Life Story Work with Children and Young People who are Looked After

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Abstract

The majority of children who live with their birth families have opportunities to talk about the important things that have happened to them in their lives and to reminisce with family members. Children who are separated from their birth families by adoption and those that spend their childhoods in care often have these opportunities taken away from them as relationships are fractured or lost (Rees, 2017; Rose, 2017; Selwyn and Briheim-Crookall, 2017; and Wrench & Naylor, 2013). Undertaking direct work with children who are looked after has, for a long time been recognised as an important part of the social work role specifically regarding ascertaining the wishes and feelings of children (Children Act, 1989). The introduction of the Adoption and Children Act (2002) and later the Fostering Services (England) Regulations (2011) introduced the notion of carrying out LSW with children who are looked after and who have a plan of adoption. This legislation created change in both social work practice and the responsibilities that was now bestowed to foster carers requiring them both to do LSW with the children whom they looked after. Since this time there have been numerous books written about LSW but there is limited research into how this is carried out with children who are looked after (Willis and Holland, 2009). This study aims to provide a clearer understanding of what LSW is undertaken with children looked after from the perspectives of the social workers and foster carers who hold responsibilities for these children. Thereafter it seeks to understand what contributes to this being done well and identifying any barriers that mean that it may not be carried out for all children looked after.

The design and method used in this study was that of qualitative research enabling data to be collected and analysed from interviews with 15 social workers and 5 foster carers from a local authority in the south west of England. Using the framework of thematic analysis ten key themes were identified which will be discussed in detail later in this dissertation.
Acknowledgments

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Most of all I would like to thank my husband Ian who has always quietly supported me in all that I do. Thank you for going on this journey with me, for listening to me in the moments that I didn’t think you had heard and for your endless patience.
**Declaration**

I declare that the work in this dissertation was carried out in accordance with the regulations of the University of Bristol. The work is original, except where indicated by special reference in the text. No part of the dissertation has been submitted for any other academic award. Any views expressed in the dissertation are those of the author.
**Definition of terms**

I refer to the children who are looked after as ‘children looked after’ throughout this dissertation. It is an age inclusive term and refers to the children and young people who are looked after by a local authority.

Whilst I value and recognise that others use different terms to refer to the work that is the focus of this dissertation, including life journey work, life work, therapeutic life story work and memory work (Wrench and Naylor, 2013; Coman *et al*, 2016; Rose, 2017; Treisman, 2017; and Rees, 2018). I will be referring to the direct work that is undertaken with children looked after which seeks to help them to explore their lives and experiences with birth families as well as their present and future lives as direct life story work.
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Chapter One: Introduction

This dissertation seeks to explore the concept of life story work (LSW) with children who are looked after within a local authority setting. It will look at the factors that contribute to life story work (LSW) being done well and those that mean LSW is not carried out as well as it could be. It will seek to do this by gaining an insight into how both the child’s social worker and the child’s foster carer experience and give significance to LSW. Within this chapter the statute that underpins LSW will be shared followed by a discussion about LSW and direct work with children who are looked after. Within the chapter I will share my personal and professional rationale for this research linking it to the relevance for policy and social work practice. The chapter will conclude by outlining the aims of the study and the content of the dissertation.

Statute and guidance that underpins life story work

The importance of carrying out direct work with children is reinforced in the Children Acts 1989 and 2004, however the only statute that specifically stipulates the requirement for local authorities to undertake LSW with children who are looked after is the Adoption and Children Act 2002. It is this legislation that requires that children with a plan of adoption are provided with a life story book and a later life letter.

The significance of carrying out LSW with children is however recognised in good practice guidance noting that professionals should be knowledgeable about the ‘core practice’ (DfE, 2007:18) of LSW and the value and worth of it to a child or young person who has experienced trauma, loss or harm. Of concern is that this is yet to be enshrined in statute for all children who are looked after (DfE, 2007).

However recent legislation is recognising the requirement to consider the mental health needs of children who are looked after with one of the key principles in the Children and Social Work Act (DfE, 2018) being that local authorities must act ‘in the best interests of and promote the health and wellbeing of children and young people in care’ (Children and Social Work Act, 2017:1). Arguably, LSW contributes to this as noted by Wrench and Naylor (2013) because when carried out in a structured way, LSW has the potential to support children to become ‘psychologically healthy’ (Wrench and Naylor, 2013:12) adults.

Rees (2018) however notes that whilst some local authorities have embraced the significance of LSW others have an ‘insular approach’ (Rees, 2018: 8) and often leave the work to just the production of life story book and a later life letter (Rees, 2018).
She notes that any direct work with a child who is looked after should be referred to as LSW or life journey work rather than just being focused on the final products of a book and letter.

**What is life story work?**

LSW seeks to give a child, who no longer lives with their birth family, an understanding of what is happening to them in the present and what has happened to them in the past through both short and meaningful conversations (Fahlberg, 1981). These conversations can occur at any time and with a variety of people using different mediums as a process where the adult helps the child to address the why, what, when and how questions by offering an honest, developmentally appropriate account of their life experiences (Willis and Holland, 2009; Wrench and Naylor, 2013; Ryan and Walker 2016 and Rees, 2018). Of significance is that LSW should consider the child’s emotional ability to process the information that is being shared and provide the opportunities for discussion and exploration (Ryan and Walker 2007; Willis and Holland, 2009; Rose, 2012; Wrench and Naylor 2013 and Rees, 2018).

How the work is carried out can be varied and usually includes talking, storytelling, drawing, painting and puppetry with photographs and artefacts being significant in helping to facilitate conversations that invoke memories and create new ones (Wrench and Naylor, 2013; Ryan and Walker 2016 and Rees, 2018). Children looked after say that LSW is about ‘trying to put all the bits of your life – the good bits and the bad bits – together into one story’ (Shah and Argent, 2006 :4).

LSW often involves the creation of a life story book or wallpaper work which can be made with children as part of LSW and given to them to ‘mark the occasion that the work has concluded’ (Rose, 2012:32). However, a life story book on its own does not constitute the whole process of LSW.

Indeed it is recognised that helping children to process and make sense of past trauma is not a one-off event but a process that requires the adult to normalise a child’s curiosity by engaging in an ‘active give-and take-process’ (Brodzinsky 2011:204) to help the child develop an accurate representation about the previous experiences that have impacted on their development (Treisman, 2017). So how can social workers or foster carers undertake direct LSW?
From a neuropsychological perspective it is recognised that carrying out any form of LSW requires a good understanding of how the brain develops and how negative experiences impact on the developing brain (Rose, 2012; Wrench and Naylor 2013; Rose, 2017; Rees, 2018). For example, Rose (2012) suggests that working with the child allows the worker to in effect work with the child’s brain and as a result ‘reshaping, reframing and real change take place’ (Rose, 2012:26).

Similarly, Wrench and Naylor (2013) suggest that:

*By educating the child about his trauma response triggers and links between past experiences and current responses, you help take a vital step towards providing him with a measure of control that was absent during his abuse or traumatic experience*’

Wrench and Naylor (2013:22).

Despite the recognition that there is a ‘theoretical basis to life story work’ (Wrench and Naylor, 2013:13) suggest that it can be carried out with children ‘without needing years of training as a therapist’ (Wrench and Naylor, 2013:10).

Direct work is another key term that, like definitions of LSW, seeks to answer the ‘why, what, how and when’ (Rees, 2018:11) questions for children with a purpose of helping them to put ‘the pieces of their lives together again’ (Romain, 2007:10).

**Direct Work**

LSW is recognised as being a ‘way of working’ (Ryan and Walker 2006:2) that can be undertaken with a good knowledge and understanding of the basic principles of direct work, however Baynes (2008) notes that LSW is ‘seen as an optional extra rather than a core social work skill’ (Baynes, 2008:44). Further Wrench and Naylor (2013) note that there is not enough direct work being carried out with children due to a lack of ‘time, expertise and confidence’ (Wrench and Naylor, 2013:9).

**Responsibility of Social Workers**

The responsibility of the child’s social worker to ensure that the life story book is started for a child with a plan of adoption is stipulated in the Adoption Act 2002 where guidance states that it must be presented to the adoptive parents within 10 days of the celebration hearing (DfE, 2014).
Of significance is that this statute only applies to children with a plan of adoption and so
arguably unless direct LSW is carried out with children looked after, which ends with the
production of a life story book or wallpaper work then they may never have such a valuable
tool to help them process their life stories.

A secure base from where early life experiences can be explored and feelings of safety can
be experienced is fundamental to LSW (Hooley et al 2016). Indeed, one of the key skills
required of social workers is that they can support children during transitions ‘recognising the
impact of loss and change’ (DfE, 2018:3) prioritising stability and a sense of belonging for
children who are looked after (DfE, 2018:6).

Wrench & Naylor (2013) note the significance of a good support system which is robust
enough to help the child to contain their feelings. The relationship that the child has with their
foster carer and the contribution that they can make both during and in between sessions to
support the child is significant (Romain et al 2007).

**Responsibility of Foster Carers**

Both research and practice literature recognise that where relationships are fractured or at
risk of breakdown that foster carers being involved in direct LSW can give invaluable insight
into the child’s traumas providing opportunities for attunement and repair (Hooley et al, 2016,
Rose, 2012, Fahlberg, 1991). Similarly, Rose (2012) suggests that where carers are able to
nurture, contain and be supportive of the child that life story therapy should be carried out

Foster carers are also the ‘custodians of a child’s precious memories’ (Wrench and Naylor,
2013:11) as they collate information in the form of photographs and memorabilia for the child
whilst they are in their care. They can also facilitate storytelling which can add to these
memories to help the child experience positive and happy moments in time. All of which can
make a significant contribution to the child’s life story (DfE, 2011; Rees, 2018).

However, whilst research indicates that permanent carers value the contributions made by
foster carers, where they can provide ‘a systematic pictorial history’ (Watson et al,
2015b:125) of the child’s time in their care, the responsibility for compiling the information
required in a life story book should preferably be the held by the social worker and not the
foster carer (DfE, 2007; 2014; Rees 2018).
Personal Rationale

As an adoption social worker, I hear the anxiety shared by colleagues and permanent carers who worry that it isn’t the right time to undertake LSW with a child for fear of unsettling them. I hear their concern when they share that the child is too young to process and make sense of the losses they have experienced and the traumas they have survived. I see too many children in the care system who don't know why they are living in foster care and I see the added complexities when weeks and months later social workers and permanent carers must help the child to learn to trust, to feel safe in their care and ultimately settle in permanent homes. Further down the line I hear of children who are leaving care requesting access to their files as they do not have a coherent narrative which allows them to understand the reasons why they were removed from their birth families and grew up in local authority care. Of concern is that these young people are thereafter presented with a box of files with redacted information and little chance of being able to make sense of this information without professional support.

Child psychologist and psychotherapist Margot Sunderland (2015) argues that we owe it to our children to help them to work through their experiences of loss, their painful memories and their experiences of abuse. She is a strong advocate for starting conversations with children and is clear in her view that we must dispel the myth that to ‘open the can of worms’ will be too distressing and unsettling for children, arguing that we are ignoring the pain that children are experiencing (Sunderland, 2015). It is with this analogy in mind that I hope this dissertation gives other professionals, permanent carers and our children looked after the confidence to explore LSW from a more informed perspective.

Professional rationale

Children who are looked after experience significant loss amongst them their family, their homes, their schools and their friends. Many would have experienced neglect, and some would have experienced trauma (Meltzer et al, 2003; Sempik et al, 2008). These experiences will have an impact on their psychological development, and as such, they will require support and help to process and make sense of these experiences.

