

**Leaving Local Authority Care: The Experiences of Separated Young
People Seeking Asylum in the UK**

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ABSTRACT

Children and young people arriving in the UK seeking asylum, who are separated from their parents or lawful guardians (separated children and young people) are placed into the care of the receiving local authority. They will remain in this care until 18 years of age, at which point they make the transition to leaving care. There is much evidence to suggest that this is a difficult move. Anecdotal evidence also suggests that because of the multiple stressors faced by separated children and young people, this can be a particularly distressing time, impacting on their psychological well-being. However, there is little empirical evidence to support this. There is even less research which explores this transition from the experiences of the young people themselves.

This study took a contextualist epistemological position to explore the experiences and understanding of the transition to leaving care for six separated young people. Semi-structured interviews were completed and the resulting accounts analysed using Interpretative Phenomenological Analysis. Three super-ordinate themes were identified: 'An Unwanted Move', 'Loss and Hardship' and 'Surviving'. Within these themes the young men reported experiences suggesting lack of preparation for the move, multiple losses and the impact of building pressure from the challenges of living independently. This was compounded by limited support and the uncertainty of their future, and had significant repercussions for their psychological well-being. Despite this, the young men demonstrated an ability to survive, drawing on the support of others around them and their own resources.

The findings of this study suggest more should be done to provide support for this potentially vulnerable group of young people. The findings are considered in the context of current literature and government policy, and recommendations made for greater inclusion of psychology within the social care setting to promote better understanding of and support for this transition.

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1. INTRODUCTION

The following chapter provides an overview of the literature, research and government policy relevant to understanding the experiences of unaccompanied asylum-seeking children and young people. This will have a particular focus on their experiences of being in and transitioning to leaving local authority care. The relevance of this research to clinical psychology will also be discussed in considering the potential impact this transition may have on the young person's psychological well-being.

In light of the continuing global conflicts and their concurrent diaspora, interest in researching this population is growing, however relatively little has been completed by psychologists. Thommessen, Corcoran and Todd (2015) also highlight that only a limited number of studies across all disciplines have provided these children and young people with the opportunity to voice their opinions. Therefore, relevant literature from social work and other disciplines working will also be considered.

It is important to recognise early on that whilst seeking asylum may be political in nature, it holds multiple social and psychological implications. Not least through the way in which it is constructed within the political and public spheres. Goodman and Speer (2007) highlight that groups such as those seeking asylum are often "discriminated against, and dealt with unequally, through the way in which they are constructed in discourse" (p.167). It is importance therefore, to consider the multiple definitions used to develop this discourse and understand the context of these young people before discussing the relevant research and theory.

1.1 Terminology

The term 'asylum seeker' is applied to any persons who seek the protection of a given country under the rights afforded to them by the United Nations' Refugee Convention, 1951. Within this 'refugee' is defined as someone who:

"owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country". (United Nations High Commission for Refugees, UNHCR, 2010; Article 1A (2)).

Further to this, the term 'unaccompanied asylum-seeking children' (UASC) is applied to define children and young people who are:

- 1) *under the age of 18 years when a claim is submitted*
- 2) *Claiming in their own right*
- 3) *Separated from both parents and is not being cared for by an adult who in law or by custom has responsibility to do so*

(Home Office, 2017; p.9).

It is important to recognise that both the terms 'asylum-seeker' and 'unaccompanied asylum-seeking children' are not without criticism. Goodman and Speer (2007) highlight how the political and social construction of these terms focuses on the claimant's legitimacy rather than their actual need. This is perpetuated further by use of pejorative dichotomies such as 'genuine' vs 'bogus' (Bloch, 2001) and 'deserving' vs. 'undeserving' (Scales, 2002) which attempt to legitimise this stigma. Further to this, the role of the UK media in developing and portraying discourses which position those labelled as asylum-seekers in the 'Other' has been highlighted (Lynn & Lea, 2003). A differentiation between the legitimacy of 'bogus asylum-seekers' or 'economic refugees' versus 'genuine' claimants was identified which again serves to stigmatise this group of people.

With this in mind, the Separated Children in Europe Programme (SCEP) and the UNHCR encourage the use of the term 'separated children' when referring to unaccompanied children and young people seeking asylum. This is because it directly describes the essential problem that they face. That is, separation from the care and protection of parents or primary care givers and the concurrent social and psychological impact of the separation (SCEP, 2009). Hopkins and Hill (2008) highlight that the term 'separated child' can be useful as some 'unaccompanied children' are in fact accompanied by siblings (under 18 years) or traffickers and agents, which would otherwise be neglected. They also suggest however, that this term is also not without criticism as 'separated' appears to imply passivity on the part of the young person. In fact, it may be that they may have chosen to flee, themselves. Neglecting this serves only to further reduce their agency.

Although mindful of the wide spread use of terms such as 'unaccompanied asylum-seeking children' within the legal framework of the UK and literature, it is important where possible to challenge the accepted dominant discourse, particularly where it may lead to stigma. Therefore, in response to this the term 'separated children and young people' will be used throughout this study.

1.2 Background and Legal Frameworks for Separated Children and Young People

In setting the context for this study, it is important to understand how separated children and young people have been positioned by UK legislation as this impacts on their rights as 'looked after children' and thus their experiences pre and post care.

1.2.1 Current Statistics

In 2017, there were 26,350 applications made for asylum in the UK. Of those applications, 2,206 (8%) were made by separated children or young people. Whilst this reflected a 33% decrease on the previous year (Home Office, 2018), this is the first time the number of applicants has fallen in at least the past five years. The highest numbers of applications came from those of Eritrean, Sudanese, Vietnamese, Albanian and Afghan nationality respectively (Refugee Council, 2018). Upon arriving in the UK, of the 1,998 initial decisions made relating to separated children and young people, 58% were granted asylum status and 19% were granted temporary leave to remain (UASC leave; Home office, 2018). The remaining 23% of applications were rejected on the grounds that the child or young person's country of origin was deemed "safe to return" or their age was disputed and following assessment they were deemed over the age of 18 years.

1.2.2 Legal Framework for Seeking Asylum

The UNHCR (1951) proposed a number of key articles protecting the rights of separated children and young people. In particular, Article 22 stipulated that special protection is to be granted to children who are refugees or seeking refugee status. Under international and domestic law, the UK is prohibited from returning these children to their countries of origin, unless there are adequate reception facilities to return them to. From 2013, immigration rules encompassed new leave to remain practices (UASC leave). This meant that all separated children and young people under the age of 17.5 years entering the UK and applying for asylum, who have not been granted refugee status, are given leave to remain for 30 months or until they turn 17.5 years of age. At which point they must reapply for asylum.

1.2.3 Legal Framework for Entering Care

On arriving in the UK, separated children and young people are entitled to be assessed by the receiving Local Authority. Under section 17 of the Children Act (1989) local authorities are required to make a 'needs based' assessment, to safeguard and make provision for them as a 'child in need'. This does not require the local authority to take formal responsibility of the young person as a 'looked after child', but generally involves the provision of financial support to assist in acquiring accommodation. This provision was initially intended for children and young people aged 16 and 17 years of age, which covers the majority of separated children and young people (Broad & Robbins, 2005). Alternatively, if a young person is under the age of 16 years, section 20 of the Children Act is utilised. Under this, the child is deemed formally 'looked after' and the local authority are required to place the child into care.

Several reports commissioned in the early 2000's identified widespread use of section 17, particularly with separated children and young people. This meant that they were likely not receiving adequate needs assessments (Kohli & Mitchell, 2007) and, whilst in line with legislative requirements this may not have been adequate to support their needs fully.

Following the Hillingdon Judgement (2003), it was ruled that the very fact that social care were providing accommodation meant that the young people were 'looked after'. Therefore, attempts to distinguish between section 17 and 20 were misconceived. Subsequently, the majority of authorities began to routinely provide provision under section 20 and thus provide greater support (Stanley, 2001). This was also an important step forward because under section 20 looked after children were entitled to leaving care support, which will be discussed below.

In 2003, the government initiative 'Every Child Matters' (ECM; 2003) set out guidance to review and improve children's services in the wake of several damning enquires, such as the Laming Enquiry (2003) into the death of Victoria Climbié. The intention of the green paper was to improve the lives of all children living in the UK. Included within the paper were provisions for separated children and young people. ECM highlighted the potentially vulnerable nature of these young people and the need to address their specific needs. This included

investment in training immigration officials and better management of care pathways. Much of the principals of the EMC initiative were underpinned in UK law by the Children Act (2004). This act and EMC have been criticised however, because it is felt that they do not go far enough to address the real needs of separated children and young people (Chase, Knight and Stanthan, 2008).

1.3 Literature Search

The following review of literature will commence by exploring the psychological well-being of separated children and young people more broadly, before considering their experiences of being in and leaving care. It was felt important to preface the review in this way as this serves to contextualise the young people's experiences whilst in care and leaving care. Due to the limited nature of literature around separated children and young people's experiences of being in and leaving care, literature exploring the experience of young people in local authority care more generally will also be considered concurrently.

An initial search for current and relevant literature was completed using the Ebsco search engine, accessing the databases PsycINFO, Academic Search Complete and CINAHL. Further to this, the databases SCOPUS and ScienceDirect were also used. In order to identify relevant literature combinations of the following search terms were used:

Separated children / Unaccompanied minor* / unaccompanied young people / unaccompanied asylum#seeking children / asylum seeking young people / young unaccompanied asylum#seekers / unaccompanied refugee young people / refugee young people/ Refugee children

and

Local authority care/ residential care / foster care / supported living / looked after children / care leavers or young people leaving care / transition* / leaving care OR transitioning OR care leavers

These search terms were used because they represented the common descriptions used in identifying children and young people seeking asylum in the UK in legislative/legal documentation and current literature.

Once relevant journal articles and books had been identified, their abstracts were reviewed to judge applicability to the study. Articles which employed qualitative methodology and focused on the views of the young people were of particular interest. The search was also informed by following up references from relevant articles and policy documents.

Further searches of the same data bases were also completed to identify literature to develop understanding the wider context of separated children and young people and of looked after children (in and leaving care). This included terms such as 'well-being' and 'psychological well-being' in conjunction with the above terms.

1.4 Separated Children and Young People - Psychological Well-Being

The United Nations Committee on the Rights of the Child (2006) identified that separated children and young people are at high risk of being exposed to poverty, trauma and lack of education. Their journeys to the UK are often characterised by significant and multiple losses and the threat of sexual and physical abuse. Kohli and Mather (2003) highlight three factors which they identified as particularly pertinent to separated children seeking asylum in increasing their vulnerability. First, upon arriving in a new country they are often unfamiliar with the cultural habits and rules and need to adapt in order to settle. Second, they are likely to be carrying memories of past trauma for which they require the support from third parties. Third, they are thrust into the complexities of navigating the immigration and care services which can be difficult for native children at the best of times.

In recent years a number of studies have explored the psychological well-being of separated children and young people, highlighting that they are at heightened risk of experiencing emotional and behavioural difficulties (Loughry & Flouri, 2001; Sourander, 1998; Chase et al., 2008). Rousseau (1995) identified that distress for these young people is exacerbated by the traumatic experiences and multiple separations they face on their journey to the host country. Similarly, Fazel, Reed, Panter-Brick and Stein (2012) completed a systematic

review of the literature and identified a number of risk factors leading to psychological distress categorised into 'individual', 'family' and 'community' factors. Risk factors included: exposure to violence both pre- and post-migration, perceived discrimination, multiple changes in residence in the host country, and being unaccompanied. Gabrielatos and Baker (2008) added that separated children and young people often encounter widely held negative discourses of asylum when reaching their host country. As stated previously, these are perpetuated by the portrayal in the media of people seeking asylum, which is unwelcoming and serves to further exacerbate difficulties assimilating into a new country. This stigma then impacts on self-esteem and negatively affects psychological well-being (Branscombe, Schmitt & Harvey, 1999).

Studies have also identified that separated children and young people experience difficulties beyond that of their accompanied peers, with a negative impact on psychological well-being. Bean et al. (2007) found that separated children scored significantly higher on measures of internalising problems, traumatic stress reactions and stressful life events, putting them at greater risk of developing significant psychological distress. Weise and Burhorst (2007), in the Netherlands, identified that separated children had higher frequencies of trauma symptoms and psychiatric diagnosis than those accompanied by family. Similarly, Ramel, Täljemark, Lindgren and Johansson (2015) found that in their review of admissions to a Child and Adolescent Psychiatry Emergency Unit, separated children and young people were over represented compared to their accompanied peers. They identified higher rates of self-harm and suicidal behaviour and reported that 86% of those admitted were admitted due to symptoms related to stress as a consequence of the asylum system. Chase et al. (2008) also identified the difficulties experienced by some separated children and young people in navigating and understanding the different cultural context of their host country; for example coming from a culture where people are more tactile with each other and being castigated in the UK for being overly physical.

Jakobsen, Meyer DeMott, Wentzel-Larsen, Trond and Heir (2017) reported the significant negative impact of the asylum system on the psychological well-being of the children and young people accessing it. In keeping with past findings, they identified that children and young people seeking asylum reported higher levels of psychological distress on arrival to their host country and that

this remained relatively unchanged over time. They also reported that being placed in lower support accommodation during the asylum process and receiving a negative outcome to an asylum application were associated with higher levels of psychological distress. Fazel and Stein (2002) also identified that continued uncertainty regarding asylum outcomes resulted in heightened levels of psychological distress, while Kohli and Connolly (2009) identified that discretionary leave to remain negatively impacted on the young persons' sense of belonging, imposing a foreshortened sense of future. This was echoed in Chase et al.'s (2008) study which reported that young people who were nearing the end of their discretionary leave to remain in the UK showed more awareness of the uncertainty of their futures than others. All of which is compounded further by lack of emotional and social support (Marriott, 2001; Wade, Mitchel & Baylis, 2005), poor housing and insecurity (Marriott, 2001).

Thommessen, Corcoran and Todd (2015) completed a qualitative study exploring how a cohort of male separated children and young people from Afghanistan experienced arriving to their host country (Sweden) and the support provided them. Interviews were conducted with 6 participant who had been resident in Sweden for between 2-3 years. From this they identified four main themes of 'From Danger to Safety', 'Living in Limbo', 'Guidance and Social Support', and 'Striving to Fit in and Move Forward'. Thommessen et al.'s reflections highlighted factors such as the positive effects of 'openness' and 'friendliness' in providing a sense of safety for the young men. They also highlighted how uncertainty surrounding asylum applications and a lack of information about family left behind perpetuated a sense of being in limbo. The continued need for adult guidance and the importance of education for integration with the host-society and moving forward were also noted. It is important to recognise that as with many of the studies completed looking at the experience of separated children and young people this study was conducted in a context very different to that found in the UK, where the legal system allows for less certainty and greater punctuation over asylum applications.

Whilst it is extremely important to hold in mind the significant difficulties faced by these young people, it is also important to acknowledge that in the face of adversity many demonstrate a high level of resilience and ability to persevere. Wade (1997) writes of the observation that for every act of ill-treatment a person

faces, they will resist. Even though these acts may be small or subtle. Therefore, it is important to acknowledge the parallel history of resolute resistance which follows.

Jakobsen et al. (2017) highlighted that the results from their study were in agreement with others which found that high-support housing, with sufficient supervision was associated with lower levels of psychological symptoms in the separated children and young people accessing them. Similarly, Oppedal and Idsoe (2015) reported that higher levels of social support had a direct effect on reducing depression and an indirect effect of increasing cultural competency. They saw this as potentially having a positive impact on the young person's abilities to manage the discrimination they may face. This is supported by the British Psychological Society's (BPS) 'Guidelines for Psychologists Working with Refugee and Asylum Seekers in the UK' (BPS, 2018) which reports that social support provides a buffer against the worst aspects of the stresses separated children and young people face. Stein (2006) identified factors which nurtured resilience including experiencing fewer placement changes prior to leaving care, having a secure attachment with at least one carer, being provided with opportunities for development of positive identity, and the development of self-efficacy. Chase et al. (2008) also reported that many of the young people they interviewed discussed ideas of 'feeling safe', and of having 'freedom' once reaching their host country. They highlighted the development of a 'positive outlook' and a belief that things would turn out alright in the end.

Kohli (2006) identified how the role of the social worker can be integral in the development of a secure base for separated children and young people and thus promote their sense of resilience. Practitioners working within the 'domain of coherence' are able to help the young people re-member their lives and reclaim their 'whole' life stories through providing networks of protection and care.

Ni Raghallaigh and Gilligan (2010) looked further into the ways in which separated children and young people learn to 'cope' with the experiences they face. In a qualitative study completed with 32 young people seeking asylum in Ireland, they identified 6 main strategies employed. These included: Maintaining continuity in a changed context – for example, through maintaining religious practice; Adjusting by learning and changing – through interaction with friends

and professionals; Adopting a positive outlook – focusing on the comparative gains of their journey and settlement; Suppressing emotions and seeking distraction – avoidance of thoughts about the past and worries about the future; Acting independently – emphasising self-reliance and dealing with their own difficulties; and Distrusting – actively only trusting certain people or learning to trust people to a limited extent.

1.4.1 Psychological Perspective on Distress in Separated Children and Young People

The BPS (2018) highlight within their key principals for working with refugees and asylum seekers the importance of context, particularly that one must “take into account the social, economic, legal and political context which can impact on both individual and the family” (p.14). This is especially important when considering the psychological well-being of separated children and young people for whom the experience of multiple losses and dislocation will have an inevitable effect on their sense of self (Hughes and Rees, 2016).

For many of these young people, within the multiple losses they have experienced there may be the loss of loved ones who they have witnessed being murdered prior to or during their journey. For others, however, there may be uncertainty about their loved ones, who they left behind or became separated from during their journey. These loved one are lost in the most literal sense. Without clarity as to their safety, they may be perceived to be physically absent, yet they remain psychologically present within the young person’s thoughts and actions. Boss (2010) calls this ‘ambiguous loss’. Although originally conceptualised with regards to those who have experienced incidents of kidnapping or where soldiers are missing in action, for separated children and young people, it is also very true. The ambiguity around whether their family is alive or dead can be particularly stressful, resulting in low mood and hopelessness. Luster, Qin, Bates, Johnson and Rana (2009) identified that ambiguous loss surrounding the loss of at least one parent, was the cause of depression and sadness as well as difficulties with concentration and increased frustration in their interviews with young Sudanese refugees. Therefore, the notion of ambiguous loss could be one potential factor in the descriptions of

increased psychological distress experienced by separated children and young people.

The journey of separated children and young people to the UK also comes at a time traditionally seen in the West as harbouring uncertainty and stress, namely adolescence. Adolescence can be thought of as the transition from childhood to adulthood, and while primarily Eurocentric in its construction, is commonly recognised as a period of significant physiological, emotional and cognitive change. Ajdukovic (1998) suggests that this is a period where the young person becomes “increasingly aware of themselves as social beings” (p.209) and where there is a drive for the establishment of their adult identity and independence.

However, for young people growing up at a time of war, or who are separated from their family and peers as they seek asylum in other countries and cultures, the usual processes that characterise adolescence cannot proceed as normal. The purposeful separation from parents and choosing of social roles are not able to take place. This means the development of personal and group identities become difficult (Ajdukovic, 1998). Whilst these processes may have begun in their country of origin, for separated young people living in a different country, this is confounded further still by the differences in cultural expectations from their hosts. For many they will have to begin to renegotiate their identity within this new context (Sweet, 2010) and within the subjugated gaze of being in a minority group and of being an ‘asylum seeker’. This is likely to add to the burden of difficulties already faced by the young people and potentially increase their susceptibility to distress.

1.4.2 Perspectives on Resilience in Separated Children and Young People

Despite these potential difficulties, there are frequent stories of resilience and indeed growth as a result of the adversities faced by the young people. Kohli (2001) identified in interviews with social workers that whilst a proportion of separated young people require support following experiences of significant distress, the majority require less support than native young people raised in care. It is suggested that preoccupation with distress and trauma risks homogenising these young people as universally traumatised (Rutter, 1999)

and that this risks a privileging of symptom reduction over individual need (Summerfield, 2000).

Papadopoulos (2007) suggests that beyond merely surviving trauma, many refugees appear to become strengthened by their particular exposure to adversity. This has been labelled 'adversity-activated development' (AAD) and with regards to separated young people suggests that once a young person is able to realise that they have survived the initial life-threatening adversity they "have the opportunity to begin to appreciate life in its own right" (Papadopoulos, 2007; p.306). This growth is seen as a direct result of the experiences gained from the adversity and also the development of new characteristics which may or may not be known to the individuals themselves.

It is important, however to recognise that constructs such as resilience may not be wholly applicable to non-Western cultures, where the lack of evidence for the relevance of applying Western psychological frameworks could prove problematic (Kleinman, 1987). None the less, it is useful to be mindful of separated children and young people as both vulnerable to distress and potentially resilient against it.

1.5 Separated Children and Young People in Care

The number of separated children and young people in local authority care has continued to rise year on year. At the year end March 2017, there were reported to be 4,560 separated children and young people in care. This represents a 6% increase on 2016 and a 134% increase on 2013 (Department of Education, 2017). This significant increase has resulted in a change to the demographics of the overall system, representing a continued increase in males (5% increase) and in those aged 16 years of age and over (Department of Education, 2017). Whilst male separated children and young people make up the majority, for the first time there has been a higher percentage increase in female separated children and young people being looked after. However, this still only represents 8% of the total number of separated children and young people in care.

When arranging care provisions for children identified as 'in need' including separated children and young people, guidance from the UNHCR states that "every effort must be made to place children in foster families or groups of similar ethnic, cultural, linguistic, and religious background" (UNHCR, 1994, p.92). This is enshrined in legislation in the UK under the Children Act 1989 in which local authorities are required to "give due consideration to the child's religious persuasion, racial origin and linguistic background" (section 22.5). However, this is not an overriding clause when placing a child in foster care but a point of guidance. Barrie and Mendes (2011) indicate that the decision to place a child under section 20 of the Children Act ('looked after') is made primarily on the basis of age rather than a reflection of their need. Wade (2009) highlights that the concern regarding this is that the decisions often have significant financial implications for the local authority, who receive a lower level rate of pay for young people aged 16 or 17. Therefore, separated children and young people who are older and more likely to report experiencing higher levels of distress (Hollins, Heydari and Leavey, 2003), may not get the effective support they need as they may be less likely to be placed under section 20.

