

Research
report

10,000 voices

the views
of children in
care on their
well-being

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**The
Your Life,
Your Care
Surveys**

Introduction

This is the third report exploring what we have learnt from the *Your Life, Your Care* surveys that are part of the Bright Spots Programme. It is an analysis of 9,472 responses from children and young people (aged 4-18 years) collected between 2016 and 2021 from 38 Local Authorities in England. The findings build on previous overview reports¹ and the pilot stage in 2015 that involved 611 children and young people. Therefore, by 2021 we had gathered over 10,000 voices from children in care in England.



The Bright Spots Programme began in 2013 with the aim of understanding children and young people's experience of care. The Programme uses three online surveys of well-being to capture the views of looked after children (age 4-7 years and 8-10 years) and young people (11-18 years).² The surveys were co-produced with 140 looked after children and young people and the methodology to create and validate the children's surveys has been reported elsewhere.³

The co-production involved developing a series of questions to capture what was important to children and young people. Those questions became the Programme's indicators of well-being (Figure 1). Conceptually, the *Your Life, Your Care* surveys cover eudaemonic (the experience of meaning and purpose in life e.g., positivity about the future) and hedonic (pleasurable experiences, e.g. happiness) aspects of well-being.

¹ Selwyn, J. & Briheim-Crookall, L. (2017) *Our Lives, Our Care: Looked after children's views on their well-being*. <https://coramvoice.org.uk/wp-content/uploads/2021/01/Our-Lives-Our-Care-2016-FULL-REPORT-2.pdf> & Selwyn, J., Magnus, L. & Stuijzand, B (2018) *Our Lives, Our Care: Looked after children's views on their well-being in 2017* <https://coramvoice.org.uk/wp-content/uploads/2021/01/Our-Lives-Our-Care-2017-full-report-2.pdf>

² The surveys are often completed in school and therefore the primary/junior school survey for age 8-10yrs also includes some children who were 11yrs old.

³ Selwyn, J., Wood, M., & Newman, T. (2016). Looked after children and young people in England: Developing measures of subjective well-being. *Child Indicators Research*, 10(2), 363–380. Zhang M and Selwyn J The subjective well-being of children and young people in out of home care: psychometric analyses of the "Your Life, Your Care" survey, *Child Indicators Research*, 13(5), 1549–1572.

Figure 1: *Your Life, Your Care* Bright Spots well-being indicators



The *Your Life, Your Care* surveys contain questions (indicators) that make up four well-being domains: relationships, resilience, rights, and recovery. There are 16 core questions appearing in every survey:

- 18 questions for children aged 4-7
- 34 questions for children aged 8-10
- 49 questions for young people aged 11-18

All the questions are optional to allow children to make their own decisions about which questions they answer and therefore the number of responses differs by question. There is a further survey, *Your Life Beyond Care*, that measures the subjective well-being of care leavers.⁴ Further detail on the surveys, how they are distributed, and the method of analysis can be found in the Appendix.

⁴ Briheim-Crookall, L. Michelmore, O. Baker, C. Oni, O. Taylor, S. & Selwyn, J. (2020) *What Makes Life Good, Care leavers' views on their well-being* <https://coramvoice.org.uk/wp-content/uploads/2020/11/1883-CV-What-Makes-Life-Good-Report-final.pdf>

The local authorities (LAs) that commission the *Your Life, Your Care* surveys are provided with a detailed report exploring their children and young people's responses. The responses are compared to the average response of looked after young people in other LAs, those of peers in the general population, and the change in responses over time for LAs who repeat the surveys. Some of the survey questions mirror questions asked of children and young people in the general population. In this report, where possible, comparisons are made with data published on peers in the general population.

The main general population data sources used for comparison are:

UK Longitudinal Household Survey (known as 'Understanding Society') is a longitudinal study covering 40,000 households in the UK. A representative, random sample of households is interviewed each year with questions completed by adults and children.⁵ The youth questionnaire contains questions on relationships with parents, subjective well-being, and other aspects of children's lives. In 2017-18, 2,800 children aged 10-15yrs completed the Youth Questionnaire. The data from 2018 was downloaded from the UK Data Archive and frequencies were calculated on selected questions.

The Children's Society Household Surveys Since 2010, The Children's Society has conducted household surveys with parents and children aged from 8 to 17 years. The surveys ask about children's well-being, their families, and other issues. Findings are reported annually in The Good Childhood Report and also by the Office of National Statistics in their publication of national measures of children's well-being: <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/datasets/childrenswellbeingmeasures>. Data available in 2020 are used in this report.

Children's Worlds, International Survey of Children's Well-being (<https://iscweb.org/>). This project began in 2009 and has collected data from children on their well-being. Data has been collected from over 128,000 children from 35 countries. The England National Report⁶ used data from 2019-2020 from 712 children (9-11yrs).

The Health Behaviour in School-Aged Children is an international study that has been running since 1997. Findings from the 2018 England report where 3,398 young people aged 11, 13 and 15 years old gave responses to questions on liking school have been used as a comparison [Reports – HBSC England](#).

The Millennium Cohort study (also known as Child of the New Century) is following the lives of around 19,000 young people born in the UK in 2000-2002 (<https://cls.ucl.ac.uk/cls-studies/millennium-cohort-study/>). Data were downloaded from the UK data archive on selected responses at age 7yrs and 11yrs.

We begin this report by considering the characteristics of the children and young people who completed the surveys.

⁵ University of Essex, Institute for Social and Economic Research, NatCen Social Research, Kantar Public. (2020). *Understanding Society: Waves 9, 2017-18* UK Data Service. SN: 6614, <http://doi.org/10.5255/UKDA-SN-6614-14>

⁶ Rees G and Bradshaw J (2020) *Children's Worlds National Report England* <https://iscweb.org/wp-content/uploads/2020/08/England-National-Report-Wave-3.pdf>

Who responded

Number of responses

Surveys were completed between September 2016 and March 2021 by 3,905 children (age 4-10 years) and 5,567 young people (aged 11-18yrs) looked after by 38 English local authorities (Table 1).

The average survey return rate was 34%, with the return rates from individual local authorities varying between 18% and 84%. Most surveys (about 90%) were completed by children and young people before the first national Covid-19 lockdown in March 2020.



Table 1: The number of responses by year of survey completion

Age	2016-17	2017-18	2018-19	2019-20	2020-21	Total number	Total proportion
4-7yrs	464	397	272	252	97	1,482	16%
8-10yrs	730	655	441	404	193	2,423	25%
11-18yrs	1,305	1,630	941	1,065	626	5,567	59%
Total	2,499	2,682	1,654	1,721	916	9,472	100%

Sex and age of children and young people

Boys were slightly under-represented in the survey responses: 51% in our sample compared with 56% in the national care population.⁷

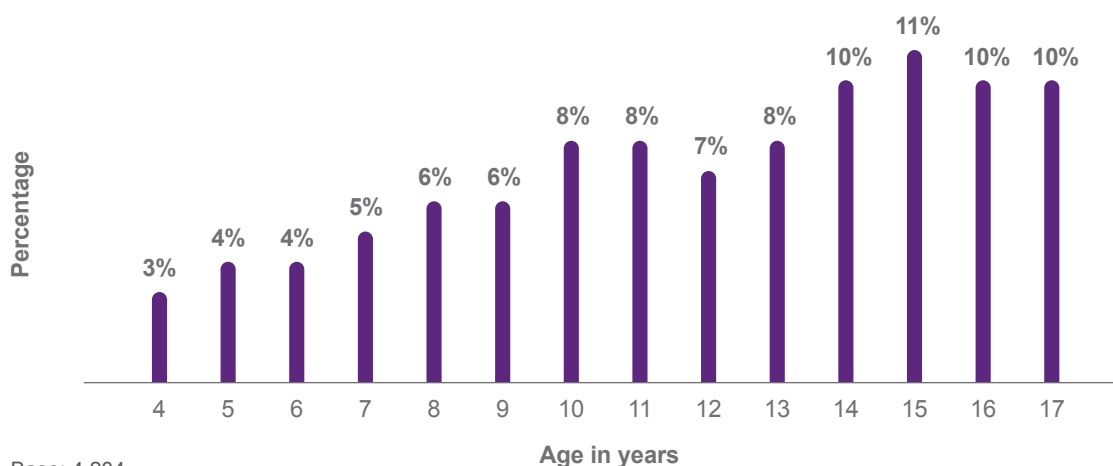
Table 2: Children and young people's sex by age group

Age	Boys	Girls	Prefer not to say	Missing response	Total
4-7yrs	762 (51%)	711 (48%)	- 0%	9 (1%)	1,482 (100%)
8-10yrs	1,243 (51%)	1,128 (47%)	42 (2%)	10 (0%)	2,423 (100%)
11-18yrs	2,838 (51%)	2,576 (46%)	85 (2%)	68 (1%)	5,567 (100%)
Total	4,843 (51%)	4,415 (47%)	127 (1%)	87 (1%)	9,472 (100%)

The majority (59%) of responses came from young people of secondary school age, a quarter (25%) were aged 8-10 years, and the youngest group (4-7yrs) made up about 16% of the total sample (Table 1 and Table 2).

Since 2018, the surveys have collected the child or young person's age and the age distribution is shown in Figure 2 below. Data on ages were available for 44% of the sample.

Figure 2: The distribution of responses by age



⁷ Department for Education (2021) *Children looked after in England including adoption*
<https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2020-to-2021>

Ethnicity of children and young people

It is difficult to know whether children and young people of different ethnicities were appropriately represented in our samples (Table 3). National data are not published connecting the ethnicity and age of children in care. Published data shows that overall, 74% of the care population were White⁸ compared with 68% in our total sample. However, in our sample, the percentage of children who identified as White decreased as the child's age increased: 81% of children aged 4-7yrs were White decreasing to 63% in the 11-18yrs age group. We would expect the proportion of White young people to be smaller in the older age range, as previous research⁹ has found that Black children tend to enter care later than White children and 6% of the total care population are unaccompanied asylum-seeking young people. The 'Other' ethnic group might be under-represented in the survey responses: 2% in our survey compared with 4% in the whole care population. However, we also know that the young people in the survey sometimes described their ethnicity differently than the official ethnicity categories.¹⁰ For example, young people who would in the DfE statistics be categorised as 'Other' sometimes ticked the 'Asian' category in this survey.

Table 3: Children and young people's ethnicity by age group

Ethnicity	4-7 years		8-10 years		11-18 years		Total	
	n	%	n	%	n	%	n	%
White	1,211	81%	1,704	72%	3,487	63%	6,402	68%
Mixed	112	8%	372	15%	805	15%	1,289	14%
Black	88	6%	186	7%	624	11%	898	9%
Asian	27	2%	62	3%	402	7%	491	5%
Other	6	-	9	-	141	2%	156	2%
Missing data	38	3%	90	3%	108	2%	236	2%
Total	1,482	100%	2,423	100%	5,567	100%	9,472	100%

At the time of the survey, young people (11-18yrs) of Asian and Other ethnicities were on average older (mode¹¹ age 17yrs) compared with Black (15yrs), White (14yrs) or Mixed ethnicity (13yrs) young people.

⁸ Department for Education (2021) Children looked after in England including adoption. <https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2019-to-2020>

⁹ Bywaters, P., Kwhali, J., Brady G., Sparks, T. & Bos, E. (2017) Out of Sight, Out of Mind: Ethnic Inequalities in Child Protection and Out-of-Home Care Intervention Rates, *The British Journal of Social Work*, 47, 7, 1884–1902.

¹⁰ Lewis, S. et al., 2021 *Staying Connected: children and young people's views of their contact arrangements*. Rees Centre/Coram Voice <https://coramvoice.org.uk/for-professionals/bright-spots/resource-bank/staying-connected/>

¹¹ The mode is the most frequently occurring age

Placement types and length of time in care

Children and young people also supplied information on where they were living (Table 4).

Table 4: Children and young people’s placements by age group

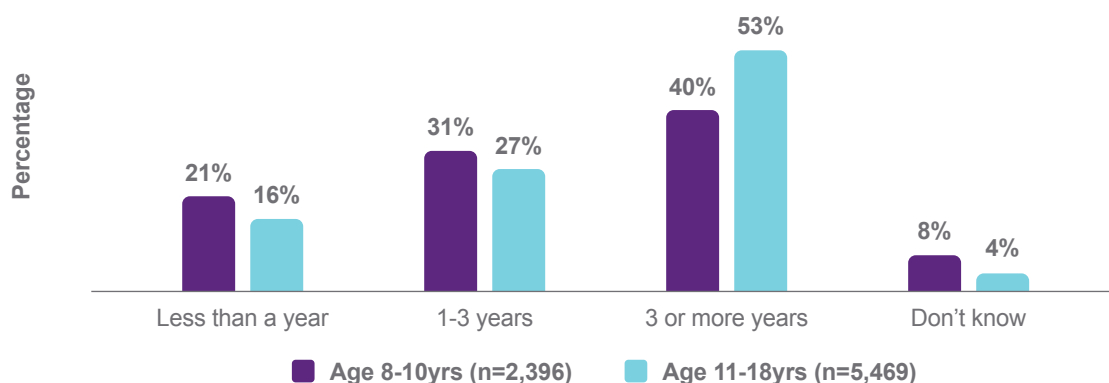
Placement	4-7 years		8-10 years		11-18 years		Total	
	n	%	n	%	n	%	n	%
Foster care	1,073	72%	1,892	78%	3,885	70%	6,850	72%
Family or friends	314	21%	386	16%	516	9%	1,216	13%
With parents *	41	3%	49	2%	105	2%	195	2%
Residential care	14	1%	63	3%	667	12%	744	8%
Somewhere else	-	-	10	-	308	6%	318	4%
Missing data	40	3%	23	1%	86	1%	149	1%
Total	1,482	100%	2,423	100%	5,567	100%	9,472	100%

*From 2018, a new response option ‘With parents’ was added to the survey. Before 2018, those living with parents were included in the category of ‘living with family or friends.’

The distribution of placement types was similar to the national DfE statistics, which reported that 72% of all looked after children were in foster care and 13% of young people in a residential placement on March 31st 2020.¹² Young people who responded “somewhere else” were mainly aged between 16-18 years and wrote that they were in temporary or supported accommodation, prison or hospital.

Children (8-10yrs) and young people (11-18yrs) were asked how long they had been in care. Just over half (53%) of young people (11-18 years) had been in care for three or more years as had 40% of those aged 8-10 years.

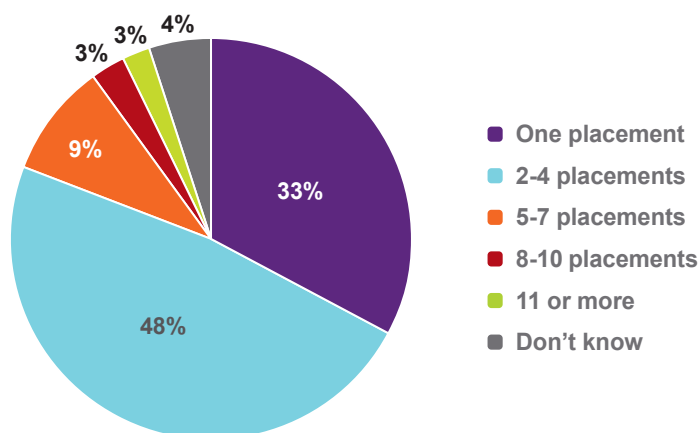
Figure 3: Length of time in care



Only those aged 11-18yrs were asked how many placements they had experienced whilst in care. A third of young people had experienced a single placement, 48% between 2 and 4 placements, and 15% had had five or more (Figure 4).

¹² Department for Education (2021) *Children looked after in England including adoption*.
<https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2019-to-2020>

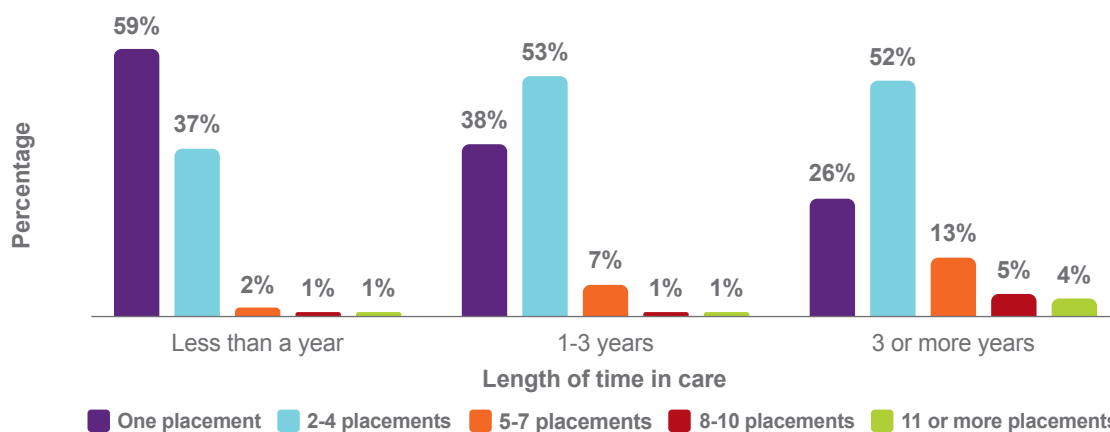
Figure 4: Number of placements since entering care for young people



Base 5,477 11-18yrs

As expected, the length of time in care was correlated with the number of placements (Figure 5).

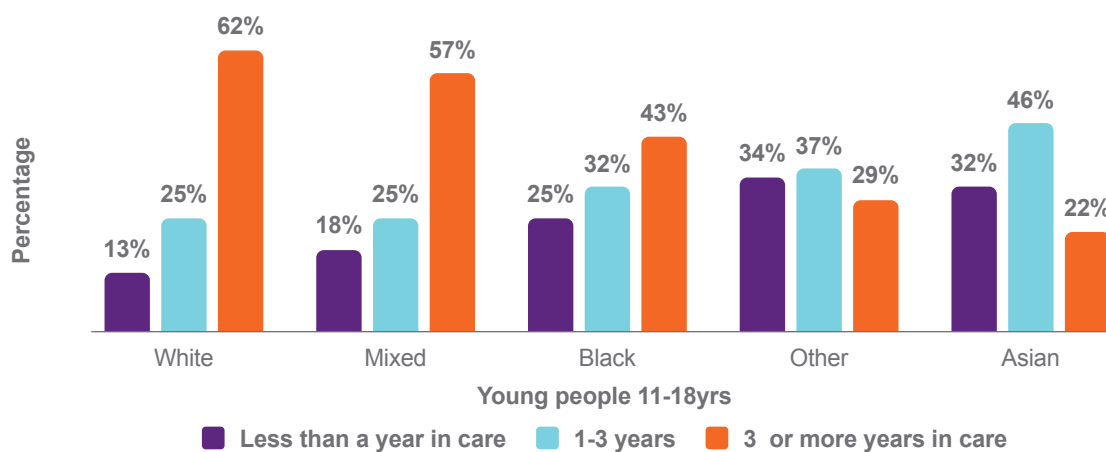
Figure 5: Length of time in care and number of placements



Base 5,017 11-18yrs

The young person's ethnicity was also associated with the length of time in care and the number of placements. On average White and Mixed ethnicity young people had been in care for longer compared with young people of Asian, Black, or 'Other' ethnicities (Figure 6).

Figure 6: Young people's ethnicity and their length of time in care



Base 5,162 11-18yrs

We would expect that because White and Mixed ethnicity young people had, on average, been looked after for longer they might have had more placements and Asian young people fewer and that was the case (Table 5). Asian young people had fewer changes of placement whilst young people of Mixed and White ethnicity had the most.

Table 5: Number of placements by the young person's ethnicity

Number of placements	White %	Asian %	Other %	Black %	Mixed %
1-4	84%	96%	88%	85%	82%
5 or more	16%	4%	12%	15%	18%
Total	100%	100%	100%	100%	100%

Base 5,183 age 11-18yrs

The next chapter reviews how children and young people recorded their feelings about their relationships.

Summary - who responded

- ▶ Surveys were completed by 9,472 children (4-10yrs) and young people (11-18yrs) from 38 English local authorities between 2016 and 2021. About half (51%) were boys, 48% were girls and 2% preferred not to say or skipped the question. Boys were slightly underrepresented compared with national statistics.
- ▶ 72% were in foster care, 15% living in kinship care (including those living with parents), 8% living in residential care and 4% were living somewhere else, usually in supported or temporary accommodation; similar proportions as reported in the national DfE statistics.
- ▶ Nearly a third (32%) were of Black, Asian, Mixed or Other ethnicities. At the time of the survey, young people of Asian and Other ethnicities were on average older (mode 17yrs) compared with the Black (15yrs), White (14yrs) or Mixed (13yrs) ethnicity young people.
- ▶ Just over half (53%) of young people (11-18yrs) had been in care for three or more years as had 40% of those aged 8-10yrs. On average, White and Mixed ethnicity young people had been in care for longer compared with young people of Asian, Black, or 'Other' ethnicities.
- ▶ More years in care were associated with more placements. A third of young people (11-18yrs) had a single placement, 48% had between 2 and 4 placements, and 15% had experienced five or more placements. A larger percentage of White and Mixed ethnicity young people had experienced five or more placements.



The *Your Life, Your Care* surveys contain questions that ask children and young people about whether they have a trusted adult in their life, their relationship with the adults they live with (carers), and their relationships with social workers, friends, and families. There is also a question that asks about pets, as children who helped develop the survey told us that pets provided an important relationship too. Children and young people who supported the development of the survey identified trust as key to having positive relationships and also emphasised the importance of feeling trusted by others. Trust is further explored in Chapter 4.



Trusted adult

I used to not be able to trust anyone and now I can trust people who I know won't let me down like others have in the past.

11-18yrs

Research on the recovery of children who experienced traumatic events has highlighted the protective role of a trusted adult.¹³ Having a trusted adult is also the most important single factor to prevent children from being (re)abused. The children and young people who helped co-produce the *Your Life, Your Care* surveys thought that having a trusted adult was very important for their well-being. They described a trusted adult as someone dependable, reliable, and who would not give up on them.

Q:

In our surveys, children (8-10yrs) and young people (11-18yrs) were asked, 'Do you have an adult who you trust, who helps you and sticks by you no matter what?'

More than 9 out of 10 children in care had an adult that they could trust, but the proportion who felt that there was a trusted adult in their lives decreased for older teenagers and those living in residential care or 'somewhere else'.

