

**A Psycho-social Exploration of the Lifelong Impact of Being in Care as  
a Child and Resilience over a Life Span**

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A thesis submitted in partial fulfilment of the requirements for the degree of

Doctor of Philosophy

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Centre for Psycho-social Studies

December 2014

Word count: 72,500

## **Abstract**

Care experienced adults (adults who were in foster care, kinship care, residential care or were adopted as children) are assumed to be more vulnerable than the general population across numerous domains: educational underachievement, unemployment, poverty, substance abuse, difficulties with parenting and homelessness. There are care experienced adults who appear to be less vulnerable than other care experienced adults in some or all of the domains and are therefore thought to be more resilient. The current, dominant conception of resilience views resilience as positive adaptation to adversity (including risk and trauma) and a dynamic interaction between the individual and the environment. However, there are significant caveats in existing research about care experienced adults and resilience; one is that researchers have focussed mainly on children and young adults and the other is that both areas are conceptually weak and largely atheoretical.

The first research aim is to understand the lived experience of having been in care and the impact of this experience over the life span. The second is to explore the way in which care experienced adults construct their resilience, in other words, how they talk about their vulnerabilities and strengths. A further aim is to contribute to the task of developing an adequate theory of resilience.

Research methods combined a life span approach to explore the lived experience pre-care, in-care and post-care, in combination with a grounded theory approach to integrate the participants' constructions of their resilience with the data. A psycho-social approach was utilised to address current deficits such as perceiving the environment and the individual as largely separate spheres, which created the ability to move beyond this separation and to look at the ways in which the internal and external worlds constantly affect each other. Employing psychoanalytic theory around trauma in the analysis facilitated a deeper understanding of how individuals manage traumatic experience.

The findings revealed that the experience of being in care had the potential to be traumatic, emotionally toxic and overwhelming or containing and supportive and its effect typically lasted throughout the life span. When participants reflected upon their resilience there were two distinct spaces that they had inhabited, one when the struggle for stability and emotional or physical survival dominated and the other when there was greater stability and fewer struggles. Moreover, the ability to negotiate a path through such struggles for survival or maintain a position beyond survival was the result of the dynamic interaction between inner and outer world resources and threats. My research offers new possibilities for conceptualising resilience, grounded in the participants' own constructions and integrated with a robust theoretical discipline: psychoanalytic thinking around concepts such as cumulative trauma, the management of traumatic experience, unconscious methods for structuring experience and learnt strategies that are employed as defence mechanisms.

## Contents

Title	Page
Abstract	ii – iii
Contents	iv – vii
Acknowledgements	viii
Chapter 1: Introduction – Statement of Objectives 1.1 Research on adults who were in care as children 1.2 Resilience research 1.3 Gaps in the existing literature 1.4 Aims of this research 1.5 Overview of methods 1.6 Overview of chapters	1 - 8
Chapter 2: Autobiography	9 - 26
Chapter 3: Care Experienced Adults 3.1 Introduction 3.2 Foster & residential care 3.3 Kinship care 3.4 Transracial adoption 3.5 Discussion 3.6 Conclusions	27 - 48
Chapter 4: Resilience 4.1 Introduction 4.2 Resilience in children at risk 4.3 Resilience in care experienced children and adults 4.4 A critical appraisal of existing resilience research 4.5 Conclusions	49 - 66

<p>Chapter 5: Thinking Psycho-socially about Resilience</p> <p>5.1 Developments in psycho-social understanding</p> <p>5.2 Resilience, adversity and trauma</p> <p>5.3 Conclusions</p>	67 - 76
<p>Chapter 6: Methods</p> <p>6.1 Introduction</p> <p>6.2 Grounded theory</p> <p>6.3 A life story approach</p> <p>6.4 A psycho-social approach</p> <p>6.5 Reflexivity and positionality</p> <p>6.6 Preparing for the interviews</p> <p>6.7 Taking care of the participants and ethics</p> <p>6.8 Using counselling skills in qualitative research</p> <p>6.9 The sample</p> <p>6.10 Life story interviews</p> <p>6.11 Initial analysis of the life story interviews</p> <p>6.12 Creating a table of resilience for each participant</p> <p>6.13 The resilience interviews</p> <p>6.14 Analysing the data</p>	77 - 100
<p>Chapter 7: Four Life Stories</p> <p>Mac</p> <p>Reggie</p> <p>Irene</p> <p>Joy</p>	101 - 144
<p>Chapter 8: Findings – The Dynamics of Resilience</p> <p>8.1 Introduction</p> <p>8.2 Survival</p> <p>8.3 External threats</p> <p>8.4 Unconscious ways of structuring experience</p> <p>8.5 Learnt strategies for dealing with self and others</p>	145 - 178

