The Construction of Friendship for Looked After Children

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Abstract

Looked After Children (LAC) are associated with poor outcomes, but they also demonstrate resilience and strength, particularly when placed in stable, supportive environments. Friendship is known to support resilience in children and adolescents and may be particularly useful to LAC, but there is limited research into LAC’s experiences of friendship. **Objective:** This study aimed to explore what LAC value in their friendships in order to understand what support may help them gain the maximum benefits from these relationships. **Design:** Seven 11 to 16 year olds, living in foster care took part in semi-structured interviews using sociograms to discuss their past, present and ideal friendships, particularly focusing on what they valued and how the friendships changed over time. **Findings:** Results were analysed using inductive thematic analysis resulting in six themes; “They’re like me”, which had two subthemes; “We like to do the same things” and “We are the same”, “They keep my secrets”, which had two subthemes; “I trust them” and “People finding out I’m in care”, “They spend time with me”, “They help me with my feelings”, “They understand me” and “They’re on my side”. **Conclusions:** This sample of LAC showed similar values and friendship expectations to other adolescents, and had formed and maintained positive relationships, albeit with some challenges relating to their care status, such as fears of disclosure, placement and school disruption. They provide an example of what can be achieved by LAC in a stable environment, but should not necessarily be considered typical of LAC in general. Practice recommendations include open discussion with LAC about their friendships, disclosure of LAC status and support with friendships with children with other difficulties, who may offer increased understanding. Future research with a wider range of LAC and looking at the costs of friendships is also recommended.
Acknowledgements

Firstly, I would like to thank the young people who took part in my interviews and those who consulted on their production. They inspired me with their resilience and made this feel worthwhile. I am also incredibly grateful to the social workers, foster carers and team managers who helped me recruit participants. In stretched and time pressured services, their efforts to help me with my research were even more appreciated. And thank you to Nia, for all your help with my quality assessments, even when you had so much to be getting on with to work towards your own dreams of clinical psychology. I’m so glad you’ve made it into training!

Secondly, I am grateful to my research supervisors, Mary John and Kate Gleeson. They offered endless support, care and advice, going beyond their roles to help me up when I was down and make me believe I could actually do this.

Finally, I am thankful to my friends and family who have always supported me and have got me through the highs and lows of training, never doubting that I would make it. Words cannot express how much you have all done for me; celebrating moments of joy on bouncy obstacle courses, letting me stay at your houses whenever I want, giving me little boxes of treats for when I am struggling and listening to me ranting. You are all incredible and I feel so lucky to have such brilliant people in my life. I am very much looking forward to spending more time with you all and showing my appreciation now that I don’t have a thesis to write.
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The Construction of Friendship for Looked After Children

Target Journal: Child and Family Social Work

Child and Family Social Work is a peer reviewed journal that provides a forum to increase understanding and develop good practice in all areas of child and family social work to advance the wellbeing and welfare of children and families worldwide. It publishes articles on research, theory, policy and practice and welcomes qualitative articles. See Appendix A for the Guidelines for Authors.

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Abstract

Looked After Children (LAC) are associated with poor outcomes, but they also demonstrate resilience and strength, particularly when placed in stable, supportive environments. Friendship is known to support resilience in children and adolescents and may be particularly useful to LAC, but there is limited research into LAC’s experiences of friendship. **Objective:** This study aimed to explore what LAC value in their friendships in order to understand what support may help them gain the maximum benefits from these relationships. **Design:** Seven 11 to 16 year olds, living in foster care took part in semi-structured interviews using sociograms to discuss their past, present and ideal friendships, particularly focusing on what they valued and how the friendships changed over time. **Findings:** Results were analysed using inductive thematic analysis resulting in six themes; “They’re like me”, which had two subthemes; “We like to do the same things” and “We are the same”, “They keep my secrets”, which had two subthemes; “I trust them” and “People finding out I’m in care”, “They spend time with me”, “They help me with my feelings”, “They understand me” and “They’re on my side”. **Conclusions:** This sample of LAC showed similar values and friendship expectations to other adolescents, and had formed and maintained positive relationships, albeit with some challenges relating to their care status, such as fears of disclosure, placement and school disruption. They provide an example of what can be achieved by LAC in a stable environment, but should not necessarily be considered typical of LAC in general. Practice recommendations include open discussion with LAC about their friendships, disclosure of LAC status and support with friendships with children with other difficulties, who may offer increased understanding. Future research with a wider range of LAC and looking at the costs of friendships is also recommended.
Introduction

Concern for children in the UK is increasing, with multiple impacts on their wellbeing; social media, poverty, parental availability, expectations of success, family disruption and peer pressure (The Children’s Society, 2018). Whilst these are challenges for all young people, Looked After Children (LAC) face an additional series of challenges; the breakdown in their family, being taken into Local Authority care, placements with short and long-term carers, disruptions to friendships and education. This project seeks to understand the place of friendship in supporting these young people’s wellbeing.

A child is considered “Looked After” when they are accommodated by the Local Authority for a period of 24 hours or more, or if they are subject to a care order or placement order. The number of LAC in England has risen steadily over the last nine years, with the majority being placed in care due to abuse or neglect (Department for Education, 2017).

Pinto and Woolgar (2015) described LAC as one of the most vulnerable groups in society, highlighting the range of poor outcomes they can experience compared to their peers. In a review of the literature, Fisher (2015) found LAC demonstrate delays in cognitive, language and emotional development. LAC show higher rates of mental health difficulties than children living in private households, even those in disadvantaged private households (Ford et al., 2007). This negative outcome is increased when LAC experience a higher number of placement changes (Newton et al., 2000). They also show higher risk trajectories towards involvement with youth justice services via behaviours such as substance abuse and criminal acts (Jonson-Reid & Barth, 2000). These difficulties can be associated with their experiences before they came into care, such as abuse and neglect, the experience of being taken into care or their experiences in care. However, the difficulties and negative outcomes described above are not universal, with many LAC showing high resilience, some LAC not showing deficits
and evidence of “catch-up” when LAC are placed in stable, supportive environments (Fisher, 2015). However, little is known about specific predictors of resilience within this population.

One factor that can increase resilience in children and adolescents generally is friendship (Graber et al., 2016; Rutter, 1990). Definitions of friendship vary across cultures, time periods and individuals. However, it is typically recognised as a relationship in which two or more individuals share mutual liking for each other and have fun together. Friendship becomes increasingly important to young people as they enter adolescence, with a new focus on intimacy within these relationships (Selman, 1980). Adolescence is also the time when young people begin to individuate from their families, amplifying the need for positive friendships (Erwin, 1998).

During adolescence, friendship can be a source of emotional support (Hartup & Stevens, 1999, Stanton-Salazar & Spina, 2005). Adolescents with close friends have shown better psychological health and adjustment (Bukowski et al., 1996) and friendships contribute to happiness and identity development (Demir et al., 2011). The benefits of adolescent friendship extend into adulthood. Narr et al. (2017) undertook a longitudinal study showing that close friendships at 15 years old were predictive of higher self-worth and lower anxiety and depression at 25 years old. Helgeson and Lopez (2010) reported that friendship is associated with adjustment and wellbeing throughout life and Yang et al. (2016) found long term benefits of friendship on physical health.

Research into LAC experiences of friendship is limited. A recent literature review by May (2018) found LAC may be less likely than their non-LAC peers to have friends (Zimmerman et al., 1997), but most do have at least one friend (Smith, 1995). These relationships are valued as a source of practical and emotional support (McMahon & Curtin, 2013; Ridge & Millar, 2000), with care leavers being particularly reliant on friends (Perez & Romo, 2011). However, a number of challenges relating to young people’s care status can
contribute to difficulties forming and maintaining close friendships. These included frequent placement moves, limited support from foster carers to maintain friendships, rules and regulations about visiting friend’s homes, stigma and feeling different to their peers (Emond, 2014; Marcus, 1991; McMahon & Curtin, 2013; Ridge & Millar, 2000; Rogers, 2017; Selwyn et al., 2010). These challenges suggest that LAC may benefit from greater support or understanding about their friendships. However, there was limited information about what specific values and expectations LAC placed on their friendships. It is important to know what LAC value in order that support can be appropriately targeted.

Research into values and expectations of friendship was common in the 1980s and 1990s. However, it has since been limited, with little new significant theoretical or empirical data being published. Kelley and Thibaut (1978) proposed the interdependence theory of social exchange. They suggested relationships are based on rewards and costs, with participants choosing to maintain relationships with high rewards and low costs. Interdependence occurs when interactions are mutually rewarding and people come to depend on each other for those rewards. This theory has been criticised for viewing humans as unemotional, rational beings who make logical decisions about relationships. In response to this, Lawler (2001) expanded the theory to formalise affect theory. This posits that interactions produce emotional reactions, which can be positive or negative and act as rewards or punishments. Individuals try to understand the source of emotional reactions and often attribute them to the interaction. Consistent production of positive emotions attributed to exchanges with an individual will increase solidarity or closeness in that relationship, whereas consistent experiences of negative emotion attributed to exchanges with an individual will decrease solidarity and closeness. Laursen (1996) noted the importance of accounting for the developmental stage of individuals when considering interdependence and social exchange theories. Adolescents have greater autonomy over their decisions and friendships than in earlier childhood. The rewards and costs
associated with these relationships will be integral to their formation and maintenance. However, adults can still impose restrictions, preventing particular friendships developing or being maintained. Younger adolescents primarily have same-sex friends and prioritise these over romantic relationships, but this changes as adolescents develop. There are also developments in cognitive and social functioning as adolescents mature, and these can affect the rewards or costs experienced within different relationships.

Given the importance of rewards and costs associated with friendship, it is useful to understand what young people value or find important in their friendships. These factors may form the rewards involved in a social exchange model. Bigelow (1977) asked children aged between 6 and 14 years old what they wanted their best friend to be like. Both younger and older children agreed that shared activities, propinquity and character admiration were important, but the adolescents also recorded the importance of loyalty, commitment, genuineness, acceptance and potential for intimacy. Bigelow and La Gaipa (1980) described the values developing gradually, with earlier values being incorporated into adolescents’ expectations of friendship. They state that adolescents particularly value friendship as a source of support and confidentiality in times of emotional crisis. Other researchers identified themes that typically fall into categories relating to similarity and intimacy. These include; loyalty, trust, intimacy, support and fun (Hartup & Stevens, 1999), mutual liking, frequency of interaction and perceived intimacy (Berndt et al., 1986), self-disclosure and emotional support (Buhrmester et al., 1988), similar interests (Byrne & Griffitt, 1973) and similar attitudes (Epstein, 1983; Gavin & Furman, 1996). Savin-Williams and Berndt (1990) reported that shared activity is important at all ages, with intimacy and loyalty becoming primary in adolescence.

As this research is quite dated, with the changes in the social worlds of adolescents since the 1990s, it may be expected that their values and expectations have changed. Young
people spend increasing amounts of time interacting with wider networks via social media, the types of activities they participate in with friends may have changed and the expectations of adolescents have altered. Despite these significant changes little research has been undertaken to investigate whether this has resulted in a change in adolescent friendship expectations. Hall (2012) completed factor analysis with undergraduate students, examining their friendship expectations. The factors identified as important expectations of an ideal friendship were “symmetrical reciprocity”, consisting of loyalty, mutual regard, trust and support, “agency”, consisting of the benefits a friend has access to, “communion”, consisting of emotional availability, disclosure and understanding, “enjoyment”, “similarity” and “instrumental aid”, such as helping and granting favours. As these participants are older it may not be fully applicable to early adolescence, but the factors do overlap considerably with those from previous research (e.g. Berndt et al., 1986; Bigelow, 1977; Buhrmester et al., 1988; Byrne & Griffitt, 1973; Hartup & Stevens, 1999), suggesting they could still be useful.

As highlighted by current research, LAC are a vulnerable group, with high rates of mental health difficulties. However, they also show resilience and strength within difficult contexts, particularly when they are placed in secure, stable environments. Friendship can be a source of resilience, emotional support and happiness for adolescents and has been proven to have long term benefits in physical and mental health. Research into the friendships of LAC shows that although most LAC have friends, there are a number of obstacles and challenges in these relationships and they may benefit from support. Research into adolescent expectations of friendship covers a range of values, but primarily focuses on the roles of intimacy and similarity. There is very little research into the exact values and expectations that LAC have for their friendships, so designing appropriate support is challenging.
Research Aim
The aim of this research was to explore what LAC value in their friendships in order to understand and consider support that may help them to get the maximum benefits from these relationships.

Method

Recruitment
Three Social Services LAC teams were approached to take part. Two were chosen because they were geographically close to the researcher. The third was chosen due to professional links with the team. Although two teams agreed to take part and shared research information with social workers, recruitment difficulties meant that all participants were recruited by one council within South England, albeit from separate areas and teams within the council boundaries. The council serves a population of 1,362,700 people and in 2015, they were responsible for 1367 LAC.

Social workers and managers within teams were given information about the research (Appendix B) and asked to identify people who met the inclusion criteria shown in Table 1:

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Reason for Inclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aged 11 to 16 years old</td>
<td>This is the stage of adolescence where researchers have identified friendships become closer, more intimate and supportive (e.g. Berndt et al., 1986; Bigelow and La Gaipa, 1975; Selman, 1980).</td>
</tr>
<tr>
<td>At least one friend as assessed by social worker or carer</td>
<td>In order to discuss their current experiences of friendship.</td>
</tr>
<tr>
<td>Able to speak English fluently</td>
<td>This is the researcher’s only language and there was no budget for translation.</td>
</tr>
<tr>
<td>In care for at least the last 12 months</td>
<td>To obtain a degree of homogeneity in the sample and for young people to be able to reflect on the impact of being in care on their friendships.</td>
</tr>
<tr>
<td>Attending mainstream school</td>
<td>To obtain a degree of homogeneity in the place where most adolescent friendships occur.</td>
</tr>
<tr>
<td>Not currently involved in acrimonious court proceedings</td>
<td>To reduce the complexity of consent arrangements.</td>
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</table>
Social workers were asked to provide information to young people and their carers (Appendices C and D). If young people wanted to participate, they completed a form consenting for the social worker to share their contact details (Appendix E). This form also included their legal status in care and the adults that would need to be contacted for Parental Responsibility (PR) consent. In all cases, young people were on Full Care Orders or unaccompanied asylum seekers, so the District Manager was emailed a PR consent form (Appendix F). Young people and their carers were then contacted to discuss the research and arrange a meeting. At the meeting, details of the research were discussed with the young people, covering what would be involved, their right to withdraw and all elements of consent. They then completed a consent form (Appendix G). Participants’ contact details were linked to ID numbers and stored separately from the data on a password protected USB in a locked filing cabinet.

Participants
Seven young people took part, consisting of four girls and three boys aged between 11 and 16, with a mean age of 13.1 years old. They were predominantly White British, with one unaccompanied asylum seeker. They all lived in foster care. Their placements within South England varied between very rural and more urban areas. They had been in foster care for between 20 months and 6 years. One had experienced a placement move within the last few months, but all others had either been in their current placement for at least two years or their entire time in care.

Design
The research used a qualitative design, analysed with Thematic Analysis (Braun & Clarke, 2006). Data was collected using face-to-face semi-structured interviews and sociograms. Semi-structured interviewing was chosen to allow the development of a richer understanding and the exploration of nuances. It also allowed flexibility to adapt the questions responsively to each
participant. The interview schedule was designed in consultation with a LAC participation group, consisting of LAC and care leavers.

Visualisation is considered a strong part of research into social networks (Tubaro et al., 2016). A sociogram is a diagram used to represent social links. They can be easily understood and enjoyed by children and facilitate reflection and dialogue about relationships (Samuelsson et al., 1996). Rogers (2017) found sociograms helped build rapport, encourage participation and minimise power relations with foster children. The young person is represented in the centre, with circles of increasing size around them. They were asked to place small felt shapes on the diagram to represent their friendships, with closer relationships being in inner circles and more distant relationships in the outer circles. The sociograms were used to guide discussion about friendship networks and specific relationships the young people had experienced. The interviews focussed on the way the young people described their friendships, what they valued about specific relationships and how these relationships changed over time (see Appendix H for the interview schedule). This was used flexibly and questions remained responsive to what the young people discussed. All interviews covered current, past and ideal friendship networks, with young people changing their sociograms to represent each. The sociograms were photographed at each stage and interviews were audio recorded (see Appendix I for a completed sociogram).

Interviews lasted approximately an hour and took part in the young people’s foster placements. The researcher and young person were the only people in the room, but foster carers and often other household members were in the home.

**Ethical Issues**

A favourable ethical opinion was given by the University of Surrey Faculty of Health and Medical Sciences Ethics Committee (Appendix J). Social Services confirmed this was sufficient. The main ethical considerations were consent, confidentiality and distress.
It was explained to all young people that the research was voluntary and they could withdraw at any point until the data had been analysed. They did not have to answer any questions they did not want to and there would be no negative effects if they chose to withdraw. There is some evidence that young people, particularly those recruited through care services, can acquiesce to participation in research because they believe there will be negative consequences if they refuse, rather than because they have given fully informed voluntary consent (Grisso, 1992). It was therefore positive to note that three young people changed their minds and declined to participate before the initial meeting and one young person declined to answer some of the questions about past friendships. This suggests the process was effective in allowing young people to contribute as much as they felt comfortable with. Those who chose to take part completed a consent form.

Parental Responsibility consent was also obtained for all participants from the District Manager for the relevant LAC team. Although not necessary for consent arrangements, foster carers were aware of the research and at home during the interviews. Meetings were arranged through the carers, suggesting implied consent.

To maintain confidentiality, all information was anonymised and pseudonyms used. Data was stored in a locked filing cabinet and will be destroyed after ten years in accordance with the Data Protection Act (1998) (Legislation.gov.uk, 1998). Participants were made aware that quotations could be used in a publication, but they would not be individually identifiable. The limits of confidentiality in relation to safeguarding were also explained to the young people.

Although the aim of the study was to focus on what LAC value in their friendships, it was possible that discussions may have brought out challenging experiences which they could have found distressing. The interviews were designed with a consultation group of LAC and care leavers to ensure they were sensitive and not likely to cause distress. Young people were
informed that they could terminate the interview at any point and did not have to answer any questions they did not feel comfortable with. A foster carer was always at home, in another room, and available to provide support if needed. Contact details of support agencies and the young person’s social worker were also available.

**Data Analysis**

The Braun and Clarke (2006) model of thematic analysis was used to analyse the data. This was chosen because it is not tied to any theoretical approaches, which provides flexibility in identifying and describing patterns across the data set. An inductive approach was used to allow themes to be developed from the data, rather than from preconceived assumptions or theoretical ideas. This was important because there is limited research into LAC friendships and the general research into adolescent friendship expectations is quite dated, suggesting it may not have been the most relevant way to interpret or analyse data. Analysis was completed at a semantic level rather than a latent level, in keeping with the research aims. This was done from a critical realist perspective in which it is believed that although participants’ responses would be informed by broader contexts and discourse, there is a truth to the way they express their own experiences and this remains the focus (Braun & Clarke, 2006).

The six stages of Braun and Clarke’s (2006) model were followed. Data were transcribed by a professional transcriber, who had signed a confidentiality agreement. All other stages of analysis were completed by the researcher. Transcriptions were checked against the audio and read several times to obtain familiarity. Initial codes were generated by noting the concepts contained in each section of transcript. Codes were then applied across the full data set. The codes were gathered into potential themes, collecting all relevant quotations for each theme. At this stage, not all codes were incorporated into themes, depending on their relevance and the amount or significance of the data they contained. The themes were reviewed, making
changes and developing sub-themes, before writing the report (see Appendix K for extracts demonstrating the analysis process).

**Credibility Checks**

The credibility of the analysis was checked by another Trainee Clinical Psychologist, who examined extracts from each stage to check that coding, theme development and definition were completed appropriately. Themes were also reviewed within supervision, leading to changes in definitions and development of sub-themes.

**Reflexive Stance**

Although the aim was for the analysis to be inductive and themes to be strongly linked to the data, it is still possible for researcher assumptions to affect the analysis. In order to balance this, a reflective diary was kept, including a reflection on how previous experience could influence research processes. Central to this project I have experience of working with LAC within residential care homes and Child and Adolescent Mental Health Services, leading to my own beliefs and assumptions about their experiences. These included the level of difficulty they were likely to encounter in their relationships, the experiences they were likely to have had before coming into care, the likelihood of them having friends and the ways they may engage with research. These assumptions and their potential impact were also discussed within supervision (see Appendix L for a summary of reflections).

