so, interpretation of the data suggested that the system developed to remove children from insufficient and dangerous growing up environments may subtly reinforce the damage at a relationship level.

The themes of sensitivity to rejection and coping through self-sufficiency seen in the subordinate theme *Relational Impact* within the superordinate theme **Attachment**, were also apparent in relation to the care system. The contractual nature of foster parenting in itself appeared to contribute to a feeling of rejection, for example, one participant stated, "*half of them are only in it for the money.*" Some participants reported that testing the boundaries of their foster carers' rules meant that they would be moved on to another placement, thus confirming their beliefs about rejection and not fulfilling their underlying yearning to be accepted and secure. Some participants also reported that they were unable to develop the trust that they required in relationships whilst in the care system. One participant reported the impact of her foster mother's own problems on their relationship, showing the detrimental impact

that a foster carer's own attachment style can have on their foster parenting relationship (Steele *et al.*, 2003). These patterns partially support the notion of a static attachment style (Bowlby, 2005) through some participants' descriptions of their own rejecting behaviour; however, unless the individual has the opportunity to experience relationship security, they are unlikely to have the opportunity to build alternative views or models.

4.2.2.3 Providing a Safe Place

In contrast to the previous subordinate theme, some participants reported feeling security within Local Authority care in the subordinate theme *Providing a Safe Place*. The safety and security provided within foster care essentially seemed to enable a 'secure base' to be established (Bowlby, 2005). This environment provided the space for developmental tasks to be completed, such as forming an identity or engaging with education. Bowlby (2005) states that security is a requirement that provides the foundation upon which other development can take place. However, the data suggested that for the current sample of care leavers, a lot of time was required for the initial trust to develop.

4.2.2.4 Maintaining Family Relationships

The subordinate theme *Maintaining Family Relationships* was only reflected in one study from the systematic review from the perspective of foster parents in Oke *et al.*'s (2011) study with respect to managing contact with the foster child's parents. The current study has highlighted the complexity of managing birth and foster families within the care system from the alternative perspective of the LAC.

Some of the participants reported difficulties they experienced in maintaining relationships with their birth parents and siblings, particularly if they were the people who they felt closest to. There was also an element of trying to please both their birth and foster parents, perhaps restricting opportunities such as adoption, which was sometimes compounded by the foster and birth parents taking adversarial stances against each other. The difficulties reported in the current study supported findings from previous research, relating to the loyalty conflict a LAC can experience between birth and foster parents (Leathers, 2003).

Maintaining sibling relationships has also been recommended on the basis of previous research, especially if these relationships provide a sense of security in the young person's life (Herrick & Piccus, 2005; Wojciak *et al.*, 2013). This is congruent with findings from the current study, especially where an older sibling had assumed a parental role.

4.2.2.5 Isolation

Participants from the current study described a sense of isolation while they were in care, particularly in relation to their peers. This finding is potentially consistent with previous research, which suggests that insecure attachment affects peer relationships (Blain *et al.*, 1993), as the transition into care is likely to be a time of relationship upheaval. In addition, some participants described only feeling peer isolation while they were in a care placement, compared to times they were living with their birth family. This could be related to many possibilities, for example: 1) time in placement triggered insecure attachment (Bowlby, 2005), 2) being in care produced a social stigma amongst peers (Kools, 1997), or 3) the emotional turmoil of being placed in care affected the young person's ability to form friendships. The current data did not focus sufficiently upon this area, but provides useful suggestions regarding future research.

4.2.3 Developmental Needs

The superordinate theme **Developmental Needs** captured participant reports about what they required and factors that impacted upon their own development. There were five subordinate themes derived from the data: *Needing a Secure Base*, *Responsive Teaching*, *Impending Adulthood*, *Role Models* and *Personal Resources*.

4.2.3.1 *Needing a Secure Base*

In this subordinate theme the role of security described by participants related to their feeling secure in order to be able to develop. Love and security was considered to be a critical area of developmental need for children by Pringle (1986). Research has suggested that a child needs a secure base before they can begin to learn and respond to the emotional and social communications of their caregivers (Porges, 1997; Schore, 2001). Participants reported that they also experienced difficulties

focusing on learning and personal development when they did not feel safe as older children and adolescents. One participant commented that she believed her life would have been different, perhaps involving university, if she had felt safe in earlier foster placements. This is an important statement considering the protective nature of longer-term education for YPLC (Hass & Graydon, 2009; Jones, 2011). These findings suggest that safety remains important throughout childhood and adolescence and may have an impact upon the individual's overall development and later life.

4.2.3.2 Responsive Teaching

This subordinate theme related to participants' experiences of learning with the individuals with whom they shared positive relationships. The importance of responsiveness to learning and support within relationships was also reported in three of the studies from the systematic review (Ahrens *et al.*, 2011; Collins *et al.*, 2010; Osterling & Hines, 2006). In the current study, it seemed important that the adults helping with learning remained within the 'zone of proximal development' (Vygotsky, 1978), enabling the young person to develop their skills at a level they could manage through assistance from a more competent other. This served to increase their confidence in their ability to learn, leading to the internalisation of the skill of scaffolding their own learning later in life, consistent with learning theory as developed by Vygotsky (1978). Therefore, through the experience of sensitive teaching some participants reported being able to progress to being able to teach themselves.

In addition, reward and recognition of achievements seemed important to some participants, reflecting the developmental need for praise and recognition outlined by Pringle (1986). She stated that responsive teaching could in itself help to build a young person's self-esteem. Encouragement was also reported as an important element of supportive relationships in two of the studies from the systematic review (Collins *et al.*, 2010; Osterling & Hines, 2006). Thus, this subordinate theme supports previous research.

4.2.3.2 Impending Adulthood

The subordinate theme *Impending Adulthood* related to participants' reported experiences of growing up and becoming adults, and what this meant for their own

lives. Several of the respondents spoke about becoming self-sufficient and gaining the skills necessary for independence. This was similar to the themes of ‘preparing for life’ found in some of the studies within the systematic review, where a practical focus upon the skills needed for independent living were the focus (Ahrens *et al.*, 2011; Osterling & Hines, 2006). However, a participant from the current study also reported that her emotional development was very important to her, suggesting a wider realm of development than practical skills.

Some participants reported that becoming an adult meant taking responsibility for themselves and for others, wanting to pass on the gains from their positive relationships to other people. Responsibility was cited by Pringle (1986) as an important area of developmental need, which progresses over the life cycle. Some of the participants stated that their experience of being able to take responsibility for their own decisions as they transitioned out of care was important to them. The experience of not being consulted about decisions relating to their lives while in the care system was reported to have been difficult. This transition may also mark moving away from the greater attachment needs of adolescence (Bowlby, 2005); becoming an adult and moving away from the need for high levels of support may have relaxed the intensity of emotion related to unmet attachment needs.

An important part of the transition into adulthood for some participants was being responsible for others or passing on what they learned by becoming role models for others. This was expressed through contributing physical tasks and passing on emotional learning. This learn-internalise-teach/pass on cycle reflects the theme from the systematic review studies ‘development/change’, which included areas such as identity, cognitive, emotional, relationship, problem solving and independence skills (Ahrens *et al.*, 2011; Greeson & Bowen, 2008; Oke *et al.*, 2011; Osterling & Hines, 2006). In the current study these areas of development have been contextualised within the relationships that facilitated them.

4.2.3.4 Role Models

As well as the potential for becoming a role model themselves, having role models was stated as important by some participants. In particular, the similarity of the role model to themselves was important. Someone who had been through similar life

experiences and displayed resilience and achievements seemed to be the type of person who some of the participants from the current study could look up to. This is similar to patterns suggested by previous research, where similarity to mentors and people with whom supportive relationships were developed were important (Ahrens *et al.*, 2011; Munson *et al.*, 2010). In addition, the current study has shown how the similarity of role models enabled some participants to imagine their own futures.

4.2.3.4 Personal Resources

Becoming independent was stated as an important experience for some of the participants. There appeared to be a sense of security from the development of self-sufficiency, which may relate to the trait defined by Samuels and Pryce (2008), ‘vigilant self-reliance.’ Some participants from the current study reported feeling better and stronger developing the emotional autonomy that Samuels and Pryce described, not having to rely on others for support. However, this type of self-sufficiency may lead to difficulty in developing future supportive relationships (Samuels & Pryce, 2008).

For other participants, personal resources related to implementing learning for themselves, becoming self-sufficient in trying the ‘new experiences’ that Pringle (1986) cited as an important area of developmental need. A dislike for trying new things was reported by some participants and may have come from limited opportunities when younger, but adult independence meant that this was a skill they had to develop. These areas of personal resources may reflect developmental needs that were not met when the participants were younger, which they developed later themselves.

4.2.4 Summary

The current study has identified three major superordinate themes relating to YPLCs’ experience of positive relationships: **Attachment, Impact of the Care System** and **Developmental Needs**. It has also shown how internal and external influences impact upon these relationships and also the effect that these relationships have on their own lives. The themes identified in the current study reflect many from previous research. All of the areas of relationship qualities from the systematic review were represented within the current data. Although the areas of genuineness,

acceptance and empathy were not explicitly seen as themes, they were still present in the descriptions of positive relationships that the participants reported experiencing.

