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Linking ‘Parental’ Wellbeing with the Wellbeing of Care-Experienced University Students: Analysing Relevance and Interconnections through the Lens of ‘Lived Lives’

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Abstract

This article examines wellbeing in relation to a group of care-experienced university students in a modern English university who we conducted biographical narrative interviews with. Initially wellbeing as a concept is critically analysed from different disciplinary and historical perspectives, with a closer focus on how parental and child wellbeing, the interactions between them and their relationship to wellbeing in young adulthood, might be understood and theorised. Despite the allure of such an apparently positive and uplifting concept, the definitional ambiguity and indeterminacy surrounding wellbeing, as well as problems in deciding how it should be understood and measured, limited its applicability to our participants. Our research findings, furthermore, illuminated wellbeing as a multi layered, multiply interpreted, dynamic and often elusive concept. The data also revealed that the majority of these young people’s lives, both with biological kin and in relation to the care system, were devoid of any understanding of wellbeing when they were children. Even as young adult students their narratives often revolved more around survival and ‘getting by’ than any conception of wellbeing. Despite an evolving array of seemingly progressive and child centred legislation and policy, implemented in England over the last three decades, the state acting in loco parentis seemed unable to provide positive parenting and generate any form of wellbeing for most of the young people we interviewed. Focusing on life course trajectories and perspectives we found that the key positives these young people identified in their lives, were associated not with the care system as such but with the exceptional support, empathy and unconditional positive regard some foster or adoptive parents or intimate partners offered. Although there was some evidence to support the previously identified relationship between permanence, stability and wellbeing, some of our participants talked about how abusive and damaging long term placements they had been in were, identifying

people they had known or lived with only for a short period of time as parents or family. Our theorisation around the concept of wellbeing in relation to this research, therefore, exposes wellbeing as a problematic concept both generally and in relation to looked after children and care-experienced adults. We consequently suggest that biographical research and life course perspectives might offer productive ways of understanding the intricacies of these young adults' lives and the impact of repeated trauma, and that survey based quantitative research on wellbeing can inevitably only offer a partial and limited picture.

Keywords - out of home care, care-experienced, care leavers, life course perspectives, biographical research

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*They fuck you up, your mum and dad.
They may not mean to, but they do.
They fill you with the faults they had
And add some extra, just for you.*

(Philip Larkin, *This be the verse*, circa. 1971)

Introduction

The concept of well-being is amorphous, contested, multifaceted and multi-layered. Wellbeing is understood and operationalised differently across disciplines also having divergent meanings for practitioners, policy makers, citizens, and governments. It has relevance to cohorts, specific groups, parents, families, communities and organisations, and to cultures and societies, although it is most often applied to individuals or demographically to populations or subsets of. This article analyses the concept of wellbeing, illuminating its strengths and weaknesses. It then examines how relevant the specific concept of parental wellbeing is/has been through care-experienced young adult students' various life stages, contextualising their experiences through the lenses of biographical research and interlinked 'lived lives' (Elder, 1998; Wengraf, 2001). Extant research on the educational outcomes of care-experienced young people is slowly expanding in the UK and internationally (McNamara et al 2019; Lund and Stokes, 2020). However, the manifold, interlinking factors that affect care-experienced students' temporal educational journeys, specifically in relation to parental and child wellbeing, are largely overlooked in extant research. This paper addresses this gap, illuminating the complexity and layeredness in university students' retrospective accounts of the seemingly 'ordinary', everyday encounters with family members, peers and caregivers, which affected their own wellbeing as children and continue to affect them as young adults.

The article evaluates generic multidisciplinary research and theoretical perspectives on wellbeing, assessing their relevance for 'looked after' children (LAC) in out of home care

and care-experienced young people, drawing more specifically from extant research on these groups and from our empirical biographical study with care-experienced students in a UK university. In this paper, ‘parental wellbeing’ and its assumed counterpart, ‘child wellbeing’, are not only applied to biological parents and kin, but to the state acting in *loco parentis* to these young people. The state’s activities encompass not only their abstract yet paradoxically concrete legal duties as a corporate parent, but the processes and people through which such duties are channelled. These include the bureaucratic and procedural; for example, legislation, policy and practice initiatives, and their heterogeneous residential and spatial contexts which may incorporate bifurcated yet blurred divisions between public and private (e.g. Children’s Homes) (authors’ own). The potentially proximate and intimate relationships with foster carers, adoptive parents and social workers, people who inhabit diverse public and private locations, roles, responsibilities and remits, are also important and interconnect with state-level policies and procedures.

The structure guiding this article features an initial section which critically evaluates generic multidisciplinary literature focusing on well-being, assessing its relevance for understanding LAC and care-experienced adults, with a final subsection specifically examining parental wellbeing and its associated paradoxes. Following this, there is a brief examination of the evolution of policy and legislation pertaining to LAC and care-experienced young adults in England. This second section will briefly review and synthesise both general literature that relates to LAC and care-experienced young adults and more specific LAC-focused wellbeing literature. The third section outlines the ethics and the methodology of our study and elucidates why and how our research was conducted. Following this, we present findings relevant to wellbeing in thematic sections using selective quotes as exemplars. The conclusion brings together our analysis of past literature with our exposition of our research findings, showing in what ways our findings diverge or concur with past claims and in what ways they enable new observations with policy and practice implications.

Interrogating Wellbeing

Prior to the 1970s wellbeing was rarely mentioned in academic circles, but since the 1990s burgeoning multidisciplinary interest, including within social work and children’s social care (Roberts et al, 2016; Vincent and Jopling, 2017; Selwyn et al, 2017) has resulted in much published literature and numerous studies. Within philosophy, there are on-going debates stemming back hundreds of years, about what constitutes wellbeing, although philosophical discussion has largely been absent in policy and practice debates. As per Boniwell (2008, p. 1):

‘ ... The current definition of wellbeing came about almost accidentally ... researchers wanted to develop well-being questionnaires (because they needed to evaluate various interventions), then they derived the definition of wellbeing from these questionnaires without paying much attention to whether they captured the richness of human wellness and happiness.’