¹³ Pringle, J., Whitehead, R., Milne, D. et al. (2019) *The relationship between a trusted adult and adolescent outcomes*: http://www.healthscotland.scot/media/2325/the-relationship-between-a-trusted-adult-and-adolescent-health-outcomes_6588.pdf

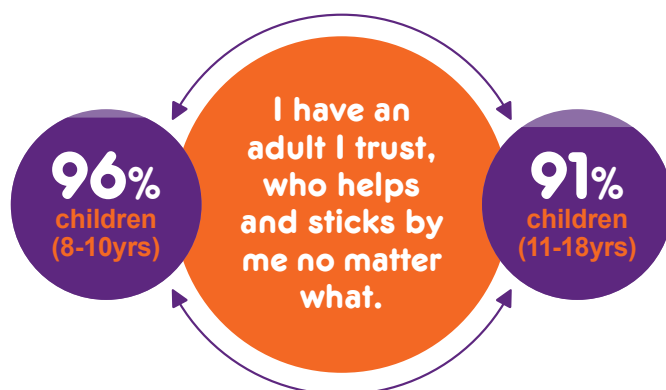
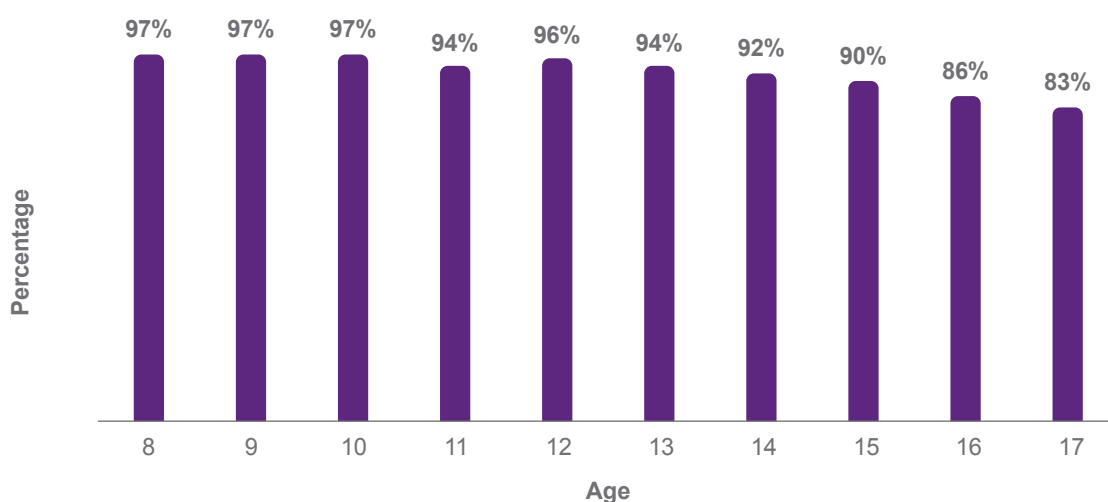


Figure 7: Percentage of children who had a trusted adult by age



Base: 3,540

There was little variation in the responses on the presence of a trusted adult by the sex of the child or young person but there was variation by ethnicity, the local authority¹⁴ and the placement type.

- ▶ White and Mixed ethnicity young people (11-18yrs) more frequently reported having a trusted adult in their lives: White (94%), Mixed ethnicity (91%) Asian (82%), Black (82%) and Other (81%) ethnicities.
- ▶ Between 66% and 100% of young people felt they had a trusted adult in their lives depending on the local authority caring for them.
- ▶ A quarter of those aged 11-18yrs living 'somewhere else' and 14% of those in residential care did not have a trusted adult compared with 8% of young people 11-18yrs in foster care and 5% in kinship care.¹⁵

¹⁴ Suh E. and Selwyn J. (2022) Exploring local authority variation in looked after young people's subjective wellbeing, *British Journal of Social Work* bcac117, <https://doi.org/10.1093/bjsw/bcac117>

¹⁵ $\chi^2 = 126.626$, [n=5,353], df3, p < .001

Relationship with carers

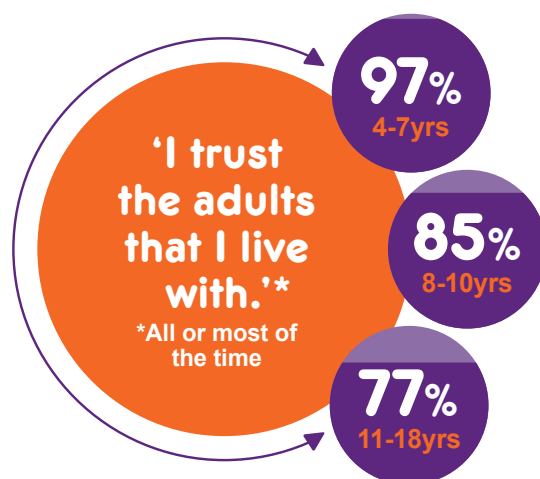


I really trust
my carers and
love living
with them.

8-10yrs

Trust in carers

Having loving and caring relationships with primary caregivers is important for all children's healthy development. Children and young people in care need their caregivers to provide the same caring relationships.¹⁶



Q:

Children and young people were asked whether they trusted the adults who were caring for them. The youngest children (4-7yrs) had two response options: 'mostly yes' and 'mostly no'. Children aged 8-10yrs and young people aged 11-18yrs had four possible responses: 'all/most of the time', 'sometimes', 'hardly ever' and 'never.'

The majority of children trusted their carers, but the proportion who trusted their carers decreased for the older age groups and those in residential care or living somewhere else.

¹⁶ University of Bristol & Coram Voice (2015) *Children and Young People's Views on Being in Care A Literature Review*.
<https://coramvoice.org.uk/wp-content/uploads/2021/01/Childrens-views-lit-review-FINAL-2.pdf>

- ▶ 97% aged 4-7yrs, 85% aged 8-10yrs, and 77% of young people aged 11-18yrs trusted the adults that they lived with 'all/most of the time'.

Figure 8: Trust in carer by placement type 4-7yrs

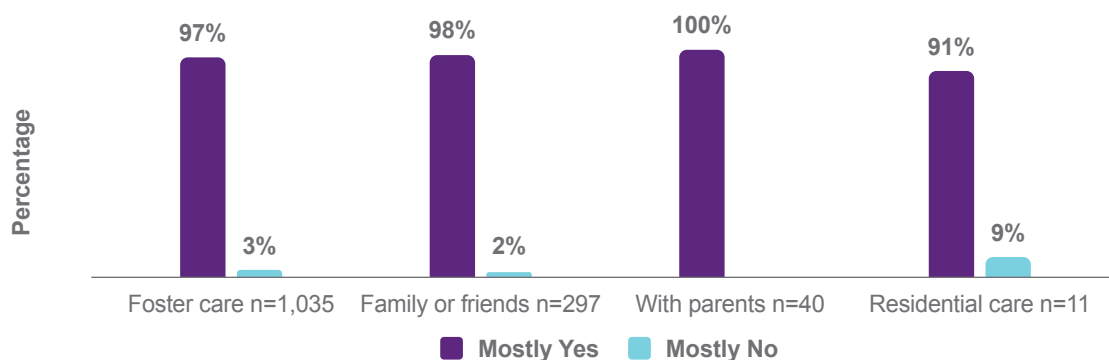
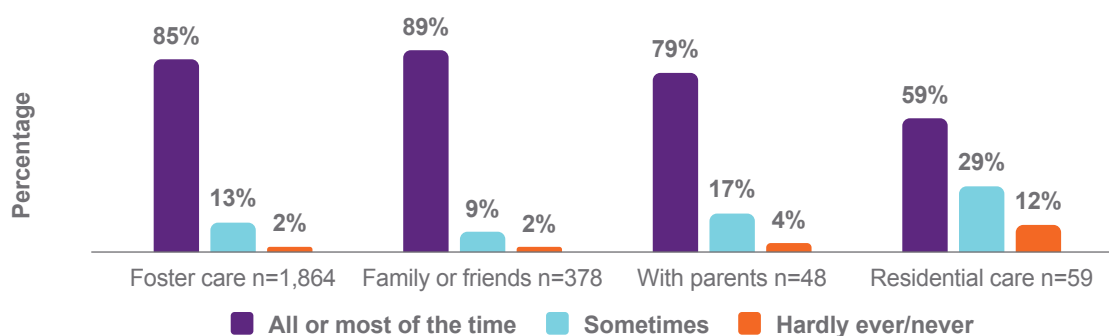
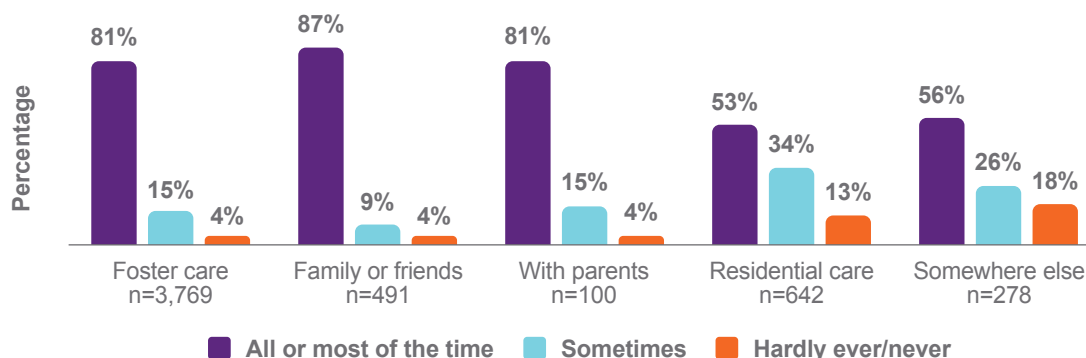


Figure 9: Trust in carer by placement type 8-10yrs



Figures 8-10 show that children and young people in kinship placements were the most confident in trusting their carers closely followed by those in foster care. Young people in residential care and other arrangements had the lowest ratings of trust in their carers.

Figure 10: Trust in carer by placement type 11-18yrs



Children and young people left comments about a whole range of issues connected to their carers. They wrote positively about carers who treated them the same as their own children and who made them feel part of the family and loved:

I love my nan and I never want to leave her side. 4-7yrs

My foster family is very lovely. They love me and I love them. 11-18yrs

Younger children wrote about wanting to stay with their carers and some wanted to call their foster carers “Mummy and Daddy”:

It's lovely because I love [name of foster carers]. I dance with them and kiss them. 4-7yrs

I want my foster carers to be my real Mummy and Daddy. 8-10yrs

Although our analysis showed there were more negative responses from those in residential care, there were also a few positive comments that demonstrate that high-quality residential care can make a difference. For example:

I think the residential home I am in at the moment is absolutely brilliant. The staff are supportive, and it is the right place for me. I think there should be more places like this to help young people in my situation. 11-18yrs

Some young people (11-18yrs) left comments about how they wanted their foster carers to be trusted by Children’s Services and for carers to be allowed to make more decisions:

Whatever you want to do you need social worker's permission and the social worker takes forever to reply to your carers. Social workers can have a say, but I feel it's more the foster carer's decision. 11-18yrs

Simple things like not being able to book a holiday without the social worker's approval makes me not feel like a regular family. 11-18yrs

There were also comparisons made between the life children had previously experienced and life with their carer. Children valued having their basic needs consistently met:

I don't want to live with my old Mum anymore because she never fed us and just did things. I love living with my new Mum because she feeds us and gives us treats. 4-7yrs

I no longer have to worry about turning up to school with a black eye or being killed in a heated argument where furniture and knives end up being thrown. In care, I am given nice food every day and people care about me. Coming into foster care has saved my life. 11-18yrs

A small minority wrote negative comments about the care they were receiving:

I don't trust my grandad, he tells lies. 4-7yrs

I don't like foster carers - nope they don't give a shit about you, only money. 11-18yrs

I heard my foster mum's husband speaking about me at night when I came down for a drink and he was saying that I need to shut the hell up sometimes and saying I need to do things. ... I feel like a slave. 11-18yrs



Having carers who are sensitive and notice how children are feeling

[I would like] people to take notice of when I'm feeling down to talk to me, as I'm bad at going to people.

11-18yrs

Recovery from trauma and/or maltreatment requires carers who can put themselves in the child's shoes and think and feel how the child might be feeling. Research¹⁷ has shown the importance of foster carers who try to understand the reasons for a child or young person's behaviour and to do so without making assumptions or jumping to negative judgements.



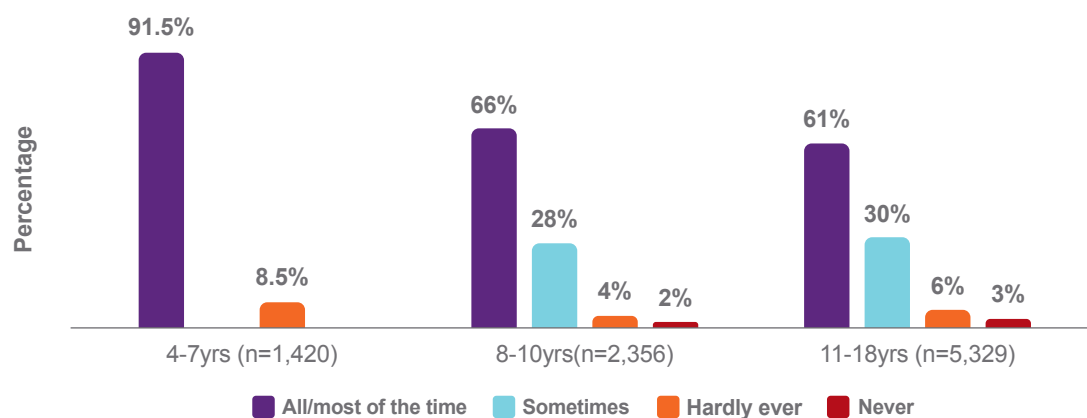
Children (4-10yrs) and young people (11-18yrs) were asked if they thought that their carers noticed how they were feeling.

9 out of 10 children and young people felt the adults they lived with noticed how they were feeling at least 'sometimes', but girls and those living in residential or somewhere else more often felt that their carers 'hardly ever' or 'never' noticed their feelings.



¹⁷ Bammens, A-S., Adkins, T. & Badger, J. (2015) Psycho-educational intervention increases reflective functioning in foster and adoptive parents. *Adoption & Fostering*, 39, 38-50.

Figure 11: Perception of whether their carers noticed feelings



- ▶ Overall, 9% of young people (11-18yrs) felt that their carers ‘hardly ever’ or ‘never’ noticed how they were feeling.
- ▶ Girls (11%) more frequently than boys (7%) reported that their feelings went unnoticed.¹⁸
- ▶ Young people (11-18yrs): 29% of those living ‘somewhere else’, 15% of those in residential care felt their feelings went unnoticed compared with 7% in foster or kinship care.

Children and young people of all ages left comments about the sensitivity and responsiveness of their carers. Most comments were positive and for example, children wrote:

My bear cards help me to tell my carers how I feel. 4-7yrs

Nanny and Grandad help me with my worries, and they know when I'm sad. 8-10yrs

I feel guilty for feeling happy and safe in care. I have so much anger towards my nan, grandad and mum, I hate it. I now know what a normal family do, say and treat each other. I love it here! 11-18yrs

¹⁸ $\chi^2=15.403$ [n=5,214], df3, p<.002



Talking with adults (carers) about things that matter

[What would make care better?]
If I could talk to my foster dad more.

11-18yrs

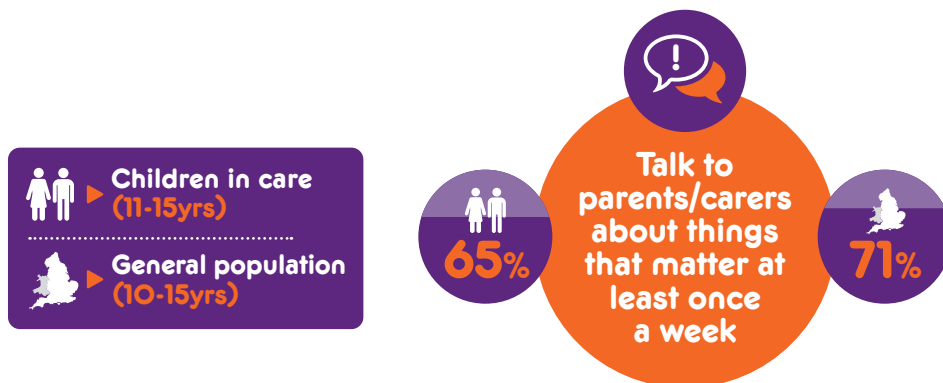
Positive and supportive relationships, particularly with friends and family, including having someone to talk to and rely on have been consistently stated as children's top priority to have a happy life.¹⁹ *The Understanding Society* survey asks young people aged 10-15yrs, 'How often do you talk to your parents about things that matter?' - 71% reported talking to their mothers and/or fathers at least once a week.²⁰



How often do you talk to your parents about things that matter?' was added to the *Your Life, Your Care* surveys for young people aged 11-18yrs in 2017-18 with the phrase 'the adults you live with' replacing parents and using the same response options of 'most days', 'more than once a week', 'less than once a week' and 'hardly ever'.

1 in 5 young people reported 'never' speaking to their carers about the things that mattered to them.

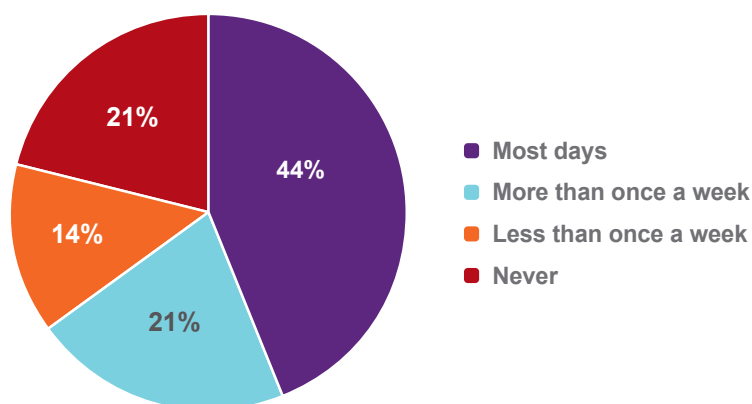
Compared with young people aged 11-15 in the general population, except for those in kinship care, a smaller percentage (65%) of young people (11-15yrs) in care spoke to the adults they lived with about things that mattered to them.



¹⁹ ONS (2018) *Children's well-being and social relationships, UK*. Office for National Statistics. <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/datasets/childrenswellbeingmeasures/march2018>

²⁰ University of Essex, Institute for Social and Economic Research, NatCen Social Research, Kantar Public. (2020). *Understanding Society: Waves 9, 2017-18* UK Data Service. SN: 6614, <http://doi.org/10.5255/UKDA-SN-6614-14>. n=2,610 Age range 10-15yrs

Figure 12: Frequency of talking to carers about things that matter



Base 3,954 11-15yrs

- ▶ In the general population, 71% of young people (11-15yrs) speak at least once a week to their parents. Selecting those aged 11-15yrs in our surveys, only young people in kinship care (71%) spoke as regularly with their carers; a statistically larger percentage than those in foster care (65%) or residential care (64%).²¹

Life is great with my granddad and grandmother. They're so kind, give us all the help we need and all the support we need. They're just really ace! I am so lucky to have someone like them in my life !!! 11-18yrs

- ▶ Young people who felt that the adults they lived with were less sensitive to their feelings more frequently chose not to confide in them: 81% of those who felt their feelings went unnoticed by their carers also reported not talking regularly to them about things that mattered.

My current placement is very happy and settled but it does depend on the people you are placed with. A previous placement was not so good. The carer would not really talk to me or do things with me. I think that being in care would be better if foster carers were consistently nice and friendly. 11-18yrs

²¹ $\chi^2 = 17.523$ [n=3.916] df3, p<.001



Friendships

Good friends

I don't trust anyone except my friends. I can only trust my friends and now you move me.

8-10yrs

Having good friends is very important for children's well-being. Friends provide a sense of security and belonging providing companionship and shared intimacy. Friendships support the development of social, cognitive, and emotional skills and having friends is associated with liking school and academic achievements. During adolescence, peers become more influential, as young people spend more time with their friends and less with their parents/carers. For those without friends, feelings of loneliness can lead to low self-worth, anxiety and depression in young adulthood and place young people at greater risk of victimisation and exploitation.²²

In the general population, there is some evidence that there has been a decline in young people's happiness with their friendships, particularly among girls. When asked about loneliness, more than one in ten (11%) children in the general population report feeling "often" lonely.²³

The *Your Life, Your Care* survey does not ask about loneliness, as there is evidence that loneliness can occur even if there are friends available. Testing of a question on loneliness by the ONS also found that children did not like talking about loneliness, as they saw it as a personal failure.²⁴

²² Holder, M. D., & Coleman, B. (2015) *Children's friendships and positive well-being*. In M. Demir (Ed.), *Friendship and happiness: Across the life-span and cultures*. (p. 81–97). Springer Science

²³ <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/childrensandyoungpeoplesexperiencesofloneliness/2018>

²⁴ Question asks, "How often do you feel lonely?" with three response options of 'often', 'sometimes' and 'hardly ever or never'



The children and young people who helped co-produce the *Your Life, Your Care* surveys suggested that instead of asking about loneliness we should ask about friendships. We, therefore, ask all age groups if they have a really good friend.

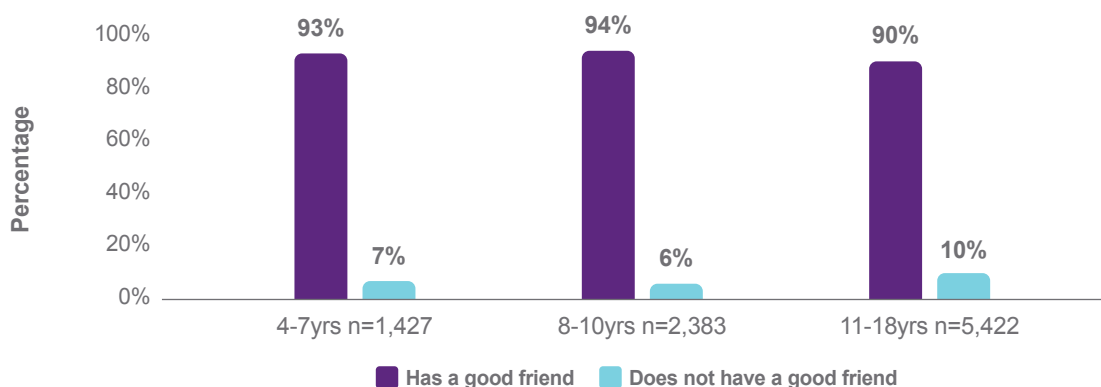
More than 9 in 10 young people had a good friend, but the percentage without a friend (7%) was greater than for young people (2.5%) in the general population.

- ▶ Examining the survey responses between 2016 and 2021, unlike the general population trend, there was no evidence of a decline in the proportion that did not have a good friend, and neither were there any statistical differences in the responses of boys and girls.