**Results**

Overall, the young people engaged well with the interview, thinking carefully about their friendships and giving a picture of the positive elements and challenges they experienced. They all valued their friendships highly, with one participant noting that friendships can provide a type of consistency that his relationships with adults have not been able to:

“Like I can make friends quite easily and stuff. I don't need things like that but I-I think it's more the parental roles that are the hardest kind of things with me because of past
things. So it kind of -- It's harder to form a relationship with them but friends are usually consistently kind of kind and things” (P1. 1204-1209).

Analysis of the interviews yielded six discrete themes relevant to the research question, some with sub-themes. These are shown in Table 2. It is difficult to fully determine whether saturation was reached. In line with Ando et al. (2014), the final two interviews did not add any new codes. However, these young people also spoke less than other participants generally, which may have affected this. Participants were organised by and talked more about some themes than others, allowing a richer picture to develop. However, the less rich themes still appeared important to participants so were included. For brevity, some quotations have been shortened. These are marked with ellipses.

Table 2.
Themes and Subthemes

<table>
<thead>
<tr>
<th>Theme</th>
<th>Sub-themes</th>
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<tbody>
<tr>
<td>They’re like me.</td>
<td>We like to do the same things.</td>
</tr>
<tr>
<td></td>
<td>We are the same.</td>
</tr>
<tr>
<td>They keep my secrets.</td>
<td>I trust them.</td>
</tr>
<tr>
<td>They spend time with me.</td>
<td>People finding out I’m in care.</td>
</tr>
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<td>They help me with my feelings.</td>
<td></td>
</tr>
<tr>
<td>They understand me.</td>
<td></td>
</tr>
<tr>
<td>They’re on my side.</td>
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</table>

“They’re Like Me”

All participants spoke about similarities with their friends, and how this impacted their friendships. This theme can be separated into two sub-themes – “We like to do the same things” and “We are the same”.

“We like to do the same things”. Participants talked about activities they enjoyed with their friends and the importance of liking similar things. It appeared to be a common understanding between friends that they liked the same things. Shared interests were wide ranging, including comics, martial arts, skateboarding, gaming, television, music, art, gymnastics, dogs, glitter, bikes, cricket and badminton. These interests helped young people to
meet friends through attendance at clubs, but also to initiate and develop friendships with people in their neighbourhoods and schools:

“Me, Ella, and her liked the same thing and we liked doing the same thing. We liked like, liking the same thing. And we did everything together. So it was like a chain.” (P4. 327-330).

The shared interests also provided a context for maintaining their friendships.

P3: “Like this, w-- it's like a big thing in our friend group, really, who listens to what music. So we all mainly talk about music and what we watch on TV. Half my friends watch I'm A Celeb, which just come back on TV, and half of them are like, "Oh I'm watching Christmas films." And I'm like, "Oh my God."

Interviewer: Okay. So how do you-

P3: I watch both." (P3. 303-311).

Some participants spoke about having shared general interests, but that these didn’t have to be exactly the same, for example, enjoying music, but having different opinions on the best types, and having discussions about that with friends. One participant suggested that although shared interests were positive, being with people was more important:

“It's fine because my interests link with him and at the end of the day, no matter how much I like it, I'd rather be out with people”. (P1. 220-222)

“We are the same”. Participants also spoke about a range of characteristics, values and circumstances in which similarity to their friends was important to them. These included susceptibility to peer pressure, intelligence, ambitions for the future, chattiness, maturity, financial circumstances and sense of humour. Two of the boys talked about how it was important to them that their friends were “mature” and wouldn’t just “go with the wrong crowd”: 
“I feel like being a boy, the whole idea of friendships kind of alpha male sort of stuff and it all--Everyone's trying to be naughty in class and I don't get that. So, these people don't either and it kind of works because they behave, they do things they're meant to do that they also enjoy themself and, uh, go outside and stuff, so, it's quite nice.” (P1. 195-201)

Similarity in financial circumstances was mentioned as an important factor by two girls. However, they reported differences on the impact of care on their financial situation. One young person felt that being in care had made a positive impact:

**P2:** I think it's made it quite easier, because like, uh, I'm not ashamed of meeting people, 'cause like ... at my old house, I used to have -- I didn't really have the -- like, the house that people would wanna look at. If you know what I mean. I didn't really have a nice house and have nice stuff.

**Interviewer:** Do you mean your Mum's house?

**P2:** Yeah. So I feel like I can bring people home and know that they won't like judge me with the things I have because look at my room, it's awesome, right? (P2. 1264-1274)

She also mentioned that despite having an honest relationship with her best friend, she would not want to talk to her about money before she was in care because it would make her feel “different”. In contrast, another young person reflected on the “hierarchy of the rich and the poor”:

“...I think, um, many people like say because you go to care, you get less stuff, like less money, you get less like very small brands.” (P5. 1165-1167).

This participant had been bullied as a result of brands she wore being perceived as “low class” by other young people.
All participants talked about their friends’ sense of humour being important to them. Most of them described having a similar sense of humour to their friends, but others reported having different senses of humour, as long as they could all enjoy each other’s humour and fit into the group jokes:

“We all kind of have like our own jokes. We all have a good sense of humour. We all like, we all kind of like fit in that circle. We all kind of think about like if we’re talking about something and then Joseph for example, will say something which is, will make other people laugh. So we all kind of like we all quite fit in to the jokes.” (P5. 134-143)

Another participant explained the impact of his friends’ humour on his wellbeing:

“It’s the laughing again cause, like, we just all make each other laugh and then, cause we are laughing about things, we’re all like, happy, like, for example, when you smile, it’s really hard not to actually being enjoying yourself.” (P1. 438-442)

When asked, some participants reported that they might like a friend who was also in care. However, this was not universal and none of them appeared to feel strongly that they would like this. One participant noted that she might like a friend in care, but other similarities, such as being “chatty and not very awkward” would be more important to her.

“They Keep My Secrets”

All participants spoke about secrets or the experience of people knowing they were LAC. This theme is split into two sub-themes; “I trust them” and “People finding out I’m in care”.

“I trust them”. Participants spoke about trusting their closest friends with more personal information about themselves, feeling that they would not tell other people. In some cases young people described asking friends not to tell anyone, in other cases this seemed like a more implicit agreement:

“Yeah. They haven't told anyone. Well, my whole group of friends know and they only tell each other” (P4. 517-518)
There were levels of trust with different information, some of which related to being LAC and some of which was more generic, such as arguments with friends, crushes and relationships. Young people typically trusted more friends with the fact that they were in care and only a close few, if any, would know why they were in care. One young person talked about learning to define his closeness in friendships by the amount he trusted the friend:

“I thought like best friends were the same thing and like close friends, but when I moved to my new school, I've -- Then-then I realised close friends are like more-more trusted than like your friends”. (P6. 672-675)

Some of the participants found it difficult to build and maintain trust in their friendships:

“Like with me, it is kind of trust, if you lose that trust like they're all -- There's a saying, isn't there the next days a new day kind of stuff. Tomorrow's a new day or whatever it is. That is kind of like next year's a new year with me…. It does takes a lot longer [to trust people] but that's not an intentional thing, it just kind of happens, if you know what I mean. It's like kind of gradual build and then when the -- If the wall does kind of come down it's even harder, to like really form a relationship with people too much when they kind of destroy that sort of thing.” (P1. 1238-1249)

However, this was not the case for all participants. Some participants had told other young people their “secrets” almost as soon as they met them and hoped they wouldn’t tell anyone. This was more likely for younger participants.

“People finding out I’m in care”. Participants had a range of experiences of people finding out they were LAC. Most of them had voluntarily told at least some people, but they had all experienced disclosures they were not fully in control of. These included another young person telling people at school, friends knowing their foster carer and friends noticing that they do not call their foster carers Mum and Dad. There was no consistent emotional tone associated
with these experiences. Some participants appeared frustrated or anxious, but others showed no reaction. Most of the experiences were not recent so their emotional reaction may have changed.

Some of the young people reported no concerns or fears about people knowing they were LAC:

“Well. It doesn't--It doesn't bother me if they do--they know or they don't.” (P7. 765-766)

However, others were afraid of being rejected or pitied. There seemed to be a sense that they did not want their friends to think about them or treat them any differently:

“So I wanted them to know but I didn't want them to feel sorry for me because when I first told them, most of them felt sorry for me and I didn't really want that. I just want to kinda like be normal.” (P2. 264-267)

“I have had a couple of like bad reactions. Where she would -- Where someone would go, " Oh I hate fostering, fosterings are mean. I don't like it, so I don't like you anymore."” (P4. 116-119).

Participants also spoke about positive reactions, with friends reacting in the way they had hoped:

“Well, some of my friends like, just went, “okay”. And it's what I wanted.” (P2. 282-283)

The reactions participants hoped for varied slightly, but generally involved their friends not changing the way they treated them. Some were happy for friends to ask questions, whilst others liked that their friends did not ask anything and let them decide how much they wanted to say.
“They Spend Time With Me”

Participants talked about spending lots of time with their closest friends and less time with those that they felt less close to. For those who had a best friend or small group of close friends, they described spending most of their time together:

“I literally spend most of my weekends and after school with her. Any of my free time I basically just spend with her, to be honest.” (P2. 170 – 172).

This seemed to be a goal for participants, as demonstrated by one young person’s description of her perfect friendship:

“I think that like we would be with each other all the time. We would just like-- I feel I would spend more time with them than I would with like my family.” (P5. 972-974)

Large amounts of time together also led to the development of many of the friendships, for example where young people were in the same classes. However, some participants also reflected that they argued more with friends they spent the most time with. The arguments seemed to focus on typical adolescent arguments e.g. different opinions, talking to people the friend does not like, not inviting someone out. No participants described arguments specific to their LAC status. Some participants described the arguments as annoying, but others seemed to accept them as an inevitable part of friendship.

It seemed important to some young people, not only that their friends spent time with them, but that they were their friends’ first choice to spend time with, particularly when they were each other’s best friends. There was no commentary around whether being a LAC influenced this:

“When, I'm like lonely, or when she's bored, first person she'll ask is me to speak to her, or if she wants someone to meet up with her, she'll always ask me.” (P3. 86-89)

Spending time interacting face-to-face seemed to be the main focus, with less discussion around communication through technology or social media. Some young people
were not allowed on social media, but those who were only mentioned it briefly as a way they had initiated conversations with people they had already met in person or to contact old friends. Even in these situations, the time spent together seemed important for the friendship to be developed and maintained.

Many of the young people spoke about friendships changing as a result of placement changes, school changes or house moves. For most, this was the main theme when talking about their sociogram of past friendships, although some also spoke about changes as a result of naturally drifting apart or arguments. Four young people talked about how changing school had completely changed their friendship networks and they were no longer in contact with previous friends. For some, the school move and loss of contact were the young person’s choice, but not in all cases. Where it was the young person’s choice, they expressed either positive or neutral views about their changed friendships. However, when it was not in their control, it was perceived negatively. One young person identified the difficulty of maintaining friendships after changing school and why he chose not to:

“I maintained that for -- I-I-I don’t know. I just went there and I’d talk to people and I did but it kind of felt like, rather than just focusing on friends that far away and having to do chores to make money to get the train, and then I just kind of just moved away completely and just stopped like that. Because I kind of felt like I needed to focus here”

(P1. 1127-1133)

Another young person reflected that a placement move had changed some of her friendships, but remaining in the same school was helpful:

“It's all right, because they're all in my school, so I still see them and speak to them”

(P3. 906-907).

Some of the young people had recently moved house with their foster family. Although they remained within the same schools and placement, they had noticed some impact on their
friendships. One felt she needed to learn her way around the area, so she could travel to town and her friends’ houses and then she may be able to spend time with her friends as usual, but one reported a more significant difference because much of her time spent with friends had been “playing out” in the street. This meant she now had to ask foster carers and make plans to see friends in a more structured way than she was used to, which upset her and made her feel less close to her friends. The participant who was more dependent on foster carers to facilitate this friendship was younger than the participant who felt this was under her control.

“They Help Me With My Feelings”

Most of the participants talked about how their friends were there for them, available to talk whenever they needed and however they were feeling:

“She’s always there to talk to if I need anyone. She's always helpful. Um, I can always talk to her if I feel like I'm down or if I feel like I just wanna scream or something. I know I can talk to her.” (P2. 1157 – 1161).

The emotional support participants valued focused on difficulties related to being in care, such as feeling upset after family contact, as well as more general difficulties, such as arguments with peers. They liked that their friends understood how they were feeling and knew what to do to comfort or reassure them:

“She, she makes me always feel happy to be honest but she sometimes, she does things in particular like, um, gets when I'm upset. She knows who to get like 'cause, um, I have my sister goes to my school, so she knows who to get and like -- or like she knows how to like sort things out if I don't want anyone. She knows that kind of -- she knows what to say to me if you know what I mean.” (P2. 355-362)

“Um, she just, like, tries to calm me down. Because she knows that when I get angry, I get angry. And no one can, like, stop me getting angry. They just, like, can only calm
me down. I'm still angry, I'm just not as angry. I can, like, calm down and be normal.” (P4. 670 – 674)

At times, the emotional support included helping participants to access adults. One young person said she had spoken about her feelings with a friend’s mother when she was arguing with a foster carer. Another said that when he gets upset he likes it when his friend calls their mother, who contacts his foster carer. Another said that her friends support her to tell teachers when she gets upset, which she would not usually feel confident enough to do because;

“Like I wouldn’t be able to like, do it on my own. It's a little bit weird... I don’t like doing things on my own, I have to have someone there to like help me. Otherwise I’ll say something wrong.” (P3. 676-681)

The provision of emotional support and advocacy was not important to all young people. Some participants, particularly the boys, said that they did not need to talk about their feelings with their friends:

“I don’t really-- I- of course, I feel emotion and stuff but you don’t, like-- I kinda forget about it when I'm there, so, it's pointless. And I don’t really need to cause it's nothing that important, so, I kind of-- Yeah, it's, like, a list of things to do and, like, emotion talking's, like really far on the bottom-so I never get to it.” (P1. 270-275).

“They Understand Me”

Many of the participants spoke about the feeling that their friends understood them. This was sometimes in relation to understanding their emotions. This is covered within “They help me with my feelings”. Participants also reported a more general sense of being understood by their friends and that friends could be more understanding than adults and professionals:
“So but when I talk about stuff like, um, what it is it like? My old life. She, she -- I can sit there and talk to her. And then, she can understand me because a lot of people if I try and talk to them, like [foster carer], or [social worker] or anyone. It just feels like you really don’t, they look a bit confused. They don't understand but when I talk to Amy, I just know that she gets me.” (P2. 106-113).

Participants also spoke more specifically about their friends’ understanding of being in care. Some felt that their friends did understand what it was like for them, but many reported misconceptions and having to explain what being in care meant to their friends:

“I don’t think they fully understand what it’s like not to be around your Mum and Dad all the time. I think they kind of feel, okay I-I’ve had a sleepover round- da-da-da's house. Okay I-I'll be back around my Mum's by the morning but like with me I'm like, I'm not 'cause I think they don't fully understand that if I have a sleepover, I don't go to my Mum's or I don't go to my Dad's. I always go to [foster carer]'s.” (P5. 1064 – 1072)

Although none of the participants had friends who were in care, they did not feel strongly that this would be beneficial. However, many of them reflected that friends who had some kind of other difficulty in their lives, whether that be with their families or in other areas, were able to offer a better level of understanding:

“Like we are all like - some of us have had family issues, some of us have had bullying issues. Like so, one person bullies everyone. But um we’ve all like – we’ve all kind of had our own issues. ...Yeah. I think it like -- ‘Cause we’ll all -- We -- ‘Cause we all have - we both have the same issue. We've all had the same issue. So I think it kind of allows us to understand where the other people are coming from.” (P5. 732 – 741)
“They’re On My Side”

Participants spoke about their friends being on their side and “sticking up for” them in arguments, whether that be with peers, teachers or bullies:

“Like, uh when like a teacher, like comes and tells me and I’m sitting there talking to other people and the other people just throw pens at me and my teacher sent me out for no reason. Then they stick up for me then.” (P6. 206-209)

Some participants implied that their friends were always on their side, whilst others felt that some of their friends chose sides based on who was right in the specific situation.

Three young people also spoke about friendships starting as a result of an experience of someone being on their side:

“Ben and Alex both kind of sat on the bus one day, the back of the bus, and someone came up to me and told me to move cause they sit there. And I said, "I don't want to move because I'm sat here. It's just inconvenient." So, they persisted doing that and Ben turned around and said, “Why didn’t you just give up? It’s a bit pointless,” and he came and sat next to me, and then, the other kid just left and that's how I met Ben.” (P1. 85-92).

After talking about her friends being on her side, one participant was asked why she felt that was important. In her answer she reflected on how the experience of having friends on her side was helping her to learn to change her own behaviour within arguments:

“I don't always have to um, like fight my way out of things. Because I am really, really argumentative -- they say like, " Oh we need to go." And I would carry on the argument and carry it on and on and on. And even if they're walking away I will still walk up to them and still carry on. But I have kind of learned that I shouldn't do that. So, I haven't done it in a while now.” (P4. 173-179)
Discussion

This study identified six themes relating to what LAC valued in their friendships; “They’re like me”, which contained two subthemes of “We like to do the same things” and “We are the same”, “They keep my secrets”, which contained “I trust them” and “People finding out I’m in care”, “They spend time with me”, “They help me with my feelings”, “They understand me” and “They’re on my side”. Although most of the theme titles do not make reference to being in care, the themes had nuances specifically related to the young people’s experiences of being in care and how friendship has meaning within this context and more broadly. For example, participants feeling different to others because of their financial status either in care or before care, issues relating to disclosure of LAC status and fear of people’s reactions, time spent together being disrupted by placement moves, especially if a school move was also necessary, valuing emotional support relating to experiences like attending contact with parents and understanding the experiences of being in care. However, it is interesting to note that the general themes, with the exception of the sub-theme “People finding out I’m in care”, could be applied to most adolescents, whether they were LAC or living with their parents. The themes are similar to the values identified by researchers in earlier decades as important for any adolescent friendship suggesting it remains largely applicable to adolescent friendship in the modern age (Berndt et al., 1986; Bigelow & La Gaipa, 1980; Buhrmester et al., 1988; Byrne & Griffitt, 1973; Hartup & Stevens, 1999).

Research shows that common activities are important at all ages (Berndt, 1992; Bigelow, 1977; Bigelow & La Gaipa, 1980; Hall, 2012; Hartup, 1983; Hartup & Stevens, 1999; Savin-Williams & Berndt, 1990). This relates to the themes of both “We like to do the same things” and “They spend time with me”. There is an expectation, particularly of best friends, that they will spend more time together than with other people (Hartup & Stevens, 1997). Spending time on activities that both parties enjoy is rewarding (Byrne & Griffitt, 1973).
line with this, research has shown that as well as being similar in their interests, adolescents show similarity to their friends in their attitudes (Epstein, 1983; Gavin & Furman, 1996) and personalities (Duck, 1975). This is demonstrated within this study by the sub-theme “We are the same”. Hartup and Stevens (1997) suggested that this type of similarity is particularly important within adolescence. Similarity could be important within friendships because it provides validation of beliefs which is rewarding (Byrne & Griffitt, 1973; Golightly & Byrne, 1964), particularly at a time of multiple changes in adolescents’ lives (Erwin, 1998). It has also been suggested that adolescents become more similar to their friends over time (Kandel, 1978) and that conversations with friends about the self, opinions and other people can result in adolescents developing shared construct perceptions and self-schema (Deutsch & Mackesy, 1985). This suggests similarity in beliefs amongst friends can strengthen and contribute to the adolescents’ developing identity. The focus on similarity within this sample, may also reflect a fear of standing out or being different to other people. Emond (2014) found this was a strong theme amongst children in residential care, who were afraid of being stigmatised because of their care status. Focusing on similarities with friends may have helped reduce this anxiety, helping them identify with aspects of themselves unrelated to their care status. This may also explain why participants did not seem interested in having other friends who were in care – perhaps this was not an aspect of their identity that they wanted to focus on and having friends with this similarity would increase the focus on it.

