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The Quest for Permanence for  
Looked after Children in England

DOCUMENT 5: “Everyone is safe  
and good”: the search for  
permanence through reunification

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## Abstract

This study examines the reunification of children in care with their birth families, and whether this can contribute to our understanding of permanence.

The existing literature on reunification reports poor success for reunification as a means of achieving permanence. In addition the literature lacks accounts of the lived experience of the people involved. Therefore, the research questions were:

**Considering children who have been looked after and are now reunified with their birth family:**

**How can we understand the experience of children, their carers and their social workers?**

**And secondly,**

**What do these experiences tell us about permanence for Looked After children?**

Using an Interpretative Phenomenological Approach (IPA) the experiences of 3 children, one parent and one grandparent, and their social workers were investigated. The aim was to understand the experience of these families who had been successfully reunited. Seven interviews were transcribed and analysed. IPA is deeply rooted in the experiences of the individual, which are interpreted in a questioning way, albeit while fundamentally accepting the participants account. IPA is thus particularly appropriate for exploring this research question.

Ethical approval was granted by the Nottingham Trent University Professional Doctorate Programme ethics committee.

The interviews revealed the importance of the birth family bond; these family ties were sustained throughout a long period of separation. Contact was important in maintaining these ties, much of it unofficial.

Reunification reinforced the children's sense of identity. Membership of the birth family and the support this provided contributed to their resilience and sense of permanence.

The families had to reconstruct family life: 'doing family'.

Strong motivation was demonstrated from both carers and children. Equally important was the belief of the social workers that the families could change, and their tireless efforts to support the families through periods of difficulty. The local authority policy of exiting children from care provided the impetus for this process.

Commitment to the birth family formed a key underpinning value system for the social workers.

Factors emerged which both reinforce and challenge previous findings about successful reunification; key points are:

- Children can be reunified at an older age and after a long period in care.
- Contact is a very powerful factor, and unofficial contact helped keep the birth family ties alive.
- The social worker has a key role as an agent for change.
- The legal status of the placement (discharge of the care order) was extremely important to the families, as it confirmed that the social workers had confidence in them.

The implications for practice identified are:

1. The need for a strong professional assessment, using a strengths based perspective.
2. Open-mindedness and the ability to see the potential for change.
3. Commitment to the process even when the going gets tough.
4. Acknowledgement of the strength of the family bond for some families.

5. Listening to the children, both spoken and unspoken messages (e.g. through behaviour).
6. Understanding the importance of the legal status of the placement.

The study demonstrated that permanence can be achieved for older children in inauspicious circumstances through reunification with the birth family.



## Chapter 1: Introduction

This Professional Doctorate arose from my interest in adoption and children in care, the background to which will be explored in Document 6. Previous Documents have focussed on issues pertinent to adoption.

Document 1 set out the initial premise for the Doctorate and how the overall study was envisaged.

In Document 2 the concept of permanence was examined, encompassing both international and philosophical dimensions, exploring the issue that permanence has been a predominant child welfare policy objective of successive governments since the 1970s but all governments have been noticeably unsuccessful in achieving it. Does the focus on adoption which has derived from this deflect attention from seeking permanence for the much larger group of children who will never be adopted? In exploring the idea of 'care', the relevance of the idea of the 'ethic of care' was examined, alongside different welfare systems and ways of 'Looking After' children. Finally, the nature of adoption was discussed as the most effective means of securing permanence.

Document 3 addressed the historical development of permanence policy and the rise of adoption as the predominant articulation of permanence through examination of three key periods. Using a qualitative content analysis specific documents were examined, namely Children Who Wait (Rowe and Lambert 1973), the Houghton Report (Home Office 1972) in the 1970s; the Short Report (House of Commons 1984) in the 1980s; and for the 1990s the government circular LAC 98 (20) (Department of Health 1998a) and the Prime Minister's Review of Adoption (Performance and Innovation Unit 2000). These particular periods constituted 'epiphanies' when there were opportunities to change direction, but these were not taken, and the reports pushed permanence towards adoption while closing down other options. However, due to the impact of high profile child death reports, child care practice became subject to

contradictory drivers, arguing for both more and less state intervention. The development of permanency planning in the 1980s coexisted with the growth of the partnership with parents' movement which culminated in the 1989 Children Act. During the 1990s, as the 1989 Children Act became enacted, adoption disappeared from policy but remained within public view, and children continued to be adopted. The New Labour Government showed more interest in children in care generally, through Quality Protects (Department of Health, 1998b), but this was pushed aside by the Prime Minister's Review of Adoption, adoption being privileged again over the much larger number of children in care needing permanence. The argument being made was not that adoption is not beneficial to children, but the debate as to how permanence should be formulated was never rehearsed.

Despite the fact that adoption only affects a small number of children, it has continued to push out any alternative discourses (Document 3, p 35).

Document 4 considered contemporary adoption policy. This document followed Document 3 in that it continued the historical development of the meaning of permanence as signifying adoption. The question addressed in Document 4 was "Can the adoption reform policy initiated in 2012 contribute to the development of permanence?" This allowed the use of a different methodology, a case study of the implementation of the policy in one voluntary agency. Within the case study, a mixed methods approach was used: analysing publicly available government statistics, triangulating these with local figures, and interviewing managers, practitioners and adoptive parents. The case study findings indicated that the number of adopters approved had shown a significant increase, although agencies struggled to meet the 6 month time scale. There was also an increase in the number of adopters available nationally but not all adopters were getting placements quickly – this had implications for the 'adopter gap'. Document 4 concluded

Adoption reform is both highly conflicted and highly ambiguous, both in fundamental principles and implementation. A more sophisticated approach is needed. In the short term, the number of adopters approved and children adopted increased over the period of the study, but because of the complex factors involved, this is again likely to be a temporary phenomenon (Document 4, p 42).

Therefore, in Documents 3 and 4, adoption as a means of achieving permanence was analysed. Having been in the forefront of child care policy for 40 years, adoption continues to provide successful permanence, but only for a small number of children. This analysis provoked a change of direction. Returning to the fundamental question for this Professional Doctorate, how can permanence be achieved, Document 5 will investigate the reunification of children to their birth families. Can this be successful in achieving permanence? There is an appealing juxtaposition of opposing concepts in the idea of considering permanence through return to family for Document 5 when the other Documents have primarily concentrated on adoption. The study for Document 5 will be set in the context of the other Documents, which will be explored in Chapter 2.

## Chapter 2: The concept of permanence

The meaning of permanence is frequently expressed as growing up happily, with secure attachments, without significant disruption, and with lifelong bonds into adulthood (Sinclair et al 2007). A slightly different definition encompassing more complexity is provided by Wade et al (2014):

Permanence .....typically combines both the psycho-social features associated with family life, the physical environment called 'home' and the legal framework that identifies who can exercise parental responsibility for the child (Wade et al 2014 p 17).

Permanence and stability are linked, but are not the same. Some evidence indicates that although placement instability is inherent in the care system, for some children care provides more stability than placement at home, and permanence can be achievable in a shorter placement if the child's specific needs are met (Barber and Delfabbro 2005; Schofield and Beek 2009; Ward 2011, in Document 2) but permanence has a deeper psychological and emotional component. Recently, Beckett, Pinchen and McKeigue have drawn on Sinclair et al (2005) to describe four senses of permanence:

- Objective – where the placement lasts throughout childhood
- Subjective – where the child has sense of belonging
- Enacted – where the child and family behave as if the placement is permanent; and
- Uncontested- where the families concerned agree that the placement is permanent.

Beckett et al suggest that although 'subjective permanence' does not follow automatically from the other three, they would appear to be a prerequisite for it (Beckett, Pinchen and McKeigue 2014).

Document 2 examined whether fostering can provide permanence.

Most children in care are in foster homes which are inherently unstable placements and many move placement frequently (Sinclair 2007); the high threshold for entry to care in England means that many have very significant problems. These children are not served well in foster care (Document 2, p 22).

However, for some children foster care can and does provide security and a springboard for life through the five dimensions of care giving: availability, sensitivity, acceptance, co-operation and family membership (Schofield and Beek 2000, 2004, 2009 in Document 2), which resonate with the ethic of care principles explored there.

Document 2 also explored the nature of residential care in the context of social pedagogy and concluded that while social pedagogy can provide permanence, this is not a method which is embedded in the culture in the UK and currently is not likely to provide permanence for many children in care here, although residential care does have a part to play, particularly in providing space and containment as troubled and vulnerable young people negotiate adolescence (Munford and Sanders 2015).

Pinkerton (2011) emphasises the social ecology of support, the child's need for a strong network of social relationships to strengthen social capital and resilience. However, structural factors mean that "most placements are meant to end" (Sinclair et al 2007 p. 268). In this case it is a difficult if not impossible task to boost social capital and resilience. The 'corporate parent', the local authority, has much more pronounced 'corporate' than 'parental' characteristics (Bullock et al 2006; Holland 2010 in Document 2). A recent paper evidences how the professionalization of foster care inhibits the development of relationships between carer and child (Oke, Rostill Brookes and Larkin 2013). Permanence in foster care is compromised by the system in which it operates.

## A critique of adoption as a route to permanence

Document 3 analysed the historical development of adoption as the predominant articulation of permanence and the conflicting professional views which emerged in parallel to this, and argued that the seminal reports constructed a reality which pushed permanence toward adoption while closing down other options. By the end of the 1970s, the opportunity to promote permanence through other means such as family reunification had already been lost.

Social work values and practice became mired in deepening complexity during the 1980s. Despite a strong permanence movement imported from the United States, encapsulated by the statement “*Older child adoption has become arguably the most essential component in successful child welfare services*” (Barth and Berry 1988 p 3, in Document 3), supported by a strongly pro-adoption group of influential writers in Britain (reviewed in Document 3) permanence moved towards birth parents with the implementation of the 1989 Children Act and its underlying ethos of partnership with parents.

This Act resulted from and reflected a fundamental shift in attitudes towards child welfare in general and child protection in particular.....the Act had far reaching implications for permanence and how it was to be achieved (Document 3, p 17).

During this period the concept of the ‘blood tie’ re-emerged (Butler and Drakeford 2012). Social work practice became battered by competing values and definitions (Parton 1999), with social workers being urged to be both more and less interventionist simultaneously. In this atmosphere of professional confusion, social workers lost confidence in their decision making, particularly where the issue of adoption without consent arose.

The concept of permanence was being challenged by the romantic return to the importance of the birth parent-child bond (Document 3, p 23).

The complex drivers during this period meant that the emphasis on partnership with birth parents did contribute to the gradual growth of adoption with contact, as a means of maintaining kinship ties and identity, but permanence fundamentally lay outside the birth family: it had come to mean adoption. Therefore permanence also implied the severing of bonds with birth parents.

Continuing the link between adoption and permanence, in Document 4 the implementation of the Coalition Government's adoption reforms was investigated; in particular the claim that approving more adopters more quickly would lead to more adoption placements. The conclusion of this was that the adopter reforms had been met with some hostility by adoption practitioners, especially in the voluntary sector, possibly due to those agencies now being subject to the target setting culture with which local authorities were already familiar. This was seen as a threat to their professionalism and commitment to adoption.

The motivation which led social workers into adoption is fundamentally the need to find families for children who are Looked After by the state, the responsibility of all of us. This combined with the family creating aspect of adoption, makes the underlying belief that adoption is 'different' very powerful and resistance to change very strong (Document 4, p 39).

Document 4 thus confirmed the strong thread in adoption practice of child rescue and family creation. However, there is a strong contemporary trend rejecting adoption as a permanence option, recent case law seemingly pulling in the opposite direction following challenges in the European Court of Human

Rights, for example this judgement in the Strasbourg court *YC v United Kingdom* (2012) 55 EHRR 967, para 134:

Family ties may only be severed in very exceptional circumstances and ... everything must be done to preserve personal relations and, where appropriate, to 'rebuild' the family. It is not enough to show that a child could be placed in a more beneficial environment for his upbringing (Ward and Smeeton 2016 p 9).

Orders contemplating non-consensual adoption should be made "only in exceptional circumstances, and where motivated by *overriding requirements* pertaining to the child's welfare, in short, where nothing else will do" (Sprinz 2014). Other recently published research indicates a significant rise in the number of Special Guardianship Orders made in care proceedings in parallel with a sharp reduction in the number of placement orders (for adoption), thus suggesting that despite the government's efforts to promote adoption, the nature of permanence may be changing (Bowyer et al 2015).

Adoption is therefore being strongly challenged as the preferred option for permanence, and return to the birth family advocated. Although much of the attention in this area is focussed on children entering care and how their future should be secured, there is also the need to consider reunification after a child has been in care. The 1989 Children Act promotes the idea that children should live with their birth family if at all possible, and local authorities should 'give preference' to placement with family and friends carers if the child is unable to live with their parents (Department for Education 2011). The percentage of children in care being placed for adoption is higher than it has sometimes been historically, currently at 7.6%. However, as already stated in earlier Documents, this is a small percentage of the number of children who are Looked After, and the number of placement orders being made is decreasing (D f E 2015). Given this context, that adoption continues to be contested as a route to permanence,



and the instability of care placements already described, it would seem apposite to consider the reunification of children with their birth family.

## Chapter 3: The road to reunification

In the literature for Documents 2 and 3 there was very little mention of permanence being secured through reunification with the birth family, but 34% of children leaving care in 2014 returned to their birth parents (not including young people exiting care as young adults) (D f E, 2015)<sup>1</sup>. Reunification later in a child's time in care is relatively rare. Two thirds of children returning to parents do so within the first 6 months; depending on the local authority, only between 3 and 15% of children left after at least one year in care to return home (Sinclair et al 2007). This has been consistent over a number of years (Thoburn, Robinson and Anderson 2012). This Document 5 study will consider children returning to birth family after a period in care when according to their care plan it was not expected that they would do so.

The literature search regarding reunification initially comprised a search of NTU Library One Search with the search terms 'reunification' plus 'family; which came up with 252 results. An additional search with the term 'reunification' plus 'child'/'children' and plus 'care' gave 61 results. NTU One Search includes the following databases which are of relevance to social work: Academic Law Review (LexisNexis); Proquest Social Science Journals; Elsevier; and Sage Journals. Each search term revealed some duplicates and some individual results. Many related to various European countries where the child welfare systems are different from the UK, as explored in Document 2. The majority of the remainder related to the United States, Australia and New Zealand. I was particularly looking for articles of relevance to the UK. Those which related to similar welfare systems such as Australia were included; those concerned with specific legislation, social

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<sup>1</sup> The remainder leaving care were as follows: adopted 17%; Special Guardianship 11%; independent living ('aged out of care') 12%; Residence Order 3%; other 23% (D f E 2015d).

conditions or administrative processes were discarded, along with any discussing specific methodological issues. The remainder were those with a more general applicability (not country specific) and those relating specifically to the UK. Using these inclusion/exclusion criteria resulted in only 7 useful articles. I also separately searched Social Care Online, which revealed 9 references, one unique to this database. Finally I looked at the Social Care Institute for Excellence Research Review 42, (Thoburn, Robinson and Anderson 2012), which supplied another 58 references (not all related to reunification), which were subject to the same inclusion/exclusion criteria and afforded 15 useful references. Guided by Thoburn, Robinson and Anderson's extensive survey of the topic, the time period covered by the literature review was approximately 10 years, back to 2005. Taking all these criteria into account, the literature search comprised 23 journal articles. However, the 2 major studies of reunification in the UK discussed below each produced several journal articles, reports and books of which not all appeared in the databases. This yielded 4 additional items. A Google search revealed one more, Boddy (2013). Furthermore, the care pathways study in Northern Ireland was also absent from the database search (McSherry, Fargas Malet and Weatherall 2013). The literature review below will incorporate all these studies.

There is a large body of literature relating to kinship care. This will only be considered where it relates to this study; many of the children who are cared for in kinship placements enter them during or immediately after care proceedings: this study for Document 5 relates to children who return to birth family after a longer period in care. Some literature with 'permanence' in the subject or title does not consider reunification home (for example Biehal 2010); Selwyn et al, in their study of "Pathways to Permanence" for children of minority ethnic origin make only scant reference to return home as a 'pathway to permanence', adoption being the default position for permanence (Selwyn et al 2010).

## Reunification – the literature examined

The literature relating to reunification is characterised by large scale quantitative studies which identify factors promoting and inhibiting successful reunification.

There are two recent major studies, one by Farmer and colleagues (Farmer et al 2008; Farmer, Sturgess and O’Neill 2011; Farmer and Widejasa 2013; Farmer 2014; Lutman and Farmer 2013) [the Bristol study], and the other by the University of York (Wade et al 2010; Wade et al 2011; Biehal, Sinclair and Wade 2015).

Farmer’s team carried out a prospective study of 180 looked after children aged from birth to fourteen, in six different local authorities, for 2 years after a decision for reunification had been made, using case files and interviews with parents, children and social workers (Farmer et al 2008; Farmer, Sturgess and O’Neill 2011; Farmer and Widejasa 2013; Farmer 2014).

The York study involved a census study of 3,872 maltreated children in care in England, and a survey of 149 of the children, followed by interviews with 11 parents and 9 children, 6 months and 4 years after a decision on whether to reunify or not had been made. The York team were therefore comparing the outcomes for children who went home with those who remained in care, a rather different methodology from the Bristol team.

The studies indicate that the children who return home to their parents are not those who could be described as ‘easy’. On the contrary, they have a profile consistent with the population of children in long term care. Almost all the children came from very troubled families, having experienced neglect and/or abuse, with histories incorporating a combination of domestic violence, substance misuse and parental mental ill health. Most of the children had been known to children’s services from a very early age; half of them entered care because of abuse and neglect. In the Bristol study 45% of the children had been in care for more than a year before they returned home; 8% had returned to

their parents after other permanence plans had failed and they had been in care for more than 3 years. At the end of two years, 47% of the returns had disrupted. There was a higher disruption rate for children aged over 11 (59%) compared with the younger children under 11 years (42%) (Farmer et al 2008; Farmer, Sturgess and O'Neill 2011; Farmer and Widejasa 2013; Farmer 2014).

There were wide differences between the success rates for reunification across different local authorities, a finding of both studies (see also Dickens et al 2007). In the York study, 35% had returned to care within 6 months; after 4 years, only 37% of the reunion group had remained continuously at home, a higher disruption rate than Farmer reported overall (63% disruption compared with Farmer's 47%) (Wade et al 2010). Returns to care were due to further maltreatment, exposure to inadequate parenting or failure to manage the child's own risky behaviour. 23% had been reunified at least twice (Wade et al 2010).

The Bristol study was further developed (Lutman and Farmer 2013), taking 110 children from the original study and adding a further 28 children, 5 years after reunification. Half had broken down after 2 years and 65% after 5 years, comparable with the York figures (although the authors point out that they were unable to track some cases which had been closed, implying that the reunification had been more successful).

Maltreated children were less likely to have left the care system, and were more likely to have taken alternative pathways to permanence through adoption, residence orders or long term fostering. Of the children who were reunified, if severe neglect and emotional abuse had been a factor re-entry to the care system was more likely (Wade et al 2010; Lutman and Farmer 2013).

Interestingly, given the historical focus of Document 3, Farmer also considered this subject in 1996. Overall, she found that 45% of the placements at home were beneficial for the child, 19% detrimental and the rest in between. She divided her sample into two groups, the "Disaffected" (adolescents) and the

“Protected” (younger children), and wrote, “To our disappointment, few factors [contributing to successful reunification for Disaffected adolescents] emerged” (p 409). In the younger “Protected” children group, Farmer found that 62% of placements were intact after two years, a slightly higher rate than Farmer’s more recent studies (Farmer 1996; Lutman and Farmer 2013).

Although the figures above give a very disappointing picture in terms of how well the reunifications last, this is not consistent across other literature. In the Northern Ireland study of children’s care pathways, thirty children out of 135 had returned to their birth parents after two years. This study found very high levels of stability in birth parent placements (95%), a finding which the authors describe as “unexpected” (McSherry, Fargas Malet and Weatherall 2013, p 297), although Fargas Malet et al (2014) give a figure for stability of 64% from the same study, still considerably higher than the Bristol and York studies. Beckett, Pinchen and McKeigue confirm the findings of the Northern Ireland team regarding stability of home placements – there were no breakdowns 5 years after care proceedings in their sample of 13 children who went home (out of 59 children in total). However most if not all of Beckett’s sample returned home at the point of care proceedings rather than later, which may be significant (Beckett, Pinchen and McKeigue 2014).

Biehal (2007) questioned the idea that reunification is necessarily beneficial for the child; Ward and Skuse (2001) had also earlier challenged this belief. Recent research confirms this. At the 6 months point there was concern about child safety for 52% of the children, and concern about the quality of caregiving for 63% (Wade et al 2010). Even where the reunification was stable, the well-being scores of reunified children were significantly lower than those who remained in care. Neglected children showed significantly improved outcomes if they remained in care. This finding is reinforced by the Northern Ireland study: parents were struggling, and the children were faring significantly worse than children who were in foster care or adopted (Fargas Malet et al 2010). From the

English studies, reunified children, particularly those with repeated attempts to return home, had worse developmental and wellbeing outcomes than children who remained in care, but results from other research appear to be contradictory, especially in the US (Biehal, Sinclair and Wade 2015).

The studies indicate several factors which influence the return home, which will now be considered in turn.

### Passage of time

Sinclair's major study "The Pursuit of Permanence" yielded data from 13 councils on 7399 children in care (Sinclair et al 2007), and confirmed Rowe's work of 20 years earlier, which identified a 'leaving care curve': children are very likely to return home soon after admission, but after that the likelihood decreases rapidly (Rowe, Hundleby and Garnett 1989, in Sinclair et al 2007). In the Sinclair et al study, of those children who had been in care less than one year, 63% went home; of children who had been in care more than a year, 19% went home. There was very little to distinguish those who went home from those who did not (Sinclair et al 2007). There is no research evidence that the passage of time *per se* decreases the likelihood of reunification, although this is a common belief in social work: it is a descriptive rather than an explanatory concept (Biehal 2007; Sinclair et al 2007; Stein 2009). The timing of return home is largely related to the reasons the child came into care in the first place; those who were neglected or abused, or who had challenging behaviour, stayed in care for longer.

The longer a child had spent in the care system, the more likely it became that a plan for return home would be given up and one for long term care put in its stead.....It was very rare for a plan for permanent substitute care to shift to one for return home (Sinclair et al 2007, p 87).

Document 5 will investigate those situations where this did in fact arise.