The decision to place a young person into foster care or to less supported care is a significant one for multiple reasons. Hodes, Jagdev, Chandra, and Cunniff (2008) found that separated children and young people who received less support through their living arrangements, such as being in independent accommodation, showed increased symptoms of psychological distress (post-traumatic symptoms) compared with those with higher levels of support, such as living with a foster family. Similarly, Hollins, Heydari, Grayson and Leavey (2007) found a strong association between type of accommodation and available support, and mental health in their study with Kosovan Albanian refugee adolescents. Broad and Robbin's (2005) identified that the majority of separated children and young people in care at the time were housed in independent living accommodation, with only 20% in foster care. They found that where greater social support was available (such as in foster care), the young people made greater achievements, even if experiencing significant levels of distress in relation to traumatic experiences. They also identified that they were more likely to access appropriate services. In addition to this, Fazel et al. (2012) identified from their systematic review, that stable settlement and

social support had a positive effect on separated children and young people's 'psychological functioning'. Chase et al. (2008) found that some young people placed in cross-cultural foster placements identified positives to the relationships such as a sense of being able to learn from each other. The benefit of being placed in more supportive care is therefore clearly significant in supporting the needs of separated children and young people. This all adds to the evidence that stable social support has a mediating impact on the psychological well-being of separated children and young people.

It is important to recognise, however that foster care placements are not always the most successful option. Wade et al. (2005) reported that there is the potential for difficulties to arise where foster carers are less flexible, or where the young people now in care had previously experienced a greater level of independence. Similarly, Chase et al. (2008) identified that a number of the young people they spoke with found it difficult to connect with their foster family because they were not their "real" family. It was suggested that this was particularly the case when foster carers did not have adequate boundaries in place or where they treated the placement more like a 'bed and breakfast'. Therefore, one must be cautious not to perceive separated children and young people as one homogenous group, where a 'one size fits all' policy of care is used for their greater benefit. As Barrie and Mendes (2011) stipulate, it is of paramount importance that the views of the young person be consulted and considered in finding the right support for them.

1.6 Looked After Children - Psychological Well-Being

As there is limited literature exploring the experience of separated children and young people in care, it was thought important to also explore what has been written about the impact of being in care more generally. This is useful as it provides further context on the intersection of separated children and young people's past experiences and current experiences of being in care.

Much research has been completed exploring the impact of being in care on the psychological well-being of children and young people. Meltzer, Gatward,

Corbin, Goodwin and Ford (2002) completed a large-scale survey of the mental health needs of children and young people being looked after in local authority care. They identified that among the young people aged 5–17 years, 45% were assessed as having a ‘mental disorder’. That is, 37% were identified as having clinically significant ‘conduct disorders’ and 12% were assessed as having ‘emotional disorders’, such as anxiety and depression. More recently, Public Health England (2017) reported that 12% of 11 to 16-year olds in care have clinically diagnosed mental health difficulties. They highlighted that particular groups of children face significantly worse outcomes, amongst which are children and young people in local authority care. The National Society for the Prevention of Cruelty to Children’s (NSPCC) report, ‘Achieving emotional well-being for looked after children’ (Bazalgette, Rahilly & Trevelyan, 2015) highlights that young people in care are just over three times more likely to have a psychiatric diagnosis than disadvantaged children not in care. Further to this, it identifies that young people in care are over five times more likely to have a psychiatric diagnosis than non-disadvantaged children. Similarly, it has been reported that almost half of children and young people in care meet criteria for psychiatric diagnosis (Meltzer et al., 2002). Looked after children have also been noted to be at increased risk of negative outcomes if they have experienced neglect and/or multiple placement transitions (Fisher, 2015). The increased risk of developing mental health difficulties has also been identified in the intersectionality of pre-existing mental health difficulties (prior to care placement) and exposure to maltreatment (Bazalgette et al., 2015). Despite this, access to mental health services is often poor (Mental Health Foundation, 2002). This may be important in considering the experiences of separated children and young people leaving care given their experiences prior to their arrival in the UK and increased risk of experiencing psychological distress.

For many children and young people who are taken into local authority care, their early childhood experiences are characterised by early abuse/neglect/trauma, inadequate parenting, loss and separation (Golding, 2008). Hayden, Goddard, Gorin and Van Der Spek (1999) suggest it is likely that many looked after children will have faced multiple risk-factors, all of which could impact on their psychological well-being. Exposure to early trauma, abuse and neglect can have a significant impact on the young person in terms of their

psychological, biological and social development (van der Kolk, 2014) and when combined with the instability of being taken into care, likely results in a marked impact on the young person's mental health. Unregulated and chronic stress in early childhood, such as that which might result in a child being taken into care, has also been linked to difficulties with emotional and behavioural regulation (Essex et al., 2002).

As well as the effects of trauma on the developing child, the disruption in early relationships due to neglect or due to being taken into care, also has a significant impact. Models of attachment such as that pioneered by Bowlby (1969), focus on how the child develops within relationships and the impact this has on their social, emotional and cognitive development. This then guides how they understand and interact with the world later in life (Golding, 2008). Without the establishment of healthy early attachments, the resultant difficulties with emotional and behavioural regulation could mean that the young person struggles to contain their emotions or reflect on the impact of their behaviour on others (BPS, 2009). This in turn is also likely to limit the young person's ability to form stable relationships with others, suggesting a potentially lasting impact for the young person's adult life.

Bowlby (1969) suggests that through their initial interactions with the primary care giver, the infant develops an 'internal working model' of 'the self' and 'the other' based on the responsiveness of the care giver. This then forms a template for how relationships will function (Golding, 2008). For this reason, attachment theories are important in understanding the heightened risk of developing psychological distress observed in looked after children, where early attachments have been disrupted. Indeed, NICE (2015) recommend that attachment difficulties be assessed for in looked after children and separated children and young people once stable placements have been found and intervention offered where appropriate. Given the importance of social support in buffering against psychological distress, difficulties with forming relationships would potentially jeopardise this and therefore it is important to highlight where relevant.

These difficulties can also be compounded by the care system itself. Cultural changes may occur when the young person is moved to different foster / residential placements and the short-term nature of many placements also

means it can be challenging for the young person to establish meaningful attachments. Again, this would likely be true for separated children and young people where adjustment to being in a new family system with different rules and regulation can result in the young person presenting with behaviour which challenges, resulting in a break-down of the placement. This may especially be the case where foster carers have limited experience of caring for separated children and young people.

In 2015, The Department of Health (DoH) and Department for Education (DfE) published statutory guidance for the promotion of health and well-being of looked after children. Continuing the drive towards 'corporate parenting', it highlighted the need for local authorities to take responsibility for ensuring the physical and emotional well-being of children in its care. This included completion of up-to-date health plans and ensuring continued access to mental health services, no matter the nature or length of their placement. In response to this, the House of Commons Education Committee (2016) report into the mental health and well-being of looked after children made a number of recommendations. These aimed to increase access of looked after children and young people to mental health services. This included recommending Child and Adolescent Mental Health Services (CAMHS) be stopped from rejecting young people on the ground of the location of their placement and acknowledging the difficulties for young people transitioning to leaving care, ensuring that a more rigid support structure be put in place.

1.7 Leaving Care

1.7.1 Leaving Care Legislation

The Children (Leaving Care) Act (2000) provides a legislative pathway for the planning and delivery of aftercare support for young people who have been in local authority care. Significantly, the act moved the age at which young people leave care from 16 to 18 years of age. It also obliged local authorities to assess the young person's needs (including health and development, housing and education) through developing a 'Pathway Plan' to continue to meet these needs up to the age of 21 years, or 25 years if in full-time education. The intention of this was to delay the young people's transitions from care in order to allow time for adequate preparation, planning and support to be put in place (Wade, 2011).

However, guidance provided by the Department of Health (2000) highlights that separated children and young people, whilst being covered by the act will also have an immigration status which must be taken into account. If a young person's asylum application is yet to be settled as they approach 18 years of age, it is proposed that the services previously accessed may continue. This is to such a time that all asylum appeal rights have been exhausted and they are recorded as "unlawfully present in the UK (including those whose visa has expired and refused asylum seekers who did not claim asylum at a port of entry)" (No Recourse to Public Funds Network, 2015; p. 1) under Schedule 3 of the Nationality, Immigration and Asylum Act (2002). Even at this point, local authorities need to be mindful about whether a withdrawal of services would breach a young person's rights under the European Convention on Human Rights (Dorling, 2009).

Following a number of high profile lapses in the care of looked after children, the government put forward the policy paper 'Putting Children First' (Department for Education, 2016). Within this they outlined the government's strategy for transforming children's social care through a "fundamental reform of each of the three pillars on which the children's social care system stands" (Department of Education, 2016; p.5). That is, by effecting change in 'people and leadership', 'practice and systems' and 'governance and accountability'.

Fundamentally, this emphasised the central tenet of social care, that relationships and long term social connection are the corner stones to child and family welfare. The policy paper introduced a number of changes to practice designed to increase connection between social care staff and those accessing services, including those previously identified as coming to the end of their care.

The Children and Social Work Act (2017) consolidated the proposals from Putting Children First into UK law. Key to the act was its aim to improve support for looked after children, with an emphasis on those leaving care. Under Section 3 of the act, provisions were made to extend local authority support to all care leavers until the age of 25, removing the distinction between care leavers who are in education and training and those who are not. It required that all local authorities provide Personal Advisers to care leavers up until the age of 25. Personal Advisers were designed to act as focal points of contact to ensure the correct level of support is provided and should be aware of the specific needs of the young person so that this is reflected in their local offer and support offered / provided. The act also legislates for the completion of needs assessments and preparation of pathway planning to again ensure the correct provision of support upon leaving care. The new act also stipulated that all care leavers will be able to return for help from their local authority at any time up until they reach 25 years of age.

The Act also stated that all children and young people in local authority care between the age of 16 and 17 years of age, for a period of 13 weeks (known as 'eligible children'), or those young people who have now left care but had been in care for that time (known as 'relevant children') are entitled to ongoing support once they turn 18 years of age. Significantly, this includes separated children and young people.

Effective planning for this group of young people is essential and it is crucial that separated children and young people have their immigration issues dealt with through legal advice and representation, as well as planning for future immigration issues as care leavers (Dorling, McLachlan and Trevena, 2017). Under Section 2 of the Children and Social Work Act, local authorities are required to publish information about the services being offered to young people leaving care that may support them in their transition to 'adulthood' and independent living. This 'local offer' should ensure that all young people leaving

care have a clear idea of what services are available to them, as well as helping to highlight any gaps in provision or support that the young person may need. The local offer must also include support for housing, education and training, health, and finance.

1.7.2 Social and Psychological Consequences of Leaving Care

Despite the provisions in place for care leavers, they remain one of the most vulnerable and disadvantaged groups in society, facing a myriad of potentially negative consequences upon beginning independent living.

Mendes and Moslehuddin (2006) completed a review of relevant literature regarding care leavers across the UK, USA and Australia. In this study they identified that young people leaving care faced an increased risk of homelessness, juvenile crime and prostitution. They also highlighted that these young people were at greater risk of experiencing mental and physical health problems and poorer social support. It is thought this is likely due to a myriad of factors, including the continuing influence of early childhood trauma and neglect on the young person's sense of self and ability to relate to others which may serve to negatively impact on establishment and maintenance of ongoing relationships. This creates a lack of support during and immediately after leaving care and an accelerated transition to adulthood, where the young person's specific needs may not be adequately addressed.

In the UK context, the government strategy paper 'Keep on caring' highlighted that young people leaving care are more likely to not be in employment, education or training compared to the general public (HM Government, 2016). Indeed, significant intersections were identified by Wade and Dixon (2006) who explored the progress in employment and housing made by 106 care leavers, 12-15 months after leaving care. They identified that whilst there were benefits to good planning and preparation, young people who experienced mental health difficulties, persistent offending or drug use faced a higher risk of experiencing difficulties with regards to housing and employment. Stein (2006) suggested that compared to young people in the general population who are spending increasingly longer living at home, care leavers often face an earlier and accelerated transition to adulthood. It was reported that care leavers seldom

stayed in placement past the age of 18 years of age, with the majority leaving at 16 or 17 years of age.

Liabo, McKenna, Ingold and Roberts (2016) explored the experiences of 24 young people currently or recently under the care of looked after children's services. They identified that those young people still in care (16/17 years of age) reported looking forward to the transition to leaving care due to the perceived increase in independence or freedom. However, those who had been through the transition reported higher incidences of social isolation and insecurities. Amongst those insecurities, the young people reported feeling that they had been too eager to transition, missed the family structure of foster care and felt unsafe in semi-independent accommodation. The lack of security was often exacerbated by their unpreparedness for the reduced support and expectation of increased autonomy from Adult Services. Frequent changes in workers from social care also contributed to feelings of instability and inconsistency. Furthermore, the Chief Medical Officer's (2012) report into looked after children highlighted that as a group they were four to five times more likely to self-harm as adults and five times more likely to experience emotional difficulties, suggesting long term effects.

Dixon's (2008) follow up study of care leavers 12-15 months after leaving services identified a number of areas of potential concern. It was highlighted that the proportion of young people considered to be experiencing emotional and behavioural difficulties appeared high (42%) and encompassed a broad range of emotional and behaviour issues. These difficulties were not necessarily in keeping with classifications provided by Educational Psychologists previously involved. The study also indicated that whilst most care leavers were initially physically well, over the period of follow up this deteriorated, and a higher proportion (61% up from 38%) reporting physical or mental health difficulties. Further to this, there was found to be a doubling of those reporting mental health difficulties, amongst which depression and stress were most highly reported. Significantly, four of the participants also reported attempting suicide in the 10-months leading to follow-up.

Dixon reported that the findings demonstrate the intersectionality of the transition from care itself with earlier difficulties prior to care placement and difficulties experienced during placement. It was suggested that the transition

itself can lead to new challenges, all of which have a significant effect on the young person's overall health and well-being. Also demonstrated was the link between mental and general wellbeing and other dimensions of young people's lives such as risk behaviour and progress in finding a home and embarking upon a career. Dixon reported "these findings highlight the interconnectedness of young people's lives and the need to understand and approach health and wellbeing in a holistic manner" (p. 215). This highlights the significant impact of both being in care and the transition to leaving care on already vulnerable young people and the need to establish a solid base of support to mediate against the potential ill-effects.

However, this may begin to change as new legislation allows looked after young people the opportunity to remain in foster placements longer. Under the new regulations for 'Staying Put' (HM Government, 2013), young people who have ceased to be looked after on their eighteenth birthday are permitted to remain with their former foster carers until the age of 19 or 20 years of age.

It is worth noting here, however that timings of life transitions and definitions of markers of adulthood vary across societies due to the socially constructed and preformative nature of age (Sirriyeh, 2013). Western ideas of developmental changes in family relations such as the move towards increased independence and autonomy of the young person, especially through detachment from one's parents often run contrary to the developmental trajectories towards leaving home and adulthood understood in non-western cultures (Omland & Andenas, 2018) such as continuing to provide for your family. Within Afghan culture, for example, the move towards becoming a 'man' is intrinsically linked with the cultural expectation of becoming the 'breadwinner'. In line with the notion of 'nafaqah'- being the domestic figure head with responsibility for the overall well-being of the family (Echaves, Mosawi & Pilongo, 2016). Sweet (2010) explored Afghan and Iraqi separated young people's experiences of transitioning to adulthood. In this she identified that whilst there was an expectation of starting work and contributing financially at a younger age, there was also the expectation to still be living with parents, who would continue to offer advice and support. This suggests a less linear explanation of the transition to adulthood and leaving home than expected within western cultures.

1.7.3 Separated Children and Young People Leaving Care

As reported previously, the Immigration Act (2016) introduced changes in the way support is given to separated children and young people leaving care. Local authorities will continue to be able to provide support for former separated children leaving care, who have not been granted leave to remain in the UK. However, this is only applicable if the young person is continuing to await a final decision or appeal or has made another type of immigration application such as under the European Court of Human Rights (Immigration Law Practitioner's Association, 2016).

There is limited research exploring the experiences of separated children and young people leaving care, particularly in the context of the UK. However, for this already vulnerable group the period of transition at 18 is often the zenith of uncertainty, with considerable confusion experienced around changes in services and the threat of dispersal to new areas (Stanley, 2001). Chase et al. (2008) reported that young people experienced an extreme anxiety if their immigration status was yet unclarified on leaving care. In their study, it was identified that those separated young people who were nearing the end of their leave to remain showed greater awareness of the uncertainty of their futures. They also showed a greater mistrust of social care services and had concerns regarding its potential connections with the asylum process. Wallin and Alstrom (2005) identified that this heightened anxiety is often compounded by a sense of loneliness, lack of integration, and fear of deportation where return to their country of origin is a return to a dangerous and unfamiliar environment where they have little chance of a future (Gladwell & Elwyn, 2012).

Broad and Robbins (2006) suggest that the increasing number of separated children and young people leaving care was putting pressure on already patchy support, leading to high numbers going onto independent living, where they experience reduced support, resulting in an exacerbation of their pre-migration stress. Ni Raghallaigh and Thornton (2017) identified social workers' awareness of separated children and young people's vulnerabilities when leaving care, however the need for emotional and psychological preparation is often overlooked in pursuit of the practical (Hannon, Wood and Bazalgette, 2010). This

again puts the psychological well-being of these young people at risk at a time of potential challenge.

In Chase et al.'s (2008) study, separated young people leaving care highlighted that those who on turning 18 years of age moved to new residences, often described feeling isolated. This was especially so if they had moved further away from the friends with whom they had previously lived. It was also reported that some young people described the experience of now living with strangers as 'difficult', and that people were unfriendly towards them. Wade, Mitchell and Baylis's (2005) interviews with young people found that those who had been in foster placements prior to leaving care often found the responsibilities of running a household as well as participating in education stressful. It was also noted that those young people who subsequently lived alone often dreaded returning home, "where their minds would be crowded by morbid thoughts" (p.148).

More recently, Söderqvist (2014) completed a study exploring the transition from care for separated children and young people in Sweden. In this study interviews were conducted with young men who had left residential care (which is the most common form of placement in Sweden) or were in the last step of formal contact. Four themes were identified from the interviews, including: 'cultural baggage'; 'isolation'; 'on the go'; and 'just an ordinary life'. Regarding 'cultural baggage', for these young men, an ethnic minority background was seen as holding a significant sway over how life would proceed after leaving care, for example having a less detailed knowledge of Swedish culture. 'Isolation' reflected their experiences of loneliness and difficulties in building social contact post care. 'On the go' reflected their sense of belonging, or lack of belonging and thoughts of where they might spend their long-term future. 'Just an ordinary life' linked to expectations of life after care and the often disappointing experiences of where life did not turn out as expected.

Dima and Skehill (2011) identified that when it came to refugee and asylum-seeking children leaving care, they experienced two different but interconnected transitions. First, they experienced a social transition to independent living. Within this transition, young people reported being left with 'nothing' and experiencing instability and insecurity. Often there was a lack of planning for transition and the young people reported feeling as if going from almost total

support to no support. Second was the psychological transition to adulthood. This encompasses themes such as 'becoming an adult' and 'knowing how to live'. The young people in this study highlighted their transition from dependency on the state to independence and self-provision.

The notion of 'becoming an adult' and transitioning from childhood to adulthood is well recognised and often intertwined with the transition to leaving home. However, the point at which this is thought to occur is not agreed upon. Many western concepts are based upon the notion of adolescence, then merging into adulthood with the transition to leaving home at around 18 years of age. However, the concept of adolescence in itself is not universal, but located with culture and time (Dwivedi, 2002). Some have identified events such as marriage as marking the point in which adulthood occurs in Non-Western cultures (Schlegel & Barry, 1991), whereas Western societies, for example America, emphasise more individualistic factors such as taking responsibility for one's self, decisions and finances (Arnett, 1998) which comes at a time of leaving home. Arnett (2000) suggests the notion of 'emerging adulthood' as the bridge between adolescence and adulthood which sees the young person developing skills and qualities for adulthood in line with their cultural expectations. The time scale of this is variable and dependent on factors such as remaining in higher education. However, it is pointed out that even within Western societies, minority cultures may face foreshortened periods of emergent adulthood because there are reduced opportunities during the ages of 18-25 to independently explore life directions due to economic pressures. It is suggested that even within economically developing societies, young people in rural areas who have minimal schooling, tend to marry earlier, and have limited occupational choices may not experience emerging adulthood compared to those in urban areas.

On leaving care, those at the end of the asylum process may have support withdrawn if all claims have been exhausted and they have not made 'reasonable steps' to leave the country. Research suggests that one third of those affected by such measures go 'underground', with no access to housing or other forms of support (Refugee Action & Refugee Council, 2006). Robinson and Williams (2015) explored the experiences of young Afghan men leaving care who did not have permanent leave to remain in the UK. They interviewed

twelve young people (and the professionals working with them from the home office and voluntary sector) who had accessed a project designed to promote voluntary return to Afghanistan. For the professionals it was identified that there was a clash between the ideal of a 'corporate parent' and legislative drive towards immigration status. The young men raised concerns about the potential of removal from the UK, now that they had left care but had not been granted permanent leave to remain. The researchers highlighted that despite the significant difficulties that remaining in the UK may hold, such as exclusion from employment, poverty and homelessness, this fate was still far better than the prospect of being returned 'home'.

It is important to recognise that, despite the myriad of difficulties facing a young person leaving care, it may not always be viewed as negative. As Liabo et al. (2016) identified many young people looked forward to moving out of foster care because it brings with it greater control over their own lives. The transition to being an 'adult' was also associated with freedom, having their own flat and obtaining a drivers' licence and potential employment. This is likely the same for some separated young people where boundaries and rule put in place by foster carers may be at odds with the previous experiences of the young people.

1.8 Research Rational and Clinical Relevance

There is limited research which seeks to explore and understand the experiences of separated children and young people leaving care. Of note throughout the literature there is, is a distinct lack of qualitative research where the views and experiences of separated children and young people leaving care are directly sought, particularly in the context of the UK. What research there is suggests that there continues to be significant numbers of separated children and young people seeking asylum in the UK, with a resultant increase in the numbers taken into local authority care. This increase is having a significant impact on the shape of care services and therefore the planning for provisions when leaving care.

Separated children and young people are an already vulnerable group in our society due to their experiences prior to arriving in the UK and the resultant changes which take place when they leave local authority care have the potential to render them even more so. This also makes it more likely that they will come into contact with mental health services and so a fuller understanding of the psychological impact of leaving care is needed. An exploration of separated young peoples' experiences of leaving care has the potential to offer insight into this process from their perspective and identify the challenges faced and the resources which allow them to navigate through.

This research was also born out of discussions held with experts from a counselling service and a national humanitarian organisation working with separated children and young people, who highlighted that the transition to leaving care is a period of significant stress that needs further detailed research.

1.8.1 Research Question

This study will ask the following question:

'How do separated children and young people seeking asylum in the UK experience the transition of leaving local authority care and its impact on their psychological well-being?'

2. METHOD

2.1 Epistemological Position

This research was conducted from a contextualist position as outlined by Madill, Jordan and Shirley (2000), proposing that knowledge is provisional, situation dependent and subjective and that different perspectives offer different insights into the same phenomenon (Willig, 2008). Jaeger and Rosnow (1988) highlight contextualism's emphasis that human activity as "situated within a sociohistorical and cultural milieu of meanings and relationships." (p. 66). This suggests that all actions are located within the context of time, space, culture, and societal expectations and must therefore be understood from within the context in which it is produced and the context from which it is received.