The other themes identified by the participants; “They keep my secrets”, “They help me with my feelings”, “They understand me” and “They’re on my side”, appear to relate to the concept of intimacy, which is a key feature in most models of friendship from adolescence onwards (Berndt, 1992; Bigelow & La Gaipa, 1980; Hall, 2012), with Savin-Williams and Berndt (1990) describing intimacy and loyalty as the primary feature of adolescent friendship. Intimacy can include aspects such as being loyal (“They’re on my
side”), trustworthy ("They keep my secrets"), providing genuineness, acceptance and understanding ("They understand me") and emotional support ("They help me with my feelings"). This intimacy becomes particularly important during adolescence as by this time, young people are likely to disclose more to their friends than their parents (Furman & Buhrmester, 1992). With the potential for self-disclosure to be anxiety provoking, exposing or risky for young people, they particularly value confidentiality from friends (Bigelow & La Gaipa, 1980; Rawlins, 1992), a finding supported in this study. Bigelow (1977) suggested intimacy was more important to girls than boys. This was partly shown in this study, in which girls tended to focus on these themes more, with some boys saying they did not want to talk about their feelings. However, it was not clear cut as the boys still valued elements of understanding, emotional support, loyalty and confidentiality. It is possible that the patterns of intimacy for boys and men may have changed since the 1970s, when Bigelow’s research was conducted.

The themes expressed by the young people in this study could be considered as the rewards of friendship within a developmental affect model of interdependence and exchange (Kelley & Thibaut, 1978; Laursen, 1996; Lawler, 2001). If these values are important to the young people, experiencing them within friendships is likely to promote positive emotions and other rewards, such as validation, pleasant experiences, practical help and reduction of anxiety. These rewards are likely to reinforce the chances of young people continuing to maintain and invest in these friendships.

The overall impression from this group of LAC was that they had been able to form and maintain meaningful, positive friendships. The fact that the aspects of their friendships they value is similar to those valued by other young people is positive and demonstrates their success in doing so. The young people were mostly in stable long-term placements and presented as doing well within them. They may have seen their LAC experiences as part of the
array of stresses young people have to manage, especially given that they knew friends with different challenging life circumstances. These young people provide positive examples of how LAC can make meaningful friendships when they are provided with the right support and stability. However, it is also important to remain aware of the challenges they described, such as people finding out their LAC status against their will, a fear of negative reactions about this and disruptions to friendships due to placement, home and school moves. Even though the young people were doing well, they still presented with challenges identified by other researchers (e.g. Emond, 2014; Ridge & Millar, 2000; Rogers, 2017), but appeared to have navigated a way of managing, with friendship appearing to be a component in this process.

The age range in this study was in line with developmental models of friendship (Bigelow & La Gaipa, 1980; Selman, 1980). However, there are social, cognitive and emotional developmental differences between 11 and 16 year olds. It is not possible to comment on concrete age-related differences in LAC friendship within this small sample. However, the overall impression was that the values described were relevant across the age-spectrum. The main difference appeared to be the amount of control participants had over their friendships, with younger children more likely to play out on the street with friends or need foster carer support to maintain contact where this was not possible.

**Limitations of the study**

One of the main limitations of the study may be within the recruitment process. The aim of recruitment was to find a broad range of LAC. Asking social workers to identify LAC with at least one friend may have resulted in them trying to identify people who had the “best” friendships or with the fewest difficulties within this domain. Six out of seven participants were in stable placements. This means issues facing LAC who are doing less well may have been missed. It may also have been that LAC in less stable placements were invited by their social workers, but chose not to participate. It is therefore important not to assume that because these
LAC had formed successful, meaningful friendships similar to their non-LAC peers, that this would be the case for all LAC. In future research it may be helpful to ask social workers about their decision making processes in recruitment to help situate the sample.

Berndt (1992) points out that research into friendship typically focuses on either positive or negative elements, meaning that an overall picture of the complexities of friendship is not established. The research question for this study was about what young people value in their friendships, so inherently focused on aspects they perceived as positive. However, young people were also asked about conflict, allowing for the complexities of friendship to emerge. In this study, it was noteworthy that the conversations about conflict did not form meaningful themes for the young people, who generally appeared to acknowledge arguments with friends, but felt able to resolve them.

It is unclear whether saturation was achieved by the participant numbers. It is possible that given the relatively settled nature of the sample and their friendships, saturation was achieved as there were fewer perspectives, but it may be useful to collect similar data from more participants to ensure that no new themes emerge.

**Implications for practice**

Based on the young people interviewed for this study, it is apparent that it is possible for LAC to form and maintain positive friendships and that they value these highly. The particular elements of the friendships that they value relate to similarity, confidentiality, spending time together, emotional support, understanding and someone being on their side. These friendships have the potential to be rewarding to young people, supporting their wellbeing and a sense of identity. It is therefore important that LAC are asked about their friendship networks and how they are able to sustain engagement and/or develop new ones. Professionals working with LAC should recognise the unique importance of friendship in their lives, particularly if there is a risk
that this information is not prioritised due to a range of complex difficulties associated with the local authority meeting their needs.

It was interesting that contrary to Rogers (2017), participants predominantly were not interested in having friends who were in care. However, they did report that friends with other difficulties were able to offer a deeper level of understanding. It is possible that these difficulties and their own difficulties were seen as part of the range of challenges and complexities of family lives in 2018, given the pressures that parents and young people are under. Viewing their own difficulties as on a continuum with other young people may support them to feel similar and understood even though the difficulties are not the same to an observer. It may therefore be helpful to recognise that LAC can be supported by friends with a range of difficulties, whether that be through peer mentoring, accessing local services or practical support and encouragement to maintain these friendships if difficulties occur. It may be useful for “mixed-needs” groups to be set up within schools or community centres in which LAC and children with other difficulties can support each other and make friends who can offer understanding.

It may be helpful for social workers or foster carers to spend time talking with LAC about their fears of other young people finding out that they are in care. This study has demonstrated that disclosure is not always within the young person’s control and these possibilities could be explored with them in advance. For example, if a foster carer knows neighbourhood children, discussing with LAC when they move in that local children are likely to know their care status and talking about how they would like to address this issue. It could also be helpful to explore scenarios such as what they call foster carers in front of their peers, who and when they might want to disclose to and what their preferred outcomes would be.

Although these young people were mainly in stable placements, they talked about disruption to friendships when moving placement and home, but particularly when moving
school. Placement moves are not taken lightly and the Department for Education (2015) recommends everything possible is done to maintain current educational provision if placement moves occur, even if this means travelling long distances to school. They also acknowledge that for some, the disadvantages of the long journey may outweigh the benefits. Some of the participants in this study had experienced this and chosen to change school, despite losing contact with their friends. However, it would be important when discussing the child’s views on moving school, that social workers specifically talk about the potential impact on friendship as well as educational outcomes. LAC who move house, even those who move to a new home with the same foster family and school, as well as those who move school, may benefit from extra support to maintain friendships, including practical support to plan activities and travel to meet friends. This may be particularly important for younger children who may not have had to do this before.

In terms of policy influence, although NICE (2010) and Department for Education (2015) mention the importance of friends and suggest LAC are supported to maintain contact with them, there is very little information on how this should happen. Friendship is not one of the standard categories discussed at case reviews (Department for Education, 2015), and it only features indirectly in LAC health assessments (Department for Education and Department of Health, 2015). Although this is only one study and more research is needed before changing national policy, it demonstrates the importance of friendship to LAC. It may be helpful for these guidelines to offer more detail on how young people should be supported in these relationships. In order to keep this as a priority when children have complex needs, friendship could be added as a standing agenda item at case reviews.

Future research

It would be interesting to repeat this research with a wider range of LAC, particularly those who may not be so successful within their friendships. This would allow a deeper
understanding of the issues LAC encounter and what they value, even within difficult relationships. For those who have moved placement or school more frequently, it would be useful to learn how they make and maintain friendships in each new setting. It may also be interesting to complete the research with different age groups to see whether the expectations of friendships for LAC follow developmental models such as Bigelow and La Gaipa (1980). Wider research with more participants would also allow a fuller exploration of the values of friendships for boys and girls, which this study did not permit a full investigation into.

As this study primarily focused on the valued and rewarding aspects of friendship for LAC, it would be interesting to develop research looking at the costs of friendships for LAC and how they weigh up the costs and rewards, in line with Kelley and Thibaut’s (1978) interdependence theory. Understanding the full spectrum of how costs and rewards interact would provide a useful understanding of the friendship process for LAC.

If research is able to provide a fuller understanding of what LAC from a broad range of demographics and experiences value within their friendships, it could be that an intervention could be developed, either to support LAC directly with their friendships, or as an educational component in schools to help their peers offer the kind of friendship LAC most value.

Conclusion

This study interviewed LAC to develop an understanding of their friendships and what they valued within these relationships. Thematic analysis was used, resulting in six themes; “They’re like me”, which was split into “We like to do the same things” and “We are the same”, “They keep my secrets”, which was split into “I trust them” and “People finding out I’m in care”, “They spend time with me”, “They help me with my feelings”, “They understand me” and “They’re on my side”. Most of these themes linked with research into what adolescents generally value within their friendships (Berndt et al., 1986; Bigelow, 1977; Buhrmester et al., 1988; Byrne & Griffitt, 1973; Hartup & Stevens, 1999), suggesting that most
values are the same for these LAC. However, there were nuances around their experiences of
being in care, disclosure, placement and school moves and the understanding gained from
friends with difficult circumstances. It is recommended that professionals working with LAC
take an active approach to exploring and supporting them with their friendships, particularly
where these are impacted by being in care. The study was limited by focusing only on the
rewards of friendships and by the relative stability of the LAC who took part limiting it’s
applicability to wider groups. Further research is recommended to develop a fuller
understanding of the rewards and costs of friendship for a wider range of LAC, with a view to
developing an intervention that may support them in these relationships.

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Author Guidelines

The journal to which you are submitting your manuscript employs a plagiarism detection system. By submitting your manuscript to this journal you accept that your manuscript may be screened for plagiarism against previously published works.

3.1. Getting Started

1. GENERAL

Child & Family Social Work provides a forum where researchers, practitioners, policy-makers and managers in the field exchange knowledge, increase understanding and develop notions of good practice. In its promotion of research and practice, which is both disciplined and articulate, the Journal is dedicated to advancing the wellbeing and welfare of children and their families throughout the world.

Child & Family Social Work publishes original and distinguished contributions on matters of research, theory, policy and practice in the field of social work with children and their families. The Journal gives international definition to the discipline and practice of child and family social work.

Please read the instructions below carefully for details on the submission of manuscripts, the journal's requirements and standards as well as information concerning the procedure after a manuscript has been accepted for publication in Child & Family Social Work. Authors are encouraged to visit Author Services for further information on the preparation and submission of articles and figures.

2. ETHICAL GUIDELINES

Child & Family Social Work adheres to the below ethical guidelines for publication and research.
2.1. Authorship and Acknowledgements

Authorship: Authors submitting a paper do so on the understanding that the manuscript has been read and approved by all authors and that all authors agree to the submission of the manuscript to the Journal. ALL named authors must have made an active contribution to the conception and design and/or analysis and interpretation of the data and/or the drafting of the paper and ALL must have critically reviewed its content and have approved the final version submitted for publication. Participation solely in the acquisition of funding or the collection of data does not justify authorship.

Child & Family Social Work adheres to the definition of authorship set up by The International Committee of Medical Journal Editors (ICMJE). According to the ICMJE authorship criteria should be based on 1) substantial contributions to conception and design of, or acquisition of data or analysis and interpretation of data, 2) drafting the article or revising it critically for important intellectual content and 3) final approval of the version to be published. Authors should meet conditions 1, 2 and 3.

It is a requirement that all authors have been accredited as appropriate upon submission of the manuscript. Contributors who do not qualify as authors should be mentioned under Acknowledgements.

Acknowledgements: Under Acknowledgements please specify contributors to the article other than the authors accredited. Please also include specifications of the source of funding for the study and any potential conflict of interests if appropriate. Suppliers of materials should be named and their location (town, state/county, country) included.

2.2. Ethical Approvals

Experimental Subjects: experimentation involving human subjects will only be published if such research has been conducted in full accordance with ethical principles, including the World Medical Association Declaration of Helsinki (version 2002) and the additional
requirements, if any, of the country where the research has been carried out. Manuscripts must be accompanied by a statement that the experiments were undertaken with the understanding and written consent of each subject and according to the above mentioned principles. A statement regarding the fact that the study has been independently reviewed and approved by an ethical board should also be included. Editors reserve the right to reject papers if there are doubts as to whether appropriate procedures have been used.

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Authors who wish to appeal the decision on their submitted paper may do so by e-mailing the editor with a detailed explanation for why they find reasons to appeal the decision.

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4. SUBMISSION OF MANUSCRIPTS

Manuscripts should be submitted electronically via the online submission site http://mc.manuscriptcentral.com/cfsw. The use of an online submission and peer review site enables immediate distribution of manuscripts and consequentially speeds up the review process. It also allows authors to track the status of their own manuscripts.

Complete instructions for submitting a paper are available online and below.

4.1. Getting Started

Launch your web browser (supported browsers include Internet Explorer 6 or higher, Netscape 7.0, 7.1, or 7.2, Safari 1.2.4, or Firefox 1.0.4) and go to the journal's online Submission Site: http://mc.manuscriptcentral.com/cfsw.

Log-in or click the 'Create Account' option if you are a first-time user.
If you are creating a new account.

- After clicking on 'Create Account', enter your name and e-mail information and click 'Next'.

Your e-mail information is very important.

- Enter your institution and address information as appropriate, and then click 'Next.'

- Enter a user ID and password of your choice (we recommend using your e-mail address as your user ID), and then select your area of expertise. Click 'Finish'.

If you have an account, but have forgotten your log in details, go to “Password Help” on the journals online submission system http://mc.manuscriptcentral.com/cfsw and enter your e-mail address. The system will send you an automatic user ID and a new temporary password.

Log-in and select 'Author Center

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Click the 'Next' button on each screen to save your work and advance to the next screen.

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Review your submission (in HTML and PDF format) before sending to the Journal. Click the 'Submit' button when you are finished reviewing.

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Each page of the ScholarOne Manuscripts website has a ‘Get Help Now’ icon connecting directly to the online support system at http://mcv3support.custhelp.com. Telephone support is available 24 hours a day, 5 days a week through the US ScholarOne Support Office on: +1
434 817 2040, ext 167. If you do not have Internet access or cannot submit online, the Editorial Office can assist. Please contact Paula Doherty at CFSEditorialOffice@lancaster.ac.uk at the Editorial Office.

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Please note that any manuscripts uploaded as Word 2007 (.dcox) will be automatically rejected. Please save any .dcox file as .doc before uploading.

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All manuscripts submitted to Child & Family Social Work will be reviewed by two experts in the field. Child & Family Social Work uses double-blinded review. The names of the reviewers will thus not be disclosed to the author submitting a paper and the name(s) of the author(s) will not be disclosed to the reviewers.

To allow double-blinded review, please submit (upload) your main manuscript and title page.
as separate files.

Please upload:

Your manuscript without title page under the file designation 'main document'

Figure files under the file designation 'figures'

The title page, Acknowledgements and Conflict of Interest Statement where applicable, should be uploaded under the file designation 'title page'

All documents uploaded under the file designation 'title page' will not be viewable in the HTML and PDF format you are asked to review at the end of the submission process. The files viewable in the HTML and PDF format are the files available to the reviewer in the review process.

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You may suspend a submission at any phase before clicking the 'Submit' button and save it to submit later. The manuscript can then be located under 'Unsubmitted Manuscripts' and you can click on 'Continue Submission' to continue your submission when you choose to.

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After submission you will receive an e-mail to confirm receipt of your manuscript. If you do not receive the confirmation e-mail after 24 hours, please check your e-mail address carefully in the system. If the e-mail address is correct please contact your IT department. The error may be caused by spam filtering software on your e-mail server. Also, the e-mails should be received if the IT department adds our e-mail server (uranus.scholarone.com) to their whitelist.

4.8. Manuscript Status

You can access Manuscript Central any time to check your 'Author Center' for the status of your manuscript. The Journal will inform you by e-mail once a decision has been made.

4.9. Submission of Revised Manuscripts

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5. MANUSCRIPT TYPES ACCEPTED

Manuscripts should normally be a maximum of 7000 words, including abstract and references, although shorter papers will be welcomed. One copy of an abstract, not exceeding 200 words, should accompany the manuscript. The abstract should be followed by up to six keywords. The title page should display the title of the paper; names of the author(s); position and place of work; and the full postal address, telephone number and e-mail address of the author to whom correspondence should be addressed. All figures and tables should be referred to in the text and their appropriate positions indicated in the text. The use of footnotes should be avoided. Details of research methodology should be included in the manuscript where appropriate.

The Editors welcome the following scholarly papers:

Review Papers These will be actively encouraged. Prospective authors should initially discuss their proposals with the Editor.

Research Review Section A review of recent research in a particular area or report on research currently underway are welcomed in this section and should be sent direct to the Research Review Editor. These articles should be 3000 words in length and should provide an opportunity to consider the research in some detail.

Policy Digest Section This section publishes brief contributions (around 1000 words) on policy debates in different countries or short policy articles. Contributions are welcomed.

Special Issues From time to time the Editor may commission a special issue of the Journal which will take the form of a number of papers devoted to a particular theme.

6. MANUSCRIPT FORMAT AND STRUCTURE
6.1. Format

Language: The language of publication is English. Authors for whom English is a second language must have their manuscript professionally edited by an English speaking person before submission to make sure the English is of high quality. It is preferred that manuscripts are professionally edited. A list of independent suppliers of editing services can be found at http://authorservices.wiley.com/bauthor/english_language.asp. All services are paid for and arranged by the author, and use of one of these services does not guarantee acceptance or preference for publication.

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6.2. References

Harvard style must be used. In the text the names of authors should be cited followed by the date of publication, e.g. Adams & Boston (1993). Where there are three or more authors, the first author's name followed by et al. should be used in the text, e.g. Goldberg et al. (1994). The reference list should be prepared on a separate sheet with names listed in alphabetical order. The references should list authors' surnames and initials, date of publication, title of article, name of book or journal, volume number or edition, editors, publisher and place of publication. In the case of an article or book chapter, page numbers should be included routinely.

Examples of references


Empowerment in Child Protection (eds C. Cloke & M. Davies),


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Tables: These should only be used to clarify important points. Tables must, as far as possible, be self-explanatory. Tables must be typewritten on a separate sheet. No vertical rules should be used. Units should appear in parentheses in the column headings. All abbreviations should be defined in a footnote. The tables should be numbered consecutively with Arabic numerals.

Figures: All graphs, drawings and photographs are considered figures and should be numbered in sequence with Arabic numerals. Each figure should have a legend and all legends should be typed together on a separate sheet and numbered correspondingly.

All figures and artwork must be provided in electronic format. Please save vector graphics (e.g. line artwork) in Encapsulated Postscript Format (EPS) and bitmap files (e.g. halftones) or clinical or in vitro pictures in Tagged Image Format (TIFF). In the full-text online edition of
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The availability of Supporting Information should be indicated in the main manuscript by a paragraph, to appear after the References, headed 'Supporting Information' and providing titles of figures, tables, etc. In order to protect reviewer anonymity, material posted on the author’s website cannot be reviewed. The Supporting Information is an integral part of the article and will be reviewed accordingly.

7. AFTER ACCEPTANCE

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7.1. Proof Corrections

The corresponding author will receive an e-mail alert containing a link to a website. A working e-mail address must therefore be provided for the corresponding author. The proof can be downloaded as a PDF (portable document format) file from this site.
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Appendix B: Information Sheet for Social Workers and Managers

Understanding Looked After Children’s experiences of friendship.
Information for professionals

Introduction
My name is Christine May and I am a Trainee Clinical Psychologist at the University of Surrey. As part of my training to become a Clinical Psychologist, I am required to carry out some research. My research seeks to understand the friendships of young people who are in care. There is already research showing that Looked After Children can often find it difficult to make and maintain friendships due to their past experiences, behaviour and situational difficulties associated with being in care. There is also research showing that friendships are very important for young people and that support from friends can help improve outcomes including mental health, physical health and satisfaction with life.

My research aims to better understand what Looked After Children value in their friendships, how they talk about their friendships and what their friends do that they find helpful. I hope that this will help to improve understanding about the role that friendships play in Looked After Children’s lives and how friendships and peer support can be improved for Looked After Children.