- ▶ The majority (about 9 out of 10) of looked after children and young people (4-18yrs) had at least one good friend (Figure 13): between 6% and 10% did not.
- ▶ In the general population, the ONS reports that 5% of children aged 10-15yrs have low satisfaction with their friendships²⁵ and the Understanding Society survey found that 2.5% of children aged 10-15yrs reported having no friends.²⁶

Figure 13: Children and young people's friendships



²⁵ ONS (2018) *Children's and young people's experiences of loneliness: 2018*. Office for National Statistics. <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/childrensandyoungpeoplesexperiencesofloneliness/2018>

²⁶ University of Essex, Institute for Social and Economic Research, NatCen Social Research, Kantar Public. (2020). *Understanding Society: Waves 9, 2017-18 UK Data Service*. SN: 6614, <http://doi.org/10.5255/UKDA-SN-6614-14> n=2,764

A few children (8-10yrs) and young people (11-18yrs) wrote about not having enough friends and identified more friendships as what would make their lives better.

Giving me some friends who care about me. 8-10yrs

Being able to make good friends and keep them. 11-18yrs

Stay in the same school long enough to make friends. 11-18yrs

Children (4-10yrs) left comments about friends in an open question asking if there was anything else they wanted to say about being in care. They wrote about missing friends they had made in previous placements, the challenge of making new friends, or difficulty in maintaining relationships when they had multiple placements. Children wrote:

It's hard because I don't know if I can stay living with my foster carers.

It's hard to change schools and lose friends and make new friends. 4-7yrs

I would like to stay in touch with the children of my foster carer when I leave because they are my friends, and they also make me happy, and we have lots of fun. 8-10yrs

Children and young people highlighted the factors that affected their friendships.

Factors that affected looked after young people's friendships

- ▶ **Rules & restrictions** - Preventing friends from visiting/sleepovers
- ▶ **Same opportunities** - Not being able to do similar things to friends
- ▶ **Digital access** - limited or no access to phones & social media
- ▶ **Changing placements & schools** - moving homes/schools broke friendships
- ▶ **Location** - living far away made sharing activities and sustaining friendships difficult



Rules and restrictions

I just want to be able to sleep at a friend's house without having police checks.

8-10yrs

Children and young people wrote about wanting to see their friends more often, to be able to invite their friends to their homes, to have sleepovers, or go out with their friends. When asked, what would make care better children wrote:

To be able to go out with my friends on my own like the other children in my class do. 8-10yrs

To be able to have a phone so I can phone my friends at holiday times and weekends to see how they are doing. 8-10yrs

The older young people (11-18yrs) also wrote about wanting to see more of their friends with fewer restrictions imposed, including around sleepovers.²⁷

1. Rules at the unit, can't bring females into my room; 2. Friends have to leave at a certain time; 3. Sleepovers are restricted. 11-18yrs

[Being in care] is quite challenging because of the rules. When I want to meet friends I have to wait for a response or get a negative response. 11-18yrs

²⁷ This is a form of discrimination and a recurrent issue reported by children in care despite guidance being issued repeatedly to challenge this practice. For example see: Department of Health/Department for Education and Skills (2004) *Guidance on the Delegation of Decisions on 'Overnight Stays' for Looked After Children*, London: DH/DfES, 2004
<https://www.scie-socialcareonline.org.uk/guidance-on-the-delegation-of-decisions-on-overnight-stays-for-looked-after-children/r/a11G00000017qeGIAQ>
DFE (2014) *Delegation of authority to carers Young people's guide*,
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/305147/Delegation_of_authority_to_carers_YP_version.pdf
Care planning guidance is not so clear on this point and could be strengthened. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1000549/The_Children_Act_1989_guidance_and_regulations_Volume_2_care_planning_placement_and_case_review.pdf



Doing similar things to friends

I would like to have the opportunity to spend more time with my friends out of school.

11-18yrs

Parity with peers was a key issue raised by the children in the focus groups that underpinned the development of this survey. Having opportunities to participate in hobbies and fun activities with friends provides a sense of normality. Young people in care also often emphasised not wanting to stand out as being different.²⁸



Young people (11-18yrs) were asked, 'Outside of school or college, do you get the chance to do similar things to your friends?'

1 in 6 young people in care felt that they could not do similar things as their friends and these young people more often reported that they did not have a good friend.

- ▶ 17% of young people felt they 'hardly ever' or 'never' did similar things to their friends.
- ▶ Increasing autonomy was expected to be seen as young people got older, but that was not the case, as 18% of those aged 16-18yrs also felt unable to do the same things as their friends.
- ▶ Young people who could not do the same things as their friends more frequently reported that they did not have a good friend.²⁹
- ▶ 28% of young people in residential care felt they could not do the same things as their friends compared with 16% of young people in foster care and 13% in kinship care.³⁰

Young people who felt they were given chances to be trusted more frequently reported that they could do similar things to their friends.³¹

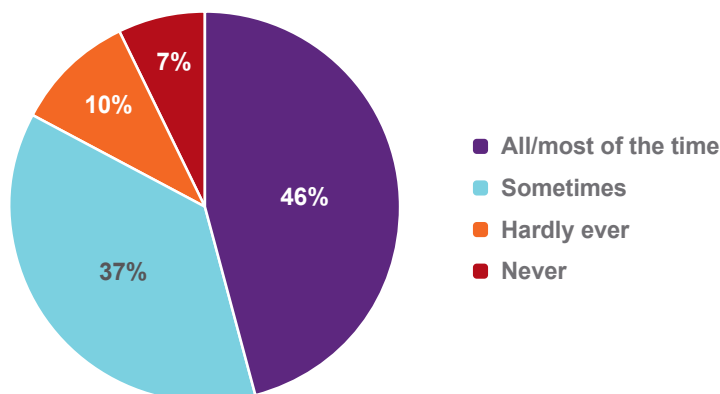
²⁸ Wood M and Selwyn J (2017) Looked after children and young people's views on what matters to their subjective well-being. *Adoption & Fostering* Vol. 41(1) 20-34 <https://ora.ox.ac.uk/objects/uuid:7d9d9db9-8eb5-4ca4-a3fc-698d30fb4db4>

²⁹ $\chi^2=285.654$ [n=5,275] df1, p<.001

³⁰ $\chi^2=93.350$ [n=5,281] df5, p<.001

³¹ Somers' D .308 p<.001

Figure 14: Young people’s feelings about being able to do the same as their friends



Base 5,330 young people 11-18yrs

Young people wrote about the importance of being able to do things with their friends:

Maybe hanging around with friends on the weekend and getting to walk to school with them. 11-18yrs

I like that I’m going to start horse riding again with my friends. 11-18yrs



Social media

“As I’m 15 I should have a chance of having social media because ALL of my friends have it. I don’t like being left out, so being in care is tough.”
11-18yrs

The ONS report on the loneliness of children and young people found that using social media to connect with others could help address loneliness. It could help young people maintain connections over time and at a distance, giving an opportunity to casually check in on friends and help friendships develop during periods of transition and ease introductions.³² Yet social care professionals are sometimes wary of mobile devices and social media because of potential risks of continued abuse or disruptions of placements when used to maintain contact with adults who might pose a risk.³³ The risks need to be considered alongside the benefits.

³² ONS (2018) *Children’s and young people’s experiences of loneliness: 2018*

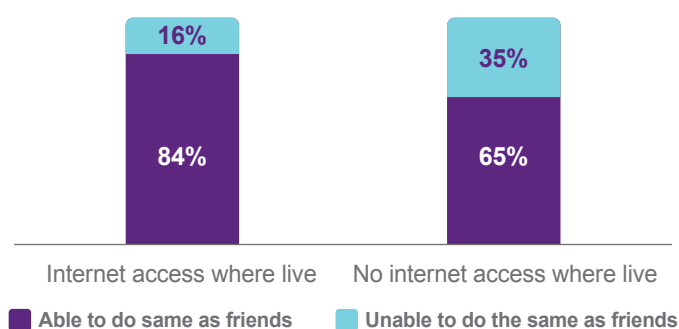
³³ Simpson, J (2020) *Children in care and their use of mobile devices and the internet for contact*. Accessed at: <https://www.iriss.org.uk/resources/insights/children-care-and-their-use-mobile-devices-and-internet-contact>

Nearly one in ten (9.3%) of young people wrote that they could not connect to the internet where they were living.

Young people who did not have access to the internet where they lived more frequently reported being unable to do the same things as their friends.

- ▶ 1 in 3 of those with no internet access felt unable to do the same as their friends compared with 1 in 6 of those who could connect to the internet (Figure 15).

Figure 15: Internet access outside of school and ability to do the same things as friends



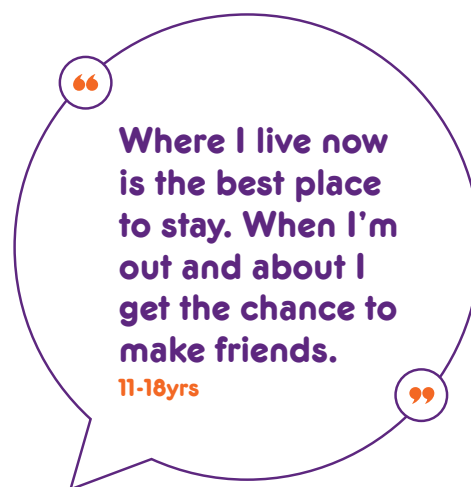
n= 4,827 young people 11-18yrs

Young people wrote about the importance of using the internet:

Have the internet more often, as what 15/16 old hasn't got the internet every day? I feel a bit left out, as I only have it 2 times a week for an hour. I would like it almost every day. 11-18yrs



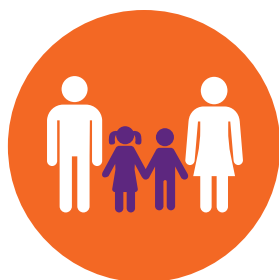
Location of placements and friendships



Where children and young people lived affected their friendships. Distance prevented new friendships from being formed and made sharing activities difficult. Comments on distant placements and schools often mentioned loneliness.

I have so many foster carers, I move nearly every week. It is not fair. I can't see my friends at school or go to clubs because the school is too far away. I have to get up early in the morning to go to school and it is dark when I come home so I can't play out. It is boring. I don't like school because people can be mean. I can't play with friends as they won't let me, as I don't do the clubs anymore. 8-10yrs

I do not like living where I am living - I want to be close to my college and my friends but I am far away. I am lonely. 11-18yrs



Family relationships

I love to see my family. I love to go bowling. I am happy when I am with my family.

8-10yrs

Family is important to all children but, unlike children living with their parents, those in care have contact plans that set out who, where and how often children see their relatives or other important people in their lives. Looked after children and young people who helped create the surveys identified satisfaction with their contact arrangements as a key indicator of 'feeling good' about their relationships.



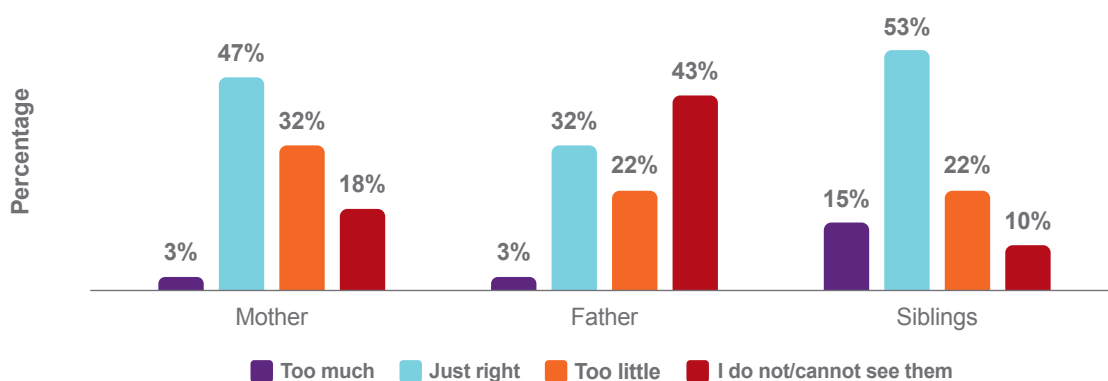
Children and young people aged 8-18yrs were asked whether they were happy with how often they saw their mum, dad, and siblings. The youngest children (4-7yrs) were not asked a question about their feelings on contact with relatives.

Most children in care wanted to see their parents and siblings more frequently, but a minority wanted to see them less often.

Figure 16 and Figure 17 show children's satisfaction with the frequency of contact.

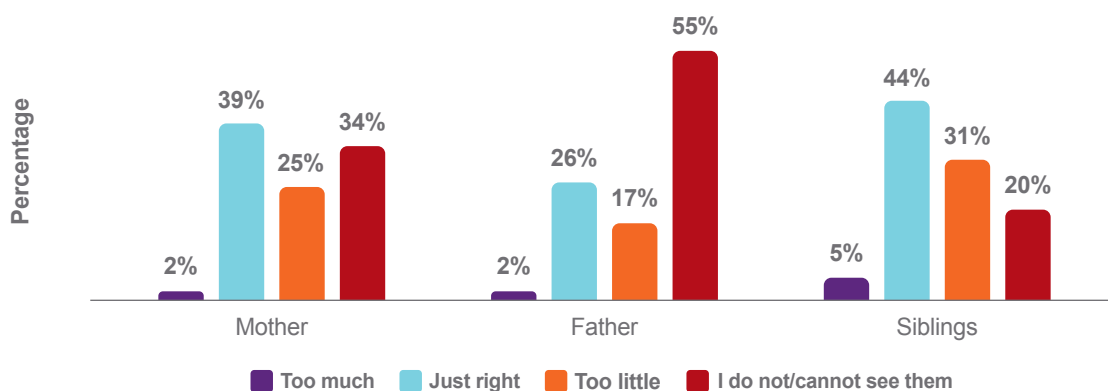
- ▶ 1 in 8 children (13%) and more than a quarter (26%) of young people had no contact with either parent.
- ▶ Seven per cent of young people reported that their mothers and 9% that their fathers had passed away.³⁴ In comparison, 1% of children in the general population experience the death of their mothers under the age of 16 years old.³⁵ There are no available statistics on the proportion of children in the general population experiencing the death of fathers.
- ▶ Overall, the percentage of children who were satisfied with how often they saw their family changed little between 2015 and 2021.

Figure 16: Satisfaction with the frequency of family contact (8-10yrs)



Base 2,326-2,354

Figure 17: Satisfaction with the frequency of family contact (11-18yrs)



Base 2,326-2,354

The wishes and feelings of children and young people about contact with the key people in their lives have been explored in a previous report.³⁶

³⁴ The option 'passed away' was added to the survey in 2019/20 and the frequencies reported use data from 2019-2021 (n =1,574)

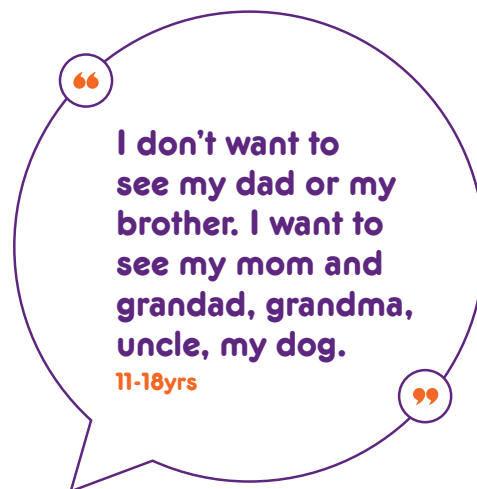
³⁵ ONS (2019) Children aged under 16 years who have experienced the death of their mother. Office for National Statistics. <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/childrenagedunder16yearswhohaveexperiencedthedeathoftheirmother>

³⁶ Lewis, S. & Selwyn, J. (2022) *Staying connected: The views of looked after children and young people on their contact arrangements*. The percentages slightly differ in this report and the Staying connected report, as the report included data from Wales <https://coramvoice.org.uk/for-professionals/bright-spots/resource-bank/staying-connected/>



Key relationships and support for contact

Children and young people wanted to see parents and siblings more, but also extended family members and other important adults in their lives.



I would like to see my mum more often than I do. 11-18yrs

Young people gave reasons as to why they thought they saw their parents infrequently such as their own family's circumstances, the long distances that they or relatives had to travel, or felt that their social worker had not taken their wishes into account.

I cannot see them as they are going through a tough time at the moment.

11-18yrs

I'd like more arranged contact but it's expensive to travel to and from counties. I'd like a travel warrant. 11-18yrs

It is all so false and can't happen at the weekends. How stupid is that! I am told the 'contact team' doesn't work at weekends. If that is their job, then they should work when I can have contact ... not just business hours. It's stupid, stupid, stupid. My mum works and so after school contact is difficult and only an hour! 11-18yrs

My social worker told me months ago in a LACK review that she would work on me having more contact with my little brother. This was in November, it's now halfway through March and nothing has been said to my mum about it. My mum told me my social worker hasn't even contacted her. 11-18yrs

Not all children and young people wanted to see their parents more. A few children and young people (2-3%) wanted parental contact to cease or be reduced as they felt unsafe when they saw their parents or they found the meetings too difficult.

I'm scared of my dad, but I still have to have contact with him. I don't want to. 11-18yrs

Not all children and young people wanted to see their parents more. A few children and young people (2-3%) wanted parental contact to cease or be reduced as they felt unsafe when they saw their parents or they found the meetings too difficult.

I'm scared of my dad, but I still have to have contact with him. I don't want to. 11-18yrs

Most of the written comments from children and young people were about how much they enjoyed living with a sibling and missed siblings who were not in the same placement. A few complained of bullying or wanting more privacy and a separate bedroom.

I am lucky to live with my sister. 8-10yrs

I was brought up with my siblings as brother and sisters, but we have different dads. Now my sister's dad has stopped me from seeing her. 11-18yrs

I would like to be in a separate room from my older brother. 11-18yrs

Children and young people preferred contact to be easy to get to, in large enough rooms or take place outdoors, to offer privacy and for the visit to involve everyday activities such as walking the dog, going for a meal, or playing games.

When I see them, I would like to not be in a small room all the time. 11-18yrs

Comments on seeing family members (4-7yrs)

Although children aged 4-7yrs were not asked about seeing their families, when asked 'What would make care better?' fifty children left comments on contact. Most wanted more time with their parents and siblings, had concerns about what was happening in their families, and complained about the long journeys to contact centres. A small minority wanted to stop seeing their families. Children (4-7yrs) wrote:

I'm sad because I only get to see my Mum a little. I miss my Dad too. 4-7yrs

I was supposed to see Mummy yesterday at the contact centre, but it was cancelled. I asked why, and nanny said she was ill. I am worried about her. 4-7yrs

Not travelling to contact so much it's a long way in the car and it's bedtime when we get back. 4-7yrs



Pets

I'd like a pet,
a dog, in my
foster home.

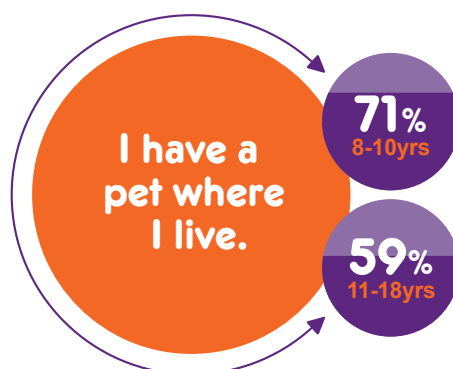
8-10yrs

Pets are part of many people's lives and can be a very significant relationship for any child. For those who have experienced trauma and/or maltreatment, pets can help in many ways. They provide an opportunity to have some comfort and to build trust. Carers can use the experience of taking care of a pet to begin conversations about taking care of others and improving self-care. It has been argued that a child who learns to care for a pet with kindness and with patience, learns also about empathy and treating people well.³⁷ Children who helped developed the surveys described how they could speak in confidence to a pet, with nothing revealed or recorded in case files. They also reflected that pets were always happy to see them and could be held and stroked.³⁸ Yet the importance of pets in the lives of children in care has received little attention in the social care literature.



In the *Your Life, Your Care* surveys we ask children (8-10yrs) and young people (11-18yrs) if they have a pet where they live.

Far fewer children and young people in residential care had a pet compared with those in foster or kinship care. Placement type was associated with having a pet.



³⁷ O'Haire, M.E., Guérin, N.A., & Kirkham, A.C. (2015). Animal-Assisted Intervention for trauma: A systematic literature review. *Frontiers in Psychology*, 6. Sable, P. (1995). Pets, attachment, and well-being across the life cycle. *Social Work*, 40,334-341.

³⁸ Wood, M., & Selwyn, J. (2017). Looked after children and young people's views on what matters to their subjective well-being. *Adoption and Fostering*, 41(1), 20-34. <https://doi.org/10.1177/0308575916686034>

- ▶ A quarter (25%) of children (8-10yrs) in residential care had a pet compared with 69% in kinship care and 74% in foster care.
- ▶ 18% of young people (11-18yrs) in residential care had a pet compared with 66% in foster care and 62% in kinship care.

Children and young people wrote about the pets where they currently lived but also wrote about missing pets that they had left behind in the family home or who were in previous placements. For example, writing:

I would also like to see the dog again [in the previous foster placement].

4-7yrs

My mum doesn't come [to contact visits]. I miss my cat.

8-10yrs

Be able to have a pet. I used to look after the dog at my old placement really well.

11-18yrs

They also wrote about what they liked doing during contact visits and this sometimes involved their pets,

We go out in the woods and take the dog for a walk.

8-10yrs

Children and young people also wrote about wanting pets in a question that asked, 'What would make care better?' They wrote:

I would like my own pet for example a cat, hamster, or fishes.

8-10yrs

To get my dog that I stroke and talk to.

8-10yrs

The relationships children and young people had with the key people in their lives were important to their well-being. In the next chapter, we consider children's relationships with their workers and their experience of the care system.

Summary - Relationships



Trusted adult

- ▶ Research on the recovery of children who experienced traumatic events has highlighted the protective role of a trusted adult. 96% of children (8-10yrs) and 91% of young people (11-18yrs) felt they had a trusted adult in their lives
- ▶ Type of placement affected whether young people (11-18yrs) felt they had a trusted adult. A quarter of those living 'somewhere else' and 14% of those in residential care did not have a trusted adult compared with 8% in foster care and 5% in kinship care.
- ▶ White and Mixed ethnicity young people (11-18yrs) more frequently reported having a trusted adult in their lives compared with young people of Asian, Black, or Other ethnicities.
- ▶ There was local authority variation in the percentage of their young people (range 66% to 100%) who felt they had a trusted adult in their lives.



Carers

- ▶ 97% of 4-7yrs, 85% of 8-10yrs and 77% of 11-18yrs trusted their carer 'all/most of the time'. Trust decreased as young people got older but also varied depending on the type of placement. Children and young people in kinship placements were the most confident in trusting their carers followed by those in foster care and fewer of those in residential care.
- ▶ Children (4-10yrs) and young people (11-18yrs) were asked if they thought that their carers noticed how they were feeling and most responded positively. Nearly one in ten (9%) felt that their carers 'hardly ever' or 'never' noticed how they were feeling. Girls (11%) aged 11-18yrs more frequently than boys (7%) reported that their feelings went unnoticed. Type of placement also had an impact: 15% of those aged 11-18yrs in residential care felt unnoticed compared with 7% in foster or kinship care.
- ▶ Young people (11-18yrs) in kinship care more frequently talked regularly with the adults they lived with compared with those in foster or residential care: 71% in kinship talked regularly (the same percentage as their peers in the general population) compared with 65% in foster care and 64% in residential care. Young people who chose not to confide in their carers also often reported that their carers did not notice how they were feeling.