Using a qualitative approach in which the themes were derived from the data rather than fitting the data to a preconceived framework, meant that there was no formulaic reflection of particular research models. The framework of the semi-structured interview was based upon the areas of developmental needs met within relationships reported by Pringle (1986). Although each of the four areas of developmental need (love and security, new experiences, praise and recognition, and responsibility) were represented within specific superordinate and subordinate themes, a greater proportion of the experiences that participants reported related to overall relationship attachment difficulties and the impact of the care system. The data suggested that fundamental secure relationship needs were a larger focus for the participants and that these often took precedent over the fulfilment of other developmental needs.

The findings from the current study also suggest some new patterns and more explicit understanding of particular areas. An overriding theme throughout the data was the participants' reports of feeling rejected and being unable to trust. These reactions may be expected within an attachment framework (Bowlby, 2005), but the current study highlighted how the care system may exacerbate these feelings through a continued sense of instability. A constant need throughout the participants' lives appeared to be the need for a secure base, so that they might focus upon their developmental need, rather than upon their own safety.

Needs related to building trust, and sensitivity to rejection, seemed to differ in their level of intensity according to the individual's stage of development and previous experience, supportive of a life-cycle view of relationship needs (Pringle, 1986; Dozier *et al.*, 2002). As young children, building trust seemed to be related to an investment of time and care within an important relationship. Amongst individuals who developed trust later in their lives, during or after adolescence, communication was stated as important. Previous experience of trust also seemed important in relation to developing new positive relationships. If there was previous experience of trust, then displays of love and caring and consistency were required. On the other hand, if developing trust was a new experience for an adolescent or older individual, a practical relationship focus seemed preferable, as a way in which to begin

experiencing consistency and security without being overwhelmed by emotion. There also seemed to be a relationship requirement for persistence and stability, even if the young person tried to sabotage the relationship, so that trust could be maintained. Being able to manage the complex and varying needs for trust within the young person relied upon the responsiveness of the person with who the positive relationship was developed. Overall, security, consistency and persistence were the qualities that stood out from the data in relation to making and maintaining positive relationships.

4.3 Clinical and Service Implications

The results of the current study provide evidence that LAC value security, consistency and persistence within responsive relationships and that the provision of these elements helps them to meet their emotional and educational developmental needs. This section looks at what these findings mean in relation to clinical and service provision.

The need for stable relationships, including those with professionals, within the lives of young people in care is important. A report by the Department of Education (2013) showed that there was a turnover rate of staff of 11.2% within Local Authority Children's Services in England during 2012, which was comparable to rates in adult services. However, 19% of the children's services staff were aged 55 or over, which indicates a higher turnover rate in the future due to the aging workforce. Specifically, within child protective services, recruitment and retention of experienced social workers was reported to be a challenge, due to high referral rates and caseloads, leading to work pressure (Baginsky, 2013). Such work pressure has been linked to 'burnout' whereby the professional experiences emotional exhaustion, depersonalization and feelings of reduced personal accomplishment (Anderson, 2000). These figures show a high staff turnover that is due to increase. Staff turnover has been found to relate to a lack of stability and loss of trusting relationships for the affected young people (Strolin-Goltzman, Kollar & Trinkle, 2010). Therefore, high staff turnover has the potential to exacerbate feelings of rejection in LAC.

Achieving greater stability in the Children's Services workforce has been attempted through various avenues including the Social Work Task Force, Social Work Reform

Board and input from the Centre for Workforce Intelligence (Baginsky, 2013). To improve retention of experienced social workers Baginsky (2013) suggested the following strategies: monitoring workloads, improving working conditions, fostering positive workplace cultures, providing continuing professional and career development opportunities and providing supervision. A role clinical psychology could take is in relation to supervision, and this might help to reduce emotional exhaustion associated with burnout (Anderson, 2000). Supervision is a core competency for clinical psychologists (Toogood, 2010) and would help with reflective practice for Child Services workers working with difficult cases.

Similar instability can be experienced within the care system, when the young person experiences multiple placements (Dozier *et al.*, 2002). Multiple placements have been found to be associated with internalising and externalising behaviour, both in reaction to and contributing to placement disruption (Newton, Litrownik & Landsverk, 2000). A qualitative study reported that multiple placements reinforce a sense of rejection, as they are experienced as a series of significant losses, leading to difficulties trusting people and building and maintaining relationships (Unrau, Seita & Putney, 2008). This is another area of possible disruption for young people who need to experience stability and security.

One way to improve foster placements and to reduce disruption is through foster care interventions. In a review of the literature Dozier and colleagues (Dozier *et al.*, 2002) reported several different focuses of foster care interventions according to the developmental age and needs of the young person. They concluded that the research literature was limited and did not find conclusive evidence regarding the efficacy of any specific intervention. In particular, there was a paucity of interventions for school age and adolescent young people. The authors suggested that interventions for care placements should focus on several different areas. The first area was emotional dysregulation in preschool children, through the creation of predictable home environments. The second area was in relation to attachment, where they emphasised the need for caregivers to behave in a nurturing and therapeutic manner even when faced with rejecting behaviour from the child in care. The final area was in relation to behavioural problems, such as inhibition control, where interventions should focus upon clear communication of simple expectations from parental figures and on

helping the child to learn how to develop focus and attention. These styles of intervention are consistent with findings from the current study relating to the creation of stable, non-rejecting environments in which trust and emotional regulation can develop.

There has also been a growing body of research about services provided for YPLC (Stein, 2006). Even though these individuals are reaching maturity, the data reported by participants in the current study suggested that relationship security and issues with emotional regulation were still of major importance.

Daniel Hughes (2006) created Dyadic Developmental Psychotherapy, a treatment that has been found to be useful for young people who have experienced trauma and attachment difficulties (Becker-Weidman, 2006). The therapy involves creating an environment that is 'Playful', 'Accepting', 'Curious' and 'Empathic'. Within this environment, the therapist uses 'intersubjectivity' with the child, which involves developing a shared awareness with the child of their experience. This helps the child develop the capacity for reflection through the congruent, empathic responses of their therapist to their affective state, creating a secondary representation for the child of their original emotional experience (Fonagy, Gergely, Jurist & Target, 2002). Thus the child comes to understand their own mind and other people's minds (Fonagy *et al*, 2002). This enhances their ability to communicate their inner experience and understand the inner world of others, which is much more developed in those who are securely attached (Hughes, 2004). The principles of developing such skills through an attachment framework, as defined by Hughes (2004), may be interwoven into service provision and the people supporting young people in care can be given guidelines for instigating therapeutic interactions with young people who have attachment difficulties.

A second area that the data suggested as a pertinent developmental problem for the participants was emotional regulation, both in terms of difficulty with emotional regulation and difficulty in expression. Dialectical Behaviour Therapy (DBT) was developed by Linehan (1993) to help individuals with emotional dysregulation. It has been recommended as an intervention for women with borderline personality disorder who repeatedly self-harm (NICE, 2009). It is a behaviourally based model, whereby the therapist creates a validating relationship with the client to reinforce

positive behaviours and extinguish negative behaviours. The client is also trained in skills including mindfulness, interpersonal skills, emotional regulation, distress tolerance and self-management. The DBT model can be used to guide individual and group therapy and service provision. In particular, the service level intervention can help to support individuals who experience frequent crises (Linehan, 1993).

Overall, the study findings suggest clinical and service developments that support stable environments in which positive relationships can develop. Interventions may focus upon individual relationships or more general service provision, so that the young person is supported by a system that does not exacerbate their relationship difficulties. Suitable psychological models already exist (e.g. Linehan, 1993; Hughes, 2006), but more research about their implementation is required for the care population.

4.4 Strengths and Limitations of the Study

The aim of this study was to explore care leavers' experiences of positive relationships and the impact that such experiences had on their lives, especially in relation to their development. A review of the literature in Chapter One revealed that previous research about the qualities of relationships experienced by and with young people in care focussed upon specific individuals, such as a natural mentor, advocate or foster parent. Considering the literature on varied and multiple attachments (Howes, 1999), the current study used a qualitative methodology to explore how specific developmental needs (Pringle, 1986) had been fulfilled through relationships. Thus, while many participants identified an individual whom they felt 'closest to' in relation to the need for love and security, many also reported other relationships that were significant in helping them to achieve additional developmental needs. The assessment of quality in qualitative research was discussed in Chapters One and Two. The criteria defined by Elliott *et al.* (1999) were considered in relation to the design of the current study and the CASP (2010) criteria were used in the systematic review to assess published research. Both will be considered here in relation to the strengths and limitations of the current study.

4.4.1 Methodology and Design

A qualitative methodology was considered appropriate for the current study and discussed in Chapter Two. Specifically, IPA enabled the exploration of the phenomenon of care leavers' experience of positive relationships, as this methodology seeks to uncover an individual's 'lived experience' (Smith *et al.*, 2009). Thus, the meaning, impact and sense that the participants made of their positive relationships was privileged in the current study. Gaining information about an individual's experience depends upon their level of reflexivity (Willig, 2008), how they are able to reflect upon and communicate their experiences (Smith *et al.*, 2009). Participants were purposively selected for their ability to talk about their experience, which is likely to have skewed the sample. In addition, the semi-structured interview was based upon the framework of developmental needs outlined by Pringle (1986). This process may have been slightly more structured than the expansive style recommended in IPA, where the participant is encouraged to talk at length (Smith *et al.*, 2009), but was considered appropriate to aid participants in their descriptions and to adhere to the research question.