We know that the experiences of children in care have an impact on their future development and emotional wellbeing if they are denied access to their past (Fahlberg, 1981). Yet children and young people are still not being told about the reasons why they are in care (Munro, 2011).
In September 2017 there were 17,850 case holding children and family social workers working for Local Authorities in England with an average case load each of 17.8 children (DfE, 2018). When asked what they want from their social worker children report that they want them to take time getting to know them as without a relationship they feel uncomfortable trusting them with their ‘personal and intimate thoughts and feelings’ (Coram Voice, 2015 :6). Of concern is that social workers are reporting that they are feeling ‘completely overworked ... and unable to spend time on thoroughly getting to know children’s views and opinions or to even undertake direct work’ (Stevenson, 2018).

The number of children who are looked after continues to increase and arguably this means that caseloads will continue to rise too. This highlights the need for policy makers to recognise the significance of the social work role in helping children to feel safe, to learn to trust and to be supported to understand what has happened to them and why. Arguably it is these children that have ‘more of a right to this information than anyone else’ (Fahlberg,1981:51) and without such a relationship I argue that social workers are being hindered in their duty to promote social justice and uphold the human rights of children who are looked after (BASW, 2012).

Whilst there is a plethora of good practice literature and guidance on LSW with children who are looked after or adopted there is a distinct lack of research into the experiences of social workers and foster carers undertaking this vital work (Willis and Holland, 2009).

**Aims of the study**

Considering the professional rationale and the potential to contribute to developing best practice standards and policy making, this study aims to explore what LSW is undertaken with children who are looked after and what contributes to this working well. It will look at some of the barriers preventing LSW from being carried out with a view to offering some suggestions for change.
Outline of the dissertation

- Chapter two explores practice literature and existing research pertaining to LSW. It will evaluate the contributions of other and identify areas of theoretical and empirical weakness to provide the impetus for this study.
- Chapter three will explain the aims and objectives of this study, the methodological techniques that I used, how I accessed my participants and how I analysed my data. It will address the ethical issues pertaining to my research and provide a reference to research materials which will be in the appendices.
- Chapter four will be a presentation and discussion of my findings under key themes.
- Chapter five will be the conclusion of my dissertation where I will outline practice policy challenges and suggest recommendations for change. I will thereafter consider the limitations of my study and offer suggestions for further research before ending with a summary of my research.
Chapter Two: Literature Review

Introduction

This literature review explores research and practice literature pertaining to LSW with children looked after and will begin by outlining the search strategy.

It is recognised that there is some confusion around the terminology used to describe LSW and that it is often an umbrella term used to describe the many different aspects of direct and indirect work that is undertaken with and for a child to help them to understand their life stories (Rees, 2018). As such this literature review will consider the different ways of understanding LSW and look at some of the challenges that have been identified in the literature when considering doing LSW. It will end by outlining why it is important that further research into LSW with children looked after is undertaken.

Search Strategy

My inclusion criteria included primary published English research related to looked after children and from this point of reference I explored, children/young people who are looked after, foster care, in care, looked after, fostering and adoption. I searched for LSW and then started to explore using the search terms: life work, narratives, identity, direct work, life history work, life story books, preparing for permanency, reminiscence and storytelling. I then searched for social workers and thereafter foster carers.

My exclusion criteria included not English language and unpublished work. I did not limit my search on a publication date.

The focus of my literature search was subject-specific electronic databases including Social Care Online and ASSIA and peer reviewed journals including: Adoption & Fostering, the British Journal of Social Work and relevant government websites. I explored key texts such as LSW - Why, what, how and when by Ryan and Walker (2016) and websites such as Community Care Inform. It was this ‘snowball sampling’ (Aveyard, 2010:87) that allowed me to predominantly include practice literature due to a lack of academic research on LSW with children who are looked after. This strategy allowed me to identify more literature from the references used by the sources after which I did not need to refine my search any further.

Below I present some of the different approaches to LSW from this search and consider the benefits and limitations of these approaches.
Story work

Story work usually occurs around the time that a child first becomes looked after and is a process where the child talks with significant adults about the reasons why they are separated from their families. Rose (2012) notes that the role of the child is to provide the narrative and the role of the adult is to listen. Of significance is that the adult doesn’t correct any inaccuracies that the child may hold about themselves or about their birth families.

Limitations and Benefits

Children can blame themselves for the reasons they have been removed from their families and need adults to help them explore their ‘evolving sense of causality’ (Perry, 2014:6). They need support to limit feelings of shame and blame, and to help remove any fears that they are bad or unlovable (Schofield & Beek, 2006). The danger of this approach is that a book can be made because of this story telling which offers no opportunity to dispel fantasies, or to adapt and change the child’s internal working model (Rose, 2012). Coman et al, 2016 identify the significance of helping children to understand why they have been removed from birth families to give them the best opportunities to ‘adjust to their present circumstances’ (Coman et al, 2016:52). They further note that this must be done before any LSW can begin. However, the notion of talking with children about their experiences is not straightforward with Hooley et al’s, (2016) research highlighting an additional dilemma about how much to involve the child.

One such strategy that includes children in the work is that of Words and Pictures, a process derived from the Signs of Safety Approach by Turnell and Essex (2006).

Words and Pictures

Words and pictures is a practice model that addresses the often-difficult conversations that adults need to have with children to help them begin to understand what is happening to them and why through the production of a storyboard. A key feature of this approach is that it allows social workers to work with families in collaboration developing a ‘common language’ (Fox, 2016) which offers a ‘meaningful explanation for children … who are typically very confused or uncertain as to why they have come into the care system’ (Government of Western Australia Department for Child Protection, 2011:22). Of importance is that words and pictures is a way of working that requires social workers and parents to work together at a time when parents may be very angry with social workers.
Limitations and Benefits

The need for social workers to have the time to develop relationship-based practice is a central aspect of signs of safety and as argued by Ruch (2005) social workers need ‘to be afforded the time and space to respond thoughtfully – reflectively – to the unique, complex and dynamic situations they encounter’ (Ruch, 2005:121). It is perhaps after social workers have built relationships with parents that they may be able to work alongside families with greater ease recalling happier times and more positives aspects of their child’s life.

Memorialising Approaches

In the findings of longitudinal studies with children who are looked after, Ward (2011) notes the significance for children to have material possessions arguing that too often the lives of children who are looked after is unreliable and inconsistent noting that material possessions provide some consistency for children who are looked after. Similarly, the research by Watson et al (2018) note the significance of using ‘objects’ in reminiscence and storytelling as prompts to aid memory allowing us to value the significance of collating these for children who are looked after. Shotton (2010; 2013) has identified an approach where foster carers are encouraged to help children collect and reflect on the memories that they experienced in their care. They suggest that the collaborative nature of their model encourages the child and foster carer to tell stories using photographs, objects and memories that provides opportunities and experiences that can have a ‘positive impact on their identity’ (Shotton, 2010:62). The relevance of this research pertinent to this study can be seen in the responsibility bestowed to foster carers to ‘keep appropriate memorabilia’ (DfE, 2011: 53) for the child and in their ‘supporting role [ ] encouraging the child to reflect on and understand their history’ (DfE, 2011:53).

Limitations and Benefits

In a study exploring the experiences of self-continuity for children looked after Ward (2011) noted how difficult it was for children when they moved between placements and lost valuable items as one child in her study commented: ‘Everything got lost somewhere along the line, so I never really had anything that I’ve kept through and through…’ (Ward, 2011:2015).
In their research when looking at the subjective well-being of children looked after, Selwyn and Briheim-Crookall (2017) one child commented that she would like to see a picture of herself as a baby as she had never seen one. It is significantly important that children’s belongings and memories are collected and stored safely for them, just as a parent would safely keep their child’s precious memories.

Another approach to LSW that has emerged in more recent years in the practice literature focuses on the therapeutic benefits of story work.

**Life Story Therapy or Therapeutic Life Story Work**

The notion that children can be given opportunities to recover from adverse life experiences through the relationship with both worker and the permanent carer, led Rose (2012) to develop a model of life story therapy (Rose, 2012; 2017). Rose (2012) argues that life story therapy is ‘not just the who, what, where, when, why and how events – it is also about the consequences of those events and how they drive the child, and present issues and difficulties’ (Rose, 2012:26). In his model Rose (2012) aims to support and encourage the child to explore their own history and that of their family to give the child and the carer an understanding of how previous experiences impact on the child’s thoughts, feelings and behaviours in the present. Once explored and understood the model provides a way to support the child to consider if they wish to change how their previous experiences impact on their everyday functioning in the present.

**Limitations and Benefits**

One of the significant differences between life story therapy and direct work with children is that the work is undertaken with the child and their permanent carer. The value of this is that the relationship between the therapist, permanent carer and child provides the space to understand ‘the behaviour, feelings and cognitive processes’ (Rose, 2012:26) that are present in the placement allowing the child to develop a new awareness and consider, if they choose, to change their responses to past events.

The limitations of this model are that therapist’s time costs, and with increasing budget restrictions from government, unless children are showing significant emotional and behavioural difficulties then access to therapy is likely to be hindered by a lack of financial resources (Butler, 2017).
Life Story Book

There are two different ways in which life story books are produced. That is either with the child through the medium of direct work where it is presented as either a book or on wallpaper or written for the child, to be read by or with their permanent carers at a later time (Rees, 2009; Rose, 2012).

The Joy Rees approach to making life story books is used by many local authorities and recognised as a model appropriate to children who are being adopted (CoramBAAF, 2018). In their research with adoptive parents, Watson et al (2015b) noted that parents valued the format of Rees's model namely because the book starts in the present time with them and once ‘explored and endorsed’ (Rees, 2009:34) moves back to the past. Thereafter the narrative in the book allows the reader to move back to the present and then onto a future, highlighting the child's permanent place in their adoptive family (Rees, 2009).

Limitations and Benefits
For the child that is presented with the life story book at a young age, permanent carers have the option to use the book as the ‘first tool’ (Rees, 2009:29) when talking to their child about their history. This may mean that the child is shown the photographs and illustrations in the book and later, when the words and the feelings become more significant to the child, they narratives can be included (Rees, 2009).

Whilst life story books can go some way to help a child understand their history, Watson et al (2015b) claim they cannot provide the coherent and only account of the child’s life (Watson et al, 2015b). Indeed, in a study collecting interview data with 20 adopted children, Watson et al (2015a) found that children wanted ‘multiple actor viewpoints’ (Watson et al, 2015a:97) in their life story books which included the perspective from their birth families.

The study by Watson et al (2015b) further highlighted a disregard to the notion of professionals working with the adoptive parents in the making of life story books for their children with one parent stating ‘we did not have the opportunity to discuss but what I would have said was this is rubbish…there is no storyline’ (Watson et al, 2015b:123). Baynes (2008) and others note that if life story books are poorly prepared they risk ‘gathering dust on top of wardrobes’ (Baynes, 2008:43) as children feel no connection to them, or permanent carers have not felt able to read them with their child because they are not comfortable with the contents (Watson et al, 2015b).
Indeed, a study carried out with 70 adoptive parents who had experienced an adoption disruption or difficulties with their adopted child noted that permanent carers found their child’s life story book to be ‘unhelpful’ and ‘detrimental’ (Selwyn et al, 2014:185) to their child’s developing identity with books being inaccurate and of poor quality.

In contrast to the findings above where children had little involvement in the production of their book, Rose (2012) advocates for children to be very much involved in the production of their life story books and criticizes life story books that are made without the involvement of the child as being ‘untested and taken as truthful’ (Rose, 2012:23). Further Rose (2012) is critical of the narratives written for children suggesting that they are collated from social work case files that are recorded according to the ethical stance that was taken by the social worker at the time. Similarly, the research by Watson et al (2015b) highlights that adoptive parents criticised their child’s life story book as lacking balance when the story comes from the perspective of just one worker.

How then do social workers and foster carers prepare children with a plan of adoption ‘…to understand why the agency considers they should not stay with their own family or current carer…’ (DfE, 2013:37). Arguably local authorities are adhering to certain aspects of the Adoption Agencies Regulations (2013) through the production of life story books. However, a challenge for social workers preparing life story books for children is that the books can quickly become outdated given that the average age of children being adopted in England is aged ‘3 years and 4 months’ (DfE, 2017:13). And so arguably the task for social workers around LSW is a little more complex than what the statute alludes to.