<p>8.6 Internal threats</p> <p>8.7 External resources</p> <p>8.8 Internal resources</p> <p>8.9 Transformational events/experiences</p> <p>8.10 Beyond survival</p> <p>8.11 Reflections</p> <p>8.12 A diagram of the dynamics of resilience</p>	
<p>Chapter 9: The Experience of Conducting Psycho-social Research</p> <p>9.1 My position within the process</p> <p>9.2 Exploring the overlap between counselling (clinical) and research skills</p> <p>9.3 Interviewing Joy – A transpersonal experience</p> <p>9.4 Interviewing Mac – Making use of reflexive field notes</p> <p>9.5 Acknowledging the importance of dissociation as a component of resilience</p> <p>9.6 The participants’ reflections on taking part in the research</p> <p>9.7 The impact on me as a researcher – the demands of psycho-social research at the analysis stage</p> <p>9.8 Summary of new insights and discoveries</p>	179 - 199
<p>Chapter 10: Conclusions</p> <p>10.1 Introduction</p> <p>10.2 Findings</p> <p>10.3 The theoretical implications of my findings</p> <p>10.4 Policy implications</p> <p>10.5 The study’s limitations and dilemmas</p> <p>10.6 Recommendation for future research</p>	200 - 211

Bibliography	212 - 227
Appendices	228 - 283
A.1 Key characteristics of studies on care experienced adults	
A. 2 Key characteristics of resilience studies (12)	
A. 3 Individual tables of resilience	
A.4 Individual resilience profiles	
A.5 Helpline numbers and websites	
A.6 Recruitment flyer	
A.7 Information leaflet for participants	
A.8 Consent form	
A.9 Telephone interview questionnaire	

## **Acknowledgements**

*This thesis is dedicated to all care experienced adults and all children currently 'in care'.*

Without Mac, Reggie, Irene and Joy none of this would have been possible. As participants they were so generous with their truly inspirational stories and have made an extraordinary contribution to our understanding of the care experience and resilience. Many other individuals have played an important role during this long journey; the last nine years would have been so much more difficult without my partner Mike Smith who was there for me emotionally, practically and financially from the very beginning to the very end. Our three children - Nic, Naomi and Sebastian have all triumphed over so many difficulties in their young lives and taught me so much about the resilience of young people.

Paul Hoggett has been my Director of studies for the last six years. So much of our journey is beyond description in the written form. However, what I can say is that Paul helped me to hold all of this together with his infinite patience and shared passion for understanding resilience. Harry Ferguson gave me the encouragement which I needed at the beginning of my journey and has always been there at the right time with his laser-like clarity of thought and ability to make me giggle. Elaine Farmer and Perlita Harris contributed to the supervision process at key stages and their input has been invaluable. Lynn Maddern was my first ever peer supervision buddy.

Benno Grzimek, Chris McCourt, Malve Fehrer, Lizzie Goodchild, John Lewer and Roz Tremain have been listening ears and so much more throughout the entire process. Tom Kamps, Rebecca Hutton, Shakira Lewis and Militsa Stojanovic were all there for me, unconditionally during what seemed like the darkest times. My Craniosacral therapist Matthew Appleton provided wisdom, generosity and support at every level over the last nine years. Finally, my three cats - Kitty who was with me at the beginning, and Fluffy and The Professor, who came along halfway through to lessen the loneliness. They were outstanding muses and masters of the art of reverie.