Friendships

- ▶ In the general population, there has been a decline in young people's happiness with their friendships, particularly among girls.³⁹ Examining the responses of looked after children between 2016 and 2020 there was no evidence of a decline in the proportions who had a good friend nor any statistical difference in the responses of boys and girls.

- ▶ In the general population, there has been a decline in young people's happiness with their friendships, particularly among girls.³⁹ Examining the responses of looked after children between 2016 and 2020 there was no evidence of a decline in the proportions who had a good friend nor any statistical difference in the responses of boys and girls.
- ▶ Most looked after children and young people had a good friend but 7% of those aged 11-15yrs did not. A larger proportion than 2.5% of peers of the same age in the general population.
- ▶ Children (8-10yrs) wrote about missing friends they had made in previous placements, the difficulties in making new friends or maintaining relationships when they had multiple placements or were placed out of area.
- ▶ Young people (11-18yrs) also wrote about wanting to see more of their friends with fewer restrictions imposed.
- ▶ The majority of young people (11-18yrs) felt they got the chance to do similar things to their friends outside of school or college, but 17% ticked the 'hardly ever' or 'never' options. Increasing autonomy was expected to be seen as young people got older but that was not the case, as 18% of those aged 16-18yrs felt unable to do the same things as their friends.
- ▶ Associated with being unable to do the same things as friends were, not having a good friend and type of placement: 28% of young people in residential care felt unable to do the same things compared with 16% of young people in foster care and 13% in kinship care. Conversely, young people who felt they were given chances to be trusted also felt they could do similar things to their friends.



Family relationships

- ▶ One in eight children (13%) and more than a quarter (26%) of young people had no contact with either parent. Seven per cent of young people reported that their mothers had passed away as had 9% of fathers.
- ▶ Many children and young people were unhappy with how often they saw their parents and brothers and sisters and also wanted to see extended family members.
- ▶ Rates of satisfaction with frequency of seeing relatives had changed little since the surveys first began, but continued to vary depending on the young person's sex, placement type, length of time in care, placement stability, and ethnicity.



Pets

- ▶ 71% of children (8-10yrs) and 59% of young people (11-18yrs) had a pet where they lived.
- ▶ Type of placement was associated with having a pet. Far fewer children and young people in residential care had a pet compared with those in foster or kinship care.

³⁹ ONS (2018) *Children's well-being and social relationships, UK: 2018*, Office for National Statistics



Being in care

Being brought up as a child in care means that the experience of childhood differs from that of other children. Children in care have professionals in their life that other children do not and their local authorities' policies and statutory procedures influence how life is experienced. Good relationships with professionals are important for children's well-being and professionals are expected to ensure that children understand what is happening and to support their involvement in decision-making.



Relationship with social workers

Trust in social workers

I've met my new social worker once and I don't have her number so I will build up a relationship before I can trust.

11-18yrs

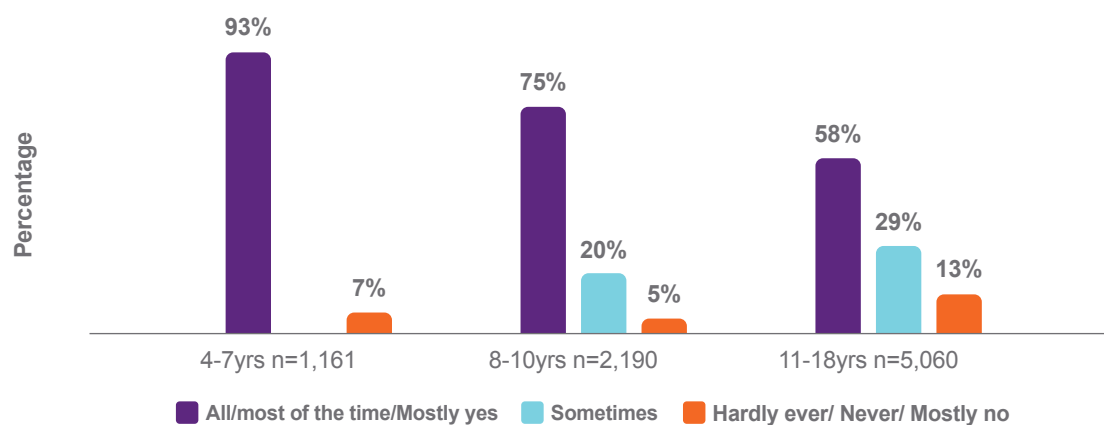
Being able to trust workers was one of the most important things identified by young people who helped develop the survey. Young people stressed the importance of social workers taking the time to get to know them, so that young people felt comfortable sharing their thoughts and feelings with their workers.⁴⁰

Q: Children aged 4-7yrs are asked if they trusted their social worker and given two response options: 'mostly yes' or 'mostly no'. The older children (8-10yrs) and young people (11-18yrs) had the same question, but with four response options: 'all or most of the time', 'sometimes', 'hardly ever', 'never'.

The majority of those who responded to the survey did trust their social worker. Trust in their worker decreased as children got older, with 1 in 8 of those aged 11-18 responding 'hardly ever' or 'never'.

⁴⁰ Wood M. and Selwyn J. (2017) Looked after children and young people's views on what matters to their subjective well-being. *Adoption & Fostering* Vol. 41(1) 20-34 <https://ora.ox.ac.uk/objects/uuid:7d9d9db9-8eb5-4ca4-a3fc-698d30fb4db4>

Figure 18: Trust in social workers



There was little variation in the responses of children aged 4-7yrs or 8-10yrs by their type of placement, their sex, or ethnicity. There was much more variation in the older age group (11-18yrs) and the following factors were statistically associated with young people not having a trusting relationship with their social worker:

Factors affecting young people's (11-18yrs) trust in social workers.

Age: Trust decreased as young people's age increased.

Sex: Girls more frequently reported 'hardly ever' or 'never' trusting their social worker: **16%** of girls compared with **10%** of boys.⁴¹

Placement type: **22%** of young people living in residential care, **21%** living somewhere else 'hardly ever or never' trusted their social worker in comparison with **14%** of those in kinship care and **10%** of those in foster care.⁴²

Local Authority: 7%-31% of young people 'hardly ever' or 'never' trusted their social worker depending on the LA caring for them.⁴³

The number of placements: Trust in their social worker diminished as the number of placements increased: **28%** of those who had had 8 or more placements 'hardly ever' or 'never' trusted their social worker.⁴⁴

The number of social workers: The percentage who did not trust their workers increased for those with changes of worker in the previous year.⁴⁵

Length of time in care: As the length of time in care increased so too did young people's trust in their social workers (Figure 19).⁴⁶

⁴¹ $\chi^2=58.651$ [n=4,955] df3 p<.001

⁴² $\chi^2=117.155$ [n= 5,013], df9 p<.001

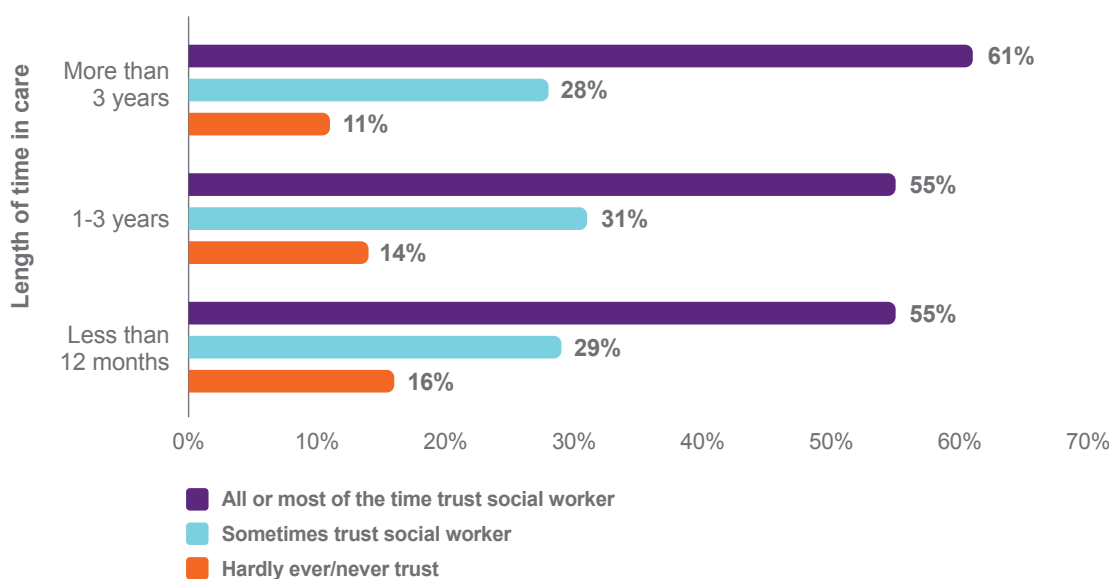
⁴³ $\chi^2=125.127$ [n= 5,060] df 3 p<.001

⁴⁴ $\chi^2= 87.056$ [n=4,801] df 3 p<.001

⁴⁵ Hardly ever/never trusting worker 3+ workers 19%, 2 changes 13%, one change 9% $\chi^2=83.136$ [n= 5,009] df3, p<.001

⁴⁶ Somers' D correlation between trust in the social worker and length of time in care (d=.061 p<.001)

Figure 19: Length of time in care and young people’s trust in their social worker



There were both positive and negative comments about relationships with social workers.

Positive comments about young people’s relationships with social workers

Some young people (11-18yrs) wrote positively about their relationship with their social worker.

I have enjoyed working with my social workers and I am so grateful for all the support whilst I’ve been in care. 11-18yrs

My social worker [name] she’s amazing. There should be more like her! She gets her job done! And you should just tell her that because she does a really good job. Me and my brothers love her lots. She’s an amazing social worker and personally, she should have a raise for the fabulous job she does :). 11-18yrs

My social worker is also the sweetest person, she’s absolutely amazing and always asks me how I am feeling about certain things and ensures everything is going smoothly. 11-18yrs

I love my social worker. She is special. 11-18yrs

Negative comments about relationships with social workers

There were also many negative comments about social workers. Children and young people wrote about social workers not listening, not visiting often enough, or having difficulty understanding their workers.

I would like my social worker to visit more. 4-7yrs

I don't really trust my social worker. They don't listen to me or include me in my choices. I do not like talking to them. 8-10yrs

I can't speak to my social worker because he never answers the phone, and you can't understand what he says. 11-18yrs

Just had 1 social worker who listened to me and didn't just say 'mmm'. 11-18yrs

Comments on social worker's sensitivity

Talking with children and young people also needed to be done carefully and sensitively as children explained:

If I don't talk that may mean I'm either shy or I do not want to talk to [social worker]. So, I would like her to lay off. 8-10yrs

I wish I could have the same social worker because I have had more than five and they keep asking me the same questions. 8-10yrs

[I want] to be listened to by my social worker and that she doesn't walk out on me when I am trying to tell her how I feel. 8-10yrs

Young people hate it when social workers say they understand where you are coming from, as young people do not believe them. It doesn't feel genuine. 11-18yrs

Young people also wrote about wanting their social worker to be honest with them:

I just want them to be honest and actually tell me what happened and not what I want to hear. 11-18yrs

Relationships with other professionals

A few young people felt that some teachers or IROs were more responsive and better communicators than their social workers:

Good IROs are important - make sure it happens. 11-18yrs

I have a better relationship with my IRO as they are more reliable, and they do the best that they can. 11-18yrs

School talk to me about stuff more than my social worker. 11-18yrs



Change of social worker

Social workers don't actually know me they read about me off a piece of paper. I've had so many I can't even count.

11-18yrs

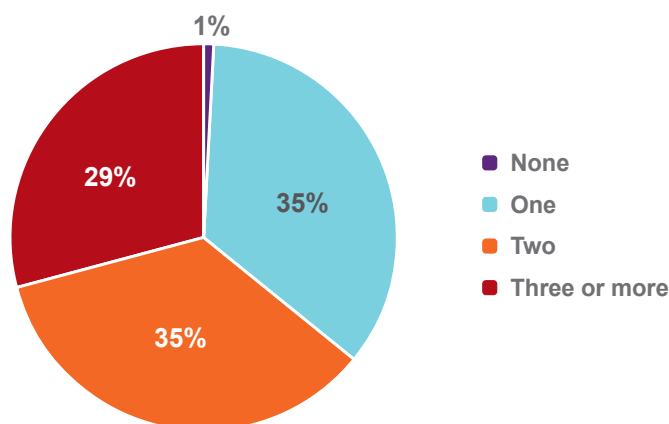
Relationships are hard to maintain and trust to develop if workers constantly change. The Children's Commissioner's Stability Index in 2019 reported that 27% of looked after children had experienced 2 or more changes of social worker in the previous 12 months. Just over half of social worker changes were bureaucratic and came about as children moved from one social work team to another and reflected how local authorities organised their services.⁴⁷



Young people (11-18yrs) were asked how many social workers they had had in the previous 12 months

3 out of every 10 young people who responded to the survey had 3 or more social workers in the previous year

Figure 20: Number of social workers in the last 12 months



Base 5,400 Young people 11-18yrs

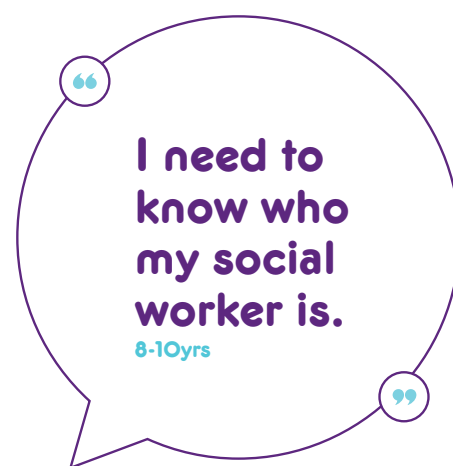
There were many comments about how difficult it was to trust social workers when there had been so many changes in workers. Young people wrote:

⁴⁷ Children's Commissioner (2019) *Stability Index for England 2019*
<https://www.childrenscommissioner.gov.uk/wp-content/uploads/2019/07/cco-stability-index-2019-technical-report.pdf>

I feel that my third social worker 'ditched me'. Three out of four social workers have gone ... I just don't like it! I don't like getting a different social worker. 8-10yrs

It is hard to trust [social workers], as there have been too many with frequent changes. 11-18yrs

I've had 4 social workers in 7 months. 11-18yrs



Knowing the identity of the social worker

Children and young people in care receive information from their social workers. It is usually through the relationship with their social workers that they express their views and opinions and are enabled to contribute to key decisions that are being made.



We asked all children and young people if they knew who their social worker was.

Most children and young people did know who their social worker was but one in five of the youngest children did not.



- ▶ Young children (4-7yrs) more frequently reported not knowing who their worker was compared with older children.
- ▶ Young people (11-18yrs) who recorded having multiple changes of worker more frequently reported not knowing who their present social worker was.

Table 6: Knowing identity of their social worker

Age	Yes, I know n %	I do not know n %	Total %
4-7yrs	1,128 (79%)	301 (21%)	1,429
8-10yrs	2,154 (90%)	232 (10%)	2,386
11-18yrs	5,002 (92%)	414 (8%)	5,416

For every age group, those in kinship care more frequently reported that they did not know who their social worker was.⁴⁸ Perhaps some children in kinship care did not realise they were looked after and/or they viewed the social worker as being for their carer rather than for themselves.

I don't feel like she's my social worker, as my Nan is the one who contacts her. 11-18yrs

Children wrote about the difficulties in knowing who their social worker was when there were so many changes in workers:

I would like to know my social worker's name because there's lots of them and I can't remember all of them. 4-7yrs



Understanding the reasons for being in care

I don't know why he [the social worker] sent us to live with Nanny.

4-7yrs

Our previous analysis⁴⁹ has highlighted the importance of having a good understanding of the reasons for being in care for children's well-being, self-esteem, and identity.

⁴⁸ Kinship placements 11-18yrs: 23% in kinship placements did not know who their social worker was compared to 7% in foster care and 9% in residential care $\chi^2=21.317$ [n=5,361] df4, p< .001

55% of 11-18yrs with 3+ social workers in the last 12 months didn't know who their social worker was $\chi^2= 161.782$ [n=5,256] df3, p<.001

⁴⁹ Staines J., & Selwyn J. (2020) "I wish someone would explain why I am in care": The impact of children and young people's lack of understanding of why they are in out-of-home care on their well-being and felt security. *Child & Family Social Work*, 25, S1, 97-106 <https://ora.ox.ac.uk/objects/uuid:2ff8f705-093a-4f7b-a898-2c07e05e69b7>



Children aged 4-7yrs, 8-10yrs and 11-18yrs were asked if an adult had explained to them why they were in care. Answer options were 'yes', 'yes, but I'd like to know more' and 'no'.

Understanding the reasons for care increased with age, but even so, more than one in five young people (11-18yrs) felt that either no one had explained or that they wanted to know more. Just under half of the youngest children (4-7yrs) did not fully understand.

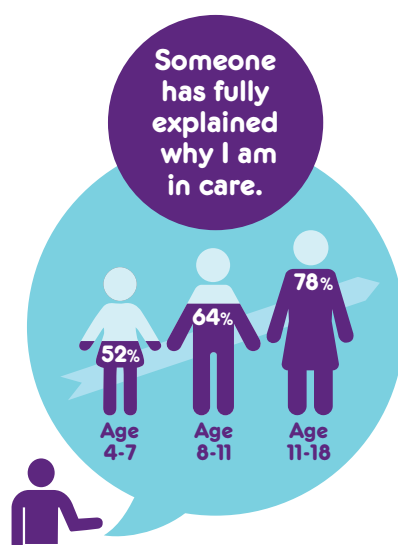
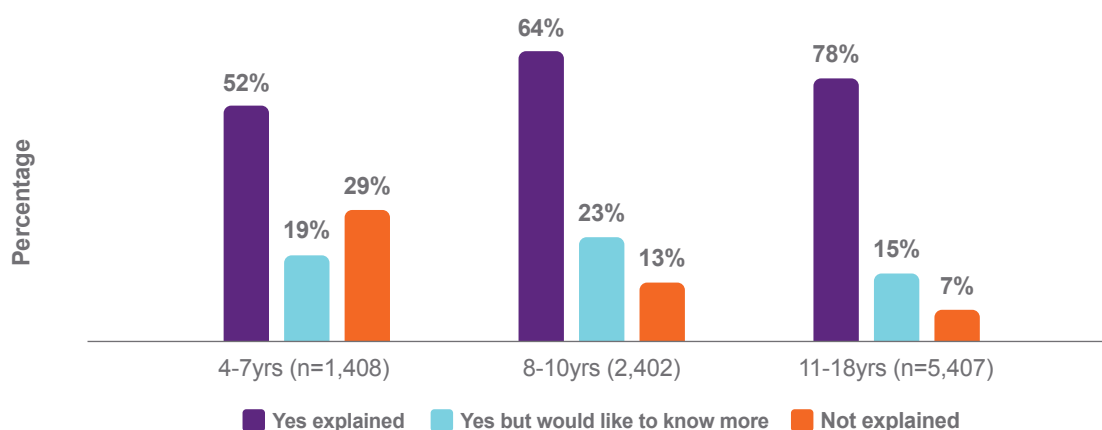


Figure 21: Children and young people's understanding of why they were in care



- ▶ The young person's ethnicity, placement type, or length of time in care were not associated with having a good understanding of the reasons for being in care.
- ▶ We did expect more of those in kinship care to have a good understanding but 18% of those in kinship, 21% in foster care, 24% in residential and 25% of those living somewhere else lacked as full an explanation as they would like.
- ▶ Girls (11-18yrs) more frequently felt they did not have a full explanation: 24% of girls in comparison with 19% of boys.⁵⁰
- ▶ Multiple placements were associated with a lack of understanding: 31% of young people (11-18yrs) with five or more placements compared with 19% of those with four or fewer placements felt they did not fully understand.⁵¹

Understanding why you are in care associated with

- **Age**

- ▶ The proportion who felt they understood why they were in care increased with age

- **Gender**

- ▶ Girls (11-18yrs) more frequently than boys felt they did not have as full an explanation as they would like.

- **Placement moves**

- ▶ Having had multiple placements was associated with lacking understanding

Children and young people wrote about wanting to understand why they were in care and to know what the plans were for their future:

I've got a question; Why exactly am I in foster care because I think my mum treated me well - she did most of the time but sometimes didn't. Why did I move to a different foster carer? I haven't a clue why I had to move. 4-7yrs

Can I know why I am in care? Why were my mum and dad in care? 8-10yrs

I would like to know how long I will be in care. 8-10yrs

I want to know more about my care status, as I don't know what is going on. I want to live like a normal child without all these rules that I don't understand. 11-18yrs

⁵⁰ $\chi^2 = 14.545$ [n=5,349] df1, p<.001

⁵¹ $\chi^2 = 52.936$ [n=5.187] df1, p<01



Voice and involvement in decision-making

I would like to be included more. SW [social worker] to explain situation more. Give more notice for something. SW to think what and how they say things.

11-18yrs

Article 12 of the UN Convention of the Rights of the Child (UNCRC)⁵² states that every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously. Furthermore, Article 13 states children have a right to be given information, so that their views can be informed.⁵³

Feeling that you have a say in what happens promotes good mental health. Adolescents who see events as being largely outside their control have more emotional problems, especially when trying to cope with high levels of stress.⁵⁴ Conversely, higher self-esteem and fewer psychological and emotional problems have been found in adolescents who feel that they can exert some control and having some control also supports the further development of skills in self-control (Tangney et al., 2004; Nigg 2017). Self-control is acquired from early childhood, is adaptive, and considered a protective factor against the onset of different mental health problems and it is argued should be taken into consideration when developing interventions (Moffitt et al., 2011).

Therefore, not only is being involved in decision-making a right as set out in Articles 12 and 13 of the UNCRC, but it also supports the development of an internal locus of control and self-control, which are protective against the development of mental health problems.

Developing children and young people's confidence in their ability to make good decisions and enabling them to feel that it is possible to exert some control over events are essential in building the necessary skills for young people who are expected to be independent as care leavers at such a young age. Indeed, care leavers, who were surveyed separately, often reported challenges related to experiencing a sudden drop in support whilst feeling unprepared to manage independently.⁵⁵

⁵² UN Convention on the Rights of the Child (1989) Adopted by General Assembly Resolution 44/25 of 20 November 1989 and signed by the UK government in 1991. Accessed at <https://www.unicef.org.uk/what-we-do/un-convention-child-rights/>

⁵³ Ibid

⁵⁴ Huebner, E. S., Ash, C., & Laughlin, J. E. (2001). Life experiences, locus of control, and school satisfaction in adolescence. *Soc. Indic. Res.* 55, 167–183. Tangney, J. P., Baumeister, R. F., and Boone, A. L. (2004). *High self-control predicts good adjustment, less pathology, better grades, and interpersonal success.* *J. Pers* 72, 271–322. Nigg, J. T. (2017). *Annual research review: on the relations among self-regulation, self-control, executive functioning, effortful control, cognitive control, impulsivity, risk-taking, and inhibition for developmental psychopathology.* *JCCP* 58, 361–383.