The contextualist position lends itself well to research within psychology because it sees the researcher and the participant as "conscious beings, interpreting and acting on the world around them within networks of cultural meaning" (Madill, Jordan and Shirley, 2000; p. 9). The researcher is then seen as an active participant in the development of knowledge. Smith, Flowers and Larkin (2009) situate this in the context of a double hermeneutic, where the researcher is seen as trying to make sense of the words of the participant, who is trying to make sense of their own experience. These 'making sense of' processes are, from this view point dependent on the contexts from which they are generated as the researcher only has access to the participant's experiences through the participants own account.

Understanding the production of knowledge in this way is important within this research where what is expressed will be shaped by the context of the young person's life both before and after journeying to the UK. Particularly under the label 'asylum seeker'. Interpretation will in turn be heavily influenced by the researcher's context, experiences and pre-understandings.

With this in mind, Pidgeon and Henwood (1997) identify four elements involved in the production of knowledge relevant to research analysis. These are: a) the participant's own understandings, b) the researcher's interpretations, c) cultural context which inform both the participant's and researcher's interpretations, and d) acts of judging particular interpretations as valid by wider scientific communities.

Madill et al. (2000) suggest that the contextualist position sits on a continuum between naïve realism and radical constructionism. Its understanding that there is not one objective, measurable reality sets it apart from naïve realism. However, the understanding that social practices have an underlying logic and structure, which may be discoverable positions it away from radical constructionism and makes it is compatible with a critical-realist position. This position identifies that the way we perceive 'facts', especially those related to our social world, is dependent upon our beliefs and expectations (Bunge, 1993). Therefore, there is an inherent subjectivity. Further to this, the contextualist position emphasises that context can change the meaning of an act as much as a change in an act can instigate changes the context (Jaeger and Rosnow, 1988) and so the accounts generated will be dependent upon this.

2.2 Methodological Approach

Much of the research exploring psychological well-being in forced migration, including separated children and young people utilises quantitative measures, focusing on individual psychopathology and epidemiological prevalence rates (Kelly, Nell and Nolte, 2016). Often these measures are built on western psychiatric constructs (Patel, 2003) making them flawed for multiple reasons, including their limitations in being representative of non-western constructions of distress. This may result in misguided or limited explanations of experiences. Using predefined categories and self-report measures also acts to decontextualise and silence those participating, taking away the opportunity to give their own accounts.

Wernesjo (2011) identified that a large proportion of studies with separated children and young people focus on categories of distress, including psychiatric diagnosis and trauma. This risks pathologising those involved and constructing them as a homogenous group who are passive and vulnerable rather than individuals with agency. Viewing their experiences in this way potentially misses the wider view. As Adichie (2009) suggests:

“The single story creates stereotypes, and the problem with stereotypes is not that they are untrue, but that they are incomplete. They make one story become the only story”.

Wernesjo suggest that more qualitative research should be conducted, giving voice to the young people and allowing multiple stories to come forward.

Therefore, a qualitative approach, focusing on the young people’s accounts will be used for this study.

2.3 Interpretative Phenomenological Analysis

Willig (2008) writes that phenomenological methods, such as Interpretative Phenomenological Analysis (IPA) amongst others could be considered as taking a contextual constructionist approach. As such, it is seen as appropriate to employ this within the contextualist epistemological framework of this research. Other approaches to qualitative analysis were considered, such as narrative analysis and discourse analysis which share some overlap with IPA (Smith et al., 2009). However, the intention of the research was to explore the individual, their experience of the transition to leaving care, and how they made sense it. This is more in keeping with IPA, with its focus on context and experience and so better suited to the research question. It was felt that other approaches to analysis would not allow for the same depth of analysis of the individual’s experience of the transition. The emphasis on interpretation within IPA was also an important factor in deciding on its use over other analysis because from a contextualist position one understands that accounts will be developed within a given context and interpreted from a particular position. IPA gives greater weight and understanding to incorporating this within the analysis.

Smith et al. (2009) highlight that IPA is informed by three important strands of the philosophy of knowledge: phenomenology, idiography and hermeneutics.

Phenomenology addresses the approach to studying experience. Specifically, what the experience of being human is like in the context of the lived world.

Smith et al. (2009) suggest this provides ideas about how one examines and comprehends lived experience. This also allows consideration of the person within the context of the world around them.

Idiography is concerned with the 'particular', representing both the sense of detail or depth of analysis completed and how experiential phenomenon might be understood by a particular people in a particular context. This is important to this research given the tendency to see separated children as one homogenous group, neglecting their varied ethnic and cultural backgrounds and experiences.

Hermeneutics is the theory of interpretation. For IPA it is concerned with how phenomenon appear and the role of the researcher in making sense of them (Smith et al., 2009). This involves giving attention to the meaning of the person's description, whilst considering the wider social and cultural context from which it is generated.

With this in mind, IPA acknowledges the researcher's role in developing a shared framework. This is shaped by both theirs and the participant's personal and cultural perspectives of the world, as well as the nature of the interaction between them (Willig, 2008). Therefore, analysis is always an interpretation. Willig and Billin (2012) suggest that to get close to the participant's experience, it has to be assumed that there is more than one 'world' that can be studied. The knowledge that is subsequently generated is the participant's construction of their 'world' in a particular context.

2.4 Procedure

2.4.1 Participants and Sample Size

Whilst IPA requires some level of homogeneity in the participants to examine convergence and divergence of experience, Smith et al. (2009) highlight that the homogeneity may vary from study to study. Shinebourne (2011) writes that homogeneity is often dictated by the focus of the study. That is, if a phenomenon is relatively rare, then this itself may set the limits. Alternatively, if the phenomenon is less specific, then participants may be drawn from a wider population with similar demographic.

In this study the homogeneity of the participants was met through their shared experiences of entering the UK as separated children seeking asylum. They also all experienced the transition to leaving local authority care. It was decided that gender would also be a homogenising factor. Whilst there is recognition that gender likely mediates exposure to and meaning making of experiences, there was also a practical consideration. A significant proportion of separated children are male (Refugee Council, 2018) and so it was more practical to recruit male participants.

It is important to recognise that in using this type of purposive sampling, assumptions were made about which aspects of identity were privileged by the participants and that these do indeed act to mediate experience. However, the use of external factors such as being in care or entering the UK as a separated child should serve to avoid making assumptions about how the young person might relate to factors such as ethnicity, therefore increasing homogeneity.

The majority of participants recruited in this study came from Afghanistan. This was not an active decision, as it was felt that from a phenomenological perspective the important experience being focused on was the transition to leaving care, rather than ethnicity or nationality. However, given the demographics of separated children entering the UK, Afghanistan remains one of the most prominent countries of origin and the young people would have also entered the UK at a time where a large proportion of separated children were Afghan. Whilst increasing the homogeneity of the participants may have

benefits, it is recognised that despite sharing a country of origin, the linguistic, educational and current social experiences of the young people were diverse. Thus, defining homogeneity by nationality may have been of limited value.

As reported previously, the Children (Leaving Care) Act (2000) extended the age at which looked after children are transitioned to leaving care services from 16 to 18 years of age. Therefore, in deciding on the age of participants, the lower limit of 18 years of age was dictated by the legislative framework. It was decided that an upper limit would not be set, but that participants would have experienced the transition to leaving care.

In identifying the number of participants for this study, Smith et al. (2009) suggest that there is no right or wrong answer in IPA. However, there is a general consensus amongst researchers using IPA that a smaller sample size allows for a richer, more detailed exploration of experiences (Shinebourne, 2011; Larkin, Watts and Clifton, 2006). This is echoed by Smith et al. (2009), who suggest that for professional doctorate theses a sample size of between 4 and 10 is common, proposing that larger data sets tend to inhibit the reflection and dialogue required for successful analysis. This study therefore looked to recruit between 6-8 participants.

2.4.2 Inclusion Criteria

The following inclusion criteria were used to select young people for the purposes of this study:

- Having entered the UK as a separated child or young person seeking asylum
- Having been placed in local authority care e.g., foster care, residential care
- Having experienced the transition to leaving care
- Being aged 18 years of age and over
- Being male

2.4.3 Preliminary Consultations

Prior to commencing this study, a consultation was held with 3 professionals working with separated children and young people. These professionals came from a range of backgrounds and included the Head of Service for a charity providing counselling to asylum seeking young people, a Consultant Clinical Psychologist with experience of working with looked after children and separated children and young people, and the Head of Refugee Support & Family Tracing at the British Red Cross. Whilst no representative from social care was present, the representative from the British Red Cross was a social worker by profession and had previously been head of service supporting separated children and young people within a social care setting in West London. From this it was evident that the transition to leaving care was a critical period of heightened distress for the young people. Particularly when there is uncertainty around asylum claims. Despite this anecdotal evidence, little research had been conducted so it was felt this would be a valuable area to research further.

Prior to data collection a second consultation was held with two representative separated young people to further discuss and refine the proposed study. Several points were raised in this consultation including agreement in the importance of the research topic. It also facilitated reflection on explaining the research in a meaningful and understandable way to ensure informed consent, and how best to establish rapport to allow the participants to feel able to answer questions.

2.4.4 Recruitment

Participants were recruited from a charity based in South East London which provides counselling services to separated children and young people. This organisation was involved in the conception of the research and its particular focus on the transition to leaving care. It was the head of this service who took a lead in identifying potential participants. Participants were then approached either by the head of service or the staff member known to them and given a copy of the research information sheet (see Appendix C) and consent form (see Appendix D) and an appropriate time and date for the interview was scheduled.

It was felt important to involve the organisation's staff in the recruitment phase as they were individuals known to the young people. They were also able to make a judgement about recruiting participants where there was concern that talking about their experiences could be detrimental to their psychological well-being.

Participants were offered an incentive of a £20 high street voucher for their involvement in the study. It was important to provide this to acknowledge their contribution to the research and reimburse them for their time.

Being mindful of the potential power imbalance that is inherent in the researcher – participant relationship, it was imperative that consent took an iterative process and that participants were advised that despite the monetary incentive, they may withdraw from the study without implications for their continued support from the organisations involved, nor that it would hold any consequence for their continuing asylum process (for further details see 2.6.2 below).

2.4.5 Interviews

Individual, semi-structured interviews (Appendix E) were conducted with all participants. Semi-structured interviews were used as they allowed for greater flexibility and fluidity to respond to the young person. It was hoped that the less directive nature would also be less threatening as it is likely they have experienced potentially distressing 'interviews' during their asylum process.

Interviews were conducted in a confidential space at the premises of the recruiting organisation and lasted approximately 60-80 minutes each. Speaking English was not an inclusion criterion and interpreters were available if required. However, all interviews were conducted in English. Smith (2004) identifies that IPA can be conducted with participants for whom English is not their primary language, however adaptation to interview style may be required, for example taking a stronger guiding role. It is suggested that researchers draw on their experiences of working with the given participant group in modifying existing procedures.

Prior to each interview, the research information sheet was reviewed with the young person and their understanding of the study and interview discussed.

Consent to participate was then reiterated and the consent form signed. On concluding the interview, a debrief was given and participants were given an opportunity to discuss any questions they may have. Consent was then reiterated, and participants were provided with an information sheet with detail of organisations that could be contacted to provide further support if required (see Appendix F).

2.5 Interpreters

Although this research did not set out to exclude the use of interpreters by recruiting only English-speaking participants, they were not in fact utilised during the research interviews. For the most, the participants reported a preference for speaking in English and this was seconded by the members of staff who recruited them, highlighting the participants proficient use of English during therapy sessions. Nonetheless it was important to consider the challenges of using interpreters in phenomenological research, acknowledging that the roles interpreters might take on, such as being an advocate (Raval & Smith, 2003) could impact on the accounts generated. For example, giving impartial translations or privileging certain information. However, in line with a contextualist epistemological position where there is an understanding that the researcher is active in the production of accounts, one also acknowledges the interpreter's active involvement (Temple & Edwards, 2002), this being implicated in a 'triple' rather than 'double hermeneutic', whereby the interpreter makes sense of the participants words, who is making sense of their experience. This in turn is then interpreted by the researcher.

Vara and Patel (2002) discuss the importance of attending to the methodological and ethical issues, as well as issues of power in working with interpreters in qualitative research. They highlight the important role that interpreters can play in ensuring that questions asked in interview use language that is meaningful to the participant and latterly that understanding of what is being asked of the participant is fully understood to develop truly informed consent. The lack of interpreters in this study will be discussed further in section 4.3.2.

2.6 Ethical Considerations

2.6.1 Ethical Approval

Ethical approval for this research was sought and granted by the University of East London School of Psychology Research Ethics Sub-committee (see Appendix A and B). Approval was also obtained from the head of service from the organisation involved in recruitment for this study. As participants were not recruited from NHS services, NHS ethical approval was not required.

Mackenzie, McDowell and Pittaway (2007) highlight the need to go beyond the 'harm minimisation' of standard ethical approval when conducting research with refugee groups. They note the importance of acknowledging the role of power in the consent process as well as oppression and exploitation, trust and mistrust, and the need to develop reciprocal benefits.

2.6.2 Informed Consent

Ensuring informed consent is paramount in working with separated children and young people. It is recognised that there is inherent power held by the researcher and/or lack of power felt by the participants. Responding to this it is suggested that the process of gaining informed consent be iterative, ensuring participants fully understand and agree to participate. It was initially intended that written information would be provided in both English and the participant's primary language, explaining the purpose of the research and their role. However, due to the limited budget this was not possible. Therefore, consent was sought verbally at the outset of all interviews and where needed this was also completed via the interpreter. Understanding and consent was then reiterated on completing the interviews to ensure the participants were still in agreement.

2.6.3 Confidentiality

All participant information and interview data was kept confidential. However, given the nature of work with separated children and young people there was the possibility that information related to their journey into the UK, past traumatic experiences or present distress may have been disclosed. Therefore, all participants were informed that confidentiality would be broken if the researcher had significant concerns that the young may be at risk of harming themselves or at risk of harm from others. It was made clear that where possible this would be discussed with the individual first.

On debriefing, it was apparent that a number of participants were considering the need to reengage with counselling services. It was agreed that this would be passed on to contacts in the service in order to facilitate this.

Further to this, confidentiality was protected as far as possible using pseudonyms on all written work. Audio recordings of interviews were copied and stored on a password-protected computer. Transcripts were stored on the same password-protected computer. Participants were advised that the researcher would share the transcripts with those supervising the research at the University. It is intended that transcripts will be kept for three years and then deleted. Only the researcher will have direct access to these files.

2.6.4 Managing Distress

Although interviews were intended to focus on the experience of transitioning from care, it was possible that participants would discuss past traumatic experiences. The researcher remained aware to this throughout interviews, allowing participants to stop, rearrange or withdraw if needed. This happened on only one occasion, where it was clear that the young person was becoming distressed and the interview was ceased for a short period of time before recommencing – at the behest of the participant.

Debriefing took place following all interviews, allowing participants to ask questions. This also provided an opportunity to ‘check-in’ and review anything that participants may have found distressing.

It is important to highlight that all participants continued to be connected to the counselling service and interviews were conducted on these premises. As all participants had been recruited via the counselling service and had either received therapeutic support in the past or continued to do so, permission had been granted to contact the service if required. It was agreed that should it be necessary, the service would arrange to meet with the young person individually to assess and review their current needs. Participants were also given the contact details of other organisations to contact for support if needed.

2.7 Reflexivity and My Position

From a contextualist position and for IPA, it is important to recognise the context from which the researcher is coming, as this holds implications for how knowledge and interpretations are created (Madill et al., 2000; Shinebourne, 2011). Smith et al. (2009) suggest that preconceptions pose as obstacles to interpretation. Therefore, it is important to acknowledge one's previous experiences, social position and preferences and how knowledge generated may depend on this (Willig, 2008). It is important therefore to be as transparent as possible about my position in relation to the topic of study.

I am a White British Male in my thirties, born and raised in the UK to two parents of British descent. I am also a parent. I grew up in a household with strong socialist views, which I have inherited. As a result, I have been acutely aware of the positioning by the UK media of separated children and young people and what I perceive to be an inadequate response from the current government. I believe this has fallen significantly short in providing support for a group of young people who are vulnerable both psychologically and physically. This has been reiterated in my reading around the topic prior to completing the research.

As a child, my family provided support to young people in care to have a break away from the city. My reflections on this led me to consider the possible effects of being in care on the psychological well-being of young people and how

leaving care likely impacts further. As a parent it is difficult not to think of how my own daughter would be in this situation and the responsibility we have as professionals to ensure their safety and support. I am also aware of the significant support I received from my family as I left home to attend university at 18, how difficult this was despite the support and resources I was equipped with, and how this could have been if it were not present.

Training as a Clinical Psychologist, I have found myself drawn to systemic approaches to working. I believe understanding someone as part of a system and within their wider historical, social and cultural context is of utmost importance. This has led me to pursue working with looked after and separated children and young people further, which I am currently doing, embedded within a Social Care team. Through my training and exposure to a range of psychological theories, I have become acutely aware of the impact of multiple stressors on the development and maintenance of distress. I have seen this played out in my work and I am aware of the implications that leaving care could have in adding to this. It is also important to acknowledge that my past experiences of liaising with social care have shaped my preunderstanding of the support they provide. I was mindful of this throughout this process.

2.8 Method of Analysis

IPA is an iterative process, requiring the researcher to engage reflectively in the participant's narrative (Shinebourne, 2011). As such it is often fluid and multi-directional rather than a fixed technique. However, guidance has been provided for employing this method (Smith et al., 2009; Shinebourne, 2011; Larkin and Thompson, 2012). It is this guidance that was drawn upon in the analysis of this study.

The initial stage involved an open engagement with the transcript where I allowed myself to read the text several times, noting down my initial responses and reactions. This helped to highlight and engage with some of my preconceptions to attempt to minimise their impact in the subsequent stages.

Following this 'free coding' (Larkin and Thompson, 2012) I completed a more detailed, line-by-line analysis of the text, noting the experiential claims of the participant. These included descriptive comments (events, relationships etc.) and conceptual comments (overarching understandings). These were noted in the right-hand margin of the transcript.

The second stage involved the identification of emerging themes. This was conducted at a 'case-level' and involved a clustering of my notes from the previous stage around salient themes. It is important to recognise here that these themes were not solely derived from the participant, but a product of both our collaborative efforts.

In the third stage connections between emergent themes were identified. Through a process of abstraction and subsumption it was possible to begin to recognise super-ordinate themes. It was beneficial to keep a record of this process, commenting on the analysis to help my understanding and to refer to later.

This process was then repeated with the remaining transcripts for the fourth stage. Attempts were made to partition off the previous transcripts, allowing for a more idiographic analysis and for the emergence of new themes where possible.

Once completed for all transcripts, it was then possible to begin the process of tentatively identifying themes across cases. This was a somewhat iterative process, resulting in the reconfiguring and reorganising of themes. This resulted in the development of a 'master table of themes' (see Appendix H).

It was then possible to begin a deeper interpretation of the themes. This involved reflecting and drawing on psychological processes and theory and an understanding of the participant's context to move beyond a description of their words.

Although written in a linear fashion for the purposes of this review, it is acknowledged that the analysis was more circular, involving a movement back and forth between stages. It was important to make note of this in my research journal, drawing on the process notes as well as ideas and theories which came to mind as I was completing the analysis.

3. ANALYSIS

Table 1 (below) summarises details of the participants for this study. 6 young people were interviewed, with an age range of 19-26 years. Participants had a mean age of 22 years. The mean years since leaving care was 4 years.

Table 1: Table of summary data of participants

Name	Age	Nationality	Years since leaving care
Shahmeer	26	Afghan	8
Wamiq	22	Afghan	4
Sarban	20	Afghan	2
David	25	Congolese	7
Shahin	21	Afghan	3
Shehzad	19	Afghan	1

The following analysis presents the descriptions and interpretation of the participants' experiences of transitioning to leaving care, discussed along with relevant literature. 3 super-ordinate themes emerged from their descriptions: 'An Unwanted Move', 'Loss and Hardship', and 'Surviving'. Table 2 outlines the super-ordinate and subordinate themes.

Table 2: Super-ordinate and subordinate themes

Super-ordinate Themes	Subordinate Themes
1) An Unwanted Move	a) Being forced
	b) Not being ready
	c) Negotiating services
2) Loss and Hardship	a) A difficult transition
	b) Loss
	c) Being alone
	d) Psychological and physical impact
3) Surviving	a) Resourcefulness
	b) The importance of family
	c) Moving Forward

3.1 Theme 1: An Unwanted Move

Across all interviews it became clear that the young men experienced the transition to leaving care as unwanted. This was particularly prominent for the young men who had experienced positive foster placements. Within this, the young men voiced experiences of being forced to move, not being ready, and the challenges of negotiating services.

3.1.1 Being Forced

A sense of having no choice over the timing of their transition was reported by all the young men. For the most part they identified an awareness of the transition occurring at aged 18 years, which for some was linked to a transition to becoming an adult. However, this was often experienced as being done to them by services and with uncertainty about what was in store.

Shahmeer highlighted this multiple times throughout his account, for example:

“When I turn 18, and then social workers say you have to leave the foster family. When you 18, you can’t live with them anymore.”

Shahmeer (226-228)

The passivity of his statement was echoed throughout the young men’s descriptions of their being told that they ‘have to leave’. It was often indicated that this was experienced as being done to them rather than a supported decision. Words such as “put in” and “told” suggested that they experienced the power as lying with the authorities and not themselves.

Sarban and David highlighted this in their expectations of independence at 18, contrasted with a sense of lack of choice.

“they told me, ‘you gonna move there’, I didn’t make decision. I was saying ‘I’m gonna stay here’, they said ‘No, you can’t stay here’”.

Sarban (163-165)

Added to this, David’s use of the words “some place” and “other people” suggest an idea of the unknow and of a transition in which he had no agency to make a choice.

“they just put me in, um, some place with other people and you just have to live there. They just left me like that”

David (106-108)

Even when a choice was given to the young men, this was experienced as a false one. Wamiq spoke about the transition to a new apartment and whilst this

appeared to be an attractive offer, he was also aware that he had little choice in the matter.

“They told me to go see the property. When I go, I see, I visit it. There was new condition also. I think maybe that’s making me to stay. I feel ‘alright, lets start living here’. But, there wasn’t any choice also, because pressure was also from the social services need to move, that I have to move”

Wamiq (322-328)

In response to the forced move a level of resistance was noted from the young men. The sense of disbelief reported by Wamiq, could represent this. Whilst he acknowledged the need to move, there was also a sense of a defence against the reality of it. In reflecting back on his thoughts at the time there was a realisation of the difficulty which faced him.

“they tell me about couple of month ago, before I was going to move, but I wasn’t believing it, that it would be hard to move. I was just, don’t take it that much serious, just normal for me.”