Unlike the life story book which can be made by anyone, it is the child’s social worker, directed by national minimum standards, who is required to write the later life letter to a child who is being adopted (DfE, 2014).

**Later Life Letter**

Good practice guidance recognises the later life letter as being an ‘essential ingredient’ (Moffat,2012:3) and a vital part of the process of helping a young person to understand and make sense of the reasons why they were adopted. However, the later life letter is different to a life story book because it is written to be read by the child when they are much older.
Of significance is that the life story book should not include ‘explicit or distressing details’ (DfE, 2013:107) whereas the later life letter should provide sufficient detail to allow the child, at a later stage, to have a factual and detailed account of why they could not live with their birth parents and about their life before being placed for adoption (DfE, 2013).

Limitations and Benefits
The writing of the later life letter cannot be underestimated in part because the complexities of a child’s journey to adoption can mean that the letters are quite lengthy documents and so take some time to write (Ryan & Walker, 2016). Under Statutory Guidance on Adoption (2013) Local Authorities are required to ensure that children with a plan of adoption are helped to understand what adoption will mean for them over the course of their lifetime and in accordance to the child’s history and personal development (DfE, 2013). Arguably it is the child’s life story book and later life letter that fulfils the legislative requirement of local authorities with direct work with the child being missed. Further whilst later life letters and life story books can provide a narrative for a child about their early life experiences, direct LSW provides a space where alternative narratives that replicate the lived experience of the child can be made as Hooley et al, 2016 note:

We cannot assume meaning for the child. The child may have a very different experience of an event than the professional who put the story together (Hooley et al, 2016:224).

When life story work, direct work and therapeutic life story work conflict
One of the challenges of undertaking LSW with children looked after can be seen where the practice literature about LSW, direct work and therapeutic LSW offer conflicting messages. Workers are cautioned about taking on LSW ‘until you understand how to do it and you have the space and time to do it’ (Ryan and Walker, 2016:3) and practice guides urge caution stating that therapeutic LSW should not be carried out unless the worker is skilled, experienced and has access to good quality supervision (Treisman, 2017; Rose, 2012). Whilst research such as that by Hooley et al (2016) note that LSW should not take place of psychological therapy others, arguably in recognition that social workers often feel de-skilled in this area of direct work, urge us to ‘have a go’ (Wrench & Naylor 2013:23) to build up skill and knowledge of direct LSW.
We know that trauma affects a child’s ability to regulate their emotions, has an impact on how they perceive themselves and others around them and hinders their ability to process information and their memory recall (Schore and Schore, 2008).

Further Fahlberg (1981) notes that ‘the truth can be presented in a harmful way that lowers the child’s self-esteem or in a way that helps the child to understand and accept his past thus raising his self-esteem’ (Fahlberg, 1981: 51). A consistent theme in the literature is, that when undertaking LSW with children looked after, that social workers must have a good understanding and knowledge of child development, attachment theory, neuroscience and, significantly, of the individual child that they are working with to inform any plan of work (Rees, 2018; Rose, 2012 and Treisman, 2017). Holody and Maher (1996) highlight a ‘here-and-now’ approach to LSW, suggesting that the intervention should start where the child is now, focusing on strengths, interests and current relationships to establish coping strategies and recognise sources of support.

Whilst it is noted that social workers are often directed to do LSW with children as part of Ofsted requirements or the work being about performance led practice (Baynes, 2008; Rees, 2018), Rose (2012) notes the significance of carrying out an assessment to ensure that any work is led by the child’s need and not by the ‘adult agenda’ (Rose, 2012: 19). As Wrench and Naylor (2013) note when LSW is undertaken with ‘thought, creativity and sensitivity’ (Wrench and Naylor, 2013: 10) then the process can be therapeutic for the child.

The literature certainly does suggest that social workers need clarity about their role in carrying out direct LSW with children and some guidance about when the child’s needs are such that they may warrant a referral to a more specialist service. It is hoped that the findings of this study and the discussion in chapter 4 will offer some suggestions for future practice.

**Challenges of undertaking life story work with children looked after and the rationale for the research**

**Good Supervision**

Practice literature and research recognise the emotional challenges faced by workers undertaking LSW without good quality support and supervision and how this in turn will impact on the relationship with the child (McMullan, 2008; Rose, 2012; Wrench & Naylor, 2013). Indeed, the study by Watson *et al* (2015a) identified that a lack of training meant that workers ‘avoid providing [a] listening role to children’ (Watson *et al*, 2015a: 91).
Similarly Wrench & Naylor (2013) note that without emotional support to help manage some of the feelings that the child’s story may invoke in them, that workers ‘will struggle to convince the child that [they] can bear his pain’ (Wrench & Naylor, 2013:20).

Of significance is that Rose (2017) suggests that children can hear difficult information when it is coming from someone who is ‘confident, caring and informed’ (Rose, 2017:27) allowing us to recognise the significant value of good quality support and supervision.

**Time to do the work**

Competing demands and time constraints are recognised in the practice literature as being amongst one of the reasons why social workers are not doing LSW as well as they may want to (Hooley et al, 2016; Rees, 2018; Wrench & Naylor, 2013). Indeed, in her article on LSW Baynes (2008) notes that often social workers are expected to carry out LSW with ‘…inadequate time or resources’ (Baynes, 2008:44).

A study by Romain et al (2007) highlights the need for social workers to have caseloads that allow them to be more available to children who may not necessarily want to talk during a planned piece of work but need social workers to be available to them at other times. Similarly, the practice literature is clear urging caution asking workers not to undertake LSW without the ‘space and time’ (Ryan & Walker 2016:3) to be able to carry it out well. Further adoptive parents suggest that it ‘shouldn’t be left to a really busy social worker with a really large case load who maybe doesn’t have the time to commit to making it as good as it can be’ (Karen, 2015).

**Workers Skill**

Baynes (2008) suggests that LSW is ‘one of the most skilled ...tasks that a worker can undertake’ (Baynes, 2008:43) yet confidence in the workers skill is a barrier to undertaking direct LSW with children. Similarly Wrench & Naylor (2013) note that social workers are restricted from doing LSW because they lack the confidence and question their ability to do the work (Wrench & Naylor, 2013). Fears about being unable to answer difficult questions or worries that the child may become upset or unsettled affect decisions about when to undertake direct work with children (Romaine et al, 2007; Sunderland, 2015; Wrench & Naylor, 2013). However, children and young people are clear in their view that social workers should be trained in LSW (SCIE, 2018). Of interest is that Conman et al, (2016), whilst acknowledging that no one would want to intentionally cause a child to be distressed, note that pain is an appropriate response to the grief that children are experiencing.
One of the key principles of social work is that the rights to participate in ways that empower people is promoted (BASW, 2012) with this in mind we will now look at how social workers can involve children in LSW.

Involving children in life story work

Conman et al (2016) note that LSW does not replace therapeutic support for children who have experienced abuse or neglect but they are clear that helping a child to understand the reasons why they are in care and thereafter enabling them to ‘adjust to their present circumstances’ (Conman et al 2016 :4) is a vital part of any direct work with children looked after. Further a core social work skill is being able to undertake direct work with a child BASW, (2012) and research by Hooley et al (2016) identified being able to help children express and manage their emotions as being a key feature of successful LSW. This allows us to recognise that directly involving children in LSW has the potential to help them to understand why they may respond and feel as they do in the context of supportive and nurturing relationships (Rose, 2012; 2017).

Current Picture

Whilst there is a plethora of practice literature pertaining to LSW there is a gap in the research literature which could provide a balanced view about the experiences of social workers and foster carers carrying out LSW with children looked after. It is this gap that my research seeks to address.
Chapter Three: Methodology.

Introduction
This chapter will begin by outlining the aims and objectives of the study and will thereafter discuss the methodological approach that was used. It will look at the research design, sampling method and how the data was gathered and analysed. It will end with a discussion of the ethical issues that arose during the study and how they were addressed.

Research Aims and Objectives

The aim of the study was to explore the concept of life story with children who are looked after within a local authority setting looking at the factors that contributed to LSW done well and those that meant LSW was not carried out as well as it could be. The study sought to do this by gaining an insight into how the child’s social worker and foster carer experience and give significance to LSW. To address this the objectives of the study were to:

- To gather an understanding of what social workers and foster carers understand LSW to mean.
- To identify the challenges faced by social workers and foster carers when undertaking LSW.
- To understand what contributes to LSW being carried out effectively.
**Qualitative research**

Whilst Ritchie *et al.*, (2014) asserts that researchers ‘should not be forced into a theoretical or methodological straight jacket’ (Ritchie *et al.*, 2014:19) I will offer a perspective of why I have chosen qualitative research by briefly outlining the philosophical underpinnings of my study looking at both ontology and epistemology.

Ontology seeks to understand the nature of reality and whether there is a social reality that exists independently of how humans interpret this, thereafter it seeks to understand if there is a shared social reality or realities that are context specific. In seeking to understand this reality there are two distinct positions. Relativism which claims to be ‘only knowable through the human mind and through socially constructed meaning’ (McLaughlin, 2012:25) and in contrast, realism, which asserts that there is an ‘external reality that exists independently of our views and our understanding of it’ (McLaughlin, 2012 :24).

Epistemology is concerned with how we learn about our social world and what it is that forms the basis of this knowledge. Two philosophies that have influenced social research are that of interpretivism and positivism. Interpretivism allows researchers to value the significance of both observing and interpreting the social world because it asserts that meaning can only be made sense of through explanation rather than cause (Ritchie *et al.*, 2014). In contrast positivism asserts that ‘human behaviour is governed by law-like regularities (Ritchie *et al.*, 2014:24) and seeks to explain this behaviour using scientific methods (McLaughlin, 2012).

Because a key feature of qualitative research is being open minded to different interpretations of what one’s truth might be, it is recognised as an appropriate research method to explain causal relationship (Moriarty,2011:3). The epistemological approach that the data collection took was that of interpretivism valuing the contribution of the lived experience of participants undertaking LSW with children looked.

Having considered the philosophical positions I recognised that a qualitative research design was most appropriate to my study as it allows for a wide range of approaches and methods which asks the ‘what, why and how questions’ (Ritchie *et al.*, 2014:3), Further it was an approach that best fitted the aims of the research as I wanted to observe what was spoken as opposed to what was measurable through quantitative methods.
Sampling and Access

A non-probability method for selecting my sample groups was used, these being both social workers in local authority children looked after team’s and foster carers who cared for children looked after. These populations were identified because I recognized that LSW a part of their responsibility through their roles and that they would most likely provide ‘the most relevant, comprehensive and rich information’ (Ritchie et al, 2014: 65) in answer to the questions.

The approach used to select my participants was purposive recognizing the characteristics that both held in their responsibilities to undertaking LSW with children looked after thus allowing me greater exploration through the questions asked in the interviews (Ritchie et al, 2014).

The participants were drawn from a small purposive sample group of social workers and foster carers valuing that the information that could be gained would be ‘rich in detail (Ritchie et al, 2014:117). Efforts were made to recruit a diverse sample group to give me more opportunity to ‘identify their different contributory influences’ (Ritchie et al, 2014:116) and to ensure that I examined the different features that arose separately. To do this effort was made to recruit 4 social workers from each area office of one local authority making 16 social workers in total and 2 foster carers from the east and 2 from the west of the county making 4 foster carers. In the end I managed to recruit 15 social workers and 5 foster carers.