The two philosophical traditions of happiness often related to wellbeing, are *eudaimonic happiness* - concerned with virtue, purpose, meaning, the functioning of the whole person and a life well lived - and *hedonic happiness* - maximising intrinsic individual self-pleasure and

avoiding pain (Boniwell, 2008). The former is a long-term, reflexive concept with relational and community connotations. The latter concerns the individual's desires being met and instant gratification without wider meaning, the hedonic definition being the one most often drawn on in wellbeing research (Ruggeri et al, 2020). However, even if we accept the usefulness, and the easier but static and snapshot measurability of the hedonic approach, how could one possibly evaluate something as pleasurable, except in comparison with something undesired and painful? Therefore, even measurable 'hedonic happiness' is a relative and therefore variable concept. Without strife and hardship, what one person might appreciate with joy and relish, another more privileged person might accept as boring, banal, and normal. This reveals the interlinking cultural and historical dimensions of wellbeing, with some arguing that wellbeing is only relevant to affluent regions and privileged peoples in the Global North, and to individuals who do not need to expend all their time and energy just to survive and 'get by' (White, 2010).

Psychology is the other dominant discipline with respect to literature on wellbeing, although wellbeing is occasionally mentioned in respect of sociology and social development (e.g. Thornton, 2001; White, 2010; Derne, 2017) and increasingly in practice disciplines like teaching and social work (Drew and Banerjee, 2019; Lelkes et al., 2021). Psychology for the most part, although showing some interest in the concept's philosophical origins, has tended to present wellbeing in the form of subjectively felt or claimed personal characteristics. Wellbeing, like the related concepts of resilience and happiness, tends to exude positive charge and is pivotal to a strengths-based perspective. Many psychologists therefore distance themselves from the negative psychopathological concepts previously often used (White, 2010) such as 'family dysfunction' and 'learned helplessness' (Seligman, 1972), claiming negativity fuels stigma and deficit-based perspectives. Ryff's (1989) influential six component model which moves some distance away from hedonic approaches indicates psychological (subjective) wellbeing consists of self-acceptance, personal growth; purpose in life, positive relationships, environmental mastery and autonomy. Another model, the self-determination model, rather than using components to describe wellbeing, claims these are instead the characteristics needed to foster it (Ryan and Deci, 2001).

Although most literature on wellbeing emanates from philosophical and psychological disciplines, White (2010) adopts a three-dimensional social development perspective, consisting of interlinking material, relational and subjective elements. The material refers to income, housing and neighbourhood, more broadly, material standards of living which, although culturally relative, could be measured by objective external indicators. Relational wellbeing concerns the type and quality of relationships people have, not only with intimate partners and kin but other members of their wider communities. Subjective wellbeing can be measured through self-report questions about how someone feels their life is going and their mood levels, expectations and goals, with Ryff's (1989) six-point model being a good example. However, White (2010) suggests there is a danger that if material wellbeing measures do not always coincide with subjective wellbeing or are ignored, people may be denied material support, such as additional income or better environmental conditions. This concern has been levelled against other similar positive-charge psychological concepts such as resilience, which is also opaquely defined and measured. If someone is judged resilient (thriving against the odds through highly disadvantageous circumstances), then they might not be seen to need material, psychological and social supports. Conversely, because some individuals seem resilient, this could be used as a justification for stigmatising or not offering support to similar others not deemed resilient (author's own, 2008, 2016a). This suggests it is not just deficit-based perspectives but also strength-based ones that can invoke negations, stigma and othering.

There are, as this brief discussion shows, many uncertainties around wellbeing; analysing it generates more questions than resolutions. Can we agree on what wellbeing is comprised of or how to measure it? Does wellbeing need to have certain prerequisites, or even effects, to count as wellbeing? Are we interested in its constituent components or what it does and for whom, and under what conditions (its variable effects)? Is wellbeing a state, a process, or a semi-permanent state reached by a process, or all three simultaneously? Is it understood through other concepts and ideas, such as happiness or resilience that are also difficult to agree upon and define? Is there a difference between wellbeing, welfare, life satisfaction or happiness, and if so, why are they conflated in much literature (Lin, 2021).

Kahn and Juster (2002) view wellbeing as an important goal for both societies and individuals, and although conceding it has been plagued by successive problems of definition and measurement, they interchange the terms 'wellbeing' and 'quality of life'. Lin (2021, p. 1) from a philosophical perspective suggests that questions about how well life is going for particular people at specific times or even over their whole life course are judgments about '*wellbeing or equivalently welfare or quality of life.*' Conversely, a multidimensional analysis of 21 countries argues '*well-being is more than happiness and life satisfaction*', warning against using single indicators such as 'happiness' or economic proxies such as GDP (Ruggeri et al, 2020). Is wellbeing therefore a useful or feasible concept, an empty signifier, or a popular buzzword that is essentially meaningless? Are we therefore dealing with an eternally elusive concept that slips through our fingers like grains of sand, or swirling smoke rings that evanesce into nothing? Conversely, could we be witnessing the embryonic and incremental development of a complex but important future concept?