What is involved for the young people?
I will meet with young people for an interview about friendship, including their current and past friendships and their ideal friendship network. I will be asking young people to represent these relationships on diagrams throughout the interview. Interviews will be audio recorded and I will take photos of the diagrams. The young people may find that some questions may make them feel upset because I will be asking about their experiences and feelings, which may have been difficult for them. However, it is also anticipated that they will talk about some positive friendships so that the interview will have a balance of pleasurable and perhaps distressing moments. At any time the young person can take a break or can stop the interview. I will also talk to them about who can offer them support and provide them with information about sources of further support after the interview finishes. The interviews will last around an hour and will be conducted at a time and location that is accessible to the young people, such as their school, the place where they live or social services offices. Interviews will be transcribed and all names and identifying details will be changed.

Everything the young people tell me will be confidential. This confidentiality would only be broken if the young person discloses something that suggests there is a risk of significant harm to themselves or someone else. In these circumstances I would follow the local safeguarding policy. All of the information will be anonymised so that those reading reports from the research will not know who has contributed to it and data will be stored securely in accordance with the Data Protection Act 1998. A transcription service may be used to type up the interviews. If this happens, the service will be required to sign a confidentiality agreement.
No young people will have to participate in the research, it is entirely voluntary and they will be able to withdraw from the research at any point until their data has been analysed without giving a reason.

Involvement from Social Services
I am asking professionals in Looked After Children’s Teams to help me to identify and recruit young people who may be appropriate for this study. Young people need to be between the ages of 11 and 16 and have been in care for at least the last 12 months. They should be attending mainstream school and not currently be involved in acrimonious court proceedings. They need to be currently classed as a Looked After Child and able to speak fluent English. Ideally, they should have at least one friendship.

If you know of any young people who may be suitable for the study, please discuss this with them, and with their carers or parents. I have attached information for both young people and the adults that are looking after them that should be provided to them. These are called “Understanding Looked After Children’s experiences of friendship - Information for parents and carers” and “Understanding Looked After Children’s experiences of friendship - Participant Information Sheet”.

Should any young people be interested in participating, please ask both the young person and their carer to complete the attached “Consent to share contact details” form. You will need to complete the end of this form identifying their legal status in care and the adults I will need to obtain consent from. For example, if they are section 20 I will need consent from their parents. The form should then be emailed to me at c.e.may@surrey.ac.uk. I will then contact them to discuss the research further and obtain fully informed consent. Once consent is obtained from everyone I will contact the young person to arrange an interview.

What happens when the research study stops?
I will be writing up the project and submitting it to the University of Surrey as part of my training and will also aim to disseminate further through publication in peer reviewed articles. I will send Looked After Children’s teams who have been involved a report about my findings and any recommendations for continuing good practice and making improvements to support the friendships of Looked After Children. All young people’s contributions to the research will be anonymised and it will not be possible to identify them from any reports.

What if there is a problem?
If you have any questions or concerns about the research, you can either contact myself or one of supervisors. Their names are Mary John and Kate Gleeson and their contact details can be found below. You can also contact the Head of School of Psychology, Professor Derek Moore on d.moore@surrey.ac.uk
Who is organising and funding the research?
This research is being organised and funded by University of Surrey as part of my training in Clinical Psychology.

Who has reviewed the project?
The study has been reviewed and received a Favourable Ethical Opinion (FEO) from the Faculty of Health and Medical Sciences Ethics Committee, at the University of Surrey.

Thank you for taking the time to read this Information Sheet.

Christine May
Trainee Clinical Psychologist

Address:
c/o Mary John
Faculty of Health and Medical Sciences
University of Surrey
Guildford
Surrey
GU2 7XH

Email: c.e.may@surrey.ac.uk

Supervised by Mary John (Email: m.john@surrey.ac.uk Tel: 01483 689267)

and Kate Gleeson (Email: kate.gleeson@surrey.ac.uk Tel: 01483 689815)
Appendix C: Information Sheet for Participants

Understanding Looked After Children’s experiences of friendship.

Participant Information Sheet

Introduction
My name is Christine May and I am a Trainee Clinical Psychologist at the University of Surrey. As part of my training to become a Clinical Psychologist, I am required to carry out some research. I would like to invite you to take part in my research project. Before you decide, you need to understand why the research is being done and what it will involve for you. Please take the time to read the following information carefully. Talk to others about the study if you wish.

What is the purpose of the study?
My research seeks to understand the friendships of young people who are in care. There is already research showing that Looked After Children can sometimes find it difficult to make and maintain friendships and that this is can be made more difficult when they move placements or the adults in their lives are not able to support them to keep their friendships.

There is also research showing that friendships are very important for young people and that support from friends can help improve a variety of areas of life for them. My research aims to understand what Looked After Children think is important in their friendships, how they talk about their friendships and what their friends do that they like or find helpful. I hope that this will help us to understand more about what we can do to help Looked After Children benefit from the support of their peers.

Why have I been invited to take part in the study?
Because you have been identified by your social worker or another professional working with you as someone who is a Looked After Child at the current time and is between the ages of 11 and 16.

Do I have to take part?
No, you do not have to participate. There will be no negative consequences in terms of your care or education if you decide not to participate. You can choose to stop and withdraw at any stage of the interview process. You can ask for your data to be withdrawn from the study at any point up until it has been analysed. You do not need to give a reason to withdraw.

What will my involvement require?
If you choose to take part I will arrange a time to meet with you to discuss what you think and feel about your friendships. We will talk about the friends you have now, friends you may
have had in the past and the kind of friends you would like to have. During the discussion, you will also be asked to draw or create a diagram of your friendships at different times.

This discussion will take place somewhere that is convenient to you, such as at school, the place where you live or in social services offices. It should take around one hour. I will be recording our discussion using an audio recorder and I will take photos of the diagrams you create. I will transcribe the interviews and then delete the recording. At this point I will change your name to protect your identity. You can decide on the name if you would like.

**What will I have to do?**
If you would like to take part or to talk to me more about the research, please let your social worker or whoever told you about it know. They will give you a form to sign to say that you are happy for them to pass on your contact details to me. I will also need to speak to your parents or carers about the research to make sure they are happy for you to take part. I will talk to you about the research and ask you and the relevant adults to complete a consent form and then I will arrange to meet with you for the interview.

**What are the possible disadvantages or risks of taking part?**
There is a chance that you may find it upsetting to talk about some of your experiences. You do not have to answer any questions you do not want to, or tell me anything you don’t feel comfortable with. If you become upset during the interview, I will try to support you with this and we can stop at any time you want. After the interview I will make sure that you are able to access support from other people if you need it.

**What are the possible benefits of taking part?**
You may not benefit directly but I hope that your participation in this research will be interesting for you and will let you get your voice heard about your friendships. I also hope that the research will lead to better understanding and improved support for Looked After Children in the future and you would be an important part of this.

**What happens when the research study stops?**
I will be writing up the project and submitting it to the University of Surrey as part of my training. I will also write a summary report for the Local Authority and submit my research for publication in journals. I can send you a summary of what I find if you would like. Any contributions you have made to the research will be anonymous.

**What if there is a problem?**
If you have any complaints or concerns about the way you are dealt with during the study, you can either contact myself or one of supervisors. Their names are Mary John and Kate Gleeson and their contact details can be found below. You can also contact the Head of School of Psychology, Professor Derek Moore on d.moore@surrey.ac.uk
**Will my taking part in the study be kept confidential?**
Yes. Everything you say will be kept confidential. The only time I would break this confidentiality is if you tell me something that suggests there is a significant risk of harm to yourself or someone else, in which case I will need to pass this information on to your social worker. I would usually discuss this with you first. A transcription service may be used to type up the interviews. If this happens, the service will be required to sign a confidentiality agreement. All of the information will be anonymised so that those reading reports from the research will not know who has contributed to it.

The transcripts of the interviews will be stored securely in accordance with the Data Protection Act 1998 at the University of Surrey

**Who has reviewed the project?**
The study has been reviewed and received a Favourable Ethical Opinion (FEO) from the Faculty of Health and Medical Sciences Ethics Committee, at the University of Surrey.

**Thank you for taking the time to read this Information Sheet.**

**Christine May**  
Trainee Clinical Psychologist

Address:  
c/o Mary John  
Faculty of Health and Medical Sciences  
University of Surrey  
Guildford  
Surrey  
GU2 7XH

Email: c.e.may@surrey.ac.uk

Supervised by Mary John (Email: m.john@surrey.ac.uk Tel: 01483 689267)  
and Kate Gleeson (Email: kate.gleeson@surrey.ac.uk Tel: 01483 689815)
Appendix D: Information Sheet for Parents and Carers

Introduction
My name is Christine May and I am a Trainee Clinical Psychologist at the University of Surrey. As part of my training to become a Clinical Psychologist, I am required to carry out some research. I would like to invite your child / the child you are responsible for to take part in my research project. Before you decide if you are happy for them to take part, you need to understand why the research is being done and what it will involve. Please take the time to read the following information carefully. Talk to others about the study if you wish.

What is the purpose of the study?
My research seeks to understand the friendships of young people who are in care. There is already research showing that Looked After Children can sometimes find it difficult to make and maintain friendships and that this is can be made more difficult when they move placements or the adults in their lives are not able to support them to keep their friendships.

There is also research showing that friendships are very important for young people and that support from friends can help improve a range of outcomes for them, including mental health, physical health and satisfaction with life. My research aims to better understand what Looked After Children think is important in their friendships, how they talk about their friendships and what their friends do that they like or find helpful. I hope that this will help us to understand more about the role friendships play in Looked After Children’s lives and what we can do to help Looked After Children benefit more from the support of their peers.

Why has my child / the child I am responsible for been invited to take part in the study?
Because they have been identified by a social worker or another professional working with them as someone who is a Looked After Child at the current time and is between the ages of 11 and 16.

Do they have to take part?
No, your child/ the child you are responsible for does not have to take part. There will be no adverse consequences in terms of their care or education if they do not participate. Participation will not happen unless you, their social worker and the child all agree for them to take part. They can also withdraw from the interview at any point and can ask for their data to be removed from the study up until the point where it has been analysed.

What will their involvement require?
They will be asked to meet with me for a discussion about their friendships. We will talk about the friends they have now, friends they may have had in the past and the kind of friends they
would like to have. During the discussion, they will also be asked to draw or create a diagram of their friendships at different times.

This discussion will take place somewhere that is convenient to your child/ the child you are responsible for, such as at school, where they live or in social services offices. It should take around one hour. I will be recording our discussion using an audio recorder and I will take photos of the diagrams created. I will transcribe these interviews, at which point all names will be changed to protect anonymity.

**What will I have to do?**
If you are willing for your child / the child you are responsible for to take part, please let your social worker or whoever told you about this research know. They will give you a form to sign to say that you are happy for me to contact you about the study. I will then contact you to discuss the research further. Once your child / the child you are responsible for and all relevant adults have consented, I will contact the young person to arrange to meet with them.

**What are the possible disadvantages or risks of taking part?**
There is a chance that your child / the child you are responsible for may find it upsetting to talk about some of their experiences. However, it is also anticipated that they will talk about some positive friendships so that the interview will have a balance of pleasurable and perhaps distressing moments. They do not have to answer any questions they do not want to, or tell me anything they don’t feel comfortable with. At any time they can take a break or can stop the interview. I will also talk to them about who can offer them support and provide them with information about sources of further support after the interview finishes.

**What are the possible benefits of taking part?**
Your child / the child you are responsible may not benefit directly but I hope that their participation in this research will be interesting for them and will let them get their voice heard about friendships. I also hope that the research will lead to a better understanding of the role friendships play in the lives of Looked After Children and how we can improve support for Looked After Children in the future. They would be an important part of this.

**What happens when the research study stops?**
I will be writing up the project and submitting it to the University of Surrey as part of my training. I will also write a summary report for the Local Authority and will submit my research for publication in journals. I can send you a summary of what I find if you would like. Any contributions your child / the child you are responsible for makes to the research will be anonymous.
What if there is a problem?
If you have any questions or concerns about the research, you can either contact myself or one of supervisors. Their names are Mary John and Kate Gleeson and their contact details can be found below. You can also contact the Head of School of Psychology, Professor Derek Moore on d.moore@surrey.ac.uk

Will taking part in the study be kept confidential?
Yes. Everything your child / the child you are responsible for will be kept confidential. The only time I would break this confidentiality is if they disclose something that suggests there is a significant risk of harm to themselves or someone else. In this circumstance I would follow the local safeguarding policy. Breaking confidentiality in this way would usually be discussed with them first. A transcription service may be used to type up the interviews. If this happens, the service will be required to sign a confidentiality agreement. All of the information will be anonymised so that those reading reports from the research will not know who has contributed to it.

The transcripts of the interviews will be stored securely in accordance with the Data Protection Act 1998 at the University of Surrey.

Who is organising and funding the research?
This research is being organised and funded by University of Surrey as part of my training in Clinical Psychology. It has been reviewed and received a Favourable Ethical Opinion (FEO) from the Faculty of Health and Medical Sciences Ethics Committee, at the University of Surrey.

Thank you for taking the time to read this Information Sheet.

Christine May
Trainee Clinical Psychologist

Address:
c/o Mary John
Faculty of Health and Medical Sciences
University of Surrey
Guildford
Surrey
GU2 7XH

Email: c.e.may@surrey.ac.uk

Supervised by Mary John (Email: m.john@surrey.ac.uk Tel: 01483 689267) and Kate Gleeson (Email: kate.gleeson@surrey.ac.uk Tel: 01483 689815)
Appendix E: Consent to Share Contact Details Form

Consent to share contact details

I have talked to .................................................................(social worker or other professional’s name) about the research into Looked After Children’s friendships. I am interested in finding out more about taking part.

I give consent for the following contact details to be given to Christine May, Trainee Clinical Psychologist, so that she can contact me to talk more about this and arrange an interview if I still want to take part.

My name: .....................................................................................................................

My phone number: ......................................................................................................

My email address: .......................................................................................................  

I would prefer to be contacted by (please circle):  Email / Phone

I understand that Christine will also need to talk to relevant adults about the research before I can take part and that they will also need to consent to me taking part. This may include my social worker, parents and current carers. I have talked to my social worker about this and am happy for Christine to discuss this with them.

My contact details will only be used for the purpose of discussing the research and will not be given to anyone else.

Signed (young person)

........................................................................................................................................

Date

........................................................................................................................................

For Carers:

I understand that my child / the child I am responsible for may be interested in taking part in this research. I give consent for the following contact details to be given to Christine May, so that she can contact me to talk more about it and arrange an interview with my child / the child I am responsible for.

Name..................................................................................................................................

Phone Number....................................................................................................................

Email address....................................................................................................................

I would prefer to be contacted by (please circle): Email / Phone

Signed (Parent / Carer) .................................................................................................

For social worker to complete:

Legal Status in Care:

Relevant adults that will need to consent to young person participating:
Appendix F: Consent Form for Adults with Parental Responsibility

Consent Form – Parents / Carers / Social Workers

Understanding Looked After Children’s Experience of Friendship

- I hereby give permission for the young person to take part in the study investigating Looked After Children’s experience of friendship.

- I have read and understood the Information Sheet provided. I have been given a full explanation by the investigator of the nature, purpose, location and likely duration of the study, and of what the young person will be expected to do. I have been advised about any disadvantages/risks/discomfort which may result. I have been given the opportunity to ask questions on all aspects of the study and have understood the advice and information given as a result.

- I agree for the young person’s data to be used for this study. I understand that this will include the interview being audio recorded, diagrams being photographed and anonymous quotations being used in reports.

- I understand that a transcription service may be used to type the interviews and that they will sign a confidentiality agreement.

- I understand that all project data will be held for at least 6 years and all research data for at least 10 years in accordance with University policy and that personal data is held and processed in the strictest confidence, and in accordance with the Data Protection Act (1998).

- I understand that the young person is in no way required to take part in this study. I am free to withdraw the young person from participating in the interview at any time without needing to justify my decision, without prejudice and without my legal rights being affected. I am free to withdraw the young person’s data from the study until the point where it has been analysed. Following this request all data collected from the young person will be destroyed.

Name of young person (BLOCK CAPITALS) ......................................................

Name of person providing consent (BLOCK CAPITALS) ......................................................

Role of person providing consent (e.g. parent, carer, social worker) .................................

Signed ......................................................

Date ......................................................
Appendix G: Consent Form for Looked After Children

Participant Consent Form
Understanding Looked After Children’s Experience of Friendship

- I agree to take part in the study about Looked After Children’s experience of friendship.
- I have read and understood the Information Sheet and understand what will be expected of me. I have been advised about any disadvantages/risks/discomfort which may result. I have been given a chance to ask questions and have understood the advice and information given as a result.
- I agree to inform the researcher immediately if I have any concerns or feel upset or distressed during the interview.
- I understand that if I say anything that causes the researcher to worry about my safety or the safety of someone else, they will speak to their supervisor and my social worker.
- I agree for my data to be used for this study. I understand that this will include the interview being audio recorded, diagrams being photographed and anonymous quotations being used in reports.
- I understand that a transcription service may be used to type the interviews and that they will sign a confidentiality agreement.
- I understand that all project data will be held for at least 6 years and all research data for at least 10 years in accordance with University policy and that personal data is held and processed in the strictest confidence, and in accordance with the Data Protection Act (1998).
- I understand that I am not required to take part in this study. I am free to withdraw from the interview at any time without needing to justify my decision. I am free to withdraw my data from the study until the point where it has been analysed.

Name of participant (BLOCK CAPITALS) ......................................................
Signed .............................................................................................
Date ..............................................................................................
Appendix H: Interview Schedule

The interview will have four main sections; current friendships, past friendships, ideal friendships and general friendship. For each of the first three, participants will be asked to place fuzzy felt pieces on a diagram like the one shown below. The researcher will explain that the pieces should represent their friends and that the participant should place pieces representing closer friends e.g. “best friends”, closest to the centre, and those representing friends they are less close to e.g. good friends and acquaintances, further from the centre.

The exact questions asked will be dependent on the number and type of friendships the child reports as well as what they go on to say about them. The sociogram will be used in a “per-alter” way as described by Hogan et al. (2007) to explore each relationship in turn. Where children report a small number of friendships, the researcher will ask about each, allowing the
child to choose the order they are discussed. If too many are reported to discuss them all in
detail, the researcher will ask the child which ones they think it would be helpful to talk about.
Some friendships could be discussed as groups if this makes sense to the child. At least one
friendship from each level of the sociogram will be discussed.
The below can be used as prompts:

**Current friendships**

How old are they?
How do you know this person?
How long have you known them?
Would you describe them as a friend?
How did you first make friends with this person?
Why did you choose to be friends with them?
What do you like about them?
What do you not like about them? Do they do/ talk about things you don’t like?
What do you do together? What do you want to do?
What do you talk about when you are together?
What do you have in common?
What’s different between you?
Are they friends with any of the other people on the diagram?
Do you know if this person is LAC?
Do they know that you are a LAC? If yes, how do they respond to that?
Do they do anything that makes you feel good / happy?
Do they do anything that makes you feel bad?
Do you ever argue with them? How do you resolve it if you do?

**Past friendships**

Ask about changes – what happened – changes in distances, new friends, old friends who are
no longer friends etc.

**Ideal friendships**

Ask about any changes – think about numbers of friends, distances or specific changes.
What would your perfect friend be like?
What would they do?
How would they make you feel?
What would you do together?
What would you talk about?

**General questions about friendship**

General questions about friendship will be asked if they are not covered during earlier discussions using concrete examples of friendship. For example:

How do you know if someone is your friend?

Who do you go to if you need support or help with something?

What is the difference between someone you call a friend and someone you know but don’t call a friend?

Do you have friends that you only know online? How are they the same or different to friends you know in real life?

Could your friends do anything different that you would find helpful or supportive?

Do you have other friends who are LAC? How are those friendships the same or different to your other friendships?

Do you think your friendships are any different to any other young persons?

What makes you a good friend?

**Interview for children without friends**

Still ask: past friendships, ideal friendships, general questions.

Are there things you find difficult about making or keeping friends?

What do you notice about peers’ relationships with each other?
Appendix I: Completed Sociogram
Appendix J: Ethical Approval

Faculty of Health and Medical Sciences
Ethics Committee

Chair’s Action

Proposal Ref: 1250-PSY-16

Name of Student/Trainee: CHRISTINE MAY

Title of Project: Understanding Looked After Children’s experience of friendship

Supervisors: Mary John, Dr Kate Gleeson

Date of submission: 23rd December 2016

Date of confirmation email: 02nd May 2017

The above Research Project has been submitted to the Faculty of Health and Medical Sciences Ethics Committee and has received a favourable ethical opinion with minor conditions. Confirmation has been received that the conditions stipulated after ethical review have now been addressed and compliance with these conditions have been documented.