Wamiq (286-288)

Resistance was more overtly expressed in the reports of the young men voicing dissatisfaction to social workers and carers.

Shahmeer spoke about the attempts of both himself and his foster carers to prevent his transition to leaving care and moving away from their support. His statement that even his foster carers were resistant to the move suggests the extent of his reluctance and even perhaps how unjust he felt it was.

“even my uncle and my mum, they was trying as well. ‘You can tell them you can live, you know, you can live with us more than, more ‘til 21. But then I ask my social worker I want to live with her ‘til I’m 21, I don’t want to move anywhere, but they say ‘no’ they have to move”

Shahmeer (228-233)

Similarly, Sarban repeated multiple times that he had attempted to stay with his foster carers but was not permitted.

“And I was try and stay here, but they said ‘you can’t stay here’”

Sarban (71-72)

“I was try and stay there, but they didn’t let me stay there”

Sarban (101-102)

3.1.2 Not Being Ready

In preparing for the transition to leaving care, several of the young men recalled their experiences of being told what would happen. They reported either being told about it just before their eighteenth birthday or that they were told about it when they were too young to understand the implications.

“I think one month before, one month before I think, two months before they said ‘you going to be turn 18 this month, and then you gonna move to this place and you can’t stay here’.”

Sarban (78-81)

Shahin recalled being told about the move to independent living when he first moved to foster care. He felt that due to his age at the time, he was unable to really comprehend what this meant for him.

“I thought they told me that once you get 18, there’s no way you gonna stay here. So, they all moving out. So, I had no other options in my mind, that they gonna definitely move you out. But, at the same time, I was keeping myself confident like, ‘you’re only small, they not going to move you now. Maybe they say, then not going to move you’.”

Shahin (312 -317)

Dima and Skehill (2011) highlight the lack of planning which is often experienced by separated young people as they transition to leaving care. It is clear from the accounts above that the young men did not experience the move as well planned, particularly as there was little or no consultation with themselves. It is difficult not to begin to draw parallels with possible experiences the young men may have faced in leaving their homes and families before making the journey to the UK, where journeys are often poorly planned.

3.1.3 Negotiating Services

The transition to leaving care not only marked a move away from foster family but also the transfer of support from children's social care to adult services. All of the young men spoke of their experience of this and for the majority it was felt to have a negative impact. They spoke of feeling let down, not listened to, and importantly of a sense of being treated differently to others accessing support.

A number of the young men felt that they had been failed by social care. Closely linked to their experiences of being abandoned (see section 3.2.3), it was often reflected that despite help being requested, nothing came.

"I told her 'see this is no gas and oven not working, no heat, no heating, no hot water, nothing is here'.... She said, 'okay I will see', nothing else. She went out from my house and nothing she did. I was asking many times."

Shehzad (132-137)

As well as this, Shahin indicated that he was lost between services when the transfer occurred. A lack of communication between them and himself led to him being left without financial support.

"X passed me to 18 plus, then new social worker should contact me. Cuz I don't know they passed on my details to them. So they should have contacted me, let me know that they my social worker, I need to go and meet them. Nobody called me or no things like that and I was not getting money for two weeks."

Shahin (472-477)

This was echoed in David's account. Again, for him this reflected a failure in support being provided to him.

"When I turn 18, it's become an adult. So, they transfer me to another team. The other team, they wasn't, wasn't good because they stopped my support. I had to go out again. I become homeless..."

David (73-76)

Shahmeer spoke of experiencing a sense of being failed by his social worker which resulted in him being placed in a detention centre. His depiction of a repetition demonstrates a real frustration, which builds to a fundamental failure in care. Several of the young men spoke of this, but it was Shahmeer who made a direct connection.

"I went to the social worker office 30, 20 times I went to her. She was 'okay, I'll send it to her', and she was sending an email as well. The social worker, she's the one who put me in that situation. First time and second time same thing happened. Because of her I went to detention centre, she was not going to give me only one letter which says, 'I support this person, he's being supported by social services'."

Shahmeer (557-564)

When thinking about the level of support provided by social services, Shehzad reflected on his expectations that they would continue to fulfil the role of 'parent'. However, he appeared to suggest that their relationship was complicated by the fact that they were paid to support him, that it was not out of responsibility. It is possible that this is indicative of confusion in cultural expectations. Kohli (2006) suggests that it is likely the young men do not have a construct of 'social worker' in their cultural framework but do for 'friend' or 'mentor'. The expectation of responsibility might therefore be more with the latter resulting in a more personal experience of being let down.

For Shehzad, support may traditionally have come from the community or extended family. From a collectivist worldview, the group and its interests are the basic moral concerns (Triandis, 1995) and so support is given out of responsibility for the group, rather than because it is a paid job.

“Yes of course, because we don’t have any family member, so our PA [personal advisor] is, for us, everything our family. She or he is our family member. If she is on or he is on, she’s like our parent. So, we need their help. But, if they do job for money, it means they are not helping, they are just earning money.”

Shehzad (808-812)

Shahmeer also reported experiencing differences in the support provided. He appeared to juxtapose his respectful approach against an abusive approach taken by others. Although not explicit, he indicates that perhaps the former was not as effective in gaining support.

“some people are like, when you go there, they are swearing to the social worker, shouting on them. I never went to the council asking for money, I never went there. So, when are you going to give me house? Why are you doing this to me?”

Shahmeer (408-412)

A number of the young men also spoke of what appeared to be the unsettling nature of inconsistencies within the new service which at times led to confusion and instability.

“So, this was really difficult. In just 8 months, 3 times the PAs were changed. I said ‘Why are you change? You weren’t in the beginning as I was change for X to X’. I said, ‘Why was I changed?’. They did not reply me.”

Shehzad (706-709)

"I called social services, one lady she used to help me, but then in 2,3 months after she said she's not my social worker. You know, I was actually, I said 'What?'. She said, 'I'm not your social worker, who is your social worker?' I said I don't know."

Shahin (462-465)

Some of the young men reported experiencing the new service as uncaring and unresponsive to their needs. This often reflected a sense of not being listened to and again, this was linked with their experiences of professionals being there to do a job, but not feeling that they care. For those who identified this, it was often felt most when they needed immediate support and could be linked to a sense of being abandoned (see 3.2.3).

"Like when you living the leaving care. They only difficult about this is house. They don't give you house. Since when they put you in the house, they don't care. If the people nice or bad, anyone. They don't care."

Sarban (440-443)

"sometimes actually they are so careless, the social worker. Even if you phone them as well, they just ignore your calls. It was, you know, even when I was living there in that house..."

Shahmeer (348-350)

Sarban spoke of having an accident which left it difficult for him to walk around. He explained how the accommodation he had been placed in was not appropriate but attempts to be heard by his social worker failed.

"...because I can't go upstairs and down, up and down. They don't listen. It's really quite difficult to get these things here."

Sarban (449-451)

Reflecting on how they were treated by the social care team, Shehzad reported experiences of feeling as if he were treated differently to others. For him, the label of 'asylum seeker' preceded his interactions with social care and this meant that he did not receive the same support as others.

"If I'm or anyone who's not asylum seeker, we do something wrong, we both, government will do the law for both of us. The same. In the same case, if we need something, so you say that 'he's not asylum seeker' that's why we can give more opportunities to him and not you, because you are asylum seeker"

Shehzad (404-409)

Reflecting on this further Shehzad suggested that being defined as an 'asylum seeker' not only meant that he was different to others receiving social care, but perhaps in the eyes of the social services that he was no longer human. It could be that this represents the 'othering' and delegitimising of asylum seekers which is present in the discourse around the nature of their claims (Goodman & Speer, 2007; Masocha, 2015).

"I was hearing that 'you're asylum seeker', everywhere 'asylum seeker', 'asylum seeker'. So, I said, 'what does it mean 'asylum seeker'?' Oh, to be asylum seeker it's okay, this government, I respect this law. I should wait until my decision from home office. But, we are human. I will respect you, you have to respect me. I'm living here, it doesn't mean that I'm asylum seeker so that I'm not human."

Shehzad (387-393)

Despite these negative experiences, for some the relationship with social care was different. This perhaps reflected experiences of greater consistency.

"This whole long time, I have two social workers I think"

Wamiq (224)

“If I need something, then I call them they answer the phone. If they didn’t answer, then I could go there, speak to the you know, duty workers.”

Sarban (137-140)

It may also reflected the level of expectation placed on social services and how much is invested in them.

“Social services I wasn’t that much sharing any my personal things. I have this social worker, sometimes I just talk to him and I was sharing with him little bit, not like 5% my health, problems and that”

Wamiq (244-247)

3.2 Theme 2: Loss and Hardship

Whilst all the young men were aware of the need to transition to leaving care, they did not all anticipate the difficulties they would face. These difficulties were often pervasive, affecting multiple areas of their lives. The difficulty of this transition was characterised by not being prepared for the reality that would face them, accompanied by multiple losses and a sense of being alone and abandoned. All of which had significant impact on their psychological and physical well-being.

3.2.1 A Difficult Transition

In describing a difficult transition, David made explicit that this was due to the change in social care team. He gives the impression that this was not felt immediately, but that things deteriorated insidiously.

“But then, um, when I turned 18. Then [exhaled] that’s where things turned a bit, bad. Across the year, because I had to change social services”

David (70-72)

Wamiq also indicated that there was a difference between the time before the transition and the time after. Having not fully recognised that the transition would be difficult, Wamiq described a more sudden realisation of what it meant to live independently.

“But, when I was move, when the time’s coming, to going to move, that was difficult, yeah. Was really difficult to move in that, to own property and that. Don’t want to live alone and that, deal with all the things and this.”

Wamiq (288-292)

In describing his initial reaction on transitioning to his new accommodation, Sarban showed its significance by likening it to that of his arrival into the UK. He highlighted the uncertainty that presented itself in not knowing how to negotiate some of the most basic tasks. He emphasised this uncertainty with his repetition of “like new” as if seeing these things for the first time and not knowing what to do.

“Everything looked new to me. Like, when you come to this country from different country. Like, for example you coming from different country and you stay here, everything looked new. When I got there, there was everything was like new to me. I was thinking where I’m gonna wash my clothes, what I’m gonna do? So everything was new to me and it was quite difficult to understand everything, you know”

Sarban (112-119)

This lack of preparedness was echoed by all the young men and tended to have an immediate focus on the practical tasks required to care for one’s self. Often these were the skills that one might construct as being expected within a move to independence in the UK such cooking and washing clothes. It is important to consider the cultural context to these tasks. Whilst there remains a gendered stereotype of cooking and cleaning being in the domain of women in the UK, the reality is that many young men would expect to undertake these tasks when living independently. However, it is possible that within the cultural expectations of the young men interviewed, this is not something they would have been

expected to undertake (Hughes & Rees, 2016) and so it was experienced as more challenging.

“How, need to cook for myself and deal with cooking and living style. So, at the beginning it was quite difficult”

Wamiq (44-46)

“I can’t cook by myself, this was my first time. I was just a student, I’ve never seen these kind of things.”

Shehzad (579-580)

Shahin reflected on how he was unprepared because these tasks were previously completed by his foster carers. This could also reflect his experiences growing up prior to his journey to the UK. His description of being lost emphasises this sense of lack of preparation.

“I was, you know. Because when I used to go home, there is cooked everything, you know. Almost every time, everything was there actually. There, foster carer used to provide everything. But, when I moved to new place I had no idea what to get, how to cook, things like that. I was quite lost and confused”

Shahin (207-211)

The young men also spoke of having to begin to manage their own finances, negotiating an unfamiliar task in an unfamiliar system. At the most extreme, this resulted in being taken to court and subsequently paying arrears. These additional factors were closely linked to feelings of being overwhelmed by multiple challenges and will be discussed later (see 3.2.4).

“The housing benefit and that. Still I have some arrears from that property because I wasn’t understand at the beginning how I’m going to deal with um, housing benefit, council tax and water and gas, electrical.”

Wamiq (412-415)

“After that I was getting letter from the council tax. Oh, I have to pay council tax, you have to pay that much rent and everything, how much council tax come? When I was there I had a letter from the council tax saying I had to pay £800. I had to pay that. And I was like, what can I pay that from?”

Shahmeer (384-388)

Chase et al. (2008) highlighted that the young people they spoke with described experiencing difficulties living with strangers when moving to new placements. This was also voiced by the young men in this study and linked to themes of isolation, vulnerability and difficulties attending education.

“It was quite noisy. It had different background people live there. But then the night time about 4’o’clock, 5’o’clock people are making loud noises, loud music, playing sounds like that. I had my school work, college work actually. I couldn’t make it.”

Shahin (27-31)

“they give me a house in the high street that was so noisy, you can’t focus to go to college, they move me here and there’s so much noise here”

Sarban (41-44)

Others spoke about being confronted with properties which, as Shahmeer described, were not suitable for living even at the most basic level such as functioning windows.

“I move there and there was, like, there was a problem again being when I live there. It was too damp, too damp and there was a rat coming in. The landlord, he was, I was asking a few times even the window, it was shut, you couldn’t open the window. It was blocked. You couldn’t open it, it would break”

Shahmeer (240-245)

“kitchen was, er, broken furnitures and, no microwave. No, oven wasn’t working. So very bad situation. Very dirty house and everything was broken. No chairs, no table. So yes, the doors were broken, and everything was damaged. Also, gas trouble, electricity troubles...”

Shahin (108-112)

3.2.2 Loss

As well as the difficulties above, loss was also reported by all the young men. This included loss of support, loss of activity and significantly a loss of education. Echoing the finding of Dima and Skehill (2011), the young men in this study reported experiencing going from near total support to nothing. This represented loss of both practical and emotional support at a time of great change and uncertainty, impacting significantly on their psychological well-being.

In Shahmeer’s words he was ‘living without’ forming a comparison to his previous experience of living *with* the support of his foster carers. He highlighted in particular the loss of his “mum” which could draw parallels with his experiences of leaving his family when leaving Afghanistan.

“She was there, but when I moved to my, when I moved to my own house and turn 18, then after that I was living without. And I became, you know, because my mum she wasn’t there, and I became depressed. I became upset and upset.”

Shahmeer (274-278)

Sarban reflected on the certainty previously provided by his foster family and how this changed when he left their care to live independently.

“It was really difficult because, you know, I was with that foster family I know everything, their role, everything. How to talk to them, how to behave or anything.”

Sarban (68-70)

Shahin spoke about experiencing of loss of closeness with his foster family. Giving a description of what appeared to be very routine interactions, what he says does not appear to be just about the loss of routine, but about the loss of family life. Like Shahmeer, he makes no direct link, but it is difficult not to wonder about his original experience of the losing of his family when leaving Afghanistan and the repeated nature of this now in transitioning to leaving care. As Hughes and Rees (2016) suggest, this feels like the loss of family for a second time during a very crucial point in their lives.

“I get, you know, of the foster carer. I get used to them. So, every evening when I was coming, I mean every afternoon I was coming from school we used to sit and evening time, near evening time we have like, in the living room sitting and talking, everybody was there like, you know, having dinner together, night time we give everybody like ‘good night’. In the morning time everybody breakfast, talking. But when I moved to independence, everything was like, I was like where am I? It was like very tough for me. I said ‘what’s this? I can’t live like this’.”

Shahin (165-174)

Wamiq also spoke of a loss of connection with others, highlighting the potential consequences for psychological well-being and the role of others in providing support to maintain emotional stability.

“Um, difficulty was the first things about living alone. Don’t share, couldn’t share anything with um, if I got problems, who I’ll share with?”

Wamiq (49-51)

Others spoke of the loss of activities they had previously enjoyed. It is possible that these represent a change in their financial or practical circumstances, but also likely represents a deterioration in their mood.

"I was doing activities, like I was going to sports, sometimes going to the gym. I was swimming and since then, when I move to my own, I think things changed. I never go sports. I started, things were slowly, slowly getting, you know, different. So, it was getting harder and harder."

Shahmeer (327-331)

In Shehzad's explanation of his stopping drawing, he indicated that there was something different about the transition to leaving care which had a greater impact on him, even compared to his journey to the UK. In France and during his foster placement he continued his art, but on transitioning to leaving care it stopped. It is difficult not to question what it was about the transition that has such an impact and wonder if it was experienced as the end of all hope.

"I was still drawing in my foster house. From France I was drawing, making paintings in France as well as here in the foster care. As I was moved from foster care, I stopped."

Shehzad (168-170)

As Wade et al. (2005) identified, the loss of activity was felt on returning home from school or college, linking it with the sense of being alone. Shahin highlights this in depicting the rather desolate scene which awaited him every evening. His repetition highlights the loss of what appears to be a very basic family activity but drives home his new experience of deprivation since the transition.

"It was very difficult actually. When I moved to the new place, you know, I used to watch TV, like I told you, with family. I used to watch TV every time. When I moved to a new place, a new thing, no TV, nothing. So, all I you had to do... It was just like this room with a bed. So, when I left 6th form, straight here and sit. Put yourself on a bed and things like that."

Shahin (425-429)

Loss of education was also experienced by many of the young men who reported difficulties being present at school or college. This presence could be interpreted both as a physical presence in college, but also psychological in that even when attending, it was difficult to focus. This was often linked to the sense of being overwhelmed.

“When I actually move from foster carer, the second week I had exam. So they, because of my age, they moved me to independence. But, my exam was coming and by the next week. That was actually too many pressures and thinking and you know, missing my foster carers and new place.”

Shahin (243-247)

David and Shahmeer highlighted how their change in circumstances at 18 years of age impacted on their education. For separated children and young people, education holds a significant value and is seen as a route to a good job and income (Newbigging & Thomas, 2011) and a better future (Pastoor, 2015). The loss of this then is a direct challenge to their ability to be able to reclaim a ‘normal childhood’ (Argent, 1996).

“I needed, what do you call it? A letter from support that shows I’m on benefits. From the social worker. So, I didn’t have one. So, I couldn’t, they wouldn’t accept me at college for that. So, that was why I was stuck as well, so I could never study”

David (182-186)

“after that I went to the college to get admission for further education. I’ve got, I did diploma in public service, but I wanted to go further as well. But, because of my support, I didn’t have visa, so because of that they say I cannot go further.”

Shahmeer (27-32)

3.2.3 Being Alone

Throughout much of the relevant literature there has been identification of feeling alone or isolated (Chase et al., 2008; Wade et al., 2005; Söderqvist, 2014). This was reflected in the accounts of the young men who frequently mentioned being 'alone' despite living in shared accommodation. For some there was a realisation that this meant having to do things on your own for the first time.

"Sudden, once you move to your own place, so you will have to do it on your own"

Shahin (289-290)

For the most part, the young men recognised how being alone impacted on their psychological well-being. This could be because it left them feeling vulnerable, as Wamiq and Shahin expressed. It could also have been because it created more time where they were unoccupied, resulting in them being exposed to thoughts of their past or their current difficulties. For several of the young men, the move to leaving care was their first time that they had been alone since arriving in the UK.

"that's why I never felt that I'm alone, I never felt I was kind of, I lived in the background. So, because I do a lot of thinking at night time, but then I was like, you know, calm. But when I lived on my own, started living on my own, then things suddenly get changed"

Shahmeer (306-310)

"If I need to go back home, back again, night time and all. You don't know nobody there and it's quite scary as well, you know, because it's my first move"

Shahin (181-183)

For Wamiq, being alone meant being unprotected. This could represent experiences from his journey to the UK, where being alone made him vulnerable to physical harm. It could also be that he was indicating being alone makes one vulnerable to their own thoughts, and as discussed below, vulnerable to self-harm.

“When someone’s um, don’t have parents and a family and difficulty with mentality. Is as I understanding. So, alone, could be happen anything. Um, could be happen anything.”

Wamiq (163-166)

For Shehzad and David, the transition left them more than simply alone and their accounts appeared to reflect a sense of abandonment, being left to fend for themselves. Again, it is possible that this was reminiscent of their experiences during their journey to the UK, although this was never explicitly mentioned.

“I was calling to landlord, he said this my not responsibility, I can’t give you money. I call leaving care team, they say ‘no, this is Christmas days, your PA is on holidays’. So, I was living there alone and into everything was damaged”

Shehzad (122-126)

“So, when I turned 18, there wasn’t that person anymore. So it was like, there wasn’t anymore that person and um, we just had to, they just put me in some place with other people and you just live there, they just left me like that.”

David (104-108)

3.2.4 Psychological and Physical Impact

A sense of being overwhelmed was present for all the young men, appearing to permeate every aspect of their lives. It reflected current concerns with independence, rumination on events of the past, and worries about their futures.

Shahmeer reported that following his transition there appeared to be a renewed uncertainty about life and a whirl of building pressure from multiple stressors. He appeared to indicate that it had changed him unexpectedly, and that perhaps it has even led to him questioning his identity.

“When I lived on my own, started living my own, then things suddenly get changed, you know. Then I start thinking about the past, about the family, about the future, what’s going to happen to me now? Everything was coming together like, make me just... and I’m just like a person I thought I’m never going to be like this”

Shahmeer (309-313)

For Shahin, as with the young people in Wade et al.’s (2005) study, the combination of managing independent living and education became overwhelming.

“Really difficult for me, I had tough time there. I was moved, newly moved to independence as well, so those things like – oh man, need to think about home and you’re here and things like that. I’ve got a lot of work, when I got there, how to cook, things like that you know.”

Shahin (216-219)

As others have also highlighted (Chase et al., 2008; Soderqvist, 2014) turning 18 not only meant the transition to leaving care, but also the end of their ‘leave to remain’ rights. This weighed heavy for many of the young men and contributed to the multiple stressors which left them feeling overwhelmed.

“These things happen at the same time actually. When I move from foster carer and I had visa actually at that time. When I move to place, new first place, what happened my visa expired as well.... I was in 6th form as well. Too many pressures from that one, and the same time asylum pressure came on me as well. So, it was made very difficult for me at that time”

Shahin (551-564)

The transition and sense of being overwhelmed, and their consequent impact on mood was voiced by all the young men either explicitly or implicitly. Shahin recalled being overwhelmed by his emotions. His repetition of ‘totally lost’ suggests a sense of loss of direction in life, not knowing how to proceed. Given the uncertainty that follows turning 18 years of age this is likely.

“too much things messing around with my mind, with my, I don’t know, my mood. That was make me very sad actually. I was, you are totally lost, I was lost totally at that time.”

Shahin (264-267)

Likewise, Shahmeer identified that the combination of multiple stressors and being overwhelmed resulted in him feeling depressed. There was a sense that he also did not know how to proceed. He stops short of identifying what the consequences of this could have been, perhaps because this would have been too painful to talk about.

“when I move from foster family, everything came after, everything came together. Asylum case get rejected, and then the house, you know. Everything. That’s why it make me wanna, it make me so depressed”

Shahmeer (539-542)

Shehzad spoke of being distressed and seeking support when he felt overwhelmed by his situation. Within his retelling there is no overt mention of thoughts to self-harm or suicide, but this appeared implicitly from the response of the persons supporting him.