## Contact

Biehal (2007) challenged the idea that contact is a predictive factor for successful reunification. The issue of contact is not much discussed in the later literature. Although contact may be frequent, this may not be evidence that this in itself brings about reunification; rather, positive contact is an indication of other factors such as strong attachment and motivation which bode well for reunification (Biehal 2007; Murphy and Fairtlough 2015). In her much earlier research, Farmer considered that maintaining a child's sense of belonging in the family, for example through contact or keeping the child's bedroom, was an indicator for success in reunification (Farmer, 1996), and McSherry et al confirmed the value of maintaining the child's sense of continuity in the family (McSherry, Fargas Malet and Weatherall 2013). For both parents and children, contact is extremely important, although frequently difficult and emotionally charged (Fargas Malet et al 2014).

## Support services for parents/carers to resolve problems of addiction; and parental problems resolved or improved

In the York study the most important factors predicting successful return home were

- the risks to the safety of the child were assessed as acceptable; and
- the original problems which had led to the child being looked after had improved

Evidence of change, support to achieve it within an acceptable timeframe, and provision of services to support return, appear important to the likelihood of children's reunifications lasting (Wade et al, 2010, p 5).

Where the family had received intensive support prior to the child coming into care, but the child still had to be removed, the prognosis for reunification was



likely to be poor (Biehal, Sinclair and Wade 2015). According to Farmer et al, only about a quarter of the parents' problems had been resolved before the child went home, sometimes because the extent of their problems were hidden from social workers, or parents were not fully complying, for example with addiction services (Farmer 2014; Farmer, Sturgess and O'Neill 2011). A significant proportion of the children were going home to a situation which was substantially unchanged or even worse (Biehal, Sinclair and Wade 2015). Parental drug and alcohol misuse was significantly related to children being abused and neglected on return. The York team conclude that reunification decisions should not be based on the assumption that outcomes will be worse if children remain in care (Biehal, Sinclair and Wade 2015). Decisions to reunify maltreated children should be made only after careful assessment and evidence of sustained positive change. The intensive services described by O'Connor et al (2014) to keep children from substance misusing families out of care indicates the level of service required; where services were withdrawn or the case was closed despite continuing concerns, breakdown was more likely (Farmer and Widjedesa 2013). Furthermore, changes in the household, such as an abusive parent leaving, or the child returning to a different parent, were predictive of success (Wade et al 2010).

### **Adequate preparation for child and carer; clear expectations; and the involvement of parents in the planning process**

If parents are involved in the planning and preparation for the return of the child, and had clear expectations set, the reunification was more likely to be successful (Wade et al 2010; Lutman and Farmer 2013). However, this is more complex than it might at first appear. Some parents were difficult to help, particularly where relationships with social workers had been damaged by hostile and conflictual care proceedings (Thoburn, Robinson and Anderson 2012; McSherry, Fargas Malet and Weatherall 2013; Mulcahy et al 2014). Parents often find it difficult to trust social workers because of this, and feel uninvolved with

their children's lives while they are in care. It may therefore be difficult for them to become fully engaged in planning for the return. The relationship between birth parents and Social Services could be improved prior to the child's return by actively engaging and listening to them, facilitating contact while the child was in care, and ensuring they are involved in the child's LAC reviews (McSherry, Fargas Malet and Weatherall 2013). Planning and assessment, the need for which is pointed out by the York team (Wade et al 2010), is often inconsistent (Murphy and Fairtlough 2014; Fargas Malet et al 2014). Clearer expectations and stricter conditions laid down for parents, although possibly incompatible with the ethos of partnership with parents encapsulated in the 1989 Children Act, might be more in tune with children's rights (Fargas Malet et al 2014). In a study for the 'Who Cares' Trust, few children felt they had any influence on decision making or thought their LAC reviews helped them prepare (Fletcher 2006), a feeling confirmed by Fargas Malet (Fargas Malet et al 2014). However, despite some embattled relationships, parents wanted more involvement in the planning process, and help for the whole family in preparing for the return. Children would have liked more warning and preparation and a contingency plan in case things went wrong. Parents found it hard to ask for support from the Social Services Department which had judged them unfit to care for their children (Fletcher 2006), and Berry points to the importance of dealing with parental hostility and anger before change can come about (Berry, 2007 in Thoburn, Robinson and Anderson, 2012).

### **The role of the social worker**

Proactive, family focussed social work has been identified as important in facilitating the transition home (Farmer et al 2008; Farmer, Sturgess and O'Neill 2011; Farmer and Widejasa 2013; Farmer 2014; Pine 2005 in Thoburn, Robinson and Anderson 2012). Part of this is the maintaining of services for the child after return, and continuing practical help with parenting. These factors are often absent (McSherry, Fargas Malet and Weatherall, 2013; Mulcahy et al, 2014),

although where the children have emotional and behavioural difficulties, parents struggle with some very challenging behaviour (Fargas Malet et al 2014). Lutman and Farmer indicate a much higher success rate for reunification of younger children under six years old, and felt planning and decision making was much more effective for this group; older children had much more entrenched behavioural and emotional problems, had experienced greater adversity (Lutman and Farmer 2013) and also tended to 'vote with their feet'. The Northern Ireland team suggest that much greater attention should be paid to the involvement of birth families of adolescents in care, with contingency plans in place in case of placement breakdown (Fargas Malet et al 2014) to prevent completely unplanned returns. Although parents and young people generally had low opinions of Social Services Departments, both had high praise for some individual social workers (Fargas Malet et al 2010 and 2014).

## Motivation

Pressure from parents for reunification may indicate motivation; if parents access services and engage with planning, this is likely to bring about a more successful reunification (Biehal, Sinclair and Wade 2015). However, this is sometimes compromised by parental confusion as to why the children entered care in the first place, and what needed to be done to enable return to take place (Fargas Malet et al 2014). Some parents, severely adversely affected by their children's removal into care, found it hard to cope, which aggravated their own problems (Fargas Malet et al 2014). This clearly made it difficult for them to raise the motivation to change their own lifestyle, but despite their difficulties, some parents battled relentlessly for their children's return (Fargas Malet et al 2014). Pressure may also come from the child. Young people approaching 'ageing out of care' experience feelings of confusion as they make the transition to adulthood; for such young people necessary and normal developmental transitions are compressed. These young people are very likely to both need and want a sense of family (Stein 2008). This may result in 'voting with their feet' and

returning to birth family, if they have not developed a sufficient sense of security and permanence in their care placement.

## Age

Permanence is a concept most usually discussed in relation to younger children (particularly in the context of adoption, as in earlier Documents). The literature identifies that placements of all types, including reunification, are most successful when the child is younger (Sinclair et al 2007; Farmer and Widjesa 2013; Lutman and Farmer 2013).

It was sobering to find that the age cut-off after which children more often ended up with unstable outcomes and more rarely achieved permanence outside the family (in long-term fostering, with kin and not just in adoptive placements) was as low as six (Lutman and Farmer, 2013).

Perhaps even more pertinent, for every year of increase in the child's age at return, the odds of not being in a stable placement five years later also increased (Lutman and Farmer 2013). Murphy and Fairtlough (2013) found that younger children were reunified at higher rates than their presence in the local care population, whilst older children were reunified at proportionately lower rates, but their study population included children at all stages of their care journey, and they associate the higher rate of return with younger children returning home more quickly.

## Legal status

There is some discrepancy in the literature about the effect of the legal status of the placement. If a care order is in force, the children are still Looked After and therefore more support, especially financial support, is provided (Farmer et al 2008; Farmer, Sturgess and O'Neill 2011; Farmer and Widejasa 2013; Farmer 2014; Hunt and Waterhouse 2012). However, if the families have been subject to

hostile care proceedings this leaves a residue of bitterness and lack of trust (Wade et al 2010; McSherry, Fargas Malet and Weatherall 2013; Fargas Malet et al 2014). If children have come into care on a voluntary basis, this is much more attuned to the philosophy of partnership with parents which is the basis of the 1989 Children Act and more likely to facilitate co-operation and true partnership. Few of the studies consider the effect on the family of the care order remaining in force after reunification with the exception of the Northern Ireland study, where the children were living at home on a care order, which was very significant to the families. They felt they were being monitored rather than supported, and were always fearful that their child would be taken back into care (Fargas Malet et al 2010, 2015). Broadhurst and Pendleton (2007) in a small scale study of children 'home on trial' in North West England, questioned the permanence of placements with parents where the care order remains in place.

Sharing parental responsibility with the Local Authority, whilst children were placed at home and over long periods was experienced as a significant intrusion and appeared to undermine parents' sense of confidence and autonomy (Broadhurst and Pendleton, 2007, p 385).

The families wanted life to be 'normal'.

Reunification is not straightforward. Social factors have a significant impact on parenting (Murphy and Fairtlough 2015). Many children are returning to situations of poverty and stress (Delfabbro et al 2015) where if they were maltreated before coming into care, they are significantly more likely to be maltreated again (Connell et al 2009). Fox Harding pointed out nearly 20 years ago that the authoritarian approach to child welfare typified in her 'state paternalism and child protection' model downplays the economic and social factors which affect parenting (Fox Harding 1997, in Murphy and Fairtlough 2015). This was very little discussed in the literature reviewed above.

## Special Guardianship and kinship care

This literature review is primarily concerned with children returning home to birth parents after a period in care. However, a sibling pair in the study for Document 5 returned to live with grandparents under a Special Guardianship Order (SGO). It is therefore useful to briefly consider the literature relating to kinship placements and SGOs. Many children in family and friends care are in kinship foster placements (and so have not left care) or are in informal kinship placements outside the care system; therefore research studies into kinship care are not always strictly comparable (Brown and Sen 2014).

Most children entering kinship placements do so during care proceedings, and later reunification with family members other than parents is rare. Only 6% of children leaving care in 2014-5 did so through an SGO to a carer who was not a previous foster carer, (a 'family and friends carer'); the number leaving to adoption was 17% and returning home to parents or others with parental responsibility, 34% (D f E 2015). In their study of Special Guardianship, Wade et al found that over a 5 year period, 80% of Special Guardianship Orders were granted to birth family members, 51% of those to grandparents (Wade et al 2014). SGOs therefore have a significant role in the return of children to birth families, though the order is not available to parents. The findings from the Special Guardianship report have some features in common with the reunification studies, and some points of difference. Most noticeable is the disruption rate, which at only 14% over 5 years even for older children makes this option much more stable than reunification home to parents (Wade et al 2014). Downie and colleagues challenge whether there is reliable, consistent evidence which supports the positive impact of care by a grandparent or other relative (Downie et al 2010), but Brown and Sen argue in their narrative review that kin placements are more stable and that this stability has a direct positive effect on behavioural and emotional outcomes; the familiarity which kin placements provide promotes some aspects of placement quality and

undermines others (Brown and Sen 2014). Thinking specifically about placement with grandparents, Downie et al refer to the special role of grandparents in family life, as “sources of wisdom, stability and family identity, as well as babysitters, mediators, friends and listeners”, (Downie et al p 8). Their study particularly investigated the experiences of 20 children living with grandparents and identified cluster themes of protective factors, risk factors and coping strategies. The study identified that the children felt positive about living with their grandparents and although there were some vulnerabilities, on the whole the children described a sense of belonging to their family and community, providing a foundation for resilience into later life (Downie et al 2010).

### **The perspective of children and carers**

Reports by the Who Cares Trust (Fletcher 2006), the Children’s Rights Director (Morgan R. 2011) and publications by the Northern Ireland team (Fargas Malet et al 2010, 2014) appear to be the only literature available describing the experiences of children and carers. The Northern Ireland study has already been incorporated into the main body of this chapter.

The Who Cares (Fletcher 2006) and Children’s Rights studies (Morgan R. 2011) are each described as a ‘consultation’: they are not therefore subject to a research methodology, though they provide interesting and useful information, largely confirming the findings of the more formal research. Fletcher interviewed 12 children for whom the care plan was reunification, or who had already gone home, or had gone home and returned to care, plus 8 parents (not necessarily the parents of those children) (Fletcher 2006). Morgan consulted 200 children, who were described as ‘on the edge of care’ (Morgan R. 2011); this consultation did not involve parents.

In Fletcher’s consultation, children did not feel they had any influence over the decision to return home, unless they left care of their own volition. Both they and their parents would have liked better planning and a more incremental

approach. Relationships with social workers were critical, but this was very much dependent on the individual social worker. Children felt they should be better prepared for changes which had taken place in the family while they were away, and the whole family should be prepared for their return. There should be a contingency plan, including the possibility of returning to foster carers, in case things went wrong. Families and children would have welcomed financial support to carry out family activities such as outings and holidays.

According to Morgan, children felt there should not be a general rule about returning home. The child shouldn't go back if there were too many risks, and parents were still not able to look after them properly, or if the parents didn't love them or want them (a very poignant remark). There should be proper preparation and support for families, and any help the child was receiving in care should continue. The child should certainly not be returned home to save money (Morgan R. 2011).

These consultations have been reviewed separately to highlight the importance of children and family's views in the forthcoming study for Document 5.

## Summary and conclusions

In the literature concerning the reunification of children to their birth families, various factors were found to have an influence:

1. The passage of time
2. Contact
3. Support services
4. Preparation
5. The role of the social worker
6. Motivation
7. Age
8. Legal status



The review also looked at other factors relating to returning home, namely the special nature of grandparent care and Special Guardianship Orders, and the views of the children and families themselves.

Several factors stand out. Overall, reunification is not successful, judged by the high rate of return to care. Very few children are reunited with birth family once they have been in care for a longer period. This may be the result of social work decision making, influenced by the belief that returning home is unsuccessful unless achieved within the first six months; but such decisions are also affected by the aim that the child should be in a stable placement and efforts to achieve this (although the reality is that many children live in a succession of medium term, non-permanent homes). The younger age of the child in any placement, not just reunification, predicates more likelihood of success. Parents need to have addressed their own difficulties and be clear what the expectations are; families, both parents and children, need support from social workers and other services, so engagement is necessary from both parties. The finding that most reunifications home are unsuccessful suggests that the assessment that the child and family are ready and suitable to be reunited has not been carried out rigorously enough; or the positive predictive factors indicating motivation and change are not in place; or support services are not intensive enough or sustained for long enough. Farmer's assertion that reunification is regarded by social workers as "essentially unproblematic" (Farmer 1996) has some resonance here. Over the last twenty years, since Farmer was writing that paper, the concept of 'risk' has become predominant in social work; returning children home to parents who have in the past been unable to care for them, is inherently risky. The literature indicates that reunification is difficult, but where the social worker has carried out a thorough assessment, the parents have the motivation and capacity to change, and adequate support services are put in place, it can be successful.

Both the large studies on reunification (the Bristol and York studies) have limitations. The Bristol study (Farmer et al 2008; Farmer, Sturgess and O'Neill 2011; Farmer and Widejasa 2013; Farmer 2014; Lutman and Farmer 2013), collected case file data on a consecutive sample of 180 children who all returned home during a one year period. Children who were reunified after less than 6 weeks in care were excluded, similarly those over 15 years of age. Only the quantitative results are reported in the literature, although 34 parents, 19 young people and 22 social workers were interviewed.

The York study (Wade et al 2010; Wade et al 2011; Biehal, Sinclair and Wade 2015), which is a successor to the earlier Pursuit of Permanence study (Sinclair et al 2007) and follows up the same children, similarly takes a quantitative approach, the data being obtained from local administrative processes and case records. Although stating that 11 parents and 9 children were interviewed, the results of these interviews do not appear to have been published in their own right, and the children's and parents' perspectives are not mentioned in the short report (Wade et al 2010).

In the York study, for the survey, passive consent ('opt out') was used, but parental permission had to be sought for the review of case files and questionnaires completed by social workers. Wade et al state there was a "complex and very elongated recruitment process" (Wade et al 2011 p 23) but eventually consent was obtained for 140 children out of 270 families approached. Wade et al point out the "difficulties which confront researchers when trying to engage families where maltreatment (and the range of difficulties that surround it) has figured prominently in their histories" (p 26). The team also undertook interviews; it was extremely difficult to get informed consent for these, as the request and consent had to be routed through Social Services. This meant that from 97 families approached only 12 interviews were carried out. These are presented as case studies in short vignettes throughout the book (Wade et al 2011).

In the Bristol study there is little discussion about how ethical approval was obtained from the families for the viewing of the case files, although it is stated that this was done (Farmer 2014). Given the difficulties described by Wade et al above, more information about this process would have been informative. It is worth observing that Fargas Malet et al (2014) were required to take an active consent approach, which reduced their response rate to 24% of the possible population. Obtaining active consent thus significantly reduces the sample size; this may or may not have an impact on the results. However, there are also practicalities: the earlier Pursuit of Permanence study (Sinclair et al 2007) used data from Client Information Systems on 7,399 children; questionnaires on 4,647 children were completed by social workers (p 23). This study is extremely informative in terms of large scale patterns and trends; should Sinclair's team have obtained individual consent from each person?

The York and Bristol teams state that the interviews with parents, children and social workers will be "reported elsewhere" (Farmer and Widjesa 2013, p 1614) or are "beyond the scope of this article" (Biehal, Sinclair and Wade 2015 p 109), though these accounts do not appear to have been published. The omission of the parents' and child's perspective leaves a significant gap and an opening for this current study, but there are also issues here of respect for the person and the ethical stance of the researcher which are not discussed. To quote from my own work later in this Document, "The research interview .....involves a clear power asymmetry between the researcher and the subject" (Brinkmann and Kvale 2015 p 37). Part of the ethical approach to research interviewing is to maintain an awareness of the complexity of the task (this Document p. 45)

In summary, these large scale quantitative studies do not address the experience of the person which emerges from a phenomenological perspective. As far as I could establish there are no studies taking an IPA approach.

## What further research is needed? Moving into Document 5

As outlined above, almost non-existent in the literature, apart from the consultations reported earlier, are the direct experiences of children and birth families who have been involved in reunification, in contrast to the experiences of children in care, fostered or adopted, which have been more extensively investigated; this is with the notable exception of Fargas Malet and colleagues (2010, 2014), as part of the Northern Ireland care pathways study, some of whose findings have been incorporated above. This team interviewed 10 young people and 7 parents, and have given an extensive account of the parents and children's experiences of living at home on a care order (Fargas Malet et al 2010, 2014).

Most of the studies of reunification are of a quantitative nature, involving statistical modelling of factors which contribute to the success or failure of reunification. While this provides a wealth of information, the direct experiences of young people, their families and their social workers are hidden from view. Document 5 will explore this area. The importance of consulting young people and understanding their views is well established in social work practice, and in research. Recent examples include children in substance misusing families (O'Connor et al 2014), children who have been adopted and their birth parents (Neil 2012, 2013), children's subjective understanding of permanence in foster care (Biehal 2014) and their experiences of kinship care (Farmer, Selwyn and Meakings 2013). The dearth of material exploring the experiences of reunification creates a space for this Document 5, and this leads us to the research question:

**Considering children who have been looked after and are now reunified with their birth family:**

**How can we understand the experience of children, their carers and their social workers?**

**And secondly,**

**What do these experiences tell us about permanence for Looked After children?**

## Chapter 4: Methodology

In order to reveal the direct experiences of the children, parents and social workers involved, a phenomenological methodology will be employed. Phenomenology can be defined as “the science of phenomena as distinct from that of the nature of being; an approach that concentrates on the study of consciousness and the objects of direct experience” (Oxford English Dictionary). The use of phenomenology as a research method is becoming increasingly common in health (Pringle, Hendry and McLafferty 2011) and because of its attention to the lived experience of the subject it is also particularly suitable for use in social work, where understanding the perspective of the individual is an essential starting point for any intervention. Thus, it is appropriate to use such a framework to explore the experiences of people involved in reunification, and extrapolate some wider conclusions from those particular experiences concerning permanence, a central theme of child welfare.

### Theoretical framework

As a research method, phenomenology is not without its problems, involving many inherent contradictions. It should perhaps be more accurately described as a theoretical framework than a method as such, with many studies using a ‘phenomenological orientation’ rather than an explicit approach (Pringle, Hendry and McLafferty 2011). Phenomenological research involves absorption in the ‘lifeworld’ of the subject, putting aside preconceptions as far as possible, engaging in analysis of the material, and finally reflecting on those preconceptions to bring insight to the analysis (Van Manen 2014), and thus has two core components:

The phenomenological requirement to understand and ‘give voice’ to the concerns of participants; and the interpretative requirement to contextualize and ‘make sense’ of these claims (Larkin, Watts and Clifton 2006, p 102).

The phenomenological question should be about the “lived meaning of a human phenomenon” (Van Manen 2014, p 297). Van Manen explains the need to gather “lived experience descriptions”, which he suggests have particular methodological significance, “the intention to explore directly the original or pre-reflective experience: ‘life as we live it’ ” (Van Manen 2014, p 39, original author’s emphasis).

The philosophical basis of phenomenological research has a complex history and derives primarily from the writings of Husserl and Heidegger. Husserl’s phenomenological attitude was rooted in understanding human experience. Heidegger, drawing on his predecessor and mentor, based his philosophical approach on the idea of ‘person-in-context’: relatedness to the surrounding world is a fundamental element of our being, and the meaningful world is a fundamental part of us (Larkin, Watts and Clifton 2006). This is characterised by Heidegger as ‘Dasein’ –‘there being /being there’: our very nature is to be ‘there’, be located, and always involved in a meaningful context (Heidegger, 1962/1927 in Larkin, Watts and Clifton 2006). The concept of ‘intersubjectivity’ refers to this relatedness. The interpretation of how people create meaning from their experiences is the key to phenomenological analysis (Smith, Flowers and Larkin 2009). The discoveries we make are a function of the relationship between the researcher and the subject(s); the researcher is an essential part of the world they are describing.

But the phenomenologist must aim to reveal any subject matter on its own terms, not according to the imposition of any preconceived set of assumptions and expectations; thus the need for ‘bracketing’ our preconceptions. Bracketing involves putting to one side the ‘taken for granted’ world in order to concentrate on our perception of that world, as revealed by the research participants (Husserl 1927, in Smith, Flowers and Larkin 2009; Moustakas 1994). This is a very complex process, and it may not be possible to know what our preconceptions

are until the interpretation has begun (Gadamer 1990/1960, in Smith, Flowers and Larkin 2009).

Interpretive Phenomenological Analysis (IPA) has developed as an attempt to operationalise phenomenological ideas, initially in psychology but now increasingly in other human sciences (Pringle et al, 2011).

Interpretive phenomenological analysis is committed to the examination of how people make sense of their major life experiences .....IPA researchers are especially interested in what happens when the everyday flow of lived experience takes on a particular significance for people. This usually occurs when something important has happened in our lives (Smith, Flowers and Larkin 2009, p 1).