⁵⁵ Briheim-Crookall, L., Michelmore, O Baker, C., Oluwanifemi O., Taylor S., & Selwyn J. (2020) *What Makes Life Good, Care leavers' Views on their Well-being*, Coram Voice & The Rees Centre. Accessed at: <https://coramvoice.org.uk/wp-content/uploads/2020/11/1883-CV-What-Makes-Life-Good-Report-final.pdf>



Children (8-10yrs) and young people (11-18yrs) were asked if they felt included in the decisions that social workers made about their life.

Most children in care felt included in the decisions that social workers made about their lives at least 'sometimes'. However, around 1 in 7 'hardly ever' or 'never' felt included.

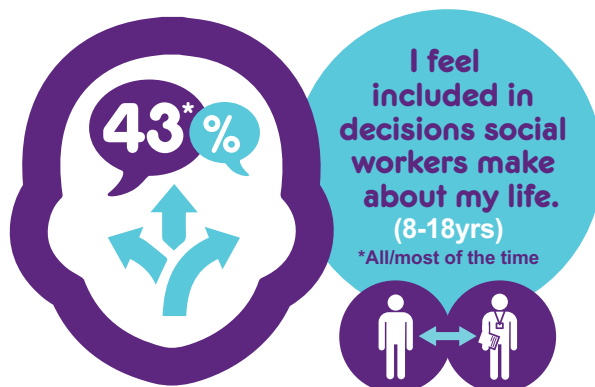
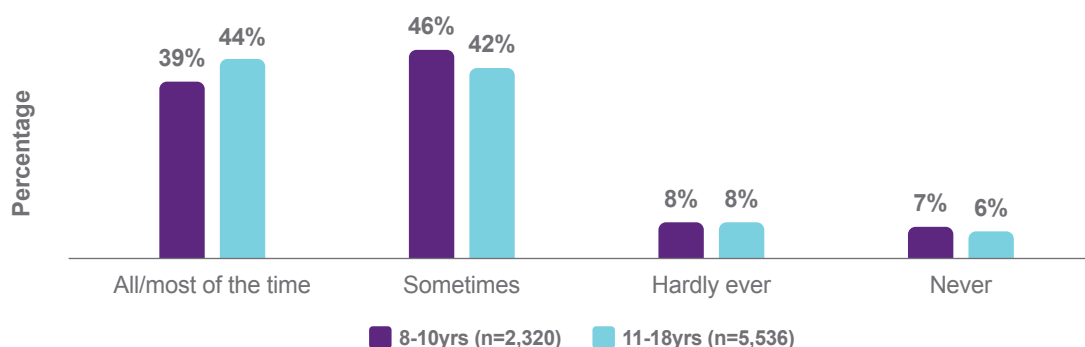


Figure 22: Feeling included in decision-making



Children and young people wrote:

My foster carer listens to me and speaks up for me when I can't say things to other people. 8-10yrs

My social worker always includes me in decisions. Out of all the social workers I've had [name] is the one I've connected to the most. 11-18yrs

Although the majority (86%) of children and young people felt included in decisions at least 'sometimes', most of the comments focused on wanting more involvement and the importance of feeling that their views were taken seriously and listened to.

Analysing the 3,545 comments from young people (11-18yrs) on inclusion in decision-making four key themes were identified: a) included/excluded in meetings b) lack of control c) lack of information d) views not being taken seriously.

Inclusion in decision making

Key themes included feeling:

▶ Included/excluded in meetings

I would like to go to meetings and see my social worker more.

11-18yrs

▶ Lack of control

I do not know what my social worker is doing for me. I am so tired of being moved from one house to another and these things make me upset. I do not know what is going on.

11-18yrs

▶ Lack of information

What happens in my life is important. I don't want workers to pick and choose what they share with me. Let me know everything that is being planned for my life.

11-18yrs

▶ Views not being taken seriously

Even when I say my opinion it doesn't get listened to, and my social worker will always go against what I have said. So, I might as well say nothing at all.

11-18yrs

Feeling included/excluded in meetings

Feelings about involvement in meetings provoked the most comments. Many young people did not want meetings to be held at school drawing attention to their care status, while others wrote about feeling excluded and uninvolved. Young people wrote:

I don't want to have meetings. This makes me feel different. I will tell people how I feel without meetings. I know I can't go home until my mum sorts things out. 11-18yrs

I feel like when my social worker and other professionals have a meeting and it concerns me when neither me or my mom are involved, it makes me feel anxious of what has got said and what I get told second-hand may not be true. 11-18yrs

I feel that not even my grandmother is included in the decisions that are made by my social worker. 11-18yrs

⁵⁶ Selwyn, J et al (2015) *Children's Views on Being in Care: A literature review* Hadley Centre for Adoption and Foster Care Studies/Coram Voice. Baker, C. (2017) *Care leavers views on their transition to adulthood: A rapid review of the evidence*. Coram Voice

⁵⁷ *UN Convention on the Rights of the Child* (1989) Adopted by General Assembly Resolution 44/25 of 20 November 1989. Accessed at <https://www.unicef.org.uk/what-we-do/un-convention-child-rights/>

The survey does not provide enough detail to understand how practice differed in the LAs where children expressed their pleasure at being able to attend meetings or where, even if they did not attend, they still felt involved. Clearly, there were practice differences.

I come to all my meetings. I see my social workers and can talk to my IRO. 11-18yrs

I don't like going to meetings, so the social worker sees me before meetings to get my views. 11-18yrs

Lack of control

Young people wrote about feeling that they had no control over their lives with placements changing with no warning and decisions made on their behalf without consultation. Young people wrote:

My placement ended suddenly, and I had no say on where I would be living next. 11-18yrs

I have no control over my life. Social workers determine what's going to happen in my life and when. Since I came into care, I have had no control over any aspects of my life. Social services control where I live, what I do and how I do it. I hate living in care. 11-18yrs

I would like to know about appointments that are being made for me, and whatever has been discussed because sometimes I don't even know about appointments. 11-18yrs

Lack of information

Many young people felt they were not kept informed. Some young people wanted to have more input on decisions, especially court decisions.

I didn't get to go to court with mummy and say anything to help the decisions. 11-18yrs

I would like to go on holiday with my foster carers and family, which would make me feel more included. They will let me go but the social worker has said, 'No'. 11-18yrs

They say I cannot go back to where I used to live because of my friends. This means I cannot stay at home with my mum and sisters. No discussion. Just "No". 11-18yrs

A few young people complained that they did not understand why certain decisions had been made. They wrote:

I'm never told anything directly. 11-18yrs

[I want] more information about my family if anything changes as soon as they know. 11-18yrs

I have asked to see my parents more and my social worker never says whether I can or not. 11-18yrs

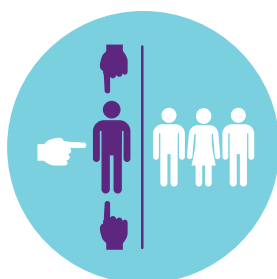
Views not being taken seriously

Even when young people were asked for their views, many complained it was tokenistic as they felt they were not really listened to or taken seriously. Young people wrote:

My opinion never seems to be valued. 11-18yrs

Why ask for my opinion when it is never taken into account! 11-18yrs

I feel like my opinions are often overruled by those of other people, such as my foster parents and social worker. 11-18yrs



Carer tells everybody that I am in care.

11-18yrs

Stigma, privacy, and discrimination

Children in care experience stigma and they worry about being labelled or judged if their care background is known.⁵⁶ Article 16 of the UNCRC⁵⁷ states that every child has the right to privacy. The convention states that the law in each country should protect the child's private, family, and home life, including protecting children from unlawful attacks that harm their reputation.



Young people (11-18yrs) were asked if adults did things that made them feel embarrassed about being in care.

1 in 8 young people (11-18yrs) felt that adults had done things to make them feel embarrassed about being in care. Young people in residential care and girls more frequently reported being embarrassed by adults.



- ▶ Girls more frequently felt adults had done things to make them feel embarrassed about being in care: 15% of girls v 10% of boys.⁵⁸
- ▶ Those in kinship care less frequently reported feeling embarrassed by adults and those in residential care more frequently.⁵⁹
- ▶ There was also a statistical association between feeling embarrassed and being afraid of going to school because of bullying. More than one in five (21%) of those who reported being fearful of bullying also reported feeling adults embarrassed them.⁶⁰

Table 7: Feeling embarrassed by actions of adults by placement type

Placement type	Feel embarrassed by adult actions
Foster care	12%
Kinship care	9%
Residential care	18%
Somewhere else	14%

Base 5,402 11-18yrs

A follow-up question asked young people to provide an example. A few young people wrote about behaviours that many young people would recognise as embarrassing parental behaviours: *“Disco-dancing” ... “Silly jokes” ... “Sometimes they hold my hand” ... “They talk to my friends” ... “My foster carers always sing in public and sometimes at home”*. However, the majority wrote about their privacy not being respected, stigmatising processes and a few felt discriminated against.

The Guidance on implementing the UNCRC for children in state care emphasises that all agencies should take, “appropriate measures to ensure that children in alternative care are not stigmatized during or after their placement. This should include efforts to minimize the identification of children as being looked after in an alternative care setting.”⁶¹

Right to privacy

Many young people felt discomfort because their privacy was not respected. Young people wrote about feeling that they could not control who knew about their circumstances and having to answer questions from professionals, peers, and strangers about their circumstances and with little or no choice about when to share that personal information. Young people wrote about feeling shame and feeling humiliated:

Everyone talks about me - strangers are invited to my meetings, school know EVERYTHING - why should they? Don't invite them. I don't want them talking about me or hearing about me. 11-18yrs

⁵⁸ $\chi^2=34.153$ [n=5334] df1, p<.001

⁵⁹ $\chi^2= 23.182$ [n=5402] df3, p<.001

⁶⁰ $\chi^2= 89.013$ [n=5,285] df1, p<.001

⁶¹ United Nations Guidelines for the Alternative Care of Children adopted 2010 <https://digitallibrary.un.org/record/673583?ln=en>

Some young people, especially when they looked different from their carers, wrote that they became the focus of awkward questions from their peers. Young people felt they could not control when questions were asked and wrote:

When I go to school with my carers people always ask who they are, because they are both 60+ so it is very embarrassing for me. 11-18yrs

If it is parents' evening, people question me if that is my mum and they say she looks nothing like me. 11-18yrs

'I thought your mum was black' - friends at school said this about my foster carer [carer white and young person Black]. 11-18yrs

Stigmatising processes

If go to doctors, dentist etc. I have to explain I am a child in care. 11-18yrs

Young people also wrote about procedures and rules that marked them out as different from their friends when they wanted to be "normal". Being taken out of class and having meetings at school were given by many young people as examples of adult behaviour that caused them embarrassment, did not respect boundaries, and made them 'different' to peers. Young people wrote:

Everyone knows I am in care. Why hold meetings where everyone can see?. 11-18yrs

Supervised spending. 11-18yrs

It can be annoying the amount of visits from social workers and the amount of reviews I have to have when I am settled in my placement. It can also be embarrassing when I have meetings at school. 11-18yrs

Discrimination

There were comments from a few young people who felt they were discriminated against because of their care status. For example, they wrote:

Patronise me. Tell me I can't do certain things because I'm in care. Tell my school to segregate me and my other peers who are in care because we are apparently less academic. 11-18yrs

When I was in primary school, they used to put a little colour next to my name to show I am in care. 11-18yrs

Summary - Being in care



Relationship with social workers

- ▶ Just as with trust in carers, the majority (>87%) of those who responded to the survey did trust their social workers. Trust in their worker decreased during the teenage years with 1 in 8 (13%) of those aged 11-18yrs responding 'hardly ever' or 'never'. Girls more frequently than boys lacked trust in their workers as did those in residential care compared to those in foster or kinship care. Young people who had experienced many changes in workers more frequently lacked trust in their current workers. 29% of young people (11-18yrs) had had three or more social workers in the previous year.



Understanding the reasons for being in care

- ▶ Children and young people were asked if an adult had explained to them why they were in care. Feeling that enough was known increased with age but even so, more than one in five of those aged 11-18yrs lacked sufficient understanding. Just under half (48%) of the youngest children (4-7yrs) did not fully understand. Girls (11-18yrs) and those who had multiple placements more frequently lacked understanding. Children and young people wrote about needing to know and also wanted to know what their plans were for their future.



Voice and involvement in decision making

- ▶ Most children (8-10yrs) and young people (11-18yrs) felt included by their social worker in decision-making but one in seven 'hardly ever/never' felt included. There were many comments about wanting to be kept informed, to be more involved and included in meetings and decisions and for their views to be really listened to and respected.



Stigma, privacy and discrimination

- ▶ Young people 11-18yrs were asked if adults did things that made them feel embarrassed about being in care: 13% responded that was the case. Young people wrote that they could not control their boundaries or who asked questions and when. Young people felt their privacy was not respected, confidentiality was breached, and a few felt that they were discriminated against because of their care status.



Daily Life

Where children in care live (placements)



Feeling safe

Children's right to life and protection from harm is set out in Article 6 and Article 19 of the UNCRC.⁶² As part of the ONS review of the national set of children's well-being indicators, they explored with children what contributes to a happy life. The children participating reported that feeling safe at home, in their neighbourhoods, at school and online were all important for their happiness⁶³.

Q: In our survey, children and young people were asked if they felt safe where they lived. The youngest children (4-7yrs) were given two options: 'mostly yes' and 'mostly no' whereas children aged 8-10yrs and young people (11-18yrs) could respond 'Always', 'Sometimes', 'Hardly ever' or 'Never'.

Most children and young people did feel safe in their placements and a larger percentage felt safe where they lived compared with their peers in the general population.

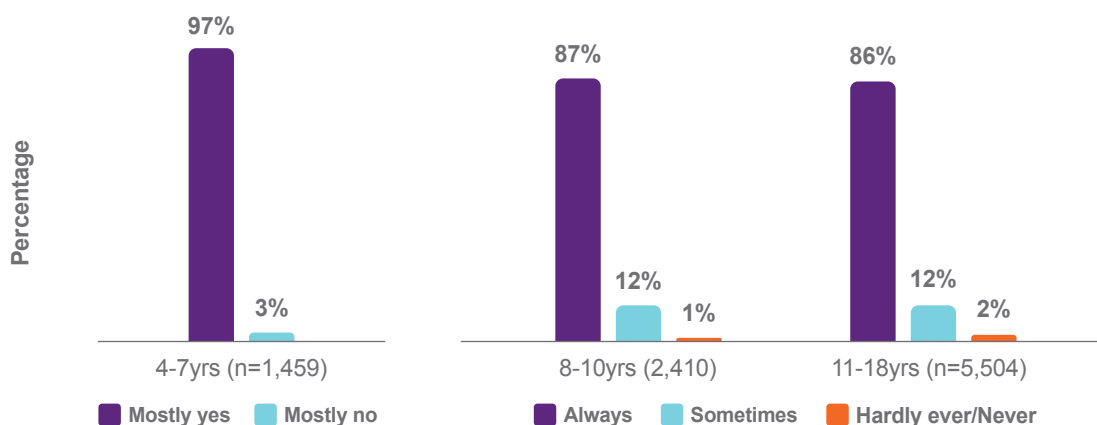


⁶² UN Convention on the Rights of the Child (1989) Adopted by General Assembly Resolution 44/25 of 20 November 1989. Accessed at <https://www.unicef.org.uk/what-we-do/un-convention-child-rights/>

⁶³ <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/childrenswellbeingindicatorreviewuk2020/2020-09-02>

The Children's Worlds Survey (Rees and Bradshaw 2020)⁶⁴ reported that 82% of children aged 10-11yrs in England felt 'totally safe' at home compared with 86% of children of the same age in our survey.

Figure 23: Feeling safe in placements



Examining the survey responses in more detail the type of placement was associated with responses on feeling safe:

1 in 20 children and young people in residential care 'never' felt safe where they lived compared with less than 1 in 100 in foster or kinship care feeling unsafe.

- ▶ 5% of children (8-10yrs) and 5% of young people (11-18yrs) in residential care 'never' felt safe where they lived in comparison with less than 1% of those in kinship or foster care. Six per cent of the young people who were living 'somewhere else' also 'never' felt safe. This mirrors the findings of Ofsted's social care questionnaires where a higher percentage of children in residential settings reported not always feeling safe compared with children in foster care.⁶⁵

Children wrote about some of their fears and about feeling safe:

When I'm going to bed and it's really dark, I feel like someone's going to smash the door and come and get me. I don't feel safe at night. I dream about a really bad thing with no body - just a face, and it scares me. 4-7yrs

I just keep being moved around. I have moved I think 7 times in the last 6 months. This makes me confused and scared. It has been dark and scary when I move, and I am told where, as we drive. I never meet the people beforehand and my things take time to catch up with me. 8-10yrs

I actually feel so safe now and that means I don't get hit by mum or dad and don't have to hear them swear and hear them arguing. My foster parents are so kind, loving, and so funny! 8-10yrs

I would like to get a better relationship with my carer so I feel safer where I live. I would like someone who can understand my thoughts and feelings. I would prefer to live closer to my school, my friends and my family because I feel safer. 8-10yrs

⁶⁴ Rees G and Bradshaw J (2020) *Children's Worlds National Report England*. <https://iscweb.org/wp-content/uploads/2020/08/England-National-Report-Wave-3.pdf>

⁶⁵ Ofsted (2021) *Children's Social Care Questionnaires 2021* <https://www.gov.uk/government/publications/childrens-social-care-questionnaires-2021-what-children-and-young-people-told-ofsted/childrens-social-care-questionnaires-2021>



Feeling settled

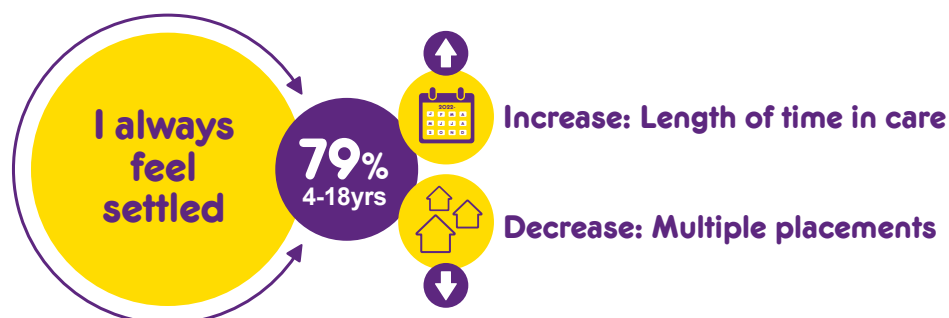
Being placed in a stable foster placement with people who care about me is what makes me feel, happy and settled and helps me to do well.

8-10yrs

Children in care have to deal with a great amount of change, not only as they come into care, but often whilst in care with changes in where they live, their schools and their social workers. Children need to feel settled to develop a sense of belonging and feel secure. However, statistics show that a quarter of children in care have experienced two or more placement moves within two years.⁶⁶

Q: Children and young people were asked if they felt settled where they lived. The youngest children (4-7yrs) had two response options: 'mostly yes' and 'mostly no', while children aged 8-10yrs and those aged 11-18yrs had the options of 'always', 'sometimes', 'hardly ever' and 'never'.

4 out of every 5 looked after children aged between 4 and 18yrs 'always' felt settled



⁶⁶ Children's Commissioner (2020) *Stability Index 2020*. Accessed at: <https://www.childrenscommissioner.gov.uk/wp-content/uploads/2020/11/cco-stability-index-2020.pdf>

⁶⁷ Somers' *D* positive correlation between feeling settled 'all/most of the time' and the length of time in care increasing $d=.114$ $p<.001$ and a negative correlation between feeling settled 'always' and having had four or more placements $d=.074$ $p<.001$

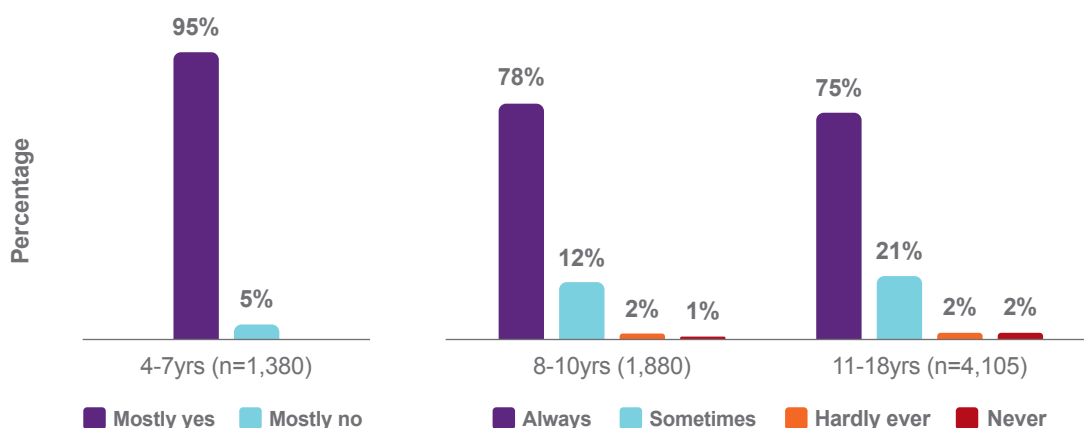
⁶⁸ Somers' *D* $=.675$ $p<.001$

The majority did feel settled (Figure 24). Associated with feeling settled for those aged 11-18yrs was:

- ▶ ‘Always’ feeling settled increased with the length of time in care and decreased if the young person had experienced multiple placements.⁶⁷
- ▶ There was also a positive correlation between feeling settled ‘always’ and young people reporting they ‘always’ felt safe where they lived: 88% of those who ‘never’ felt settled also reported feeling ‘hardly ever’ or ‘never’ safe.⁶⁸

9 out of 10 of those who ‘never’ felt settled, also didn’t feel safe in their placements.

Figure 24: Feeling settled



Children wrote about being unsettled because of their fears of having to move again, of important possessions that had been left behind and of missing their previous carers, their families and pets.

I would like my old squeaky hippo, which I had when I was 5. It is at home with my mum, and I haven’t seen it. 4-7yrs

Never have to move again as I am very happy where I am. 4-7yrs

I want to be able to stay with my current foster carer, but my social worker says I have to move. 8-10yrs

A few young people wrote about not wanting to stay with their present carers and asked for a move. For example, writing that they wanted:

To change foster carers. Sometimes I don’t feel like part of the family and feel like I don’t belong with them. 11-18yrs



Liking bedrooms

I kind of need my own space because I'm not happy because I don't have my own space.