“she listen, she heard my voice. She said ‘don’t cut your call, just talking with me, and talk with me as much as possible’. At that time, I was that much worry, that I was crying. She said ‘Shehzad, it’s okay to cry, but don’t worry and don’t cut your call until your friends come to your house.’”

Shehzad (353-359)

However, Wamiq and Shahin both voiced that such was the intensity of their difficulties on leaving care that they had thoughts of taking their own lives. Hannon et al. (2010) report that in readying to leave care psychological and emotional preparation is often forgotten and with this there is the potential for serious consequences.

“So many happen to me, like so many times was feeling really bad, low. Like from zero to ten, there was like a one or a two. Just to clear life and that. I wasn’t happy from life to stay in life and that”

Wamiq (59-62)

“So it was made very difficult for me at that time, you know. Sometimes it makes me feel like, just to leave everything and just, you know, just leave it. Leave your life.

Sarban (563-565)

Others spoke of the consequences of the difficulties they now faced as leading them to self-harming. Madge et al. (2008) identify that the most common reasons to self-harm in adolescence include gaining relief from distressing mental states, to escape or to seek help. Common in the accounts of the young men here, was the use of self-harm as a means of emotional regulation and as Madge et al. highlight, as relief from distress.

"I was thinking too much, too much and then I was like, when I'm thinking and I'm like there's no solution, just cut yourself and it calm me down"

David (397-400)

"just self-harm and that relieve me depression, you know. Depressed everywhere, in my mind, that help me calm down and then that became more, slowly, slowly, that became more habit, you know. If I become depressed, then I had to self-harm. It doesn't matter what kind of self-harm because I did that like, cut my arms or do something, bash myself, bang my head with walls, whatever."

Shahmeer (280-285)

For three of the young men, the experiences of the transition also had a physical manifestation. Shahin indicated that as a result of the pressure of the transition and managing the concurrent difficulties, he was unable to eat and as so his physical appearance began to change.

"That was why, too much thinking, too much pressure made me skinny"

Shahin (224-225)

For Shehzad, the pressure and stress resulted in him experiencing pain and weakness on the left side of his body.

"This weakness was because of too much stress."

Shehzad (181)

Whereas Shahmeer reported developing a rash over his body.

"because I had a rash on my body because of that. My body, even still I've got a rash because of this."

Shahmeer (376-377)

3.3 Theme 3: Surviving

As well as the negative experienced highlighted by the young men, throughout many of their stories also ran a theme of surviving. Reflecting the resilience often attributed to separated children and young people (Richman, 1998; Kohli and Mathers, 2003; Hughes and Rees, 2016) this also demonstrates their resourcefulness, the importance of support from foster families, and their ability to continue moving forward despite the adversity.

3.3.1 Resourcefulness

The young men often reflected on their own ways of coping following the transition to leaving care. Some spoke about building on their own inner resources and the need to retain positive thinking despite the difficulties surrounding them.

“Only if you thinking positive. If you thinking all the time negative, its making you all down [laughs]. You need to thinking ‘wow, home office going send me to Afghanistan. Oh, I’m gonna fail this exam’ that’s not going to never happen, thinking positive, everything will come positive, you know.”

Sarban (424-428)

David also spoke of managing the difficulties through thinking differently about it. He suggested that by reframing his difficulties as ‘just part of everyday life’ he was able to avoid becoming too distressed by them.

“It was very stressful, but I just didn’t, I was just trying to avoid the stress. So, I was just trying to make it look like normal, part of life.”

David (170-172)

When considering the experiences of those leaving care, the difficulties that arise following the transition are often significant and can have an overwhelming impact on the course of the young person's life (Dixon, 2008). Given the likely trauma that the young men within this study faced on their journey it is interesting that they are able to draw on such skills as thinking positively or positively reframing. Kohli (2001) suggests that there are differences between looked after children who have spent the majority of their lives in care (e.g., British nationals being looked after by local authority care) and the separated children and young people who have been in care since their arrival in the UK. It is possible that separated young people experienced a more stable attachment with family members in their early years, allowing them to develop resources to draw upon when facing adversity. For those in care for the majority of their early lives, this is not likely to have been the case.

Resourcefulness also reflected the ability or confidence to take action when needed. For Shehzad this included making an active decision to seek the support of friends rather than waiting for social services to intervene.

"I was waiting one and a half months, but in my friend's home because that was not suitable because it was not leaving me to sleep"

Shehzad (301-303)

David described his experience of the leaving care service stopping his support prematurely which resulted in him being made homeless shortly after his transition. However, he was later able to counter this because of his resourcefulness at the time.

"and when they asked them, they denied it. They said I just left the house. But, luckily I had, I was keeping all the letters I was getting from them. So, yeah, that's why, that's why you have to challenge the social services."

David (233-236)

Drawing on support from others was also an important theme voiced by the young men. This included support from services, support from foster carers and support from friends.

Shahin and Shehzad spoke of drawing on the support of the professionals around them.

“So, they provide me with a key worker and she came to home. She said ‘I’m your keyworker. If you need anything, so you can tell your social worker, you can tell me if anything goes wrong in the home or anything’, you know.”

Shahin (383-386)

“there is this small department called XX charity department. In the morning she saw my house as well and she wrote the letter for my PA and her manager, so. She was shocked when she saw my house.”

Shehzad (101-104)

Others spoke of drawing on the support of friends. This included both gaining emotional support, connecting with others to feel less isolated, but also learning from their experiences. Thommessen et al. (2015) highlight the importance of social support as a protective factor in separated children and young people. From Sarban's account it is easy to see how he interprets support from his friends as giving him strength and keeping him stable.

“Yeah, it’s good to have good friends. It makes you everything. Makes you like, strong, makes you like, safe. Also, if there’s anything happen they will tell you, they will speak you like, okay just leave it. It just happen like, you know. Like, make you calm down, to relax”

Sarban (369-372)

"I used to go to the youth project. That was quite helpful. Also, I start visiting, seeing friends, make friends and that. So, that make me a little more good and that, because I wasn't know anyone in community."

Wamiq (362-365)

Shahin spoke of the importance of being able to learn from other young people's experiences and draw upon this to help navigate the difficulties he faced following his transition.

"I mean, it was still tough, but I managed somehow. I saw other people as well. Young people, who lived independent. So, when they started talking to me, then I had understanding."

Shahin (267-270)

Goodman (2004) highlights that keeping busy and suppressing negative thoughts is a commonly used coping strategy in the short term. The majority of the young men here highlighted that remaining active was an effective way of keeping their minds positively focused. It could be that this represents a coping style consistent with hegemonic masculinity, but it is important to acknowledge that the notion of white, western masculinity is likely very different to that of the young men in this sample.

"Lots of distracting. Um, so, when I was busy with something um, then I forgot that. When not busy and doing nothing, then I get back stress and feel down."

Wamiq (57-59)

"You just focus on your work, you don't focus the thinking that this thing is coming to me head. If you stay at home and you just thinking 'what happened to my family, what happened to me, what happened to my life and education?'"

Sarban (543-546)

The importance of respect in helping maintain a positive environment and in negotiating adversities was also highlighted. It is possible that this reflects the young men drawing on cultural or religious aspect of their lives as a means of facilitating a good passage through life. It has been suggested that being helpful and respectful to others is connected with one's own self-worth (Bragin et al., 2014) and that respect is endorsed as one of the most important characteristics of a good person in people from collectivist societies (Smith, Turk Smith & Christopher, 2007). It is possible that it is this which guides the young men's responses.

"If you are a good person, you can attract these people. Like, you can live with them."

Shahmeer (214-215)

"So now, if I go to my friends, so I can see how respect, the respect they give me. If they coming to my house, I can see like how much I respect them. So, it's more better than that time"

Sarban (384-387)

3.3.2 Importance of Family

Foster families played a key role in the preparation for transition to leaving care and throughout the initial stages after transition. This was repeatedly highlighted in the young men's accounts.

Several young men reported experiencing their foster family as being like parents to them. This was important in establishing how they connected with them and how they used their support during the transition.

"The foster family was like, its not really parents, but um, for me was like a parents. I have parents, so whenever I have any problems I share with them and they deal with the problems and sort out for me."

Wamiq (20-23)

“I call him Uncle. His name was X and um, my mum, I call her Mum, she’s um, they was one of the best people in the world actually. X was one of the best guys because of the way he treat me, the way he support me until the end he was alive”

Shahmeer (117-121)

The majority of the young men reflected on the important practical skills passed to them from their foster carers.

“the foster family was trying to push me as um, to learn something and keep me up there like to be as adult and when I’m aged a little bit older. They show me how to do shopping like, so for shopping or to use the town...”

Wamiq (114-118)

Sarban highlighted the role of this foster family in helping him prepare for the future. He focused less on the practical nature of tasks, but like Wamiq, explored the role of the foster family in helping him to grow in maturity and setting up for independence. This could be considered within the context of adolescence as part of the family life cycle (Carter & McGoldrick, 1982). It is proposed that boundaries are widened to promote the young person’s independence in preparation for transitions away from the family. This might include the giving of advice and teaching of skills as reflected in the young men’s accounts.

“Looking after you and give you advice. And make you to, you know, like to do something. Like study or good things and make you ready to work”

Sarban (49-51)

Similarly, Shahin spoke about the role of his foster family in helping him to develop skills for independent living over time.

“Then um, after two years, when I left foster carers, it takes time. Then I understand how to, you know. How to book appointments. They slowly, slowly teach me – the foster carer. How to book appointments.”

Shahin (327-330)

The young men also spoke of experiencing their foster families as sources of support and protection throughout the transition. At times the foster family appeared as advocates for the young men, as one might expect from parents.

“Well, going to my foster carers home, I told them and they were actually, they said, ‘this is not fair’. So, they actually called social services and said ‘what’s going on? This boy has, you’re not supporting him’.”

Shahin (486-488)

The young men also reflected on the important role of the foster carers in supporting their mood.

“So, all those things made me think. Even in class. When I was going to my foster carer I used to tell them this, that I too scared when I go to home, if anything happen there, I don’t know anyone there. They say ‘okay, okay, that’s fine, don’t worry about that’. They keep me quite you know, confident.”

Shahin (192-197)

“Foster family was one of the best. All the times they around me, help me and take me some, take me around to just my minds get relaxed, um, to don’t think. But, always they support me.”

Wamiq (67-71)

The continuation of support from their foster families was also echoed by Shahmeer. At a time of feeling isolated and alone, this support appeared significant in helping him negotiate the transition.

“Even though I left them, I still go there. I still go and see my mum, you know. Whenever I want to go, will go. I can go there. Like, always they are there for me, I’m there for them as well.”

Shahmeer (203)

This continued support from foster families appeared to provide some level of confidence for the young men. Knowing that someone else was there to be able to share difficulties with was an important protective factor.

“they had dealing with my education. If I like, helping with education and those things and also, they help with the sharing. If I have any problems and that to sharing with the foster family.”

Wamiq (17-20)

3.3.3 Moving Forward

For many of the young men, the transition to leaving care was seen as an opportunity to develop the skills required to live independently. Albeit mixed with the difficulties mentioned above, this was seen as an exciting experience where one would begin the transition to adulthood.

Sarban reflected on his decision not to resist leaving his foster carers because of the positive aspect of living independently.

“they not going to let me stay here, so it better to move because if you move there you will see everything by yourself and understand and make more things to, you know, see.”

Sarban (165-168)

Likewise, David reflected on the learning opportunities and what this meant to be an adult.

“I became more responsible. I could look after myself. I was, I really liked it because I become more mature basically. You know, to manage money. I start to know how to manage money.”

David (58-61)

Sarban also reflected on the positive gains of the transition with regards to becoming more independent and gaining greater control over his life.

“The reason why I am better, I know how to control my life. I know how to do things in the house. I know how to bring friends and the like, how to talk to them. When I was in the foster carer, I was not allowed to bring friends to that house.”

Sarban (378-381)

For some this reflected a change in their perspective over what they could and could not do.

“after that, I say ‘oh wow!’, I used to think like it would be hard, but now you’re quite confident. Now when you have appointments somewhere you can go by yourself.”

Shahin (337-339)

For David this was about gaining a greater sense of control and being prepared, particularly in the face of upcoming transitions.

“The good thing is, I’m not really panicking or worried now than I was before when they told me the first time. Now, I’m just calm.”

David (529-531)

This also reflected hope for the future and a sense of persevering.

“I, maybe today or tomorrow they gonna offer me some places and I will move. But, this is not something to hurt your own life. Is a something is a few months or a few years, maybe. If lots of, maybe one year or two years. Or maybe three. But this, somethings possible, they gonna change, they gonna change.”

Wamiq (525-530)

4. DISCUSSION

This final chapter will return to examine the original research aims of the study and how these were met in relation to the themes from the analysis and relevant literature. A critical evaluation of the study will then follow, with suggested implications for clinical practice, future research and policy.

4.1 Reviewing the Research Aims

The central aim of this study was to develop a greater understanding of the experiences of separated children and young people's transition to leaving care and its potential impact on their psychological well-being. The study also sought to emphasise the voices of the young people through employing qualitative methods which have been lacking in previous research.

The previous chapter provided an analysis of the data collected from six interviews with separated young men who had experienced the transition to leaving care and the subsequent development of three super-ordinate themes. These were 'An Unwanted Move', 'Loss and Hardship' and 'Surviving'. They will now be discussed further in relation to existing research and literature.

4.1.1 An Unwanted Move

The decision for young people not in care to leave home is generally an active one, with the young person choosing where and when they go and with whom they live with. However, for looked after children this is frequently not the case (Morgan and Lindsay, 2006). The theme 'An Unwanted Move' summarised experiences of the young men around the preparation to leave care. In this, they spoke of experiences akin to being forced and reflected on their lack of control, which for some was countered with attempts at resistance. They also

highlighted not being ready and spoke of the challenge of negotiating changing services.

As highlighted previously, there is limited literature on the specific experiences of separated children and young people transitioning to leaving care outside the context of wider transitions, for example the transition to adulthood. However, the literature that does explore these experiences is supported by the accounts of the young men in this study. Ni Raghallaigh and Thornton (2017) identified how social workers highlighted the vulnerability of separated young people and their lack of readiness for leaving care. Similarly, Zeira (2009) reported that young people who immigrated without parents found the transition from state care to independent living harder than their peers. Literature exploring the transition to leaving care for native young people raised in care also highlighted the difficulty of the transition. In particular a sense of lack of control in decision making was emphasised (Sulimani-Aidan, 2014; Liabo et al., 2017). All of these points were made explicitly by the young men when talking about their preparation to transition and their initial experiences of being in independent living.

Although never explicitly stated, it is possible that this mirrored the experiences of the young men as they prepared to leave their homes before their journey to the UK. Thomas, Thomas, Nafees and Bhugra (2004) suggest that the primary reasons for separated children and young people to leave their homes is death or persecution of a family member and persecution of the young person themselves. The consequences of this mean that their journeys are poorly or wholly unplanned (Hopkins & Hill, 2008). There was a sense from the young men in this study that this is how they also experienced the transition from care.

Nelson, Price and Zubrzycki (2017) suggest that persecution suffered in the past is compounded by the experiences of the young person's journey and the circumstances faced when in the host country. It is likely that the young men in this study suffered oppression and violence either prior to or during their journeys. It is important therefore to reflect on how this might appear to be perpetuated in their experience of the relationship with social services. The young men reported experiencing being told to leave and given little or no choice, propagating experiences of lacking power and agency.

In response to their experiences, the young men also reported acts of resistance through petitioning professionals against their move and by mobilising the support of carers. Hughes and Rees (2016) write of the importance of highlighting these acts of resistance in work with separated young people in relation to trauma experiences. Others suggest that these acts of resistance help to redress the balance of power for separated young people and so are important in helping them to gain a sense of control (Chase, 2010; Nelson et al, 2017).

In keeping with Chase et al.'s (2008) findings, the young men in this study had variable experiences of negotiating social services. The majority reported negative experiences, such as feeling as if they had been failed or let down. Kohli (2006) reports on the confusion that is felt by separated young people as they face the transition between child and adult services and this was true for a number of the young men. Also of significance, and again in keeping with Chase et al.'s (2008) finding, were the experiences of being treated differently to others. This was explicitly linked to the label of 'asylum seeker' by one young man who indicated their rights as humans was being questioned. It is possible that a view of the young men as 'other' resulted in a sense of being treated differently.

4.1.2 Loss and Hardship

The young men identified the significant impact that the transition to leaving care had on their psychological and physical well-being. This included a sense of being unprepared, of being alone and abandoned and experiencing multiple losses. The result of which led to experiencing low mood, anxiety and at its most extreme self-harm and thoughts of suicide.

Throughout the literature it is highlighted that the combination of experiences from pre-migration, during travel to, and after arrival in the host country results in a heightened risk of psychological distress (Fazel & Stein, 2002). Combined with the additional pressures of uncertainty around asylum claims (Fazel & Stein, 2002; Chase et al., 2008) and of managing a household (Wade et al., 2005) the young men reported becoming overwhelmed. This was compounded

further as the move resulted in them feeling isolated, alone and abandoned (Wade et al., 2005; Chase et al., 2008; Söderqvist, 2014).

Loss of connection and activity was experienced by the young men and appeared exacerbated by their isolation. Hughes and Rees (2016) highlight the impact that multiple losses can have on separated children and young people's sense of self, as well as the negative impact on their psychological well-being. They suggest that the loss of foster carers at the time of transition could be considered like the loss of family for the second time. Whilst the young men in this study never explicitly said this, their reports of the profound effect of being disconnected from foster families and the routine of 'family life' was marked. Schiff (2006) writes that positive experiences of foster care can also be associated with an increased difficulty in transition because of the sudden loss of support. It could be that this is being observed here.

Webb et al. (2015) suggest the combination of previous difficulties and the adjustment to transitioning to leaving care results in environmental and emotional instabilities. This leads to adverse outcomes, amongst which is a reduced educational achievement. The importance of education is highlighted throughout the literature as a means of fitting in with society and of moving forward with life (Hopkins & Hill, 2010; Thommesson et al., 2015). For many of the young men, negative experiences were compounded by a loss of education. The multiple barriers to education reported by Chase et al. (2008) were echoed in the accounts of the young men here including having to wait for education, not being able to move on with education and the impact of stress and anxiety on studying.

Explicit connection was also made between the transition to leaving care and its negative impact on mood due to the above. Initial experiences of feeling low in mood due to missing the support of foster families, drifted into a sense of isolation and inactivity. This then resulted in feeling overwhelmed by the intersection of multiple stressors. Much of the literature around 'coping' in separated children and young people focuses on methods such as distraction and thinking positively. Whilst this was identified (see section 4.1.3), for several the young men the overwhelming nature of events resulted in acts of self-harm and thoughts of suicide. Self-harm is well documented in relation to young people and is thought to increase in males in the latter stages of adolescence

(Hawton, Saunders & O’Conner, 2012). It is often preceded by acute negative affect such as loneliness and used as means of reducing its effects (Klonsky, 2007). Others have highlighted its role in emotional regulation (Mikolajczak, Petrieds & Hurry, 2009). This is true for the experiences of these young men whose loss of support and isolation culminated in the acts of self-harm reported.

4.1.3 Surviving

Wade (2011) notes in the reports of social workers that many separated young people engage with the challenges they face, demonstrating resourcefulness and resilience. This was reflected in the accounts of the young men in this study. Whilst facing significant difficulties and the concurrent impact on their psychological wellbeing, they gave multiple examples of resourcefulness and resilience. Although, as will be discussed, this must be treated with caution.

Perhaps the most prevalent strategy used was drawing on the support of foster families. Sirriyeh and Ni Raghallaigh (2018) highlight that where there is successful integration into family life, young people in foster care describe the relationship as “family-like” (pg.5). This was observed with the young men in this study who made references to carers as “mum” and “uncle” and reported the experience of their foster carers as ‘like family’. This relationship was important as it was then associated with the foster carers supporting the emotional needs of the young men. It also saw them acting as advocates, becoming involved where the young men were unable.

The young men’s abilities to draw on the support of others around them was also an important factor in their ‘surviving’. This included the support of friends, but also being able to act in order to draw on social services where needed.

Hughes and Rees (2016) suggest that many separated children and young people experienced supportive and nurturing relationships before they left their country of origin and that they come from families of resource. If considered in the context of attachment theory (Bowlby, 1969), the young people may have developed positive internal working models of what to expect from themselves and from others. This gives them the ability to draw on the resources they have both internally and externally and to demonstrate resilience in the face of the

adversities. Perhaps this ability to continue moving forward and to grow despite the difficulties they encounter also reflects the adversity-activated development as identified by Papadopoulos (2007). Once the young men were able to come to terms with difficulties which followed their transition, they were then able to reflect on what they had learned.

Other coping strategies were highlighted by the young men in this study such as a focus on keeping busy to distract one's self or keeping positive and thinking positively. Again, reflecting the findings of previous studies (Chase et al., 2006; Ni Raghallaigh & Gilligan, 2010).

Whilst it is beneficial to highlight these positive aspects, one must remain cautious of developing a single narrative that could result in reduced active support. A narrative of 'they get through it' could serve to mask the significant struggles and violations experienced by separated young people both in their journey to the UK but also once present, navigating the complexities of the system. Indeed, it is true that many of the young men in this study reported experiences which could be described as resilience or perseverance, but this also does not do justice to the experiences of loss and hardship and the significant impact it had on their psychological well-being.

One must also be conscious of using western constructs such as resilience to describe the experiences of young people from very different cultures.

Resilience was not a word used by any of the young men in this study and it was rarely explicitly stated. This is often applied as an individualistic trait and may not fit with the collectivist views of non-western cultures. More-over acts of resilience were enmeshed with adversity and the descriptions given reflected having to do whatever it takes to survive. As Ni Raghallaigh and Gilligan (2010) suggest, many accounts of resilience are hidden within stories of vulnerability and so a simple dichotomy of 'vulnerable' or 'resilient' does not suffice in describing separated young people's experiences and the potential impact on their psychological well-being.

4.2 Critical Review

The ability to formally evaluate the quality of qualitative research has been debated (Spencer & Ritchie, 2011). However, several authors have developed criteria which can be used for such work (Elliott, Fischer & Rennie, 1999; Yardley, 2000; Spencer & Ritchie, 2011). The following section will look to evaluate and critique this study drawing on the guiding principles outlined by Spencer and Ritchie (2011) which, they suggest are shared across many epistemological perspectives. In this, they stipulate the need to examine qualitative research in terms of 'contribution', 'credibility' and 'rigor'. This will be considered along with the limitation of the study.