IPA typically involves an intensive analysis of the experiences of a small number of participants: the aim is to understand the experience of each individual, and explore the similarities and differences between each. IPA is thus phenomenological, being concerned with personal experience; idiographic, situating the participants in their individual context; and hermeneutic, involving interpretation. The researcher is trying to make sense of the participant trying to make sense of what is happening to them, thus a double hermeneutic is invoked (Smith, Flowers and Larkin 2009).

The difference between phenomenology and most other forms of research is that phenomenology studies the world as we ordinarily experience it or become conscious of it – before we think, conceptualise, abstract or theorise it (Van Manen 2014). IPA differs from ‘pure’ phenomenological research in that it recognises the active role of the researcher in the analysis; this is the ‘interpretive’ meaning of IPA. The researcher needs to be open about the likely consequences of their preconceptions (‘fore-structure’ of knowledge) (see Document 6 for a discussion of my own preconceptions commencing this



research). Pringle et al (2011) discuss the difficulty of 'bracketing' previous knowledge and experience, particularly once interviews have begun; should the researcher be trying to disregard knowledge gained from these, or building on them when carrying out and interpreting subsequent accounts? According to Rodham et al, rather than attempting to put preconceptions aside through bracketing, it is more important to be aware of them and their potential influence on the interpretation (Rodham, Fox and Doran 2014).

### **Interpretative Phenomenological Analysis in practice**

The underlying qualities required of the IPA researcher are: open-mindedness; flexibility; patience; empathy; and the willingness to enter into, and respond to, the participants' world (Smith, Flowers and Larkin 2009, p 55).

As outlined above, in the IPA approach the interpretation, and thus the role of the researcher, is of central importance. Maintaining a curious stance and actively engaging in reflexivity are key skills in doing IPA (Rodham, Fox and Doran 2014). IPA is deeply rooted in the experiences of the individual, which are interpreted in a questioning way, albeit while fundamentally accepting the participants account. IPA is thus particularly appropriate for exploring the research question, "How can we understand the experience of children, their carers and their social workers" and through interpretation, "What do these experiences tell us about permanence for Looked After children?"

Smith et al provide guidelines to carrying out IPA analysis but state that these are open to adaptation (Smith, Flowers and Larkin 2009); these guidelines were applied in carrying out this study.

### **Exploring experiences of reunification: the method**

The purpose of the study was to explore birth family reunification as a means of achieving permanence for Looked After children, using IPA as the basis of the

method. With this in mind, I approached the Team A, part of the Children's Social Care Department in Town X. This team was set up three years ago explicitly to 'exit children from care' by re-examining whether reunification home to birth family was feasible.

The study consists of interviews with three children who had previously been in care and are now living in a permanent arrangement with a member of their birth family; the people looking after them (a father and a grandmother); and their social workers, in order to uncover the meaning for these participants of the experience of returning home from care, and from those experiences draw some wider interpretations of permanence. As already described in Chapter 3, reunification after a lengthy period in care is unusual, and statistically reunification is not generally successful. Could the voices of social workers, parent and grandparent, and particularly children, which have not been revealed in this context before, expose elements of critical importance which help us understand some of the factors involved in more depth? What were the important issues for them? And how did these elements contribute to permanence? This study aims to contextualise and make sense of their experiences, which can only be grasped by an approach such as IPA. The subjects were specifically chosen to fit the criteria that they are children who have been in care for a significant period and have been reunified with their birth family.

In order to gather the lived experience descriptions (Van Manen 2014), after appropriate permission was obtained from the local authority, the team manager contacted several families on my behalf. It was important if possible to obtain parent/child pairs, in order to obtain different perspectives on the same experience. The team manager was extremely helpful in this respect, and I was able to contact and subsequently interview Family A, consisting of grandmother Sue, and children Sophie aged 17 and Jack aged 9; and Family B comprising father Harry and son Ben, aged 16. Family A was not a parent/child combination and thus did not fit the original remit. However, Family A had the advantage of a

sibling pair which would add to the richness of the experiential accounts, and it was possible to interview three family members, adding to the variety of the data, anticipating that the interwoven nature of their experiences would provide a particular richness. The grandmother Sue had been closely involved in looking after the children before they came into care, so the family fitted the criteria of reunification 'home', albeit somewhat more loosely. Therefore it was decided to go ahead with these two family groups. This "purposive sampling" (Smith Flowers and Larkin, 2009, p 48) is consistent with an IPA approach, in that it can offer insight into a particular experience. Potential participants are identified via referral, opportunities or snowballing; the first two methods applied here, the opportunity having arisen through my engagement with the team manager, and the referrals through her contacts with the families and social workers. IPA studies are conducted on small samples in order to uncover a particular perspective on a particular phenomenon, through a detailed case by case analysis of the individual transcripts. The aim here was to uncover the participants' understanding of achieving permanence through reunification. The sample size partly depends on the degree of commitment to the case study level of analysis, the richness of the individual cases and the organisational constraints one is operating under (Smith, Flowers and Larkin 2009). Initially I had thought to interview solely the children and their carers, but in order to understand the phenomenon from a different perspective I decided to include the social workers of the families. This provided for a credibility check appropriate to IPA (Elliott, Fischer and Rennie 1999, but imposed a constraint on the families available for the sample: I needed a trio of child or young person, their parent or carer and their social worker, all willing to be interviewed. The team manager was able to meet these constraints and provide a sample of seven individuals associated with two families which would be sufficiently rich to satisfy the demands of the study. Interviewing the social workers also provided information about social work practice and values which added to the interpretation of how permanence is achieved for children.

Therefore, in brief, working within an IPA approach, the method consisted of:

Child focussed activities with one child, Jack (see Appendix Two)

Interviews with two young people, incorporating some child focussed activities adapted for the older age of the young people, Sophie and Ben;

Interviews with two adults, Sue (grandmother of Sophie and Jack), and Harry (father of Ben);

Interviews with two social workers, Louise and Matthew;

Overview of each case through a scan of social work files, to check for accuracy, dates and background information. As I undertook the interviews with no prior information, it was helpful to look at social work files to fill in points of detail I had not been able to establish in the interviews without breaking the flow. This was not a detailed file analysis.

Everyone was interviewed individually, with the exception of Sue, where Jack was present during her interview. The families were interviewed in their own homes, the social workers in their office. Each interview lasted approximately an hour, except Jack's which was 45 minutes.

### **Validity and reliability**

Only hard core laboratory scientists would assume that the controlled experiment offers an appropriate or indeed useful model for social science (Silverman 1993, p 144),

Despite this assertion, randomised controlled trials are still considered the "gold standard" by some social work researchers, particularly where methods of intervention are at stake (Dixon et al 2014). However, a study becomes 'scientific' by adopting methods appropriate to the subject matter (Silverman 1993).

Validity is one of the strengths of qualitative research; concepts used to determine it include “trustworthiness, authenticity and credibility” (Creswell 2014 p 201). It has been questioned whether general principles of reliability and validity which apply to qualitative research are appropriate to judge IPA, or whether there are specific measures which can or should be employed (Vicary, Young and Hicks 2016). Smith, Flowers and Larkin (2009) apply four broad principles to indicate trustworthiness:

- sensitivity to context,
- commitment and rigour,
- transparency
- impact and importance.

In this study, credibility was achieved by using more than one interviewee for each phenomenon in order to build a coherent justification for the themes identified (Creswell 2014). Among other methods to assure validity, Creswell suggests using a “rich, thick” description (Geertz 1973, in Creswell 2014) to convey the findings. Consistent with a phenomenological approach, such a description gives sufficient detail to enable the reader to understand the world of the participants, and therefore allows the reader to evaluate whether the findings are transferable to other situations or people. In addition, using an external auditor to review the project is helpful, which in the context of this study was carried out by the Professional Doctorate supervisors (Creswell 2014). To ensure reliability, the reflexivity and role of the researcher can helpfully be reflected in diary format (Vicary, Young and Hicks, 2016), or by writing memos (Charmaz 2006, Kettle 2014). The key role of the researcher needs to be acknowledged. According to Vicary et al,

Interpretation is twofold: first, the participant has to make sense of, or interpret, the phenomenon of interest. They then, in effect, interpret this for the researcher. Second, the

researcher endeavours to make sense of the participant's interpretation and does this in two ways, by empathising with the sense-making and also by questioning this. Referred to as the double hermeneutic, acknowledgement of this process is crucial to judging whether research carried out using IPA is of a high quality and valid (Vicary, Young and Hicks 2016, p 3).

Large scale generalisations are not feasible in this type of study which focusses on the "perspective of particular people in a particular context" (Smith, Flowers and Larkin p 29). It should be possible to think in terms of theoretical transferability rather than empirical generalizability. In other words, the researcher should provide a "rich transparent and contextualised" analysis of the experiences of the participants, sufficient to enable the reader to evaluate its transferability to others in similar contexts (Smith, Flowers and Larkin 2009 p 51). The aim of IPA is to illustrate, inform and master themes by firmly anchoring findings in direct quotes from participant accounts (Pringle et al 2011).

We are interested in the particular experience of this child, this adolescent or this adult because it allows us to become informed to possible human experiences (Van Manen 2014, p 313).

The experience is not necessarily transferable or generalizable on a large scale, but the findings can be contextualised with the wider literature, and thus by gaining insight into the individual, we can achieve insight into the whole (Pringle et al 2011).

### The interviews

Qualitative methodology is often difficult as it requires sensitive interpretive skills and creative talents from the researcher (Van Manen 2014 p 40).

In order to be as true as possible to a phenomenological approach and keep an open mind in approaching the interview subjects, I knew very little about them; I did not have any case history, I had not interviewed the social workers at that point and had not read the case files. This was largely beneficial in exposing the meaning of the participants' experiences, but did pose some challenges.

Van Manen suggests the following pointers to achieving a phenomenological interview, which he describes as a "unique challenge" (Van Manen 2014, p 314).

- Where – somewhere the subject is comfortable, not an office or interview room ( in this case, in the subject's own home)
- Who – a subject with whom the researcher can develop a relationship
- When – there needs to be sufficient time for the interview not to be rushed, to be more of a conversation, therefore the interviews were arranged at a convenient time for the participants
- Why – the researcher should have an attitude of open-ness to the phenomenon
- How – taped conversations which can be transcribed and then analysed
- What – the researcher must keep the overall question in mind
- Whatever – it may not be necessary to ask very many questions

In order to understand the experiences of the participants, interviews were carried out with the adults and the two older children, and child focussed activities with the younger child. The 17 year old in Family A, Sophie, also completed one of the children's exercises her brother Jack had done. In Family B, both participants were interviewed on the same day; in Family A, the interview with the grandmother and 9 year old Jack were completed on the same day, with the 17 year old sister Sophie interviewed the following day. All the interviews took place in the same week, in August 2015. This was beneficial as it provided a holistic overview of the whole subject. It was not possible to carry out 'bracketing' in a pure sense and disregard what had been said in one interview

while conducting the next; in fact each interview was absorbing in its own right, and enabled me as the researcher to enter the world of the subjects as individuals, while developing a holistic, cumulative understanding of their perception of permanence through reunification.

“Phenomenology is primarily a method for questioning, not a method for answering”, (Van Manen 2014, p 29). The interview structure was very open in line with the phenomenological approach, aiming to elicit participants own experiences; however, Silverman points out that ‘open-endedness’ can be confusing for the interviewee as they are not sure what is relevant (Silverman, 1993). Therefore it was also important to have an overall structure (Appendix One). In both families, the child interview took place first, in order to situate the child’s experience in the foreground, as it is children’s experiences which are particularly absent from the literature. So, the interview with Sue was informed by the interview with Jack; and that with Harry by the interview with Ben.

In order to uncover the experiences of the different participants, it was not appropriate to ask the same questions to all the groups. Rather, the questions were framed to elicit their experiences and feelings. So the children were asked “Tell me about the family you live with now. How did you come to be living here?” With both Sue and Harry the interview started with the question “The return home, how was it for you?” This open-ended approach elicited a wealth of rich material.

Following these conversations, the children’s social workers were interviewed. According to Van Manen, the ‘data interpreting interview’ aims to bring a professional insight to the phenomenological interview. In line with the phenomenological approach of putting preconceptions aside and entering the interviews with an open mind, it was important to obtain the children’s and participants’ experiences before having contact with the social workers and obtaining their perspective. In order to maintain the confidentiality of the



children and parent/grandparent, and in line with the IPA approach, social workers were not asked to comment on anything revealed in the children or carers' interviews; rather they were asked for their own views about the child's move or change in status, how it came about and their own professional perspective (Van Manen, 2014). They were also asked about working in Team A as it was apparent to me that this team had elements of difference from other social work teams. At this point the children's and carers interviews had taken place, but no analysis of them had been done. So the social work interviews were informed by the interaction with the families in a general sense: I had met them, and I knew something about their characters and history. These interviews were later supplemented by a review of the social work files to establish a chronology of events for each child and check factual information.

The order of the interviews was very important. There is considerable discussion in the phenomenological research literature about the importance and possibility of 'bracketing' prior knowledge. In this case I wanted the engagement with the children to be as uncontaminated as possible by the perceptions of the adults; and similarly, expecting that the social workers would express opinions about the families and about the process of reunification, I didn't want this information to affect my interaction with the carers. So I established a hierarchy of information gathering which would adhere to these principles. The order of interviews appears to be very little discussed in the literature with the assumption that all interviewees are equal in a homogeneous group. In this study the seven participants could be said to form three homogeneous groups, which could be regarded as privileged in the order professionals, parents/carers, and children. I wanted to turn this upside down and hear the accounts of the children first and place their accounts in the foreground. This reflects not only concerns about where children are situated in the research process, but also in social work itself, where communicating with children is "complex, fragmented and partial", with such work needing to be both empowering and therapeutic

(Ruch 2014, p 2148). In placing the interviews with children first I was trying to model this approach.

Interviews are very much a normal part of life in many areas: we rarely stop to consider the 'magic' of interviewing, that an interviewee is willing to tell a complete stranger about many intimate aspects of their life, simply because they present themselves as a researcher. "The research interview ..... involves a clear power asymmetry between the researcher and the subject" (Brinkmann and Kvale 2015 p 37). Part of the ethical approach to research interviewing is to maintain an awareness of the complexity of the task.

The interviews were transcribed using a professional transcription service, and the texts used as the basis for the analysis and interpretation, which will be discussed further below. The transcription did not record hesitations or gaps, but otherwise was transcribed word for word, thus enabling a close examination and analysis of the text.

### Research with children

Until relatively recently, research was fundamentally *on* children, rather than *with* children or *for* children , but now children are regarded as social actors who are experts in their own lives (Fargas Malet et al 2010a). The approach taken in this study recognises that children are similar to adults but with different competencies, requiring different and innovative techniques (Punch 2002).

Having decided to use participatory techniques, it was important in planning the work with the children to devise child centred activities which were fun but purposeful, enabling them to express their thoughts and feelings (Fargas Malet et al 2010a). All the young people were willing to speak about their experiences, clearly being familiar with being questioned by social workers; Jack at a young age had a formidable vocabulary of social work jargon. The exercises devised are detailed in Appendix Two.

My previous experience as a social worker enabled me to use 'direct work' techniques such as small representative figures, puppets and soft toys, and feelings cards (Ryan and Walker 2007; Lefevre 2008; Stringer 2009). These were successfully employed with Jack who was familiar with such techniques. The exercises were largely drawn from Sturgess, as adapted by Neil (Sturgess et al, 2001 in Neil 2012). Neil's work addresses adoption but the questions used were relevant to children returning to their birth family (for example, "Tell me about the family you live with now"), to try and ascertain feelings of closeness to carers and birth family.

To ensure the tasks were age appropriate, the 10 year old daughter of a colleague agreed to pilot the exercises, which was very helpful. In the event, the complete sequence was only used with one child (Jack), but Sophie was aware of what Jack had done the previous day and was also willing to do the 'closeness' exercise. Ben was asked the questions directly during his interview.

### **Techniques of analysis and interpretation**

Brinkmann and Kvale explore the difference between the interviewer as a "miner", searching for knowledge there to be found, and the interviewer as a "traveller", where the interviewer is involved in knowledge construction, "wandering together" in conversation with the subject (Brinkmann and Kvale 2015 p 58). Phenomenological research which by its nature intertwines interview and analysis, invokes the interviewer as "traveller", but it is the researcher's role to provide the analysis. Reading and analysing the text (the transcribed interviews) is an iterative process, a dialogue between past and present, between something old (the researcher's fore-knowledge) and something new (the text itself). The analysis directs attention towards the participants' attempts to make sense of their experiences. Analysis always involves interpretation and here the researcher brings in the use of the self.

While we can learn certain kinds of things from distancing ourselves from the subject studied, we get another kind of knowledge from intuitively becoming 'one with' the subject (Moustakas 1994).

Van Manen emphasises the importance of holistic reading at the start (Van Manen 2014). The importance of listening to the audio recordings as well as reading the transcripts, to take account of the use of language and tone of voice is suggested by Rodham, Fox and Doran (2014); interestingly, in Ben's case, his delivery was very flat, but the words on the page showed passion and anger.

The analysis followed the guidance provided by Smith, Flowers and Larkin (2009):

1. Reading and re-reading – immersing oneself in the data and listening to the recording of the interview – this provides the holistic reading advocated by Van Manen.
2. Initial noting – examining content and language on an exploratory level, highlighting descriptive comments, linguistic comments and conceptual comments.
3. Developing emergent themes: emergent themes should feel as if they have captured and reflect an understanding. They also need to bring out the uniqueness of the individual experience.

All seven interviews were analysed in the same way.

The initial coding emerged from listening to the recording and reading the text; this coding was based on three categories, descriptive, linguistic and conceptual (Smith, Flowers and Larkin 2009), which were colour coded. This is congruent with a grounded coding approach (Charmaz, 2006):

<b>Charmaz</b>	<b>Smith, Flowers and Larkin</b>
What is going on	Descriptive
What are people doing?	Descriptive
What is this person saying?	Linguistic
What do these actions and statements take for granted	Conceptual
How do structure and context serve to support, maintain impede or change these actions and statements?	Conceptual

The original transcript was transferred onto a grid, based on that created by Smith, Flowers and Larkin (2009), but with four columns, the fourth column 'reflection' being added after discussion with my supervisors.

Emergent themes	Original transcript	Exploratory comments and Initial coding	Reflection

An extract from Harry's transcript as an exemplar is attached as Appendix Three.

The codes were then listed and grouped into themes, this iterative process taking place over several readings of the same transcript; through intensive reading and re reading of the text, which contributed to rigour, the themes emerged for each individual (Appendix Four, Harry as an exemplar). In a

phenomenological analysis the hermeneutic circle arises from the researcher engaging with the material, trying to make sense of the participant trying to make sense of what's happening to them; in this case to establish the participants' feelings and experiences of returning home, and what this implies for permanence. An IPA narrative represents a dialogue between the participant and the researcher, and ultimately a dialogue between the writer and the reader. At this point it was necessary to re-engage professional knowledge and understanding: the reflection and notes column allowed this to happen. Following the IPA guidelines (Smith, Flowers and Larkin 2009) the emergent themes were reiterated into a clear narrative of what had been learnt about each participant, grouped into themes for young people, adults and social workers. A further iteration took place, comparing the themes of the three groups to find elements of similarity and of difference. This continuing process of analysis resulted in unexpected themes emerging, and therefore further engagement with the literature was required to frame the new angles which emerged.

Writing is a reflexive component of the phenomenological approach; the writing itself progressed through several iterations, in order to try and achieve a good phenomenological text which "has the effect that it can make us see or grasp something in a manner that enriches our understanding of everyday life experience" (Van Manen 2014, p68). In order to construct a coherent narrative consistent with the literature, the emergent themes were structured around the themes of the literature search, congruent with a more traditional analysis section. Using extensive quotes from the participants allows their voices to be heard, and constructs a rich, thick description of the phenomenon (Creswell 2014).

## Ethics

To obtain ethical approval, the research plan was submitted to the Nottingham Trent University Professional Doctorate programme ethics committee with the relevant documentation, and approved. The application abided by the Economic and Social Research Council ethical guidelines that:

- Research should aim to maximise benefit for individuals and society and minimise risk and harm
  - The rights and dignity of individuals and groups should be respected
  - Wherever possible, participation should be voluntary and appropriately informed
  - Research should be conducted with integrity and transparency
  - Lines of responsibility and accountability should be clearly defined
- Independence of research should be maintained and where conflicts of interest arise they should be made explicit (ESRC 2015).

It has been suggested that social scientists tend to regard ethical approval as merely a tick box exercise, and once it is obtained, their ethical sense is 'turned off' (Jump 2013). Efforts were made throughout this study to keep ethical issues in the forefront, as will be discussed further below.

The four fields of inquiry where ethical issues normally arise are in respect of informed consent, confidentiality, consequences, and the role of the researcher (Brinkmann and Kvale 2015). Permission was obtained from the relevant Children's Social Care Department to interview service users and children who had previously been involved with the team, and their social workers, with the proviso that a short anonymised report would be provided to the Department after the work was completed (the participants were informed of this in the information sheet). Contact was made with possible interviewees by the team manager and I was provided with the details of the people who had agreed to be interviewed. The study was explained to them on the telephone and an

information sheet and consent form given to them at the beginning of the interview (Appendix Five). All participants were given the option to withdraw from the study by a specified date; they were given a university email address and mobile phone number in order to do this. None of the participants withdrew.

Confidentiality is a complex issue in social work research in terms of balancing risk of harm to any individual: if harm to themselves or another person is divulged, should this be reported? A social worker would almost always answer in the affirmative, a researcher possibly not (Jump 2013). Dominelli and Holloway suggest the concept of “contingent confidentiality” which should be discussed with the participants before consent forms are signed (Dominelli and Holloway 2008); in this study the contingency was that confidentiality would be maintained unless any harm to any individual was divulged; how any issue of harm would be addressed if it arose would be discussed with them before any action was taken. There may also be an issue of how far an individual’s right to confidentiality should be balanced against a study’s benefits to society (Jump 2013). In this case where there were a small number of participants there was a possibility that interviewees might be identified in any published material. In order to safeguard this as far as possible, the interviewees were informed that in any written material, the place where the study was conducted and their names would be anonymised; the recordings would be stored in a confidential computer file at the university, along with the written transcripts. They were also informed that their social workers would subsequently be interviewed, but none of the information divulged in their interviews would be reported to the social workers. The participants appeared quite content to take part, on the understanding that the research would ‘help other people’ in an unspecified way.