8-10yrs

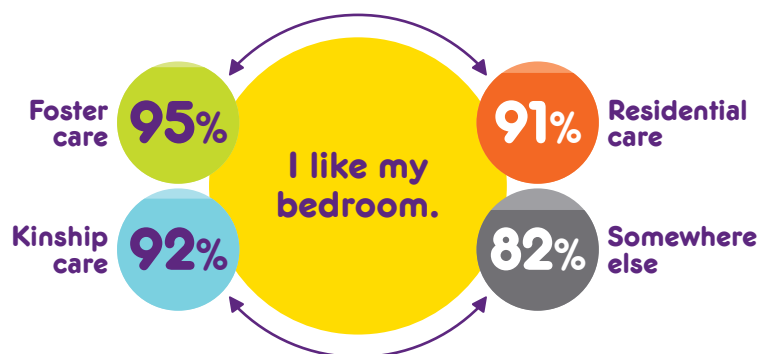
Having a bedroom that children and young people like is important. It provides a safe space to sleep and a place to keep personal possessions, offers some privacy in busy foster homes or residential units, and children and young people should be able to stamp their own identities and style on their room through posters, toys etc.

More children and young people in kinship care commented about having to share a bedroom compared with those in other placements. Those in foster/residential care also wanted more space or to be allowed a phone or TV in their bedrooms.

I would like to have my own bedroom and wardrobe because my clothes get thrown out and my sister messes up the room. 8-10yrs

I'd like a bigger house as I don't have a bedroom and I have to share with my nephews who are 8 and 5 so it is very overcrowded. 11-18yrs

People in care life should be better with TVs allowed in bedrooms for 15s and above. 11-18yrs



94% of children in care liked their bedrooms.

- ▶ Most of those who responded did like their bedrooms: there was a small decrease in satisfaction the older the child.
- ▶ There was no statistical difference by children's sex in the 4-7yrs or 8-10yrs age groups, but girls disliked their bedroom more frequently than boys in the 11-18yrs age group.⁶⁹

Those in residential care or living 'somewhere else' more frequently reported disliking their bedrooms.

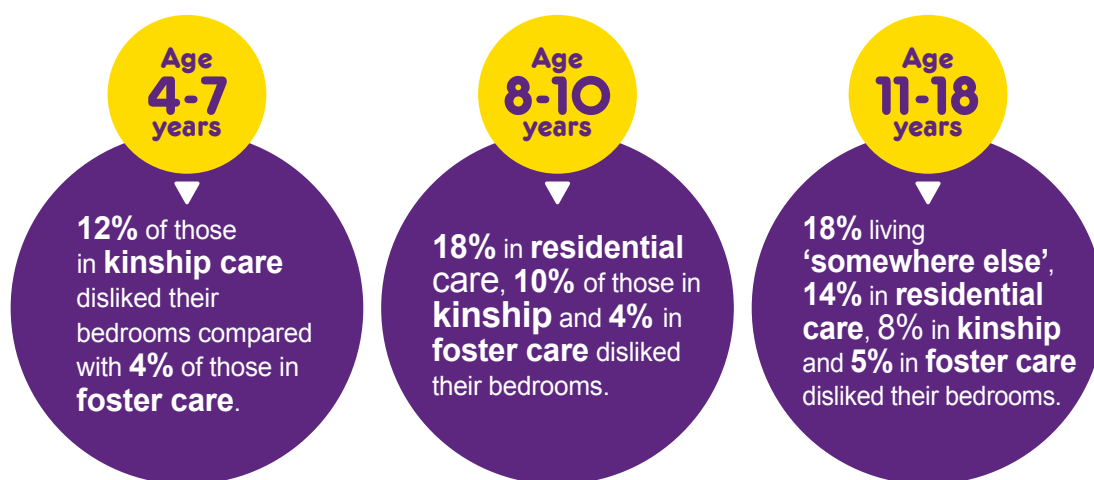
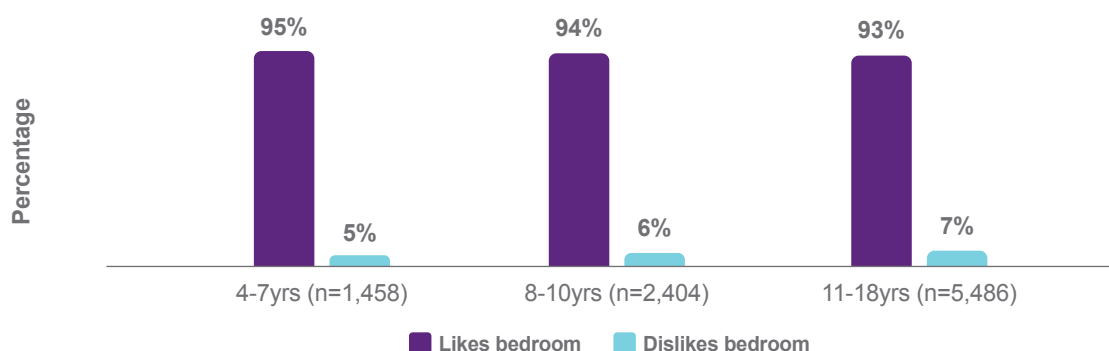


Figure 25: Liking bedrooms



Children also wrote about the colour, toys, and comfort of their bedrooms.

It is fun to live in my house and I've got a fluffy cosy bed. 4-7yrs
I have a TV in my bedroom, so I have my own personal space. 11-18yrs

However, whilst most complaints were about lack of space one young child wrote,

My room is too big and that's why I don't like it. 4-7yrs

⁶⁹ $\chi^2 = 4.806$ [n=5,366] df1, p<.03



Having fun and taking part in activities outside school

I have been supported and encouraged to get involved in sports (boxing and football) and this has been really good because it has helped my self-esteem particularly as I don't like school.

11-18yrs

All the children and young people were asked about the opportunities they had outside of school.

Our literature review of children and young people's views found that young people in care felt that having encouragement, opportunities, and resources to have hobbies and do fun and exciting things was important, as it made them feel like they had the same chances as other children. When developing the survey a few children said they were not able to have fun, as their weekend activities were determined by having to follow their carer's interests or their pocket money was insufficient to do similar things to their friends.⁷⁰

In the general population, children aged 7yrs were asked in the Millennium Cohort Study if they had fun with their families at the weekend with response options of, 'all of the time', 'some of the time' and 'never'.⁷¹ Just 2% of children (age 7yrs) responded 'never'. Young children (4-7yrs) in care reported a similar negative (3%) percentage.

Most children had fun at the weekends – only 3% of primary school children in care did not.

The vast majority did have fun: only 3% of children aged 4-7yrs and 3% of 8-10yrs did not have fun (Table 8 and Table 9).

Table 8: Having fun at the weekend age 4-7yrs

Age	Mostly yes n (%)	Mostly no n (%)	Total n
4-7 yrs	1,414 (97%)	38 (3%)	1,452

⁷⁰ Wood, M. & Selwyn, J. (2017). Looked after children and young people's views on what matters to their subjective well-being. *Adoption and Fostering*, 41(1), 20-34. <https://doi.org/10.1177/0308575916686034>

⁷¹ University of London, Institute of Education, Centre for Longitudinal Studies. (2021). Millennium Cohort Study: Fourth Survey, 2008. [data collection]. 8th Edition. UK Data Service. SN: 6411, <http://doi.org/10.5255/UKDA-SN-6411-8>

Table 9: Having fun at the weekend age 8-10yrs

Age	All/most of the time n (%)	Sometimes n (%)	Hardly ever n (%)	Never n (%)	Total n
8-10 yrs	1,761 (74%)	548 (23%)	47 (2%)	8 (1%)	2,374

Children and young people wrote about what they liked doing and what they would like to do more of:

I just love clubs. 4-7yrs

I would like to play football with a male or to join a football team. 8-10yrs

It can be fun sometimes to be in care, you get to go out places where you've never been before, and you get to do new exciting things. 8-10yrs



Young people aged 11-18yrs were asked, 'Outside of school or college, do you get the chance to spend time on your own hobbies or activities?'

Whilst over 9 out of 10 teenagers did take part in their own hobbies or activities, 9% 'hardly ever/never' did.

Table 10: Taking part in activities or hobbies outside of school or college 11-18yrs

Age	All/most of the time n (%)	Sometimes n (%)	Hardly ever n (%)	Never n (%)	Total n
11-18 yrs	3,161 (59%)	1,718 (32%)	316 (6%)	179 (3%)	5,374

- ▶ For both sexes and all age groups, not having fun at the weekends/spending time on hobbies was associated with not having a good friend.⁷²
- ▶ Children (8-10yrs) and young people (11-18yrs) who were living in residential care or those living somewhere else more frequently reported that they 'hardly ever' or 'never' had fun/ spent time on activities or hobbies compared with those in foster or kinship care.⁷³

Children reported that carers had a key role in enabling activities/having fun.

Living with Nana and granddad is fun. She normally takes us out to see fun things like going to the cinema. 4-7yrs

It's good at their house [foster care] because they are nice to me. They take me out everywhere like swimming. 8-10yrs

I like drawing and baking cakes with my carer. 11-18yrs

I have been able to see what normal children have in their lives. I like the food and the warm bed and my clean clothes. I really love our dog and walking him. I had a great paintballing party for my birthday with my school friends. I like all the after school and weekend activities. 11-18yrs

⁷² Age 4-7yrs $\chi^2= 63.951$, [n=1,426]df1, p< .001. age 8-10yrs $\chi^2= 81.069$ [n=2,344]df3, p< .001. age 11-18yrs $\chi^2= 121.444$ [n=5,315]df3, p< .001

⁷³ 5% of children (8-10yrs), 13% of young people in residential care, and 22% of those living 'somewhere else' did not have fun/take part in activities compared with 10% in kinship care and 7% in foster care.

A few children and young people felt they were not given opportunities and complained, for example, writing:

I would like my foster carers to take me out on trips. I've never been out to anything with them, and I've lived there for a long time. 11-18yrs

I would like to go to the gym, swimming, and boxing but they keep telling me to wait and I have waited 5 months now. 11-18yrs



Being outdoors in nature

I enjoy the beach and can't wait to go with my carers.

8-10yrs

There are several reasons why being outdoors in nature is good for mental health and well-being. There is a theory of biophilia that all human beings have an instinctive connection to nature that derives from our biological evolution.⁷⁴ Evidence from research⁷⁵ shows that being exposed to green natural environments improves well-being through a reduction in stress, a rise in positive emotions and better self-regulation. Being outside in nature can also encourage other types of positive behaviours such as taking exercise or social interaction and provide the opportunity to be away from other stressors such as noise.

⁷⁴ Wilson E (1984) *Biophilia* Cambridge, MA, Harvard University Press

⁷⁵ Mygind L, Kurtzhals M, Nowell C, Melby PS, Stevenson MP, Nieuwenhuijsen M, et al. (2021) Landscapes of becoming social: A systematic review of evidence for associations and pathways between interactions with nature and socioemotional development in children. *Environ Int.* Jan; 146. Vanaken GJ, Danckaerts M. (2018) Impact of Green Space Exposure on Children's and Adolescents' Mental Health: A Systematic Review. *Int J Environ Res Public Health.* 27;15 (12): 2668. PMID: 30486416

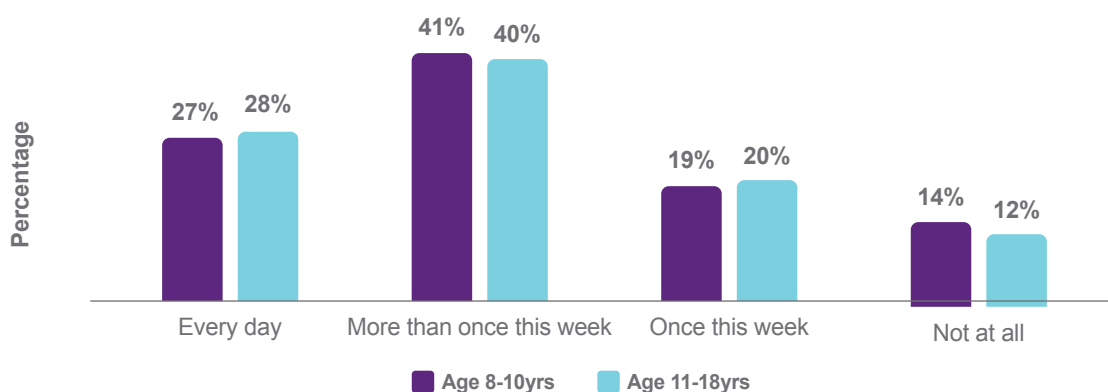


In the *Your Life, Your Care* survey we asked children (8-10yrs) and young people (11-18yrs) 'In the past week, how often have you spent time outdoors (e.g., going to the beach, woods, fields or the park)?'. Answer options were 'every day', 'more than once this week', 'once this week' and 'not at all'.

Over two-thirds of children in care had spent time outdoors in the previous week but more than one in ten had not had that opportunity.

The responses might have been affected by the pandemic, but most surveys had been completed before national lockdowns: just 10% had been completed in the few weeks after the first lockdown in March 2020 (Figure 26). There was no statistical difference in spending time outdoors by type of placement, the sex, or the ethnicity of the young person.

Figure 26: Spending time outdoors pre-pandemic



Base 2,210

There is no exact national comparison with peers in the general population. The People and Nature Survey found in a small survey of adults with children, that 82% of children spent time in green or natural spaces once a week or more (16% had daily access) and 7% 'less than once a month' or 'never'.⁷⁶

Most of the comments from children and young people in the *Your Life, Your Care* survey were about how much they enjoyed going outdoors:

[I would like to be] going to the beach and go to woodland. 8-10yrs

⁷⁰ <https://www.gov.uk/government/statistics/the-people-and-nature-survey-for-england-monthly-interim-indicators-for-july-2020-experimental-statistics/the-people-and-nature-survey-for-england-monthly-interim-indicators-for-july-2020-experimental-statistics#childrens-time-in-nature>



Opportunities to be trusted

**[What would make care better?]
Being able to go out with my friends and be trusted with my own money and my phone.**

11-18yrs

Children in the focus groups that informed the survey felt they were not always trusted or given responsibilities. The younger children particularly highlighted how they were not given opportunities to help out in school. In the surveys, children and young people wrote about wanting to be trusted and being given a second chance if they made a mistake.

Q: Children (8-10yrs) were asked if they were given opportunities in school to help the teacher.

83% of children felt they were given opportunities to help the teacher.

I want to be in the Rights Respecting Steering Group next year. 8-10yrs

- ▶ Children who felt they were not given opportunities in school to be trusted more frequently reported they disliked school.⁷⁷

Q: Young people (11-18yrs) were asked if they were given opportunities to be trusted.

Most young people (91%) felt they had opportunities to be trusted.

⁷⁷ $\chi^2=134.234$ [n=2,231], df3, p<.001

The majority (91%) of young people (11-18yrs) felt they were given opportunities to be trusted, In response to the question, 'What would make care better?' young people wrote about being given more opportunities to be trusted.

I would like my foster carers [to] be aware of social media and not think that it is scary or dangerous. I would like the foster carer to trust me more with my phone and social media. 11-18yrs

I feel like being placed here I have had to up my guard more. I wasn't trusted at the start. It's gotten better but it still gets on my nerves that if I have a couple of snacks in my bag from when I have been at college that they are taken away and binned. This frustrates me as they don't have many snacks in the house. 11-18yrs

I want to be trusted but I know I have to work at this. 11-18yrs

My foster carers would stop searching by room, take locks off doors and stop blaming me for everything I want some trust. 11-18yrs



Practising life skills

[I'd like to] be treated more like an adult so that I can prepare myself for later on when I move out and get a place to myself.

11-18yrs

In our analysis of the views of care leavers on their well-being, we found a steep decline in well-being after young people left care. Young people report an abrupt end to much of the support available to them as looked after children once they turn 18.⁷⁸ This change in support makes preparation for independence all the more important. Yet many studies have found that there is great variation in the level of support young people receive before leaving care and many feel unprepared.⁷⁹

⁷⁸ Briheim-Crookall, L., Michelmore, O., Baker, C., Oni, O., Taylor, S & Selwyn J. (2020) *What Makes Life Good, Care leavers' Views on their Well-being* <https://coramvoice.org.uk/wp-content/uploads/2020/11/1883-CV-What-Makes-Life-Good-Report-final.pdf>

⁷⁹ Baker, C. (2017) *Care leavers' views on their transition to adulthood: A rapid review of the evidence* <https://coramvoice.org.uk/wp-content/uploads/2021/01/Care-Leaver-Rapid-Review-24.10.17-final-proof-2.pdf>

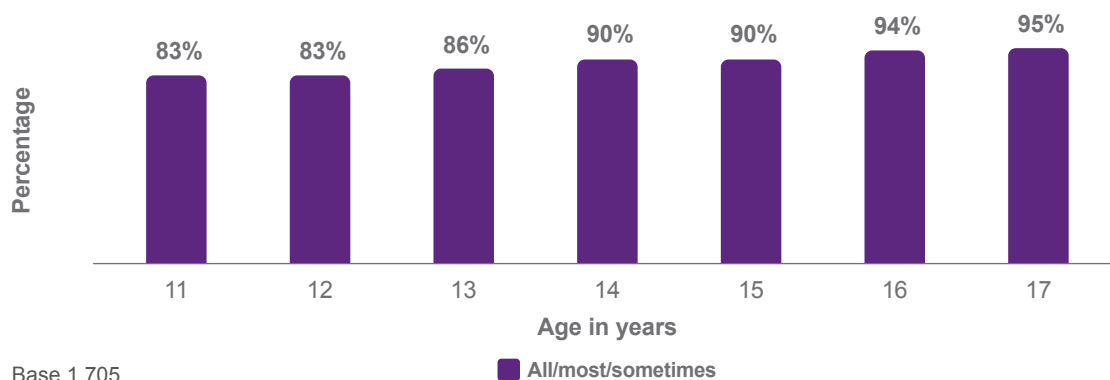


Young people in the 11-18yrs group were asked, 'How often do you get to practise life skills such as cooking healthy food, washing clothes, or going to the bank?'

9 out of 10 young people felt they had opportunities to practise life skills.

- ▶ The majority (89%) felt they were given opportunities 'all/most of the time' or 'sometimes.'
- ▶ As would be expected, the percentage who felt that they were given opportunities increased with the age of the young person (Figure 27)

Figure 27: Opportunities to practise life skills 'all/most of the time' or 'sometimes' by age



- ▶ There were no statistically significant differences in the opportunity to practise life skills by the young person's sex or ethnicity.
- ▶ Young people living 'somewhere else' (94%) or in residential care (93%) more frequently reported learning life skills compared with those in foster (88%) or kinship care (87%).⁸⁰



Young people wrote about wanting to cook and manage their own money.

From the age of 17, I think young people should be given the money for their travel, pocket money, etc into their own accounts to start acting more independently. 11-18yrs

If they let me do cooking at the foster care home. 11-18yrs

I'd like a little bit more pocket money to improve my savings. 11-18yrs

⁸⁰ $\chi^2=23.286$ [n=5,335] df3, p<.001

School, college and skills



Nobody listens to me at home. School is the only one that listens to me every day.

8-10yrs

School and college

Liking school has been identified as a protective factor against bullying, risk-taking and substance misuse. Students who dislike school or who do not feel connected to it are more likely to fail academically, leave education early, and have mental health problems.⁸¹ In the general population, the Health Behaviour in School-Aged Children (HBSC) survey asks children aged 11-15yrs, 'How do you feel about school at present?' The response options are, 'like it a lot', 'like it a bit', 'don't like it very much', and 'don't like it at all'. Overall, 23% of young people in the general population reported that they liked school 'a lot' and 47% said that they liked school 'a bit'. Liking school decreased with age for both boys and girls. School also provides opportunities to develop relationships and learn how to communicate and interact with others. Importantly, "school can provide structure and stability in otherwise troubled life and can provide a forum for developing positive self-esteem and confidence either through less formal non-academic achievements, such as sport, music or getting a part in the school play."⁸²



In our *Your Life, Your Care* survey children aged 4-7yrs are asked, 'Do you like school?' The response options are, 'mostly yes' or 'mostly no'. Children aged 8-10yrs and young people (11-18yrs) are asked 'How much do you like school/ college?' with the response options, 'a lot', 'a bit', 'not very much' and 'not at all'.

⁸¹ Inchley, J. et al (2020) Spotlight on adolescent health and well-being: findings from the 2017/2018 Health Behaviour in School-aged Children (HBSC) survey in Europe and Canada, World Health Organisation. <https://apps.who.int/iris/handle/10665/332104>

⁸² Dixon, et al. (2006) *Young People Leaving Care: A Study of Costs and Outcomes*. <https://www.york.ac.uk/inst/spru/research/pdf/leaving.pdf>

Liking school decreased with age.

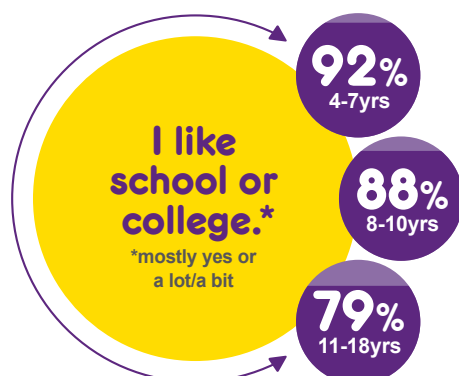
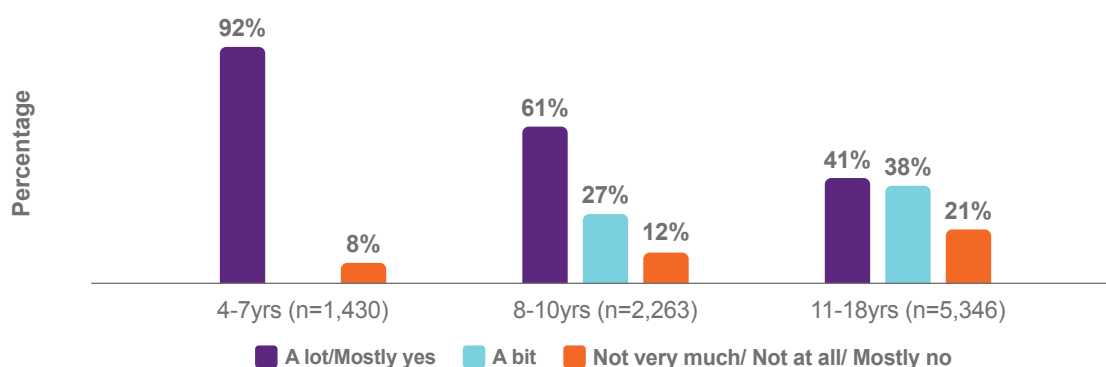


Figure 28: Liking school



A larger proportion of children in care liked school compared with their peers in the general population.