The current study also only used one methodology. Elliott *et al.* (1999) recommend re-analysing data using an alternative method to enhance the credibility of the findings. Methodologies such as content analysis could enable additional interrogation of the data and validation of the results, possibly using quantitative analysis, although the current sample was probably not large enough to provide sufficient statistical power. Alternatively, an analysis such as grounded theory could have provided a model of the process of the development of positive relationships (Charmaz, 2003), but this was not the primary objective of the current study. Instead, the research task of exploring a phenomenon using a range of suitable cases was achieved (Elliott *et al.*, 1999).

4.4.2 Recruitment and Sample

The sample was recruited from a service called Skills for Living, which provides support and interventions for the development of emotional regulation for YPLC. This sample was therefore deemed suitable (CASP, 2010) to explore the phenomenon of positive relationships experienced by YPLC. However, the sample

may have been less representative as it only involved individuals who were able and willing to engage with this service and the majority of participants were female. This gender bias is similar to that seen in previous research, including studies from the systematic review. The level of general health service engagement and help seeking behaviour in adolescent males has been shown to be underrepresented, particularly within the 16-20 year old age range (Marcell, Klein, Fischer, Allan & Kokotailo, 2002). Lack of service engagement by male adolescents is likely to be associated with traditional masculine beliefs, such as being tough, competitive and inexpressive (Marcell, Ford, Pleck, Sonenstein, 2007). This may prove to be an important limitation in research that seeks to present data trends, as the males in the current study displayed a pattern of developing positive relationships later in their lives, different to many of the females who described having important relationships for the duration of their lives. Thus, the purposive sample from the current study underrepresented male experiences.

The wider applicability of the results to other populations should be considered in two ways. First, the sample was 'situated' (Elliott *et al.*, 1999) through the provision of demographic information and information about each participant's care history. This information can help to determine the applicability of the results to other populations. Second, the sample was from a specific region of the UK, South Wales. All participants were white and British, with most being Welsh. The transferability of the results (CASP, 2010) may therefore be limited, especially to cultural minorities or inner city populations in the UK that include a wide range of ethnicities. This study did present relationship characteristics that were similar to those seen in previous research from the systematic review, but all of the studies were conducted either in the UK or the USA, thus reflecting western experiences of relationships.

4.4.3 Data Collection and Analysis

This study was conducted according to ethical standards, including informed consent and confidentiality, as shown by University ethical approval, which is an essential area of research quality (CASP, 2010), not reported by several of the studies from the systematic review (Ahrens *et al.*, 2011; Barnes, 2007; Schofield, 2002).

Another area of strength in the current study, which was not well represented amongst studies from the systematic review, was the use of self-reflexivity on the part of the researcher. Reflexivity is important so that the researcher may understand and communicate their own role and bias during data collection and analysis (Elliott *et al.*, 1999; CASP, 2010). The researcher for the current study provided a position statement, so that readers know about her personal and professional background influences, which were also acknowledged and reflected upon by the researcher through a research diary and a bracketing interview (Rolls & Relf, 2006). A description of the IPA procedure used and a sample of interpretations was also provided (Appendix V) to enable transparency of the analysis process (Yardley, 2000). These measures allow the results to be evaluated by the reader within the context of the position of the researcher and the methodology used.

The depth and quality of the interviews may not have been optimal due to participant contact consisting of one interview and a brief meeting to arrange the interview. Thus, sufficient rapport may not have been developed, especially considering the difficulties with trust that this population are likely to experience. Even so, coherent results were produced, an important area of qualitative study quality (Elliott *et al.*, 1999), providing an overall structure of superordinate and subordinate themes, illustrated by quotes from the data. Therefore, the findings were ‘grounded in examples’ (Elliott *et al.*, 1999), showing both similar and contrasting experiences of participants. These results suggest that, even through a single interview, participants were able to share considerable information about their experiences, thus providing useful data for the study.

4.4.4 Ensuring Credibility

Credibility of the findings is important for the quality of a qualitative study (Elliott *et al.*, 1999). Although the research process and findings were supervised by two clinical psychologists, the results were only interpreted and analysed by the researcher. There was also no participant input into the analysis, or commentary on the findings, due to time and access restrictions. The researcher reflexivity and transparency activities were conducted to contextualise the findings, therefore providing process validity checks, even if they were not supplemented by views from alternate analysts or the participants. The study findings were also situated in

relevant literature and drafts developed with supervisors to ensure that they would 'resonate with the reader' (Elliott *et al.*, 1999). Therefore, even though there was a single analyst, the process of supervision and consistency of the results with previous findings provided some validation.

4.5 Implications for Theory and Future Research

The overall findings from the current study support the idea that the developmental needs of LAC can be understood in terms of the model outlined by Pringle (1986): love and security, new experiences, praise and recognition, and responsibility and the importance of relationships in achieving them. The findings emphasised the importance and influence of 'love and security' in providing the 'secure base' from which development may flourish (Bowlby, 2005). However, some participants highlighted the possibility of enlisting additional positive relationships to enable development in specific areas of need, supporting the contention that development and significant relationships are not confined to birth parents (Howes, 1999). Some participants' experiences also suggested that becoming an adult enabled them to develop positive relationships. These relationships were initiated with a practical focus, which may have reduced their intensity and provided the foundation for trust to develop.

Qualitative research is exploratory in nature. Therefore, some of the findings may provide useful directions, derived from peoples' experience, to guide quantitative hypotheses and research. For example, the elements of supportive relationships experienced by YPLC have been documented by the current study and from the systematic review. Quantitative research could follow up these findings in order to address the process of relationship development, to assess which relationship factors are most important and to compare individuals from disrupted family backgrounds with those from more stable homes. In addition, further exploration of the mechanisms leading to peer isolation (stigma or difficulty engaging with friends) while individuals are in care would enhance the picture of their overall lives, including their school experience.

The findings from the current study suggested that rejection and trust were important issues for the participants in their attachment relationships with their family of

origin, how they formed new relationships and the subsequent impact of the care system. The sense of rejection and trust also seemed to be linked to specific needs at different times in the life cycle and depended upon the individual's previous experience and responsiveness to developing trust within new relationships. This supports the view of Dozier *et al.* (2002), that specific interventions need to be targeted at specific developmental stages, which unfortunately are not sufficiently evidenced. This suggests that a large area of future research would involve further development and evaluation of life cycle specified interventions, to provide sufficient evidence to drive policy and practice.

4.6 Conclusion

A large body of research has demonstrated the importance of relationships since Bowlby's study of institutionalised children in the 1950's (Bowlby, 1952). The complexity of relationships and their influence on child development has since been acknowledged (e.g. Pringle, 1986). The current study explored the influence and impact of positive relationships amongst individuals who had experience of the care system, and have thus invariably had disrupted, insufficient and/or maltreating relationships with their family of origin.

The three superordinate themes: **Attachment**, **Impact of Care System** and **Developmental Needs**, derived from the data of the participants' experiences, emphasised the importance of the developmental need of 'love and security' (Pringle, 1986). The findings suggested that the emotional and relational impact of early insecure attachment relationships was likely to be exacerbated by experience of the care system. For some, this experience reinforced insecure patterns, but for others the care system provided a safe haven. Some participants required a sense of security within which they could continue gaining their developmental needs, while others were able to seek out additional relationships. Even though some individuals needed to wait until early adulthood before forming positive relationships, all of the participants expressed an underlying resilience and a confidence that they would eventually be able to do so.

The influence of trust and rejection throughout the themes found in the current study supports the case for further research on interventions targeted at these factors. The

more that the resilience in YPLC can be enhanced, the lower will be the the strain on services that potentially manage those individuals with poor outcomes such as mental health problems, homelessness and imprisonment (NICE, 2010).

References

- Ahrens, K. R., DuBois, D. L., Garrison, M., Spencer, R., Richardson, L. P. & Lozano, P. (2011). Qualitative exploration of relationships with important non-parental adults in the lives of youth in foster care. *Children and Youth Services, 33*, 1012-1023.
- Ahrens, K., Richardson, L., & Courtney, M. (2010). Laboratory diagnosed sexually transmitted infections in former foster youth compared with peers. *Pediatrics, 126*, 99–103.
- Ainsworth, M. & Witting, B. A. (1969). Attachment and the exploratory behaviour of one-year-olds in a strange situation. In B. M. Foss (Ed.), *Determinants of Infant Behaviour*. (pp. 113-136). London: Methuen.
- Allport, G. W. (1951). *The Use of Personal Documents in Psychological Science*. New York: Social Science Research Council (Bulletin No. 49).
- Anctil, T. M., McCubbin, L. D., O'Brien, K. O. & Pecora, P. (2007). An evaluation of recovery factors for foster care alumni with physical or psychiatric impairments: predictors of psychological outcomes. *Children and Youth Services Review, 29*, 1021-1034.
- Anderson, D. G. (2000). Coping strategies and burnout among veteran child protection workers. *Child Abuse and Neglect, 24*, 839-848.
- Ashworth, P. (2003). The origins of qualitative psychology. In J. A. Smith (Ed.), *Qualitative Psychology: A Practical Guide to Research Methods*: London: Sage.
- Baginsky, M. (2013). *Retaining Experienced Social Workers in Children's Services: The Challenge Facing Local Authorities in England*. Washington: Institute for the Advancement of Social Work Research.
- Bandura, A. (1971). *Social Learning Theory*. New York: General Learning Press.