The role of the researcher is the most complex issue of all. It is possible that some approaches to social science research are at odds with social work



principles, for example the view that most social science research involves minimal risk to individuals, and the risk of psychological damage is no greater than from “questions asked at a bus stop” (Jump 2013); this rather dismissive approach being at odds with social work ethics which imply fundamental respect for the person (Banks 2012). My study was inquiring into the meaning of permanence in families where the reunification had been successful, and therefore a ‘happy ending’ had been achieved, but it could not be taken for granted that the narrative overall did not contain information which it might have been distressing for the participants to discuss. Interviewing requires a delicate balance to be struck between the interviewer’s desire to pursue interesting knowledge, and respect for the integrity of the interviewee (Brinkmann and Kvale 2015); in phenomenological terms, a balance between the hermeneutics of empathy and the hermeneutics of curiosity (Larkin, Watts and Clifton 2006). Returning to the idea of the ‘miner’ or the ‘traveller’, approaching the issues as ‘fields of uncertainty’ rather than concrete facts to be uncovered, invokes a more collaborative and respectful approach, although of course the power imbalance still exists (Brinkmann and Kvale 2015). The researcher should not, and indeed cannot, stand aside and be a neutral gatherer of ‘facts’. It is essential to make use of the self in order to understand the client’s lived experience. Silverman suggests,

[As] the interviewees are subjects who actively construct the features of their cognitive world, then one should try to obtain intersubjective depth between both sides so that a deep mutual understanding can be achieved” (Silverman 1993, p 94).

This is the essence of the phenomenological approach. The fundamental ethical dilemma of the role of the researcher can be summed up as: the researcher wants the interview to be as deep and probing as possible, but on the other hand to be as respectful of the person as possible (Brinkmann and Kvale 2015). This was apparent throughout this study in trying to keep ethical principles in

mind. As all the participants would be speaking about issues which might be difficult for them, it was agreed that the social work team would contact them after the interviews for debriefing in case any support was needed.

### Ethical issues in working with children

Particular ethical issues involved in working with children include in the first place, gaining access and then obtaining consent. Access in this case was obtained through Team A approaching the parents and carers, who then asked the young people if they were willing to participate. When this was agreed, I was able to contact the parents/carers to explain the research and arrange the interviews, and I obtained the mobile phone numbers of the older children to ask them directly if they were willing to participate. Information sheets and consent forms were taken to the interviews and signed.

In order to ensure that the young people understood the research task, I made a short video on YouTube which was sent to their phones.

Issues of consent in working with children are rooted in ideas about the construction of childhood, briefly referred to in the earlier working with children section. In essence, whether consent should be given by the parent/carer with the child assumed to be giving 'assent'; or whether the young person is capable of giving active consent in their own right as a competent person, with the adult assumed to be granting passive consent (reviewed in Fargas Malet et al 2010a). In this case, Jack, although a younger child was deemed to be capable of giving active consent; the study was explained to him and he was also given a "Stop" card in case he wanted to end or pause the session at any time. This consent was slightly compromised by the knowledge that Jack was very used to social workers coming to visit him and ask his views, so there was a possibility that he viewed this as the same. Sophie and Ben were asked directly by phone while the session was being arranged, and given an information sheet and consent form at the start of the session, thus as older children deemed capable of giving consent

in their own right. The consent form was slightly amended for the young people (Appendix Six).

### **In summary – moving into analysis**

In order to understand the perceptions of the children, parents/grandparents and social workers involved in the reunification experience, a phenomenological approach based on IPA was used. This enabled the children and parent/grandparents' views and feelings to be revealed, and placed in the foreground of the study, through the interpretative analysis. A rich, thick description was extracted from the extensive material which evolved, and related to the literature about reunification. The themes and narratives will be analysed in the following Chapter.

## Chapter 5: How can reunification contribute to permanence?

### Analysis of the data

#### The participants

(All names have been changed)

The interviews with the families took place in August/September 2015; the interviews with the social workers in November 2015. All the interviews were individual except that Jack was present during the interview with Sue, and participated in it, shedding more light on his experiences and feelings. This possibly may have inhibited Sue, though this was not apparent either at the time or on subsequent analysis.

All the interviewees were in appearance White British, and had English as their first language.

The interview participants were:

#### Family A:

**Sophie** aged 17 at the time of interview, and her brother **Jack** aged 9 at the time of interview; and their grandmother **Sue**. Sue is in a long term relationship of many years with John, who was not interviewed. The family live together in Town X; the children's birth mother Carol lives close by.

Sophie and Jack spent their early lives with both parents; their father left the family when Sophie was about 9 years old. There was some contact but he did not play a big part in their lives. Their mother Carol became increasingly dependent on alcohol; although she was supported in caring for her children by her mother Sue, Sue herself had problems with alcohol and Sophie became responsible for looking after Jack. When Sue was hospitalised for liver failure the situation became unsustainable and the children were taken into care in May

2012 and a care order granted; Sophie was 14 and Jack 7 years old. They were placed together in a foster home provided by an independent fostering agency in Town Y, about 10 miles from Town X, where they remained throughout their time in care. The plan for the children was long term foster care with these carers.

In January 2013 safeguarding concerns were raised regarding Jack in the foster home; his behaviour started to deteriorate (he was soiling) and concerns continued throughout 2013 until it was deemed the placement had broken down – the foster carers gave notice to terminate the placement but the local authority had already decided it was not meeting Jack’s needs. Sophie could have remained in the foster home but her close attachment to Jack meant she made the difficult decision to leave with him. In November 2013 the children moved to live with their grandparents in Town X. The children had been in care 18 months.

In June 2014 the care orders were discharged and Special Guardianship Orders granted in respect of Sue and John, the grandparents. The interviews with Sophie, Jack and Sue took place in early September 2015 when the children had been at home nearly two years.

### **Family B:**

**Ben** aged 16 at time of interview, and his father **Harry**. They live together, father and son, in a flat in Town X. No other family members live with them.

In his early life Ben and his younger sister Natalie lived with both parents in Town X. Family life was characterised by drug and alcohol misuse and domestic violence. There were two older half-sisters who had left home. Ben and Natalie were taken into care and a care order made in September 2008, when Ben was 8 years old.

They were placed together in a local authority foster home in Town X. The children settled well and in May 2010 the placement was described in social work notes as “brilliant”, and regarded as long term. Domestic and other violence continued to characterise the birth family, and they had a fractious relationship with Social Services. The children’s placement began to deteriorate during 2011, with Ben reporting abuse by his foster carers on a regular basis. Ben involved the police but his sister would not support him in providing evidence and no action was taken. In September 2012 Ben threw a picture frame at the foster mother and the placement broke down, ostensibly because the carers were unable to manage Ben’s behaviour. Natalie remained in the placement. Ben was moved to another foster home in Town Z about 15 miles away, where he did well both in the placement and at school. However, he was regularly drawn back to Town X and a decision was made to move him back to Town X to a residential children’s home. He remained at school in Town Z, where he did well, achieving a number of GCSE’s with good grades (he got the results of these during my interview with him in late August 2015). From the children’s home, Ben returned home to live with his dad Harry in May 2014, Harry having separated from Ben’s mother some time before. It was some months before the care order was discharged as the family needed a great deal of support.

Natalie initially remained with the first foster carers after Ben left, but then moved to a different foster placement in Town X. Natalie has contact with Ben and her father but does not want to return to live with her birth family, she is apparently happy in care and wants to go to university.

The interviews took place at the end of August 2015, when Ben had been home 15 months.

### **The social workers**

**Louise** is the team manager of Team A in the local authority of Town X. She acted as the social worker for Sophie and Jack to enable their return home,

because the team was new and she felt it was important that she herself did some of the “actual work”. She had previously worked in a child protection setting, mainly in Town X, as a social worker and a manager.

**Matthew** had fairly recently joined the team after working in a child protection team in another local authority. He took over from the previous social worker for Ben and Harry, and took the case through court for discharge of the care order.

### **Engaging with the literature: themes contingent with the literature review**

The literature review identified certain themes affecting and influencing reunification with birth family which had emerged from the large scale quantitative studies. Using a method drawn from IPA (Smith Flowers and Larkin 2009) the interviews will be analysed against these themes. This section will draw extensively on the words of the participants. The features of permanence revealed in Documents 2, 3, and 4 will provide an overarching context, namely that permanence

- Provides emotional security and stability, offering optimal developmental chances for the child
- Is intended to provide long term emotional bonds into adulthood
- Has a legal connotation – the child is no longer in care, or carers have parental responsibility
- Occurs within a family setting.

This resonates with the definition of permanence provided earlier in this Document:

Permanence .....typically combines both the psycho-social features associated with family life, the physical environment called ‘home’ and the legal framework that identifies who can

exercise parental responsibility for the child (Wade et al 2014, p 17).

In the following analysis the key questions are:

How likely is reunification to result in permanence?

How far are the experiences of these families contingent with the predictors of stable reunification identified in the literature in Chapter 3, and what differences can be discerned?

What can these families reveal about how permanence through reunification can be achieved?

### **The passage of time**

Returning home after a period of time in care is very unusual (Sinclair et al 2007; Thoburn, Robinson and Anderson 2012; D f E 2015). Sinclair et al suggest that there is little difference in the characteristics of children who remain in care and those who return home (Sinclair et al 2007); both families in this study have a history of drug and alcohol misuse and/or domestic violence. Two of the children were judged to have emotional and behavioural problems (Ben and Jack) which are negative predictors for successful return home (Farmer et al 2013). These children defied that trend. What happened in these cases to make successful reunification happen?

Both Sophie and Ben were surprised or even shocked at the way permanence occurred for them. Ben engineered his own return home but was surprised when it actually did all turn out as he wanted. The actual return home seems to have come as something of a surprise *“And then one day they just said ‘You don't have to come back now, you can just stay there’” (Ben)*. For Sophie the experience of going into care and then returning home mirror each other – *“It was a shock”* going into care; it was *“quite a shock to be going back to Nan and Grandad”*.



For Ben, his placement with his first foster carers was intended to be permanent. But when his placement broke down and he found himself in residential care, he realised that this was a different situation altogether. *“Going in a Children's Home it's different; you think 'Oh they're only here to do a job. ....' and then when he says 'Right is there anything that you want me to help you with?' I thought 'Well I'm not going to bond with you like I bonded with the foster carers, you're not going to try and act like a fatherly figure so I said yeah I want to go back to my dad'. And he said 'Well I'll speak to your Social Worker'”* (Ben). This resonates with Munford and Sanders’ finding that for many young people, social workers and residential workers can create a safe ‘relational space’ for young people to work on complex issues and hold onto hope for the future (Munford and Sanders 2015). This is what Ben is describing here. The social worker tells us *“Ben would go to his reviews and say 'I would like to go and live back with my dad, can you give me a reason why I can't go back and live with my dad?' And in the end we were struggling to do that”* (Matthew). So Ben’s actions on his own behalf were very important.

Sophie was happy in her foster placement, and permanence for her was more associated with external structures, in particular school: *“I'd started my new school which for starters makes it feel permanent”*. She and Jack had their own bedrooms, went on holidays and had *“all our own stuff”*. But for Jack, the placement was breaking down. Sophie *“had the choice, I could either stay in [Town Y] or come here but there was no way I'm leaving Jack for nobody”* (Sophie), her very strong attachment to Jack influencing her decision.

The decision making process was prompted in the case of Family A by placement breakdown for Jack; and for Family B by a concerted effort by Ben to achieve a return home. Fargas Malet et al suggest that where adolescents are concerned and placements appear to be somewhat insecure, conscious efforts should be made to keep birth family involved, as a possible contingency plan to prevent young people returning home completely unsupported (Fargas Malet et al 2014).

Something similar does appear to have happened here, as Ben's persistent requests to return home were eventually met with success. Murphy and Fairtlough suggest that planning and decision making in many cases are unclear and inconsistent, with neither parents nor child being consulted in 20% of cases (Murphy and Fairtlough 2015). For Jack and Sophie, the decision for reunification appears to have been driven by the existence of the team, rather than from the grandparents or social worker themselves at this point, indicating that the firm implementation of a policy change can alter the outcomes for children. Time in care need not be a barrier to reunification if the conditions are right and the local authority is prepared to 'think outside the box'. This will be discussed further later.

## Contact

Although there are several early studies showing that children experiencing regular family contact have a higher likelihood of reunification (reviewed in Murphy and Fairtlough 2015) it is rarely mentioned in the literature after Farmer's study in 1996. Biehal asserts that contact does not have a causative effect on reunification, but is contingent, a high level of contact indicating good attachment and motivation, which are strong predictors of successful reunification (Biehal 2007); other studies indicate that a high level of contact is indicative of successful return (Murphy and Fairtlough 2015).

For both the families in this study, relationships were maintained through contact. Promoting contact for children in care with their parents, relatives and other people connected with them is a legal duty of Local Authorities under the 1989 Children Act (Schofield and Stephenson 2009). Carers and children reported what they perceived as very limited official contact - for Sue with Sophie and Jack, contact was every 6 weeks, for Harry, once every two months. For Harry contact was a constant source of conflict. He reports being 'threatened' that contact would be reduced if he didn't behave in the way Social

Services wanted, in an ongoing power struggle. *"And then every time you try to do anything you always getting threatened 'We'll stop your contact, we'll stop you seeing him' that's what I mean"* (Harry). Contact when it did occur was not *"natural"*. Harry and Ben were supervised, *"followed around"* by the social worker and not allowed to have a *"normal father and son"* conversation. There is a presumption in law that contact will be 'reasonable', but *"the rules are riddled with contradictions"* (Triseliotis 2010, p 65). However, Harry is very aware of the importance of contact, however unsatisfactory, for proving long term commitment: *"Doesn't matter what sort of time you get, five minutes, ten minutes, if you don't see your kid ....."* (Harry).

The most powerful links for both families were 'unofficial' contact. For Sue, daily phone calls took place with Sophie and meetings when they needed them, by the village duck pond. According to Sue, *"If there was a problem, I was the one that dealt with it"*. The power of this unofficial contact (which seems to have gone on for over a year with no-one else knowing about it) is clearly expressed by Sue. *"You could have sent me to prison and I'm still doing it again when I came out, there was no way I wasn't going when she needed me, simple as that so"* (Sue).

In Ben and Harry's case, this unofficial contact had several functions. Ben was placed in foster care in the same community, and Harry reports how he was witness to the foster carer verbally abusing Ben. Harry also had a network among the neighbours who kept him informed of what was happening to Ben in the foster home. Unofficial contact also allowed the bond to be maintained and later developed as the possibility occurred that they might be reunited. *"I think the reason why we've got the chance to have each other back again was because he kept running off. He kept coming to me"* (Harry). Harry colluded with this by *"sending someone"* to collect Ben from the children's home. For Ben, it was hard to understand decisions about contact, and contact was an example of how Social Services wielded power.

If children are to be reunified, keeping a sense of continuity for the child is important, (Farmer 1996; McSherry, Fargas Malet and Weatherall 2013) to maintain relationships and so that they know what they are going back to, as suggested by the children themselves in the report by the Office of the Children's Rights Director (Morgan, R. 2011; Murphy and Fairtlough 2015). If a new placement is contemplated, or reunification after a long period, it is good practice for contact to be increased and for overnight stays to take place, as happened for Jack in order to rebuild the relationship with his grandparents (Murphy and Fairtlough 2015). (This wasn't necessary for Sophie because she had been having a high level of unofficial contact). In Ben's case "*because he was insistent he wanted to go and live with his dad ... they opened the contact up a bit. And I think Harry tricked and cheated a bit and got more contact than he should have done*" (Matthew).

Contact was a power struggle. It was regarded as unreasonable and insufficient by the carers and children, and official contact arrangements were circumvented in both families so that contact proved to be the means the relationships were kept alive during the period of separation.

### Support and preparation

Clear expectations of the parents from the social workers, and support for parents and carers to address their problems are key elements in successful reunification (Wade et al 2010; Lutman and Farmer 2013). Good preparation assists with the integration of the child into the family and reduces stress for the parents and grandparents (McSherry, Fargas Malet and Weatherall 2013). However, the literature also shows that preparation and support can be compromised by past hostile relationships with Social Services (Fargas Malet et al 2010; Thoburn, Robinson and Anderson 2012; McSherry, Fargas Malet and Weatherall 2013; Mulcahy et al 2014), and by conflicting ideologies and aims (Keddell 2011). This was the case historically with the families in this study, who

had long standing and (in Harry's case bitter) disputes with Social Services. Changing the social work team made a significant difference, as will be discussed further below.

Harry had years of fighting with the authorities, literally and metaphorically, including receiving an ASBO for an altercation with Ben's foster carers; the day I interviewed him he had just been escorted back from the Council offices by the police after an argument about his next door neighbour. His ongoing battles with Social Services are exemplified by the comment *"They've got the power and everything to do this, to treat you like crap"* (Harry). He strongly resisted attempts by Social Services to make him give up cannabis as a condition of Ben returning home. *"I changed; they put me through tests and everything. I haven't stopped smoking cannabis and I still got him back and he's still doing well"* (Harry).

Parents and children can have mixed feelings about the level of social work support provided, which may be of varying frequency and intensity (Fargas Malet et al 2010, 2014; Murphy and Fairtlough 2015); the lack of financial support to kinship carers was an issue raised by Hunt and Waterhouse (2012), although the remit of the team in this study allowed for financial support, which was appreciated by Sue in particular. Keddell refers to *"An uneasy collage of controlling/surveillance and educational/therapeutic goals"* (Keddell 2011 p 611); creating a balance is dependent upon frequent interaction between social worker and family. From Matthew we gain insight into the level of social work support provided to Harry and Ben, *"sometimes daily"*; although with the benefit of hindsight and the care order having been discharged, Harry and Ben both seemed to regard the social worker visits as rather burdensome. Ben: *"About four times a week someone would come out to speak to me"*. Harry's rather conflicted attitude to social workers is illustrated by *"They just used to come out and look at this, look at that, see what you're doing, see what you're doing here, see how you're coping with this, see how you're coping with that. And ...I kept*

*kicking off at everything they were saying to me*". However, the forming of a constructive working relationship as a mutual activity (Ruch 2005) was evidenced in the positive regard Harry held eventually for Matthew.

## Motivation

The reunification decision can be strongly influenced by pressure exerted by parents, children or both (Murphy and Fairtlough 2015). Ongoing pressure from Ben has already been described, but for Sue, Sophie and Jack, reunification appeared to come as a surprise, provoked by the intervention of Team A. However, their motivation when the suggestion was made cannot be doubted. *"I just took a look at [John] and he looked back at me and I said 'Yes 100%'" (Sue).*

The strength of the family bond motivated Sue and John in managing Jack's behaviour, an issue which was of concern to the social worker Louise. The grandparents' attitude indicated their motivation: *"These grandparents... they were so open and honest.....they were fantastic, they did everything. I mean when we said you need a bigger house, they were at that house at 9.15 the next day, wanting these children, they were very committed to having these children"* (Louise). The literature indicates that for children with emotional and behavioural difficulties, reunification is likely to be less successful (Sinclair et al 2007; Thoburn, Robinson and Anderson 2012; Farmer et al 2013). However these findings should perhaps be regarded with caution. Beckett, Pinchen and McKeigue suggest the possibility that in some cases behaviour problems identified as the cause of placement breakdowns could usefully be explained as the child's attempts to resist, consciously or subconsciously, plans which do not meet their needs (Beckett, Pinchen and McKeigue 2014). Ben had been moved from his long term foster carers ostensibly because they were unable to manage his behaviour, although he had been complaining for some time that he was being abused in the placement. For Louise, the fact that Jack's difficult and distressed behaviour (*"screeching"*) subsided and was manageable by the

grandparents is very powerful and demonstrates a good emotional 'fit', reflecting other literature (Hunt and Waterhouse 2012; Downie 2010; Brown and Sen, 2014).

The interviews for this study reveal that social worker motivation mirrors that of the parent and child, to create a 'virtuous circle'. The motivation of the parents and grandparents in itself is not enough – they had been motivated for years to no avail, hence Harry's remark *"I'm fighting to get my child back and I keep getting crap from you lot"*. Something had to happen to make a shift. The grandparents Sue and John in one family, and Harry the father in the other, were given confidence by the social work team that despite being 'written off' as carers previously, they could do it – and because of this confidence in them, they could. Louise says *"I just knew that these children needed to be there. And that we could manage it, whatever it was we could manage it"*, thus demonstrating a collaborative approach, they were all in it together (Keddell, 2011). The commitment of the social workers is also evidenced in Matthew's interview. The previous social worker was in contact with Harry *"daily"* and provided extensive support over an 8 month period, demonstrating not only a high level of professional motivation and commitment to make this work, but on a more personal level that the family were 'worth it'. After involvement in the care system parents feel they are worthless and experience profound shame (Memarnia et al 2015; Smeeton and Boxall 2011). *"They think 'Tell you what, it's not worth me battling against you because I'm never going to win' "* (Matthew), a view reinforced by Harry, in respect of most birth parents but not himself. *" If you don't show that child that you're fighting for them while they're in care why should they come and look for you? If you can't be bothered, think, 'Oh there's no point in fighting I'm never going to get them back' change your life around and you will"* (Harry). Suddenly they are no longer battling, they are all working together. To complete the 'virtuous circle' the social workers went to court to support discharge of the care orders. This was the ultimate vote of confidence by

them in the grandparents and father, who had previously been judged unsuitable to care for their children.

### The role of the social worker

Although both families reported conflictual relationships with social workers going back many years, the intervention of Team A provoked a profound change. This team is constituted specifically to consider reunification for children whose care plan is long term care: this includes children who are in expensive independent placements, children who are having frequent contact with birth family members, or children whose placements are breaking down. There was an explicit cost saving element in the creation of the team, but money was committed to support placements at home to enable children to exit the care system. This section will consider the specific role of social workers within the team. Team A is part of the Children's Social Care Department of Town X.

The difference in approach of the social workers in the team is clearly explained by Louise in relation to consideration of Sue as a carer. *"The social worker and the Children in Care service went to our placements panel and said 'I need funding for another placement [the foster carers] have given 28 days' notice'. So the chair of that placement panel [said], 'Hold on a minute, let's hear about this family, we've got these grandparents here'. The social worker absolutely wrote off the grandparents, said 'No she's got her own problems, it's been assessed previously we couldn't do it'. Or she said she couldn't do it at that time. And my head of service was quite adamant and said 'No I want this looking at before we move it on'. And I looked at it" (Louise).* A similar attitude prevailed when Sue and John were being assessed as kinship foster carers (an assessment they failed). The key element was the different attitude of the social workers, their determination to make the placement with family work if at all possible. This was done by a combination of 'tough love' and encouragement, practical support and relationship based social work (Ruch 2005). In Harry's case this approach



worked because he *“Doesn’t do psychological mumbo jumbo...., he wants a conclusion to the argument basically on his terms. So she [the previous social worker] was like the catalyst, for two quite intelligent people sorting their problems out”* (Matthew). The idea of the social worker acting as a *“catalyst”* implies a fundamental respect for the parties involved, which is different from the experience of many birth families in contested care proceedings (Smeeton and Boxall 2011) and which they had not experienced previously. Both the families expressed high praise for the social workers from the Team A, Matthew and Louise. For both Harry and Sue, there is a clear difference between Social Services generally and Team A (which is in fact an integral part of Social Services). The team is described as *“fantastic”* by Sue; Harry developed a really good relationship with Matthew himself: *“The team was brilliant. Especially Matthew”*; and *“They still check-up ‘Oh is everything alright?’ do you know what I mean, it's brilliant”* (Harry). The reason for this very positive view seems to be twofold, firstly the team had confidence in them; secondly, the team acted quickly and efficiently. *“We went to court and got the care order lifted, no problems, no arguments”* (Harry).