Parental Wellbeing

In respect of parental wellbeing, given the responsibilities and expectations associated with socialising children in western countries and the normative dedication, sacrifices and time involved (Musick et al, 2016) it might be assumed that parental wellbeing is better judged from the eudaimonic rather than the hedonic dimension. However, most studies measure the immediate hedonic dimension, calculating stress levels and psychopathological symptomatology (Dolan and Metcalfe, 2012; Blanco Castro et al, 2020). These studies find that often parents have more negative results than non-parents, a phenomenon often referred to as 'the parenting paradox' or 'the parental wellbeing [or] happiness gap' (Stanca, 2016). However, one study interestingly showed parents experience both more negative and more positive symptoms than non-parents although it was not clear to what extent this study incorporated a eudaimonic understanding (Negraia and Augustine, 2020). Significantly, some studies show that parental psychosocial wellbeing is intrinsically related to children's social competence (Panula et al., 2020) and that both parental and child wellbeing may also be impacted by time and economic constraints, often exacerbated for lone parents. However, in countries with strong welfare states, like Nordic nations, which offer significant support to all parents, parental wellbeing appears more elevated (Glass et al, 2016) although there is a mixed outcome picture with care-experienced young people (Kääriälä and Hiilamo, 2017).

That said, a parent could, however, experience wellbeing as a parent, watching their child enjoy life and develop, without doing the parenting - proxy parenting. One example might be children from affluent families who are sent to private boarding schools or brought up by paid carers. In that respect the parental wellbeing is almost completely divorced from parenting actions and child wellbeing. Do we therefore then assume there is not necessarily a

link between positive subjective wellbeing of parents, parental wellbeing, and child wellbeing?

One objective of this special issue is to ‘critically examine positive parental-wellbeing and links to the production of well-adjusted and well-functioning children and the overall societal good - [identifying] policy interventions that promote socially cohesive egalitarian parenting within a social justice framework’. Although showing what parental wellbeing is and what it is not in respect of benefitting these young people, we simultaneously show that despite increasingly progressive and apparently child-centred policy and practice initiatives for children taken into state care in England, it was not policy that produced parental wellbeing and associated child wellbeing. It was people, often exceptional, but paradoxically ordinary people; partners and substitute parents, (and not professionals) who were able to respond to these children’s emotional needs and behavioural challenges in empathic and nurturing ways. Terms like love, faith in, perseverance, unconditional positive regard and belonging, might seem too pedestrian, colloquial and unquantifiable to refer to. However, these characteristics were what parental wellbeing meant to these young adults and what improved their own subjective wellbeing.

Legislation, Policy and Research on Looked after Children (LAC) in State Care and Care-Experienced Young People

The number of children and young people in care in England in 2021 was 80850, continuing the rise in recent years. Comparable to international research, most children in the UK enter care because of serious abuse or neglect, are vulnerable and have significant emotional and mental health issues (Bazalgette et al., 2015; Luke et al, 2014) which (multiple) placement breakdowns frequently exacerbate (Wade, 2014). Care-experienced young people typically have poorer outcomes than their peers in employment, educational attainment and mental and physical health (ibid.). They are more likely to be homeless after leaving care, become parents at an early age (Rock et al., 2018) and less likely to attain a university qualification in comparison to non-care-experienced peers (Berridge, 2012). Relevant UK legislation, however, appears increasingly child-centric and progressive. It includes the 1989 Children Act where children’s needs became paramount. The Children (Leaving Care) Act 2000 made 18-year-old care leavers entitled to support until they were 21, with access to a personal adviser in their transition from care. The Children and Young Persons Act 2008 focused on ensuring children in care accessed high-quality care and services, tailored to their needs. The Children and Families Act 2014 obligated local authorities to appoint at least one person to improve these children’s educational achievement and the Children and Social Work Act (2017) inaugurated corporate parenting principles local authorities had to abide by.

All this legislation plus additional policy directives like ‘*Staying Put*’ which aimed to enable young adults to stay with their foster parents between the age of 18 and 21 (The Fostering Network, 2016), suggest that the wellbeing of LAC and care-experienced young people should therefore have improved. However, unlike Scandinavian nations with strong welfare states, England is a neo-liberal state where welfare is stigmatised, rationed and often seen as the last resort (author’s own, 2016a, 2016b). Therefore over recent years, although the claimed intentions of child care policy may seem laudable, the resources devoted have been seriously inadequate and children’s social care has been more about the protection of children at significant risk of or already subject to significant harm rather than a preventative community resource for all parents and children (author’s own, 2016a). The ‘*Staying Put*’

policy, for example, was seriously underfunded, thereby threatening its very aims of allowing young people to stay with foster parents over the age of eighteen, although doing so was positively related to them staying in education and other benefits (Action for Children, 2020).

Although less attention has been paid to the wellbeing of LAC and care-experienced young people than children in the general population, one English survey's results indicated that these children's subjective wellbeing (SWB) could be defined and measured as 'feeling good and functioning effectively at both individual and interpersonal levels' and that positive relationships with carers they could talk to and trust, as well as feeling they themselves were trusted, were very important indicators (Zhang and Selwyn, 2020). Studies from western countries have mixed findings; some involving young people transitioning out of care show initially high SWB, decreasing slowly (Courtney et al, 2011) and others showing SWB decreasing slightly after leaving care but then increasingly slightly five years later (Cashmore et al, 2007). Having a strong social network and high self-esteem is linked positively to LAC and care-experienced young people's wellbeing in most studies (Dinisman et al, 2013). However, these studies tend to use different indicators for subjective and other factors linked to wellbeing and, like much wellbeing research, adopt a hedonic understanding rather than a eudaimonic understanding, whilst often conflating happiness, life satisfaction and wellbeing. As one Danish study showed, it is important for LAC and care-experienced young people to be recognised and valued for what they can contribute to society, as well as having their needs met (Warming, 2015). A European cross comparative study of care-experienced young people also found that 'doing well' was subjectively interpreted by these young adults as having a 'do-able' 'ordinary' life. Mundane, everyday interactions and experiences of having ordinary possessions like a vacuum and a TV; having personal privacy and a home of one's own, where they were in control of cleaning, money and shopping, were therefore highly valued (Bakketeig et al., 2020). Significantly, studies further underline the complexity of care leavers' subjective discourses of wellbeing that frequently link to emotions like isolation, loneliness, and processes of coping and self-transformation (Sims-Schouten and Hayden, 2017). Subsequently, in this paper, we argue that care-experienced students we interviewed interpret wellbeing in relation to specific life circumstances, including relationships with caregivers, peers and extended family. We contend that more research is required on wellbeing discourses in respect of care-experienced students to enhance support and educational outcomes across the life course.