- Barnes, V. (2007). Young people's views of children's rights and advocacy services: a case for 'caring' advocacy. *Child Abuse Review, 16*, 140-152.
- Barth, R. (1990). On their own: the experience of youth after foster care. *Children and Adolescent Social Work, 7*, 419-440.
- Becker-Weidman, A. (2006). Treatment for children with trauma-attachment disorders: Dyadic Developmental Psychotherapy. *Child and Adolescent Social Work, 23*, 147-171.
- Bebbington, A. & Miles, J. (1989). The background of children who enter local authority care. *British Journal of Social Work, 16*, 349-368.
- Biehal, N., Clayden, J., Stein, M. & Wade, J. (1995). *Moving on: Young People and Leaving Care Schemes*. London: Her Majesty's Stationery Office.
- Blades, R., Heart, D., Lea, J. and Willmott, N. (2011). *Care – a stepping stone to custody? The views of children in care on the links between care, offending and custody*. London: Prison Reform Trust.
- Blain, M. D., Thompson, J. M. & Whiffen, V. E. (1993). Attachment and perceived social support in late adolescence: the interaction between working models of self and others. *Journal of Adolescent Research, 8*, 226-241.
- Bowlby, J. (1952). *Maternal Care and Mental Health*. Geneva: World Health Organisation.
- Bowlby, J. (2005). *A Secure Base*. New York: Routledge Classics.
- Blome, W. W. (1997). What happens to foster kids: Educational experiences of a random sample of foster care youth and a matched group of non-foster care youth. *Child and Adolescent Social Work Journal, 14*, 41-53.

- Boschner, A. (2000). Criteria against ourselves. *Qualitative Inquiry*, 6, 266-272.
- Broad, B. (1998). *Young People Leaving Care: Life After the Children Act 1989*. London: Jessica Kingsley.
- Brown, J., Cohen, P., Johnson, J. G. & Smailes, E. M. (1999). Childhood abuse and neglect: specificity of effects on adolescent and young adult depression and suicidality. *Journal of the American Academy of Child and Adolescent Psychiatry*, 38, 1490-1496.
- Brown, G. L., Mangelsdorf, S. C. & Neff, C. (2012). Father involvement, paternal sensitivity, and father-child attachment security in the first 3 years. *Journal of Family Psychology*, 26, 421-430.
- Cameron, R. J. & Maginn, C. (2008). The authentic warmth dimension of professional childcare. *British Journal of Social Work*, 38, 1151-1172.
- Celen, B., Kariv, S. & Schotter, A. (2010). An experimental test of advice and social learning. *Management Science*, 56, 1687-1701.
- Charmaz, K. (2003). Grounded Theory. In J. A. Smith (Ed.), *Qualitative Psychology: A Practical Guide to Research Methods*. London: Sage Publications.
- Collins, M. E., Spencer, R. & Ward, R. (2010). Supporting youth in the transition from foster care: formal and informal connections. *Child Welfare*, 89, 125-143.
- Cooper, C. & Cooper, R. (1992). Links between adolescents' relationships with their parents and peers: Models, evidence and mechanisms. In R. Parke & G. Ladd (Eds.), *Family-Peer Relationships: Models of Linkage* (pp. 135-138). Hillsdale NJ: Lawrence Erlbaum Associates, Inc.
- Cordon, I.M., Pipe, M. E., Sayfan, L., Melinder, A. & Goodman, G. S. (2004). Memory for traumatic experiences in early childhood. *Developmental Review*, 24, 101-132.

- Courtney, M. E., Dworsky, A., Ruth, G., Havlicek, J., & Bost, N. (2005a). *Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 19*. University of Chicago, IL: Chapin Hall Center for Children.
- Courtney, M. E., Skyles, A., Miranda, G. E., Zinn, A., Howard, E., & Goerge, R. M. (2005b). *Youth who run away from substitute care*. University of Chicago, IL: Chapin Hall Center for Children.
- Courtney, M., & Piliavin, I. (1995). *The Wisconsin study of youth aging out of home care*. Madison, WI: University of Wisconsin, School of Social Work and Institute for Research and Poverty,
- Courtney, M., & Piliavin, I. (1998). *Foster youth transitions to adulthood: Outcomes 12 to 18 months after leaving out of home care*. Madison, WI: University of Wisconsin, School of Social Work and Institute for Research and Poverty.
- Courtney, M. E., Skyles, A., Miranda, G. E., Zinn, A., Howard, E., & Goerge, R. M. (2005b). *Youth who run away from substitute care*. University of Chicago, IL: Chapin Hall Center for Children.
- Critical Appraisal Skills Programme (CASP). *Qualitative checklist*. Retrieved from <http://www.casp-uk.net/#!/casp-tools-checklists/c18f8>.
- Daining, C. & DePanfilis, D. (2007). Resilience of youth in transition from out-of-home care to adulthood. *Children and Youth Services Review*, 29, 1158-1178.
- Department for Education. (2007). *Care Matters*. Norwich: Crown Copyright.
- Department for Education. (2013). *Children looked after in England (including adoption and care leavers) year ending 31 March 2013*. Department for Education: London. Leeds: Skills for Care
- DeSchipper, J. C., Tavecchio, L. W. C. & Van Ijzendoorn, M. H. (2008). Children's attachment relationships with day care caregivers: associations with positive caregiving and the child's temperament. *Social Development*, 17, 454-470.

- Dewey, J. (1938). *Logic: The Theory of Inquiry*. New York: Holt and Co.
- Dixon, J., Lee, J., Wade, J., Byford, S. & Weatherly, H. (2004). *Young People Leaving Care: An Evaluation of Costs and Outcomes*. York: Department for Education and Skills.
- Dixon, J. & Stein, M. (2005). *Leaving Care, Throughcare and Aftercare in Scotland*. London: Jessica Kingsley.
- Dozier, M., Albus, K., Fisher, P. A. & Sepulveda, S. (2002). Interventions for foster parents: implications for developmental theory. *Developmental Psychopathology, 14*, 843-860.
- Dozier, M., Stovall, K. C., Albus, K. E. & Bates, B. (2001). Attachment for infants in foster care: the role of caregiver state of mind. *Child Development, 72*, 1467-1477.
- Elliott, R., Fischer, C. T. & Rennie, D. L. (1999). Evolving guidelines for publication of qualitative research studies in psychology and related research fields. *British Journal of Clinical Psychology, 39*, 7-10.
- Euser, S. Alink L.R. A., Tharner, A., vanIjzendoorn, M. H., & Bakermans-Kranenburg, M. J. (2013). The prevalence of child sexual abuse in out-of-home care: a comparison between abuse in residential and in foster care. *Child Maltreatment, 18*, 221-231.
- Faber, A. & Mazlish, E. (1996). *How to Talk so Kids can Learn*. New York : Scribner.
- Finally, L. (2011). *Phenomenology for Therapists: Researching the Lived World*. Chichester: Wiley-Blackwell.
- Flynn, R. J., Ghazal, H., Legault, L., Vandermeulen, G. & Petrick, S. (2004). Use of population measures and norms to identify resilient outcomes in young people in care: an exploratory study. *Child and Family Social Work, 9*, 65-79.
- Fonagy, P., Gergely, G., Jurist, E., Target, M. (2002). *Affect regulation*,

- mentalization, and the development of the self*. New York: Other Press.
- Garland, A. F., Landsverk, J. L. & Hough, R. L. (1996). Type of maltreatment as a predictor of mental health service use for children in foster care. *Child Abuse and Neglect*, 20, 675-688.
- Giorgi, A. (1985). *Phenomenological and Psychological Research*. Pittsburgh, PA: Duquesne University Press.
- Goossens, F. A. & VanIjzendoorn, M. H. (1990). Quality of infants' attachments to professional caregivers: relation to infant-parent attachment and day-care characteristics. *Child Development*, 61, 832-837.
- Gottman, J. (2011). *Raising an Emotionally Intelligent Child*. New York: Simon & Schuster.
- Green, H., McGinnity, A., Meltzer, H., Ford, T., & Goodman, R. (2005). *Mental Health of Children and Young People in Great Britain, 2004*. London: Office for National Statistics, The Stationary Office.
- Greenough, W. T., Black, J. E. & Wallace, C. S. (1987). Experience and brain development. *Child Development*, 58, 539-559.
- Greeson, J. K. P. & Bowen, N. K. (2008). "She holds my hand" The experiences of foster youth with their natural mentors. *Children and Youth Services Review*, 30, 1179-1188.
- Grosso, W. & Nagliero, G. (2004). Adoption, fostering and identity. *Journal of Child and Adolescent Mental Health*, 16, 45-48.
- Hai, N. & Williams, A. (2004). *Implementing the Children (Leaving Care) Act 2000: The Experience of Eight London Boroughs*. London: National Children's Bureau.
- Haight, W. L., Kagle, J. D. & Black, J. E. (2003). Understanding and supporting parent-child relationships during foster care visits: attachment theory and research. *Social Work*, 48, 195-207.