## Age

According to the literature, being placed at a younger age predicts a more successful placement, and planning and decision making for younger children is more proactive and effective (Lutman and Farmer 2013). The families in this study demonstrate that permanence through reunification can be achieved even for older children. Both Sophie and Ben were aware, though perhaps this is not directly expressed, that even at their older age, they needed the emotional stability which permanence brings. These two young people were approaching ‘ageing out of care’, and although Sophie had the option of remaining with her foster carers, the future for Ben was not particularly positive. He was in a children’s home, where his likely trajectory was supported living then independence at an early age. He had been in care 7 years, almost half his life,

and was now voting with his feet in terms of contact with Harry and wanting to go home. Success or failure in coping with care leaving in a fashion that is personally and socially acceptable can depend on a young person's resilience and social capital (Pinkerton 2011). The poor outcomes that characterise leaving care are thought to be the result of the interaction between low resilience and limited social capital within an impoverished social ecology of support – the accumulated disadvantage of pre-care and in-care experience (Pinkerton 2011). For Ben in particular, returning to the birth family mitigated the accumulation of disadvantage he had experienced. For Sophie, the interplay of factors is somewhat more complex. Although she undoubtedly had a very disadvantaged early life at home, she saw her period in care as beneficial, giving her many opportunities she would not otherwise have had. The emotional impact of returning home, as described earlier eventually triumphed over her feelings of loss.

Jack at the age of seven when he returned home, was already older than the optimal age for permanent placement identified by Lutman and Farmer (2013); but the benefits of living with birth family in terms of acceptance, familiarity and close relationships with grandparents mitigated the vulnerabilities arising from his age and having been in care (Brown and Sen 2014; Downie et al 2010). The risks of a further placement in care for Jack were evident to Louise: *"I don't think Jack would have survived at all"*.

How permanence plays out for older children was demonstrated by the commitment to their future as adults revealed by Harry and Sue. Looking forward into Ben's adulthood, Harry describes how practically he had to make it possible. *"And they said 'If you want Ben back you've got to move into a two bedroom house because he'll need his privacy and everything'"*. He talks generally about moving their lives into the future, also capturing the past. *"My past is my past; I don't want it to follow me here. I've changed"*.

According to Sue, Sophie was always going to come back when she was 18: *“She’ll tell you, she always said ‘One minute past midnight granddad, I want you at the end of that drive and I’m coming to live with you’ that was Sophie’s plan, from the day she went into care that was what Sophie intended to do”*. The reunification enabled Sue and John to make plans for Sophie. They had bought her a car and were planning to set her up in a business when she left college, thus planning into the future. That Sue and Harry have maintained their commitment to the children through many years of struggle bodes well for a long term relationship into the future.

### Legal status

In most of the literature, the legal status of the placements at home is not discussed, with the exception of Fargas Malet et al (2010, 2014), where the children were at home on a care order. In the major reports (Wade et al 2010, and Farmer et al 2013) the legal status is not mentioned, although as many of the children were returned to care, it may be surmised that they were still on a care order. The kinship care research discusses the differing status of kinship placements (whether they are designated foster carers is significant for financial support) (Hunt and Waterhouse 2012). For the participants in the Northern Ireland study, the fact that the children were still on a care order was very significant: this provoked a constant fear that the children would be removed again; families felt they were being monitored rather than supported (Fargas Malet et al 2014); however, the obverse of this is the fear that when families have full legal custody, support will be withdrawn (Keddell 2011). For families who have many years involvement, Social Services can serve the function of extended family: the ideal of a supportive extended family for many people is a myth (Keddell 2011), with many families involved in reunification socially isolated (McSherry, Fargas Malet and Weatherall 2013; Fargas Malet 2010, 2014). In this study, the removal of the care order was of great emotional significance, having a power far beyond the actual legal effects.

Both Sophie and Ben were pleased that permanence was legally secured for them, that they were no longer in care. For Ben, it meant he no longer had Social Services “nagging” him. Sophie was glad to get away from the “rules and punishments” of being in care. Ben was aware that he and his dad had to re-establish the bond which had been weakened while he was in care, but for Sophie it all seemed natural, “sort of chilled”. The familiarity of the birth family was important (Brown and Sen 2014). “I knew what it meant, I knew that now obviously we were all really happy about it..... I didn't know what would happen if they didn't get granted it, I thought 'Well would I have to go back in with other people?' But like I say it's just one big relief once it was all over” (Sophie). For Jack, legal permanence meant “she can't kick me out”. When his grandmother was asked “Has (Special Guardianship) made a difference to you?” Jack replied for his grandmother “Yes it has”. Legal permanence is important in securing emotional permanence.

The fact that permanence has been legally secured has several meanings for Harry and Sue. Firstly, that they are in control; interestingly this is more explicit in Sue's testimony than in Harry's despite his long standing conflicts with authority of every sort. For Sue, the children's mother is included in their lives again. “Because we're the legal guardians, Carol sees them a lot more than she did when they were in care” and, Sue, exercising control, “Allowed her [Carol] to take Jack down to the park..... I still feel the need for supervised visits”. For Harry there is an emotional element: “I said it to many people 'When you get your child back people say it don't do [anything] but it does. It makes you realise what's more important than anything else”. Legally, “Once that Care Order was taken off I knew then that he was mine. Nobody could tell me what to do with him” (Harry).

Secondly, the legal status means the children will stay with them, they have parental responsibility: this is permanence. For Sue, “Nobody can come into this house and take them kids away from me” (and Jack adds “That's what I'm happy

about"); Sue repeats "So nobody now can have them for any reason whatsoever and that does make a hell of a difference" and once again Jack interjects "No they can not". This is a very powerful interchange. For Harry, it is very similar: "It is a big relief because you now know they can't take you away". Asked what he thought Ben felt about the removal of the care order, Harry replied "He was overwhelmed because he knew somebody cared about him". Harry has a sense of achievement "So he likes it, I like it so we've done it and that's the best achievement you can get, you can't get any more than that".

Thirdly, they no longer have Social Services involvement. For Harry, this was extremely important. "It's like knowing that I've got nobody to look around over my shoulder, who is following me or who is watching me? That's a relief" (Harry).

This is congruent with the virtuous circle described above, where the confidence of the social workers allows the parents and grandparents to fulfil the parenting role.

### **What else does the lived experience of the participants tell us about reunification and permanence? Further interpretation of the participants' accounts**

The analysis above provides clear points of congruence but some critical areas of difference with the existing studies of reunification. In summary, the interviews confirmed the importance of motivation in enabling reunification to happen successfully. Contact was also vital in maintaining relationship but the high level of unofficial contact was unexpected. This will be discussed further below. In contrast to the earlier studies, the older age of the young people did not affect the reunification adversely; a further difference was the importance of the changed legal status for both young people and carers.

The benefit of using a phenomenological approach is that it can take us more deeply into the lived experience of the participants. Further interpretation of the

interview data reveals more about the elements of reunification which can contribute to permanence, beyond those arising from the large scale quantitative studies. Permanence encompasses deeper psycho-social and relational features which will be explored now.

### Attachment

Attachment theory has dominated child care thinking for the last thirty years; attachment relationships can be defined as those where, for an infant, the caregiver is physically, emotionally and mentally available, and thus the child is able to explore the world, form a secure base and develop a positive internal working model of the world and the self (Bowlby 1969/1999, 1972 and 1980). For children who have experienced abuse, neglect, separation and loss, this ability to build a secure attachment is compromised (Schofield and Beek 2006). One of the tasks of permanence is to rebuild these damaged attachments through the parental caregiving system (Cassidy 1999).

Attachment and bonding were not directly assessed as part of this study, and we have only incidental information about the children's early lives, which in both families featured alcohol misuse and in Ben's case, domestic violence. In these circumstances it is likely that infant/ parent attachment was insecure, but both secure and insecure attachments can be strong. A further element of attachment identified by Bowlby (1969/1999), is commitment, which can be defined as the extent to which the caregiver is motivated to have an enduring relationship (my emphasis) with a particular child, over and above children in general (Dozier and Lindheim 2006).

The families in this study demonstrated a constancy which maintained family-relationships even when the family was not living together and there was no prospect of being reunited, and ultimately enabled these relationships to be rebuilt. In much of the attachment literature, building attachment is an aspect of parenting (or re-parenting, hence "Building the Bonds of Attachment", Hughes

(2006), "Nurturing Attachments" (Golding 2007) (see also Schofield and Beek 2006; Hollin and Larkin 2011). Ben understands that building attachment takes work; but in Ben's view, some of this emotional work comes from the child. "*When you go into foster care you think 'Right I've got to settle here, they're going to be like my mum and dad'*". There is a bargain of trust to be struck. His placement of five years was "*supposed to be forever. But then that started happening and I wouldn't live there when they did that'*". They abused him and he felt betrayed. So permanence has to be a commitment on both sides, a commitment he was prepared to rebuild with Harry, maintaining the symbolic importance of family (Wilson et al 2010) and the continuity of the attachment bond.

Harry talks more explicitly than Sue about the bond between parent and child: "*If it means that much and you say you love him that much it's worth fighting to the end for. Nobody can say you give up, nobody can say you didn't try'*" (Harry). Ben's attachment to Harry is demonstrated by the fact that he ran away from the carers to Harry; Harry's very strong bond with Ben is powerfully expressed thus: "*Nobody can refill a hole that's been put in your body or know how you feel unless they've been through it'*".

Sibling attachment is frequently regarded as less significant than parent/child attachment, but this view is contested (Music 2011). Some children in care regard their siblings as their most positive family relationship (Holland and Crowley 2013). For Sophie, her strongest relationship was with Jack. She felt a very strong, close bond to him dating back to his birth. "*The bond between Sophie and Jack it's a bond that I've never seen between a brother and a sister.....there was no way Sophie was staying without Jack, no way'*" (Sue). She was consistently mindful of his well-being, and put this first over her own. So when his placement was compromised she had to think of how permanence could best be achieved for him. In his early life, Sophie had fulfilled a caregiving role for Jack; although Jack's attachment to Sophie is not explicitly expressed, permanence for him lay with the birth family where he felt he belonged.

## Birth family ties and the family bond

Attachment is embedded within the idea of the birth family tie, but attachment as a psychological mechanism is only one element in a wider context of networks, relationships and actions which constitute 'doing family' (Holland and Crowley 2013). The idea of family encompasses notions of intimacy (Morgan, D. 2011) and also has a historical narrative, which may be positive or negative, particularly for children who have been in care (Holland and Crowley 2013). These constructs need to be built for children joining a new family; for young people returning to families of origin, they are already in place, even though they may be weakened or fractured. This creates a powerful lens through which permanence can be viewed.

For both Harry and Sue, the birth family setting for permanence is of prime importance, in fact for them it is the only place true permanence can occur. They speak powerfully about the importance of the family bond; the long lasting nature of these bonds beginning in early childhood is the basis for permanence through reunification. All the adults in this study maintained constancy and commitment to the children during the period of separation. The bond between grandparents and child can be powerful and long lasting and convey particular benefits of security and familiarity (McSherry, Fargas Malet and Weatherall 2013; Wade et al 2014; Downie et al 2010); for Sue, this connection dating back to when Sophie was a few days old. This may in fact be the only attachment the adults can imagine, exaggerated by the fact that the children were taken away from them. *"With Jack and Sophie, we had a bond with them since they were very first born, we've seen them every single day and when things did get bad at home, I actually moved in with [Carol] to help look after the children"*. For the children, Sue and Harry have been the only constant figures in their lives; as Sue and Harry feel (and speak) strongly about family ties, the children will have built that into their concept of a permanent relationship as well.



For permanence to be created or recreated in the birth family, a bond needs to be present but the parent or carer needs also to have a long term perspective. Evidence is clear that the removal of children to adoption has long term consequences for the mental health of birth mothers (Wells 1993; Neil 2013), and the sense of loss intensifies over time (Memarnia et al 2015): the birth mothers of the children in this study, although the children were not adopted, appear from the testimonies given to have been absorbed in and significantly damaged by their own difficulties and experiences, so they were unable to keep this longer term perspective in mind. But both Harry and Sue kept faith with the concept of the blood tie. *“Everything is because your kids will come back to you. At the end of the day it doesn't matter who they go to, they always want their proper mum and dad. It's that bond; it's that thing that brings them to you. It draws them closer to you”* (Harry). For both of them, the idea that permanence could exist outside the birth family would not even be contemplated, as expressed by Harry in this conversation with a social worker: *“At the end of the day he's my flesh and blood, he's got my blood running through his body and I do whatever I want with my son.”* [Social worker] *'But at the moment he's in care so he's not properly yours is he?' I said 'Yes he'll always be mine. It doesn't matter what you do with him he'll always be mine and he will come back to me one day”*.

The concept of ambiguous loss is helpful here, in understanding the experiences of Harry and Sue. It refers to three types of loss: family members being physically present but psychologically absent; family members being physically absent but psychologically present; and in transition, with these positions not being permanent (Boss, 1980, in McSherry, Fargas Malet and Weatherall 2013). Although this concept has been useful to describe and understand the feelings of foster children in relation to their birth family (Lee and Whiting, 2007; McSherry, Fargas Malet and Weatherall 2013), it can also be applied to the adults Harry and Sue, who both kept their children and grandchildren very much in mind while they were physically absent, thus maintaining the family bond.

Although she “*had the choice*” Sophie left with Jack because “*There was no way I’m leaving Jack for nobody*”. The close bond with Jack was the most important element in her processing of difficult and complex decisions. The strength of the family bond is powerfully expressed by Ben. “*I never called anyone else mum and dad except for my mum and dad because I still know that they’re my mum and dad, they’ll always be my mum and dad. That’s why they asked me as well when I was about 11, they said ‘Can we adopt you?’ I said ‘No chance’ because I’ve still got a mum and I’ve still got a dad. Even if I can’t live with them for the rest of my life, I’ve still got a mum and I’ve still got a dad*”.

The “haunting power of the blood relationship” (Smart 2007, p 45) is also powerfully expressed by the social workers, with Louise directly invoking the concept of the blood tie without being prompted. Louise, talking about Jack: “*You know what? It worked. That’s what he wanted, he wanted to be around his own family, he wanted to have that sense of belonging and people that got him, people that understood him, people that could tolerate those behaviours slightly more than maybe a foster carer would because he’s their blood and their flesh and that’s just what comes with it*”; for Matthew: “*Most kids, well, all kids for that matter, given the choice would live with their parents safely obviously, of course they would*”.

## Identity

A person’s identity is forged through the production of a narrative about their life experiences (Giddens 1991, in Munford and Sanders 2015). A key element in developing a sense of identity is a sense of belonging and connectedness (Ward 2011), “acquiring a working sense of one’s own personal persistence in time” (Lalonde et al 2006, in Ward 2011). One of the developmental tasks in adolescence is to reconcile the need to change and develop alongside the need to remain the same (Ward 2011); two of the young people in this study were adolescents, approaching ‘ageing out of care’. For young people generally in

society, the progression to adulthood has become increasingly protracted, whereas for young people in the Looked After system, the process is premature, accelerated or compressed (Pinkerton 2008; Ward 2011). While motivation to participate in adult society is secured at least partly by certainty about the destinations to be reached (Williamson 2005), the care leaving experience reinforces uncertainty. For both Ben and Sophie, returning to the birth family enabled planning for the future to take place, thus ensuring some certainty. Ben wants to join the police; for Harry *“He knows I hate the police, [but] if he wants to become a copper or anything like that I’ll back him 100%” (Harry)*. The reunification enabled Sue and John to make plans for Sophie. They had bought her a car and were planning to set her up in a business when she left college, thus planning into the future. *“She’d have it when we die, so she may as well have it while we’re alive” (Sue)*. This planning invoked a sense of permanence and a level of care contingent upon a “shared biography” (Wilson et al 2012). Stein suggests that many young people ageing out of care are denied the opportunity and space to focus on and deal with important issues over time (Stein 2008); permanence through the birth family provided this opportunity for Sophie and Ben. In addition, the sense of family history, the “continuity preserving thread” (Chandler et al 2003, in Ward 2011), gives them an opportunity to know and understand their family backgrounds which then affects how they see themselves and how they can influence their own future. The act of reunification with the birth family gave them the opportunity to step back and start their transition to adulthood again from a more secure base. In addition, Harry and Sue could see a future for their children, grandchildren and themselves as a family, once permanence was achieved.

## Resilience

A further psychosocial element of permanence is the development of resilience. In the same way as family continuity contributes to identity formation, family connectedness can contribute to resilience and social capital. Resilience as a

concept is of relevance where young people have experienced adversity: according to Ungar, resilience does not just lie in personal characteristics, or even relationships; resilience is the capacity of individuals to both *navigate* their way to resources which build and sustain their well-being, and the collective capacity to *negotiate* for these resources (Ungar 2012, original author's emphasis). Young people in care, who are socially excluded and marginalised, have restricted opportunities to develop social capital and exercise agency (Munford and Sanders 2015). Ben confounded this trend by taking it upon himself to affect his own destiny, in a rather extreme way by "*getting out*" of the foster home: "*the only way I got out of it, it sounds horrible but the only way I got out of it, I threw a picture and cut her head open, that's the only way I got out of it*". Ben eventually takes it upon himself to plan for his own exit from care, as described earlier, clearly exercising agency. For Sophie however, the plan for return home was a "*shock*"; so although she gained many of the benefits of permanence in the birth family outlined above, she did not have the opportunity to exercise agency in the same way. Ungar argues that changing the environment creates the potential for long term positive development of children who are at risk.

Our sense of who we are, our identity as resilient or vulnerable, depends on processes of co-construction and negotiation (Ungar 2012, p 23).

Sophie, whose grandmother described her as "*a bit of a nightmare*" on return home, was over a period able to negotiate and co-construct her new life with her grandparents.

Resilience is most likely to be present where young people are well supported by their families and by other informal and formal social networks (Pinkerton and Dolan 2007). The presence of such social capital will contribute to young people's transition to adulthood. Fargas Malet et al (2010, 2014) and McSherry, Fargas Malet and Weatherall (2013) identify that many parents or birth family

members caring for children reunified home have limited social networks of support; this did not appear to be true of Sue, though may have been so for Harry, whose capacity to make use of social support networks was likely to have been compromised by his generally antagonistic attitude. Sue had a large extended family that she both supported and was supported by, the whole forming a safe network, as Jack identifies. For Ben and Sophie, once they had returned home, both of them obtained a job and went to college, indicators of positive social capital (Pinkerton and Dolan 2007). Both Harry and Sue saw this as an important part of their parenting role; for Harry it posed a significant personal challenge as Ben wanted to join the police force, seen as lifelong enemies by Harry.

The building of resilience is a key developmental task for children who are Looked After, who have spent a large part of their lives in adverse circumstances. The development and sustenance of resilience is supported by external factors, such as support networks and social capital as outlined above. But it is also an internal characteristic which is strengthened by strong attachments. For Sophie, Ben and Jack, their resilience and ability to move into the adult world was strengthened by the sense of being loved and wanted in their birth families.

### A sense of place

Does permanence involve a sense of place? Gordon Jack suggests that

The sense of belonging to a particular place is a fundamental component of the way that most people understand who they are (Jack 2010), p 756).

Young children, as well as forming attachments to people, also form attachments to places which to they associate with a sense of security and positive experiences (Jack 2015). Relating place to identity he suggests that the real significance of place attachment for children in

care is only revealed by its absence (Jack 2010). In this study, for Jack, permanence involves being within walking distance of his mum and his cousin, and he describes in detail where these places are and how to get there. For Ben, returning from Town Z to Town X was a key part of his permanence experience. His second foster carers, where he was doing well (*"they were nice" (Ben)*) gave him an ultimatum, he could stay there but only with fewer visits to Town X – but Town X was where he felt rooted and where he wanted to return. *"I joined a school there and then I stayed there even when I came out to [Town X] I stayed there until I left..... But because I play for a football club in [Town X], because I was in the cadets in [Town X], because my family was in [Town X], because I seen my sister twice a week"*. This put in train the return to Harry. Place was important in a different way for Sophie– she appreciated being away from friends who had not been good for her, and enjoyed living in the country. She formed an attachment to a new place which gave her the chance to have a different identity.

The families both had to move house to facilitate the reunification. So for none of the children was there the immediate familiarity of place stressed as important in some of the literature (Farmer 1996; McSherry, Fargas Malet and Weatherall 2013), though they were returning to their original town. On the other hand they had the opportunity to participate in the construction of the new home. The physical environment of home was particularly important for Jack. In his interview he was keen to describe the decorating and painting; where the furniture had been when they first moved in, and also to show me his room, effectively claiming the space. The actual moving process was exciting: *"At the weekend I slept in camp bed it was like an adventure" (Jack)*. During their interviews both Jack and his grandmother were keen to explain where this house was in relation to their previous house and where his mother lived. *"We used to live at number one.....they offered us a house in [ ] Road" (Sue)*; Jack, explaining where his mum lived: *"You go past the [indistinct] and then there's a set of traffic*

*lights. You go across there and then you cross the road over and it's just a little tree, you just keep walking straight, you come up to a church, you come up to a load of flats and I use the tradesman [entrance], my mum's on the first floor".*

They were all in close proximity, thus invoking a strong sense of place.