The final list of revised documents reviewed by the Committee is as follows:

Ethics Application Form
Detailed Protocol for the project
Participant Information sheets
Consent Form Flow Chart
Risk Assessment (If appropriate)
Insurance Documentation (If appropriate)

All documentation from this project should be retained by the student/trainee in case they are notified and asked to submit their dissertation for an audit.

Signed and Dated: _02/05/2017________________

Professor Bertram Opitz
Co-Chair, Ethics Committee

Please note: If there are any significant changes to your proposal which require further scrutiny, please contact the Faculty of Health and Medical Sciences Ethics Committee before proceeding with your Project.
Appendix K: Analysis Process

Coded extracts from interviews two and four.

Interview 2

254 Interviewee: So I like -- I to -- I eventually told her and eventually told he but already knew
255 she said, "I already knew." So-

256 Interviewer: How was-

257 Interviewee: - like I could trust her and saying that I'm in care but somehow, when I told her and I felt comfortable, um, we got to that stage where I wanted to, kinda tell everyone because, not like everyone but my -- some of my other friends because it felt like -- like, it felt like I was lying to them but then I wasn't lying to them.

262 Interviewer: Mm-hmm.

264 Interviewee: So I wanted them to know but I didn't want them to feel sorry for me because when I first told them, most of them felt sorry for me and I didn't really want that.

267 Interviewer: Okay. And if -- I dunno, if someone could have the best reaction possible. If you were gonna tell them that you're in care. How do you really want them to respond?

272 Interviewee: Well, if I was to tell someone, if I went up to someone and said I need to tell you something, I'm in care, I wouldn't -- I would just, I would've just wanted them to stand there, nod their head and be like, Okay. I'm just not gonna treat you any differently.
Interviewee: When I've like just had contact with my Mum and I come home and I didn't want to go home. And I just wanted to stay with my mum and then I get angry. So I play out and then I get angry because people are like, "why are you getting angry? Why are you crying? You've been crying?" And Ella knows why I've been crying. And she just takes me into this corner and asks what's wrong. And I tell her, and then she says, "it's all right." And it hugs me and we go over and start playing again.

Interviewer: Awe well. That's nice. So she understands that when you've seen your mum you're going to be upset 'cause you wanted to stay with her longer. Okay. Is there anything else that she does that helps you?

Interviewee: Um. She does like uh, she does take like -- she does stick up for me sometimes but when I'm an argument, she knows I get really defensive. And then I end up getting -- being like the wrong person gets shouted at. And then people just like get like really annoyed. And then she goes up to me -- next to me, " Why are you picking on her?" And they go, "'Cause she's being mean." And then she goes, " Well it's not her fault." And then they go, " Whose fault is it then?" And she goes, " It's mine." And then she like sticks up for me and stuff. And then they walk away and I go thanks.
Interviewer: Okay. So, is it important to you to have somebody sticking up for you in arguments and things?

Interviewee: Yeah.

Interviewer: Okay, what's so good about that?

Interviewee: Um. The -- I don't always have um, like fight my way out. Because I am really, really argumentative -- they say like, "Oh we need to go." And I would carry on the argument and carry it on and on and on. And even if they're walking away I will still walk up to them and still carry on. But I have kind of learned that I shouldn't do that. So, I haven't done it in a while now.

Interviewer: Okay. And does Ella help you to stop doing that so much?

Interviewee: Yeah.

Interviewer: Okay. And what else do you like about her?

Interviewee: Um. Uh. That she doesn't always just choose me, she chooses everyone.

Interviewer: What do you mean by that?

Interviewee: Like-like she doesn't always play with me. She just goes, "I played with you yesterday, I'm gonna play with these guys now." And I said, "Okay, that's fine."
**Coding List**

Humour
Shared interests
Understanding
Time together
Trust
Secrets
Not needing feelings talk
Arguments
Sticking up for
Sibling separation
Emotional support
Benefits or improvements of being LAC
Well behaved / good influence
Similarity
Fears of disclosure
Always there
Helping
How people find out
Getting adult support
Changing school
Rules for LAC
Friends understanding of LAC
Money
LAC behaviour
Bullying
Consistency
Feeling wanted
### Quotations collected for code “Time together”

<table>
<thead>
<tr>
<th>Interview</th>
<th>Line</th>
<th>Quotation</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>527</td>
<td>I don't see him as much, so, I don't feel like I have this stronger kind of friendship with him. Like, for example, with these guys, I'm always with them, always talking and stuff and we're, like, constantly having fun and stuff. But Steve, although, when he's there, it's brilliant and I wish he was always there. It's kind of one of those, he has, like, other friends, as well. Like, if you were to ask him, he'd have a circle with me and then he would probably gravitate towards them.</td>
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<td>1416</td>
<td>with Jamie it took like a kind of year for me to start. And then with Alex and Ben, it was kind of an almost instant thing but that's because like they were quite nice and they tend to be around you more and stuff like that.</td>
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<tr>
<td>2</td>
<td>170</td>
<td><strong>Interviewee:</strong> We have sleepovers, I literally spend most of my weekends and after school with her. Any of my free time I basically just spend with her, to be honest.</td>
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<td>421</td>
<td><strong>Interviewee:</strong> Sometimes [foster carer name] said it's cause we spend too much time together that we get kind of bored of each other.</td>
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<td>564</td>
<td><strong>Interviewee:</strong> I think the only reason we don't argue is because we're like, we don't really hang around with each other.</td>
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<td>687</td>
<td>Uh, we always hang around with each other at break time, lunch times and we're all at -- we're in all of the same lessons but tutor and maths and ICT and tech. So me and Amy are in all the same lessons but tutor and maths. <strong>Interviewer:</strong> That's good, okay. So you spend lots of time with her? <strong>Interviewee:</strong> Lots, yeah.</td>
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<td>781</td>
<td>Like me and Amy were like that and then Emma, cause she was in all of our classes and stuff. So she kind of like joined us and now she's just like there. You know what I mean?</td>
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<td>3</td>
<td>59</td>
<td><strong>Interviewee:</strong> She's like my best friend and we do like everything together. We're like soul mates? Whatever they're called.</td>
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<td></td>
<td>370</td>
<td>And it became me, Violet, Alice. And other than that we just starting hanging around with each other. We became really close. And we ended up having sleepovers, and I stayed around their house two nights in a row. And we're like, &quot;Whoa this is getting a bit too much.&quot; And then we're like, &quot;We don't care, that's what friends are.&quot; We're like besties. <strong>Interviewer:</strong> Okay. So do the three of you always hang out together or do you see each other separately? <strong>Interviewee:</strong> Together. We do everything. We're like-- we know we're all annoying, but we can't get enough of each other, you know what I mean?</td>
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<td></td>
<td>545</td>
<td>I used to spend loads of time with Josh 'cause he used to be my old next neighbour and he was in my year at school but he used to be really weird 'cause I went out with him for like ages. And he used to be...</td>
</tr>
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</table>
my next door neighbour. When I was literally at my old foster carers, it used to be my house and then his house is right there. We used to do everything.

**Interviewer:** Okay.

**Interviewee:** So we were like pretty close.

| 724 | **Interviewee:** She’s like, she’s in all of my classes, and we like became really best friends and we like do everything together now. |

| 4 | 193 | I've joined their little group thing I-I'm always playing with them every day. |

| 1005 | **Interviewer:** What’s changed? Why have you become less close to them?  
**Interviewee:** Um, because I've moved, and I don't like, I can't play out with them now,-  
**Interviewer:** Okay.  
**Interviewee:** -and I can't do things now that I could play just, like, last year and stuff like that.  
**Interviewer:** So you can't just pop out to see them, you have to-  
**Interviewee:** Yeah, I have to actually, like, ask people to go round their house or like have sleepover and stuff, |

| 5 | 972 | **Talking about perfect friend:**  
**Interviewee:** I think that like we would be with each other all the time. We would just like-- I feel I would spend more time with them than I would with like my family. |

| 6 | 452 | **Interviewer:** And do you think that these closest ones are the closest just because you get to see them?  
**Interviewee:** Yeah.  
**Interviewer:** And- or is that anything else that's making them feel closest?  
**Interviewee:** Get to see them.  
**Interviewer:** Just get to see them.  
**Interviewee:** Yeah. |

| 819 | **Talking about how you know someone is a friend:**  
**Interviewee:** A friend, they would like always, they like ask you to meet up with you, and then they’re like -- they do that and if they don’t they just like won't come meet when they said come meet. |

| 7 | 65 | **Interviewee:** Yeah. Um, these three are there obviously at school.  
**Interviewer:** Okay.  
**Interviewee:** And we spend a lot of time together. |

| 1056 | **Interviewer:** Okay. How do you know if somebody is your friend rather than someone you know?  
**Interviewee:** Spend less time. |
Theme information for “They help me with my feelings”.

Codes included: Emotional support, Not needing feelings talk, Always there, Getting adult support.

- Some young people said they did not need to talk about their feelings with friends – either because they are naturally happier with them or just generally don’t need to talk about them.
- Importance of the way that friends support them
- Availability and nature of always being there
- Friends helping LAC to access support from adults e.g. foster carers, teachers

<p>| They help me with my feelings                                                                 |
|-----------------------------------------------|-----------------------------------------------|-----------------------------------------------|</p>
<table>
<thead>
<tr>
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<th>Line</th>
<th>Quotation</th>
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<tr>
<td>1</td>
<td>264</td>
<td><strong>Interviewee</strong>: Uh, no. I feel like I can talk to them about a few things, well, a lot of things but I just-- I don’t really tend to talk cause I don’t really need to. <strong>Interviewer</strong>: Okay. So, do-do you mean you don’t talk about kind of emotional type stuff cause you don’t need to or--? <strong>Interviewee</strong>: Uh, yeah, I don’t really-- I- of course, I feel emotion and stuff but you don’t, like-- I kinda forget about it when I’m there, so, it’s pointless. And I don’t really need to cause it's nothing that important, so, I kind of-- Yeah, it's, like, a list of things to do and, like, emotion talking’s, like really far on the bottom-so I never get to it, so--</td>
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<td>435</td>
<td></td>
<td><strong>Interviewer</strong>: I don’t know. So, I’m thinking they might do something that you find really good if you’re feeling rubbish or it might be that they just make your day somehow or- <strong>Interviewee</strong>: No, it’s the laughing again cause, like, we just all make each other laugh and then, cause we are laughing about things, we’re all like, happy, like, for example, when you smile, it's really hard not to actually being enjoying yourself, so--</td>
</tr>
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<td>1336</td>
<td></td>
<td><strong>Interviewee</strong>: I uh, yeah. I feel like I talk -- I think I talk to my friends more about emotional kind of things. And yeah, I think-I think I’d just talk to my friends about all of it really. To be honest, but yeah.</td>
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<tr>
<td>2</td>
<td>162</td>
<td>Every time I have a squabble with people. She's like always there to like comfort me and stuff.</td>
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<tr>
<td>355</td>
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<td>She, she makes me always feel happy to be honest but she sometimes, she does things in particular like, um, gets when I'm upset. She knows who to get like 'cause, um, I have my sister goes to my school, so she knows who to get and like -- or like she knows how to like sort things out if I don't want anyone. She knows that kind of -- she knows what to say to me if you know what I mean. <strong>Interviewer</strong>: How did she get to know what to say to you? <strong>Interviewee</strong>: Not very sure. I just -- I don’t know to be honest. <strong>Interviewer</strong>: Okay. <strong>Interviewee</strong>: She just says the right things that makes me happy.</td>
</tr>
</tbody>
</table>
She's just kind and she, she always there to talk to if I need anyone. She's always helpful.

I can always talk to her if I feel like I'm down or if I feel like I just wanna scream or something, I know I can talk to her.

Anyways, this would be Florence, who's like my other best friend and she always gets left out and I'm always there for her.

She's like, my best friend and we do like everything together, and she's always like there for me when I have arguments with people and when, I'm like lonely, or when she's bored, first person she'll ask is me to speak to her, or if she wants someone to meet up with her, she'll always ask me.

Interviewer: And how does she react if you talk about being in care?
Interviewee: She's like-- she- she knows, it's more that her mum knows too because I can speak to her mum.

Talking about friends reaction when she used to argue with previous foster carer:

Interviewee: They like, calm me down and tell me not to like, get all stressed out about it. I felt a bit proud.
Interviewer: How did they do that?
Interviewee: I don't know. They can talk sense into me probably.

Um, like every time I'm upset, they're always there and they like come over to me and speak to me which I think is nice.

Or like when I'm upset, they're like, "Go and tell the teacher go and tell the teacher." They force me to go and tell the teacher, like force me to tell like adults what's going on.

Interviewer: Okay. Is that different to what you would do if they weren't there?
Interviewee: Yeah, pretty much.
Interviewer: Okay. Why- Why do you think that you wouldn't have told an adult without them?
Interviewee: 'Cause I can't be able to do it as much.
Interviewer: You'll be able to. What do you mean?
Interviewee: Like I wouldn't be able to like...do it on my own. It's a little bit weird.

Interviewer: A bit weird.
Interviewee: I don't like doing things on my own, I have to have someone there to like help me. Otherwise I’ll say something wrong.
Interviewer: What do you think you’d say wrong?
Interviewee: I don’t know.
Interviewer: Okay, but they help you to feel more confident to do that?
Interviewee: Mm-hmm...
Interviewer: And when they’re there, do you feel okay to tell the adults?
Interviewee: Yeah.

she doesn’t do like -- she doesn’t say what Ella does, she doesn’t say stuff like Ella does.
Interviewer: What does Ella say?
Interviewee: She says like -- she doesn't calm me. She does like -- Like when I'm angry she-just like doesn't do anything about it. She just goes, "Are you all right?" And I say, “Yeah” and then she goes "Okay." And then I’m like “okay”.
Interviewer: And what does Amber do if you're angry?
Interviewee: Um. She goes, kinda like, sometimes she comes with Ella but she doesn't do anything she just stands there and like watches me. When Ella’s saying like stuff which she does. And then I-- And then she goes like, "Are you all right?" And then I go. "Yeah." And then she goes, "Okay." Are you gonna play now? And I said, "Yes." And she goes off and plays.
Interviewer: When you’re angry about things. What's the most helpful thing anyone can do?
Interviewee: Um.
Interviewer: Any of your friends?
Interviewee: Probably say there's nothing to worry about and it's all just a joke or it's all just a lie. And I get really normal again, not angry and disappointed.
Interviewer: What about when you’re angry when you’ve just come home from contact. What's the best thing they can do then?
Interviewee: Just say, "You'll see her again and it’s all okay." And she probably doing the same thing as you. And you have nothing to worry about.
Interviewer: So kind of reassuring you and telling you things are going to be all right?
Interviewee: Yeah.

668 Interviewer: Okay. That's good. How does she react when you get angry?
Interviewee: Um, she just, like, tries to calm me down. Because she knows that when I get angry, I get angry. And no one can, like, stop me getting angry. They just, like, can only calm me down. I'm still angry, I'm just not as angry. I can, like, calm down and be normal.

683 Interviewee: She's better than everyone. 'Cause she- 'cause she knows that I'm good at being angry, she's good at calming me down.
Interviewer: Okay. That's good. How does she help to calm you down?
Interviewee: Um, there's this place- this spot on my back that she, like, tickles. And it tickles me, and then I get into a really funny mood. And then, just like, and then I like calm down a lot.

1287 It's alright if you don't tell people, but it's not-- if you tell people, it's like, better, because then they know that there's something up when you're upset, and stuff like that.

5 352 If I say something that's like they think it's upsetting me, they don't ask anything about it. They just kind of like, they're kind of like, "Okay, let's talk about something else now." Like that, they kind of.
She was really like sympathetic. She was like-she was kind one of these people go if you need to talk I'm always here to listen. It was like--I can always go speak to her

I'm interested in your friends kind of know you are upset about something and then not asking any more. Is that something that you find helpful?

Interviewee: Yeah. I think it is.
Interviewer: Okay. What would it be like if you wanted to talk more? Would that be okay?
Interviewee: Yeah, like they would wait for me to say something. They wouldn't just keep digging. They don't--they don't keep going on and on and on about it, they just kind of leave it.

Sara's like she's always been part of me. She always understood like -- 'Cause when I had problems with my dad and my mum, like Sara was like, she was always there. Like she would always listen to me.

Interviewer: Mm-hmm.

Interviewer: Even when I couldn't go to like, other stuff. Uh, Zack and I like, I could always speak to because, like even when -- 'Cause I went out with Zack. But even then, like he would - he was always there to listen to.

Because they can't like -- Because especially these three here, they're all - they all got -- I see as family. Like they've all like -- These three have always been there for me.

Interviewer: Okay. How would you know someone is your friend rather than just someone you know?
Interviewee: Because they look like -- 'cause you could always go to them. You can always like you always talk to them.

He's like always kind, he makes sure other people's all right.

If you're not feeling okay-
Interviewee: Yeah.
Interviewer: -what does he do?
Interviewee: He like, phones his Mum and then his Mum phones my, [foster carer names].
Interviewer: Okay. So, then what happens?
Interviewee: [foster carer name] comes and picks me up and then that's basically it.
Interviewer: Okay. Is that what you would want him to do?
Interviewee: Yeah.

Interviewer: Okay. What do you-- What do you like about them?
Interviewee: The same things as Tyler, they're always there

Interviewer: What do they do?
Interviewee: Like be there for when I need them.
Interviewer: Okay, how do you know that they're there for you, how do they show you that?
Interviewee: By asking me what's up a lot, same as Tyler.

Interviewee: They don't ask me and I don't want to really, we don't care.
Interviewer: Okay, so you think they wouldn’t be very interested?
Interviewee: No.
Interviewer: Um, but you also said I don’t want to -- what is it about talking about those things that you wouldn’t want to do with them.
Interviewee: Hmm, well is -- Can you ask me again?
Interviewer: Um, so you think they wouldn’t be interested? That’s one thing. And but you also said that you wouldn’t want to talk to them about your past. I’m wondering what is it that makes that you don’t want to talk to them about that.
Interviewee: Well, we -- don’t know --
Interviewer: Would it be hard to talk to them about?
Interviewee: Uh yeah can be.
Interviewer: Yeah?
Interviewee: Yeah.
Interviewer: Okay. Is there anything?
Interviewee: No.
Interviewer: You just don’t want to.
Interviewee: It’s like no, just like, I don’t want to.
Interviewer: Okay, um, have you spoken to anyone about that, any of your friends that we’ve got on here?
Interviewee: What do you mean?
Interviewer: Um have you ever spoken to anybody here about your past?
Interviewee: Well, yeah I have my foster carer.
Interviewer: Okay and do you -- are you able to speak with them quite a lot about your past?
Interviewee: Yeah sometime.
Interviewer: Okay.
Interviewee: Yeah. Not a lot, just some time.
Interviewer: As you much you need to?
Interviewee: We don’t need to speak about it, do we?
Interviewer: Well, depends if you want to.
Interviewee: Yeah if I need I will speak to them, if I need anything.

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Interviewer: Okay. And if you were upset or having a bad day or something like that-
Interviewee: Mm-hmm.
Interviewer: -would they know?
Interviewee: Yeah well yeah they’ll notice my face.
Interviewer: Okay, what do they do if that happens?
Interviewee: They will ask me all right?
Interviewer: Yeah? Yeah and what then? Are they helpful?
Interviewee: Yeah if I talk about like what happened yeah they will help me.
Appendix L: Summary of Reflections

My Background With LAC

My first experiences of the world of social care and LAC came from working as an Assistant Psychologist in a service providing residential care homes for children. The young people living in the homes had histories of extreme abuse, often by both their families of origin and foster or adoptive families. Their behaviour was often aggressive to both themselves and others and they put themselves in very vulnerable positions within the community. Many of the young people were placed a long way from home, so had lost contact with their old friends or could only contact them online. Some of the young people attended mainstream schools, where a few had friends, but others were accused of bullying or controlling other children or of making friends with children who also showed challenging behaviour. Other children attended the unit school or were not in education, which meant that they had very limited contact with young people who were not in care. Many of the young people had restricted access to mobile phones or social media so were even more limited in their ability to make or maintain friendships outside the homes. Friendships within the homes were often very supportive, but could also be intense and volatile.