Wellbeing and young people's education are intrinsically linked to the UN Sustainable Development (SD) goals in the Incheon Declaration (2015), thereby illuminating the appeal and relevance of wellbeing in international policy. Comparably, the UNESCO *Strategy on Education for Health and Wellbeing* (2016) is committed to strengthening the links between education, health and wellbeing for young people globally (UNESCO, 2016, p. 5). Recently, Brady and Gilligan (2020) illuminate the connections between wellbeing and education, showing how life course perspectives offer fruitful theoretical and methodological avenues for understanding the interconnected nature of care leavers' educational journeys and how their experiences in school and university are frequently linked to relationships with parents, cares, family and peers that are temporally and socially situated. The notion of 'linked lives' is a key concept in life course research (ibid) and connotes the interdependent nature of all human (and non-human) lives (Carvalho et al 2021), thereby underlining the array of multidimensional factors that affect educational outcomes for care-experienced students both in and across time (author's own, 2019). We utilise this notion and an associated concept 'lived lives' (Wengraf 2001) to frame our analysis of wellbeing, showing how young people's memories of specific life events shape and reflect their everyday interactions and

notions of past, present and future. We argue that these concepts, which underline the labyrinthine interconnections between contexts, events and people, illuminate the ‘layeredness’ of young people’s notions of support and trust in university services.

Methodology

This small-scale study involved interviewing ten care-experienced university students and ten members of support staff based in different departments in one modern university in England between 2018 and 2020. The study was conducted in partnership with student services in the university under study, with the aim of garnering a deeper understanding of students’ experiences accessing and using support services (e.g. counselling, grants, and other financial supports) to improve services provision. We engaged with a support staff member who worked directly with care-experienced students in the university who contacted students on our behalf with details of the study, requesting their participation in the research. In turn, participants contacted this staff member directly to say if they agreed to take part or not.

Interviews with the students were biographical in nature, emphasising the multidimensionality and inherently ‘linked’ nature of every day experiences, including incidents of abuse and loss; university learning, memories of friendships and emotions. We drew on Wengraf’s (2001) concept of ‘lived lives’ to contextualise the complexity of young people’s experiences; we live our lives moment to moment, future blind, not knowing the outcome of any specific interaction or life event (*ibid.*). We applied for and received full ethical approval from our university in November 2018. Interviews were completed face-to-face from December 2018 to January 2020.

Students were encouraged to talk about their entire lives in whatever detail and for however long they wanted to, with minimal interruption, although some follow-up questions were asked. At the end of these interviews there were structured questions about what supports the students had felt they needed at university and whether any support they accessed was sufficiently helpful. The interviews with staff were semi-structured and focused on their roles and contact with care-experienced students. For the purposes of this article we focus primarily on the voices of the students, although staff members’ opinions about ‘what works’ in terms of student support are discussed in other project outputs. Staff members’ interviews were very significant for identifying confluence and convergence in staff and student opinions about the quality and accessibility of supports made available to care-experienced young people. Interviews were transcribed verbatim by a professional transcription service and were analysed using Thematic Analysis (TA) (Braun and Clarke, 2006).

There were two broad groups of care-experienced students – a smaller group who were taken into care at very young ages and had experienced a stable and happy upbringing with their adoptive and foster parents. The other larger group had been taken into care at various ages but had experienced extremely disrupted upbringings and several unsuccessful care placements. All names used here are pseudonyms and any information that would make the students identifiable has been omitted. Commensurate with the literature, we observed how age at care entry frequently impacts across the life course in domains like employment, housing, income, education and relationships (author’s own, 2019) and how ‘linked’ life events occurring both in and across time re-shape how these events are narrated. The younger the child was taken into care, if this was combined with a stable upbringing the greater their experience of wellbeing was, with the converse occurring for children taken into care at older ages who also had many placements

The following sections examine the notion of parental wellbeing and associated child and young adult wellbeing through the voices of our young adult care-experienced students. As evidenced, wellbeing is opaque, although we consider wellbeing following White (2010) to possess relational, material, and subjective elements which links to our data. The material encompasses the tangible, concrete standards of living like accommodation and income, the relational, relationships with families of origin and substitute family structures such as foster and adoptive parents and residential care workers, as well as relationships with social workers and other professionals. The subjective, focuses on the students' feelings about specific life events and subjective accounts about how well they felt their lives had gone. The first section of our findings deals with the students' early experiences within their families of origin. The second and third sections address wellbeing in the context of young people's experiences within the care system and then as university students. The fourth section focuses on the issues students deemed as important relating to parents and their wellbeing, and relationships with people they regarded as family. Drawing on the concepts of 'lived lives' (Wengraf, 2001) and 'linked lives' (Brady and Gilligan, 2020) our findings illuminate dynamic interconnections between childhood memories and participants' experiences of university learning at subsequent life stages.

Abuse and Instability with Family of Origin and an Absence of Parental Wellbeing

Parental wellbeing or the subjective positive wellbeing of their parents, separate from their children, was not evidenced in our research. Of those students who had any recollection of their family life, prior to care, significant and intractable family and individual dysfunction, involving domestic abuse, substance misuse and serious psychological, physical, and sexual abuse of their children and multifaceted neglect was the norm.

I went into care permanently when I was six, although I was in and out from when I was born. My mum was a drug addict from an early age. The drugs always came first, heroin and cocaine – and she was never very well in herself mentally. My mum had abusive boyfriends, who would seriously beat her up and were abusive to us kids. She's dead now but I have a lot of half siblings and they all got taken into care eventually, although she did manage to keep my two youngest brothers for quite a few years (Jackie, aged 25).