To allow me to recruit the sample, initial contact with the social workers was made by requesting permission from the team managers, acting as gatekeepers, to attend one of their monthly team meetings (Ritchie et al, 2014). Emails were sent to the team managers sharing my information leaflet and informing them that I required sample groups to be diverse in order that they met the criteria of a mix of social work skill (Ritchie et al, 2014). Thereafter dates to attend a team meeting and to discuss the proposed research and the details of the project with the social workers were made. For those that expressed an interest in taking part in my research, recruitment material in the form of an information leaflet was given (see Appendix G). I also left information leaflets for the social workers to share amongst colleagues that were not able to attend the meeting requesting expressions of interest from anyone interested in taking part in the research.
Initial contact with the foster carers was made by requesting permission from the team manager, who again acted as gatekeeper, to attend one of their monthly support groups (Ritchie et al, 2014). Thereafter I attended a support group where I discussed the proposed research and the details of the project with the foster carers. An information leaflet was left with the foster carers requesting expressions of interest from anyone interested in taking part in the research.

From these meetings children’s social workers and foster carers contacted me and the research began. It soon became notable that social workers from some areas of the local authority were not forthcoming and there was a risk that I would not have a diverse sample size and so using a ‘snowballing effect’ I asked some participants if they could identify colleagues who would fit my selection criteria (Ritchie et al, 2014). Thereafter I was approached by others who requested to take part in my research.

**Research Method**

In-depth interviews were the most appropriate method to gather the data for this study. Utilising an interpretive lens, I sought to access the knowledge and views from the social workers and foster carers though co-construction of meanings and experiences. When seeking sample groups and prior to the interviews starting I shared personal information with participants outlining my reasons for undertaking this research in order address any power dynamics which could have led to the interviews feeling oppressive (Ritchie et al, 2014).

I went through the 4 stages of an interview process as outlined by Ritchie et al, (2014) by starting with an introduction and ending by winding down the interview.

Valuing that the interviews had the potential to leave participants feeling de-skilled I provided a resource and book list (see appendix E).

Whilst valuing that undertaking face to face interviews had an added advantage of being able to create a more responsive environment, due to the geographical nature of where some social workers were based, some were conducted over the telephone.

I used open questions which I derived from previous research and to limit any influencing on how the participants answered the questions I prewarned them at the beginning of the interviews that I would not physically or verbally respond to their answers as I would usually do in a conversation (Ritchie et al, 2014).

All interviews were recorded onto a dictaphone with the consent of the participants.
To ensure that I had informed consent I spoke about the aims and purposes of my research allowing the participant to become familiar with the topic in the context of the interview that was about to take place and reminded them of their right to withdraw from the study. During the interviews I used open questions and showed that I was interested in what the participants had to say and by encouraging them to talk. At the end of the interview I asked participants if I there was anything that I had missed that they wanted to tell me before moving to the final stage where I shared a resource list with the participants.

I was mindful that I knew some of my participants and so was conscious that my role of researcher was different to that of colleague and as such I needed to take an ‘empathetically neutral approach’ (Ritchie et al, 2014) during the interview. participants.

Some participants answered questions in depth grasping what was being asked of them and others required the researcher to probe a little more when they asked for clarification on a question (Ritchie et al, 2014).

**Data Analysis**

The data was analyzed using thematic analysis where I sought to discover, interpret and report on patterns and ‘clusters of meaning’ (Ritchie et al, 2014: 271) across the data and thereafter organized them into themes and subthemes. The six phases of thematic analysis developed by Braun and Clarke (2006) was utilized as a framework when analyzing my data as shown below:

Phase 1: I identified initial themes as patterns and areas of interest emerged from the data (Braun and Clarke, 2006). I continued to analyse the data as I transcribed it from the dictaphone to a word document valuing that this method allowed me to record the data verbatim. Once all interviews were completed and transcribed I read back through the data to formulate the ‘bedrock’ (Braun and Clarke, 2006:87) for the rest of the data analysis.

Phase 2: I coded the data by making notes on the word document which allowed me to identify the segments of data that were of interest.

Phase 3: To give a greater understanding of the areas of interest that were coded the initial themes and subthemes were formulated using a deductive approach. This method was driven by my theoretical interest in LSW and so provided the opportunity for me to gain a more detailed analysis of the data (Braun and Clarke, 2006).
Using a map of post it notes to help sort the codes into potential themes I started to analyse the data into overarching themes and sub themes. I then engaged with the data in a ‘recursive process’ (Braun and Clarke, 2006:86) to aid my analysis. It was during this period that I began to make more notes thus allowing me to begin to formally code the data into themes manually.

Phase 4: The themes were refined through a process of re reading all of the extracted data, disregarding some that didn’t have sufficient data to support them and merging others into other themes (see appendix H).

Phase 5: I revisited aims and objectives of the research to ensure that the themes fitted into the story that the research was trying to tell. By going back to the data and organising them into a ‘coherent and internally consistent account’ (Braun & Clarke, 92:2006) the core themes were refined (see appendix I).

**Ethical considerations**

Before embarking on this research project, ethical approval was obtained from the University of Bristol via the School for Policy Studies ethical approval processes and thereafter from the Local Authorities Research Governance Panel. It was the Local Authorities Research Governance Panel that requested that I add members to my sample group noting that it wasn’t representative of all children that are looked after. Subsequently 2 social workers working in the children with disability service with responsibility for children looked after were recruited.

One of the core principles of research is that informed consent is gained from participants to ensure that they are given sufficient information about the study allowing them to make an informed decision about whether to participate or not.

It is recognized that the participants being fully informed is not straight forward with the researcher needing to consider the notion of consent being a process and not being given in one single event (Ritchie et al, 2014). When participants contacted me, I used a ‘staged approach to negotiating informed consent’ (Ritchie et al, 2014:88) by asking them if they had a copy of the information leaflet and where necessary sent them a copy. Thereafter, at the beginning of the interviews, a copy of the information leaflet was offered again and where provided participants were given time to read it.

Prior to the interviews beginning consent was checked again to verify that the participants were willing for the interviews to be recorded. The participants were informed about timescales for when the interviews would be transcribed onto a word document. They were informed that from
that point they would be known as a pseudonym to protect their identity and that the interviews would be deleted from the audio recording device.

In accordance with the requirements of the ethics and governance panels a consent form for participants to read through and sign was given to all participants. (see appendix D)

The second ethical consideration that I needed to consider was that of maintaining the confidentiality and anonymity of my participants in order that I didn’t disclose participants names nor write up my data in such a way that they could be identified (Ritchie et al, 2014). Pseudonyms were used to prevent the identities of participants from being revealed and areas of work were not identified.

As a social worker with a sample group that worked with children and young people I was aware that participants could disclose something that may put a child or young person at risk of harm. As such I produced a confidentiality and child protection protocol.(see appendix C).

In accordance with the General Data Protection Regulation (2018) all email correspondence and transcripts of the interviews were stored securely on the University of Bristol server which is password protected and paper documents were secured in a lockable cabinet.

**Conclusion**

In this chapter I have discussed the methodological approach that this research has taken along with the framework that was used to analyse the data. I have concluded with a discussion about the ethical considerations of my study. The next chapter presents my findings and discussion.
Chapter 4: Results and Discussion

Introduction

This chapter will present the findings from the interviews with the data being organised under the original research questions with sub themes as appropriate.

What do social workers and foster carers understand the term life story work to mean?

Considering the various terms that are used to understand LSW, participants were asked what they understood LSW to mean. Three sub-themes were identified from the data:

Life story work was about engaging with the child and specifically helping the child to know their story and understand their history

All participants expressed a view that direct LSW should include talking to children about what has happened to them, why they are in care and why they are living with their foster carers. The majority of participants said that talking with children about their life stories should also be about helping them to understand and manage their feelings, interestingly reflecting the description of life story therapy outlined by Rose (2012).

It helps the child understand perhaps why that has happened because it takes away that shame, those feelings that it is all my fault. I think a good discussion with the child helps them to understand how it happened, why it happened and where they are currently (Mary).

However, some social workers, although recognising that direct LSW could help children to understand their feelings, spoke about signposting children to more experienced professionals where they felt unskilled in helping the child to manage their emotions as expressed by Vicky:

I think it can for some children but it can also bring up a lot of feelings for the children and whilst we as social workers may be in the position to address those feelings for that child and understand where they have come from, I think it is important to recognise our own limitations as social workers and sign post the children to other support services.
Whilst these views also reflect those of Conman et al (2016); Ryan and Walker, (2016); and Wrench and Naylor, (2013), they also allow us to see why LSW may not always occur as noted by Butler (2017) due to financial constraints on local authority resources.

The significance of helping the child to develop a narrative of their experiences in a way that could help them to process and manage what had happened to them was a familiar theme. An outcome from the counselling that is recommended for all children moving on for adoption (DfE, 2013):

Most kids don’t seem to have an idea of why and that is why the narrative goes on in their heads about it was all my fault (Gill).

However, whilst all participants valued the importance of direct LSW, some social workers and a foster carer spoke about children having a choice about what detail the LSW would cover, reflecting the social workers commitment to emancipatory practice reflected in social work values (BASW, 2012). Further, some participants suggested that although the child may not be ready to hear about aspects of their past at that time, the door to finding out needed to remain open for when they were ready, as Eve explains:

Some of my children may not want to have some of that understanding of their life until they are in adulthood, so actually it is whenever the time is right for that child, but we should always be exploring it in a casual way.

In contrast, some social workers, spoke about the pressures placed on them by reviewing officers to undertake direct LSW with little consideration to it being in the child’s best interests at that time. As identified in the practice literature by Baynes, (2008); Rees, (2018) and shared by Vicky:

We are quite often asked at CLA reviews what LSW are you doing and sometimes I think that LSW can be more damaging than it needs to be.
Collating and collecting memories to contribute to life story work

All foster carers spoke about seeing their role as providing children with the information that will help them to make sense of and recall the time that they spent living with them at a later time, as reflected in national minimum standards (DfE, 2011).

All of the photographs that I pass on have captions …at least they have something solid to refer back to and try and make sense of the time that they weren’t living with their family (Ruth).

Most of the foster carers spoke about creating new memories for children whilst they were in their care and wanting to help children to have positive memories from their childhoods as Pat explains:

Putting together a little diary when they were with you and the fun things they did also needs to come into it because it doesn’t need to be all sad and horrible stuff that you talk about.

This is a similar way of working to the collaborative approach to LSW as identified by Shotton (2010, 2013) who recommend that foster carers should be actively encouraged to engage children in talking about their memories.

Life story work as a process

Viewing LSW as a process was an interesting theme that came out of the data with mixed responses from foster carers and social workers dependent on the type of LSW that they were alluding to. Some social workers like Tracy felt that any direct LSW had to be a planned piece of work that involved the child in the planning of the work as well as involving the team around the child. A theme identified in practice literature when discussing therapeutic LSW (Rose, 2012; Treisman, 2017).

It just needs a lot of careful thought and planning when you take on LSW and involving other people around the child like the school or CAMHS or foster carer, supervising social worker and the child themselves.

In contrast some social workers felt that they should be flexible in their approach when communicating with children about their life stories, with some being mindful that a planned piece of LSW may not come to fruition as Natalie shared:
I think you need to be super flexible and adaptive and have many back up plans like multiple back up plans and also no expectations of that child and how they will deal with it.

The foster carers that did direct LSW with children valued being able to do LSW in a flexible and adhoc way speaking of the value of there being times and opportune moments to engage in a dialogue with a child about their stories which allowed the child to be more receptive to the information they would hear.

If they seem to be in the mood to talk about it and to do it then that would be the prime time for me to do that work with them as oppose to scheduling in a time that might not be so great with them (Pat).

The differing views reflects the human rights principles of social work practice that recognises that any direct work with children should be child centred and undertaken at a child’s pace (BASW, 2012) and the values of listening to the wishes and feelings of children as stipulated throughout legislation pertinent to children and fostering standards DfE, (2011).

When asked when LSW should start the response from social workers was varied with some saying that it should start from as early as when social workers were first involved with families:

From the minute children’s social care become involved. Errm I think regardless of if the children are staying in the care of their parents or are in foster care or adoption (Vicky).