Since starting training I have also had part of my child placement within a LAC Child and Adolescent Mental Health Service (CAMHS). The young people I worked with in this placement were typically hard to engage and would often miss appointments. At times the young people gave me permission to work indirectly through others in their networks because they did not want to have to form another relationship, which they found challenging. Again, the children typically had histories of abuse and often displayed behaviour that was challenging to the adults around them, although not on the same level as in my Assistant Psychologist post. They often described having few friends and high levels of difficulty within these relationships.
These experiences led me to enter this research project with a series of assumptions, including that LAC typically showed very challenging behaviour, high levels of distress and mental health difficulties preceded by extremely abusive experiences. I expected them to be difficult to engage and that they would experience a range of difficulties within their friendships. My theoretical understanding of this was primarily around insecure attachments.

My Experiences of Friendship

I feel very lucky in that throughout adolescence and adulthood I have had very positive relationships with friends. I have supportive, interesting, understanding, enjoyable friendships that have always been very important to me. I therefore entered this research with beliefs about the positive effects and importance of friendship.

First Interview

Following my first interview I felt surprised and wrote in my diary about how well the young person appeared to be functioning. He was engaging, insightful, had made some difficult choices to support his own development, had a stable group of friends and was keen to actively avoid peer pressure and people who might be a bad influence. He was almost the opposite of what I had expected, other than a few comments about trust. I sent my supervisor a copy of the transcript and we both felt that there was not much in there, based on our expectations of what we were looking for. We assumed other LAC would present differently and I practised my interview technique to make sure I was bringing out the relevant issues.

Further Interviews

After a couple more interviews, I started to realise my assumptions were not fully correct. They were based on experiences with young people at the extreme ends of the care spectrum, either in residential care or with mental health difficulties at a level that warranted CAMHS intervention. In contrast, the LAC I was interviewing were generally in relatively stable foster placements. I tried to let go of these assumptions and allow the young people to explain what
was important to them, without my expectations getting in the way. I discussed this in supervision and although we were both surprised, the recognition that the young people were the opposite end of the spectrum was a helpful turning point.

Analysis

When analysing the interviews I tried to hold in mind my previous assumptions as well as more recent thoughts about how well the LAC I had met seemed to be doing. This allowed both sides of the story to come through in the themes, both in terms of the values and meaning of friendship being similar to those of their non-LAC peers, but also recognising the challenges that they were experiencing.

Influence of Literature

Whilst working on my literature review, and prior to that, my literature survey, I felt sad at how limited the research specifically into LAC friendship was. I was also struck particularly by the qualitative articles which described difficulties with trust and disclosure with friends. This influenced my interview schedule as I wanted to ask young people about their friends’ knowledge of their care-identity. This resulted in some of the more nuanced data in the interviews, with some young people feeling wary of people knowing and others not minding at all.

I was surprised that the research about adolescent expectations of friendship has not been updated and that models I was working with were up to 40 years old. I thought they would no longer be relevant as the lives of adolescents have changed so much within this time period. When the data from the LAC participants fitted into these older models, I was even more surprised. To think that their expectations and values within friendship were not only similar to their peers, but similar to their peers as defined by researchers decades ago, was not at all what I had predicted. I reflected in my diary about how the desire to engage with others, enjoy time with them and feel connected and understood are basic human desires and perhaps these
don’t change over time or population as much as I thought, just the nuances around how those expectations and values are achieved. It also gave me a real sense of hope about the success that can be achieved by LAC when they are given the stability and support to be able to form these meaningful relationships.
Part Two: Literature Review

Looked After Children’s Friendships: A review of the literature examining the way that
Looked After Children’s friendships are constructed.

Target Journal: Child and Family Social Work

Child and Family Social Work is a peer reviewed journal that provides a forum to increase understanding and develop good practice in all areas of child and family social work, to advance the wellbeing and welfare of children and families worldwide. It publishes articles on research, theory, policy and practice and welcomes review articles. See Appendix for the Guidelines for Authors.

Word Count: 7956
Abstract

Friendship benefits children and adolescents, providing short and long-term rewards for physical and mental health. It supports social and emotional skills development and can buffer emotional stress. Looked After Children (LAC) face difficulties and poor outcomes in many areas, and may find friendship a particularly useful source of support. This review explores the literature on LAC’s friendships to understand how they are constructed. A systematic search identified 12 peer-reviewed articles. Results from the studies were subjected to narrative synthesis. The evidence suggests most LAC have at least one friend, they value friendships highly and can be particularly dependent on friends for practical and emotional support. However, they experience challenges making and maintaining friendships that are associated with stigma, feeling different, placement changes and other care-related variables. Many studies had low participant numbers and poorly described sampling strategies. There was limited comparison with non-LAC peers, making it hard to draw firm conclusions. Further research is suggested into what behaviours or features LAC value in friendships and how this compares to other young people. Although there are some theoretical links between attachment, learned behaviour and cognitions, social networks, similarity and friendship, these need to be further clarified within a LAC population.
Introduction

Looked After Children (LAC) are a vulnerable group (Pinto & Woolgar, 2015). They have often had difficult experiences associated with poor outcomes in many areas (Department for Education, 2017; 2018). Research has focused on their relationships with parents, carers and professionals. However, it is also important to consider their friendships. These are a potential source of support and represent relationships in which LAC have more equality, choice and control than in their relationships with adults, which may mean they have different benefits and challenges.

Friendship

Friendship is a term that can be difficult to ascribe a strict meaning to, as it is different for each individual, and across developmental ages, cultures, social contexts and gender. However, researchers typically agree it is a dyadic relationship based on reciprocity, liking, affection and having fun (Bukowski et al., 1996). Peer relationships and friendships become increasingly important to young people as they develop. Furman and Buhrmester (1992) described the change in social patterns from middle childhood onwards, in which friendships become more stable, intimate and significant to the individuals involved.

Various models have been proposed to explain how friendships change as children develop (e.g. Bigelow & La Gaipa, 1975; Selman, 1980). These models vary, but each describe a similar progression from young children’s friendships being focussed on the present activity, having fun, playing and exploring, towards developing expectations of reciprocity and fairness in middle childhood and later developing intimacy, trust and emotional closeness in adolescence and adulthood.

Levinger and Levinger (1986) proposed a five-stage model of the process of friendship. The first stage is acquaintance, primarily based on proximity. Relationships at this stage are relatively superficial and each person uses impression management techniques to moderate the
way they come across. This is followed by the build-up stage, where patterns of communication are developed, self-disclosure and trust begin and people are aware of the rewards of the relationship. The third stage is continuation and consolidation, where the friendship is maintained and deepened, with self-disclosure becoming more significant. The fourth stage, deterioration, occurs when the quality of the friendship begins to reduce. This could be due to difficulties or arguments within the friendship, natural growing apart or changes such as house moves which affect how often friends see each other. The final stage is ending, where the friendship is dissolved. Not all friendships go through each stage, but the model is useful when thinking about friendship as a dynamic process rather than a static event, and to consider where strengths and difficulties may occur at different stages.

Friendship in childhood and adolescence is considered a relationship in which a range of skills can be developed, including self-regulation and emotional regulation (Farley & Kim-Spoon, 2014), social skills, such as conflict resolution and perspective taking (Hartup, 1983), moral understanding (Damon, 1977), general cognitive development (Erwin, 1998) and social and emotional growth (Parker & Gottman, 1989). In the short term, positive affect is increasingly associated with time spent with peers (Larson & Richards, 1991) and friends provide companionship and social support (Erwin, 1998). In the longer term, peer relationships in adolescence have been found to predict satisfaction with life, as well as mental and physical health in adulthood (Landstedt et al., 2015; Marion et al., 2013), whilst peer rejection has been linked with later criminality, psychopathology and early school withdrawal (Parker & Asher, 1987). It has also been suggested that friendships in childhood and adolescence can act as an emotional buffer, helping young people overcome negative experiences, such as parental relationship difficulties (Sullivan, 1953; Wasserstein & La Greca, 1996).
Looked After Children

A child is “looked after” under the Children Act 1989 (Legislation.gov.uk, 1989) if they are under the care of a local authority for 24 hours or more. The Department for Education (2017) reported that in March 2017, there were 72,670 LAC in England, with 49,750 in care continuously for at least the last year. Reasons for being in care included parental illness, child disability, family in acute stress, absent parenting and family dysfunction, but the majority (61%) were due to abuse or neglect. Most children (74%) lived with foster carers, with other placements including secure units, children’s homes, hostels, extended family, prospective adopters, living independently, family centres and young offenders’ institutions. Whilst the majority have a stable placement over the course of a year, a significant minority move placement frequently, with 21% having two placements over the last year and 10% having three or more. The median duration of placements was 140 days. 19% of LAC are placed more than 20 miles from their biological family’s home address. These placement and location changes are likely to affect LAC’s opportunities for consistent peer relationships.

LAC face a number of challenges and have poor outcomes in many areas. For example, the Department for Education (2017; 2018) reported higher rates of substance misuse and offending, poor academic attainment at all levels, higher rates of exclusion and Special Educational Needs, particularly with social, emotional and mental health needs. The Department for Education routinely collect scores on the Strengths and Difficulties Questionnaire, which should be completed by a carer for all LAC between 4 and 16 years old. In 2017, only around half of those who had been in care for the year were categorised as having “normal emotional and behavioural health”, with 38% scoring at a level that represents a “cause for concern” (Department for Education, 2017). Meltzer (2003) found 45% of LAC could be assessed as having a “mental disorder” using interviews based on ICD-10 criteria (World Health Organisation, 1992). Outcomes for care leavers are poor, with 40% of 19 to 21-year-
old care leavers classified as Not in Education, Employment or Training (NEET) (Department for Education, 2017).

**Theoretical Factors in LAC Friendship**

If friendship can be an emotional buffer when other areas of life are stressful, and can support the development of social, cognitive and emotional regulation skills, developing these relationships may be an important part of improving outcomes for LAC. There has been limited theoretical exploration comparing the friendship experiences of LAC to their non-LAC peers. However, Price (1996), suggests that for maltreated children, attachment theory, social-cognitive learning theory and social network theory are relevant. These will each be described and their implications for LAC explored. In addition to these, friendship research highlights the importance of similarity, so this will also be explored in relation to LAC.

**Attachment Theory.** Attachment theory poses that relationships between infants and their primary caregivers lead to the child developing an attachment style with internal working models of themselves and other people, that go on to affect their relationships in the future (Bowlby, 1969). Children’s attachment security has been associated with their behaviour with friends and the quality of their friendships (e.g. Lafreniere & Sroufe, 1985; Park & Waters, 1989; Shulman et al., 1994; Youngblade et al., 1993). Abuse and neglect are associated with an increased likelihood of insecure attachment styles (Crittenden, 1988; Egeland et al., 1983). It may be that the increased likelihood of insecure attachment in LAC affects their behaviour with peers. For example, they may present as anxious, withdrawn, distrustful, controlling or clingy, which may affect their ability to develop or maintain friendships.

**Cognitive-Social Learning Theory.** Social learning theory poses that we learn behaviour from others, through observation, modelling and reinforcement (Bandura, 1977). Cognitive-social theory expands this to learning social cognitions, such as processing social information and selecting a response. The behaviour LAC observe in others is likely to be
different to the experiences of other children. Parke and Slaby (1983) suggested parenting styles involving restrictive, authoritarian practices or use of physical punishment, may be modelled and learned by the child, resulting in more aggressive styles of interaction. Children who have been physically abused have been found to be more aggressive towards their peers (Alessandri, 1991; Hoffman-Plotkin & Twentyman, 1984), which could affect their ability to make friends or the quality of the friendships they form. Similarly, if they are exposed to limited emotional warmth or neglectful parenting, they may develop difficulties with emotional regulation or they may not learn how to express warmth within their relationships, which could affect the quality of their friendships. Their behaviour may be mediated by poor social information processing and attributional biases (Keil & Price, 2009).

Social Network Theory. Social network theory suggests parents influence their children’s friendships indirectly, by determining the amount and type of peer contact a child has (Price, 1996). In LAC, this also applies to guardians and other professionals. LAC may receive different support to make and maintain friendships from the adults in their lives. The practical difficulties of being in care may cause difficulty for LAC in the development and maintenance of their social networks and friendships. If LAC experience frequent placement changes, they may also change schools and neighbourhoods, disrupting their friendships and affecting their ability to progress through the Levinger and Levinger (1986) stages of friendship. They may experience repeated early stages of acquaintance and build-up when they move placement, but be less likely to reach the continuation and consolidation stage. The increased endings in comparison to other young people may limit their chances to develop the trust, intimacy and self-disclosure seen at deeper levels of friendship.

Similarity. It has been found that most people form and maintain friendships with people they perceive as similar to themselves, both in terms of internal and external factors (Byrne & Griffitt, 1973; Hartup, 1983; Hartup, 1993). Internal factors could include beliefs,
attitudes, aspirations or other elements of personality. External factors may include demographic factors such as school, family circumstance, age, culture and ethnicity. LAC are likely to have had different experiences to their peers and may therefore have different values and expectations. They may also be located a distance away from their original environment, which could mean they are exposed to differences in culture, class and accent which could mark them out as different and affect their relationships. They may have less access to material objects, such as the latest technology or mobile phones as well as possible differences in “cultural capital”. Lamont and Lareau (1988) define cultural capital as “widely shared, high status, cultural signals (attitudes, preferences, formal knowledge, behaviours, goods and credentials) used for social and cultural exclusion”. If LAC have less cultural capital, due to their different experiences, values, expectations or possessions, they may be at risk of social exclusion or not fitting in with the group identity.

**Summary and Rationale**

These theories individually or combined could provide the basis to aid our understanding of the impact of LAC status on friendship. They suggest the quantity and quality of LAC friendships could be different to those of their non-LAC peers, possibly mediated by attachment, learned behaviour, social-cognitive representations, social network factors or reduced similarity to their peers. With these potential obstacles to forming and maintaining friendships, it is important to gain a greater understanding about the experiences of LAC. Given the research indicating friendship is a factor in the development of skills, provision of social support, emotional buffering and long-term wellbeing, this may be even more important for LAC as a way of protecting against some of the other difficulties in their lives. It is therefore important to understand how these relationships are operationalised for LAC. This could guide future work into maximising the strengths and support that friends can offer to LAC.
Aims

This literature review aims to answer the question “How are the friendships of LAC constructed?” In this context, construction was intended to cover broad concepts such as what friendships look like and mean for LAC and the factors that are involved in making or maintaining them. There is often an overlap in the research between abused children and LAC. For the purpose of this study only children who have been identified as LAC will be included. These children are likely to have experienced abuse and will also have experienced the process of removal from the home and living in the care system. Search terms will include phrases relating to abused children, but papers will only be included if the children are identifiable as LAC. Bukowski and Hoza (1989) also pointed out the differences between general peer relationships and friendships and that these are often confused within the literature, so again, terms relating to peers will be included, but papers will only be included if they relate to friendship, in order to provide clarity on this particular type of relationship. Operationally this will be determined by participants using the word friend, or by descriptions that fit with models of friendship (Bukowski et al., 1993; Wright, 1984).

Method

On 10th June 2018, six databases (PsycINFO, PsycARTICLES, Psychology and Behavioral Sciences Collection, PsycBOOKS, MEDLINE and Child Development and Adolescent Studies) were searched using EBSCOHost. A limiter was placed to only include peer-reviewed articles. No time limiter was used due to the limited extent of the research. Some of the databases go back to the 1600s, although the earliest article found was 1980. The following Boolean phrase was used:

\[ TI \ (\ "child*\ looked\ after" \ OR \ "looked\ after\ child*" \ OR \ "foster\ car*" \ OR \ "out\ of\ home\ care" \ OR \ "child*\ in\ care" \ OR \ "care\ system" \ OR \ "residential\ care" \ OR \ "foster\ youth" \ OR \ "maltreat*\ child*" \ OR \ "abus*\ child*" \ OR \ "neglect*\ child*" ) \ AND \ TI \ (\ "friend*" \ OR \ "peer*" ) \]
This produced 99 results, 56 once exact duplicates were removed. These were screened against the criteria in Table 1. Studies were only included if they took place in the U.K., Ireland, U.S., Canada, Australia, New Zealand, Denmark, Norway or Sweden. These countries have similar, although not identical, care systems (Munro & Manful, 2012) and a shared professional literature (Lutman & Barter, 2017), making synthesis of findings more relevant. This process left five papers for inclusion.

Table 1
Inclusion and exclusion criteria

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<th>Inclusion</th>
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<tr>
<td>Available in English</td>
<td>Evaluation e.g. book reviews</td>
</tr>
<tr>
<td>Relates to looked after children</td>
<td>Intervention studies designed to improve peer relationships.</td>
</tr>
<tr>
<td>Results relating to peer relationships, which must be identifiable as friendships.</td>
<td></td>
</tr>
<tr>
<td>Took place in the U.K., Ireland, U.S., Canada, Australia, New Zealand, Denmark, Norway or Sweden.</td>
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Experts in the field were contacted for recommendations. Nikki Luke, researcher at the Rees Centre, provided her dissertation and eight references. Ruth Emond, social work researcher at the University of Stirling with an interest in LAC friendships, provided a presentation and 31 references. Michael Tarren-Sweeney, Associate Professor of Child and Family Psychology at the University of Canterbury with research in LAC wellbeing and mental health, described his current theoretical work. Kim Golding, clinical psychologist specialising in LAC, suggested three websites and Dan Hughes, clinical psychologist specialising in child abuse, neglect, attachment and trauma, recommended a book. These were screened against the criteria, resulting in a further three articles.

The reference lists for all included studies were screened, adding three more articles. A review was also found in a reference screen, which had a section relevant to this review. Within this section, only three articles were included. One was already included in the current review.
and one did not meet the peer review criteria. The third article was then included in this review. The review article was excluded as the relevant information was contained in the individual articles.

This process left twelve articles for inclusion in the review. Figures 1 and 2 detail the process.