- Harpin, S., Kenyon, D. B., Kools, S., Bearinger, L. H. & Ireland, M. (2013). Correlates of emotional distress in out-of-home youth. *Journal of Child and Adolescent Psychiatric Nursing*, 26, 110-118.
- Hass, M. & Graydon, K. (2009). Sources of resiliency among successful foster youth. *Children and Youth Services Review*, 31, 457-463.
- Healey, C. V. & Fisher, P. A. (2011). Young children in foster care and the development of favourable outcomes. *Children and Youth Services Review*, 33, 1822-1830.
- Henderlong, J. & Lepper, M. R. (2002). The effects of praise on children's intrinsic motivation: a review and synthesis. *Psychological Bulletin*, 128, 774-795.
- Henwood, K. L., & Pidgeon, N. F. (1992). Qualitative research and psychological theorising. *British Journal of Psychology*, 83, 97-112.
- Herrick, M. A. & Piccus, W. (2005). Sibling connections: the importance of nurturing sibling bonds in the foster care system. *Children and Youth Services Review*, 27, 845-861.
- Hess, R. D. & Shipman, V. C. (1965). Early experience and the socialization of cognitive modes in children. *Child Development*, 36, 869-886.
- Hook, J. L. & Courtney, M. E. (2011). Employment outcomes of former foster youth as young adults: the importance of human, personal and social capital. *Children and Youth Services Review*, 33, 1855-1865.
- Horwitz, A. V., Spatz Widom, C., McLaughlin, J. & White, H. R. (2001). Impact of childhood abuse and neglect on adult mental health: A prospective study. *Journal of Health and Social Behaviour*, 42, 184-201.
- Howe, D. & Fearnley, S. (2003). Disorders of attachment in adopted and fostered children: recognition and treatment. *Clinical Child Psychology and Psychiatry*, 8, 369-387.

- Howes, C. (1999). Attachment relationships in the context of multiple caregivers. In J. Cassidy, & P.R. Shaver, (Eds.), *Handbook of attachment* (pp. 671-687). New York: Guilford.
- Howes, C. & Oldman, E. (2001). Processes in the formation of attachment relationships with alternative caregivers. In A. Goncu & E. L. Klein (Eds.), *Children in play, story and school*. (pp. 267-287). New York: Guilford Press.
- Hughes, D. A. (2004). Attachment-based treatment of maltreated children and young people. *Attachment and Human Development*, 6, 263-278.
- Jackson, Y., Gabrielli, J., Fleming, K., Tunno, A. M. & Makanui, P. K. (2014). Untangling the relative contribution of maltreatment severity and frequency to type of behavioural outcome in foster youth. *Child Abuse and Neglect*, Retrieved from <http://dx.doi.org/10.1016/j.chiabu.2014.01.008>.
- Jones, L. (2011). The first three years after foster care: A longitudinal look at the adaptation of youth to emerging adulthood. *Children and Youth Services Review*, 33, 1919-1929.
- Jones, L. (2012) Measuring resiliency and its predictors in recently discharged foster youth. *Child & Adolescent Social Work Journal*, 29, 515-533.
- Jones, R., Everson-Hock, E. S., Papaioannou, D., Guillaume, L., Goyder, E., Chilcott, J. *et al.* (2011). Factors associated with outcomes for looked-after children and young people: a correlates review of the literature. *Child: care, health and development*, 37, 613-622.
- Jonson-Reid, M. & Barth, R. P. (2000). From maltreatment report to juvenile incarceration: The role of child welfare services. *Child Abuse & Neglect*, 24, 505-520.
- Kobak, R.(1999). The emotional dynamics of disruptions in attachment relationships: implications for theory, research, and clinical interventions. In J. Cassidy & P. Shaver (Eds.), *Handbook of*

- Attachment* (pp. 21-43). New York: Guilford Press.
- Kolb, D. A. (1984). *Experiential Learning: Experience as the Source of Learning and Development*. Englewood Cliffs, NJ: Prentice Hall.
- Kools, S. M. (1997). Adolescent identity development in foster care. *Family Relations, 46*, 263-270.
- Leathers, S. J. (2003). Parental visiting, conflicting allegiances and emotional and behavioural problems among foster children. *Family Relations, 52*, 53-63.
- Leslie, L. K., Landsverk, J., Ezzet-Lofstrom, R., Tschann, J. M., Slymen, D. J. & Garland, A. F. (2000). Children in foster care: factors influencing outpatient mental health service use. *Child Abuse and Neglect, 24*, 465-476.
- Lewin, K. (1942). Field theory and learning. In H. B. Nelson (Ed.), *The forty-first yearbook of the National Society for the Study of Education: Part II, The psychology of learning* (pp. 215-242). Chicago, IL, US: University of Chicago Press.
- Linehan, M. M. (1993). *Cognitive-Behavioral Treatment of Borderline Personality Disorder*. New York: The Guilford Press.
- Main, M. & Hesse, E. (1990). Parents' unresolved traumatic experiences are related to infant disorganized attachment status: is frightened and/or frightening parental behavior the linking mechanism? In M. Greenberg, D. Cicchetti, E. M. Cummings, (Eds.), *Attachment in the preschool years: theory, research and intervention* (pp. 161-84). Chicago: University of Chicago Press.
- Malterud, K. (2001). Qualitative research: standards, challenges and guidelines. *Lancet, 358*, 483-488.

- Marcell, A. V., Klein, J. D., Fischer, I., Allan, M. J. & Kokotailo, P. K. (2002). Male adolescent use of health care services: where are the boys? *Journal of Adolescent Health, 30*, 35-43.
- Marcell, A. V., Ford, C. A., Pleck, J. H. & Sonenstein, F. L. (2007). Masculine beliefs, parental communication and male adolescents' health care use. *Pediatrics, 119*, 966-975.
- Masten, A. S. (1994). Resilience in individual development: Successful adaptation despite risk and adversity. In M. C. Wang & E. W. Gorden (Eds.), *Educational resilience in inner-city America* (pp. 3-25). Hillsdale, NJ: Erlbaum.
- McMillen, J. C., Scott, L. D., Zima, B. T., Ollie, M. T., Munson, M. R. & Spitznagel, E. (2004). Use of mental health services among older youths in foster care. *Psychiatric Services, 55*,
- Meltzer, H., Corbin, T., Gatward, R., Goodman, R. & Ford, T. (2003). *The Mental Health of Young People Looked After by Local Authorities in England*. London: Office for National Statistics, The Stationary Office.
- Meltzer, H., Lader, D., Corbin, T., Goodman, R. and Ford, T. (2004a). *The Mental Health of Young People Looked After by Local Authorities in Scotland-Summary Report*. London: Office for National Statistics, The Stationary Office.
- Meltzer, H., Lader, D., Corbin, T., Goodman, R. & Ford, T. (2004b). *The Mental Health of Young People Looked After by Local Authorities in Wales*, London: Office for National Statistics, The Stationary Office.
- Miller, J. B. (1976). *Toward a New Psychology of Women*. Boston. Beacon Press.
- Munson, M. R., Smalling, S. E., Spencer, R., Scott, L. D. & Tracy, E. (2010). A steady presence in the midst of change: nonkin natural mentors in the lives of older youth exiting foster care. *Child and Youth Services Review, 32*, 527-535.

- Myers, D. G. (2000). The funds, friends and faith of happy people. *American Psychologist, 55*, 56-67.
- National Institute for Health and Care Excellence. (2009). *Borderline Personality Disorder: Treatment and Management*. NICE Clinical Guideline 78. London: National Collaborating Centre for Mental Health.
- National Institute for Health and Care Excellence. (2010). *Looked-after children and young people*. NICE Public Health Guidance 28. London: National Collaborating Centre for Mental Health.
- Newton, R. R., Litrownik, A. J. & Landsverk, J. A. (2000). Children and youth in foster care: disentangling the relationship between problem behaviors and number of placements. *Child Abuse and Neglect, 24*, 1363-1374.
- Noom, M. J., Dekovic, M. & Meeus, W. H. J. (1999). Autonomy, attachment and psychosocial adjustment during adolescence: a double edged sword. *Journal of Adolescence, 22*, 771-783.
- Office for National Statistics. (2012). *UK indices of multiple deprivation – a way to make comparisons across constituent countries easier*. Retrieved from <http://www.ons.gov.uk/ons/rel/hsq/health-statistics-quarterly/no--53--spring-2012/uk-indices-of-multiple-deprivation.html?format=print>
- Oke, N., Rostill-Brookes, H. & Larkin, M. (2011). Against the odds: Foster carers' perceptions of family, commitment and belonging in successful parents. *Clinical Child Psychology and Psychiatry, 18*, 7-24.
- Osterling, K. L. & Hines, A. M. (2006). Mentoring adolescent foster youth: promoting resilience during developmental transitions. *Child and Family Social Work, 11*, 242-235.
- Palmer, S.E. (1995). *Maintaining family ties: inclusive practice in foster care*. Washington, DC: Child Welfare League of America.