### **The reconstruction of family life**

The testimony of Harry and Sue demonstrates the importance of the love and commitment they can offer, and one way permanence can be achieved even for older children. An important element of this is their commitment to the parenting task. Sue describes her approach to the parenting of Jack, who is quite challenging. *"I adore the grandkids. They're happy and John (husband) and I are happy. Like I say, years and years ago when my kids were little, John was the strict one and I was the softer one. But because I'm older and I have to spend so much time with Jack, I am now the stricter one".*

The love conveyed in Sue's interview (*"I absolutely love the kids yes I do"*) is not in itself sufficient to demonstrate that she can provide emotional stability and security – it is likely the children's mother might express the same feelings. But Sue's ability to give the children's needs priority<sup>2</sup> is indicated by her assertion of the parenting role. *"Like I say I tell them off and I punish them but they're my world"; "I don't expect Sophie to look after Jack, it's not her responsibility".*

The ability of parents to put their children first is one of the 'moral absolutes' of family life (Wilson et al 2012); for Sophie and Jack, where parents were unable to fulfil this, grandparents stepped in. In the construction of the family ideal, siblings can also fulfil a symbolic family relationship and provide the opportunity for giving and receiving love (Wilson et al 2012). For all the respondents, the recreation of family life was an important element in establishing permanence. Jack was keen to establish his position in relation to his extended family *"If*

*you're wondering who that boy was in the back garden I was playing with, that was my cousin*", emphasising the normality of the relationship. The "intimate knowledge relationship" required to sustain family life (Morgan, D. 2011) was apparent in the interaction between Sue and Jack in Sue's interview, where the biographical narrative being created was particularly noticeable. Constant interruptions and interjections led Sue to assert her authority on more than one occasion. She was thus confirming her role as the parent figure able to provide the emotional stability and security Jack in particular needed; 'doing family'. The information provided was very detailed: *"She [Carol] comes on a Thursday and she comes on a Sunday and she comes for her dinner. She gets here for about 11 o'clock until about 4 o'clock"* (Sue). Jack revealed the enactment of normal family life, particularly regular unforced interaction with extended family members. *"I go on the Xbox sometimes, I play out with my friends, I go to my cousin's"*. He relates how he was asked to go and play by his cousin, and no particular arrangements had to be made: *"He said, 'It's not today it's now' and I shouted to him and he said 'Go and grab your jacket' and that morning I grabbed my jacket and came back home at about nine"*.

The rebuilding of family history by having stories to tell and adventures to relate is an important part of establishing permanence. Holland and Crowley refer to the distinction between the actual families we live *with* and the idealised families we live *by*, or hold up as idealised examples (Gillis 1996, in Holland and Crowley 2013). In this case both families had been living a fragmented existence. Emotionally they were connected through the strong sense of family ties already described but physically largely absent from one another. Memories and imagination are an important element in the 'emotive territory' that constitutes family, even more so when the family members are apart from one another. Birth family continues to have a powerful co-presence in the child's emotional world (Holland and Crowley 2013). Thus when they were reunited, family reconstruction had to occur. Many young people in care feel they are lacking the skill of 'doing family' (Holland and Crowley 2013; Munford and Sanders 2015),



actively participating in the activities and relationships of family life. For Ben and Harry, the relationship was more like two adults learning to live together. Harry, although very committed to his parenting role of Ben (*"I said 'If I can't handle (it) now then I'll never be able to call myself a dad again'"*), struggled to sustain it. Ben was *"getting to an age where he was more of a parent at times than Harry to be quite honest. He was better for Harry at times than Harry was for Ben..... In a sense you've got two blokes living together"* (Matthew). They learnt to 'do family' in an appropriate way for them, reflecting the diverse ways contemporary families are constructed (Holland and Crowley, 2013; Morgan, D. 2011).

For Sue, John, Sophie and Jack, the family reconstruction was more traditional. One aspect of developing Sue's parenting role and confirming that reunification would provide stability, came from seeing Sophie through the difficult early stages of the placement at home. *"Sophie was at a very funny age and she was resentful..... I would rather have ten Jacks than one Sophie at that age.....But it sorted itself out"*. She was reluctant to talk explicitly about the more difficult moments, perhaps protecting Sophie's privacy (appropriate for the carer of a teenager). For Harry as well, providing emotional security is about parenting through providing structure. Regarding the teenage years *"I said 'If I can't handle that now then I'll never be able to call myself a dad again'..... It doesn't matter what age he is. He's 16, he lives under my roof, he'll abide by my rules"*; and *"It's like at the end of the day I said to him 'I'm going to be here as your fatherly figure. I'll be here to tell you what's wrong and what's right but I won't be here to tell you what to do with your life'"*. Harry needed to re-establish his identity as a parent, as this would have been severely undermined by the trauma of the original court process and the judgement that he was unfit to care for his children (Memarnia et al 2015).

The display of family practices is an important element in the construction of a family. For these carers it was important to be acting the role of parent, and to

be seen doing so. Jones and Hackett have described the importance of family activities in creating an adoptive family (Jones and Hackett 2011). This behaviour is just as important in the recreation of a family. Finch has suggested that “Families need to be ‘displayed’ as well as ‘done’” (Finch 2007, p 66). The interviews themselves seemed to provide a vehicle for doing this, as well as more usual family behaviour such as taking Jack to school (Sue) and helping Ben get a job at the local kebab shop (Harry).

## Chapter 6: Conclusions and implications for practice

In beginning this Professional Doctorate I was concerned that while adoption has been historically in the forefront of permanence policy and remains so, other children in care are marginalised; I wanted to bring such children into the public gaze. This small scale phenomenological study attempts to do so. As such it does not make claims which can necessarily be widely generalized. However, as in all phenomenological studies the testimony of the participants sheds light on their lifeworld and reveals interesting and important aspects of what made reunification work for these families, and thus can help us further understand the meaning of permanence. The large scale studies reported in the literature review relate poor success rates for reunification; the reunifications in this study defy that trend. Through accessing the direct voices of the families and social workers involved, what can we learn?

The strength of the family bond is revealed in all the family interviews, with both children and adults. Jack expressed this verbally through his commitment to the placement with his grandparents, his relief that he could not be taken away; also through his improved behaviour when he was in the heart of his family. Sophie acknowledged the advantages of being in care, and she could have stayed with the foster carers. But her bond with Jack superseded all other considerations; this relationship helped her resolve this very difficult dilemma. For Ben, once the foster carers started abusing him he decided he could trust no-one except his dad, who had been constant for him throughout.

Harry talks eloquently about having to keep going, keeping faith. *“At the end of the day they can only keep them until they're 18 and then it's up to that child whether he wants to come looking for you. If you don't show that child that you're fighting for them while they're in care why should they come and look for you?”* The parents must maintain vigilance, never give up. This was also the case

with Sue; she continued to feel responsible for the children even though they were in care.

Reference has been made earlier to “the haunting power of the blood relationship” (Smart 2007, p 45). For these families, the strength of the family bond endured through lengthy separations. The constancy displayed may have been based on attachments dating from birth, but the evidence is somewhat equivocal: Jack is described as having an “*insecure*” attachment to his birth mother (Louise’s interview); Harry describes a very strong attachment to Ben, though Ben’s early childhood was characterised by drug and alcohol abuse and domestic violence (Harry’s interview), not a situation normally conducive to the formation of secure attachments. Attachments may be insecure but also very strong, and there is some evidence from Jack that he had a powerful attachment to his whole family, not only his mother. The strong family bond would also have been maintained as a result of the consistent efforts of the adults particularly, but also the children, to sustain it.

The concept of the blood tie which was revealed in this study is more complex than a parent child relationship, and is different from attachment. Attachment is fundamentally a biologically based desire for proximity which when fulfilled provides the child with the emotional security to explore the world and develop an internal working model of how the world works (Bowlby 1969, 1972 and 1980; Cassidy 1999). The concept of the blood tie incorporates both the past and the future, and includes other family members; it also contains the fundamental premise that there are elements to the birth family which can never be replaced or substituted by another, artificially created family, such as through adoption or fostering. Harry, Sue and Ben articulated this view, and this was the driver for them. However, many children unable to live with their birth family are able to make satisfactory relationships in substitute families, and attach to their carers, as has been discussed in previous Documents. This was the case for Sophie, but for her the family bond came through in her attachment to Jack. Ben’s sister,

although she was not interviewed, was settled in her foster home and planned to go to university (Harry's interview). The family bond was not important enough for her to give up these advantages.

What is really noticeable in the interviews is the strength of the commitment to the birth family bond from the social workers. The basis of the approach of the social workers in this study lies in their fundamental attitude to child welfare, which is strongly rooted in the birth family. Document 3 explored the confusion and polarisation in fundamental social work beliefs and practice which emerged in the 1980s; this is still a contemporary issue, apparent in the debate around the promotion of adoption discussed in Document 4, and the current resistance to this in the courts (Ward and Smeeton, 2016). Matthew, although appreciating that for some children safety requires them to be removed from their parents, was not *"a great fan of the system as it stands, the care system .....forced adoption and all that"*, so for him returning children to their parents is what child protection is actually all about. By mentioning 'forced adoption' (which is how anti-adoption campaigners refer to adoption from the care system), he aligns himself quite clearly on the birth parents side of the divide typified by Fox Harding (1997) and discussed in Document 3. He thus situates permanence in the birth family. Both Louise and Matthew are explicit in their adherence to this philosophy. For Louise the concept of the family bond is particularly important, much more so than procedural issues such as fostering regulations. Returning to the birth family provides a sense of security, almost relief, where the child no longer has to struggle to form and maintain relationships. *"All they want to do is be with their family"..... "That's what he wanted, he wanted to be around his own family, he wanted to have that sense of belonging and people that 'got' him, people that understood him"* (Louise, talking about Jack). Although today the term has a rather old fashioned ring to it, the concept of the blood tie has been a constant underlying theme throughout child care social work, despite the drive for permanence outside the family described in Document 3.

Amongst the ever changing context of child welfare work, historical research ....shows us that there are continuities ....which withstand and survive the seemingly incessant process of change” (McGregor 2015, p 1637).

This would appear to be true of the concept of the blood tie.

The constancy of family relationships was maintained through contact, much of it unofficial. Contact has already been explored earlier in the analysis; however, it is important because of the significance attached to it by the families, and the lack of attention paid to it by the social workers, regarding it as a routine element of practice. Although contact is generally regarded by social workers as a means of working in partnership with parents, many parents, devastated and traumatised by the removal of their children through care proceedings, find it difficult to sustain ongoing contact (Sophie says *“we were having contact once a month with my mum and she wasn’t turning up”*). It is perceived as being in the power of social services and withheld as a punishment, as both Harry and Sue explained. For the families, the way contact restrictions are threatened and imposed symbolises Social Services power and control; the routine and unacknowledged nature of this was apparent in the matter of fact way the social workers referred to it. Sophie describes being *“banned”* from coming to Town X because she had been visiting her mum unofficially. Ben describes his contact experience in the following way. *“It started off as twice a week but then they reduced it to once a week, and then once every two weeks, and then once a month, and then once every six weeks and then it stayed at once every eight weeks or once every two months. Me: Have you any idea why that was? Did they give you any reason for that? Ben: No”*. Contact decisions were both inexplicable and unreasonable.

Contact is a very complex issue, and its management depends very much on the purpose of the placement. The purpose of contact in a long term or permanent placement may be to maintain the existing relationship with the birth family,

allowing for an attachment to both birth family and new substitute family to develop; or to allow the child to have information about its original family to help with the development of identity, while developing a primary attachment with a new family. In permanent placements away from the birth family children need to retain a sense of connection to their birth family while becoming integrated into their new family, simultaneously experiencing complex feelings of loss and grief (Neil, 2009). Contact can also be a preparation for reunification, and was used in this way for Jack and his grandparents. It has been suggested that in permanent placements, the parents and child “need to face the reality of their past feelings and behaviour towards each other so that they may come to terms with what has happened to them and move forwards” (Schofield and Stephenson, p 181). It is doubtful that Harry or Sue would see this as a purpose of contact. Rather, for them, contact was a means of keeping the family ties alive and keeping the door open, even though reunification was not at that time in the care plan for any of the children. For Sue, there seems to have also been an element of control, or a sense of duty: if Sophie had any problems, she was going to be the one to sort it out. This is also apparent later when Sue discusses how she manages the contact between Jack and his birth mother, now he is at home. For the children, the value of contact was less clearly articulated. Ben valued his father’s presence in his life; Sophie could talk confidentially to her grandmother without their conversation “*getting back*” to Social Services.

In the literature there is some discussion regarding the role of contact in reunification (e.g. Biehal, 2007; McSherry, Fargas Malet and Weatherall 2013). Frequent contact appears to be a predictive factor for successful reunification but may be an indicator of pre-existing positive relationships, rather than a causative factor. From the current study we can conclude that contact helps maintain and reinforce existing strong relationships, and can also, as in both Ben and Jack’s cases, be helpfully used as a preparation for return home. The level of unofficial contact which these families managed to maintain sustained the family relationships to the extent that when the plans for reunification were made, the

work was half done. The unofficial contact was an indication of the strength of their commitment and motivation. The adults (Sue and Harry) saw contact as a battle for control, and as a proxy for more fundamental choices and decisions in respect of their children. The interviews and analysis revealed this power struggle. The effect of these efforts in both families to undermine official plans cannot be underestimated; nor can the strength of the attachments within the birth family which led them to occur. There seems to have been something special about these unofficial contact arrangements which made them more powerful and meaningful. It is hard to see how this could be translated into practice, except by a stronger and clearer acknowledgement of the strength of the family bond. In the current study, the family tie endured throughout their separation, and was maintained through contact, mostly unofficial. This opened the door for reunification. But however strong the tie, this is not in itself sufficient. Children cannot be returned to birth families without a proper assessment of the parents' capabilities and current situation. Neither of the birth mothers in these families were able to look after their children because of their own problems; Carol, the mother of Sophie and Jack, who had managed to give up alcohol, was quite frail and had significant health problems. Ben described his family situation regarding his mother: *"I don't want to go and live with an alcoholic"*.

From the above it might be thought that reunification will always be made possible by the strength of the blood-tie, the maintenance of contact, or the two together. This is not true, but in these families they were powerful contributory factors towards successful reunification. Families need to be able to change, and what the interviews perhaps unexpectedly demonstrate is that the most powerful catalyst for this change is the social worker. Matthew and Louise approached the birth families from a strengths based perspective, open to the possibility that the family could change in order to provide the child with the long term emotional bonds into adulthood which permanence requires.



For parent and grandparent Harry and Sue, achieving permanence within the family involved change. Harry had to change his behaviour and lifestyle to a very considerable degree. Farmer (2014) suggests that firm conditions and clear goals should be laid down before children can be returned. This applied in Harry's case: he had to co-operate with Social Services, thus changing his life-long antipathy to authority of any sort. Sue had already addressed her alcohol problems, but for her and John, their life trajectory changed from one of poor health and a bungalow to parenting and moving back into a house. For all of them, the most significant change was how they were regarded by Social Services. Social workers were not only catalytic in the sense of having the power to agree to reunification or not; they were instrumental in facilitating the necessary changes to behaviour and lifestyle. This attitudinal shift has been explored in the 'motivation' section of Chapter 5. Having been in conflict with the authorities throughout the children's lives in care, suddenly instead of being part of the problem they were part of the solution. For Sue and John *"It was perfectly unexpected. It just came. They rang up and asked if they could come and see us. And obviously then I said yes. And then they turned up and asked because for whatever reasons the placement was breaking down and just asked if we wanted to take them..... So I just took a look at [John] and he looked back at me and I said 'Yes 100%".* For Harry, it was very similar. In perpetual conflict with authorities of any sort for his whole life, *"In the end they just said 'Right we're thinking about letting you come back, would you be willing to have him back?' And I said 'that's a stupid question isn't it?' So I gave everything up and concentrated on getting him back".*

This collaborative and relationship based approach is less authoritarian than that implied by Farmer (2014) and other literature. Both social workers express their commitment to family transformation when talking about the nature of the team. Worker satisfaction appeared to be high. Matthew refers to the way the team works as *"something different"*. Although all social workers should be working to the philosophy of the Children Act, *"When we come along we shift*

*the emphasis, we've got to, when we're looking at rehabilitating the kid"* (Matthew). Louise's attitude to change is expressed through the particular case of Sue and John. *"I think he had an assault charge when he was 22 and he's 60 odd now but that would prevent him possibly from being a foster carer<sup>2</sup>. Whereas actually when you look at the circumstances, these are grandparents and these are their blood and actually he's never been in trouble with the police since..... let's put this into perspective here"*. The effect of this attitudinal shift has been explored earlier; the new attitude shown by Social Services gave them the confidence to work at rebuilding their families. Harry and Ben had been apart for seven years; Sue, Sophie and Jack for eighteen months.

Theories of change as applied to social work originate in the work of Bandura who proposed that human beings need to believe in their own ability to achieve certain goals before change can come about (Bandura 1977, in Watson 2011; Bandura 1995). This self-belief is affected by various personal, social and situational factors, which can also be invoked to facilitate it. For example, Bandura suggests that

People who are persuaded verbally that they possess the capabilities to master given activities are likely to mobilise greater effort to sustain it than if they harbour self-doubts and dwell on personal deficiencies when doubts arise (Bandura 1995, p 4).

For families involved with Social Services and other statutory agencies, the motivation to change is complex. A key aspect for promoting change is

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<sup>2</sup> Initially, because the children were on a Care Order, to ensure that the placement was legal it had been suggested that John and Sue should be approved as kinship foster carers; but the fostering team judged they were not suitable.

understanding ambivalence. This was especially the case with Harry, who struggled to maintain Ben's return. Ambivalence is at the heart of clients' resistance to change (Millner and Rollnick 2002 in Forrester, Westlake and Glynn 2012). This ambivalence is both about the need for change and their ability to change: the person has to have a belief that change is necessary, and the confidence that they can actually achieve it. Various studies (summarised in Forrester, Westlake and Glynn 2012) have suggested that clients particularly value social workers who understand their personal narratives; this appreciation is likely to facilitate a working relationship of partnership and mutual respect. However, two factors militate against this productive working relationship occurring: one is that professional narratives take precedence over personal ones, particularly in the child protection and court arena of social work (Pollack 2010); and secondly, that social workers are in reality highly confrontational in their conversations with clients (Forrester et al 2008; Forrester Westlake and Glynn 2012; Beckett 2003). Harry and Sue had both experienced care proceedings and thus had felt the power of Social Services working against them; but both valued the relationship with the Team A social workers, felt they understood them and took time to listen. Social worker behaviour is the most important tool in reducing client resistance and thus facilitating change (Forrester Westlake and Glynn 2012). The key to this is ensuring that the parent accepts and agrees with strategic goals: protecting the child or in this case maintaining the child at home. Using motivational social work techniques and the relationships they developed with Harry and Sue, Louise and Matthew were able to encourage and sustain their motivation through difficult times and maintain the children at home. The social workers never gave up.

### **How reunification can contribute to permanence**

This study has shown that reunification can be a route to permanence, despite the pessimistic findings of the large scale quantitative studies. The Team A, in its 3 years of existence has experienced no placement breakdowns after

reunification; this study has examined some of the elements contributing to that success, from the perspective of two families and their social workers.

A very strong family bond is one element, sustained by the strength of character of birth parents or grandparents to maintain the links with their children; this may be in opposition to Social Services plans. Most parents of children in care would say they wanted their children back; however, as the reunification literature shows, they have to be both motivated and able to change. Ben's father, Harry, and Sophie and Jack's grandmother, Sue, showed great strength of character in maintaining contact and keeping the family bond alive. So for them reunification contributes to permanence through commitment and constancy. This commitment must be shared philosophically by the social workers, so that they are not only able to contemplate the reunification, but remain committed to support the families when things 'get wobbly'. This requires a high level of social work skill, and courage when other professionals doubt your judgement.

Reunification is not appropriate in every situation: there are many Looked After children for whom care is appropriate and who are able to make good progress in their placements. Similarly, there are many children who are appropriately placed for adoption or long term fostering who are able to make secure attachments which enable them to feel at home and to see their future within that family. There are some similarities between rehabilitation and adoption as a means of creating permanence. For adoption to be successful, it requires family integration (Neil 2012), an active process of being and becoming a family member, as was the case with the reunifications.

In Document 2, it was suggested that permanence is not just structural, it relates to the inner self. The analysis of the interviews points to how identity and resilience develops within the family, because of a sense of connectedness, a shared history, and commitment into the future. This is one of the ways in which permanence through reunification can be successful. The legal security invoked

when the parents/grandparents are granted parental responsibility creates an environment where emotional security is maximised and a consistent sense of self over time, including into the future, can develop. The fundamental elements of permanence for the children in these interviews, belonging and feeling safe can thus be successfully created through reunification in the birth family, where the right conditions exist. These conditions can be revealed and maximised by the attitude, commitment and professional skill of the social worker.

## Implications for practice

20 years ago, Farmer suggested that:

Until recently, the focus of child welfare research and practice in the UK has been firmly on the processes of entry to care and on substitute care itself rather than on exit from care or reunification..... This probably, in part, reflects the continuing legacy of the child rescue philosophy of the past..... as well as an assumption that reunification is intrinsically unproblematic. In this respect, it is interesting that whilst in the USA the proponents of permanency planning emphasised that the best chance of permanence for children was with their birth parents, in the UK the permanence movement came to be associated with efforts to arrange for children to be adopted (Farmer 1996, p 403, my emphasis).

This Document 5 study of the experiences of the reunification of two families and their social workers indicates two things: firstly, that far from being unproblematic, reunification requires a very high level of skill from the social workers; secondly, that reunification can be a successful means of achieving permanence, especially for older children whose care experience has not been positive. In particular, the factors which need to be in place for reunification to lead to permanence are:

1. A strong professional assessment. The birth family has to have the capacity and motivation to change, but the assessment should be undertaken from a strengths based perspective, and probably by a different team, certainly a different social worker. Where reunification is a possibility, a positive assessment can harness the motivation of the birth family to actively work towards change. Social workers also need the strength of their own commitment to this process as doubt will be expressed by other professionals, and indeed other social workers who may have been involved in the original removal.
2. Open mindedness. The social worker must be able to see the potential for change in birth family members who had previously been 'written off' and who will be lacking confidence because of their previous experiences with Social Services. This open mindedness implies a fundamental attitude of respect towards the birth family, and a belief in the strength of the family relationship and the capacity for change. It also requires a sophisticated understanding of the nature of ambivalence and how to work with it.
3. Social workers committed to this process. They have to be able to stay with the difficulties in order to sustain the families when the going gets tough. Thinking about the social work construct of beginning/middle/end (Trevithick 2012), the middle is often the most difficult time. Once again, this requires a high level of skill and commitment.
4. Acknowledgement of the strength of the family bond. A subsidiary finding of this study was the importance attached to contact by the birth family, how it is seen as a proxy for power and control by the Social Services Department, and how strong family ties can undermine Social Services plans. This is a complex area and not the main focus of this study, but a more facilitative and open approach to birth parents both from social workers and permanent carers may reduce this level

underlying antagonism. When a child is being placed in an alternative family, the complex feelings of loss and attachment invoked need to be understood when arranging and managing contact. A strong family bond can be a precursor to and predictive factor for successful reunification.