Of interest was that Vicky was the only social worker who commented on using words and pictures although one other, Fiona, did state that although she had done the training for words and pictures she didn’t see that it was directly linked to LSW.

Natalie shared her frustration when LSW had not been started for children who are looked after at an early stage.

I think that is one of the frustrating things is being in the long-term team with looked after children, I think you find so many young people coming through where LSW should have started in the home to help them understand their history.
The differing opinion highlights a tension for social workers who may not have been the worker involved at the time that the child was removed from their families and demonstrated a challenge for social workers when they are allocated a case and must make decisions about doing direct LSW with children.

All of the foster carers expressed a view that LSW would start with the collation of memorabilia and photographs for the child from the beginning of the time they were placed with them:

   From day one for our children what do we do? We save their first tooth we save their first bit of hair we save everything (Sally).

These findings reflect the views of children who highlighted the value they gave to material possessions in the studies by Selwyn and Briheim-Crookall (2017) and Ward (2011).
Challenges faced by social workers and foster carers when undertaking life story work

Here four sub-themes derived from the data:

Skill needed by the social worker or foster carer to undertake life story work

The majority of social workers expressed a lack of confidence when undertaking direct LSW with children as reflected in research and practice literature Romaine et al, (2007); Sunderland, (2015); Turley & Tuckey, (2007); Wrench & Naylor, (2013). Natalie explained:

I question my ability a lot, and then I’ve got a manager who always says that I am really good at direct work but then I think well you haven’t seen it, and so how can you say that, and then I question myself again, like I suppose it is a confidence issue.

Fiona expressed a view that LSW should be taught as part of the social work qualification by universities in order to prepare social workers to undertake this direct work, a deficit noted in Baynes’ (2008) article on LSW.

There is a lack of training in the university for LSW and I was fully under prepared to take on LSW.

Support given to the social worker or foster carer when undertaking life story work

A lack of support from managers and specifically limited recognition about the time needed to collate the information and undertake the direct LSW was identified as a major challenge for the majority of social workers:

Yeah lack of time, rushing other immediate tasks overtaking those are my worries not having the time to do a proper job (Owen).

Ensuring that workers have the time to carry out direct LSW was identified as essential in the practice literature by Ryan and Walker (2016) and recognised as being one of the reasons why LSW is not carried out Baynes, (2008); Hooley et al, (2016); Rees, (2018); Wrench & Naylor, (2013).

Some social workers described feeling hindered by a lack of available resources that would support them to do direct LSW with their children as also noted by Bayne’s (2008).

The challenge I have is finding appropriate tools for the children I work with who are non-verbal who have real challenges with their communication (Harriet).
The majority of participants referred to Rees’ (2009) model when talking about making the life story book. A familiar theme was that participants start with where the child is at now rather than starting from the child’s birth. A model identified by Watson et al (2015b) which was valued by adoptive parents.

**Anxiety experienced by the social worker or foster carer when undertaking direct life story work with the child**

Over half of the social workers spoke about feeling anxious when undertaking direct LSW with some like Tracey recognising that the child’s emotions had a personal effect on them. A familiar theme in the practice literature and research where it is noted that LSW can invoke emotional reactions in the workers (McMullan, 2008; Rose, 2012; Wrench & Naylor, 2013):

> The child was sobbing and I felt quite uncomfortable, and I was trying to reassure him, and I found myself quite emotional because it is hard, how you close it down, because you don’t want to close it down and walk away because you are leaving that child with all those feelings, so you want to share that emotion, and that was quite difficult.

A barrier to undertaking direct LSW identified in the practice literature by Wrench & Naylor (2013) who recommend that workers have access to good quality support and supervision when undertaking direct LSW.

Others were concerned with how a child may respond to what they would be told, indicating that there was recognition that children will respond differently, and that a social worker needed to be able to manage and act upon whatever emotion the child showed, Hooley et al, (2016):

> It very much depends on the child, because you know some children will respond violently or aggressively and you know that they need to go through that going up before they can come down. Whereas you know for some children, you know they are going to nod and smile and you know on the inside, there is real turmoil (Jan).

Both social workers and foster carers described the harm caused to children when LSW was carried out poorly as confirmed in earlier writing by Fahlberg (1981) who urges caution, noting that the work can both raise and lower a child’s self-esteem as Ruth shared:

> I have seen for example a life story book where they have said you got excluded from school because you licked this child’s willy, that is not appropriate.
Social workers expressed concern that they could re-traumatisate children when talking about their past, suggesting that social workers are hesitant to talk with children about some of the more difficult information:

It just feels like a minefield and that stuff around traumatisation I really worry about that (Harriet).

This was also highlighted in the research by Watson et al (2015a) where a lack of training was identified as being a barrier to hearing a child’s pain and listening to their stories of trauma. But as noted by Sunderland (2015) when we fail to allow children to express themselves we are blighting their emotional and social development.

In contrast some social workers recognised when they were not skilled enough to deal with some of the child’s trauma’s and spoke about seeking support from a trained professional. A view held by Ryan and Walker (2016) and Rose (2012) and shared by Fiona:

Sometimes the management of those feelings might fall under therapeutic interventions with professionals who are better trained within that arena.

However, others valued the support they were able to gain from colleagues who had more experience in doing LSW:

I have spoken to colleagues that you know have got experience and done LSW, I have looked at other people’s ideas (Lisa).

Consideration to the roles and responsibility of both social worker and foster carer when planning and carrying out life story work

There was a mixed response from foster carers about whose responsibility it was to carry out direct LSW with half viewing it as a joint piece of work that was undertaken with the support from others, similar to the model developed by Rose (2012).

I think you need more than just the foster carers doing the work. Personally, I think it needs to be the social worker or support worker, so somebody who can spend the time and get to know the child (Den).

However, Gill stated that it is usually the foster carer who has the longest lasting relationship with children, arguing that as social workers come and go they are therefore best placed to do the work:
I think that we have found it easier for us to do LSW than the social worker. Often because for many different reasons, the social worker changes so often and is often why LSW doesn’t happen.

However, the majority of social workers viewed undertaking direct work with children as being their responsibility, as directed in the Children Acts 1989 and 2004 (Children Act, 1989, 2004), but were prevented from doing the work largely through a lack of time as identified by Vicky:

All of the social workers in the team want to do LSW and want to have that relationship with the child and be able to spend the time with them, to help them understand what they have experienced, but the time is not there, and that is my biggest concern, that these children are not getting the LSW that they need.

Ensuring that workers have the time to carry out direct LSW was identified in the practice literature by Ryan and Walker, (2016) and was recognised as being one of the reasons why LSW is not carried out Baynes, (2008); Hooley et al, (2016); Rees, (2018); Wrench & Naylor, (2013). This research has identified a conflict of roles and potentially a lack of clarity about responsibilities in carrying out direct LSW highlighting the need for further research.

However, a consistent theme from both social workers and foster carers was that having a good relationship with whoever carried out the LSW with children contributed to this being the most appropriate person to undertake direct LSW as illustrated by Lisa:

I don’t like it if some random new person is brought in just to do LSW because to me doing something as important and as personal and as massive to a child should be done with someone that they have already got a relationship with.
Factors that contributed to life story work being done well

Here three sub-themes derived from the data:

Contributions to life story work from others

It was consistently reported that social workers and foster carers valued getting information from birth families as soon as possible to inform LSW. Where birth parents were unable to provide information extended families were seen as a valuable resource to inform LSW as also identified in the research by Watson et al, 2015a and a core principle of partnership working in ethical social work practice BASW, (2011):

Parents if they are involved is really important and in fact it is really difficult if you haven’t got the parents around to get the information (Barbara).

Similarly, both social workers and foster carers recognised that the contribution from others who had worked with the child was an important aspect of collating memories and gathering information to inform LSW as identified by Sally:

He was doing art work, they let me have some things that I could take home that could be dated for his LSW.

Social workers such as Tracey were knowledgeable about the requirement to collate the information from a variety of sources to inform their own understanding of the child’s story.

Foster carers, previous safeguarding social workers, erm the contact team, it depends on the work we are trying to do. Really trying to find out the information so that I make sure I have correct information.

Some social workers felt that managers recognised that they needed additional time to carry out LSW and valued the contribution this made to them doing direct LSW with children as identified by Mary:

I have noticed management, that if you tell your supervisor that you have got LSW to do then obviously you can make some protected time, but you need that, and it is recognising the importance, and I think for quite a long time that importance has not been recognised.

Involving children in LSW was seen as an important contribution to LSW by both social workers and foster carers.
We got her photos out from when she was little and the ones that came from her aunt. We put them into a book together to make her own chronology (Gill).

Indeed, having an understanding that the child would always know more than what the social worker, foster carer and files report was noted by participants. The importance of this was seen when working with the child to look at what they knew and what they understood whilst being open minded to discovering new information and using this to help children process things differently, a central feature of Rose’s (2012) model of LSW:

Some of the things that you might think are significant may not be significant to that young person. They might have a very different view about the things that are significant, so even if you think you know everything you probably don’t know a lot of the things that are really significant to them, and what they would want to include in that life story (Harriet).

Involving the team around the child to help them to manage the emotions that doing direct work brought up was valued by social workers such as Ruth:

If I was going to tell the child anything significant I would tell the school that this is going to happen and that this is going to impact on their day.

Involving their own families in the LSW, similar to Shotton’s (2013) memory store approach was valued by the majority of foster carers in order to help children make sense of, and process things through the additional conversations they could have, as identified by Pat:

We worked as a family with the last child really that we did the life story with. I initially started it with him and he wanted to show the others and tell them what we had talked about.

However, the majority of social workers sought an active contribution from foster carers when doing direct LSW showing regard to the ethical principles of social work practice (BASW, 2012) valuing that foster carers were the ones that knew the child best and that they would need them to support the child once they had gone home.

I always include the foster carers … I think otherwise if we open a can of worms and talk about the child’s experience when we are with them and we then leave the home … the child isn’t going to speak to their foster carer about that because they don’t know if they know or if it is safe to talk to them about it (Vicky).
The attitude of the social worker or foster carer and the approach they took

As replicated in national minimum standards (DfE, 2011) and ethical codes of social work practice (BASW, 2012) both social workers and foster carers felt that traits of being interested in doing LSW, being non-judgmental, empathetic, creative and honest were required of the worker to facilitate the development of a good relationship with the child and to contribute to LSW being carried out well. As illustrated in the comments below:

- An interest first of all, a want to provide that information (Sally).
- Empathy and an ability to look through the child’s perspective (Ruth).
- Being creative, using a child’s imagination, using your own imagination (Barbara).

LSW being understood through child centred practice is recognised as being vital to informing the plan of LSW Rees, (2018); Rose, (2012) and Treisman, (2017) and was significant in the data as Lisa explains:

- To think about it from the child’s view so to be really, really child focussed and focus not on children generally but to have some understanding of that child and where that child is now and were that child has been and what is going on.

This is significant and whilst Rose (2012) postulates that an assessment needs to be undertaken to ensure that LSW is led by the child’s needs, more research needs to be undertaken to develop a framework for assessing this need and ensuring the timeliness of direct LSW.

The majority of social workers and foster carers were clear that if a child became distressed during LSW that they would stop. However, some stated they would do this in collaboration with the child and that it was dependent on the level of distress and their ability to support the child. However, Hooley et al (2016) note that key to successful LSW is that children are encouraged to express their emotions. Indeed, some foster carers and social workers said that they would expect that a child would get upset when talking about difficult experiences or memories as told by Carol:
I think you gauge that as a worker because you have that relationship with the child. But naturally perhaps you would expect them to get upset during the course of looking back through their journey and talking about their experiences, and I think that when they become upset you need to explore that with them and help them through it.