**Figure 1.** Search 1

EBSCOHost - PsycINFO, PsycARTICLES, Psychology and Behavioural Sciences Collection, PsycBOOKS, MEDLINE and Child Development and Adolescent Studies

![Flowchart showing the search process from 56 articles to 5 articles, with reasons for exclusion at each step.](attachment:image-url)
Figure 2. Search 2
Recommendations from experts and combination with search 1

46 suggested readings –
titles screened

24 articles – abstracts
screened

12 full articles screened

3 articles

Added to 5 articles from search 1 = 8 articles

Reference lists
screened

3 articles added
One review article fully screened

One article taken from review reference list

12 articles in total
Results

Characteristics of Identified Studies
Six studies were qualitative, four were quantitative and two used mixed methods. Table 2 outlines the designs and results of all studies. Many of the studies reported results relating to aspects other than children’s friendships, which will not be discussed or reported here. The number of participants was unclear in two studies (Emond, 2003; Stokholm, 2009), but the range in the other ten was between 10 and 4216. Participants ranged in age from 3 to 22 years old, with the older age groups representing care leavers rather than current LAC. Where reported, the gender proportion of participants ranged from 35% to 69% male. A range of placement types were represented including residential care, foster care and care leavers.
<table>
<thead>
<tr>
<th>Study &amp; Location</th>
<th>n</th>
<th>Participants</th>
<th>Aim</th>
<th>Design and measures</th>
<th>Analysis</th>
<th>Results</th>
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<tbody>
<tr>
<td>Emond (2003)</td>
<td>Overall number not reported. 9 young people were resident throughout and new admissions were also included. Roughly equal gender balance 12 to 17 years old 12 to 17 years old Residential Care All white</td>
<td>Understanding the structure and function of the peer group in residential care.</td>
<td>Ethnographic qualitative observations</td>
<td>Not reported</td>
<td>Researcher identified that the peer hierarchy was fluid – based on knowledge / skill displayed moment by moment. Skills and competency themes that were identified as important: Support and advice. Possessions. Encouragement. Sticking up for each other. Theme of withdrawal of peer support also identified by researcher.</td>
<td></td>
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<tr>
<td>Emond (2014)</td>
<td>16</td>
<td>11 male, 5 female 8 to 18 years old</td>
<td>Explore meaning and experience of peer relationships in residential care</td>
<td>Qualitative interviews and focus groups</td>
<td>Narrative and thematic analysis</td>
<td>Themes identified by researchers Same and different Mediating an “in-care” identity.</td>
</tr>
<tr>
<td>Perez and Romo (2011)</td>
<td>32</td>
<td>14 male, 18 female 18 to 22 years old</td>
<td>Explore and understand the experiences of foster care youth and their transitions into adulthood. Examine Latino youth post-care experiences and their reliance on peers as social capital.</td>
<td>Qualitative semi-structured interviews</td>
<td>Interviews transcribed and coded for emergent themes.</td>
<td>Themes relating to friends as identified by researchers Couch surfing and relying on friends. Relying on boyfriends, friends and family of friends. Forming more permanent relationships. Peer networks as social capital.</td>
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<td>Study &amp; Location</td>
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</tr>
<tr>
<td>Ridge and Millar (2000)</td>
<td>16</td>
<td>9 female, 7 male&lt;br&gt;11 to 19 years old&lt;br&gt;Mixed placements, including 4 care leavers</td>
<td>Explore the value and meaning of friendship for LAC</td>
<td>Qualitative&lt;br&gt;Semi-structured interviews</td>
<td>Thematic indexing</td>
<td>Themes identified by researchers&lt;br&gt;Communication and confidentiality.&lt;br&gt;Safety and bullying.&lt;br&gt;Losing old friends and starting again.&lt;br&gt;Rules and regulations.&lt;br&gt;The importance of school for external relationships.&lt;br&gt;Moving towards independence.</td>
</tr>
<tr>
<td>Rogers (2017)</td>
<td>10</td>
<td>5 male, 5 female&lt;br&gt;12 to 14 years old&lt;br&gt;Foster care&lt;br&gt;8 white British, 2 dual heritage.</td>
<td>Explore how young people living in foster care experience and manage stigma in their day-to-day lives</td>
<td>Qualitative&lt;br&gt;Two semi-structured interviews with each participant.&lt;br&gt;Eco-mapping.&lt;br&gt;Participants took photographs of things that were important to them and discussed in interview.</td>
<td>Thematic Analysis</td>
<td>Themes identified by researcher&lt;br&gt;Being different&lt;br&gt;Feeling devalued&lt;br&gt;Managing spoiled identities: disclosure and the support of peers</td>
</tr>
<tr>
<td>Stockholm (2009)</td>
<td></td>
<td>Total number of participants not reported but 17 individual interviews and 6 interviews with children in pairs. 13 interviews with staff and superintendents.</td>
<td>Analyse how informal social relationships in residential care setting influence identity formation</td>
<td>Qualitative&lt;br&gt;Observation and interviews</td>
<td>Not reported</td>
<td>Themes relating to friends as identified by researchers&lt;br&gt;Being yourself with residential peers. Becoming part of the peer group – <em>(values of peer group: loyalty and respect, investment in social aspects, helping and sharing, friends and alliances, toughness and courage to oppose staff or make trouble.)</em>&lt;br&gt;Contrasting worlds and dilemmas.&lt;br&gt;Authoring selves in multiple figurative worlds.</td>
</tr>
<tr>
<td>Study &amp; Location</td>
<td>n</td>
<td>Participants</td>
<td>Aim</td>
<td>Design and measures</td>
<td>Analysis</td>
<td>Results</td>
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<tr>
<td>McMahon and Curtin (2013)</td>
<td>38</td>
<td>39.5% male 13 to 21 years old Foster care and care leavers</td>
<td>What is the composition of the social networks of the young people and what impact does being in care have?</td>
<td>Mixed methods Semi-structured interview Social Provisions scale Social network map</td>
<td>Descriptive statistics for quantitative data. Not reported for qualitative data.</td>
<td>Friends provide: Concrete / practical support - in care (29.7%), left care (39.4%). Closeness - in care (30%) left care (26.5%). Emotional support - in care (35.2%), left care (39.4%). Info/advice - in care (32.1%), left care (26%). Higher percentage of group placed within 10 miles of birth family home maintained contact with previous friends (83.3%) than those placed more than 10 miles away (64.7%). In care 1 to 3 years – 77.7% maintained contact with a friend from pre-care or previous placement. In care 4 or more year, this was 66.6% 52.6% said nobody had encouraged making or maintaining friendships.</td>
</tr>
</tbody>
</table>

<p>| Selwyn et al. (2010) | 140 first response 160 second response 54 both | 8 to 14 years old Independent foster care | Overall aim of wider research was to assess children’s progress over a year. This part focused on the children's views. | Mixed methods Repeated measures questionnaire, intended to be completed 8 weeks into placement and again a year later. | Quantitative – descriptive statistics only Qualitative - word counts and matrices to develop themes and categories informed by the statistics | 8 weeks into placement, 44% thought making friends was easy, 19% said it was hard. Twelve months later 18% described making friends as ‘difficult’ or ‘scary’. Of those who moved placement within the year about half said making friends was easy or OK, over a third found it difficult and some had not made any. Frustration about their friends’ families being subjected to police checks. When in placement over a year, 77% said friends came to their foster home, 29% did not go to friends’ houses. |</p>
<table>
<thead>
<tr>
<th>Study &amp; Location</th>
<th>n</th>
<th>Participants</th>
<th>Aim</th>
<th>Design and measures</th>
<th>Analysis</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marcus (1991)</td>
<td>52 in study</td>
<td>23 girls, 29 boys</td>
<td>Determine whether the quality of relationships between foster child and significant others is the dominant factor that helps them adjust to disruption in their lives</td>
<td>Quantitative</td>
<td>Correlation</td>
<td>Increased time in care (-0.6 p&lt;0.001) and increased number of placements associated with decreased number of close friends. Number of close friends not associated with behaviour problems. Those with internalising problems felt less able to change aversive behaviours of friends (0.5 p&lt;0.05) and more likely to negatively personalise things their friends do that they don't like (-0.5 p&lt;0.05)</td>
</tr>
<tr>
<td>U.S.A. 38 in peer relevant section</td>
<td>4 to 13 years old</td>
<td>Foster care</td>
<td>Child Behaviour Checklist completed by foster mother</td>
<td>Case history variables</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perry (2006)</td>
<td>154 in LAC group</td>
<td>LAC: 61% female 15 to 18 years old Foster care 42.2%, group homes 31.2%, kinship care 18.2% 35.7% African American, 6.5% Hispanic, 54.6% White, 3.3% other</td>
<td>Compare primary relationships of youth in foster care and in the general population and explore relationships between level of network disruption, strength of ties within network domains and psychological distress.</td>
<td>Quantitative</td>
<td>Pearson's chi square, Ordinary Least Squares (OLS) regression</td>
<td>LAC talk to friends outside school an average of 13.32 times per month. Fewer youth in foster care, than in general population report that their friends care a lot about them (X2 = 60.20, df = 1 p&lt;0.001). [61% vs 84.6%] Perceived strength of foster care network is positively related to strength of peer network (b = 0.30, p&lt;0.001) and converse also true (b = 0.30, p&lt;0.001)</td>
</tr>
<tr>
<td>U.S.A. 4062 in control group</td>
<td>15 to 18 years old Not in care 19.1% African American, 12.1% Hispanic, 62.3% White, 4.9% Other</td>
<td></td>
<td>TAME-S (telephone interview for LAC). Includes variables relating to health, family and network. Add-Health: Longitudinal Study of Adolescent Health (assesses health related behaviours and their outcomes of adolescents across all US high schools)</td>
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<tr>
<td>Study &amp; Location</td>
<td>n</td>
<td>Participants</td>
<td>Aim</td>
<td>Design and measures</td>
<td>Analysis</td>
<td>Results</td>
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<tr>
<td>Smith (1995) U.S.A.</td>
<td>51 total</td>
<td>3 to 6 years old Foster children</td>
<td>Explore friendship outside the classroom in foster children</td>
<td>Quantitative</td>
<td>ANOVA and paired t-tests</td>
<td>Mother ratings of friendship quality did not differ significantly between groups.</td>
</tr>
<tr>
<td></td>
<td>13 foster care separated from sibling</td>
<td>46.2% female</td>
<td>Carer nominated best friend</td>
<td>Researchers developed carer-rated single item 6-point scale to assess friendship quality.</td>
<td></td>
<td>Majority of all children reported to have a best friend. Comparison children less likely than foster children to spend more than half the day with friends on weekdays (x²(6) = 19.7, p&lt;0.001) or weekends (x²(6) = 20.0, p&lt;0.001). Foster children separated from siblings direct significantly more negative behaviour towards their friends than comparison children and foster children placed with siblings (F(8, 44) = 4.07 p&lt;0.002 then post-hoc t = 2.23 p&lt;0.05 (separated vs comparison), t=2.12, p&lt;0.05 (separated vs with sibs)). When quality of friendship taken into account, foster children placed with siblings direct more positive behaviour towards friends than comparison children (F(3,44) = 4.01, p&lt;0.001 then t = 2.46, p&lt;0.02).</td>
</tr>
<tr>
<td></td>
<td>25 foster care with sibling</td>
<td>38.5% African American</td>
<td>Carer rated child’s behaviour towards friend using 14 items adapted from The Maternal Interview – Sibling Relationships.</td>
<td></td>
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<tr>
<td></td>
<td>13 in preventative service with sibling (non-LAC)</td>
<td>36% African American, 48% Caucasian</td>
<td>Child Behaviour Checklist</td>
<td>Child Behaviour Inventory</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>16% Other</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Study &amp; Location</td>
<td>n</td>
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<td>Aim</td>
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<tr>
<td>Zimmerman et al. (1997)</td>
<td>U.S.A. 42</td>
<td>25 boys in each group</td>
<td>Explore socioemotional deficits of severely abused children in residential treatment by examining their emotional understanding and peer relationship skills in comparison to their non-abused classmates</td>
<td>Quantitative Teacher rating of social behaviour. Researchers devised own measure. Peabody Picture Vocabulary Test - Revised Emotional Understanding Measure adapted by the researchers from Cassidy et al. (1992).</td>
<td>ANCOVA (controlling for IQ)</td>
<td>LAC less likely to have close / best friends. LAC mean = 2.72 SD = 1.21, Non-LAC mean = 3.73, SD = 0.93 LAC rated lower on all positive peer behaviours and higher on all but one negative peer behaviour. ANCOVA details not reported beyond p&lt;0.05 In ANCOVA testing, LAC and control children did not differ in appropriateness of responses to questions about their emotions, but LAC gave significantly more unique/extreme responses to what others (carers, teachers and friends – not separated) would do if they felt each emotion (p&lt;0.003).</td>
</tr>
<tr>
<td></td>
<td>42 control</td>
<td>6 to 10 years old LAC group - residential care Control group - non-LAC from same classrooms 45% ethnic minority in comparison group, 39% in control group</td>
<td></td>
<td></td>
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</tbody>
</table>
Quality of Identified Studies

All studies were assessed using Kmet et al.’s (2004) Standard Quality Assessment Criteria for evaluating primary research papers from a variety of fields. This toolkit provides checklists for assessing the internal validity of qualitative and quantitative studies, which can be formed into a summary score. The qualitative checklist includes items relating to the question, design, context, sampling, data collection, analysis, credibility, conclusions and reflexivity of the paper. The quantitative checklist assesses the question, design, subject selection and description, allocation, blinding (where possible), outcome measures, sample size, analysis, variance estimates, control of confounding variables, detail of results and conclusions. The checklists can be subjective but Kmet et al. (2004) demonstrated good inter-rater reliability and they provide a useful tool for comparison. The two mixed methods studies were assessed using both sets of criteria, looking at the qualitative and quantitative results separately. Studies were categorised as low, medium or high quality, as shown in Table 3. The categories were devised using Kmet et al.’s (2004) description of cut off scores for inclusion. They described a summary score of 0.75 as a conservative score for inclusion, and 0.55 as a liberal score for inclusion. Based on this, a summary score of 0 – 0.54 was categorised as low, 0.55 – 0.74 was categorised as medium and 0.75 – 1 was categorised as high. A sample was also assessed by an Assistant Psychologist. Inter-rater reliability was similar to that found by Kmet et al. (2004) with item-by-item agreement between 85% and 92%. Items where there was disagreement were all rated as “Yes” by one rater and “Partial” by the other. Overall discrepancies ranged from 0.05 to 0.1, with all studies falling into the same categories for both raters.

Most of the qualitative studies were high quality, with clear aims, appropriate designs, connections to theoretical frameworks and well described contexts. McMahon and Curtin (2013) was the only study categorised as low for qualitative data. This was because there was not enough information on the data collection and analysis for the qualitative part of the study,
making the credibility of the results unclear. However, the majority of results for this study were quantitative, for which it was classed as high. All the quantitative studies were classed as high quality, with clear objectives, designs, description of participants, measures, analysis and conclusions. The overall high quality of the papers suggests they can be relied upon as valid representations of their investigated concepts.

Table 3

*Summary of quality assessment scores and ratings.*

<table>
<thead>
<tr>
<th>Study</th>
<th>Qualitative Score</th>
<th>Quantitative Score</th>
<th>Rating</th>
</tr>
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<tbody>
<tr>
<td>Emond (2003)</td>
<td>0.80</td>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Emond (2014)</td>
<td>0.80</td>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Perez and Romo (2011)</td>
<td>0.85</td>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Ridge and Millar (2000)</td>
<td>0.75</td>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Rogers (2017)</td>
<td>0.75</td>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Stokholm (2009)</td>
<td>0.75</td>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Selwyn et al. (2010)</td>
<td>0.70</td>
<td>0.83</td>
<td>Medium for qualitative High for quantitative</td>
</tr>
<tr>
<td>McMahon and Curtin (2013)</td>
<td>0.40</td>
<td>0.89</td>
<td>Low for qualitative High for quantitative</td>
</tr>
<tr>
<td>Marcus (1991)</td>
<td></td>
<td>0.77</td>
<td>High</td>
</tr>
<tr>
<td>Perry (2006)</td>
<td></td>
<td>0.86</td>
<td>High</td>
</tr>
<tr>
<td>Smith (1995)</td>
<td>0.95</td>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Zimmerman et al. (1997)</td>
<td></td>
<td>0.88</td>
<td>High</td>
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</tbody>
</table>

**Main Findings**

This review aims to answer the question “How are the friendships of LAC constructed?”. Reviewing the papers, five themes emerge; “Having friends and the closeness of the friendships”, “Friends are important to LAC”, “Difference and stigma”, “Placement moves and rules make it difficult to maintain friendships” and “Hierarchies and values in group residential care”. These themes were generated in an inductive and iterative process of narrative synthesis. All papers were read and results summarised into a table. The summaries were then compared and contrasted to identify thematic domains. These domains were checked back against the original papers to ensure they encapsulated the most relevant findings. They were also reviewed within supervision, supporting clarity of definition and credibility.
supervision, areas that had been unclear were reviewed, looking at the summaries to ensure new definitions encapsulated all findings. They were then further checked against the original papers.

**Having friends and the closeness of the friendships.** Five studies reported findings about the likelihood of LAC having friends and the quality of their friendships (Marcus, 1991; Perry, 2006; Selwyn et al., 2010; Smith, 1995; Zimmerman et al., 1997).

Two of these studies used ratings from adults involved with LAC to assess their friendships and compare them to children living at home. Zimmerman et al., (1997) asked teachers to rate children on a 5-point scale for a number of peer-related behaviours, including “has close / best friends”. They found LAC who had been abused were less likely to be rated as having close or best friends when compared to children from the same classrooms who were not in care. They also found abused LAC scored significantly higher than their classmates for negative peer behaviours (including interrupting/disrupting, saying mean things/using bad words, hitting/kicking/biting) and lower for positive peer behaviours (including expressing emotion well, understanding others’ feelings, and helping/sharing/taking turns).

Smith (1995) took a different focus, comparing the friendships of foster children who were separated from siblings, foster children placed with at least one sibling and children receiving preventative services but living with at least one sibling and their biological parents. Mothers and foster mothers were asked to identify a child, “not related to the target child, with whom the target child (a) spent time with on a regular basis, (b) seemed to prefer as a playmate (c) had a mutual relationship” and to rate aspects of their relationship. Most children in all groups had a best friend. Children living with their biological family were less likely than foster children to spend more than half the day with friends on weekdays or weekends. However, this result is confounded by the fact that fostered children were more likely to have their identified friends living in the same house e.g. another foster child, increasing the likelihood of spending
time together. They also found that foster children who had been separated from siblings directed more negative behaviour towards friends than children living with a sibling.

Three studies assessed young people’s views about their friendships using interviews or questionnaires. Only one of these compared them to children who were not in care. Perry (2006) compared survey data between LAC and a survey given in all US high schools. LAC were less likely than other adolescents to report that their friends cared a lot about them. There was also a relationship between the perceived strength of the foster care network and the strength of the peer network. LAC reported talking to friends outside school an average of 13.32 times per month. Differences in the questionnaires for LAC and non-LAC groups meant that no comparison figure was provided for how often non-LAC spoke to their friends.

Marcus (1991) correlated interview data from foster children about their coping styles with case history variables and a carer-completed Child Behaviour Checklist (Achenbach & Edelbrock, 1983). Those who had been in care longer or had an increased number of placements, had fewer close friends. The number of close friends was not associated with the child’s behaviour difficulties. However, the quality of those friendships was; children with more internalising problems felt less able to change the aversive behaviour of their friends and were more likely to personalise things their friends did that they did not like.

Selwyn et al. (2010) sent surveys to children living in independent foster care to obtain their views on their placement provision and progress. Eight weeks into placement, 44% thought making friends was easy and 19% said it was hard. Twelve months later, 18% described it as difficult or scary. They did not report a score for how many found making friends easy at the second time point. Of those who moved placement within the year about half said making friends was easy or OK, over a third found it difficult and some had not made any at all. No statistics were provided for the number who had not made any at all. Of the 54 children who responded at both time points and had stayed within the same placement, 65% said their
friends visited them at their foster-home on first completion and 77% said this after a year. Initially 40% reported that they did not visit friends’ houses, reducing to 29% after a year.

In summary, these studies suggest that most LAC have at least one friend. However, they may be less likely than non-LAC to have close friends or to believe that their friends care about them a lot. Being in care a long time or having multiple placements was associated with having fewer close friends, with almost half of foster children in a new placement reporting that it is hard to make friends. Foster carer network strength was associated with peer network strength. There may be associations of friendship with behaviour, as LAC have been shown to demonstrate more negative peer behaviours and less positive peer behaviours. However, this may relate more to the quality of the friendships than the number of friendships.

**Friends are important to LAC.** Three studies reported on the value or importance of friendship for LAC (McMahon & Curtin, 2013; Perez & Romo, 2011; Ridge & Millar, 2000). McMahon and Curtin (2013) completed interviews and social network analysis with LAC and care leavers. They found that for both groups, friends were reported as the largest category of providers of concrete and practical support, emotional support, information and advice. They were also the largest category rated as close for both groups, showing that friends have a large role in these areas in comparison to foster or biological families, professional agencies and other networks.

Perez and Romo (2011) further support the importance of friends for practical support. They interviewed Latino care leavers about their experiences and found that they often couch surfed and lived with friends, especially where attempts to reconnect with family had been unsuccessful. They described the young people relying on their friends for social capital, using their relationships to build the skills and resources they needed to live independently. This paper related specifically to the experiences of Latino care leavers, who they reported hold strong values of ‘familism,’ or “the valuing of, and reliance on, immediate and extended
families”. They speculated that young people may have been trying to recreate familial networks with peers when reconnecting with families was unsuccessful.

Ridge and Millar (2000) interviewed LAC and care leavers in Ireland to explore the meaning and experience of social exclusion in this group. They found young people valued friendship as a social bond and source of emotional support. Participants valued confidentiality from their friends, in a context where they knew adults in their lives often had a duty to disclose information to others. They believed friends offered a source of safety and protection from bullying. Those who had left care were reliant on friends with limited support from external networks or agencies.

In summary, these studies suggest that LAC and care leavers value their friends for emotional and practical support, information and advice, resources to begin to live independently, protection from bullying and confidentiality. The evidence suggests they may be more dependent on friends for this support where adults are not available or able to provide them.

**Difference and stigma.** Three studies looked at LAC’s experiences of difference and stigma within friendships (Emond, 2014; Ridge & Millar, 2000; Rogers, 2017). Emond (2014) explored the experiences of young people living in residential care homes in Ireland. A theme emerged around the children feeling the same or different to their peers in school. Young people often identified ways that they were the same as their friends, but also had anxiety about standing out as different. As well as being in care, some children had moved area for their placement, so they felt an additional sense of difference and lack of connectedness or belonging. Another aspect of this theme emerged around how the young people “mediated” or managed their “in-care identity” with non-LAC. Children fell into two groups, either feeling it was important that people knew or not telling people and feeling anxious about being
“exposed”. Those who did disclose placed caveats on the information they shared, particularly around reasons for being in care.