One boyfriend beat my mum up so badly she got mental pins and plates put in her face. I was about five. I remember calling the ambulance very clearly. We were hiding in the bedroom but I had to Sellotape over the mouths of my two little brothers, so they wouldn't scream, else he would have heard and found us (Sarah, aged 20).

I lived with my Mum, Aunty and Granddad until I was six. My mum was a prostitute and my Granddad was her pimp. She was sixteen when she got pregnant with me and my Dad was seventeen and a paying customer. But then he started sleeping with my Auntie and he wasn't even paying her and he stopped paying my Mum. He also beat up my Mum when she was pregnant with me. Later he hit me and sexually abused me but when I told my Mum she didn't believe me because she was a drug addict (Karen, aged 22).

Most students talked openly about their families and parental wellbeing and its impact on their wellbeing but others would not expand, possibly because they did not want to relive traumas or fear or stigma or shame. A male student, Michael now lives with his father, although he was in foster care at age 11 after his parent's relationship ended and neither of them were able to provide good enough parenting. Michael did not go into detail on specific memories but briefly mentioned violence, emotional turmoil and material hardship in his interview, suggesting neglect and possibly other forms of abuse were occurring.

Dad was a single parent looking after four of us and he would see to the three of them more. Because I was, in my opinion, more mature than them, and could look after myself and wash my clothes. I was left to my own devices. Although there were good times and we had nice days out, it would then suddenly flip the other way around. When it was nice, it was nice, when it wasn't, it wasn't. I went into care when I was eleven because of my emotional wellbeing. I saw my Mum regularly but one week I didn't go back to Dad because of the emotional turmoil (Michael, aged 20).

Aside from psychological and social wellbeing indicators, more objective wellbeing indicators such as existing in dire poverty, known to substantially impact child wellbeing (Duncan et al 2012), were evident in all cases. It was, however, unclear how much the neglect was linked to money being spent on illicit drugs or addictive substances and therefore due to choices being made not to buy food or clothing. There were also no proactive attempts to safely supervise these children. None of the interviews contained retrospective accounts of good parenting from childhood and were replete with references to poor parental wellbeing with regards to mental health, substance misuse and inability to cope:

I think Mum often just forgot she had kids. We were left on our own quite a lot and locked in our rooms for what seemed like days, but it could actually have been hours ... And we were very malnourished. Me and my brother once ran to Kwik Save (supermarket) and filled up loads of bags of food and took them home but the second time we did it we got caught and then taken into care (Jackie, aged 25).

The flat was really busy and very cramped. I used to sleep next to my granddad every night in a sleeping bag in the sitting room ... I was also hungry all the time and was very skinny. He nicked stuff from shops ... and my Mum would take me the shop wearing a baggy jumper and fill me up with stuff and then just walk out I used to play outside all night because my Mum didn't care if I was in or out. When my friends went home, I didn't want to, because there were people coming and going in the flat and it was scary. I felt safer on the street than in that flat ... although I did get run over by a car when I ran after a ball and nearly died (Karen, aged 21).

Significantly, these early accounts of abuse, neglect and poor parental wellbeing impacted strongly on interviewees' ability to forge relationships at university with new friends, intimate partners and their trust in university staff including counsellors, lecturers and student wellbeing employees. Narratives of trust and distrust emerged organically during interviews; feeling 'let down' by adults and developing survival strategies to offset when 'adults messed up' was a critical part of these young people's experiences. Penny, in and out of care from the

age of two, having experienced multiple placements in children's homes, foster care, respite homes and hostels, talked openly of this mistrust, it also affecting her ability to productively use the student support services available

I know I need the counselling but I can't go. I can't. I don't trust them. I've also learned to survive and I don't want to be let down again (Penny, aged 21).

Multiple Moves and Failed Placements vs. the Stability of One Placement

Importantly, our interviews showed that for most students the substitute care they received was wholly inadequate. Given their traumatic experiences with their biological parents one would hope that state care would compensate and offer the equivalent of high parental wellbeing and positive parenting. The two students who described themselves as having 'happy' and 'normal' family lives (Callum and Nina) were taken into long-term foster and adoptive families as babies and stayed with the same families since. One could therefore surmise that the level of trauma they had experienced was short lived and occurred before they could cognitively and emotionally process the events, corroborating the effects that age on care entry has on care outcomes (author's own, 2019). It is the care and devotion given to these two young people by their non-biological families and their inclusion within those families that renders their parents as manifesting and enacting parental wellbeing, but more in a eudaimonic sense than a hedonic sense.

Callum talks of both how sad yet how proud his parents were when he went to university, being the first in the family to go (the family consisted of several foster children and one biological child) illuminating the significance of emotions to processes of 'doing family' (Schofield et al., 2007).

I remember watching my mum at the train station bawling. I was the first of her children to go to university and leave the family home I remember thinking 'Oh God, this is so sad' and I was 'hold yourself together' and I was fine until they gave me a hug (Callum, aged 20).

Callum decided this first university was not for him in a few weeks and his parents told him that he could '*always come back, no matter what*' although he said social services were no longer paying them to care for him. Commensurate with extant literature, Callum's account illustrated that some LAC regard foster carers as family rather than 'as if' they were family. Biehal (2014) regards 'as if' they were family as the highest and deepest form of family identification for LAC but our work suggests in some situations this could be extended. Callum's account, for example, illustrated that some LAC regard foster carers as family rather than 'as if' they were family.

Nina was adopted from China as a baby because she was abandoned by her biological parents at three months old. She lived in an orphanage until she was nine months, before the transnational adoption. For her, at age nineteen, her adoptive parents are unequivocally her family.

I see myself very much as English. Many people ask me 'Do you think you're Chinese, do you ever want to go back?' and I'm like 'not really because they raised me as their own and I feel part of this family'. They were very open with me from a young age about being adopted. They've always treated me the same as my brother and sister and I've always treated them as my parents (Nina, aged 19).