- Payne, M. (2006). *Narrative Therapy: An Introduction for Counsellors*. 2nd Edition. London: Sage.
- Pears, K. C., Kim, H. K., Fisher, P. A. & Yoerger, K. (2013). Early school engagement and late elementary outcomes for maltreated children in foster care. *Developmental Psychology*, 49, 2201-2211.
- Piaget, J. (1950). *The Psychology of Intelligence*. London: Routledge.
- Porges, S. W. (1997). Emotion: an evolutionary by-product of the neural regulation of the autonomic nervous system. In C.S. Carter, B. Kirkpatrick, & I.I. Lederhendler (Eds.), *The Integrative Neurobiology of Affiliation* (pp. 62-77), New York: Annals of The New York Academy of Sciences, 807.
- Pringle, M. K. (1986). *The Needs of Children*. 3rd ed. London: Routledge.
- Rees, M. (2011). *A short guide to ethical editing for new editors*. Committee on Publication Ethics. Retrieved from <http://publicationethics.org/files/short%20guide%20to%20ethical%20editing%20for%20new%20editors.pdf>
- Rees, P. (2013). The mental health, emotional literacy, cognitive ability, literacy attainment and ‘resilience’ of ‘looked after children’: a multidimensional, multiple-rater population based study. *British Journal of Clinical Psychology*, 52, 183-198.
- Reid, K., Flowers, P. & Larkin, M. (2005). Exploring lived experience; An introduction to Interpretative Phenomenological Analysis. *The Psychologist*, 130, 20-23.
- Reilly, T. (2003). Transition from care: status and outcomes of youth who age out of foster care. *Child Welfare*, 6, 727-746.
- Rhodes, J. E. (2005). A model of youth mentoring. In D. L. DuBois & M. J. Karcher (Eds.), *Handbook of Youth Mentoring* (pp. 30-43). Thousand Oaks, CA: Sage Publications.

- Robertson, R. D. (2013). The invisibility of adolescent sexual development in foster care: seriously addressing sexually transmitted infections and access to services. *Children and Youth Services Review, 35*, 493-504.
- Rogers, C. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of Consulting Psychology, 21*, 95-103.
- Rolls, L. & Rels, M. (2006). Bracketing interviews: addressing methodological challenges in qualitative interviewing in bereavement and palliative care. *Mortality, 11*, 286-305.
- Runyan, D. K. & Gould, C. L. (1985). Foster care for child maltreatment: Impact on delinquent behaviour. *Pediatrics, 75*, 562-568.
- Rutter, M. (1987). Psychosocial resilience and protective mechanisms. *American Journal of Orthopsychiatry, 57*, 316-331.
- Samuels, G. M. & Pryce, J. M. (2008). "What doesn't kill you makes you stronger": Survivalist self-reliance as resilience and risk among young adults aging out of foster care. *Children and Youth Services Review, 30*, 1198-1210.
- Sanchirico, A. & Jablonka, K. (2000). Keeping foster children connected to their biological parents: the impact of foster parent training and support. *Child and Adolescent Social Work Journal, 17*, 185-203.
- Schofield, G. (2002). The significance of a secure base: a psychological model of long-term foster care. *Child and Family Social Work, 7*, 259-272.
- Schore, A.N. (2001) Effects of a secure attachment on right brain development, affect regulation, and infant mental health. *Infant mental health journal, 22*, 7-67.
- Simon, A. & Owen, C. (2006). Outcomes for children in care: what do we know? (pp. 26-43) In E. Chase, A. Simon & S. Jackson (Eds.), *Care and After: A Positive Perspective*. London: Routledge.

- Smith, J. A. (1996). Beyond the divide between cognition and discourse: Using interpretative phenomenological analysis in health psychology. *Psychology & Health, 11*, 261-271.
- Smith, J. A. (2007). Hermeneutics, human sciences and health: Linking theory and practice. *International Journal of Qualitative Studies on Health and Wellbeing, 2*, 3-11.
- Smith, J. A., Flowers, P. & Larkin, M. (2009). *Interpretative Phenomenological Analysis: Theory, Method and Research*. London: Sage.
- Smith, J. A. & Osborn, M. (2008). Interpretative Phenomenological Analysis. In J. A. Smith (Ed), *Qualitative Psychology: A Practical Guide to Research Methods* (pp. 53-80). London: Sage Publications.
- Steele, M., Hodges, J., Kaniuk, J., Hillman, S. & Henderson, K. (2003). Attachment representations and adoption: associations between maternal states of mind and emotion narratives in previously maltreated children. *Journal of Child Psychotherapy, 29*, 187-205.
- Stein, M. (2006). Research review: young people leaving care. *Child and Family Social Work, 11*, 273-279.
- Stern, D. (1985). *The interpersonal world of the infant*. New York: Basic Books.
- Stewart, C. J., Kum, H., Barth, R. P. & Duncan, D. F. (2014). Former foster youth: employment outcomes up to age 30. *Children and Youth Services Review, 36*, 220-229.
- Stiles, W. B. (1993). Quality control in qualitative research. *Clinical Psychology Review, 13*, 593-618.
- Strolin-Goltzman, J., Kollar, S. & Trinkle, J. (2010). Listening to the voices of children in foster care: youths speak out about child welfare workforce turnover and selection. *Social Work, 55*, 47-53.

- Toogood, R. (2010). *Clinical Psychology: The Core Purpose and Philosophy of the Profession*. Leicester: British Psychological Society.
- UK Statistics Authority. (2011). The demand for, and feasibility of, a UK-wide index of multiple deprivation. Retrieved from <http://www.statisticsauthority.gov.uk/assessment/monitoring/monitoring-briefs/monitoring-brief-6-2011---indices-of-multiple-deprivation.pdf>
- Unrau, Y. A., Seita, J. R. & Putney, K. S. (2008). Former foster youth remember multiple placement moves: A journey of loss and hope. *Children and Youth Services Review*, 30, 1256-1266.
- Verschueren, K., Doumen, S. & Buyse, E. (2012). Relationships with mother, teacher and peers: unique and joint effects on young children's self-concept. *Attachment and Human Development*, 14, 233-248.
- Verschueren, K. & Koomen, H. (2012). Teacher-child relationships from an attachment perspective. *Attachment & Human Development*, 14, 205-211.
- Vygotsky, L. S. (1978). *Mind in Society; The Development of Higher Psychological Processes*. Cambridge MA: Harvard University Press.
- Wade, J. & Dixon, J. (2006). Making a home, finding a job: investigating early housing and employment outcomes for young people leaving care. *Child & Family Social Work*, 11, 199-208.
- Walsh, D. & Downe, S. (2005). Meta-synthesis method for qualitative research: a literature review. *Journal of Advanced Nursing*, 50, 2, 204-211.
- Ward, J., Henderson, Z. & Pearson, G. (2003). *One Problem Among Many: Drug Use Among Care Leavers in Transition to Independent Living*. Home Office Research Study 260. London: Home Office.

- Welsh Government (2014). *Adoptions, Outcomes and Placements for Children Looked after by Local Authorities, Wales 2012-2013*. Statistics for Wales.
- Willig, C. (2001). *Introducing Qualitative Research in Psychology: Adventures in Theory and Method*. Buckingham: Open University Press.
- Wojciak, A. S., McWey, L. M. & Helfrich, C. M. (2013). Sibling relationships and internalizing symptoms of youth in foster care. *Children and Youth Services Review, 35*, 1071-1077.
- World Health Organisation (2001). *International Classification of Diseases 10th Revision*. Geneva: World Health Organisation.
- Wubbels, T., den Brok, P., van Tartwijk, J. & Levy, J. (2012). *Interpersonal Relationships in Education: An Overview of Contemporary Research*. Rotterdam: Sense Publishers.
- Wentzel, K. R. (2012). Teacher-student relationships and adolescent competence at school. In T. Wubbels, P. den Brok, J. van Tartwijk & J. Levy. (Eds.), *Interpersonal Relationships in Education: An Overview of Contemporary Research* (pp. 19-37). Rotterdam: Sense Publishers.
- Yardley, L. (2000). Dilemmas in qualitative health research. *Psychology and Health, 15*, 215-228.
- Young, J. E., Klosko, J. S. & Weinshaar, M. E. (2003). *Schema Therapy: A Practitioner's Guide*. New York: Guildford Press.
- Zlotnick, C., Tam, T. W. & Soman, L. A. (2012). Life course outcomes on mental and physical health: The impact of foster care on adulthood. *American Journal of Public Health, 102*, 534-540.

APPENDICES

APPENDIX I - Search Terms Used in the Systematic Review

Keywords:

Foster ADJ child* OR

Foster ADJ care* OR

Foster ADJ placement*

AND

Interaction* OR

Relationship* OR

Attach* OR

Parent*

AND

Resillien* OR

Protect* OR

Positiv*

APPENDIX II - CASP criteria



10 questions to help you make sense of qualitative research

How to use this appraisal tool

Three broad issues need to be considered when appraising the report of a qualitative research:

- Are the results of the review valid?
- What are the results?
- Will the results help locally?

The 10 questions on the following pages are designed to help you think about these issues systematically. The first two questions are screening questions and can be answered quickly. If the answer to both is "yes", it is worth proceeding with the remaining questions.

There is some degree of overlap between the questions, you are asked to record a "yes", "no" or "can't tell" to most of the questions. A number of prompts are given after each question. These are designed to remind you why the question is important. Record your reasons for your answers in the spaces provided.

There will not be time in the small groups to answer them all in detail!