- ▶ Selecting those aged 11-15yrs (to match the HBSC age cohort) 81% of young people in care liked school 'a lot/a bit' compared with 70% of their peers in the general population.
- ▶ For all age groups disliking school was associated with not having a good friend.
- ▶ Feeling unsafe and unsettled in placements was associated with disliking school for children aged 4-7yrs.
- ▶ Boys aged 4-7yrs and 8-10yrs more frequently disliked school than girls but there were no sex differences in liking school in the older age group
- ▶ Being in residential care was associated with disliking school for those aged 11-18yrs: 30% in residential care disliked school compared with 23% in kinship and 20% of those in foster care.

⁸³ Brooks, F. et. al (2020), *Health Behaviour in School-aged Children (HBSC): World Health Organization Collaborative Cross National Study: Findings from the 2018 HBSC study for England*. vol. MCC0544/DS/01-20, University of Hertfordshire, Hatfield. <http://hbscengland.org/wp-content/uploads/2020/01/HBSC-England-National-Report-2020.pdf>

Disliking school was associated with

- ▶ **Age:** increased with age.
- ▶ **Good friends:** Not having a good friend was associated with disliking school in every age group.
- ▶ **Sex:** Being a boy was associated with disliking school for children aged 4-10yrs.
- ▶ **Feeling safe & settled:** Not feeling safe or settled in placement was associated with disliking school for children aged 4-7yrs
- ▶ **Placement type:** A higher percentage of young people 11-18yrs in residential care disliked school compared with those in kinship or foster care.
- ▶ **Bullying & stigma:** There was a statistical association between fear of going to school because of bullying, feeling embarrassed by adult actions and disliking school for those aged 11-18yrs.

Children and young people wrote about their experiences at school: the support they got and would like to have and their dislike of meetings disrupting their education.

I wish I had more support in class, I get left to work on my own and I have to do the work all by myself and I get it wrong. 8-10yrs

I like my home and school. Everyone helps me a lot. 8-10yrs

I get treated differently in school because I am in care. 8-10yrs

When I have my PEP [Personal Education Plan] meetings, I don't want to worry about them, but I don't want to miss my classes. But I do want feedback from what everyone has said about me. 11-18yrs

Children also wrote about the importance of the location of their school. There were comments about wanting to stay in the same school but also comments about the effect on children who were travelling a long way from placement to school. They found the journey tiring and as discussed earlier, there were difficulties keeping friends when living so far away.

Sometimes I get sad at school because I am tired. My school is far away. 4-7yrs

I really like that I have been able to stay in the same school with my friends. I like the taxi I go in. 4-7yrs

I would like to be in a foster home nearer school as it takes an hour in the taxi to get to school. 8-10yrs

Do I really have to move school because I want to stay in this school because I feel safe? 8-10yrs



Support for education

**I love my family...
I always get
help with my
homework.**
8-10yrs

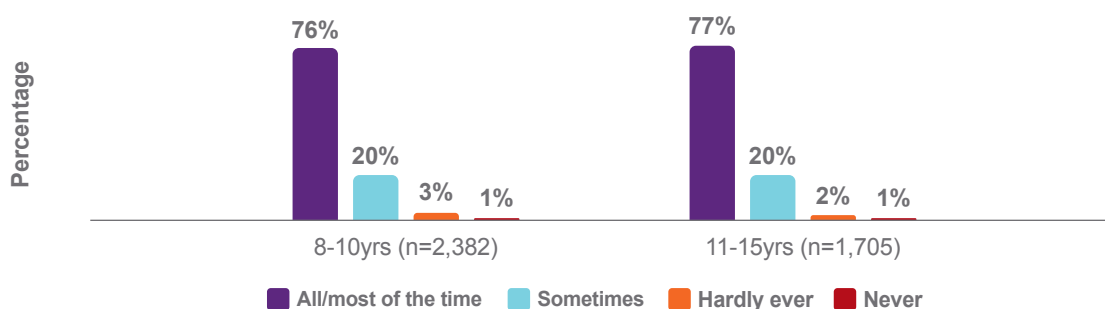
Adults taking an interest in children’s education has been shown to influence children’s educational outcomes. Carers’ encouragement, high aspirations and expectations have all been shown to have an impact on how well children in care do in school.⁸⁴ Since the surveys began, it has been a consistent finding that the vast majority of looked after children and young people feel that their carers are interested in what they are doing in school and are supportive.



Children in the 8-10yrs and 11-18yrs surveys were asked if the adults they lived with showed an interest in what they were doing in school or college.

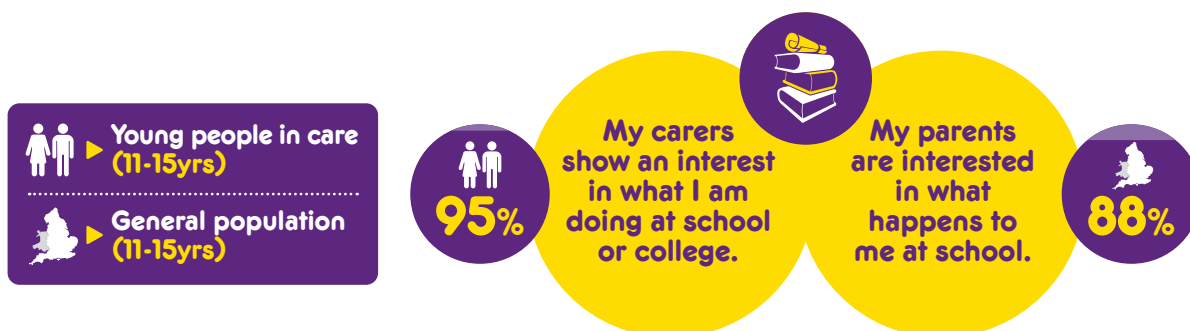
19 out of 20 children and young people felt that the adults they lived with were interested in their education; a higher proportion than reported by peers in the general population.

Figure 29: Carers’ interest in children and young people’s education



⁸⁴ Berridge, D., Luke, N., Sebba, J., Strand, S., Cartwright, M., Staples, E., McGrath-Lone, L., Ward, J. & O'Higgins A. (2020) *Children in need and children in care: educational attainment and progress*
<http://www.bristol.ac.uk/media-library/sites/policybristol/briefings-and-reports-pdfs/Final%20Report%20Nuffield.pdf>

- ▶ The positive responses from young people were more frequent than their peers in the general population. The HBSC survey⁸⁵ found that 88% of children (11-15yrs) felt that their parents were interested in what happened at school compared with 97% of young people (11-15yrs) in care.
- ▶ 95% of all young people (11-18yrs) felt their carers were interested in their learning
- ▶ Unlike many other indicators in this and national surveys that show that older young people are less positive in their responses compared with younger children, on this important indicator there was no age difference.



Young people in residential care less frequently reported that their carers were interested in what they did at school compared with young people in foster and kinship care.

- ▶ As with many of the other indicators in our survey, those in residential care responded less favourably: 10% of young people (11-18yrs) in residential care felt their carers were interested 'hardly ever' or 'never' compared with 2% of those in kinship care or 1% of those in foster care.

⁸⁵ Brooks, F. et. al (2020), Health Behaviour in School-aged Children (HBSC): World Health Organization Collaborative Cross National Study: Findings from the 2018 HBSC study for England. vol. MCC0544/DS/01-20, University of Hertfordshire, Hatfield. <http://hbscengland.org/wp-content/uploads/2020/01/HBSC-England-National-Report-2020.pdf>



Fear of bullying

Being in care is a struggle because you can get bullied or picked on for being special and this can bring my mood down and others too, which means this also impacts on their lives because they might be scared to go to school/college and be afraid that they will get singled out from all the others because they are in care and are different from everyone else.

11-18yrs

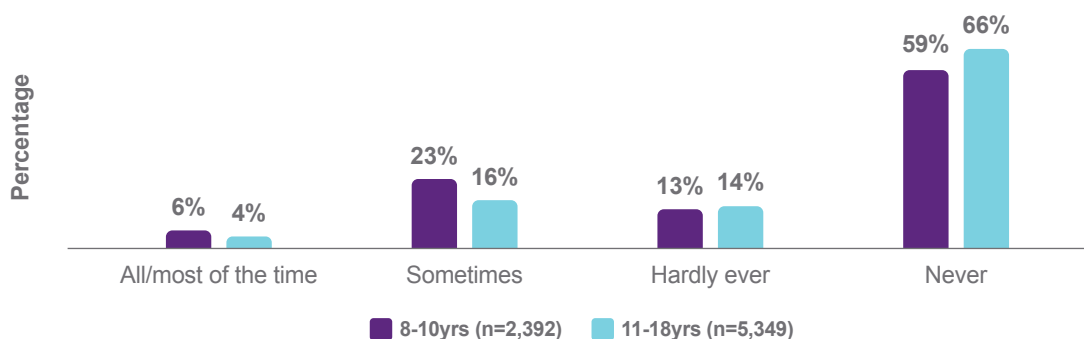
Research from 22 countries shows that being free from bullying is one of the most important factors in children's well-being⁸⁶ When developing the survey children in the focus groups stated that they had been bullied and believed that they were marked out as different because they were in care.⁸⁷



In our survey, children (8-10yrs) and young people (11-18yrs) were asked if they were afraid of going to school because of bullying.

The majority of children (72%) and young people (80%) were 'hardly ever' or 'never' afraid of bullying (Figure 30).

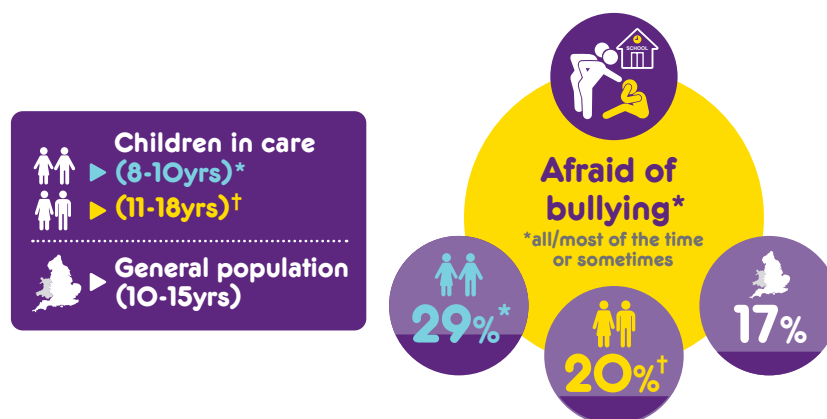
Figure 30: Fear of going to school because of bullying



⁸⁶ University of Bristol & Coram Voice (2015) *Children and Young People's Views on Being in Care A Literature Review*. <https://coramvoice.org.uk/wp-content/uploads/2021/01/Childrens-views-lit-review-FINAL-2.pdf>

⁸⁷ Wood, M. & Selwyn, J. (2017) Looked after children and young people's views on what matters to their subjective well-being. *Adoption and Fostering*, 41(1), 20-34. <https://ora.ox.ac.uk/objects/uuid:7d9d9db9-8eb5-4ca4-a3fc-698d3fb4db4>

A higher proportion of children in care reported fear of bullying compared with peers in the general population.



Although the question in our survey is not identical to the question on bullying in national surveys, a larger percentage of children (29%) and young people in care (20%) reported bullying compared with 17% of young people (10-15yrs) in England who had felt afraid or upset by bullying in the previous year.⁸⁸ However, estimates of bullying in the UK vary widely. In the 'What About YOUth' survey⁸⁹, 55% of young people aged 15yrs said they had experienced some form of bullying in the past couple of months. In contrast, in the Annual Bullying Survey 2018, 22% of young people (mostly aged between 12 and 15yrs) reported that they had experienced bullying in the last 12 months.⁹⁰ The difference may be in young people's understanding of the question, the response options offered and whether the surveys are completed in or out of school.

Children who did not have a good friend were also often afraid of going to school because of bullying.

- ▶ Nearly half (46%) of children (8-10yrs) and a third (33%) of young people (11-18yrs) who did not have a good friend also reported being afraid of going to school because of bullying 'all/most of the time' or 'sometimes'.

An analysis by the Department for Education of national bullying data reported that some groups were significantly more likely to experience bullying⁹¹. Those groups included younger children, White children and those who received extra help at school. These findings were replicated in the *Your Life, Your Care* surveys.

- ▶ A larger percentage of 8-10yrs children (29%) reported being afraid of bullying 'all/most of the time' or 'sometimes' compared with 20% of young people aged 11-18yrs.
- ▶ Just as in the general population a larger percentage (23%) of White young people (11-18yrs) in care reported bullying compared with Mixed (18%), Asian (16%), and Black (13%) young people.
- ▶ National statistics⁹² report that 56% of looked after children have a special educational need compared to 15% of all children in the school population and therefore a larger proportion of children in care will be receiving extra help. This may make them more likely to become victims of bullying.

⁸⁸ DfE (2018) *Bullying in England, April 2013 to March 2018 Analysis on 10 to 15 year olds from the Crime Survey for England & Wales*
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/919474/Bullying_in_England_2013-2018__1_.pdf

⁸⁹ <https://digital.nhs.uk/data-and-information/publications/statistical/health-and-wellbeing-of-15-year-olds-in-england/main-findings---2014>

⁹⁰ <https://www.ditchthelabel.org/research-papers/the-annual-bullying-survey-2018/> Question "In the past 12 months, and based on your own definition, how frequently were you bullied?" 34% at least once a week and 51% at least once this month

⁹¹ DfE (2018) *Bullying in England April 2013 to March 2018: Analysis on 10-15 year olds from the Crime Survey for England and Wales*
<https://www.gov.uk/government/publications/bullying-in-england-april-2013-to-march-2018>

⁹² DfE (2018) *Outcomes for Looked after Children*
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/695360/SFR20_2018_Text__1_.pdf

- ▶ Children commented that they were treated differently in school because of being in care and that too may draw unwelcome attention (see earlier section on Stigma, privacy, and discrimination and comments from children below).

Young people's comments on bullying focused on how being in care made them "different" and how being seen to be different could make them the target of bullies. They wrote in response to a question asking, 'What would care better?':

Not having worries and being scared to go to school. 8-10yrs

I get a lot of worries at school. I am not liked very much. 8-10yrs

My family did not love me. I used to get bullied as I didn't live with them. 11-18yrs

More than one in five (21%) of those who felt afraid of bullying 'All/most/sometimes' also reported feeling adults did things that made them feel embarrassed about being in care.⁹³

The young people wrote:

[I feel embarrassed] when teachers say anything about being in care when others can hear. 11-18yrs

When contact workers used to pick me up from school, they used to wear their badges. 11-18yrs

When I was younger, it was a lot more difficult. Adults always felt that they could see you when they wanted to - at school and at club - that was embarrassing. As I got older, I was able to say that actions like this were not ok, so to stop. 11-18yrs



Help to address bullying



Children (8-10yrs) and young people (11-18yrs) who reported that they were afraid of bullying were also asked if they got help from an adult.

- ▶ 83% of children (8-10yrs) and 79% who were afraid of bullying reported that they got help from an adult.
- ▶ Slightly more White and Asian young people (82%) reported getting support compared with 75% of Black and Mixed ethnicity young people.



⁹³ $\chi^2 = 89.013$ [n=5,285] df1, p<.001

Summary - Daily life



Where children in care live

- ▶ A larger proportion (88%) of looked after children 'always' felt safe where they lived in comparison with children (82%) in the general population.
- ▶ Those in residential care or living somewhere else more frequently reported feeling unsafe compared with those in foster or kinship care. About 5% of young people in residential care 'hardly ever' or 'never' felt safe.
- ▶ Feeling settled 'all or most of the time' increased with the length of time in care and decreased if the young person had had multiple placements.
- ▶ 88% of those who 'never' felt settled also reported 'hardly ever/never' feeling safe where they lived.
- ▶ Between 5% and 7% of children and young people disliked their bedrooms.
- ▶ Children in kinship care disliked their bedrooms more frequently than those in foster care. Comments suggested that the dislike was often because bedrooms were shared.
- ▶ Young people (11-18yrs), especially girls, in residential care or living somewhere else more frequently reported disliking their bedrooms than those in foster and kinship care.



Opportunities

- ▶ The majority (91%) of young people (11-18yrs) felt they were given opportunities to be trusted, although there were also comments on wanting to be trusted more, especially with social media.
- ▶ Children (8-10yrs) were asked if they were given opportunities in school to help the teacher: 83% of children responded positively. Not feeling trusted by teachers was associated with disliking school.
- ▶ Children aged 4-7yrs were asked whether they got to have fun at the weekends. The vast majority (97%) responded 'Mostly yes'.
- ▶ Those in residential care or living somewhere else more frequently reported that they 'hardly ever' or 'never' were able to have fun or take part in activities or hobbies compared with those in foster or kinship care.
- ▶ For both sexes and all age groups, there was a statistical association between not having a good friend and not having fun at the weekends/taking part in activities.

- ▶ More than one in ten children and young people had not had the opportunity to visit green spaces and the natural world in the previous week. Placement type, sex and ethnicity were not associated with spending time in green spaces.
- ▶ The majority (89%) of young people (11-18yrs) felt they were given opportunities 'all/most/sometimes' to practise life skills. Feeling that they were given opportunities increased with age. Young people in residential care more frequently reported learning life skills compared with those living in foster/kinship placements.



School and college

- ▶ 79% of looked after young people liked school a lot /a bit: a larger proportion than their peers in the general population. Liking school decreased with age.
- ▶ Not having a good friend was associated in every age group with disliking school
- ▶ Being a boy was associated with disliking school for children aged 4-10yrs.
- ▶ Not feeling safe or settled in placement was associated with disliking school for children aged 4-7yrs
- ▶ Placement type: 30% of young people (11-18yrs) in residential care disliked school compared with 23% in kinship and 20% of those in foster care.
- ▶ About 97% of children (8-10yrs) and young people (11-15yrs) felt that their carers were interested 'all/most/sometimes' in their education: a larger proportion than their peers (88%) in the general population. On this important indicator there was no decline in positive responses as young people got older.
- ▶ A larger percentage of looked after children (29%) and young people (20%) were afraid of bullying compared with 17% of young people (10-15yrs) in England.
- ▶ A DfE analysis of national bullying data found that younger children and White children were more likely to experience bullying. These findings were replicated in the *Your Life, Your Care* surveys. However, while 82% of White and Asian young people recorded that they were being supported to prevent bullying fewer (75%) Black and Mixed ethnicity young people felt supported.
- ▶ Unsurprisingly, children and young people who felt they did not have a good friend also reported being fearful of bullying. There was a statistical association between fear of bullying, feeling embarrassed by adult actions and disliking school.



Article 39 of the UNCRC states that children who have experienced neglect, abuse, exploitation, torture or who are victims of war must receive special support to help them recover their health, dignity, self-respect, and social life. All looked after children have experienced a traumatic event, as they have been separated from their families. In addition, many have experienced parental abuse and neglect and others have experienced the trauma of being a refugee or an unaccompanied asylum seeker. These experiences can all have an impact on well-being.



[I need]
help for my
headaches
and dark
thoughts.

11-18yrs

Having worries and feeling supported

The literature review⁹⁴ that informed the development of the surveys found many studies highlighted the lack of mental health support, especially for depression and anxiety. Studies using the Strengths and Difficulties Questionnaire⁹⁵ consistently report that 51% of children in care have scores that are a cause for concern or 'borderline' in comparison with about 13% of their peers in the general population.



At the time we were developing the surveys, children in the general population were asked, as a measure of their wellbeing, about their experience of anxiety. However, the young people in our focus groups did not like this question with its sole focus on anxiety. Instead, children and young people aged 8-18yrs developed a two-part question. First, the question asked if they worried about their feelings or behaviour with answer options of 'all/most of the time', 'sometimes', 'hardly ever' and 'never'. If they responded 'all/most of the time', or 'sometimes', the follow-up question asked if they felt they got help with those worries with a yes/no response.

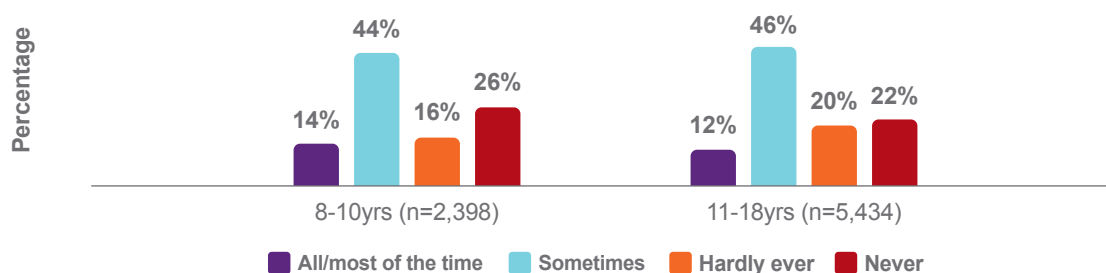
Around 6 out of 10 children (8-18yrs) worried about their feelings or behaviour.

⁹⁴ University of Bristol & Coram Voice (2015) *Children and Young People's Views on Being in Care A Literature Review*. <https://coramvoice.org.uk/wp-content/uploads/2021/01/Childrens-views-lit-review-FINAL-2.pdf>

⁹⁵ Ford T, Vostanis P, Meltzer H, Goodman R. (2007) Psychiatric disorder among British children looked after by local authorities: comparison with children living in private households. *Br J Psychiatry*. Apr;190:319-25.

- ▶ 58% of children (8-10yrs) felt that they worried ‘all/most of the time’ or ‘sometimes.’ (Figure 31). Of those who worried, 86% felt they were getting help. There was no statistical difference in responses on whether they had support from adults by the child’s sex, ethnicity, or types of placement.

Figure 31: Worrying about feelings or behaviour



Base 7,832

Children aged 8-10yrs wrote about their worries:

[I would like to] know that adults will listen to me, especially when I am worried and help me. 8-10yrs

Over half (58%) of young people (11-18yrs) worried ‘all/most of the time’ or ‘sometimes’; 76% of whom felt they were getting help. In this older age group, there were statistical differences in the proportions reporting worrying by sex, placement type and by ethnicity:

- ▶ 60% of girls (11-18yrs) reported worrying compared with 55% of boys.⁹⁶
- ▶ Those living somewhere else (67%) and in residential care (64%) more frequently reported worrying compared with those in foster care (56%) or kinship (55%).⁹⁷
- ▶ 65% of Asian young people or Other (66%) ethnicities reported worrying compared with young people of Mixed (59%), White (57%) or Black (53%) ethnicities.⁹⁸
- ▶ Although a larger proportion of ethnic minority young people reported worrying compared with White young people, fewer felt they were getting help.⁹⁹ 22% of White, 24% Mixed, 30% Asian, 33% Black and 40% of young people of Other ethnicities felt they did not get help with their fears and worries.