Nina also discussed her adoption in more detail, referring to her adoptive parent as her mother throughout her narrative:

My mother was watching a documentary on Chinese orphanages filled with baby girls called 'The Dying Rooms' [connected with China's one child policy at the time]. Because there were so many girls, they're objects. If one is ill, they go into a room and they're left to die. This really resonated with my Mum and she was like I must save one of those girls, even if it's just one. She was a nursery nurse but she got an extra job to save up because it was an expensive process and it took three or four years before she went out to China and got me (Nina, aged 19).

The other interviewees were removed into care at a point where they had clear and sometimes darker memories about their lives beforehand and where abuse and neglect had occurred for much longer. They had very vivid recollections of multiple failed placements, like kinship, foster and children's home placements which were interspersed throughout their narration and affected their relationships now: *'It's hard to move in with someone when you've seen the violence. I still get nervous when I see a [kitchen] knife even though I know my boyfriend isn't violent'* (Claire, aged 21).

Although concepts of parental wellbeing are more concerned with subjective indicators, the parenting these children received, according to Baumrind's (1991) parenting styles did not coincide with what he sees as the optimal parenting style, *authoritative*, but fell between *authoritarian* (disciplinarian), *permissive* (indulgent) and *negligent* (uninvolved), and was often extremely abusive. We found multiple examples of parenting which were rigidly authoritarian. Karen, whose mother had been a sex worker had multiple intensive needs and challenging behaviours and was not served well by an authoritarian foster family who she lived with for eight years, who were violent and abusive.

The way she looked and spoke to me was like I was some sort of project. When her husband came in, he just said, 'who's this, the new one?' and I felt freaked out. The foster mother used to hit me often and wouldn't let me see my mum... They'd lock me in my room and not allow me any dinner. Sometimes I was hungry, and I'd sneak downstairs to get food and they'd put me in the corner and start shouting at me and saying I was a thief like my Mum. If I didn't eat my food, they'd make me sit at the table until bedtime. They'd send me to bed at 6pm and I feared sleeping and had insomnia and I'd never gone to bed until 3am. I'd end up crying and falling asleep on the stairs. And then I started wetting the bed and having nightmares and they made

me put everything in the washing machine. I sat there in the kitchen practically naked all night until the sheets were washed and dry (Karen, aged 22).

Susan who was in kinship care (with her aunt) for nine years before being taken into foster care describes the cataclysm of physical and emotional abuse she received from her aunt after her mother died:

I lived with my Auntie until fifteen, but they kicked my brother out when he was about eight and he was taken into care. My auntie didn't like us but felt she had to have us because of my Mum, so it was an emotionally and physically abusive household. It was hitting and dragging me across the floor and ripping my hair out. When I was fifteen she'd be smashing my head against the wall over and over. The emotional abuse just involved her picking me apart all the time like 'you're fat, you can't wear that' or 'you're not smart, you can't do that', and she always said I was too stupid to go to Uni. If their kids did something wrong, they would be sent to their rooms whereas I would be starved or locked in my room. I then got kicked out at fifteen because I was self-harming and they said I was a psychopath (Susan, aged 22).

In other cases, the foster parenting was too permissive in that there were too few boundaries. This affected further placement breakdowns when the young people moved to different placements that had more authoritarian and 'rules-based' regimes:

She spoilt me too much. She was rich and would buy me anything I wanted. I played on that because I'd never had anything before, and I manipulated her, and she had a nervous breakdown and never fostered after that (Jackie, aged 25).

She did look after me and cooked for me and bought me fluffy pyjamas and stuff for my face and showed me how to put on make-up. But she also got me put on antidepressants and I think that was because she would have got more money for me if I was disabled. She'd talk to me about sex and she allowed boys to come around the house and said I could go on the pill if I wanted and I was only fourteen (Karen, aged 22).

Lynchpins – Relationships that Matter

With the exception of Nina and Callum who had been with same parents before the age of one, all the other students experienced multiple placements. Even sometimes with short placements or those that had broken down, the relationships had been sustained and they continued to see these people as parental figures, long after the placement dissolved. With Jackie, who had endured multiple placements including children's homes, secure homes and foster placements, two foster parents were seen by her as parents. This is evident in how she emphasises 'they are my parents' twice as per below:

After the kids home I went to John and Jane. I was only with them for a year because my Mum wanted me back, which was sad. They are my parents. They are my parents. Jane is my Mum. I instantly felt a connection with them and wanted to call them mum and Dad. They loved me, and they had a lot of faith in me to change. They made me realise I didn't have to be that rough girl I'd had to be before to survive. Before they fostered me, they turned up at the children's home to take me out for the day, and I was drunk, but they took me anyway. She's [Jane] the reason I'm Uni, because she helped me get here. She told me I wasn't a victim but a survivor and that I could overcome what I'd gone through. Jane even came to this Uni interview with me. If it wasn't for them, I wouldn't be who I am ... John passed away last year a few months before my Mum died, which was very, very sad, but Jane is my Mum and she always will be, even my biological Mum knew that (Jackie, aged 20).

With Susan, after living with family relatives who were abusive for nine years and then a failed foster parent placement, she regarded her last foster parents, who initially stepped in as respite carers, as parental figures and family.

Their children have grown up and they just do respite, but I was the only one when I went. We got along well so I asked if I could come back and stay if I went to Uni, and they said yes. They decided to keep me maybe they saw potential in me. I refer to them as my family. They are not my parents, but I do look on them as parental figures and they've said they love me as a daughter, and they have kept my bedroom for me (Susan, aged 22).

There were two exceptions to this. Karen's family was her boyfriend who she had lived with for four years and who had encouraged her to come to university and supported her through university. Her boyfriend was also an important figure in helping her to move beyond terrifying experiences of several attempted rapes in a hostel.