4.2.1 Contribution

Contribution refers to the value and relevance of research findings (Spencer & Ritchie, 2011). This can be to theory, policy, practice or to the lives and circumstances of individuals. As stated previously there is a dearth of qualitative research specifically exploring the experiences of separated children and young people. The intention of this study was to counter the focus on quantitative evaluation of well-being by allowing the stories and experiences of the young people to be told in their words. There has also been limited research with separated children and young people's specific experiences of leaving care. Whilst others have included this within wider transitions, this does not allow great enough exploration of this specific transition and its significant impact on psychological well-being. Therefore, this study makes a valuable contribution by examining an area which has been acknowledged by professionals as impacting significantly on the lives of separated young people, but not yet adequately researched.

It is pertinent, however, to understand the potential limitations in the contribution of this study to the wider discourse around separated children and young people leaving care. This study draws on the experiences of a small number of participants, and whilst Shinebourne (2011) identified that a smaller sample allows for a more nuanced exploration of experiences, 6 participants falls on the

lower end of the 6-10 participants suggested by Smith et al. (2009) and so this could also be considered a limitation. A range of 6-8 was stipulated and ideally the upper limit was aimed for. However, some difficulties in recruitment occurred which meant it was not possible to realise this. For example, difficulties in facilitating the young people to recall the appointments and attend on time and being flexible enough to accommodate where this does not occur. A number of appointments for interviews were scheduled but the young men did not feel able to or had forgotten to attend and it was not possible to reschedule.

It is also important to highlight that this study focuses on the experiences of a somewhat narrow sub-set of separated young people with regards to gender, ethnicity and location. Recent changes in the demographics of separated children and young people mean the sample presented here may no longer be wholly representative of the majority group. The context of culture and experience may be different, resulting in different experiences. The homogeneity of the group is also highlighted as one participant was from a very different cultural background. However, this study does not seek to claim a generalisability across the wider population, but to highlight examples of experiences of leaving care. Indeed, this would be contrary to the contextualist position in understanding that the accounts generated are situated within the context of the meeting between the researcher and the participant as well as based on their individual experiences.

4.2.2 Credibility

Credibility represents how plausible and defensible research findings are. This is not just their believability but evidence of how conclusions and claims were generated. In developing the credibility of this study, consultation was held with professionals working with separated children and young people before commencing. This gave an opportunity to discuss its merits and develop the understanding behind why this was an important area. Consultation was also held with separated young people themselves to discuss their perspectives on the research, ensuring that they too felt that this was relevant to their experiences (see Appendix J).

In considering the believability of the findings, Spencer and Ritchie (2011) suggest that interpretive accounts must demonstrate how the data have been compiled to generate the hypotheses. The initial super-ordinate and sub-ordinate themes were presented to my thesis supervisor whose clinical and academic work has led to development of sound knowledge of working with separated children and young people. This allowed for discussion over the interpretations made, ensuring their grounding within the accounts of the young men. This does not equate to 'inter-rater reliability', however, as this would not fit with the epistemological position taken for this study (Madill et al., 2000). I have also attempted to highlight for the reader and remain aware of the influence of my own assumptions and experiences on the interpretations made (see 2.7). These may not be shared with other raters, making inter-rater reliability meaningless. Interpretations were also grounded in psychological theory as much as possible to ensure there was further basis for the claims made.

Madill et al (2002) suggest that from a contextualist position accounts of participants do not invalidate each other. However, some accounts may be more persuasive than others. It is suggested that the participants themselves could be asked to weigh up the themes themselves to ensure greater credibility of the selection. This was not considered feasible in this study because it was felt that the potential power differential might mean that that participants do not feel able to question or challenge the decisions made by the researcher. This is a potential limitation.

4.2.3 Rigour

In considering rigour, Spencer and Ritchie (2011) suggest that reliability and objectivity are a difficult fit for qualitative research. They propose that auditability, defensibility or reflexivity may be better suited.

In terms of auditability, an audit trail of developing themes and their links to the young people's accounts can be found in the Appendices (see Appendices G, H and I), illustrating how choices were made. Regarding reflexivity, the process of completing the research is outlined and my own position highlighted to be as transparent about the possible factors which may have influenced decision

making. This also indicates why some accounts may have been given greater weight than others and why particular interpretations may have been made. With regards to defensibility, the logic for the research choices made have been documented throughout. These have been linked to the epistemological position as well as my contextual position again to be as transparent and defensible as possible.

4.3 Reflexive Review

4.3.1 Personal Reflexivity

From a contextualist position and for qualitative methodology more generally, it is important to remain aware of the context from which one is acting out of and the assumptions which may follow. These assumptions will likely influence not only the interpretation of data, but also the approach taken to conducting the research study. From a political and moral position, when I began this study I was aware of my conceptualisation of separated children and young people as 'victims'. This likely influenced my focus in the interviews, privileging conversations about the difficulties experienced. Masocha (2015) writes that failing to foreground asylum-seeker's resilience and agency by constructing them as a 'vulnerable' group serves to mask the diversity of their experience. Responding to this I was mindful when analysing their accounts to allow greater plurality of experiences to come through, without privileging vulnerability or resilience.

I was also aware of the negative assumptions I had developed from previous clinical work with regards to social care and was conscious of not allowing this to overtly influence the accounts generated. I was aware in interviews to ask clarifying questions to gather greater detail of the young men's experiences without leading a narrative against social care.

The BPS (2018) guidance for working with refugee and asylum seekers highlights that one must ensure we do no harm in all activities, interventions, research and other psychological work. When I commenced interviewing I was

aware of the potentially distressing nature of the topic and the possibility that conversations could trigger reliving of past trauma. As a result, I made every effort to adhere purely to the research topic. I wonder now if this limited exploration of some of the experiences of the young men. I was also very aware of the difference between my position as researcher as opposed to my usual role as a clinician (See reflective journal excerpt in Appendix K. As a clinician, time is taken to build rapport and additional support can be provided allowing difficult or distressing conversations to be held. However, as a researcher this was not possible given the limited involvement I had prior to and after meeting the young people. I wondered how this influenced what was reported in the young men's accounts. Hopkins and Hill (2008) suggest that there is a "tension between the value of obtaining further information and the ethical need to respect privacy and choice" (p. 259). I was conscious of asking enough to gain insight in the young men's experiences, but not so much to risk causing them further distress. This was a challenging balancing act and I again became aware of myself as a researcher versus myself as a clinician.

4.3.2 Reflections on the Research Process

Every effort was made to ensure that those participating in the research had a clear understanding of its purpose, as highlighted in the consultation with the young people. This was done prior to recruitment with staff explaining the concept of the study to potential participants, as well as by myself prior to commencing the interview. However, I became aware during the interviews that some participants may not have fully understood my role, requiring further explanation. On two occasions participants brought supporting documents with them or referred to documents they had and I wondered if they initially believed me to be a case worker. I wondered if this was because I was a young white male, perhaps similar to other professionals they have encountered, or it was the nature of the topic and the way it was described to them by the staff.

It is also important to be mindful that the young men were recruited from a counselling service. It is possible that they sought support because they had experienced particularly difficult transitions and so the experiences reported in the study were particularly negative. However, this was not wholly the case as

the accounts varied in both positive and negative experiences. More pertinent perhaps is that their conceptualisation of the difficulties may have been influenced by their experiences of counselling, being more aware of their experiences from a psychological point of view.

With regards to language, all interviews were conducted in English, which the participants reported a preference for. Whilst all were fluent and there were no overt difficulties in conversation, it is important to consider that English was not their primary language. This may have limited the extent to which they were able to express more nuanced concepts of their experiences. It may have been beneficial to have an interpreter present for all interviews to be accessed as and when needed. However, this may have influenced the dynamic of the interaction, making it more confusing for the young person.

With regards to the homogeneity of the participants, as noted previously one of the young people was from a different cultural background to the other participants. This was not ideal as it will likely have impacted on what was generated in the account given, as his context as a young Congolese man will have implications for what he experienced and how he understood it. However, given the epistemological position, it was felt that his was less problematic than it could have been were other approaches being used. Interestingly the experiences he reported of his transition to leaving care and the sense that he made of them was remarkably similar to that of the other young men and demonstrated the overarching impact that it had on psychological well-being.

Finally, Kohli (2006) writes that there is a tendency to focus on stories of those seeking asylum only from when they become visible as asylum seekers. This risks missing seeing them as ordinary people, with ordinary desires and drives. The focus of this study was on the young person's experiences of transitioning to leaving care and little was placed on their lives prior to departure from their country of origin. From a contextualist position, developing further insight into their lives prior to arrival in the UK would ensure greater understanding of their context and provide insight into the choices they made or reported. This might in turn benefit interpretations of their accounts.

4.4 Implications to Future Clinical Work, Policy and Research

4.4.1 Implications for Clinical Psychology

The accounts of the young men reiterate the impact that transferring to leaving care has on psychological well-being, represented in reports of loss, isolation and low mood, coupled with self-harm and thoughts of suicide. Whilst those in this study have been able to engage with counselling services, this is not guaranteed for others. Knowledge of such services may not exist, or they may not feel able to access them. This can be compounded by services that are not flexible enough to meet the needs of these young people, who cannot commit to weekly sessions or set time slots; or where there is suspicion of how services might be connected to their asylum claims and information given, shared with the Home Office. With this in mind, the Department for Communities and Local Government (DCLG) completed a report exploring the experiences of the Afghan community in the UK (DCLG, 2009). Within this, it was identified that a number of factors including the consequences of conflict in Afghanistan, cultural differences and a lack of language skills were some of the reasons suggested for the sense of isolation and lack of integration into services. It was particularly highlighted that first generation Afghans were considered to be in danger of becoming a lost generation in limbo, “unable to live in the present, and constantly looking to the past” (p.51). The individualistic nature of many Western concepts of mental health also may not fit with the young person’s own culturally informed understanding of mental health and so the utility of seeking support may not seem beneficial.

This research would suggest that services need to ensure they are engaging these young people in mediating the potential impact of the transition. This could take the form of direct one-to-one work or group work and must include as focus on context (BPS, 2018). One way of facilitating this could be to increase the presence of psychology embedded within the social care teams working with separated young people. This would allow greater opportunity to highlight the psychological needs of these young people to professionals working with them. It may also provide greater opportunity to engage with the young people themselves if present within a service they are actively involved with.

The young men in this study often indicated a sense of powerlessness in their situations, which compounded their distress. Narrative therapy has been used with survivors of abuse as a means of developing preferred stories of the self (White, 2004) highlighting acts of resistance and drawing on culture, community, family and history as a means of creating a preferred narrative. It is suggested that this could be a beneficial approach when working with these young people as it allows exploration of context and response to adversity, whilst promoting positive acts which have allowed the young person to survive. Hughes and Rees (2016) highlight the use of narrative therapy with separated children and young people where it might be particularly useful in navigating negative social discourses and developing more enabling stories. This might also provide a space in which the young people can explore the losses they have faced, both in their journey but also since leaving care, whilst eliciting awareness of continuing positive relationships and strengths.

Individual therapies can be problematic however, as they tend to focus on the individual rather than wider systemic difficulties. The use of collective narrative practices such as 'Tree of Life' (Ncube, 2006) work have been found effective in working with separated children and young people (Hughes and Rees, 2016; Jacobs, 2017). This approach could be useful as it enables the creation and sharing of positive stories about lives, which are rooted in cultural and social histories. As the young men highlighted the importance of social support, this could also be completed in group work, further developing a sense of social connectedness.

There are a number of social groups organised by third sector organisations for separated children and young people. It is possible that positioning psychology within this context might allow for a less formal setting in which to establish rapport and provide an opportunity for group work to be conducted. 'Recipes of Life' (Social Kitchen, 2015) was a project which integrated talking therapy with cooking and provided a "culturally relevant way of talking about health, wellbeing, resilience and recovery" (pg.3). It is suggested that a group such as this might bridge the gap between providing practical skills e.g., cooking, planning healthy meals etc., a space for building social connection and exploration of psychological well-being.

The BPS guidelines for working with refugees and asylum seekers (2018) suggest that psychologists working with people seeking asylum should work collaboratively with other professionals and agencies, ensuring that welfare is addressed holistically. Hughes and Rees (2016) second this, suggesting that practitioners should be involved in addressing practical difficulties where possible. Given that the young people in this study indicated that there were occasions in which they fell through the cracks between services or felt that services were not responsive to their needs, psychologists would appear to be well positioned to ensure the young people's basic needs are being met. This could be done through regular network meetings and linking with social care to ensure psychology is present on all pathway plans where needed.

4.4.2 Implications for Social Care and Policy

The young men in this study highlighted experiencing a lack of communication between social care and themselves, resulting in a lack of preparedness for the transition and continued difficulty once they left care. Recent changes in immigration rules mean that separated children and young people are entitled to remain in care longer, however this does not necessarily negate the problem. With additional time in care, there should be an emphasis on a longer and more extensive preparation phase including not only a focus on developing practical skills for living independently, but also the psychological impact of leaving care. Within which attention should be paid to the differences in culture and expectation which may make the transition even harder.

Wade (2011) highlights that planning for leaving care is variable, taking place over a relatively short timescale, despite advice set out in the Children (Leaving Care) Act (2000). The Care Planning, Placement and Case Review Regulations (2010) state that assessment prior to planning should commence not more than 3 months after the young person's sixteenth birthday. Despite this, it is clear from the accounts of the young men here that this was not experienced in this way. It is suggested that guidance should be developed for specific pathways to leaving care for separated children and young people within all local authorities, taking into account their specific needs and which allows for a gradual and supported transition to take place. This should involve

identification risk factors which might increase the young person's vulnerability and their involvement in developing strategies to manage this, for example making contact with advocacy services and mental health services. It would be beneficial for the transition to allow a graded introduction into independent living rather than what appeared to be expressed as 'abandonment' by the young men in this study.

The young men also highlighted the impact of loss of education due to the transition and the impact that this had on their psychological well-being. It is important therefore for professionals in social care to work closely with their colleagues in education to ensure continuity of service. This could be done by engaging with NEET (Not in Education, Employment or Training) workers within services to monitor and intervene where needed. There is also a valuable role for Psychology to provide support here, which could be in the form of direct work with the young person, or indirectly in supporting the social worker to have conversations regarding well-being, education and planning for the future. In keeping with the Children and Social Work Act, it could be beneficial for social services to develop a local offer for care leavers which incorporates Psychology to provide such support.

As mentioned previously, the experiences of the young men can often be difficult to hear. Lees, Meyer and Rafferty (2013) suggest that within social work, uncertainty around cases and fear of making the wrong decision can result in a managerialist approach as a defence against the inherent anxiety produced. This might be an explanation for the perceived sense of not being heard reported by the young men. In response to this, it is proposed that reflective spaces focusing on the emotional impact of the work could be provided to social care staff and if appropriate, foster carers working with separated children and young people. This could act as a means of facilitating staff to positively confront and contain these anxieties and appreciate the emotional tasks of supporting these young people who have experienced much loss and trauma as they prepare to transition to leaving care. This space could be developed and supported by clinical psychologists or clinical practitioners embedded within social care teams and could strengthen the argument for embedding psychology within social care services.

4.4.3 Implications for Future Research

However, it is important to reiterate that this study represents the views of a relatively small sample of young men taken within a particular context of South East London. Separated children and young people are not a homogenous group and one must recognise the limitations of this study in representing the experiences of this wider population. This study however represents an important step in developing research around a somewhat neglected phenomenon, one which further research with a broader range of young people could look to redress.

It would also be important to consider gathering accounts of young people from different cultural and ethnic backgrounds as well as those from different areas of the UK where experiences may differ significantly. Gaining the concurrent views of professionals working with the young people would also provide insight into the wider context of the experiences of the transition.

More specifically, gathering the accounts of social care staff and foster carers who have experience of supporting separated children and young people through the transition to leaving care might also prove valuable. This would provide further perspective on how the young person's experience is perceived during this time and highlight other demands which may not be highlighted by the young person themselves.

The epistemological approach taken in this study heavily informed the methodology and analysis used, privileging a deeper engagement with context and idiographic experience. This will likely have impacted on what was 'seen' by myself as the researcher, but more importantly it will have influenced what was not seen. Use of other methods such as Foucauldian discourse analysis would allow exploration of other dynamics such as power relationships within society which might also significantly impact on the transition to leaving care. This could also further the understanding of the experience the transition.

Due to the nature of their experiences, Kohli (2006) suggests that separated children and young people carefully manage their stories and what is told to adults. Research which seeks to gain their views may therefore be limited by what is chosen to be shared and the trust which is established with the

researcher. This is a potential limitation to using IPA, in which interpretations are grounded in what the young people choose to share.

One way of countering this would be to have the young people actively participate in the design and development of the research itself. Rogers, Carr and Hickman (2018) identified the use of community based participatory research as a means of developing research with separated children and young people. This involved finding novel methods of allowing the young people to express and present their views, such as using photographs. This culminated in presenting the information to the target audience, in this case foster carers. It was suggested that this approach was more empowering for the young people and allowed for an open dialogue which was beneficial to all involved. An approach like this could also be beneficial when exploring the experiences of transitioning to leaving care and in highlighting the particular needs as identified by the young people themselves rather than through the gaze of the researcher.

4.5 Concluding Thoughts

It is well documented that separated children and young people face a myriad of difficulties on their journey to achieving asylum in the UK. These difficulties do not stop on arrival but can be perpetuated by the systems in which the young people are then expected to navigate. This study supports the previous anecdotal evidence that the transition to leaving care can be particularly problematic for separated children and young people, especially when it is not adequately planned and supported. Further to this, there are potentially grave consequences for the young people's psychological wellbeing with the majority of the young men here reporting low mood, self-harm and thoughts of suicide.

The descriptions told by the young men of a difficult transition in which they had little or no agency, and where they felt unprepared and largely unsupported were harrowing. I was struck by the potential parallels of this move with their journeys to the UK, with them once again feeling alone or abandoned. Despite this, considering the challenges they have faced and still do face in the future, I was inspired by their ability to survive; calling on the support of those around them and drawing on their own resources to stay positive and keep moving forward. In the words of Sarban:

“Too many things happen you know, that's life. Life can, you know, everything will happen in life. But you need to be strong. Only you don't need to give up. If you give up, your life is just finished.”

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APPENDICES

Appendix A: Notice of Ethics Review Decision and Ethics Amendment Approval

School of Psychology Research Ethics Committee

NOTICE OF ETHICS REVIEW DECISION

For research involving human participants
BSc/MSc/MA/Professional Doctorates

REVIEWER: Mark Finn

SUPERVISOR: Dr Neil Rees

COURSE: Professional Doctorate in Clinical Psychology

STUDENT: Paul Williams

TITLE OF PROPOSED STUDY: Leaving Local Authority Care: The Experiences of Separated Young People Seeking Asylum in the UK

DECISION OPTIONS:

1. **APPROVED:** Ethics approval for the above named research study has been granted from the date of approval (see end of this notice) to the date it is submitted for assessment/examination.
2. **APPROVED, BUT MINOR AMENDMENTS ARE REQUIRED BEFORE THE RESEARCH COMMENCES** (see Minor Amendments box below): In this circumstance, re-submission of an ethics application is not required but the student must confirm with their supervisor that all minor amendments have been made before the research commences. Students are to do this by filling in the confirmation box below when all amendments have been attended to and emailing a copy of this decision notice to her/his supervisor for their records. The supervisor will then forward the student's confirmation to the School for its records.
3. **NOT APPROVED, MAJOR AMENDMENTS AND RE-SUBMISSION REQUIRED** (see Major Amendments box below): In this circumstance, a revised ethics application must be submitted and approved before any research takes place. The revised application will be reviewed by the same reviewer. If in doubt, students should ask their supervisor for support in revising their ethics application.

DECISION ON THE ABOVE-NAMED PROPOSED RESEARCH STUDY
(Please indicate the decision according to one of the 3 options above)

APPROVED

ASSESSMENT OF RISK TO RESEARCHER *(for reviewer)*

If the proposed research could expose the researcher to any of kind of emotional, physical or health and safety hazard? Please rate the degree of risk:

HIGH	<input type="checkbox"/>
MEDIUM	<input type="checkbox"/>
LOW	<input checked="" type="checkbox"/>

Reviewer comments in relation to researcher risk (if any):

Reviewer *(Typed name to act as signature):* Mark Finn

Date: 10/05/17

This reviewer has assessed the ethics application for the named research study on behalf of the School of Psychology Research Ethics Committee

Confirmation of making the above minor amendments *(for students):*

I have noted and made all the required minor amendments, as stated above, before starting my research and collecting data.

Student's name *(Typed name to act as signature):*

Student number:

Date:

(Please submit a copy of this decision letter to your supervisor with this box completed, if minor amendments to your ethics application are required)

PLEASE NOTE:

*For the researcher and participants involved in the above named study to be covered by UEL's insurance and indemnity policy, prior ethics approval from the School of Psychology (acting on behalf of the UEL Research Ethics Committee), and confirmation from students where minor amendments were required, must be obtained before any research takes place.

*For the researcher and participants involved in the above named study to be covered by UEL's insurance and indemnity policy, travel approval from UEL (not the School of Psychology) must be gained if a researcher intends to travel overseas to collect data, even if this involves the researcher travelling to his/her home country to conduct the research. Application details can be found here: <http://www.uel.ac.uk/gradschool/ethics/fieldwork/>

UNIVERSITY OF EAST LONDON

School of Psychology

REQUEST FOR AMENDMENT TO AN ETHICS APPLICATION

FOR BSc, MSc/MA & TAUGHT PROFESSIONAL DOCTORATE STUDENTS

Please complete this form if you are requesting approval for proposed amendment(s) to an ethics application that has been approved by the School of Psychology.

Note that approval must be given for significant change to research procedure that impacts on ethical protocol. If you are not sure about whether your proposed amendment warrants approval consult your supervisor or contact Dr Mary Spiller (Chair of the School Research Ethics Committee).

HOW TO COMPLETE & SUBMIT THE REQUEST

1. Complete the request form electronically and accurately.
2. Type your name in the 'student's signature' section (page 2).
3. When submitting this request form, ensure that all necessary documents are attached (see below).
4. Using your UEL email address, email the completed request form along with associated documents to: Dr Mary Spiller at m.j.spiller@uel.ac.uk
5. Your request form will be returned to you via your UEL email address with reviewer's response box completed. This will normally be within five days. Keep a copy of the approval to submit with your project/dissertation/thesis.
6. Recruitment and data collection are **not** to commence until your proposed amendment has been approved.

REQUIRED DOCUMENTS

1. A copy of your previously approved ethics application with proposed amendments(s) added as tracked changes.
2. Copies of updated documents that may relate to your proposed amendment(s). For example an updated recruitment notice, updated participant information letter, updated consent form etc.
3. A copy of the approval of your initial ethics application.