5. Listening to the children. The young people in this study were processing and dealing with very complex feelings regarding their own emotional lives and futures. Young people benefit from the opportunity and emotional space to participate in making difficult decisions. This study indicates that younger children exhibiting challenging behaviour and placement breakdown may be saying their care placement is not meeting their needs. If a child is unsettled in care and the placement is not secure, or if the child is consistently asking to go home, think outside the box – could this be made to happen? What is needed to enable it to happen?

6. Understanding of the importance of the legal status of the placement. This was crucial to these families and virtually ignored in the literature. Discharging the care order or supporting Special Guardianship gives a strong message of confidence to the parents and carers.

The different attitudes to child welfare explored in the historical analysis in Document 3 are becoming increasingly polarised, and increasingly adversarial. Adoption remains a good option for many young children who are unable to live with their birth families, but what this study has demonstrated is that reunification for children who have not been adopted and have been in care for longer is viable if certain elements are in place. The timing for children is always important, and this is one of the controversial issues in the current (and past) adoption debates. Is the child's timeframe congruent with the parents'? These reunifications worked at this time because the children's needs and wishes aligned with the parent/grandparents' willingness and ability to change.

The policy of children being reunified may become more popular – if it works it saves money – but this study demonstrates that for it to be carried out successfully the investment of social workers’ time, the commitment of the local authority, and financial resources are necessary.

The following quote concluded Document 2:

We should never allow any young person to leave care without connections in place to adults who are willing to offer lifelong support (Selwyn, 2010).

This study has demonstrated that permanence can be achieved for older children in inauspicious circumstances, offering a lifelong support through reunification with the birth family.

## Final words

One of the purposes of this study was to foreground the experiences of the children, so it is appropriate to end with them. There are, as would be expected, differences in the children’s perceptions as revealed in the interviews. Sophie was happy in care, whereas Jack and Ben were not. The strength of birth family ties comes through very strongly, though there were some complexities, as expressed by Sophie: *“I did feel loved at [foster carers’], don't get me wrong I did. But it's never the same as having your family sort of thing because it makes you really feel a part of something”*. Sophie made a decision to leave the foster home where she was happy, in order to safeguard Jack’s future, as he was unlikely to thrive in another foster placement. Ben felt his birth father was the only person he could trust, having been abused in his foster home, and took agency into his own hands to return home. All the children expressed the meaning of permanence for them. Jack: *“I was living with someone I actually knew properly”*; Ben: *“There's nothing that I don't like about it”*; and finally Sophie: *“Everything is just at ease....I know that everyone is safe and good”*.



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## Appendices

## APPENDIX ONE

### Interview schedule for parents/carers in the permanence study

1. Tell me about the reunification from your perspective
  - a. How old were the children
  - b. How did it come about
  - c. Children's history
  
2. What was it like for you when the children were in care
  - a. Contact
  - b. Children's placements
  
3. What has the experience of working with Social Services been like for you?
  
4. Has the legal change in the child's status made any difference to you?
  
5. What do you think about the [.....] team?

Jo Ward August 2015

## APPENDIX TWO

### Exercises and techniques used in working with children

PART 1 Questions (adapted from Neil, 2012): (Dolls, puppets, cut out figures and feelings cards)

1. Tell me about the family you live with now (what are they like, do you like living with them, what's nice/not nice about living here, what sort of things do you do) - **aim** - to get a picture of their perception of their current situation; does it feel permanent ?
2. How did you come to be living here? – **aim** - narrative account of time in care from child's perspective
3. Tell me about your birth parents/birth family - who is in your birth family? How often do you see them –(it is likely that the child even if returned to birth family, may not be living with birth parents, or siblings or be in a reconstituted family) – **aim** – to ascertain how large a part the birth parents/birth family plays in their life currently – this may affect their feelings of permanence

PART 2 Closeness map (adapted from Neil, 2012 and Sturgess, 2001 (in Neil, 2012):

A large laminated card or board with concentric circles: the concentric circles are marked Really Love, Love, Like, Don't Like, Unhappy With.

- Thinking about the family you live with now, if you're in the middle circle, who do you feel closest to? Where would you place (mum, dad etc...as appropriate) on the circles?
- What about your birth family – where would you put them?
- Is there anyone else you would like to put in the circles?

Depending on the age of the child, this can be done with small dolls, play people, stickers or writing on the laminated card with erasable felt tip. With the child's permission, photograph the 'map'.

**Aim** – to ascertain who the child feels close to – this is likely to affect their feelings of permanence]

Jo Ward, August 2015

## APPENDIX THREE

**Exemplar - extract from Harry's transcript with coding columns, showing use of the method**

Emergent themes	Original transcript	Exploratory comments and initial coding (CODING IN CAPS)	Reflection
Commitment and sacrifice	<p><i>I: So tell me about how it all happened for you that he came back to live here because that's what I'm interested in really, about how that happened?</i></p> <p><i>R: I gave everything up. Drinking and everything I gave it all up for him. And stuff I used to do, I stopped doing all of that. And then thought right I felt more for him than I did for anybody else. And that's why I fought to get him back and the fighting paid off.</i></p>	<p>He gave everything up – “drinking and everything” COMMITMENT AND SACRIFICE (CONCEPTUAL) Gave it all up (DESCRIPTIVE)</p> <p>Felt more for him than for anybody else – ATTACHMENT (CONCEPTUAL)</p> <p>Strong feelings for his son. Fought to get him back – STRUGGLE (CONCEPTUAL)</p>	<p>‘Fighting’ words common in the text</p> <p>Obviously a difficult character to deal with</p> <p>Summarising the commitment, the struggle and his feelings for Ben right at the start</p>

<p>Commitment and sacrifice</p>	<p><i>I: Yes obviously. So when did that process start? So Ben was telling me that he was with these foster carers for five years and things obviously went really badly wrong with them. So what was your involvement at that time? What were you doing then?</i></p>	<p>PAID OFF - it was worth the struggle (DESCRIPTIVE)</p>	
<p>Commitment and sacrifice</p>			
<p>Contact and constancy</p>	<p><i>R: At the time he was in care?</i></p>		
	<p><i>I: Yes.</i></p>	<p>While in care interaction with Ben very limited "I wasn't allowed, we weren't allowed"</p>	<p>Powerless-complex relationships with Social Services and other authorities</p>
<p>Conflict with authority – Struggle</p>	<p><i>R: Well I couldn't do anything. I wasn't allowed to speak to him, I wasn't allowed to</i></p>	<p>CONTACT VERY RESTRICTED (DESCRIPTIVE)</p>	
<p>Fighting</p>	<p><i>contact, we weren't allowed to do anything. If we</i></p>	<p>POWERLESS (CONCEPTUAL)</p>	
<p>Fighting</p>	<p><i>seen each other in the supermarket they was</i></p>	<p>SOCIAL SERVICES =THEY (LINGUISTIC)</p>	



<p>Contact and constancy (4)</p>	<p><i>expecting us to walk past and not say anything and it was a hard time. Then I was told he was getting hit.</i></p> <p><i>I: Did Ben himself tell you that?</i></p> <p><i>R: I heard off other people and next door but one neighbour seen and they told me everything. Now the people retired so. When the allegations were brought about and the police were involved not long after they retired and then my daughter has told exactly the same story that she used to get hit by them. And I used to go mad, used to go up there, doing this get arrested and at the end of the day it was all for my lad.</i></p>	<p>It was a hard time (DESCRIPTIVE)</p> <p>A network of informants keeping the connections going even if direct contact very limited</p> <p>The people retired –</p> <p>NO JUSTICE (CONCEPTUAL)</p> <p>Nothing happened to them</p> <p>Daughter said the same – although she hadn't backed up Ca's story according to him (<i>not sure of the age difference- 3 years?</i>)</p> <p>Used to go mad-BEHAVIOUR (DESCRIPTIVE )</p> <p>It was all for my lad – COMMITMENT (CONCEPTUAL)</p> <p>Long standing conflict with the authorities – literally fighting for Ben</p> <p>BEHAVIOUR AND CONSEQUENCES (DESCRIPTIVE )</p>	<p>Engrossing narrative – parental perspective very powerful</p> <p>“Used to go mad” – he must have been a very difficult parent for social workers to deal with, even if behaviour justified</p> <p>Got an arrested trying to protect his son -they were all in the same community</p>
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## APPENDIX FOUR

### Exemplar: emergent themes Harry: narrative

The emergent themes for Harry are:

1. **Commitment and sacrifice**
2. **Attachment and bonding**
3. **Contact and constancy**
4. **Change**
5. **The meaning of permanence**

Harry is the father of Ben. Harry was involved in the care of Ben and his sister when they were at home with him and the children's mother; although it isn't clear from either narrative exactly what happened to provoke the children's entry into care, they were living in an environment of drug and alcohol misuse and domestic violence. Ben and his sister were in care for 7 years before Ben returned to Harry at the age of 15 years, approximately 16 months prior to this interview.

Harry is a complex character; his childhood isn't known from this interview, but he hints that he has had a lifetime of fighting the 'authorities' in various forms. His narrative account isn't always consistent, particularly when relating his feelings towards Social Services.

#### **1. Commitment and sacrifice**

Harry begins by describing the commitment and sacrifice he made to get Ben back: "*I gave it all up*"; and the attachment he felt towards him "*I felt more for him than I did for anybody else*". He fought to get him back and the fighting paid off. In itself the extensive account Harry gives of Ben's seven years in care demonstrates a long struggle to maintain the family links and connections, and to get Ben back, illustrated by the following: "*I just thought, do what you've got to do and I'll do what I've got to do. And I put up the fight and I never gave up fighting. And in the*

*end they just said 'Right we're thinking about letting him come back, would you be willing to have him back?' And I said 'That's a stupid question isn't it? So I gave everything up and concentrated on getting him back' . He relates disputes with the neighbour and the council which give an indication of what he is going through currently. He also has a long standing struggle with the children's mother undermining him with Ben. Finally there is the ongoing battle with the Social Services: "I've been led up a garden path a few times ..... they've got the power and everything to do this, to treat you like crap"*

Fighting – literally and metaphorically is a theme of Harry's testimony. He frequently refers to the fact that he fought to get Ben back, some actual fighting also seems to have occurred as he received an ASBO for an incident where he challenged the foster carers who were ill-treating Ben. He clearly has a long history of conflict with the authorities of all sorts, and there is a consistent thread of confrontation with the Social Services Department who according to Harry frequently threatened to stop or reduce his contact. More will be said about contact in a subsequent section. Just before the interview he had been escorted back from the Council offices by the police after an altercation there about his neighbour. Harry uses the problems with the neighbour as an illustration of how difficult life is for him, how he had to fight to get Ben back and to keep him. The world is against him, and he is fighting against the world. He says to the Council *"I'm fighting to get my child back and I keep getting crap from you lot'. It felt like a conspiracy if you know what I mean"*.

## **2. Contact and constancy**

The issue of contact is a very important one, both in reality and as a proxy for Social Services power and control. Harry refers to Social Services threatening to stop or reduce his contact. *"Every time you try to do anything you always getting threatened 'we'll stop your contact, we'll stop you seeing him'"*. Contact sessions were supervised: *"We weren't allowed to have a father and son conversation, a proper conversation like you would, it wasn't allowed"*. However, contact proved

to be an important lifeline in keeping the bond between them alive; Harry is disgusted at the children's mother who doesn't keep up contact *"And still to this day she still don't seem to be bothered about him, she makes that excuse but she even told him 'I'm not going to meet you for contact, it's boring walking around town'"*. But for Harry, contact is an important part of showing the child you care, that he's in it for the long haul. *"If you don't show that child that you're fighting for them while they're in care why should they come and look for you?"* The other important way the bond was maintained was through unofficial contact. Harry used to *"send someone"* to collect Ben from the children's home (*"I wasn't supposed to"*) and Ben would run away from the abusive carers to Harry's house. This was where he (Ben) was apparently put in handcuffs and returned. Harry also appears to have had a local network which kept him informed about what was happening in the foster home. This parallel, 'underground' system of contact had an important role in keeping the bond between Harry and Ben alive. It was a means of demonstrating constancy: Harry as the parent was always there for the child. The fact that it was also a battle with Social Services may have reinforced the importance of it – they were together against the world.

### **3. Attachment and bonding**

Harry in his testimony demonstrated a good understanding of attachment, and expressed very powerfully the feelings of love and loss associated with his child being taken into care. *"Nobody can refill a hole that's been put in your body"*. The attachment Ben has to him is again expressed through contact issues: *"I got to a point where I said (to Social Services) 'Do what you want. Do whatever you want because it will never stop us' and then he used to run away from the carers and come to me"*. The attachment is two-way *"The only lifeline I've got and I've told everybody is Ben. I lost that lifeline seven years ago and now I've got him back I ain't going to lose him again for nobody"*. Harry also recognises the effect parental actions can have on a child: thinking about the children's mother not going for contact and getting drunk: *"She thinks more about that than she did him. And he's*

*feeling, 'why is she doing this? Why is she punishing me?'* He is also aware that because of the number of moves he had during his life in care Ben was unable to settle and form attachments, therefore he developed an anger problem: *"And the feeling he got when he told me that nobody loved him and he couldn't love anybody back because he was never there long enough to love anybody".* (It's not quite clear when this occurred, presumably before he went to the long term placement). The strength of the blood tie for Harry is expressed eloquently in an argument with a social worker: *"At the end of the day he's my flesh and blood, he's got my blood running through his body and I do whatever I want with my son.' 'But at the moment he's in care so he's not properly yours is he?' I said 'Yes he'll always be mine. It doesn't matter what you do with him he'll always be mine and he will come back to me one day'."*

Harry also demonstrates his attachment to the family as a whole through his efforts to help the children's mother stop drinking, though he was unsuccessful in this.

#### **4. Change – possible and actual; belief and self –belief; change in the behaviour of others; change in the way people see him**

The theme of change is firstly that anybody can change if they have the motivation: *"But it's like I said, .....everybody says they can't change, they can't change, this can't change, he won't change, they'll never change, if somebody gives them the chance to prove that they can, it can happen".* This is particularly powerfully expressed through the repetition of 'change'. Secondly that sometimes things come together to make it seem possible. For Harry, there was an incident when he was stabbed by the children's mother and was admitted to intensive care; but seemingly around the same time it was suggested to him that Ben might be able to come home. *"This is when they turned around and said 'Right Harry you've got to change your life around altogether or else you'll never get him back' and that's when I said 'This is it' I came out of the hospital after being seen to and I chucked everything out of my flat and started afresh and that was it".*

Thirdly, that belief in him enabled him to change, although he is reluctant to admit this. The actions of the team, who are distinguished from other aspects of Social Services as “brilliant”, demonstrated they had confidence in him, although there was extensive monitoring. However, this is also a change: Social Services generally had a view of Harry derived from several years of conflict and antagonism. Suddenly, Social Services (Team A is part of Social Services, though he is reluctant to acknowledge this) was able to regard Harry in a different light and say, ‘Might this be possible? What needs to be done to make this happen?’

Harry has actively changed to get Ben back, but it has also changed him. He reflects on his life but also doesn’t want to remember the difficult times. In the narrative there are frequent references to ‘them’ (‘the authorities’ in various guises) how he was led astray, not given the right information, not supported or believed; there is an eloquent passage where he describes he feels about Social Services: *“And then at the end of the day it's all confused because they've got the power and everything to do this, to treat you like crap. They look down at you. They make you paranoid. Not yourself, the Social Services make you paranoid. Because you don't know how, every time Social Services come out, oh we better do this, oh we better do that, oh we better move this, they make you paranoid”*.

But the fact that the team supported the removal of the Care Order and it actually went through quite quickly is a revelation to him. “We went to court and got the care order lifted, no problems no arguments”. There is a real sense of amazement and achievement.

## **5. The meaning of permanence**

There are several elements to permanence for Harry. Most importantly, *“Once that Care Order was taken off I knew then that he was mine. Nobody could tell me what to do with him; nobody could take him away from me”*. Ben was ‘his’, the family is reunited and his role as parent confirmed. This sense of belonging is very powerful. Secondly, there is the resumption of normal family life, claiming and

belonging. The family has to be reconstructed- Harry and Ben argue (in the interview) about daily tasks- and Harry has to rebuild his role as a parent. He does this by reflecting on how parents should behave (they shouldn't beat their children), and how he himself behaves. Not only does he help Ben in getting a job at the kebab shop, he also has to act as a father by supporting Ben in his career choice to join the police, a very difficult thing to accept, challenging his world view of 'them and us'. Finally, Harry explains what he thinks permanence should be for a child in care – they should be treated equally, the foster parents shouldn't put their own children first: *"If you're adopting or you're looking after somebody's child... they should be treated like yours"*. Finally, for Harry, permanence is in the birth family: *"Everything is because your kids will come back to you. At the end of the day it doesn't matter who they go to, they always want their proper mum and dad. It's that bond; it's that thing that brings them to you"*.



## APPENDIX FIVE

### **Permanence research – Participant Information sheet for carers/parents and social workers**

My name is Jo Ward and I am working with the [town] Team A to carry out a research project about how we achieve permanence for children in care, and how Team A can make a difference. Your child/the child you have been working with is being invited to take part because he/she is permanently placed through Team A.

I am aiming to interview up to 5 children and their carers and social workers about their experience of achieving permanence – how you got to where you are now, your thoughts and feelings about the process and how you see the future.

#### Context

Permanence for children in care is a controversial area. It very often means adoption, but for many children adoption is not appropriate, and the courts are currently expressing opposition to the wide –spread use of adoption, though the Government is in favour of expanding it. Other ways of giving a child a secure upbringing are being developed, including Special Guardianship and returning a child home. The explicit aim of the team to promote exit from care is unusual and this research will give insight into how and why it works, by focussing on the perspective of the children and the adults looking after them.

#### The study

The aim of the study is to explore what children understand about permanence and where they live, so we would like to talk to your child. Very little research has been done which includes children’s views. I would also like to interview parents, carers and social workers. For parents/carers – this can be on the same visit, or I can come at a different time, at your convenience.

Participation in this study is voluntary and you or the child can withdraw at any time if he/she is uncomfortable, without giving any explanation.

This study forms part of my doctorate. I used to work with children when I was a social worker, and will use child friendly techniques and play in my conversations with the children.

#### Confidentiality and security

The interviews will be recorded, transcribed and anonymised by having a code number attached and kept in a secure password protected computer file at Nottingham Trent University. A report will be provided for [Town X]-Council – all names will be anonymised within the report.

The information given by the child in the interview will not be passed to you the parent/ carer or the social worker unless there are over-riding safeguarding concerns.

Please don't hesitate to contact me if you need more information, or [team manager] at Team A [email address]

Jo Ward, Nottingham Trent University; [Jo.ward@ntu.ac.uk](mailto:Jo.ward@ntu.ac.uk); mob XXXXX XXXXXX

August 2015

**Consent form**

I have read the information and I agree to be interviewed for the permanence study.

I understand I can withdraw from the interview at any time.

If I decide that my information should not be used in the study, I can ask for it to be withdrawn, as long as this is done before 16<sup>th</sup> December 2015.

Signed

Name of child

Date

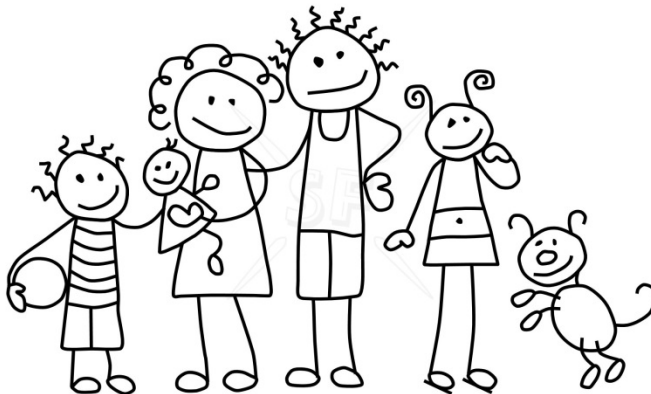
## APPENDIX SIX

### Permanence research – Participant Information sheet for young people

My name is Jo Ward and I am a lecturer at Nottingham Trent University. I am working with the [Town X] Council to find about children who have been in care, and what sort of family they live in. I'm asking if you will take part because your placement has been made permanent through Team A.

#### Context

This research will give help us understand what permanence means to children and young people. Permanence is quite a hard word to understand but it means that for children like you who used to be in care, now you can stay where you're living – with the same people and with a legal order which means you can stay there.



## The study

The aim of the study is to explore what children understand about permanence and where they live, so I would like to talk to you about this. This is important because not many people have asked what children think about permanence.

It's up to you whether you take part. You can stop at any time – you don't need to give any explanation.

I will visit you at home and we will do some activities which I hope will be fun and which will help us talk about things which are important to you.



## Confidentiality and security

When you talk to me everything we say will be between ourselves, unless anything comes out which might hurt people, either you or someone else. If that happens I'll discuss with you what we do with

the information. I won't say anything about what we talk about to your parents, carers or social worker.

All the interviews will be recorded, and I might take some photographs of the work we do together.

This research is part of a project I am doing and I will be writing about it and I will also write a short report for [Town X] Council – nobody's names will be in the report.

If you have any questions you or your mum/dad or carer can phone or email me.

I hope you will agree to take part in my research and I hope to see you soon.

Jo Ward, Nottingham Trent University

[Jo.ward@ntu.ac.uk](mailto:Jo.ward@ntu.ac.uk);

Mob XXXX XXXXXXXX





**Consent form**

I agree to be in the permanence study.

I understand I can stop the interview at any time.

If I change my mind, I can ask for the interview to be taken out, up until 30<sup>th</sup> November 2015.