He's the most solid person I've ever known or had. He might not wash up, but he's looked after and cared for me in a way no one has ever done before... He encouraged me to apply for this degree, and he thought it would make me happy and be able to socialise and sort my life out, even though he knew it would be difficult financially for us (Karen, aged 22).

The other exception was Claire. After being taken into care, and one failed foster parent placement, she spent ten years with the same foster parents and regarded them as her family. However, sadly she did not think she would be allowed to go back and see them and maintain regular contact with them when she finally moved out. There is an indication from the interview that she feels less important or superseded, as they had other foster children since her.

I always called them nana and granddad because they already had grandchildren when I first went there. When growing up, I saw them as proper family because I didn't have contact with my biological family. But since I've come to Uni and virtually moved out, I've seen lots of foster children come and go and I've reflected on it and I don't really see my foster family much. If was to move out formally and set up my own home, I don't think I would be allowed to go back (Claire, aged 21).

Attempts to ascertain who would not allow her to return; whether it was social services or the foster parents were not answered, so it remained unclear if Claire thought social services would prevent future contact or if the foster parents did not want to maintain contact or whether she herself no longer wanted the contact.

Parental Wellbeing and Care-Experienced Students

Out of the ten students, only the two who had been with the same family throughout, reported feeling normal, stable and happy, with Callum commenting he had received some financial and other advantages from being in care that he probably did not actually need. These two students' experiences ally with other research findings which show the earlier a child is taken into care, and the fewer and more stable placements they have, the more likely they are to thrive and flourish (Rock et al., 2018). Much of the international and European literature highlights the importance of permanence and stability (Schofield et al., 2007; Samuels, 2009) for enhanced wellbeing. However, our findings show that longevity and continuity of placement did not necessarily equate to stability, affecting positive outcomes as is often assumed; length of placement sometimes being used as an objective indicator for assessment of children's wellbeing (Bailey et al, 2002). At least three of the students had been in kinship or foster care placements for between eight and ten years yet talked of how abusive the carers had been. Conversely, some talked of only being in a placement for a short amount of time but still regarded the foster carers as their family.

When these young people discussed social workers and residential workers, although some of them mentioned kind social workers who looked out for them, cared for them and represented their views, most talked of a treadmill of social workers they hardly knew and sometimes of counsellors too. They lamented forever having to repeat their life stories and problems to different people, who would then leave and having to start again with someone else. The feeling of abandonment and being let down, that most felt, extended out from biological family, to foster and kinship care, residential carers, social workers and counsellors. Karen talked of seeing a therapist for six years with the last appointment being cancelled with no explanation.

I saw a therapist called Trish once a week for two hours for six years until I was eighteen. She was nice although she tried to make me talk about things I didn't want to talk about, like my Dad. She ended up leaving me in the end. She fucked me over which I'm still really hurt by to this day. Two days before I was due to leave to go to university, she cancelled the appointment and never spoke to me again, never. After all those years I trusted her, and that she was there to help and that was wrong (Karen, aged 22).

Although the university these students attended is well known for its extensive student support services, both the students and staff felt the support on offer for care-experienced students was insufficient. Although there was a dedicated support person for care-experienced students, there were four people who oversaw this role over the eighteen months that this study was conducted. This exacerbated the students' anxieties and replicated their childhood experiences where they continually had to tell their life stories to adults who ended up letting them down:

The people who are supposed to be helping you change all the time. That person leaves without letting you know and then you're told there is someone else, and that's really hard for a child from care who is already struggling with so many things (Jackie, aged 25).

According to support staff interviewed, many students rejected any bespoke support because of distrust and fear of being labelled and stigmatised and were fiercely independent. However, others came to the attention of student services through other avenues such as disability support, counselling or the health and wellbeing departments. Because of data protection laws around keeping personal information and different departmental remits, it was often difficult for these departments to communicate with and work with each other. Nevertheless, all the staff interviewed identified care-experienced students as a highly vulnerable group, experiencing accelerated transitions to adulthood, unlike other students who (usually) had the supports of extended family financially and emotionally and childhood friendship networks. Most staff identified this group as needing more support than they received, but at the same time recognised that support was often only sought at time of crisis and they were hard-to-reach. The students echoed this but also acknowledged that a small issue could very quickly expand into something experienced as insurmountable. The following extract comes from a conversation between one of the students and her personal tutor, who was also the researcher, and who was not aware until her third year she was a care-experienced student:

I: A few months ago, you were upset and were going to leave university in your third year. I was saying 'we can sort this out and please don't leave. You only have a few months to go'. Is there any way me or anyone else could have intervened and helped you before you got to that point?

P: Sometimes I do feel like that, but I wouldn't necessarily follow it through. For me, it's a cry for help and saying I need help now. My grades were poor in the first year, but they've improved massively since then. Maybe if all the tutors had helped me more. I just want people to be interested in me and know my situation and not just because it's their job, stuff like that (Justine, aged 20).

Discussion and Conclusions

Our analysis of parental wellbeing and the linked wellbeing of LAC and care-experienced students, shows how contested, problematic and multifaceted this amorphous, indeterminate concept is, also being heavily dominated by psychological disciplines which privilege hedonic perspectives. Our data demonstrated the complete absence of parental wellbeing and care in relation to these young people's early life experiences with biological kin. For most of

these interviewees, their later experiences in state care were also wholly inadequate in meeting their needs or compensating for past disadvantage. Furthermore, as adult students, the negative ramifications of their pre and in-care lives continued to reverberate with regards to their relationships with university staff and feelings of trust and distrust.