When asked if children needed to be settled before LSW could start, the majority of social workers spoke about it being helpful if children were, but as shared by Barbara and identified in the research by Conman et al, (2016) and Fisher, (2016), doing LSW at key transitional times could be beneficial to children:

I think when they are going through big transitions or when they are first coming out of really traumatic situations, when they are transitioning to a new situation, however I also think from a therapeutic point of view that those times are actually really key.

And both foster carers and social workers, whilst acknowledging that doing LSW with a child would be easier if they were settled, recognised that for some, not having a coherent life story contributed to them being unsettled as illustrated by Eve:

But sometimes children become unsettled because they don’t have that understanding about their life, so, it might be that full life story doesn’t take place but bits and bobs to give them that better understanding, to give them that narrative and understanding of their life might help to settle them.

It was a consistent theme across the data that social workers felt that they needed to know the history of a child before doing direct LSW as shared by Iain. But in contrast foster carers were happier to have some information and build on this with the child:

Yes, it is very, very true because everything that you are going to be talking about is a part of their history, so you really need to know their history.

The majority of social workers valued the significance of reading the child’s case file to inform direct LSW and both foster carers and social workers said that the file needed to be carefully read as expressed by Natalie:

You need to read so much on the system because there are so many little tiny things that are absolutely massive to the child, but on the system, they might be one line.
The challenge with this, as already identified, is that social workers are saying that they do not have time to undertake direct LSW (Stevenson, 2018). It is difficult to know how they will find the time to read the case files of all of the children that they are responsible for when statistics state that social workers have an average case load of just over 17 children (DfE, 2018).

**The experience and skill of the social worker and foster carer and the training they had received to carry out life story work was important to life story work being done well**

Social workers and foster carers who were experienced in LSW and knew their children well, were generally more confident to do LSW, as identified by social worker Ruth:

> I feel quite confident about doing that. I know it can be quite difficult and that it is something that no social worker enjoys doing, but I think it comes with something, for example our children in the looked after team, we know our children.

Similarly, all of the foster carers shared confident views when talking about collating memories for the children they cared for, and how they recorded these memories as expressed by Den:

> It is not just about having the memory box because …over time you can forget what it is, so if you have got a bit of information that goes with that, like a bag or something, then it is easier for them to look back and say, oh that was then rather than what is this?

Social workers and foster carers who knew children well felt better able to manage the child’s emotional responses during direct LSW and felt confident recognising when they needed to move away from the topic. As articulated by Carol:

> The professional needs to know the child well enough to know if they are struggling, because they might not always tell us, but we might see signs in their behaviour where we can gently ask them if they are okay or make that decision to stop for them if you think it is a bit too much.

Of significance is that a core aspect of any direct work with children is building in the time to get to know a child and indeed is part of the process advocated in the LSW models suggested by Rose, (2012); Rees, (2018); and Wrench and Naylor, (2013).
Summary

This chapter has presented the findings from the interviews exploring the views and experiences of 15 social workers and 5 foster carers about LSW with children looked after. The results were grouped into themes that addressed the specific research aims and were discussed through a comparison of the views of both the social workers and foster carers with the data being considered in the context of the published literature and other studies identified in the literature review.
Chapter 5

Conclusion

Overall, the study successfully achieved its aims, highlighting some issues that were previously known in the practice literature and revealing others that have been identified through the interviews with social workers and foster carers. Most notably that LSW for children looked after is a process that requires ongoing review and appraisal to ensure that the practice of it is child centred and continues throughout the child’s journey into adulthood. To do this statute and guidance is required to allow decision makers to prioritise this important work. The study identified varying skill and knowledge that could be addressed through more specialist training and understanding of LSW for both social workers and foster carers. It identified time as a significant barrier to undertaking this work as well as it could be, with relationships with the worker being key to successful direct LSW. As a requirement in all social work practice it highlighted the significance of good quality support and supervision for the worker undertaking this work.

Practice and Policy Challenges/Recommendations

1. The National Minimum Standards (2011) is clear in its expectations of foster carers pertaining to collating memories and memorabilia for the children that they care for and as such foster carers are skilled, knowledgeable and confident to carry out this role. However, clear guidance about the responsibilities for social workers to carry out direct LSW with all children who are looked after is missing from statute. As such there is no clear direction in practice guidance and standards that allows decision makers to ensure that social workers are skilled in undertaking direct LSW. This lack of statute has meant that social workers do not always feel confident, skilled, and able to carry out this vital work.

2. It was evident in the findings that LSW with children looked after is a process and not a one-off event. Nor is it something that can be addressed through one planned out piece of work as the findings are clear that children may not always be receptive to the work at that time, or on that day. This does not underestimate the value and significance of undertaking planned pieces of direct LSW nor the importance of signposting children to more specialists’ services.
But, what we need to get better at doing is looking at how we can incorporate conversations that answer the what, why and how questions for children in a way that offers them a sense of security, one that takes away feelings of shame or blame and in a way that allows social workers and foster carers to feel confident in the conversations that they have with children looked after.

3. How children’s life stories are collated over time where children, social workers and foster carers can access it in a timely way needs to be considered in further research.

4. This study highlighted the need to have a decision-making tool and framework to assess what LSW needs to be undertaken with and for a child looked after. This framework needs to address how social workers and foster carers can help to facilitate the work at the varying stages in the child’s development and at times when the child is more receptive to wanting to know the what, why and how answers that will help them to develop a coherent narrative of their life experiences. It needs to identify the responsibilities of those involved in the work with a thorough understanding of what the child knows, what they need to know and the best plan of support to do that, thus ensuring that the work is child centred.

5. It was notable in the study that social workers and foster carers are not always working together to do joint pieces of direct LSW with children, although some spoke about involving foster carers and others. How they can both work together collaboratively, identifying the appropriate skill set of both foster carer and social worker to ensure that the child gets the best experience of LSW requires further research.

6. Social workers showed a lack of confidence and skill in carrying out direct LSW with children whom they recognised could present with some challenging behaviours. Further, social workers recognised that the child’s trauma influenced them personally and as such they found it difficult to contain their emotions and that of the child. Although some had received training, it wasn’t sufficient enough to allow them to carry out this vital work with confidence. A lack of support through both supervision and training was also evident in the findings.
7. The study identified that time was a barrier to undertaking direct LSW and collating the information required to undertake the work by social workers. It is hoped that if statute is made about undertaking direct LSW with all children that are looked after and not just for children who are moving onto adoption, that decision makers will go some way to ensuring that social workers have the time to carry out this vital work.

**Limitations and Further Research**

This was a small scale qualitative study that has some limitations, namely that the participants may not have been representative of all of the views and experiences of social workers and foster carers in this local authority, or of those working for other local authorities in the United Kingdom. It would be advantageous to address this limitation by conducting a large-scale study comparing the practice, skill and knowledge pertaining to LSW of a wider sample size of both social workers and foster carers within other local authorities.

Further limitations of this study can be seen in that the findings identified different practice and understanding of LSW amongst the foster carers which could reflect the different ages of the children that they care for. A larger sample size of foster carers which could limit research bias to gain a better understanding of the roles and responsibilities pertaining to the age of children that foster carers care for is required.

The findings also identified a limitation in the sample size of social workers, namely that they held responsibility for children who were looked after. A research bias can be seen in that the views of social workers in other areas of practice such as safeguarding were missing from the data.

The study also highlighted the issue of research bias as the researcher knew a third of the sample group and so participants may have felt influenced to answer the questions differently to how they may have answered with a researcher they did not know.

**Summary**

Unlike any other research undertaken to date, the fundamental aims of this study were to explore the concept of LSW with children looked after within a local authority setting, through the knowledge and experience of both social workers and foster carers.

It highlighted a lack of statute and a framework for assessing the life story needs of children looked after in order that the work becomes more child focussed.

It highlighted that without the resources of funding, time and training LSW, important for children looked after will remain neglected.
What is taken for granted when children live at home with families where they can reminisce and ask questions about their histories is arguably being denied for children who are looked after. As Sunderland (2015) notes:

This often means that as long as we don’t talk, the pain is manageable, when in fact for many children the pain is so unmanageable that it means they are living their lives reeling from unbearable arousal – exploding with aggression or imploding with anxiety, depression blighting their ability to learn, to love, to make friends, to develop emotionally and socially’ (Sunderland, 2015:25).
References


Appendices

Appendix A

Ethical Approval Form

SPS RESEARCH ETHICS
APPLICATION FORM: U/G and TAUGHT POSTGRADUATE STUDENTS

This form must be completed for each piece of research carried out by all undergraduate and taught postgraduate students in the school for policy studies.

Doctoral (PhD/DSocSci/DEdPsy) students should complete the staff and doctoral students form which is submitted to the school research ethics committee.

Students should discuss their proposed research with their supervisors who will then approve and sign this form before forwarding to the relevant dissertation convenor, unit convenor or programme director. Failure to get approval prior to conducting any fieldwork may result in the university taking action for research misconduct – the outcome of such action may be that your degree is not awarded and/or that you are unable to submit your fieldwork findings for assessment.

Depending on the nature of the research you wish to conduct, it may be necessary for you to get additional approvals and checks. This may involve submitting a full application to an NHS research ethics committee (NRes) or submitting your SPS application for review by the SPS research ethics committee. You should discuss this with your supervisor. It is your responsibility to ensure that you have enough time to obtain these approvals prior to conducting any fieldwork.
This signed form or a copy must be submitted as an appendix to your dissertation. If appropriate, a copy of approval from the SPS rec or other rec committee should also be in the appendix to your dissertation.

SECTION ONE: GOVERNANCE

1. NHS RESEARCH ETHICS APPROVAL

Who needs to provide Ethics approval for your project?

The School will only consider those projects which do not require ethical approval from elsewhere. As such, you should make sure that your proposed research does not fall within the jurisdiction of the NRES system:

http://www.nres.nhs.uk/applications/approval-requirements/ethical-review-requirements/

If you are not sure where you should apply please discuss it with your supervisor.

Currently NRES are not expected to consider applications in respect of activities that are not research: i.e. clinical audit, service evaluation and public health surveillance. In addition REC review is not normally required for research involving NHS or social care staff recruited as research participants by virtue of their professional role. Social care research projects which are funded by the Department of Health, must always be reviewed by a REC within the Research Ethics Service for England. Similarly research which accesses un-anonymised patient records must be reviewed by a REC and NIGB.

2. LOCAL GOVERNANCE

If your project involves access to patients, clients, staff or carers of an NHS Trust or Social Care Organisation, it falls within the scope of the Research Governance Framework for Health and Social. You will also need to get written approval from the Research Management Office or equivalent of each NHS Trust or Social Care Organisation.

3. DISCLOSURE AND BARRING SERVICE CHECK

Do you need a Disclosure and Barring Service check?

The Disclosure and Barring Service (DBS) replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA). Criteria for deciding whether
you require a DBS check are available from:
https://www.gov.uk/government/organisations/disclosure-and-barring-service/about

You should specifically look at the frequency, nature, and duration of your contact with potentially vulnerable adults and or children. If your contact is a one-off research interaction, or infrequent contact (e.g.: 3 contacts over a period of time) you are unlikely to require a check.

If you think you need a DBS check then you should consult the University of Bristol web-page.
http://www.bris.ac.uk/secretary/legal/disclosure/crbhome

If ‘yes’ then please discuss with your supervisor and check the university guidance to determine whether you will need to apply for DBS clearance PRIOR to conducting your research.

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<thead>
<tr>
<th>Do you require such clearance?</th>
<th>Yes</th>
<th>No</th>
<th>X</th>
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</thead>
<tbody>
<tr>
<td>Have you received clearance?</td>
<td>Yes</td>
<td>X</td>
<td>No</td>
</tr>
</tbody>
</table>

SECTION 2: STUDENT, ADVISOR/SUPERVISOR AND PROJECT DETAILS

4. STUDENT’S NAME:

Louise Carvell

5. PROGRAMME:

MSc Advanced Social Work with Children and Families

6. YEAR OF STUDY:

2018-2019

7. PROJECT ADVISOR/SUPERVISOR:

Dr Debbie Watson

8. DATE DISSERTATION IS TO BE SUBMITTED:

8th September 2018
9. **PROJECT TITLE:**

Life Story Work with Children and Young People who are Looked After.