Name of applicant: Paul Williams

Programme of study: Doctorate in Clinical Psychology

Title of research:

Name of supervisor: Dr Neil Rees

Briefly outline the nature of your proposed amendment(s) and associated rationale(s) in the boxes below

Proposed amendment	Rationale
--------------------	-----------

<p>The addition of: 'XXXXX XXXX' - XXXXXXX</p> <p>And</p> <p>'XXXXXXXXXXXXXXXXX' XXXXXXXXXX</p> <p>to the list of possible organisations to recruitment participants from.</p>	<p>Our key liaison with XXXX has recently left the organisation and as a result it has become increasingly difficult to recruit participants via the organisation. 'XXXX' is an organisation that has close connection and overlap with XXXXX and this would allow for us to recruit from a wider pool of possible participants.</p> <p>The XXX team is a specific social services team supporting unaccompanied minors in XXXX. I am currently on a 12 month clinical placement within the service and would propose to recruit only young people that I am not actively working with.</p>

Please tick	YES	NO
Is your supervisor aware of your proposed amendment(s) and agree to them?	x	

Student's signature (please type your name): Paul Williams

Date: 29.11.17

TO BE COMPLETED BY REVIEWER		
Amendment(s) approved	YES	
<p>Comments</p> <p>Proposed amendments approved having cited permission from XXXXXXXX (as email from Neil Rees) and on condition that written permission from XXXXX be cited by Neil Rees and forwarded to psychology.ethics@uel.ac.uk</p>		

Reviewer: Mark Finn

Date: 1/12/17

UNIVERSITY OF EAST LONDON

School of Psychology

REQUEST FOR AMENDMENT TO AN ETHICS APPLICATION

FOR BSc, MSc/MA & TAUGHT PROFESSIONAL DOCTORATE STUDENTS

Please complete this form if you are requesting approval for proposed amendment(s) to an ethics application that has been approved by the School of Psychology.

Note that approval must be given for significant change to research procedure that impacts on ethical protocol. If you are not sure about whether your proposed amendment warrants approval consult your supervisor or contact Dr Mary Spiller (Chair of the School Research Ethics Committee).

HOW TO COMPLETE & SUBMIT THE REQUEST

7. Complete the request form electronically and accurately.
8. Type your name in the 'student's signature' section (page 2).
9. When submitting this request form, ensure that all necessary documents are attached (see below).
10. Using your UEL email address, email the completed request form along with associated documents to: Dr Mary Spiller at m.j.spiller@uel.ac.uk
11. Your request form will be returned to you via your UEL email address with reviewer's response box completed. This will normally be within five days. Keep a copy of the approval to submit with your project/dissertation/thesis.
12. Recruitment and data collection are **not** to commence until your proposed amendment has been approved.

REQUIRED DOCUMENTS

4. A copy of your previously approved ethics application with proposed amendments(s) added as tracked changes.
5. Copies of updated documents that may relate to your proposed amendment(s). For example an updated recruitment notice, updated participant information letter, updated consent form etc.
6. A copy of the approval of your initial ethics application.

Name of applicant: Paul Williams

Programme of study: Doctorate in Clinical Psychology

Title of research:

Name of supervisor: Dr Neil Rees

Briefly outline the nature of your proposed amendment(s) and associated rationale(s) in the boxes below

Proposed amendment	Rationale
<p>It was previously proposed that written information, consent and debrief documents would be provided to participants in both English and in their primary language. I also proposed that I would not specify ethnicity and therefore not specify any given language.</p> <p>I would like to propose to change my aim of providing written information, consent and debrief documents in the participants' primary language, using interpreters to translate the information in person (which was</p>	<p>Many separated young people who seek asylum come from different regions and therefore a number of different languages may be spoken. Due to this I am faced with an increased cost of translating multiple documents into multiple languages which exceeds the minimal and uncertain budget proposed by the university.</p> <p>It has been highlighted to me by people working with separated children that many of the young people cannot read well in their</p>

<p>previously proposed as a secondary means of further clarification only).</p>	<p>primary spoken language. Interpreters could aid in this case and it would allow for further information and explanations to be given in person. Furthermore, as an iterative consent process has been advocated, I would have ongoing discussions with the young person around the topic of consent. I would be checking and re-checking their understanding of their voluntary participation. This process would make a translated consent form less vital.</p> <p>It has also been advised that translation may take up to 6 weeks to complete which would significantly delay commencement of participant recruitment.</p>

Please tick	YES	NO
Is your supervisor aware of your proposed amendment(s) and agree to them?	x	

Student's signature (please type your name): Paul Williams

Date: 30.06.2017

TO BE COMPLETED BY REVIEWER		
Amendment(s) approved	YES	
Comments		

Reviewer: Mary Spiller

Date: 30th June 2017

Appendix B: UEL Ethics Application

UNIVERSITY OF EAST LONDON School of Psychology

APPLICATION FOR RESEARCH ETHICS APPROVAL FOR RESEARCH INVOLVING HUMAN PARTICIPANTS

FOR BSc RESEARCH

FOR MSc/MA RESEARCH

FOR PROFESSIONAL DOCTORATE RESEARCH IN CLINICAL, COUNSELLING & EDUCATIONAL PSYCHOLOGY

*Students doing a Professional Doctorate in Occupational & Organisational Psychology and PhD candidates should apply for research ethics approval through the University Research Ethics Committee (UREC) and not use this form. Go to:
<http://www.uel.ac.uk/gradschool/ethics/>

If you need to apply to have ethical clearance from another Research Ethics Committee (e.g. NRES, HRA through IRIS) you DO NOT need to apply to the School of Psychology for ethical clearance also.

Please see details on www.uel.ac.uk/gradschool/ethics/external-committees.

Among other things this site will tell you about UEL sponsorship

Note that you do not need NHS ethics approval if collecting data from NHS staff except where the confidentiality of NHS patients could be compromised.

Before completing this application please familiarise yourself with:

The *Code of Human Research Ethics (2014)* published by the British Psychological Society (BPS). This can be found in the Ethics folder in the Psychology Noticeboard (Moodle) and also on the BPS website
http://www.bps.org.uk/system/files/Public%20files/code_of_human_research_ethics_dec_2014_inf180_web.pdf

And please also see the UEL Code of Practice for Research Ethics (2015)
<http://www.uel.ac.uk/gradschool/ethics/>

HOW TO COMPLETE & SUBMIT THIS APPLICATION

13. Complete this application form electronically, fully and accurately.
14. Type your name in the 'student's signature' section (5.1).
15. Include copies of all necessary attachments in the **ONE DOCUMENT SAVED AS .doc** (See page 2)
16. Email your supervisor the completed application and all attachments as **ONE DOCUMENT. INDICATE 'ETHICS SUBMISSION' IN THE SUBJECT FIELD OF THIS EMAIL** so your supervisor can readily identify its content. Your supervisor will then look over your application.
17. When your application demonstrates sound ethical protocol your supervisor will type in his/her name in the 'supervisor's signature' section (5.2) and submit your application for review (psychology.ethics@uel.ac.uk). You should be copied into this email so that you know your application has been submitted. It is the responsibility of students to check this.
18. Your supervisor should let you know the outcome of your application. Recruitment and data collection are NOT to commence until your ethics application has been approved, along with other research ethics approvals that may be necessary (See 4.1)

ATTACHMENTS YOU MUST ATTACH TO THIS APPLICATION

7. A copy of the invitation letter that you intend giving to potential participants.
8. A copy of the consent form that you intend giving to participants.
9. A copy of the debrief letter you intend to give participants (see 23 below)

OTHER ATTACHMENTS (AS APPROPRIATE)

- A copy of original and/or pre-existing questionnaire(s) and test(s) you intend to use.
- Example of the kinds of interview questions you intend to ask participants.
- Copies of the visual material(s) you intend showing participants.
- A copy of ethical clearance or permission from an external organisation if you need it (e.g. a charity or school or employer etc.). Permissions must be attached to this application but your ethics application can be submitted to the School of Psychology before ethical approval is obtained from another organisation if separate ethical clearance from another organisation is required (see Section 4).

Disclosure and Barring Service (DBS) certificates:

- **FOR BSc/MSc/MA STUDENTS WHOSE RESEARCH INVOLVES**

VULNERABLE PARTICIPANTS: A scanned copy of a current Disclosure and Barring Service (DBS) certificate. A current certificate is one that is not older than six months. This is necessary if your research involves young people (anyone 16 years of age or under) or vulnerable adults (see Section 4 for a broad definition of this). A DBS certificate that you have obtained through an organisation you work for is acceptable as long as it is current. If you do not have a current DBS certificate, but need one for your research, you can apply for one through the HUB and the School will pay the cost.

If you need to attach a copy of a DBS certificate to your ethics application but would like to keep it confidential please email a scanned copy of the certificate directly to Dr Mary Spiller (Chair of the School Research Ethics Committee) at m.j.spiller@uel.ac.uk

- **FOR PROFESSIONAL DOCTORATE STUDENTS WHOSE RESEARCH INVOLVES VULNERABLE PARTICIPANTS:** DBS clearance is necessary if your research involves young people (anyone under 16 years of age) or vulnerable adults (see 4.2 for a broad definition of this). The DBS check that was done, or verified, when you registered for your programme is sufficient and you will not have to apply for another in order to conduct research with vulnerable populations.

Your details

1. **Your name:** Paul Williams
2. **Your supervisor's name:** Neil Rees
3. **Title of your programme:** (e.g. BSc Psychology) Professional Doctorate in Clinical Psychology
4. **Title of your proposed research:** (This can be a working title)
Leaving Local Authority Care: The Experiences of Separated Young People Seeking Asylum in the UK
5. **Submission date for your BSc/MSc/MA research:**
6. **Please tick if your application includes a copy of a DBS certificate**
7. **Please tick if you need to submit a DBS certificate with this application but have emailed a copy to Dr Mary Spiller for confidentiality reasons (Chair of the School Research Ethics Committee) (m.j.spiller@uel.ac.uk)**

8. Please tick to confirm that you have read and understood the British Psychological Society's Code of Human Research Ethics (2014) and the UEL Code of Practice for Research Ethics (See links on page 1)

X

2. About the research

9. The aim(s) of your research:

This proposed study seeks to explore the experiences of separated young people who have or are transitioning through leaving local authority care in the UK. This study will ask the following question:

- How do separated children and young people seeking asylum in the UK experience the transition of leaving local authority care and its impact on their psychological well-being?

The proposed study will explore experiences in reference to emotional, physical and psychological phenomenon related to the transition from care as well as how the young people make sense of and understand them.

10. Likely duration of the data collection from intended starting to finishing date:

Data will be collected between May 2017 – December 2017

Methods

11. Design of the research:

Much research with Separated Young People has previously focused on psychological well-being using quantitative measures designed for 'western' populations. This may be flawed for a number of reasons including its limitations in being representative of their own understanding. This also acts to silence their voices in taking away the opportunity for participants to give their own accounts. The proposed study therefore will be qualitative in nature, utilising an Interpretative Phenomenological Analysis (IPA). IPA is particularly relevant for work with this population because of its focus on meaning making of the person in context. It seeks to understand in detail the individual's experience of a phenomenon and this idiographic approach thus allows for emphasis on the participants own point of view of lived experiences which have been lacking in previous research (Wernesjo, 2011). IPA also acknowledges the role that the researcher plays in developing a shared framework, rather than an ultimate truth which is shaped by both the researcher and the participant's personal and cultural perspectives. The idiographic nature of IPA is also relevant to this research as there is a tendency to homogenise separated children as being one distinct group, which neglects the many and varied ethnic and cultural backgrounds of the young people. Using IPA allows further exploration of this offering personally unique perspectives of the phenomena from which cautious generalisation may be drawn (Smith, Flowers and Larkin, 2009). The study will involve semi-structured interviews with participants and interpreters will be used where needed to facilitate communication and will last approximately 50-60 minutes.

12. The sample/participants:

This study will look to recruit between 6-8 participants. Participants will be aged 18 years and over as this is the minimum age at which they may be required to leave local authority care. It is proposed that participants will be recruited from a number of organisations working with separated children and young people including 'XXXXXXX' a charity providing counselling services to separated children and young people seeking asylum in the UK, 'XXXXXXXXXX' an organisation that works in partnership with community-based organisations to provide support and activities for young refugees and asylum seekers, and the Unaccompanied Minors Independence Support Team (XXXXXX) a social services team supporting separated children and young people in the borough of XXXXXXXXX. XXXXXXXX will be recruiting participants that are currently or have previously been seen by the service and XXXXXXXXXX has close ties with XXXXXXXX. This will be a random sample of male participants who have experience of being in local authority care and are currently or have recently transitioned from care. Whilst being mindful of the need for homogeneity in the sample group in IPA, the study will not be recruiting participants specifically on the basis of ethnicity. It is felt that the homogeneity of experience of being a separated child seeking asylum in the UK and having experienced transition in leaving local authority care will fulfil this criterion. However, given the higher number of male separated children entering the UK this study will look to recruit only a male sample. It is recognised that whilst gender and ethnicity will shape the way in which participants might interpret their experiences, the study is focused on the key experiences above.

13. Measures, materials or equipment:

Semi-structured interviews will be conducted with participants and an interview schedule (see attached draft interview schedule) will be refined in discussion with a consultation group of Separated Young People. Interpreters will also be required to facilitate communication in interviews and translation services required for translating written materials into appropriate languages. Interpreters will be recruited from professional agencies which engage regularly with the organisations and therefore work to professional guidelines which includes maintaining the confidentiality of information.

Audio recording equipment and transcribing software will be required.

14. If you are using copyrighted/pre-validated questionnaires, tests or other stimuli that you have not written or made yourself, are these questionnaires and tests suitable for the age group of your participants?

YES / NO / NA

15. Outline the data collection procedure involved in your research:

1. Consultation with Professionals working with Separated Young People – identification of key areas of research – Completed in September, 2016.
2. Consultation with Separated Young People – held at 'XXXXXXX'. This will allow for reflection on the proposed research and interview schedule, discussion regarding developing informed consent. February/March, 2017
3. UEL Ethics Committee Approval sought

4. Recruitment and consent gathering – Participants will be recruited through ‘XXXXXXX’ and will be provided with written information regarding the proposed research and consent form. It is intended that informed consent will take an iterative process whereby it will be sought frequently as the participant’s understanding and experience of the study progresses e.g., written information at recruitment, same information provided verbally prior to interview, following interview etc.
5. Data-collection – Once ethical approval has been agreed, participants will be required to attend one interview at ‘XXXXXXX’ lasting approximately 50-60 minutes. Interviews will be audio-recorded.

3. Ethical considerations

Please describe how each of the ethical considerations below will be addressed:

16. Fully informing participants about the research (and parents/guardians if necessary):

Written information describing the nature and purpose of the study will be provided to participants in both English and in their primary language. This information will be given by ‘XXXXXXX’, ‘XXXXXXXXXXXX’ and XXXXXX who, acting as collaborators in this study, will be recruiting participants and initially gaining consent to participating in the study. Information will be provided again verbally via an interpreter immediately prior to interview commencement. Following completion of interviews discussion will be held regarding the client’s experience of the interview and consent will be sought again for their agreement in using their data.

17. Obtaining fully informed consent from participants (and from parents/guardians if necessary):

Developing a truly informed consent is paramount in working with separated children. Written information will be provided in both English and the participant’s primary language to explain the purpose of the research and their involvement, consent will also be sought verbally through the interpreter prior to interviews in order to allow further questions to be asked. One must also recognise the inherent power that the researcher holds and/or lack of social power that the participants may feel they have and it is suggested that the process of gaining informed consent be iterative to ensure participants fully understand and are in agreement to participate. It is intended that consultation will take place with a number of separated young people prior to commencement of data collection in which this can be discussed further. It is also intended that understanding and consent will be sought frequently during data collection and at the end of interviews. It is hoped that this will have allowed participants to gain a greater, more informed awareness of the study and the data produced and their consent for data to be used in the study

Further to this, ‘XXXXXXX’ have offered their expertise in the assessment of the capacity to consent. ‘XXXXXXX’ have been involved in the consultation stage and have offered to take an active role in the consent procedure, ensuring that young people can return to them if difficulties arise following participation.

18. Engaging in deception, if relevant:

The proposed study requires no deception.

19. Right of withdrawal:

Participants will be reminded of their right to withdraw from the research at any point in the proceedings without being obliged to give reason for the withdrawal and at no disadvantage to them and that their data will be deleted. This will be the case up to the point of completing initial drafts of the research (January, 2018) Participants will be made aware that once analysis is commenced they will no longer be able to withdraw from the study. This will be made clear on the invitation letter and they will be informed that withdrawal will have no implications on their continued involvement with XXXXXXXX or any on-going legal or asylum claims.

20. Anonymity & confidentiality: (Please answer the following questions)

20.1. Will the data be gathered anonymously?

YES / NO

21. If NO what steps will be taken to ensure confidentiality and protect the identity of participants?

Confidentiality will be protected as far as possible using pseudonyms, chosen by participants in any written work. Audio recordings of interviews will be copied to and stored on a password-protected computer. Transcripts will be stored on the same password-protected computer. Participants will be advised that the researcher may discuss general themes from transcripts with those supervising the research at the University and that they may require to view a selection of some transcripts. Transcripts will be kept for three years after the study and then deleted. Only the researcher will have direct access to these files.

Participants will be made aware that the researcher may break confidentiality if they have significant concerns that they may be at risk of harming themselves or at risk of harm from others. Where possible this will be discussed with the individual before breaking confidentiality.

22. Protection of participants:

Although the nature of the interviews is intended to focus on the experience of transitioning from care, there is the potential that participants will discuss past traumatic experiences in describing their current experiences as well as the transitions themselves which may be distressing to talk about. The researcher will remain aware of this throughout interviews, allowing participants to stop, rearrange or withdraw from interviews if needed. Should participants become distressed during the interview the researcher will use their clinical skills to ensure the participant is safe and support them in containing the distress, and to seek appropriate support where needed. Debriefing will take place following the interview, allowing participants to ask questions and providing an opportunity to check-in and discuss any aspects they may have found distressing. All participants will continue to be connected to 'XXXXXXX' and interviews will be conducted on these premises, permission has been granted to contact the service to provide additional emotional / psychological support to participants if required. Participants will also be given the contact details of other organisations to

contact for support if needed. Participants will also be invited to bring a trusted person, whom they feel able to talk freely in front of to the interview if they wish. It is aimed that this will make the environment less formalised and provide additional support for the participant.

It is important to acknowledge that interpreters will also be present during the interviews and there is potential for content of the interview to be distressing for them as well. Interpreters have been recommended by 'XXXXXXX' who are regularly used in therapeutic work with separated young people and who may be familiar with the themes present. However, a pre-interview briefing will be held to 'check-in' with the interpreter, to discuss the plan for the interview and ensure they are happy to continue. A post-interview de-briefing will also be conducted to discuss how the interpreter found the interview and to discuss any aspect they may have found distressing referring them to appropriate services if needed.

Managing Expectations and Reciprocal Benefits

Mackenzie et al. (2007), highlight the importance of ensuring research with refugee groups is meaningful to them and that research relationships not only respect but promote their "autonomous agency and helps re-build capacity" (pg. 301). The researcher is aware of the benefit of the study to their own needs, but the needs and values of the participants must be respected to ensure a reciprocal benefit. It is therefore important to consider what participants may expect to gain from their participation and how they might believe the research can be used and how the research might be disseminated. It is planned that this will be discussed in the consultation meeting prior to data collection commencing. This will also be an opportunity to discuss if or how participants might be remunerated for their participation.

23. Protection of the researcher:

There will be no specific risks to the researcher. All interviews will be conducted in the therapy rooms at XXXXXXXX during their working hours and staff will be aware of my presence and that interviews are taking place. Potential participant will be identified by 'XXXXXXX', 'XXXXXXXXXXXX' or XXXXXX and so will be well known to them. They will inform myself of any potential risks associated with individuals.

As with the participants, there is a possibility of distressing content arising in the course of the interviews, although this is not the intended case. It is important to be mindful of the impact this might have on the researcher and supervision will be sought as and when appropriate. The researcher will continue to access their usual methods of self-care as per their clinical work.

24. Debriefing participants:

Participants will be given time for debriefing following their interview. This will provide a space for participants to ask further questions they may have about the study, provide an opportunity for the researcher to discuss any aspects the participants may have found distressing and allow for further discussion around storage of data and consent to continue.

25. Will participants be paid?

YES / NO

If YES how much will participants be paid and in what form (e.g. cash or vouchers?)
Why is payment being made and why this amount?

It is intended that participants will be remunerated for their participation in this study by receiving a £20 voucher. It is important to reflect the value of the participants' time being given to the study and to reimburse travel costs to XXXXXXXX for the interview.

26. Other:

(Is there anything else the reviewer of this application needs to know to make a properly informed assessment?)

4. Other permissions and ethical clearances

27. Is permission required from an external institution/organisation (e.g. a school, charity, local authority)?

YES / NO

SEE ATTACHED COPY OF EMAIL FROM XXXXXXXX REGARDING PERMISSION

Please attach a copy of the permission. A copy of an email from the institution/organisation is acceptable.

In some cases you may be required to have formal ethical clearance from another institution or organisation.

28. Is ethical clearance required from any other ethics committee?

YES / NO

The charity from whom this study will be recruiting participants ('XXXXXXX') are in the process of updating their policy and plan to add a paragraph regarding research which will state a need to see evidence that the researchers have ethical approval from their organisation (UEL) for this project to commence. Furthermore, they will make initial contact between the researcher and participant to ensure informed consent has been sought and that the young person is clear they may contact XXXXXXXX if they have any concerns.

29. Will your research involve working with children or vulnerable adults?*

YES / NO

If YES have you obtained and attached a DBS certificate?

YES / NO

If your research involves young people under 16 years of age and young people of limited competence will parental/guardian consent be obtained.

N/A

If NO please give reasons. (Note that parental consent is always required for participants who are 16 years of age and younger)

* You are required to have DBS clearance if your participant group involves (1) children and young people who are 16 years of age or under, and (2) 'vulnerable' people aged 16 and over with psychiatric illnesses, people who receive domestic care, elderly people (particularly those in nursing homes), people in palliative care, and people living in institutions and sheltered accommodation, for example. Vulnerable people are understood to be persons who are not necessarily able to freely consent to participating in your research, or who may find it difficult to withhold consent. If in doubt about the extent of the vulnerability of your intended participant group, speak to your supervisor. Methods that maximise the understanding and ability of vulnerable people to give consent should be used whenever possible. For more information about ethical research involving children see www.uel.ac.uk/gradschool/ethics/involving-children/

30. Will you be collecting data overseas?

YES /

NO

This includes collecting data/conducting fieldwork while you are away from the UK on holiday or visiting your home country.

* If YES in what country or countries will you be collecting data?

Please note that ALL students wanting to collect data while overseas (even when going home or away on holiday) MUST have their travel approved by the Pro-Vice Chancellor International (not the School of Psychology) BEFORE travelling overseas.