Ridge and Millar (2000) reported that children from a range of placement types were afraid of being identified and labelled as “care children”, owing to a strong sense of stigma and social difference being associated with this status. There was, however, limited information on how they managed this fear or the stigma they experienced.

Rogers (2017) used semi-structured interviews and ecomaps to explore the relationships of young people in foster care in the UK. He found they were acutely aware of stigma and discrimination, both with peers and within their close friendships. LAC reported that their friends treated them differently, sometimes with good intentions and trying not to upset them, but this increased their sense of difference, when they wanted to “be normal”. They often had strategies to manage disclosing their care status, similar to those discussed by Emond (2014). However, Rogers (2017) also reported that sometimes disclosure strengthened friendships, particularly with other LAC. Young people in this study valued friends who were also in foster care, as they provided a sense of belonging and understanding, which helped minimise the impact of stigma they experienced in other relationships. The friendships with other foster children were made in both formal settings (e.g. local authority consultation groups) and informally through foster carers being friends with each other.

In summary, these studies demonstrate the stigma and discrimination experienced by LAC in relation to their care status, both from the general peer group and their close friends. They can feel anxious about standing out or being exposed and may put caveats around disclosures. Sometimes disclosure may strengthen a friendship. Friends who treat LAC differently may be doing it with good intentions, but this can increase LAC’s feeling of being different. These experiences can be minimised by having friends who are also LAC, providing a sense of belonging.
Placement moves and rules make it difficult to maintain friendships. Three studies had results demonstrating difficulties specific to LAC in their friendships (McMahon & Curtin, 2013; Ridge & Millar, 2000; Selwyn et al., 2013). McMahon and Curtin (2013) identified that frequent placement moves inhibit contact with friends from previous placements, particularly if there is a long distance between placement and the young person’s original locality. Those who had been in care longer were less likely to have maintained relationships with previous friends. Ridge and Millar (2000) also noted difficulties in making and sustaining friendships throughout placement moves, with one young person commenting that she no longer tried to make friends because she would not be somewhere long enough.

Alongside placement moves, rules and regulations were also perceived to make it difficult for LAC to maintain friendships. Foster carers were sometimes described as discouraging of friendships, so friends were not allowed to visit placement homes and there was frustration around friends’ parents having to undergo police checks (Ridge & Millar, 2000; Selwyn et al., 2010).

In summary, these findings demonstrate the difficulties LAC face when trying to maintain friendships. Placement moves can be particularly disruptive, especially if they are a long distance. Once in a placement, limited carer support, rules around visiting friends and having friends visit the placement can make maintaining friendships challenging.

Hierarchies and values in group residential care. Two studies offered an in-depth exploration of the group friendships of children living within residential care (Emond, 2003; Stokholm, 2009). Although they did not explore in detail the construction of individual friendships, the group were identified as friends by the participants, with some quotations providing examples from dyadic relationships and they offer an interesting view on group friendships within a particular setting. Emond (2003) and Stokholm (2009) took similar ethnographic approaches to examining the groups in Scotland and Denmark. Neither of the
studies stated how many children were involved, but the design means it is likely to be a small number. They both described hierarchies within the group, in terms of the relationships between the residents, who was considered popular, respected and liked. For both authors, advancing up the hierarchy involved demonstrating knowledge, skills and behaviour in line with group values. The values of the peer groups included loyalty and respect, investment in social aspects, helping and sharing, ability to make friends and alliances, toughness and courage to oppose staff, making trouble, support and advice, providing encouragement and sticking up for each other. Stokholm (2009) also reported on a difficulty that may be unique to friendships within this environment, namely difficulties with self-authoring, the ability to actively influence their identity and the way they are perceived by others. It was noted that because children in the unit lived together and attended a unit school together, they were unable to use “impression management” to present themselves in a particular way with their friends, as children who only see each other in school may do, as this would not be manageable full time. This therefore limited their ability to self-author their identity.

In summary, these studies looked at how group friendships are managed and valued within residential care. They show hierarchies within the groups, based on demonstrating knowledge and skills in line with a range of group values. The proximity of LAC in residential care, particularly when associated with a unit school, may present difficulties in the young people’s ability to self-author and present themselves how they may like to.

**Discussion**

These studies demonstrate the role of stability for LAC. In general, LAC may be less likely to have close or best friends than non-LAC, but the majority have at least one friend. However, the number of friends, particularly close friends, LAC report having is associated with the length of time they have been in care and the number of placements they have had. Placement moves were described as disruptive to friendships and LAC may no longer try to make friends
when moving placements. Children who have been in one placement for a longer period are more likely to visit and be visited by their friends, although some raised concerns about the rules around visiting friends’ homes. Perry’s (2006) finding that the strength of peer and foster networks are associated may further indicate this e.g. those who have been in placement longer develop stronger peer and foster care networks than those who have just moved to a placement. Placement stability is likely to support an increase in both foster network and friendship network strength. It may also link with the foster carers’ ability and willingness to encourage and facilitate friendships and perhaps increase friends’ parents’ willingness to undergo checks. These elements fit with a social network theory of friendship, in which factors in LAC’s wider networks impact their ability to make and maintain friendships.

The data is mainly correlational or self-report, so it is not possible to say definitively that placement moves or other care-related factors cause difficulties in making or maintaining friendships. It is possible that young people who find it difficult to build and maintain friendships are also those who are more likely to have experienced significant early life adversity, which leads to difficulties in making relationships leading to placement moves. However, none of the studies offer sufficient granular insight into the level of trauma children experienced to be able to make definitive statements along these lines. Three studies looked at the relationship between behaviour and friendship, which could represent the effects of cognitive-social learning theory or attachment theory. Zimmerman et al. (1997) found LAC were rated by teachers as showing more negative peer behaviour than their classmates and were less likely to have a close friend. However, they did not analyse this link so it is not possible to determine causality. Marcus (1991) also did not comment on the source of behaviour differences so it is not possible to establish whether young people had developed the behaviour through social learning or in a different way, such as in response to internal emotional distress or poor self-regulation. Smith (1995) found foster children who were separated from siblings
directed more negative behaviour towards their friends, and suggested this may lead to developing a relationship style in which aggression and coercive behaviour become common, so children may be at risk of poor interpersonal relationships over time. However, she also reported that negative interactions are more likely during the initial stages of friendship formation and differences may have been due to differences in the length and stability of the friendships, which was not measured. It may also be that if the friends are more likely to be other foster children living in the same home, negative behaviour noted by carers could be seen as typical of young people venting in their domestic households and would be consistent with sibling difficulties within a stressed family.

A number of authors discussed LAC feeling different to other young people and the fear of stigma, with LAC placing caveats around disclosures to friends, particularly about why they were in care. This fits with an understanding that people generally choose to make friends with people who are similar to themselves (Byrne & Griffitt, 1973; Hartup, 1983; Hartup, 1993). LAC’s potential differences in experience, attitudes, values, expectations, access to material goods and cultural capital, may mark them out as different making it harder to make friends. Alternatively, this difference may not be noticed by others, but may be something LAC try to manage or hide within their relationships, making it more difficult for them to engage in self-disclosure and open friendships.

LAC may experience stigma and discrimination which prevent them from making friends. Self-stigma and awareness of their stigmatised status in society may make it harder for LAC to initially approach to form a relationship, or it may be that others are less likely to accept them if they know their care status and attach stigma to it. There may also be a role of courtesy stigma, in which young people do not want to become friends with LAC out of fear they could be stigmatised by association. Alternatively, LAC may be able to make friends, but their focus on limiting disclosure may prevent them moving into deeper stages of friendship involving
trust and intimacy. However, none of the studies reported enough detail to gain a full understanding of where the difficulties lie.

In relation to Levinger and Levinger’s (1986) model of friendship development, these studies suggest various ways that the experiences of LAC could impact their friendships. The process of moving from acquaintance stage into build-up, continuation and consolidation was described as hard by those in new placements. Frequent placement moves may reduce the likelihood of LAC engaging with this process if they do not believe that they will be staying long term. Marcus (1991) found the behaviour of LAC affected the quality of friendships, but not the number of friends young people had. This suggests behaviour may not affect the early stages of relationship formation, but may impact on the ability to form close, supportive friendships, as seen in the continuation and consolidation stage, perhaps making it less likely. However, there is not enough evidence to confirm this. The role of stigma and feeling different is also likely to have an impact on the processes of build-up, continuation and consolidation as LAC may be focused on impression management and mediating their in-care identity, making it difficult to engage in the self-disclosure and trust expected at these stages. Rules and regulations affecting the ability of LAC to spend time with friends are also likely to impact their ability to participate in the build-up stage into continuation and consolidation. Placement moves make it difficult for LAC to maintain previous friendships, so they are likely to experience more deteriorations and endings than their non-LAC peers.

The ethnographies from residential units allowed exploration of the groups’ friendships and relationships. The hierarchies described by Stokholm (2009) and Emond (2003) may be representative of peer group hierarchies in other settings, where most young people value climbing the social hierarchies to be popular, the most liked and respected amongst their friends. However, the residential care system poses unique challenges to this, such as increased time together, which limits self-authoring and impression management, as well as a reduced
number of peers limiting choice of friendship. These studies did not provide much detailed information on dyadic friendships within the group, which makes it difficult to compare findings with other studies in this review.

These studies show that LAC value their friendships as a source of practical and emotional support. They feel their friends are the people they are closest to in the context of absent or difficult family relationships and they value the confidentiality offered by friends in contrast to professional networks, who have a duty to disclose information. Care leavers are particularly reliant on friends as their external support from agencies reduces and they often depend on their friends for resilience, places to live and social capital to become independent. Perez and Romo (2011) highlighted this in Latino care leavers, who place a high cultural value on families. However, peers from other cultural backgrounds may also try to reconnect with families and it seems reasonable that in the absence of family support, care leavers from any culture may become dependent upon friends. Values such as emotional and practical support are likely to be important aspects of friendship for all young people and there is evidence that perceived social support is linked to reduced depression in adolescents (Rueger et al., 2016). These studies highlight ways in which LAC may be more dependent on their friends for these, in comparison to non-LAC who may be able to access them from adults. However, they do not offer much detail on the behaviour or responses that LAC find helpful or supportive.

**Methodological Limitations**

Many of the qualitative studies provided limited information on sampling strategies. For example, Emond (2003), Emond (2014) and Stokholm (2009) used participants from residential childcare units, but did not explain how the units were identified. Perez and Romo (2011), Ridge and Millar (2000) and Rogers (2017) accessed participants through social services, but did not explain the selection of the teams. It is likely that selection was based on convenience and current networks or relationships. This is common in LAC research, but may
limit generalisability. The studies offered some information about participants but, with the exception of Rogers (2017), there was not detailed information on length of time in care or other factors that may have been useful to understand the similarities and differences between samples. These studies also did not explicitly state whether the study was offered to all young people who met criteria or whether they were chosen by social workers, possibly creating a bias. The studies using semi-structured interviews offered limited information on the interview schedules. However, all studies offered description of the general themes that were covered. Emond (2003), Emond (2014), Ridge and Millar (2000), Rogers (2017), Selwyn et al. (2010) and Stokholm (2009) offered a degree of reflexivity in their accounts by considering the power imbalance or relationship between adult researcher and child participant. This was not reported by Perez and Romo (2011) or McMahon and Curtin (2013), so it is difficult to know whether this was considered. None of the papers included a reflective account on the researchers’ perspectives to allow the reader to understand their stance or values and how this may have impacted the research.

Similar to the qualitative studies, some of the quantitative studies were unclear why services were chosen, which may limit replicability and generalisability (McMahon & Curtin, 2013; Smith, 1995; Zimmerman et al., 1997). Marcus (1991) did not provide information on how children were recruited. The rest of the design implies they came through local social services, but as there is no information on their specific selection, no comment can be made on the impact of any bias. Three of the studies involved designs that were dependent on ratings from adults involved in the children’s lives e.g. foster carers, parents and teachers (Marcus, 1991; Smith, 1995; Zimmerman et al., 1997). This allows a perspective from a certain vantage point to be seen. However, if there is incentive to display the child in a particular light, it may introduce bias. This may have been particularly prominent in the Smith study, where the comparison group consisted of children receiving preventative services. They were rated by
their mothers, who are likely to be invested in showing their child functioning well, to reduce any risk of them being taken into care. It is also possible that what is valued in a friend for an adult is different to what is valued by LAC, so the ratings from adults may not represent the views of LAC. Sample sizes were relatively low in most studies adding to the challenge of interpretation. However, they were in line with other LAC research and reflect the challenges in recruiting this participant group. Smith (1995) demonstrated the lowest numbers of participants in each group, with just 13 children in two out of the three groups that were compared. However, all studies either reported only descriptive statistics or had large enough samples to reach significance in statistical comparisons.

Only three of the studies compared LAC with children who were not in care. Perry (2006) used data from a survey given in all high schools, providing a large amount of comparison data. However, the questions and response options relating to friendships differed slightly across groups as they were different surveys, which may affect the interpretation of comparative data. Smith (1995) used LAC and a comparison group of children who were still living with their parents, but accessing preventative services. These children are likely to have experiences that are different to children who are not in receipt of such services, such as increased distress and trauma at home, so they are a non-typical sample of children living at home. Zimmerman et al. (1997) used children from the same classrooms as the LAC as their control. They were matched on age, gender and for most of the sample, ethnicity. They could therefore be assumed to be similar across a range of domains although there may be differences in class or culture dependent on where LAC had been placed in relation to their original environments. This also provides a direct comparison of children within a typical context for the development of friendships.

Much of the research is now quite dated, particularly the quantitative studies, which date from 1991 to 2006. The qualitative studies were published between 2003 and 2017, so
may be a slightly more relevant reflection of LAC friendships in modern society, in which young people have different experiences and pressures in their lives and relationships. However, none of the studies report on the role of technology or social media, which may be a hugely influential part of modern friendship for adolescents.

**Conclusion**

This literature review aimed to answer the question “How are the friendships of LAC constructed?”. In conclusion, these studies show LAC often have friends and value these relationships, particularly in the absence of family support or confidentiality in other relationships. However, they encounter various challenges in making and maintaining friendships. These relate to placement moves, possible links with their behaviour, stigma and feeling different. There is not enough evidence for firm theoretical conclusions to be drawn, but attachment, cognitive-social learning, social network factors and perceived difference from peers may play a part in the challenges LAC encounter. These challenges may prevent LAC from moving from acquaintance into consolidated friendships and mean that they encounter more endings in their friendships. The studies often lack sufficient specificity regarding their selection and recruitment process and have low participant numbers, which is reflective of much of the research with LAC. There is limited comparison with similar cohorts of children who are not in care, so it is difficult to draw conclusions about the impact of care on friendship.

Future research could focus on identifying whether there are unique issues or benefits in the friendships of LAC when compared with other young people. It would also be helpful to make clearer theoretical links between attachment, behaviour, friendship numbers and quality and care related variables. This would help clarify the reasons why some LAC experience difficulties in friendships.

In order to support LAC to overcome some of the challenges they experience, it is also important to gather further detail on the exact values and expectations they place on their
friendships. If more is known about the behaviour and responses that LAC find helpful from their friends, it will aid the design of interventions to help them achieve the relationships they need.

References


Appendix: Child and Family Social Work Guidelines for Authors

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Part Three: Summary of Clinical Experience

YEAR 1: Adult Mental Health (November 2015 – September 2016)

Setting: Acute Psychiatric Hospital and Early Intervention for Psychosis Service.

Clients and presenting difficulties: Adults (mainly aged 18-65) with mental health difficulties. Presentations included first episode psychosis, unusual beliefs, hearing voices, depression, anxiety, emotional intensity, agoraphobia, health anxiety, bipolar disorder, obsessive-compulsive disorder, acute stress reactions, trauma and cognitive difficulties.

Main models used: CBT, systemic and neuropsychological models.

Modes and types of work: Direct individual work, family work, indirect work, consultation, joint working with other professionals and teaching to staff.

YEAR 2: Learning Disabilities (October 2016 – March 2017)

Setting: Community Team for People with Learning Disabilities.

Clients and presenting difficulties: Adults (aged 18 + years) with a learning disability, ASC and mental health difficulties. Presentations included dementia, relational difficulties, challenging behaviour, depression, and bereavement.

Main models: CAT, systemic, neuropsychological and positive behaviour support.

Modes and types of work: Direct work with individuals and families, consultation and indirect work with staff teams, presentation to psychology team, neuropsychological assessment.

YEAR 2: Children and Adolescents (April 2017 – September 2017)

Setting: Child and Adolescent Mental Health Service and Looked After Children Service

Clients and presenting difficulties: Children and adolescents (aged up to 18 years) with moderate to severe mental health problems. Looked After Children with mental health
difficulties. Presentations included OCD, low self-esteem, anxiety, depression, cognitive difficulties, social anxiety, ASC and relational difficulties.

**Main models:** CBT, systemic, neurodevelopmental trauma and neuropsychological models.

**Modes and types of work:** Direct individual work, indirect work with parents and schools, neuropsychological assessment, consultation, joint work with other professionals, presenting and training to staff.

**YEAR 3: Older Adults (October 2017 – March 2018)**

**Setting:** Community Mental Health Team for Older People

**Clients and presenting difficulties:** Older adults (mainly aged 65 + years) with mental health difficulties or cognitive difficulties. Presentations included dementia, depression, anxiety, bipolar disorder, pain and relational difficulties

**Main models:** CBT, systemic, CAT, ACT and neuropsychological models.

**Modes and types of work:** Direct work with individuals and groups, neuropsychological assessment, training staff, consultation, service development.

**YEAR 3: Specialist (April 2018 – September 2018)**

**Setting:** Complex depression and anxiety service.

**Clients and presenting difficulties:** Adults (aged 18+ years) with complex depression and anxiety. Presentations included depression, anxiety, relational difficulties, pain, complex bereavement, social anxiety and trauma.

**Main models:** ACT, Compassion focused therapy, CBT.

**Modes and types of work:** Direct work with individuals and group, service development, training staff.
### Part Four: Assignments Completed During Training

#### Year I Assessments

<table>
<thead>
<tr>
<th>ASSESSMENT</th>
<th>TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>WAIS</td>
<td>WAIS Interpretation (online assessment)</td>
</tr>
<tr>
<td>Practice Report of Clinical Activity</td>
<td>A cognitive behavioural assessment and formulation with James, a man in his mid-forties presenting with depression.</td>
</tr>
<tr>
<td>Audio Recording of Clinical Activity with Critical Appraisal</td>
<td>Critical appraisal of an audio recording of clinical activity with Andy, a male client in his 20s presenting with depression.</td>
</tr>
<tr>
<td>Report of Clinical Activity N=1</td>
<td>Report of clinical activity with Adam, a man in his early twenties presenting with depression.</td>
</tr>
<tr>
<td>Major Research Project Literature Survey</td>
<td>Literature survey of the peer relationships of Looked After Children and children who have been abused.</td>
</tr>
<tr>
<td>Major Research Project Proposal</td>
<td>MRP Proposal</td>
</tr>
<tr>
<td>Service-Related Project</td>
<td>Qualitative evaluation of service user views of Step 2 OCD information workshops.</td>
</tr>
</tbody>
</table>

#### Year II Assessments

<table>
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<tr>
<th>ASSESSMENT</th>
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</thead>
<tbody>
<tr>
<td>PPLD Process Account</td>
<td>A Reflective Account of the Experience of Attending a Personal and Professional Learning Discussion Group</td>
</tr>
</tbody>
</table>

#### Year III Assessments

<table>
<thead>
<tr>
<th>ASSESSMENT</th>
<th>TITLE</th>
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</thead>
<tbody>
<tr>
<td>Presentation of Clinical Activity</td>
<td>A Cognitive Behavioural assessment, formulation and intervention with Annabelle, a young person experiencing Obsessive Compulsive Disorder, stress and low mood.</td>
</tr>
<tr>
<td>Major Research Project Literature Review</td>
<td>Looked After Children’s Friendships: A review of the literature examining the way that Looked After Children’s friendships are constructed.</td>
</tr>
<tr>
<td>Major Research Project Empirical Paper</td>
<td>The Construction of Friendship for Looked After Children</td>
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<tr>
<td>Report of Clinical Activity – Formal Assessment</td>
<td>A neuropsychological assessment of Jane, a woman in her late sixties with memory difficulties, anxiety and depression.</td>
</tr>
<tr>
<td>Final Reflective Account</td>
<td>Changing Me, Changing My Models and Widening the Lens: A reflective account of my development during clinical psychology training.</td>
</tr>
</tbody>
</table>