Our data clearly shows that memories of negative life events, including detailed accounts of abuse, neglect and being let down continually by adults; parents, teachers, counsellors, social workers, pervade care-experienced students' narratives. For the student interviewees who experienced continuous abuse and neglect in childhood and/or adolescence, the impact of the past was especially marked in relation to their narratives of future selves and wellbeing. While some interviewees struggled to recall the exact details of some incidents of abuse, the emotional and mental impacts of these events was deeply felt by these young people, impacting on participants' ability to access and make constructive use of university supports. These findings are significant because although stigma and mistrust are discussed with respect to university supports (Cotton et al 2014), the influence of parental wellbeing on use of support services for hard to reach young people, have been largely overlooked. The students who had experienced more stable placements, and who regarded carers as family be they foster carers, adopted parents or extended family, also used language that was more akin to wellbeing in comparison to those who experienced frequent placement breakdowns who spoke often about survival. These findings are significant for research, policy and practice, illuminating the heterogeneity in how care-experienced students conceptualise wellbeing; as a positive, lived experience that is connected to family, friends and good memories, for the students who had stable and comfortable lives, and as an 'abstract' concept or unattainable ideal for the students who were forced to cope, manoeuvre and survive during childhood. This is also important for understanding how care experienced students conceptualise wellbeing in relation to unique life circumstances, personal histories and interlinking contexts of families, peers, informal and formal supports, social workers, link workers etc. whose positionalities are ever changing in young people's social ecologies (Pinkerton, 2021). While widening participation (WP) agendas in Higher Education prioritise recruiting and retaining students from marginalised communities, our study suggests that focusing greater attention on the socio-historical, temporal and interlinking lived lives of care experienced students could be extremely beneficial for understanding personal factors that affect student attitudes to support and broader discourses of student engagement. As per our study, narrative, biographical approaches offer extensive methodological scope for exposing the layeredness of everyday life events and the effects of pre-care and in-care memories on how interviewees make sense of their future selves.

Importantly, this paper further illuminates the complexity and labyrinthine interconnections between wellbeing, relationships across the life course and the importance of 'one good adult' in care experienced young people's lives (Sulimani-Aidan, 2014). Where strong family and peer connections had been built amongst our interviewees, this was strongly associated with the perseverance, nurturance and specific qualities, certain individual foster/adoptive parents or intimate partners had. However, these relationships were not strongly linked with state processes, policies or legislation or the intervention of welfare professionals. If the state as a corporate parent takes over the upbringing of seriously abused children, it does, however, need to emulate positive parenting, linked to parental wellbeing (Dixon et al., 2015). However, as our study suggests, despite apparently progressive policy and practice initiatives, welfare professionals, like social workers, seemed unable to achieve this and sufficiently support and monitor substitute carers, as well as building enduring relationships of trust with

the young people themselves. This may be linked to our earlier comments about England being an example of a neo-liberal welfare regime, with only residual state welfare, the emphasis being on risk and last resort intervention. It may also be associated with what is sometimes seen as outdated in children's social care, Bowlby's theory of the need for positive attachment and 'his central insights about the need for constant affection and positive regard' (Jordan, 2006, p. 47). For the participants who experienced unstable (and multiple) care placements, their relationships with social workers were often detrimental to their wellbeing rather than enhancing it. Significantly, none of the interviewees alluded to relationship-based or person-centred ways of engaging with social workers. Given the importance of building positive relationships with social workers for client wellbeing (Ferguson et al 2022), these findings are extremely important.

These young adults' accounts, with the exception of the two with stable lives, show that even though these young people had made it as far as university, they still had multiple issues with trust, mental health, relationships, concentration and stability. Their one constant, with the exception of one student who had no one, was one or two highly supportive people, mostly foster carers. These people believed in them, cared for them, supported them, and had unwavering confidence in them, encouraging them to aspire to university education and building better lives. The length of time they had known these individuals was less important than them seeing these people as their parents or family. Therefore, a conception of home and belonging somewhere and to someone and being able to trust people and have others trust and value them, were vitally important for these young people's wellbeing. Biehal (2014) talks of successful placements in relation to children seeing their foster or adoptive parents as being like their parents or family. We push this identification further, because these children were often actually identifying these parents not as 'like' but as being their parents regardless of biology. In relation to parental wellbeing this philosophical notion of parental eudemonia and a wider notion of meaning and care are also clear, and linked with these young adults' subjective feelings around wellbeing and belonging.

To conclude is the concept of wellbeing and parental and individual subjective views, as well as material and relational indicators, important when trying to improve the lives of care-experienced young people? From our perspective, we accept that wellbeing is indeed important, but it is very difficult to define and agree on how to operationalise and measure the concept, both generally and in relation to this group of participants. As our study showed, what have often been claimed to be reliable concrete indicators of success or wellbeing, such as length of placement or educational attainment, may not always indicate stability or wellbeing. Although our respondents were in higher education and looked likely to graduate, their lives were by no means easy. The emotional and psychological legacies of their childhoods with their biological family and in-care histories meant that most were striving to survive, rather than experiencing wellbeing. The culturally relative nature of wellbeing was also shown in both our study and other research, in that trust and relationships were of high significance in our respondents' eyes, as was living a mundane but do-able life. Most studies of wellbeing are survey-based and statistical and many tend towards the hedonic understanding of wellbeing. Our study was not focused exclusively on wellbeing but it shows the importance of depth biographical interviews with LAC and care-experienced students. It generated a graphic understanding of the vast amount of trauma these young people had suffered and multiple failures of the state as a corporate parent. It also illuminated the continuing fallout from those experiences which impeded these young people's wellbeing in so many spheres across the life course and the interlinked and cumulative disadvantage effect of (often) negative life events (Dannefer, 2003; Brady and Gilligan, 2020). Our study, furthermore, showed that a hedonic and generally subjective and culturally static

understanding of wellbeing, most often dominated by psychological terminology, is insufficient when attempting to understand parental wellbeing and its effects on LAC and the wellbeing of care-experienced young adults. However, biographical research and notions of 'lived' and 'linked lives' offer significant conceptual and methodological scope for further exploring young people's understandings of wellbeing which are contested, fluid, malleable and inherently linked to the complex and ever changing realities of everyday life.

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