<http://www.uel.ac.uk/gradschool/ethics/fieldwork/>

IN MANY CASES WHERE STUDENTS ARE WANTING TO COLLECT DATA OTHER THAN IN THE UK (EVEN IF LIVING ABROAD), USING ONLINE SURVEYS AND DOING INTERVIEWS VIA SKYPE, FOR EXAMPLE, WOULD COUNTER THE NEED TO HAVE PERMISSION TO TRAVEL

5. Signatures

TYPED NAMES ARE ACCEPTED AS SIGNATURES

Declaration by student:

I confirm that I have discussed the ethics and feasibility of this research proposal with my supervisor.

Student's name: Paul Williams

Student's number: u1525578

Date: 02/05/17

Declaration by supervisor:

I confirm that, in my opinion, the proposed study constitutes a suitable test of the research question and is both feasible and ethical.

Supervisor's name: Neil Rees

Date:

Appendix C: Participant Information Sheet

UNIVERSITY OF EAST LONDON

School of Psychology
Stratford Campus
Water Lane
London E15 4LZ

Project Title

Leaving Local Authority Care: The Experiences of Separated Young People Seeking Asylum in the UK

The Principal Investigator(s)

Paul Williams

xxxxxxxxxxxxxx@xxxxxxxxxxx

You have been given this letter to help you decide whether you want to participate in a research project being completed as part of my Professional Doctorate in Clinical Psychology degree at the University of East London.

What is the Project?

I am interested in finding out about the experience of young people who arrived in the UK separated from their parents and who are currently seeking asylum. I am particularly interested in what it is like to go through the process of leaving care when you are aged between 18-25 years old. I would like to hear about what have been the good things as well as the difficulties during this time and to hear about your experiences in your own words.

There has been a lot of coverage in the news about young people who have been separated from their parents seeking asylum in the UK, but a lot of it doesn't hear directly from the young people themselves and often it doesn't say anything about their experiences once they are in the UK and the services they work with. Professionals who work with separated young people are interested in hearing about your experiences of this to help them understand how they might be better able to help others in similar situations to yours.

What would I have to do?

If you choose to take part in this study you will be asked you will be asked to talk with me about your experiences. This will last approximately one hour and will involve you answering some questions about your experiences of the transition to leaving care, thinking about how this might have made you feel, what was good about it and what was difficult.

Our conversation will be recorded and a professional interpreter will be available so you can speak in your preferred language. Like myself, the interpreter will be bound by rules of confidentiality, which means he or she will not be able to tell other people what you have said, or that you have taken part in the research.

If you would like, you may also bring someone you trust (like a friend or someone you are close to) and who you feel able to talk freely in front of to our meeting if you would like their support.

Where would I have to go?

I will arrange to meet you at [X] at a time convenient to yourself. I aim to start interviews in May, 2017.

Confidentiality

Taking part in this research is anonymous, which means your name or the names of anyone spoken about will not be on the written version of the recording and it won't appear in the written report at the end.

All the recordings and typed version will be stored on my password protected computer for three years and I will shred all the printed versions I have after I have submitted my report to the university.

In the report that I write and give to the university, I might copy things exactly as you said them, but I won't ever use your real name or details that could be used to identify you. If you like, you can choose a made-up name that can be used instead.

The only time that I might have to break this confidentiality is if you tell me something that makes me think you might be in danger of hurting yourself or being hurt by someone else. If this was the case, I would talk with you first.

What if the interview makes me feel worse?

Talking about our experiences can sometimes make us think about other times that have been difficult and this can lead us to feeling upset. I am aware that this can happen and would encourage you to let me know at any point during or after an interview so we can think about how best to support you. There will also be a chance to talk about this at the end of any interviews. If you do feel upset, you can speak to a member of staff at [X] or you can talk to your GP or one of the organisations I will give details about.

You do not to take part in this research, the choice is completely yours. Please don't feel that because you have been asked you have to. You can also withdraw from the research at any time, even if you have just started or finished an interview. However, I ask that contact me before January, 2018 if you decide to withdraw as I aim to be completing the research around this time. If you do decide not to take part or you want to withdraw from the research you can do without giving a reason, it will not affect the support you receive from [X] or in any way be related to any ongoing legal or asylum claims.

Please feel free to ask me any questions. If you are happy to continue you will be asked to sign a consent form prior to your participation. Please retain this invitation letter for reference.

If you have any questions or concerns about how the study has been conducted, please contact the study's supervisor Neil Rees, School of Psychology, University of East London, Water Lane, London E15 4LZ. Tel.020 8223 4475, Email: N.Rees@uel.ac.uk

or

Chair of the School of Psychology Research Ethics Sub-committee: Dr. Mark Finn, School of Psychology, University of East London, Water Lane, London E15 4LZ.
(Tel: 020 8223 4493. Email: m.finn@uel.ac.uk)

Thank you.

Yours sincerely,

Paul Williams

Appendix D: Participant Consent Form

UNIVERSITY OF EAST LONDON

Consent to participate in the research study:

Leaving Local Authority Care: The Experiences of Separated Young People Seeking Asylum in the UK

Please read the following page carefully and sign on the next page if you agree to it.

I have read the information sheet relating to the above research study and have been given a copy of the sheet to keep.

The nature and purposes of the research have been explained to me, and I have had the opportunity to discuss the details and ask questions about it. I understand what is being proposed and how I will be involved has been explained to me.

I understand that taking part in this study, and the information I share will remain strictly confidential and that my name and any details which might identify me will not be used. I understand that the exception to this is if I say something which leads the researcher to be concerned about my safety. If this does happen, they will talk to a member of staff at [X] but will discuss it with me first.

I understand that the conversation will be recorded and it has been explained to me how this information will be used and stored. I understand that only the researcher involved in the research will have access to identifying data. It has been explained to me what will happen once the research has been completed.

I freely and fully consent to participate in this research, which has been fully explained to me. I understand that having given this consent I can withdraw from the research at any time, up to January, 2018 without having to give a reason and at no disadvantage to myself.

Name of participant (BLOCK CAPITALS)

.....

Signature

.....

Name of Researcher (BLOCK CAPITALS)

.....

Signature

.....

Date:

Appendix E: Interview Schedule

Initial Introduction

This will be used to reintroduce myself, the purpose of the interview and allow any questions to be answered. Consent will be sought again prior to commencing the interview.

1. 'Warm up' questions regarding journey to [X] that day, regular activities / interests etc.

Linking question

2. Where are you living currently?
 - With whom?
 - How did you come to be there?
 - What were your living circumstances prior to this?

Interview questions

3. What were your experiences of being in care before you turned 18?
 - Who with?
 - How was it set up?
 - What was good / bad about this?
4. What do you recall of the transition to leaving care?
 - What changes did you notice?
 - What was the emotional/practical impact
 - specific memories of professionals etc.
5. What was your understanding of what happened during this time?
 - why it happened?
 - Fears? Expectations?
 - Support?
6. What helped to get you through this time?
 - Support from significant people?
 - ways of coping?

7. What wasn't so helpful during this time?

8. Has your understanding of that time changed now?

Appendix F: Participant Debriefing Form

Leaving Local Authority Care: The Experiences of Separated Young People Seeking Asylum in the UK.

Thank you for coming to your interview today. This information sheet is to remind you that if you have been affected in anyway by what we have spoken about please speak with a member of staff at [X] or contact your GP directly. Alternatively, you can contact one the organisations listed below:

- Young Roots

Cornerstone House, 14 Willis Road, Croydon, CR0 2XX

Phone: 020 8684 9140

- Refugee Action – London

Victoria Charity Centre, 11 Belgrave Road, London SW1V 1RB

Phone: 0207 952 1511

- British Red Cross – Refugee Support

Aztec Row, 5 Berners Road, Angel, London, N1 0PW

Phone: 020 7704 5670

- The Refugee Council

Phone: 0207 346 6700

<http://www.refugeecouncil.org.uk/>

- The Samaritans

Phone: 116 123 (No Charge)

Appendix G: Audit Trail – Example of Initial Coding

Interview transcript 1: [redacted]

238 she had my saving there and she brought me everything for my
 239 house, that was my first house. I been that was I think actually a
 240 studio flat (okay, oh wow okay) Yeah, it was [Green line actually]. I
 241 move there and there was like there was a problem again being
 242 when I live there it was too damp...too damp.. and there was arat
 243 coming in. The landlord he was..i was asking a few times even the
 244 window it was shut, you couldn't open the window.. it was blocked.
 245 You couldn't open it it would break. And then I loved there for quite
 246 a while and then I have from [redacted].. he ask [redacted] and he come to
 247 my house where I was living and he's "that's not right" "my sons.."
 248 and he was amazing.. he was an Angel.. trust me. The way he was
 249 the way he treat me, with my everything I found what I was doing,
 250 going to the doctor when I was first.. anyway.. he was there for me
 251 actually... yeah.. the sad thing is.. he's not here anymore. That's the
 252 sad thing.
 253 Int: And when.. when you were in Foster care and when you were
 254 coming up to 18.. did you, did you know what was going to happen.
 255 Did..had people spoken to you about what the process would be?
 256 [redacted]: Um.. yeah.. I knew because I heard from the peoples.. when
 257 you turn 18 then after youre going to move to you own house..
 258 they'll give you a house, you going to live by yourself.. and the best
 259 thing is you need to learn how to cook first.. what to do with your
 260 mum.. learn how to cook and how to wash your clothes and
 261 everything.. I was going to leave in cooking and all that cuz I was not
 262 good in cooking... and when I move actually it was a kind of good as
 263 well actually, kind of independent but.. the other side.. you know for
 264 me it was kind of I move from my mum and then I became more
 265 depressed.. that made me more sick.. than me.. that changed my
 266 life moved from my foster family.
 267 Int: Are you happy to tell me a little more about that.. what was
 268 going on at that time?
 269 [redacted]: Actually when I was in Foster family I never had a problem like..
 270 sorry... {pause} I was with foster family.. I didn't have.. even though I
 271 was depressed I was upset, I was not sleeping until late in the

Handwritten Notes:

- 238-241: **EXPECTED DIFFICULTIES IN HUMANE LOSS UNABLE TO AVOID/LOSS OF AGENCY**
- 242-245: **PROTECTORS NEED FOR SUPPORT**
- 246-252: **LOSSES OF FAMILY**
- 253-255: **EXPECTATIONS OF CHANGE**
- 256-261: **INITIAL EXCITEMENT/PRIDE DOING IT FOR YOURSELF.**
- 262-266: **IMPACT ON MOOD AND LONELINESS**
- 267-271: **CHANGE LOSS PROTECTION OF FAMILY**

Handwritten Annotations:

- (337) Is this what main do they settle you in.
- (331) Image of being proud
- (242) Quickly breaks to problem/difficult
- (242) Emphasis of damp (242/143) Who have? The rats?
- (244) ↑ dispare at window. What does this represent?
- (247) "My son"
- (248) Given his death use of 'Angel' is interesting
- (250) Here & gone.
- (251) Repetition of 'Sad'
- (256) Informal left by professionals?
- (257) Your own house - Grown up.
- (258) live by yourself again grown up.
- (259) The things main would usually do. Female role?
- (262) Sense of independence doing it on your own.
- (264) Depressed ⇒ sick ⇒ change for ever
- (269) protection from family I want well, but I didn't have real problems

Interview transcript 1:

272 morning.. I was okay.. because my mum was there like when I was
 273 coming upset she would change my mind.. she would take me
 274 down, watch a movie or something like that. she was there. But
 275 when I moved to my.. when I moved to my own house and turn 18
 276 then after that I was living without.. and I became you know..
 277 because my mum she wasn't there and I became depressed I
 278 became upset and upset.. and it was just keep going on and keep
 279 going on.. continue going on.. then finally I found myself self harm..
 280 just self harm and that relieve me depression you know.. depressed
 281 everywhere I my mind that help me calm down and then that
 282 became more... slowly slowly that became more habit.. you know.. if
 283 I became depressed then I had to self-harm it doesn't matter what
 284 kind of self- harm.. because like I did that like.. cut my arms or do
 285 something.. bash myself.. bang my head with a walls or whatever..
 286 but I then I saw a doctor.. I was going to doctor and given medicine.
 287 Int: How did you start to see the doctor? Did somebody...
 288 : I went to my GP because my GP knew she knew already from
 289 the beginning you know when I came here I can not of sleep,
 290 because my sleep is always disturbed.. 3 in the morning not after
 291 three in the morning.. four.. til six.. seven.. I sleep only 3 hours four
 292 hours.. no more than that.. yeah.. so that's what happened. When
 293 I... my gp knew already. And then she would refer me counselling,
 294 then she refer to everything.. doctor.
 295 Int: So it sound like it was quite abrupt.. I seems like you were in
 296 foster care and then there was a cut and then you were by yourself
 297 and I sounds like it was difficult then being alone and by yourself..
 298 : Yeah, no.. it was a bit difficult.. because.. being with a family
 299 when I was with the foster family is like my own family actually.. you
 300 know it.. they look after me, whenever I was getting upset.. even like
 301 when I was in my room sometimes crying when I was upset.. mum..
 302 my mum she was sometimes noticing that and sometimes she knock
 303 on my door... "are you okay?" she was like kind of making me talk to
 304 her and then even my brothers and sister my foster sister she was
 305 good as well my brothers were kind of like one family, you know..

(272) Juxtaposing the support vs. no support?
 (273) Mum would take him - take hold of him but
 (276) living without - says thing taken away from him
 (277) Spiral of depression
 (279) Found myself self harm - lack of control.
 (280) Used to be num now self harm...?
 (282) fell into it?
 (283) Violence of self harm - physical pain more understandable than emotional?
 (283) Given
 (289) Already have - can difficulties but more manageable?
 (298) Responses to summaries always reduce impact eg "a bit"
 (298) Mum actual family
 (301/302) Emphasis of my mum.
 (303) taking charge of him
 (304) Family role
 (305) importance of family

THEY
 PROTECT
 SS
 IMPACT OF
 LOSS ON MOOD
 SPINALS
 UNRAVELING
 LACK OF
 CONTROL
 WAYS OF
 COPING
 LACK OF CONTROL
 OVER LIFE
 PHYSICAL PAIN
 TO EXPRESS
 PSYCHOLOGICAL

MULTIPLE
 DIFFICULTIES
 HELD AT BAY

REPLACING
 FAMILY/
 SURROGATE
 FAMILY &
 PROTECTION

SPECIAL
 PEOPLE
 FAMILY
 ROLES

Appendix H: Audit Trail - Theme Generation

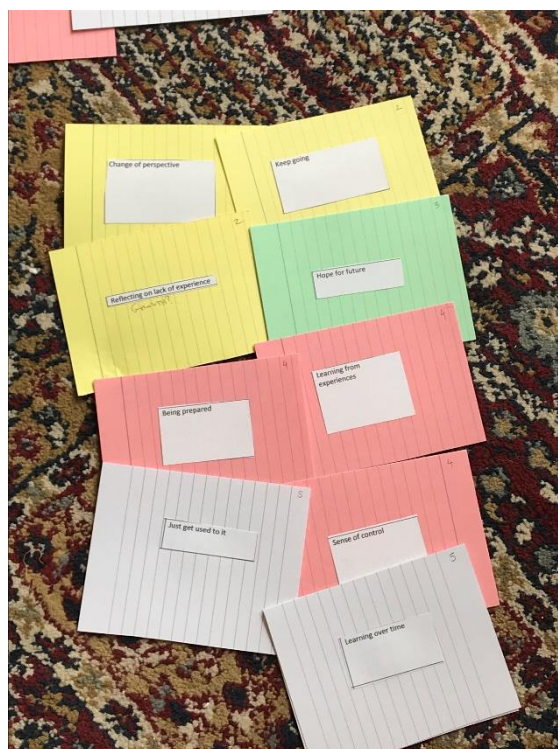
Super-Ordinate Themes	Sub-ordinate Themes	Emergent Themes
An Unwanted Move	Being forced	Being moved
		Can't stay here
		No choice
		You are an adult
		Done to
		Senseless decisions
		Being moved
		On hold
		Uncertainty
		Prior warning
		I don't want to move
		Trying to stay
		Not wanting to move
		Not being ready
	Too early	
	Being too young	
	Disbelieving	
	Finding out	
	Not believing it	
	Not ready	
	Expectations	
	Negotiation Services	Being failed
		Let down
		Not taking responsibility
		Making promises
		Like a parent
		Stuck
		Poor communication
		Inconsistency

		Constant Changes
		Uncaring
		Unresponsive
		Unsupportive
		Not listened to
		Distrust
		Treated wrong
		Less than human
		Not equal
		Treated differently
		They give me
		There if needed
		Give me advice
Loss and Hardship	A Difficult Transition	Sense of uncertainty
		Being unprepared
		Knowing the skills needed
		Sense of hardship
		A sudden realisation
		Turning bad
		Problems with accommodation
		Debt
	Loss	Loss of contact
		Loss of closeness
		Loss of comfort
		Loss of support
		Loss of contact
		Loss of education
		Loss of interests
		Nothing to do
	Being alone	Feeling abandoned
		Being abandoned
		Being alone
		Anything could happen
Knowing nobody		

		Living alone
		On my own
		Unexpected changes
		Doing it alone
		Being vulnerable
	Psychological and physical impact	One thing at a time
		Overwhelmed
		Too much pressure
		Too much stress
		Other stressors
		Thinking too much
		Lost
		Stuckness
		Hopelessness
		Hardship
		Self-harm
		Deterioration of wellbeing
		No solution
		Impact on mood
		Thoughts of suicide
Feeling low		
Becoming introverted		
Somatisation		
Physical impact		
Surviving	Resourcefulness	Respect
		Keeping busy
		Keeping active
		Learning from others
		Importance of friends
		Support from others
		Taking action
		Being resourceful
		Getting on yourself
		Positive reframing

		Make like normal
		Staying hopeful
		Make yourself strong
		Positive thinking
		Retaining hope
		Being independent
		Get used to it
		Do it for yourself
	Importance of family	Support and sharing
		Supporting mood
		Supporting mood
		Staying connected
		Keeping you safe
		Caring
		Continued support
		Giving back
		Giving certainty
		Source of protection
		Protection
		Like my own family
		Family
		Teaching skills
		Helping you grow
	Moving Forward	Independence
		Getting prepared
		Doing your best
		Hope for the future
		Looking back
		Learning over time
		Still going
		Change of perspective

Appendix I: Audit Trail – Example of Theme Development



Appendix J: Reflections After Consultation with the Young People

Present: [X], [X] Interpreter, [X] (young person), [X] (young person)

- Both young people had good things to say about their foster carers and they had a good relationship, they acknowledged that some people they knew did not have that experience and sharing a house is very difficult, harder to have a routine, etc. They both said that foster carers are really important for showing them how to cook, wash clothes and other survival skills in England ... They said that others who did not have that cannot study as well and are more distressed
- Psychologists, social services etc need to know more to help in a better way
 - o To understanding why sharing their story is hard
 - o To not just look the young people “in the face but also look inside” and what is going on there
- Explaining what we do and who we are is really difficult; getting informed consent will be tricky, where they are from psychologists and researchers etc are not a thing
- Consent forms might not be looked at, or understood, even if translated
- The young people suggested that it might take up to three meetings for people to understand what we do and who we are and trust us; though it was acknowledge that it depends on each young person and how they feel
- The consent process will have to start before we meet them and the service they are linked in with (e.g. X), will have to speak to them afterwards again to make sure they still understand
- They both said that meeting in [X] office is better for them than a youth club because it is more private and quiet
- Use really simple questions
- Start the questions with general closed questions (for young person to “relax and calm your mind”), start with just a chat, e.g.
 - o Where are you from?
 - o What do you like doing?
 - o Who told you about your age for the first time?

And then move more into the direction:

- o Who said it was not true?
- o Do you remember your age assessment?
- General advice was to start narrow, and with closed questions, and gauge how the young person is feeling and then go a bit broader and deeper.
- We also need to think carefully how we use words, such as experience
- We need to think how best to explain what research is and what researchers do and want.

(today we came up with something like: we want to talk to 10 or so young people like yourselves to gather some arguments so we can talk to people who make decisions, so we can help to change the system and make it fairer)

- We need to take into consideration how many people they meet and that that everyone wants them to tell them something...
- high-street voucher that can be used in any of the shops

Points about leaving care

- Perceived difference between those who have been placed in foster care vs those who are in semi supported living. Feeling that foster carers really support the needs of the young person, where as being in independent living is too much at this age (don't know how to care for yourself).
- But, highlighted there are different types of foster carers and YP might have multiple foster carers e.g., temporary carers when main carers is away.
- Talk of somatic representation of emotions e.g., headaches; and presentation of emotions in the form of nightmares/dreams. This all impacts on ability to study and look after self.
- Difficulties with sharing problems almost each other – can talk to people like Tiago, but not each other as don't know how they might react e.g., laugh

Reflections

- The hardest part will not be them telling their story, but for them to know why, CONSENT
- [X] (interpreter) seems to be a really good person to have on board
- We need to talk about travel cost
- Maybe it is easier to explain to young people about “paying them” to thank them for their time other researchers have provided £20 voucher (with university name on it).
- Cake goes down well (food is important in most cultures)
- Need to consider the differences in fostered YP and those living independently as this will have an impact on perception of the transition to leaving care.
- Can they be our participants still? They would like that.
- Interesting how they said that young people over 18 can talk better because they are better at it (discourse about being 18 has infiltrated?)

Appendix K: Reflective Journal Excerpt

Reflections on interview 6 and looking back

So that was the final interview. I have so many questions about the process and still don't know if I have done a good enough job of getting the right kind of data. I wanted [the participant] to lead the conversation because I have been really mindful of not dictating or imposing my thoughts and responses too much during the interview and trying to be as reflexive as possible before asking follow-up questions. But, I am not sure if I let him talk too freely today. I am really aware that he had a lot to say and it felt like he had come in with an idea of what he wanted to tell me – [clinician] did say that he does not hold back. I felt that I was almost wrestling with him at times because every time I ask a direct question he answered and then returned focusing on his agenda. That said, what he told me today felt really powerful. His reflections on his experience of being promised so many things by his social care team and let down each time really stuck with me and made me think about the perpetuation of uncertainty and what I can only think of as abandonment.

As I think back over the interviews I think there are some themes that have emerged about the process. First and foremost is the balancing act between being the 'researcher' and being the 'therapist'. I have found that a really tricky thing. I think because my natural position is to let the young men talk and to follow up salient points, but I worry this moves too far away from the semi-structured approach needed for IPA and feels a bit too narrative. On the other hand, I wonder if I have focused too narrowly on the questions and not given enough freedom to follow things up. I don't want to open up conversations that I know are going to be difficult to continue because of the constraints of the research. This wouldn't be fair for the young men.

The other question I have, which really came up today is how well the young men truly understand the purpose of the research before consenting to attend the interview. [The participant] is the 4th participant to arrive with documents to show me. I wonder if they initial though I was a case worker? This is why it is so important to ensure we have informed consent and why I have made every effort to clarify with each participant before and after the interviews to make sure they are still happy to continue.