*If your research involves secondary analysis of data, please go to question 11.*

**SECTION THREE: THE RESEARCH**

10. **FOR THOSE INTENDING TO CARRY OUT PRIMARY RESEARCH:**

*Who are your participants and how are you contacting them?*

<table>
<thead>
<tr>
<th>a)</th>
<th>Describe your research participants. What populations form the basis of your sample? (e.g. general population, lone parents, mature students etc). Identify if your participants come from a vulnerable group (e.g. homeless, victims of crime etc). How many people do you expect to recruit?</th>
</tr>
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<tbody>
<tr>
<td>The participants will be drawn from a purposive sample group of Social Workers working in Children Looked After Teams and Foster Carers caring for the children and young people within a Local Authority in the South West of England.</td>
<td></td>
</tr>
<tr>
<td>The Social Workers are employed by the Local Authority and are all registered with the Health and Care Professions Council. Given the professional status of my sample groups I do not consider them to be vulnerable.</td>
<td></td>
</tr>
<tr>
<td>The Foster Carers are all approved to care for children and young people who are looked after by the Local Authority and receive training and support to enable them to carry out this role. They are supervised regularly and at least monthly by a Supervising Social Worker and so I do not consider them to be a vulnerable sample group.</td>
<td></td>
</tr>
<tr>
<td>I plan to recruit 4 Social Workers from each area office making 16 Social Workers in total. I plan to recruit 3 Foster Carers working from the East and from the West of the county making 6 Foster Carers in total.</td>
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</tbody>
</table>

| b) | Describe the source(s) of your participants and the selection criteria. Specifically, how will you find potential participants, and how will you contact them? Bear in mind that in most cases it is not appropriate for researchers to contact individual potential participants directly (e.g. service users should be informed of any research by the service and not by the researcher). |
To enable me to access participants and carry out the research I have been given the permission from a Strategic Manager in the Local Authority. Further permission will be sought from the Local Authorities Information and Research Governance department, following ethical clearance.

I will be seeking to source some of my participants from Children’s Social Care Teams within a South West Local Authority. Within this Local Authority there are 4 area offices each with different teams which seek to safeguard the welfare of the children of whom they are responsible for. Within each area office is a group of Social Workers who work in Children’s Looked After Team’s.
The selection criteria will be purposive sampling of Social Workers who have specific responsibility for promoting and safeguarding the health and welfare of children and young people who are looked after by the Local Authority. Initial contact with the Social Workers will be made by me requesting permission from the Team Managers to attend one of their monthly team meetings. I will thereafter arrange dates for me to attend a team meeting and will discuss my proposed research and the details of my project with the Social Workers. I will thereafter provide a letter of invitation and an information leaflet with my university contact details on requesting expressions of interest from anyone interested in taking part in my research.

I will be seeking to source some of my participants from the Children’s Social Care service within a South West Local Authority. Within this Local Authority there are 2 area offices each holding responsibility for the support and continuing professional development of their Foster Carers. Within each area office are Foster Carers who work alongside Social Workers sharing the responsibility of promoting and safeguarding the health and welfare of children and young people who are looked after.

The selection criteria will be purposive sampling of Approved Foster Carers. Initial contact with the Foster Carers will be made by me requesting permission from the Team Managers to attend one of their monthly support groups. I will thereafter arrange dates for me to attend a support group and will discuss my proposed research and the details of my project with the Foster Carers. I will provide a letter of invitation and an information leaflet with my university contact details on requesting expressions of interest from anyone interested in taking part in my research.

c) Are you advertising for participants or posting a notice for volunteers? If yes, attach a copy of the advertisement, notice, email or web post.

<table>
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<th>No</th>
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d) Are you using a questionnaire, interview, focus group as part of your procedure? If yes, attach a copy of the questionnaire(s), topic guide and/or interview questions.

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<th>Yes</th>
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e) Will you be asking questions that might disturb your participants emotionally or produce stress and anxiety? If Yes, what plans do you have to deal with this? For example, what support can be provided to them? If you intend to give participants a list of support services, please provide a copy with your application.

There is a risk that my questions could cause some stress or anxiety specifically around the notion that some Social Workers and Foster Carers may feel angst about feeling unskilled in carrying out life story work or they may notice some gaps in their knowledge. I will provide some information sheets outlining some resources that may assist Social Workers and Foster Carers to undertake purposeful life story work.
f) Do you consider any of your participants to be especially vulnerable and/or especially at risk of harm? If yes, what risks do you anticipate and how are you planning to deal with them? For example, a survivor of abuse may be at further risk from the perpetrator if they take an information sheet away with them. Please note that in most circumstances, professionals who are being asked about their professional role and being offered anonymity would not be considered at risk of harm.

I would not consider any of my participants to be vulnerable or at risk of harm.

Informed consent and researcher safety:

g) Information for participants: what information will you be giving to participants? (E.g. letter of introduction, outline of project’s aims, participant information sheet etc). Please attach copies of any such information to this form.

Participants Information Leaflet.

h) Informed consent: what procedures will you follow to ensure all of your participants give informed consent (i.e. that participants know exactly what they are agreeing to and what you will do with the information they provide)? You should consider whether participants have the capacity to give informed consent, provide enough information so that consent is informed, and provide copies of any consent forms with your application. Participants should be asked to put their initials to show they give consent for the specific points on the form. Where written consent is not possible, you should explain your consent process in detail (i.e., will consent be audio recorded?):

Participants will be provided with an information leaflet which will outline the purpose of my research and its aim. The leaflet will outline that their participation will involve a recorded interview on a dictaphone which will last no longer than 45 minutes. They will be advised on how I will seek to ensure that their details and information that I gather from them will be anonymised and kept confidential. All participants will be informed that their participation is voluntary and that they can withdraw from the research at anytime.

I will provide a consent form to the participants who have expressed an interest in taking part in my research which will require participants to initial the form at specific points to indicate that they have given consent prior to the interview taking place. Thereafter and at the beginning of the interview I will go over the consent form to check that participants are still happy to provide consent to participate in my research.

In terms of the recording of interviews, permission for this will be on the consent form. I will also ask again at the start of the interview when going through what will happen. If a participant does not want to be recorded I will ask permission to take notes.

i Confidentiality and anonymity: how are you going to anonymise the data you

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To prevent identities from being revealed, all data will be anonymised and individuals will be given a serial number which will be assigned to their research data.

Social Workers and Foster Carers will be requested to refrain from sharing identifiable information about the children or young people with whom they have undertaken life story work with. Should the interviews invoke discussions that identify different children or young people the participants will be asked to use pseudonyms so as to keep protected any identifying features of the children and young people.

Interviews recorded on a dictaphone will be downloaded onto my university secure server, transcribed and deleted from my dictaphone within one day of the interview. Participants will be given the opportunity to review the transcripts so that they can highlight any identifiable information that could render their interview to breach confidentiality.

Any emails that participants send to me will be kept separately and in a different file to the file where data from their interviews will be stored.

Any identifying information about the participants will not be shared with anyone else apart from my dissertation supervisor.

| j) **Researcher safety:** are there any potential risks to you in undertaking this research and how will you deal with them? Where will the fieldwork take place? Who will you notify with details of where and when you are doing the fieldwork? Will you take your mobile phone with you? Please explain your plan for ensuring your safety and explain who will be notified about where you will be and when you are due to return. Note that you should not conduct research in someone’s home if you do not know them and are alone. You may need to have a research safety protocol which should be discussed with your supervisor. |
| All interviews with participants will take place in the local authority’s offices where there will always be other professionals working. |
| I believe that the risk to me as a researcher is minimal given the professional status of participants. However, in terms of maintaining high standards of researcher safety the following will be adhered to: |
| When completing the fieldwork I will inform my husband and a fellow student of my whereabouts and how long I anticipate being away from home. I will contact my husband once finished to let him know I am safe and out of the building. I will have my mobile phone with me at all times and can contact either one of them should I be at risk of harm. |

11. **For those intending to carry out secondary analysis of data:** N/A
SECTION FOUR – DATA MANAGEMENT

12. Where is your survey data stored?

If you intend to use an on-line survey (for example Survey Monkey) you need to ensure that the computers they use are based in an EU country (or Iceland & Norway) and not in the USA. Please confirm that no data will be sent outside of Europe.

No data will be sent outside of Europe.

13. How will you manage your data?

How will the data you collect be stored? All identifiable electronic data should be stored on the university password protected server. If this is not possible you should ensure that your home computer or laptop is password controlled and secure. Data should be anonymised as soon as possible and identifying files kept securely away from anonymised data. Unanonymised data should never be stored on a memory stick or digital recorder (obviously it may be necessary on your return journey from an interview). Any physical data such as cassette tape, minidisc, or paper files should be locked away in a secure draw or cabinet. Please tell us where this physical data will be stored and whether you have any concerns about security at this location.

My laptop is password controlled and secure. All identifiable electronic data such as emails and data from my interviews will be stored on my Bristol University password protected server.

Data will be anonymised as soon as possible after I receive it and identifying files will be kept securely away from anonymised data. All recordings taken on a digital recorder will be anonymised using codes and will be transcribed as soon as possible after recording and thereafter deleted from the digital recorder.

All physical data such as paper files and my digital recorder will be locked away in a secure cabinet which is stored in a cupboard in my home which is securely locked. At all times.

14. Will your data be available to others?

What are your plans for the long-term preservation of the data? Will the data storage be stored in a way that will enabled it to be accessed by other researchers? Will the data be destroyed/deleted at any point? If so, how and when will this be done? For example, reformatting tapes or discs, confidential shredding of paper waste etc).
There are no long term plans for the preservation of the data. Any data that I collect will be destroyed or deleted for example from the university server and confidential paper copies of data will be shredded - this will occur once my degree has been awarded. Until then it will be kept securely either in a locked cabinet or on the university server.

**SECTION FIVE – OTHER DOCUMENTS**

**15. What documents are you submitting with this form?**

**Additional Material** - please identify which of the following additional materials you have attached to this application and attach in the order listed? (helpful for reviewing lots at same time!) Please collate the form and attachments into one document before submitting to your supervisor/ unit convener.

<table>
<thead>
<tr>
<th>Additional Material</th>
<th>Number of Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participants information sheet (s)</td>
<td>One Information Leaflet</td>
</tr>
<tr>
<td>Consent form (s)</td>
<td>One Consent Form.</td>
</tr>
<tr>
<td>Confidentiality protocol</td>
<td>One Confidentiality and Child Protection Protocol</td>
</tr>
<tr>
<td>Researcher safety protocol</td>
<td></td>
</tr>
<tr>
<td>Recruitment letters/posters/leaflets</td>
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<tr>
<td>Photo method information sheet</td>
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<td>Photo method consent form</td>
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<tr>
<td>Risk assessment form</td>
<td>Covered in Participation Information Sheet.</td>
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<tr>
<td>Support information for participant</td>
<td></td>
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<tr>
<td>3rd party confidentiality agreement</td>
<td></td>
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<tr>
<td>Other information</td>
<td>Life Story Resources List</td>
</tr>
</tbody>
</table>
SECTION SIX: CONFIRMATIONS AND SIGNATURES

A: Student:

I certify that the statements made in this request are accurate and complete, and if I receive approval for this project from my supervisor/unit convener I will conduct my research as stated.

I agree to inform my advisor/supervisor/unit convener in writing of any emergent problems or proposed procedural changes and that I will not proceed with the research until any proposed changes have been reviewed and approved.

I have attached all of the relevant documentation necessary to carry out this research.

I am aware that this form and, if necessary, REC approval from the SPS REC or NHS must be included in an appendix in my dissertation.

B: Student advisor/supervisor: Please tick the first box and one of the subsequent boxes:

I have reviewed this form.