Signed

Name of child

Date

## References

- Bandura, A. (1977) *"Self – efficacy: the exercise of control"*, New York: W.H. Freeman
- Bandura, A. (1995) "The exercise of personal and collective efficacy in in changing societies", Chapter 1 in Bandura, A. *"Self-efficacy in changing societies"*, Cambridge: Cambridge University Press
- Banks, S. (2012) *"Ethics and Values in Social Work"*, 4<sup>th</sup> edn, London: Palgrave
- Barber, D. and Delfabbro, P. (2005) "Children's adjustment to long term foster care" *Children and Youth Services Review*, Vol 27(3) pp 329-340
- Barth, R. and Berry, M. (1988) "Adoption and disruption: rates, risks and responses", New York: Aldine Transaction Publishers
- Beckett, C., Pinchen, I. and McKeigue, B. (2014) "Permanence and 'permanence': outcomes of family placements", *British Journal of Social Work*, Vol 44 (5) pp 1162-1179
- Beckett, C. (2003) "The language of the siege; military metaphors in the spoken language of social work", *British Journal of Social Work*, Vol 33 (5) pp 625-639
- Biehal, N. (2007) "Reuniting children with their families: reconsidering the evidence on timing, contact and outcomes", *British Journal of Social Work*, Vol 37 (5) pp 807-823
- Biehal, N. (2010) *"Belonging and permanence"*, London: British Agencies for Adoption and Fostering
- Biehal, N. (2014) "A sense of belonging – the meaning of family and home in long term foster care", *British Journal of Social Work*, Vol 44 (4) pp 955-971



Biehal, N., Sinclair, I., Wade J. (2015) "Reunifying abused and neglected children – decision making and outcomes", *Child Abuse and Neglect* online <http://www.sciencedirect.com/science/article/pii/S0145213415001520> accessed 25th November 2015

Boddy, J. (2013) "Understanding permanence for looked after children: a review of research for the Care Inquiry", The Care inquiry, <http://sro.sussex.ac.uk/44711/> accessed 12<sup>th</sup> November 2015

Bowlby, J. (1969/1999), "Attachment. Attachment and loss, volume 1", 2<sup>nd</sup> edn, New York: Basic Books

Bowlby, J. (1973) "Separation: anxiety and anger. Attachment and loss, volume 2", London: Hogarth Press

Bowlby, J. (1980) "Loss: sadness and depression. Attachment and loss, volume 3", London: Hogarth Press

Bowyer, S., Wilkinson, J., Tapsfield, R., Gadsby Waters, J., Horrick Ranger, H. (2015) "Special Guardianship: qualitative case file analysis", London: Department for Education

Brinkmann, K. and Kvale, S. (2015) "InterViews; Learning the craft of qualitative research interviewing", 3<sup>rd</sup> edn Thousand Oaks/London: Sage

Broadhurst, K. and Pendleton, T. (2007) "Revisiting children 'home on trial' in the context of current concerns about the costs and effectiveness of the looked-after children system: findings from an exploratory study", *Child and Family Social Work, Vol 12 (4) pp 380-389*

Brown, R. and Sen, L. (2014) "Improving outcomes for Looked After children – a critical analysis of kinship care", *Practice, Vol 26, 3 pp 161-180*

Bullock, R. Courtney, M., Parker, R., Sinclair, I. and Thoburn, J. (2006) "Can the corporate state parent?" *Children and Youth Services Review*, Vol 28, 11 pp 1344 - 1358

Butler, I. and Drakeford, M. (2012) "Social Work on Trial: The Colwell Inquiry and the State of Welfare", Bristol: Polity Press

Cassidy, J (1999) "The nature of a child's ties", Chapter 1 in Cassidy, J. and Shaver, P (1999) "Handbook of Attachment: Theory, Research and Clinical Applications", London: Guilford Press

Charmaz, K. (2006) "Constructing grounded theory: A practical guide through qualitative analysis", London/Thousand Oaks: Sage

Connell, C., Vanderploeg, J., Katz, K. Caron, C. Saunders, L. Tebes, J. (2009) "Maltreatment following reunification: predictors of subsequent Child Protective Services contact after child's return home", *Child Abuse and Neglect*, vol 33(4) pp 218 -228

Creswell, J. (2014) "Research design: qualitative, quantitative and mixed methods approaches ", Thousand Oaks, Ca: Sage

Delfabbro, P., Fernandez, E., McCormick, J., Ketter, L. (2015)" An analysis of reunification from out of home care in three Australian states", *Child Indicators Research Vol 8 (2) pp359 -373*

Department for Education (2011) *Family and Friends Care: Statutory Guidance for Local Authorities*, London, D f

E <http://webarchive.nationalarchives.gov.uk/20130401151715/http://www.education.gov.uk/publications/eOrderingDownload/Family%20and%20Friends%20Care.pdf>

accessed 14<sup>th</sup> December 2016

Department for Education (2015) "Children Looked After in England including Adoption 2014 -15" <https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2014-to-2015> accessed 9<sup>th</sup> May 2016

Department of Health (1998a) Local Authority circular 98(20) "Adoption: achieving the right Balance", [http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/@dh/@en/documents/digitalasset/dh\\_4011200.pdf](http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4011200.pdf) accessed 8<sup>th</sup> March 2014

Department of Health "Quality Protects" (1998b) [http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/LocalAuthorityCirculars/AllLocalAuthority/DH\\_4004393](http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/LocalAuthorityCirculars/AllLocalAuthority/DH_4004393) accessed 19<sup>th</sup> May 2016

Dickens, J., Howell, D., Thoburn, J. and Schofield, G. (2007) "Children starting to be looked after by local authorities in England: an analysis of inter authority variation and case centred decision making", *British Journal of Social Work*, Vol 37 (4) pp 597 -617.

Dixon, J., Biehal, N., Green, J., Sinclair, I., Kay, C. and Parry, E. (2014) "Trials and tribulations: challenges and prospects for randomised control trials on social work with children", *British Journal of Social Work*, Vol 44 (6) pp 1563 -1581

Dominelli, L. and Holloway, M. (2008) "Ethics and governance in social work research in the UK", *British Journal of Social Work*, Vol 38 (5) pp 1009 - 1024

Downie, J., Hay, D., Horner, B., Wichman, H. and Hislop, A. (2010) "Children living with their grandparents – resilience and well-being", *International Journal of Social Welfare*, Vol 19 (1) pp 8 -22.

Dozier, M and Lindheim O 2006 “This is my child: differences among foster parents in commitment to their young children”, *Child Maltreatment Vol 11 (4)* pp 338 -45

Economic and Social Research Council (2015), “*Framework for research ethics*” <http://www.esrc.ac.uk/funding/guidance-for-applicants/research-ethics/our-core-principles/> accessed 14<sup>th</sup> December 2016

Elliott, R., Fischer, C.T. and Rennie, D.L.(1999) “Evolving guidelines for publication of qualitative research studies in psychology and related fields”, *British Journal of Clinical Psychology, Vol 38 pp 215-229*

Fargas Malet, M., McSherry, D., Larkin, E., Kelly, G. Robinson, C. and Schubotz, D. (2010) “Young children returning home from care: the birth parents perspective”, *Child and Family Social Work, Vol 15 (1) pp 77 -86*

Fargas Malet, M., McSherry, D., Larkin, E., and Robinson, C. (2010a) “Research with children: methodological issues and innovative techniques”, *Journal of Early Childhood Research, Vol 8(2) pp 175–192*

Fargas Malet, M., McSherry, D., Pinkerton, J., and Kelly, G (2014) “*At home in care – children living with birth parents on a care order*”, Queens University Belfast and the HSC Public Health Agency Research and Development Division, Northern Ireland.

Farmer, E. (1996) “Family reunification with high risk children –lessons from research” *Children and Youth Services Review, Vol 18 (4) pp 403-424*

Farmer, E. (2014) “Improving reunification practice: pathways home, progress and outcomes for children returning from care to their parents”, *British Journal of Social Work, Vol 44(2) pp 348 - 366*

Farmer, E. , Sturgess, W., O'Neill, T. and Wijedasa, D. (2008) *“Reunification of Looked After children with their parents: patterns, interventions and outcomes”*, Report to the Department of Children, Schools and Families, University of Bristol.

Farmer, E. Sturgess, W. and O'Neill, T. (2011) *“Achieving successful returns from care – what makes reunification work?”* London, BAAF.

Farmer, E. and Wijedasa, D. (2013) *“The reunification of Looked After children with their parents – what contributes to return stability?”* *British Journal of Social Work, Vol 43(8) pp 1611 – 1629*

Farmer, E., Selwyn, J. and Meakings, S. (2013) *“Other children say you’re not normal because you don’t live with your parents” – children’s views of living with informal kinship carers”*, *Child and Family Social Work, Vol 18 pp 25 -34*

Finch, J. (2007) *“Displaying families”*, *Sociology Vol 41(1) pp 65 -81*

Fletcher, B. (2006) *“The journey home”*, London: Who Cares Trust

Forrester, D., McCambridge, J., Waissbein, C. and Rollnick, S. (2008) *“How do child and family social workers talk to parents about child welfare concerns?”* *Child Abuse Review Vol 17 (1) pp 23-35*

Forrester, D., Westlake, D. and Glynn, G. (2012) *“Parental resistance and social work skills: towards a theory of motivational social work”*, *Child and Family Social Work, Vol 17 pp118-12*

Fox – Harding, L. (1997) *“Perspectives in child care policy”* 2<sup>nd</sup> edn, London: Longman

Golding, S. (2007) *“Nurturing attachments: supporting children who are fostered or adopted”*, London: Jessica Kingsley

Holland, S. (2010) *“Looked after children and the ethic of care”*, *British Journal of Social Work, Vol 40 (6), pp 1664 – 1680*

Holland, S. and Crowley, A. (2013) "Looked after children and their birth families: using sociology to explore changing relationships, hidden histories and nomadic childhoods", *Child and Family Social Work, Vol 18 pp 57 -66*

Hollin G. and Larkin, M. (2011) "The language and policy of care and parenting: understanding the uncertainty about key players' roles in foster care provision", *Children and Youth Services Review, Vol 33 (11) pp 2198 -2206*

Home Office (1972) Report of the Departmental Committee on the Adoption of Children, London: HMSO

House of Commons Second Report from the Social Services Committee Session 1983 -1984 *Children in Care Vol 1 (1984)* House of Commons Parliamentary Papers online

<http://parlipapers.proquest.com/parlipapers/result/pqpresultpage?accountid=14693&groupid=95592&pgId=c3d423c2-258d-4464-8767-ad4a143bcd14&rsId=15863986CDO> accessed 14<sup>th</sup> December 2016

Hughes, D. A. (2006) "*Building the bonds of attachment: awakening love in deeply troubled children*", Lanham: Jason Aronson Inc.

Hunt J and Waterhouse, S. (2012) "*Understanding family and friends care; the relationship between need, support and legal status*", London: Family Rights Group <http://www.frg.org.uk/understanding-family-and-friends-care-studies> accessed 21<sup>st</sup> March 2016

Jack, G. (2010) "Place matters: the significance of place attachments for children's wellbeing", *British Journal of Social Work, Vol 40 (3) pp 755-771*

Jack, G. (2015) "'I may not know who I am, but I know where I am from': the meaning of place in social work with children and families", *Child and Family Social Work, Vol 20 (4) pp 415- 423*

Jones, C. and Hackett, S. (2011) "The role of 'family practices' and 'displays of family' in the creation of adoptive kinship", *British Journal of Social Work* Vol 44 (8) pp 2182 - 2199

Jump, P. (2013) "Ethics rethink for social sciences", Times Higher Educational Supplement March 14<sup>th</sup> 2013

<https://www.timeshighereducation.com/news/ethics-rethink-for-social-sciences/2002499.article> accessed 9th April 2016

Keddell, E. (2011) "Going home-managing risk through relationship in returning children from foster care to families of origin" *Qualitative Social Work*, Vol 11 (6) pp 604-620.

Kettle, M. (2014) "Reflecting on child protection- the professional doctorate journey", *Higher Education Skills and Work Base Learning*, Vol 4 (2) pp 184 -195

Larkin, M., Watts, S. and Clifton, E. (2006) "Giving voice and making sense in IPA", *Qualitative Research in Psychology*, Vol 3 (2) pp 102-120

Lee, R. and Whiting, J.B. (2007) "Foster children's expressions of ambiguous loss", *The American Journal of Family Therapy*, Vol 35 (5) pp 417 -428

Lefevre, M. (2008) "Communicating and engaging with children and young people in care through play and the creative arts", Chapter 8 in Luckock, B, and Lefevre, M. (2008) "*Direct work: social work with children and young people in care*", London: BAAF

Lutman, E. and Farmer, E. (2013) "What contributes to outcomes for neglected children who are reunified with their parents? Findings from a five year follow up study", *British Journal of Social Work*, Vol 43 (3) pp 559-578

McGregor, C. (2015) "Social work as a resource for the future: a response to 'The best of times, the worst of times': social work and its moment", *British Journal of Social Work*, Vol 45 (5) pp 1630-1644

McSherry, D., Fargas Malet, M., Weatherall, K. (2013) *“Comparing long term placements for young children in care: the care pathways and outcomes study Northern Ireland”*, London, BAAF.

Memarnia, N. , Nolte, L. Norris, C. and Harborne, A. (2015) *“‘It felt like it was night all the time’: listening to the experiences of birth mothers whose children have been taken into care or adopted”* *Adoption and Fostering, Vol 39 (4) pp 303-317*

Morgan, D. (2011) *“Rethinking Family Practices”*, Basingstoke: Palgrave Macmillan

Morgan, R. (2011) *“Children on the edge of care - a report of children’s views”*, OFSTED <http://dera.ioe.ac.uk/3012/> accessed 8<sup>th</sup> February 2016

Moustakas, C. (1994) *“Phenomenological research methods”*, Thousand Oaks: Sage

Mulcahy, G., Badger, J., Wright, H. and Erskine, C. (2014) *“What happened next? A study of outcomes for maltreated children following care proceedings”*, *Adoption and Fostering, Vol 38 (4) pp 314 -330*

Munford, R., and Sanders, J. (2015) *“Negotiating and constructing identity - social work with young people who experience adversity”* *British Journal of Social Work, Vol 45 (5) pp 1564 -1580*

Murphy, E. and Fairtlough, A. (2015) *“The successful reunification of abused and neglected Looked After children with their families: a case-file audit”*, *British Journal of Social Work, Vol 45 (8) pp 2261 -2282*

Music, G. (2011) *“Nurturing natures: attachment and children’s emotional, socio cultural and brain development”*, Hove: Psychology Press



Neil, E. (2009) "Post adoption contact and openness in adoptive parents' minds: consequences for children's development", *British Journal of Social Work Vol 39 (1)*, pp 5 -23

Neil, E. (2012) "Making sense of adoption: integration and differentiation from the perspective of adopted children in middle childhood", *Children and Youth Services Review, Vol 34 (2) pp 409-416*

Neil, E. (2013) "The mental distress of the birth relatives of adopted children 'disease' or 'unease': findings from a UK study", *Health and Social Care in the Community, Vol 21 (2) pp 191-199.*

O'Connor, L., Forrester, D., Holland, S. and Williams, A. (2014) "Perspectives on children's experiences in families with parental substance misuse and child protection interventions", *Children and Youth Services Review, Vol 38 pp 66 -74*

Oke, N., Rostill Brookes, H. and Larkin, M. (2013) "Against the odds: foster carers perceptions of family, commitment and belonging in successful placements", *Clinical Child Psychology and Psychiatry, Vol 18 (1) pp 17-24*

Oxford English

Dictionary <http://www.oxforddictionaries.com/definition/english/phenomenology> accessed 12th May 2016

Parton, N. (1999) "Reconfiguring child welfare practices: risk, advanced liberalism and the government of freedom", Chap 5 in Chambon, A., Irving, A. and Epstein, L., (1999) "*Reading Foucault for Social Work*", New York, Columbia University Press.

Performance and Innovation Unit (2000) "Prime Ministers Review: Adoption", The Cabinet Office, <http://dera.ioe.ac.uk/8892/1/adoption.pdf> accessed 12<sup>th</sup> May 2014

Pinkerton, J. (2008) "States of care leaving – towards international exchange as a global resource", Chapter 18 in Stein, M, and Munro, E.R. (2008) (eds) "*Young People's Transitions from Care to Adulthood*", London: Jessica Kingsley

Pinkerton J. (2011) "Constructing a global understanding of the social ecology of leaving out of home care" *Children and Youth Services Review*, Vol 33 (12) pp 2412-2416

Pinkerton, J. and Dolan, P. (2007) "Family support, social capital resilience and adolescent coping", *Child and Family Social Work*, Vol 12 (3) pp 219-228

Pollack, S. (2010) "Labelling clients 'risky' – social work and the neo liberal welfare state", *British Journal of Social Work*, Vol 40 (4) pp 1263-1278

Pringle, J., Drummond, J., McLafferty, E. and Hendry, C. (2011) "Interpretive phenomenological analysis: a discussion and critique", *Nurse Researcher*, Vol 18 (3) pp 20-24

Pringle, J., Hendry, C. and McLafferty, E. (2011) "Phenomenological approaches: challenges and choices", *Nurse Researcher*, Vol 18 (2) pp 7-18

Punch, S. (2002) "Research with children: the same or different from research with adults?" *Childhood*, Vol 9 (3) pp 321-341.

Rodham, K., Fox, F. and Doran, N. (2014) "Exploring analytical trustworthiness and the process of reaching consensus in IPA: Lost in transcription", *International Journal of Social Research Methodology*, Vol 18 (1) pp 59-71

Rowe, J. and Lambert, L. (1973) "Children Who Wait", London: Association of British Adoption Agencies

Ruch, G. (2005) "Relationship based practice and reflective practice: holistic approaches to contemporary child care social work", *Child and Family Social Work*, Vol 10(2) pp 111-123

Ruch, G. (2014) "Helping children is a human process: researching the challenges social workers face in communication with children", *British Journal of Social Work*, Vol 44 (8) pp 2145-2162

Ryan, T and Walker, R. (2007) "*Life Story Work: a practical guide to helping children understand their past*", London: BAAF

Schofield G. and Beek M. (2000) "*Growing up in foster care*", London: BAAF

Schofield G. and Beek M. (2004), "*Providing a secure base in long term foster care*", London: BAAF

Schofield G. and Beek M. (2006) "*The attachment handbook for foster care and adoption*", London: BAAF

Schofield G. and Beek M. (2009) "Growing up in foster care: providing a secure base through adolescence", *Child and Family Social Work*, Vol 14 (3) pp 255-266

Schofield, G. and Stephenson, O. (2009) "Contact and relationships between fostered children and their birth families", Chapter 10 in Schofield, G. and Simmonds, J. (eds) (2009) "*The Child Placement Handbook*", London: BAAF

Selwyn, J., Quinton, D., Harris, P., Wijedasa, D., Nawaz, S. and Wood, M. (2010) "*Pathways to permanence for black, Asian and mixed ethnicity children*", London: BAAF

Silverman, D. (1993) "*Interpreting qualitative data: methods for analysing talk, text and interaction*", London/Thousand Oaks: Sage

Sinclair, I. , Baker, C., Wilson, K. and Gibbs, I. (2005) "*Foster children: where they go and how they get on*", London: Jessica Kingsley

Sinclair I. , Baker, C., Lee, J. and Gibbs, I. (2007) "*The pursuit of permanence: a study of the English child care system*", London: Jessica Kingsley.

- Smart, C. (2007) *"Personal Life"*. Cambridge, Polity.
- Smeeton, J. and Boxall, K. (2011) "Birth parents perceptions of professional practice in child care and adoption proceedings: implications for practice" *Child and Family Social Work, Vol 16(4) pp 444-453*
- Smith, J., Flowers P. and Larkin, M. (2009) *"Interpretative Phenomenological Analysis: theory, method and research"*, London: Sage
- Sprinz, L. (2014) "Adoption in 2014", *Family Law, Vol 44(3) pp 257-392*
- Stein, M. (2008) "Transitions from care to adulthood: messages from research for policy and practice" chapter 21 in Stein, M, and Munro, E.R. (eds) (2008) *"Young people's transitions from care to adulthood"* London: Jessica Kingsley
- Stein, M. (2009) "Going home", Chapter 3 in Stein M., and Jones, H. *"Quality matters in children's services: messages from research"*, London: Jessica Kingsley Publishers
- Stringer, B. (2009) *"Communicating through play: techniques for assessing and preparing children for adoption"*, London: BAAF
- Thoburn, J., Robinson, J. and Anderson, B. (2012) *"Returning children home from public care"*. SCIE Research Review 42, London: SCIE
- Trevithick, P. (2012) *"Social work skills and knowledge: a practice handbook"*, 3<sup>rd</sup> edn, Maidenhead: Open University Press
- Triseliotis, J. (2010) "Contact between looked after children and their birth parents – a level playing field?" *Adoption and Fostering, Vol 34 (3) pp 59-66*
- Ungar, M. (2012) "Social ecologies and their contribution to resilience", in Ungar, M. (Ed) (2012) *"The social ecology of resilience: a handbook of theory and practice"*, New York: Springer, pp 13 -31.

Van Manen, M. (2014) *“Phenomenology of practice – meaning giving methods in phenomenological research and writing”*, Walnut Street, Ca: Left Coast Press

Vicary, S., Young, A. and Hicks, S. (2016) “A reflective journal as learning process and contribution to quality and validity in interpretative phenomenological analysis”, *Qualitative Social Work online February 2016* <http://qsw.sagepub.com/content/early/2016/02/28/1473325016635244.full.pdf+html> accessed 3<sup>rd</sup> May 2016

Wade, J. , Biehal, N. Farrelly, N. and Sinclair, I. (2010) *“Maltreated children in the Looked After system – a comparison of outcomes for those who go home and those who do not”* D f E Research Brief DFE – RBX – 10-06 <https://www.gov.uk/government/publications/maltreated-children-in-the-looked-after-system-a-comparison-of-outcomes-for-those-who-go-home-and-those-who-do-not> accessed 17<sup>th</sup> March 2016

Wade, J , Biehal, N. Farrelly, N. and Sinclair, I. (2011) *“Caring for abused and neglected children: making the right decisions for reunification or long term care”*, London: Jessica Kingsley

Wade, J., Sinclair, I. Stuttgart, L. and Simmonds, J. (2014) *“Investigating Special Guardianship”*, <https://www.gov.uk/government/publications/investigating-special-guardianship> accessed 12<sup>th</sup> November 2015

Ward, H. (2011) “Continuities and discontinuities: issues concerning the establishment of a persistent sense of self among care leavers”, *Children and Youth Services Review, Vol 33 (12) pp 2512-2518*

Ward, H. and Skuse, T. (2001) “Performance targets and stability of placements for children long looked after away from home”, *Children and Society, Vol 15(5) pp 333-346*

Ward, J. and Smeeton, J. (2016) "The end of non-consensual adoption? Promoting the well-being of children in care", *Practice*, 31<sup>st</sup> March 2016 online <http://www.tandfonline.com/doi/pdf/10.1080/09503153.2016.1164131>

Watson, J. (2011) "Resistance is futile? Exploring the potential of motivational interviewing", *Journal of Social Work Practice*, Vol 25 (4) pp 465 -479

Wells, S. (1993) "Post traumatic stress disorder in birth mothers", *Adoption and Fostering* Vol 17 (2) pp 30-32

Williamson, H. (2005) "Young people and social inclusion – an overview of policy and practice" in Barry, M. (ed) (2005) "*Youth policy and social inclusion: critical debates with young people*", London: Routledge

Wilson, S, Cunningham-Burley, S., Bancroft, A. and Backett-Milburn, K. (2012) "The consequences of love: young people and family practices in difficult circumstances", *Sociological Review*, Vol 60 (1) pp 110-128