©CASP This work is licensed under the Creative Commons Attribution - NonCommercial-ShareAlike 3.0 Unported License. To view a copy of this license, visit <http://creativecommons.org/licenses/by-nc-sa/3.0/>, www.casp-uk.net

Screening Questions

1. Was there a clear statement of the aims of the research?

Yes Can't tell No

HINT: Consider

- What was the goal of the research?
- Why it was thought important?
- Its relevance

2. Is a qualitative methodology appropriate?

Yes Can't tell No

HINT: Consider

- If the research seeks to interpret or illuminate the actions and/or subjective experiences of research participants
- Is qualitative research the right methodology for addressing the research goal?

Is it worth continuing?



Detailed questions

3. Was the research design appropriate to address the aims of the research?

Yes Can't tell No

HINT: Consider

- If the researcher has justified the research design (e.g. have they discussed how they decided which method to use?)

4. Was the recruitment strategy appropriate to the aims of the research?

Yes Can't tell No

HINT: Consider

- If the researcher has explained how the participants were selected
- If they explained why the participants they selected were the most appropriate to provide access to the type of knowledge sought by the study
- If there are any discussions around recruitment (e.g. why some people chose not to take part)

5. Was the data collected in a way that addressed the research issue?

Yes Can't tell No

HINT: Consider

- If the setting for data collection was justified
- If it is clear how data were collected (e.g. focus group, semi-structured interview etc.)
- If the researcher has justified the methods chosen
- If the researcher has made the methods explicit (e.g. for interview method, is there an indication of how interviews were conducted, or did they use a topic guide?)
- If methods were modified during the study. If so, has the researcher explained how and why?
- If the form of data is clear (e.g. tape recordings, video material, notes etc.)
- If the researcher has discussed saturation of data

6. Has the relationship between researcher and participants been adequately considered?

Yes Can't tell No

HINT: Consider

- If the researcher critically examined their own role, potential bias and influence during
 - (a) Formulation of the research questions
 - (b) Data collection, including sample recruitment and choice of location
- How the researcher responded to events during the study and whether they considered the implications of any changes in the research design

7. Have ethical issues been taken into consideration?

Yes Can't tell No

HINT: Consider

- If there are sufficient details of how the research was explained to participants for the reader to assess whether ethical standards were maintained
- If the researcher has discussed issues raised by the study (e.g. issues around informed consent or confidentiality or how they have handled the effects of the study on the participants during and after the study)
- If approval has been sought from the ethics committee

8. Was the data analysis sufficiently rigorous?

Yes Can't tell No

HINT: Consider

- If there is an in-depth description of the analysis process
- If thematic analysis is used, if so, is it clear how the categories/themes were derived from the data?
- Whether the researcher explains how the data presented were selected from the original sample to demonstrate the analysis process
- If sufficient data are presented to support the findings
- To what extent contradictory data are taken into account
- Whether the researcher critically examined their own role, potential bias and influence during analysis and selection of data for presentation

9. Is there a clear statement of findings?

Yes Can't tell No

HINT: Consider

- If the findings are explicit
 - If there is adequate discussion of the evidence both for and against the researchers' arguments
 - If the researcher has discussed the credibility of their findings (e.g. triangulation, respondent validation, more than one analyst)
 - If the findings are discussed in relation to the original research question
-

10. How valuable is the research?

HINT: Consider

- If the researcher discusses the contribution the study makes to existing knowledge or understanding e.g. do they consider the findings in relation to current practice or policy?, or relevant research-based literature?
- If they identify new areas where research is necessary
- If the researchers have discussed whether or how the findings can be transferred to other populations or considered other ways the research may be used

**APPENDIX III - Table of main themes, subthemes and further descriptions
from studies included in the systematic review**

Study	Main themes sub-themes (further description)
Ahrens <i>et al.</i> (2011)	<p>Barriers to the initial connection: Fear of the emotional risk Fear of indebtedness to the mentor Fear that the mentor will fail the youth Being pushed to bond too quickly Resistance to directive advice Adult lacks understanding of youth’s culture or background</p> <p>Facilitators of the initial connection: Adult has persistence/patience Authentic displays of affection/emotion support by adult Adult opens up/shares their own experiences. Adult goes beyond the prescribed relationship. Adult respects youth and their past experiences. Shared characteristics between the youth and adult Youth experiencing a period of vulnerability/need</p> <p>Barriers to the ongoing relationship: Logistical barriers Youth fear of not living up to adult expectations</p> <p>Facilitators of the ongoing relationship: Mechanism in place to maintain regular contact Adult helps youth understand what to expect Adult plans activities that incorporate the youth’s interests Adult displays confidence Adult is responsive to the youth’s needs Adult shows consistency between actions and words</p> <p>Developmental impacts of the relationship: Socio-emotional development Cognitive development Identity development</p> <p>Supports provided by the adult: Tangible support Emotional support Serving as a role model Guidance/advice Support as a parental figure</p> <p>Unmet needs: Independent living skills Relationship skills</p>

Collins <i>et al.</i> (2010)	<p>Longevity and constant relationship Acceptance of the young person Constant encouragement Reliability Ability to provide assistance when needed</p>
Greeson & Bowen (2008)	<p>Relationship characteristics that matter: Trust Love and caring Like parent and child</p> <p>Support I receive: Emotional support Informational support Appraisal support (offering opinion) Instrumental support (day to day support in ADL)</p> <p>How I've changed: assisting with positive changes</p> <p>Thoughts on my future: contemplating future of the relationship</p> <p>What I think about foster care: instability or limits of foster care relationships in comparison</p>
Munson <i>et al.</i> (2010)	<p>Qualities of mentor: Personality qualities Understanding Easy to talk to Similar to youth Personality Interests Life experiences/background</p> <p>Qualities of mentoring relationship: Consistency Longevity Trust Authenticity Respect Empathy</p> <p>Nature of support: Keeping youth on track Instrumental support Informational support Emotional support.</p>
Oke <i>et al.</i> (2011)	<p>'My' child: clicking, belonging in the family and parental regard, (parental commitment, unconditional love & acceptance)</p> <p>Jam in the sandwich: working alongside Local Authority and</p>

	<p>birth family (empathy of child's position)</p> <p>Repair and rebuild: the craft of fostering (repairing the damage where the child is, re-parenting, setting boundaries)</p> <p>Sticking with it: tenacity and hopefulness (lack of abandonment)</p>
Osterling & Hines (2006)	<p>Youth:</p> <p>Nature of relationship with advocate (helpful, supportive, encouraging, dependable & consistent)</p> <p>Types of change in the youth since working with the advocate (interpersonal gains: openness, emotional regulation)</p> <p>Preparation for independent living (assisting getting a job, setting up a bank, completing education etc)</p> <p>Recommendations for the programme</p> <p>Advocates:</p> <p>Nature of the relationship with the youth (establishing rapport and trust, being consistent)</p> <p>Challenges experienced while working with the youth (child welfare system and lack of resources & services)</p> <p>Types of changes the youth has experienced while working with the advocate (functioning and feeling better, educational and independent living achievements)</p> <p>Youths' preparation for independent living (finding out what needs to be learned & introducing new experiences/opportunities)</p> <p>Recommendations for the programme(increased access to resources)</p>

APPENDIX IV - Extracts from Reflective Diary

24/11/2012

I have put together a research proposal for my LSRP. I really want to study YPLC and look at the relationships they experience due to my interest in attachment theory. Unfortunately my proposal was too complex and lead to too big a project with both a qualitative and quantitative element. This made me think about what I really wanted to do. I really want to move forward with research methodology experience and use some of my developing clinical skills, so I think that just doing the qualitative element using IPA would be really interesting.

4/6/2013

I did a pilot interview today to get feedback on the interview schedule. I was really impressed by how capable the interviewee was despite all that she had been through. I wonder if other participants will be similar. It saddened me that she had such a hard time in foster care; I suppose I hoped that it would be a refuge for people. She said that the interview schedule was easy to understand. This was good because I was worried that there were too many questions, I was glad that they were easy to understand.

29/8/2013

I've done a lot of interviews this week. There was such a variety of individuals who I interviewed. Their experiences really sounded so different to my life, especially teenage years. I was just concerned with doing well at school and having as much fun as possible, whereas some of my participants were dealing with life issues that I hope I shall never have to worry about. This made me think about how they saw me. Just another professional? Privileged? I felt really humbled by how much they were willing to share, even though it is just the single interview.

4/3/2014

I've started the analysis and find myself being really tentative about the interpretations I'm making. I want to honour what the participant has said, while being able to think about what might be underlying it. I find that I'm being really

influenced by attachment theory, which I am using within the interpretations. I sometimes find myself critiquing my own interview skills during the transcript, I need to try harder to bracket this impulse and concentrate on what the participant is saying. I notice that I tend to use more 'casual' language rather than 'professional' language, showing that I was very aware of wanting to relate to participants. I'm not sure whether this would have any impact upon their impression of me.

1/4/2014

I have really taken the case study angle all the way and now need to go back down a level to compare across cases. I thought that thinking about each individual was important, but realise that I plan to report across the sample. I've becoming more confident with interpretations so I can really focus on what the participants are reporting. It struck me that when asking what participants would have liked in relationships in areas of need that they didn't meet, how they didn't have much to say. It was as if they had been getting on with life, doing the best they could, rather than dreaming about an idealised life. This seems contrary to what I am learning in CAT about the split egg reciprocal roles. I am noticing its influence in my thinking, about zone of proximal development etc.