I approve the information in this form and do not think higher level approval is necessary.

I have sought advice from the SPS REC, this advice has been headed and approval has been given.

This form should be examined by the SPS REC.

This project has been submitted for ethical approval from an NHS REC.

C: The dissertation convener, unit convener or programme director, on behalf of PS REC:

Approval is granted to this project

This form is being referred to the appropriate SPS/NHS REC.

Signature………………………… Date: …15th April 2018
Appendix B

Research Governance Approval

From: ***
Sent: 18 April 2018 11:25
To: ***
Subject: Research proposal - Louise Carvell - Life Story Work with Children and Young People who are Looked After

Dear Colleague,

Thank you to those of you who have responded to me on the above.

I am pleased to advise that, following Louise’s responses to the Panel’s questions, I now have the number of approvals required for this research proposal to go ahead.

I have copied this e-mail to Louise so she is aware.

Louise – please keep in touch about the progress of your research and let me know when it is completed – we can then arrange for you to deliver your findings through our programme of Masterclasses. Good luck with your study – I hope it goes well.

Kind regards,
***
Appendix C

Confidentiality and Child Protection Protocol

All research activity will be conducted within a Local Authority and so it is highly unlikely that the researcher will have to respond to a disclosure or incident without other professional involvement. However social workers and foster carers will be assured that any data collected will be treated in confidence with the following proviso:

- In the event that the researcher is told something that causes them concern for a child or young person then the following steps will be taken:
  - The researcher will discuss the fact that they need to pass the information on with the social worker or foster carer concerned first and explain what will happen.
  - The researcher will discuss the cause of concern with her dissertation supervisor and will inform her if she has needed to make a referral to the First Response Team or the Emergency Duty Team.
  - In the event of immediate risk of harm to the child the researcher will contact the First Response Team if in working hours. Outside of working hours the Emergency Duty Team will be contacted.
  - If the concern is not about immediate risk of harm then the researcher will take advice from the relevant Service Manager.
## Appendix D

**Participants Consent Form**

### Life Story Work with Looked After Children and Young People.

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>I have read and understood the information leaflet for the above research study.</td>
</tr>
<tr>
<td>2</td>
<td>I agree to meet with the researcher to discuss my opinions of life story work with looked after children and young people.</td>
</tr>
<tr>
<td>3</td>
<td>I understand that the discussion will last no longer than 45 minutes and that it will be audio-recorded.</td>
</tr>
<tr>
<td>4</td>
<td>I understand that my participation is voluntary and that I am free to stop the conversation or opt to not answer some questions at any time without giving reason.</td>
</tr>
<tr>
<td>5</td>
<td>I understand that all information I provide to the researcher will be kept confidential and stored in a secure place.</td>
</tr>
<tr>
<td>6</td>
<td>I agree to take part in the above study.</td>
</tr>
<tr>
<td>7</td>
<td>I understand that in the event that I may disclose something that may indicate that someone I know is at risk of harm then the researcher will have to break confidentiality and share this with the relevant professionals. I understand that I would be told if this was going to happen.</td>
</tr>
</tbody>
</table>

**ID CODE:** -----------

---

**Name of participant**  **Date**  **Signature**

If you have any queries or would like further information about this research, please contact:

Louise Carvell at lc0280@mybristol.ac.uk

or Lisa Campbell lisa.campbell@bristol.ac.uk
Appendix E

Participants Resource and Book List

Life Story Books


Wrench, K. and Naylor, L. *Life Story Work with Children who are Fostered or Adopted: Creative Ideas and Activities*. London: Jessica Kingsley.

**Therapeutic Stories**


**Useful Websites**


Life Story Works [http://www.lifestoryworks.org/Lifestoryworks/DIFFICULT_STORIES.html](http://www.lifestoryworks.org/Lifestoryworks/DIFFICULT_STORIES.html)

Safe Hands Thinking Minds [http://www.safehandsthinkingminds.co.uk/](http://www.safehandsthinkingminds.co.uk/)
Appendix F

Interview Questions

Questions – Life Story Work with Children Looked After

- Do you carry out life story work or support someone else to carry out life story work?

Purposes of Life Story Work

1. What do you understand life story work to mean?

2. Do you believe that a child/young person needs to be settled before you can do any life story work with them?

3. Should upsetting or difficult events or experiences that have happened to the child/young person be discussed as part of their life story?

4. What do you view as being important to the child about undertaking life story work?

Your Role in Life Story Work

5. What are some of the key features that you feel are important in the relationship between a child/young person and a worker undertaking life story work?

6. Do you think that it is important to have a good understanding of the child’s history and life story before commencing life story work?

7. How do you feel about sharing difficult information or helping a child or young person to process and make sense of difficult information?

8. Do you think that life story work should allow a child or young person to manage and understand their feelings?

9. Can you tell me what materials or information you use which contributes to life story work?

10. What do you feel are some of the key characteristics needed by the worker undertaking life story work with a child or young person?
Challenges of Life Story work

11. Do you have any worries or concerns about undertaking life story work with Children and Young People Looked After?

12. Have you received any additional training/support to enable you to undertake life story work?

13. Are there any aspects of life story work that you find challenging?

14. If a child/young person becomes upset or distressed during life story work should life story work stop?

Process of Life Story Work

15. Do you use any models of Life Story Work to help guide your practice?

16. Do you feel that there are any stages or times in a child or young person’s development where it is best to avoid life story work?

17. When do you think life story work should start?

18. Do you involve/include others in the life story work that you carry out?

19. Who do you involve in the preparation of life story work?

20. Is there anything that I haven’t asked of you that you feel may be useful for me to know?
Appendix G

Information Leaflet

A Research Project aimed at

Childen in care and adopted children

and children who are

looking after their friends

Thank you for taking the time to

read this information and

consider taking part.

Dr Debbie Wilson, Durham University

Discretionary Supervisor

TEL: 0117 945 7977

Lisas.campeel@bristol.ac.uk

Programme Coordinator

Dr Debbie Wilson

TEL: 0117 945 7977

Lisa.campeel@bristol.ac.uk

Your Voice

Everyone taking part in this study will be

published.

taking part?

What are the possible benefits of

study?

I know no risks to you taking part in this

part?

disadvantages and risks of taking

part?

Knowledge:

The study is being organized and funded by

University of Bristol

Dr Debbie Wilson from the University of Bristol.

This research is being organized and funded by

The findings will be shared with the local

authority and any people and groups

involved.

You will be invited to meet with Louise at a

usual time and location where

You will be asked a series of questions

3. You will be able to ask a series of questions

4. You will be invited to meet with Louise at a

usual time and location where

You will be asked a series of questions

Would you like to take part?
Why have I been invited to take part?

The local authority, along with the local council of children and young people, has decided to conduct this study to improve the services provided to children and young people. This study is designed to gather information about the experiences of children and young people in order to make improvements and ensure better services for the future.

Do I have to take part?

You are free to decide whether or not to participate in this study. It is completely voluntary, and your decision will not affect your future interactions with the local authority or the council. If you choose not to participate, you will not be penalized or discriminated against in any way.

Information for Participants

This study is being conducted with the approval of the local authority and the council. If you have any questions or concerns about the study, you can contact the research team. Your participation is valued, and your responses will be kept confidential. Thank you for considering participating in this important study.
Appendix H

Phase 4 Braun and Clarke (2006)

To explore the perception of the role of the social worker and foster carer in life story work.

Roles and Responsibilities

- Need to know history.
- Confidentiality.
- Who should carry out life story work – interest and value given to involving foster carers – who tells a child when first looked after

To identify the challenges faced by social workers and foster carers when undertaking life story work.

Workers Skill

- Being resilient/triggering emotion in the worker.
- Support/using skill of others.
- Training and continuing professional development/models used

Professional Anxiety

- Limited resources
- Helping children to manage and understand feelings x 2/worry retraumatise.
- How will a child respond to the information you are sharing
- Workers anxiety
- Harm that can be caused to children/knowing when to stop.

To understand what contributes to life story work being carried out effectively.

Factors contributing to life story work being done well

- Case Load
- Experience x2
- Change of worker
- Characteristics and values of worker – playful, non-judgemental, honest, empathetic, creative, reliable, trustworthy.
- Children need relationships and social workers who are interested in them, the work and have time

When to do life story work

- Child centred x 2
- When should LSW start – giving children a choice
- Child needs to feels safe and secure before starting life story work
- Being directed by inspections or directed to do at CLA reviews/limited value by managers
• When to avoid life story work/what happens when life story work isn’t done/can help to settle a child

Materials and Resources

• Contributions from birth family, birth parents and others.
• Child contribution
• Collating information from files and carers
• Involving birth family and others – critique of involving others

To gather an understanding of what social workers and foster carers understand life story work to mean.

How life story work is understood

• Discussing upsetting events/involving the child/children know more than us.
• Telling why in care, what/where/why and when.
• Building a story/putting together the pieces of a puzzle.
• Collecting and creating memories.
• Giving a child a narrative/building an identity.
• Using tools and resources
• Flexible and adaptable/informal and ad hoc/planned.
• Telling about family
• Helps to understand the past
Appendix I

Phase 5 Braun and Clarke (2006)

To gather an understanding of what social workers and foster carers understand life story work to mean.

Life story work can be used as a tool to assess and support the emotional and psychological functioning of children who are looked after.

- Planned.
- Flexible and ad hoc.
- Using tools and.
- Children know more than us.
- Discussing upsetting events.

Life story work was about the child and specifically helping the child to know their story and understand their history.

- Why in care.
- What, why, where and when.
- Story/puzzle.
- Telling when first looked after.
- Giving a narrative.
- Building an identity.
- Understanding the past.
- Telling about family - delete
- Collecting memories.
- Creating memories.
- When should life story work start.
- Can help to settle a child.
- What happens when life story work is not done - delete

To identify the challenges faced by social workers and foster carers when undertaking life story work.

Skill needed by the social worker or foster carer to undertaking life story work.

- Being resilient.
- Knowing when to stop.
- Training and continuing professional development.
- Models used to guide work.
Support given to the social worker or foster carer when undertaking the work

- Limited value given by managers.
- Inspection/being directed to do the work.
- Materials and resources.
- Child’s contribution.

Anxiety experienced by the social worker or foster carer when undertaking the work

- Triggering emotion in the worker.
- The harm this can cause to children as well as harm from poorly considered life story work/the child’s emotional response to life story.
- Worry about retraumatizing the child.
- Limited resources.
- Using skill of others.

Factors contributing to life story work being done well

- Contributions to life story work from others.
- Case load/time.
- Birth family contribution.
- Birth parent contribution.
- Contribution from others.
- Support from managers.
- Involving children.
- Involving birth family.
- Involving others.
- Value given to involving foster carers.

Attitude of the social worker or foster carer and the approach they took

- Non – judgemental.
- Honesty.
- Empathetic.
- Creative.
- Child centred.
- Children need to feel safe and secure.
- Interested.

Experience of the social worker and foster carer and the training they had received to do life story work

- Experience.
- Need to know history.
- Collating information.
- Information from files.
- When to avoid life story work.

Consistency of social worker and foster carer

- Change of worker/ placement.
## Appendix J

### Participants Roles

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<thead>
<tr>
<th>Foster Carer</th>
<th>Den</th>
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<tbody>
<tr>
<td></td>
<td>Gill</td>
</tr>
<tr>
<td></td>
<td>Kate</td>
</tr>
<tr>
<td></td>
<td>Pat</td>
</tr>
<tr>
<td></td>
<td>Sally</td>
</tr>
<tr>
<td>Social Worker</td>
<td>Annabel</td>
</tr>
<tr>
<td></td>
<td>Barbara</td>
</tr>
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<td></td>
<td>Carol</td>
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<td>Eve</td>
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<td>Fiona</td>
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<td>Harriet</td>
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<td>Iain</td>
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<td>Jan</td>
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