13/3/2014

Today I did a bracketing interview with one of the other trainees who is also doing IPA. We discussed my influences and changing ideas about my research topic from the interviews and beginning the analyses. The following themes included:

- The origin of thinking about positive relationships in my LSRP and having needs met in relation to my own upbringing.
- How my adopted brothers have been fully integrated members of my family compared to how many of my interviewees never felt accepted by their foster families and the dismay I felt about that.
- How the theories of attachment and cognitive analytic therapy have influenced my interpretations.
- The variety of ability of participants to answer the interview questions and different levels of support I have used as the interviewer.
- My surprise about how some participants did not feel involved in decisions made about them by the care system.

- How I didn't expect some participants to maintain such strong relationships with their birth mothers and learning about the complexity of managing that while living with another family.

APPENDIX V Example extract of analysis of transcript

Original Transcript	Exploratory Comments	Emergent themes
<p>J it could be whilst you were growing up, or it could be like you found that you were most close to someone you know now, or it could be people you lived with?</p> <p>Ss2 well I'd say when I was younger it was my sister, urm but to be honest I've never felt really close to anybody as such like I appreciated M for like fostering me after everything happened with my mum and I do really like care for her but its kind of like only when I wasn't very well that I felt close to people.</p> <p>J so, there's kind of the thing with your sister but then you didn't live together after that 5 years, was that right?</p>	<p>Older sibling bond.</p> <p>Never really felt close to others.</p> <p>Appreciation for taking on a caring role but still not feeling close.</p> <p>Only able to achieve feeling of closeness when ill – dysfunctional way to get needs met.</p> <p><u>Feeling unworthy or disconnected from others, may be from limited attachment when younger.</u></p>	<p>Forming attachments with those available.</p> <p>Emotional distance felt with foster mother.</p> <p>Dysfunctional method for feeling connected to others.</p> <p>Enduring impact of insecure attachment.</p> <p>Progression of change in context.</p>

<p>SS2 yeah and that was really, that was really hard and I think that like that's when things started to go really bad and stuff.</p> <p>J well, its understandable really isn't it that the person you feel closest to in the world and then you're not living with them, that must be really difficult. So what was it kind of that was different with your relationship with your sister to other people do you think when you were together with her?</p> <p>SS2 because like we shared like similar experiences and because we was like always together then like it would like, I was never like good at making friends, like we was like there to always have each other like.</p>	<p>Sister leaving foster care chronologically things became worse after.</p> <p>Did sister absorb the "really bad" and then after she went things changed for 02?</p> <p>Close due to shared experience. <u>Feeling different to others who didn't have same experiences, in care.</u> <i>Always together</i> consistent and constant relationship. Difficulty making other friends. <u>Further impact of limited attachment experience on forming new relationships.</u> <u>As she was so timid, maybe shy and difficult to approach others.</u></p> <p>Relationship change when sister's behaviour changed. <u>Rebellion, may have marked pushing away behaviour of sister – shared impact of difficult attachment formation in siblings.</u></p>	<p>Abandonment.</p> <p>Shared experience.</p> <p>Feeling different to others due to care/experiences.</p> <p>Stable sibling relationship.</p> <p>Difficulty trusting others.</p>
--	--	--

<p>J so kind of going through kind of the same stuff and growing up together you probably knew each other a lot like short hand, you probably knew a lot about what the other one was thinking and feeling I suppose?</p> <p>SS2 yeah, it's just when she got a bit more difficult that we kind of drifted like.</p>		<p>Low tolerance to rejecting behaviour.</p>
--	--	--

Key to types of exploratory comments (please see Method Chapter, 2.8.3.2 Step 2: Initial noting, for a full description of the noting comments):

Descriptive comments

Linguistic comments

Conceptual comments

APPENDIX VI – Ethics Committee Decision Letter

CARDIFF UNIVERSITY

SCHOOL OF PSYCHOLOGY ETHICS COMMITTEE

Committee Decision and Feedback Form

This project has been scrutinised by the School of Psychology Research Ethics Committee. The Committee's general remit is to ensure that adequate measures have been taken to avoid any ethical problems that could reasonably be anticipated on the basis of generally agreed ethical guidelines like those set out by the BPS. Approval of a research proposal means that in the Committee's opinion this proposal meets this criterion; responsibility for any breach of ethical conduct rests with the individual researcher. Should any unforeseen problems arise during the conduct of this research, the Chairman of the Ethics Committee (Dr Michael Lewis) should be informed.

Project Proposal: Jemma Chambers (PG), Neil Frude (Staff), Liz Andrew (Clinical Supervisor) - The experience and influence of positive relationships in care leavers (EC.13.07.02.3484), supervised by Neil Frude.

The Ethics Committee considered the above proposal and noted that it was very well prepared and the ethical issues had been addressed appropriately. However, some minor recommendations were made as follows:

.1 The Committee recommended that only University/NHS email addresses are provided in the materials.

.2 The Committee noted that on the Participation Invitation Letter (p.13) it states 'Myself, or one of the Skills for Living team will phone you...' and recommended that specific names are provided here.

.3 The Committee noted that on the Participation Invitation Letter (p.16) it states that as soon as the interview is typed up the recording would be deleted. It would be useful to provide a timescale for when this is likely to happen (e.g. within 2 weeks, with a month).

.4 The Committee recommended that some of language in the Participation Invitation Letter be simplified (e.g. clinical, transcript, pseudonyms).

DECISION: Approved on condition revisions are made (in consultation with supervisor).

APPENDIX VII – Semi-Structured Interview

(The main questions are featured in ***bold italic***, with supplemental and alternative questions following. Areas of interest are included after some questions after the indented bullets, to aid the interviewer’s conversation with the participant.)

“Hello, thanks for meeting up with me for a chat.

Just let me know if you want a break at any time. If you find any of the questions upsetting we can stop for a while and think about whether it would be useful for you to get some help on the issues that have upset you. If you want to stop the interview at any point, just let me know and that will be fine.

I would like us to have a chat about the relationships in your life. Some of the questions might ask about things that tend to happen when you are younger, but if you think that these things have happened in a recent or current relationship I would really like to hear about that too.”

Love and security

- ***“Throughout your life who would you say you were close to? Was there anyone who was there for you most of the time?”***
 - Info on who they were/ when/ what the relationship was like/how it differed to other relationships/ if it changed outlook (trust - self/others/world).
- ***“If you did something wrong, how did they react?”***
- ***“How did you respond to their reaction?”***
- ***“If this relationship happened later in your life, how was it different to what you experienced when you were younger?”***

If no close relationship:

- ***“What would you have liked?”***
- ***“What do you think stopped it happening?”***
- ***“At what point in your life do you think it would have been important?”***
- ***“How do you think you would have been different?”***

New experiences

- ***“Was there someone who would play, or do activities with you and encouraged you to learn?”***
 - Info on who they were/ influence and effect on outlook (self/others/world)
- ***“Did they encourage you to try new things?”***
 - Reactions to new experiences
- ***“Could you talk to each other about your emotions?”***
- ***“If this relationship happened later in your life, how was it different to what you experienced when you were younger?”***

If no nurturing relationship:

- “What would you have liked?”
- “What do you think stopped it happening?”
- “At what point in your life do you think it would have been important?”
- “How do you think you would have been different?”

Praise and recognition

- ***“When you were growing up was there someone who was positive about the things you did and praised you in any area of your life?”***
 - Who/ how they did this/ areas
- ***“Did they want you to do things that were too hard or too easy?”***
 - Influence on self-efficacy & confidence/ impact on learning.
- ***“How would they react if you made a mistake?”***
 - Influence on learning and self-esteem.
- “If this relationship happened later in your life, how was it different to what you experienced when you were younger?”

If no supportive relationship:

- “What would you have liked?”
- “What do you think stopped it happening?”
- “At what point in your life do you think it would have been important?”
- “How do you think you would have been different?”

Responsibility

- ***“Was there someone who trusted you and encouraged you to be responsible?”***
 - Who/ how they did this/ boundaries/ preparation for adulthood/ impact (self/ others/ world)
- ***“Did they give you advice?”***
- ***“How did they react if you made decisions different to what theirs would have been?”***
- ***“What did you think of their behaviour and opinions?”***
- ***“How did this relationship impact on how you deal with problems and emotions?”***
- ***“Did you feel a part of a group of friends or another group?”***
 - Group identity/ personal identity development
- “If this relationship happened later in your life, how was it different to what you experienced when you were younger?”

If no relationship that encouraged responsibility:

- “What would you have liked?”
- “What do you think stopped it happening?”
- “At what point in your life do you think it would have been important?”
- “How do you think you would have been different?”

Core Relationship

- ***“Overall, xxxxx seemed to have a positive impact on your life.”***
- ***“How would you describe the good parts of your relationship?”***

- *“Were there any difficult parts to your relationship?”*
- *“Are you still in touch with them now?”*
- *“How do they help you now?”*

APPENDIX VIII – Participant Data Sheet

Participant #

Gender

Age

Experience in care

Placements (age, duration, type, siblings present):