Worrying among teenagers was associated with:

- ▶ **Sex:** More girls (60%) reported worrying compared with boys (55%).
- ▶ **Placement type:** Those living ‘somewhere else’ and in residential care (64%) worried more than those in foster care (56%) or kinship (55%).
- ▶ **Ethnicity:** 65% of Asian young people and 66% of Other ethnicities reported worrying compared with young people of Mixed (59%), White (57%) or Black (53%) ethnicity.

⁹⁶ $\chi^2 = 12.207$ [n=5,313] df1, p<.001

⁹⁷ $\chi^2 = 25.737$ [n=5,379] df3, p<.001

⁹⁸ $\chi^2 = 18.504$ [n=5,358] df4, p<.001

⁹⁹ $\chi^2 = 38.573$ [n=3,419] df4, p<.001

Young people wrote about their anxieties, fears of moving again, worries about family (sometimes living in other countries), fears for the future, and their asylum applications:

[What would make care better?] Help staff understand my anxieties better and understand when I am becoming anxious and what is the right thing to do. 11-18yrs

I worry if I will get the help I'm going to need when I finish my apprenticeship. 11-18yrs

I am happy at home, but I worry about my family in Afghanistan. I also worry about my appeal to stay in the UK. I don't sleep well. 11-18yrs

Several young people wrote about a lack of mental health support and interventions that would enable them to recover from their earlier experiences. For example:

I feel like a lot of my problems are a result of my mental instability. Unfortunately, I do not know where to turn to talk about my feelings. I have been on the waiting list for a psychologist from CAMHS for months. Talking to a school counsellor wasn't helping, as I felt like I was only digging up childhood trauma and the counsellor wasn't doing anything to help me deal with that. All she did was listen and even tear up on some occasions which made me rather angry, I don't need sympathy, I need help. After two years of counselling, I simply stopped turning up. ... Talking to my foster parent is difficult, as I am scared that she will be angry at me for feeling this way or think that I am ungrateful. I feel like she doesn't really understand me. She often says I have no real problems to be worrying about, which is far from the truth. She calls me childish. 11-18yrs

I worry that when I kick-off that will be the end of my placement. They will make me leave. They say they won't and that it wouldn't be the same without me. But as much as I am trying, sometimes I still break things or kick the staff. It's not right, but I don't think about it until afterwards. One day they will say enough is enough and I'll have to go. Where will I go? This is my home. We are like a family. Me, X (the other young person) and staff. I really love them, I do. I don't want it to end because I mess up again. I have had people who like me before, but they kicked me out, and sometimes it wasn't even my fault. Sometimes another person in the house was against me. It's always me that has to go. 11-18yrs



Happiness with appearance

I get bullied for many reasons and for how I look as a whole.

11-18yrs

Studies have shown that poor body image is associated with low self-esteem, depression, and self-harm.¹⁰⁰ The work of The Children's Society has drawn attention to young people in the general population feeling unhappy with their appearance and the influence these feelings have on young people's well-being. The Good Childhood Report 2020¹⁰¹ found that 14% of children (10-17yrs) were unhappy with their appearance and girls more so than boys. A similar question on appearance is used in several different surveys of young people (10-15yrs) in the general population.¹⁰²

Q: Beginning in 2017, the *Your Life, Your Care* survey asked young people (11-18yrs) if they were happy with the way they looked on a 0-10 scale. Young people scoring 0-4 are rated as having 'low' happiness, scores of 5-6 moderate, and 7-10 high happiness with their appearance

Most young people (11-18yrs) were happy with their appearance: 15% rated themselves as having low happiness.

Girls were more frequently unhappy with how they looked compared with boys.



¹⁰⁰ Cash T & Smolek L (2011) *Body Image: A Handbook of Science, Practice and Prevention*. Guilford Press: London

¹⁰¹ <https://www.childrensociety.org.uk/sites/default/files/2020-11/Good-Childhood-Report-2020.pdf>

¹⁰² The ONS reports happiness with appearance using data from the *Understanding Society* study. The question on appearance uses a 7-point scale ranging from 'Completely happy' to 'Completely unhappy'. Just over three-quarters (76%) report being relatively happy. <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/datasets/childrenswellbeingmeasures>
The HBSC survey (2020) asks if young people (11-15yrs) feel that their body is the right size: 60% do and girls aged 15yrs were least likely to feel their body is right. Children's Worlds survey (2020) in England, a survey of 717 children (age 10-11yrs) in the general population: 21% scored 0-6

1 in 3 girls in residential care and 1 in 5 girls in foster care were unhappy with how they looked.

- ▶ A third (33%) of girls (11-18yrs) in residential care were unhappy with how they looked compared with about 20% of girls in foster or kinship care.¹⁰³
- ▶ White girls were more frequently unhappy with how they looked compared with girls of Asian, Black, or Mixed ethnicity.¹⁰⁴
- ▶ More Asian boys (12%) were unhappy with how they looked in comparison with boys of White, Black or Mixed ethnicity aged 11-18yrs.¹⁰⁵
- ▶ The Children's Society 'Good Childhood Report' 2020¹⁰⁶ provides data on happiness with appearance that enables a comparison between young people aged 10-17yrs in the general population and young people in our sample aged 11-17yrs. In the general population, 14% of young people score in the low rating (0-4) for happiness with appearance compared with 15% of young people in care.



Life getting better

I feel healthy, safe, and supported. From what my life was like 3 years ago it is now much, much better.

11-18yrs

In our focus groups that helped develop the survey, many young people were keen to stress that their lives were getting better.



Children and young people aged 8-18yrs are asked, 'Is your life getting better?' with the answer options 'Much better', 'A bit better', 'no change', 'A bit worse', 'A lot worse'.

Despite all the young people's worries and concerns, the vast majority thought that their lives were improving.

¹⁰³ Placements and young person's sex and unhappiness with appearance: girls in foster care 21%, kinship 20%, residential 33% $\chi^2 = 18.038$ [n=1920] df3, p<.001

¹⁰⁴ Ethnicity and sex and unhappiness with appearance: White girls (24%), Mixed (19%), Black (18%), Asian (11%), $\chi^2 = 34.345$ [n= 1,919] df12, p<.001

¹⁰⁵ Asian young men (12%) the most dissatisfied compared with White (8%), Black (7%), Other (6%) Mixed (3%) $\chi^2 = 30.013$, [n=2,051] df12 p<.003

¹⁰⁶ <https://www.childrensociety.org.uk/sites/default/files/2020-11/Good-Childhood-Report-2020.pdf>



- ▶ 85% of children (8-10yrs) and 83% of those aged 11-18yrs reported that their lives were getting better.

Many comments highlighted how being looked after had made their lives better:

Everything is better. I have lots of friends and my best friends are [name] and [name]. 8-10yrs

Even though I'm not happy living with my current carers, I think that being in care is a good thing and overall has been better for me than when I lived at home with my parents. 11-18yrs

... being in care has changed the opinions I have on the world. I am a complete new person and I have changed for the better, extremely. I don't know what I would do if I wasn't in care because right now if I wasn't in care I would be talking to my friends about what the latest post on Instagram was or the newest TV program. But instead, I am talking about all my options for my life and what I want to be when I am older. The few times I have been asked how being in care is and at the beginning I couldn't answer this. But now I can just casually say that I couldn't be happier of where I am and what life I am living. 11-18yrs

But there were also comments from those who felt being in care had mixed effects, or who felt it had made their lives worse.

Not really. It's made my life better in some aspects and more difficult in others. Better I can see I get looked after better and more comfortable in the home I live in that makes me happier as a whole. Relationship with parents has changed for the better, but all of my relationships have changed and I don't see my friends as often as I used to. Everything has changed. 11-18yrs

Being in care has made my life worse and I wish I had never been taken into care and am going back to live with my Mum when I finish school. 11-18yrs



Overall well-being

Comparison with children in the general population

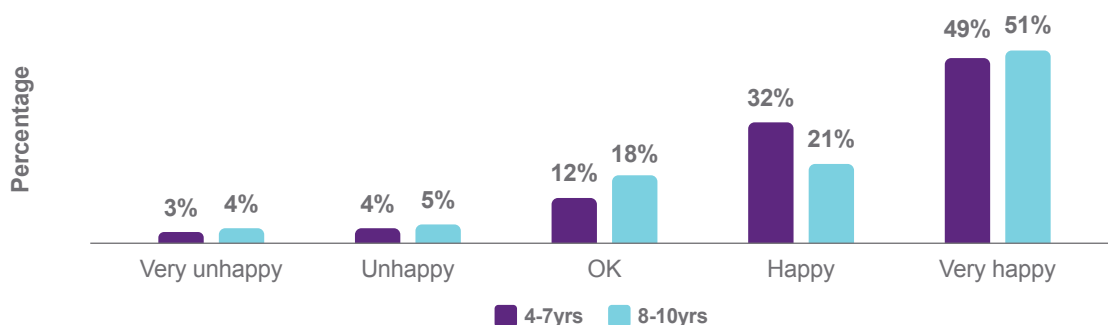
The Millennium Cohort Study asked 14,000 children aged 7yrs in the general population, 'How often do you feel happy? The response options were 'all of the time', 'some of the time' and 'never'. More than a third of children (36%) in that survey reported that they felt happy 'all of the time', and 62% felt happy 'some of the time'. A small minority (2%) reported that they 'never' felt happy. The children who regarded themselves as happy 'all of the time' were those who got on well with their siblings, had fun together with their family at weekends, and had lots of friends. They were also more likely not to bully others and were less likely to be bullied themselves. Children whose parents reported shouting when the child was naughty had lower odds of being happy than children whose parents 'never' or 'rarely' shouted.¹⁰⁷

Children aged 4-10yrs

Q: In the *Your Life, Your Care* survey, children aged 4-7yrs and 8-10yrs are asked how happy they were the previous day, using a 5-point scale ranging from 'very unhappy' to 'very happy' (with accompanying emojis).

A minority of children reported being 'unhappy' or 'very unhappy' the previous day (Figure 32).

Figure 32: Happiness yesterday: children aged 4-7 and 8-10yrs



Base: 4-7yrs n=1,432, 8-10yrs n= 2,390

¹⁰⁷ Chanfreau J., Lloyd, C., Byron, C., Roberts, C., Craig, R., De Feo, D. & McManus, S.(2013) *Predicting wellbeing*. NatCen Report for Dept of Health.London

Whether a child was happy or not the previous day can be affected by many transient concerns. To understand more about the well-being of the children who had responded negatively to the question on happiness we examined their responses to all the questions.



Low well-being 4-7yrs

I want to see mummy more. I want to play in the park more. I want to be happy because I am not happy in foster care.

4-7yrs

1 in 30 children (4-7yrs) gave responses that suggested they had low well-being.

Just over a hundred children (112: 7%) reported that they were unhappy the previous day.

Forty-eight children (3%) gave negative responses to multiple questions in the survey. These children with low well-being:

- ▶ did not feel settled or safe,
- ▶ did not trust their social worker or their carers,
- ▶ disliked school,
- ▶ did not have fun at the weekend, and
- ▶ did not have a good friend.

The child's sex, ethnicity or placement type was not associated with low well-being.

Children whose responses suggested they had low well-being often wrote about missing their mums or siblings, not understanding why they were in care and not wanting their carers to shout. For example, writing,

I don't feel safe in my care home, as she shouts at me. But she takes me out a lot, more than Mummy and Daddy did. 4-7yrs

I miss my Mummy. 4-7yrs

Getting my sisters back home with me. 4-7yrs

Why am I in foster care? 4-7yrs

It would be better if I didn't get told off at school. I get told off if I have been fighting. I would like to fight at school. 4-7yrs



Low well-being 8-10yrs

I have lots of worries and I miss mum all the time at night and get sad mainly all the time.

8-10yrs

1 in 20 children (8-10yrs) gave responses that suggested they had low well-being.

Nearly one in ten (217: 9%) children aged 8-10yrs recorded that they had felt 'unhappy' the previous day. Five per cent (n=131) gave many negative responses to survey questions. These 131 children were categorised as having low well-being. Associated with their low well-being were the same indicators as those identified for the younger age group and in addition, these older children reported that they:

- ▶ felt their carers did not notice their feelings,
- ▶ reported bullying,
- ▶ wanted more contact with their families.

The child's sex, ethnicity, or placement type was not associated with low well-being.

Comments from the children reflected their concerns but also their worries about having to change placements and uncertainty about the plans for their future. The children with low well-being responded to a question that asked 'What would make care better?' in the following ways:

Going out and doing things at the weekend a lot more instead of staying home all the time. 8-10yrs

I would like my foster carers to understand how I feel and not make fun of how I feel. 8-10yrs

Living with one carer and sticking with them only. 8-10yrs

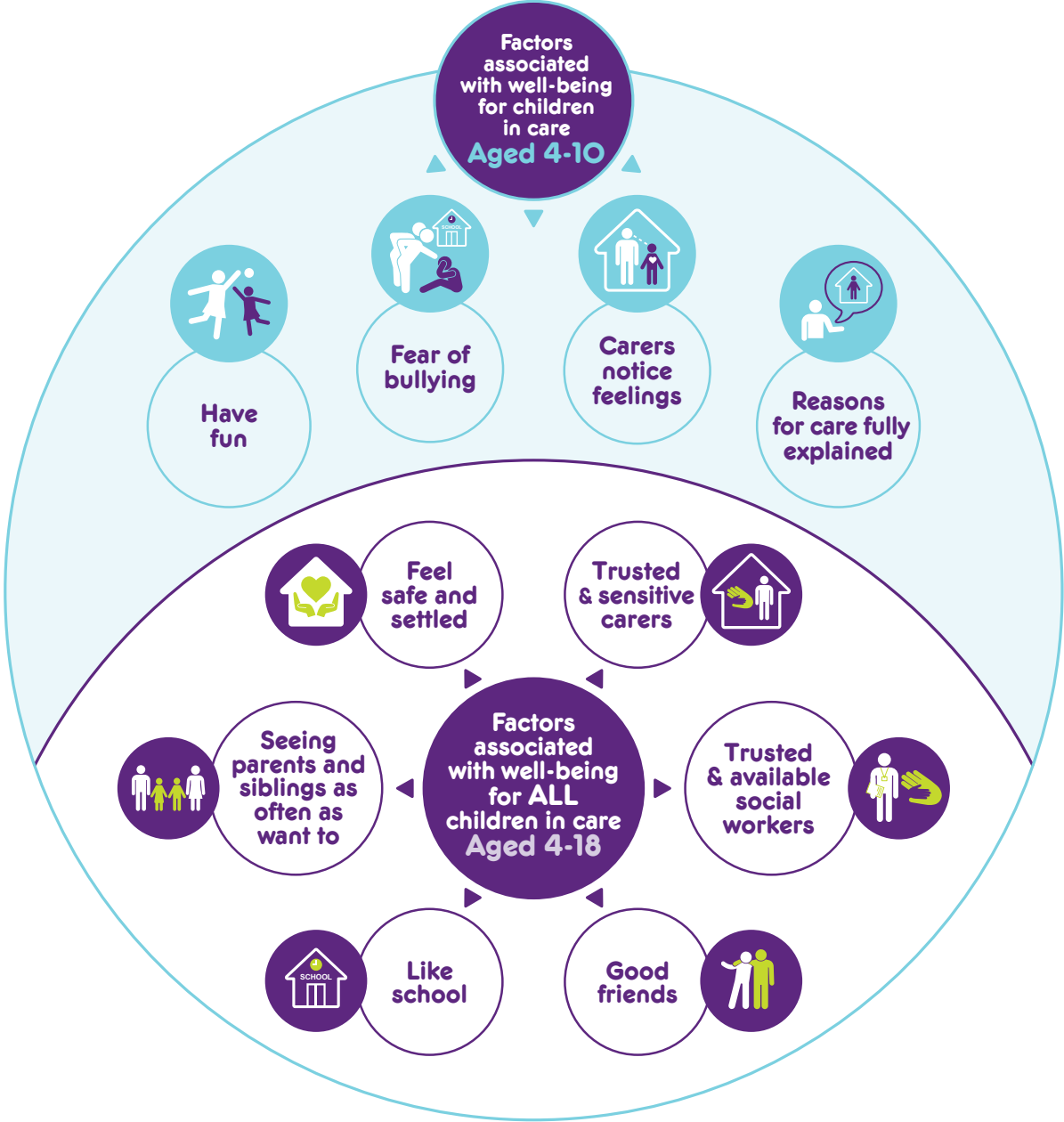
I think children should be given photos of their birth family. 8-10yrs

To know what is going to happen in the future. To see more of my dad. To see my sisters. 8-10yrs

To let mum see us a bit more. To be able to let my feelings out. 8-10yrs

Sometimes people shout at home. Make me have more fun at school. We only do work, and I get really angry and bang my head off the walls, table anything. 8-10yrs

Figure 33: Factors associated with well-being for children aged 4-10yrs



Young people aged 11-18yrs

The Children's Society has been recording and reporting on children's well-being since 2005.¹⁰⁸ Some of their findings are incorporated into the Office for National Statistics (ONS) online publication of the well-being of the child population.¹⁰⁹



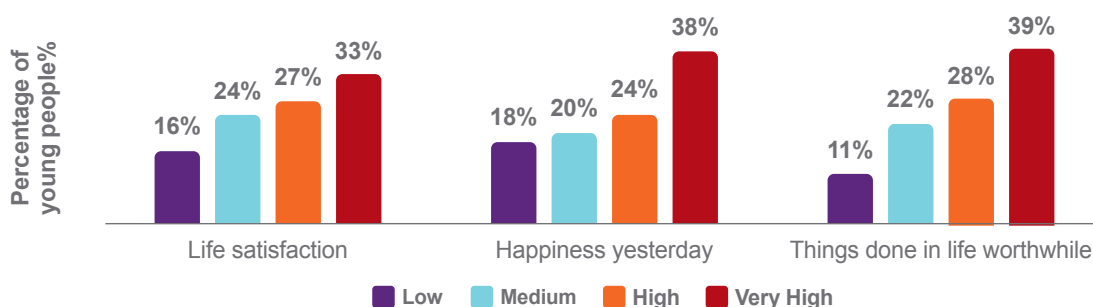
Our survey for young people (11-18yrs) includes three questions that are also reported by the ONS on the well-being of young people in the general population. The questions all use 0 to 10 scales with zero being the lowest point and ask:

- Overall, how satisfied are you with your life nowadays?
- Overall, to what extent do you feel the things you do in your life are worthwhile?
- How happy did you feel yesterday?

The ONS categorises the responses as 0-4 low, 5-6 moderate, 7-8 high and 9-10 very high.

Figure 34 illustrates looked after young people's self-ratings on the scales. In the analysis below, we first report the findings for the whole sample (11-18yrs) and then compare the ratings given by looked after young people (11-15yrs) with the ratings given by their peers (10-17yrs or 10-15yrs) in the general population.

Figure 34: Looked after young people's ratings on the three well-being scales



Base 5,236 - 5,346 young people 11-18yrs

The majority of young people did not rate themselves as having low well-being on these scales. Between 60% and 67% selected 7-10 (high or very high) on each scale. The Children's Society¹¹⁰ provides information on young people (age range 10-17yrs) in the general population who completed the ONS scales as part of their household surveys. Table 11 shows that while many young people in care (11-17yrs) felt they had good well-being, in comparison with peers there was a higher percentage self-rating as 'low'.

¹⁰⁸ Children's Society - Good Childhood Index accessed at: <https://www.childrenssociety.org.uk/information/professionals/good-childhood-index>

¹⁰⁹ ONS (2018) Children's well-being measures. <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/datasets/childrenswellbeingmeasures>

¹¹⁰ Children's Society (2020) The Good Childhood Report 2020 <https://www.childrenssociety.org.uk/sites/default/files/2020-11/Good-Childhood-Report-2020.pdf>

Table 11: Comparison of well-being: young people in care and in the general population

		Average scores (Out of 10)	% self-rating as low (0-4)
Overall, how satisfied are you with your life nowadays?	Young people in care	6.9	16%
	General population	7.2	9%
How happy did you feel yesterday?	Young people in care	6.9	16%
	General population	7.2	9%
Overall, to what extent do you feel the things you do in your life are worthwhile?	Young people in care	7.3	20%
	General population	7.4	8%

Base *Your Life, Your Care* 11-17yrs n=5,162. Young people in the general population 10-17yrs n=2,000

Variation by age

Well-being declined as young people got older.

A larger percentage (14%-20%) of young people aged 16-18yrs scored 0-4 (low) on all three scales compared with the 11-15yrs age group where 11%-18% rated themselves as low. A similar decline is reported by peers in the general population, but the decline is not inevitable. Research has found that decline varies by the quality of parent/child relationships and other factors.¹¹¹

Variation by ethnicity

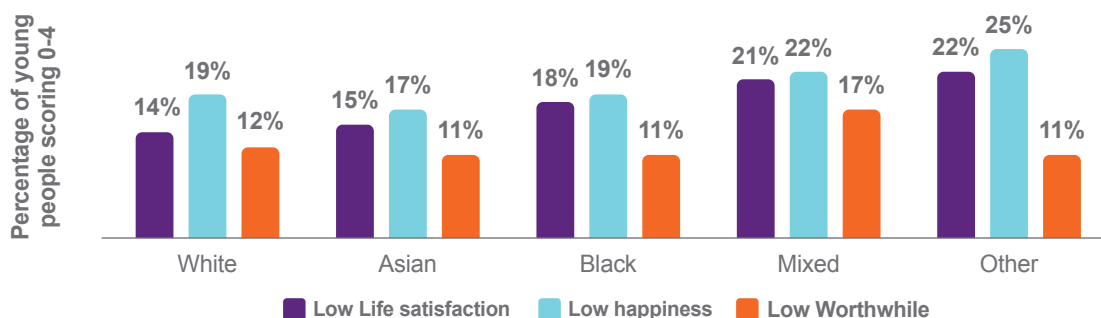
Low well-being was more common among young people of Mixed or Other ethnicities than among White, Asian, and Black young people.

There was variation in the proportion rating themselves as 'low' on the 'life satisfaction' and 'things done in life being worthwhile' scales by the young person's ethnicity (Figure 35). Young people (11-18yrs) of Mixed or Other ethnicities more frequently self-rated as 'low' compared with young people of White, Black, or Asian ethnicity.¹¹²

¹¹¹ Gutman, L., Brown, J., Akerman, R. & Obolenskaya, P. (2010) *Change in wellbeing from childhood to adolescence: risk and resilience* [Wider Benefits of Learning Research Report No. 34]. Centre for Research on the Wider Benefits of Learning, Institute of Education, University of London: London

¹¹² Life satisfaction $\chi^2=27.791$ [n=5,258] df4 p<.001; Things done in life worthwhile $\chi^2= 15.946$ [n=5,162] df4, p<.003. Happiness yesterday not statistically significant $\chi^2=8.364$ [n=5,248] df4, p<.08.

Figure 35: Percentage rating as 'low' on three well-being scales by ethnicity



Variation by sex

More girls than boys rated themselves as having low levels of life satisfaction, happiness and feeling that the things that they did in life were worthwhile.

On each of the scales, a significantly larger percentage of looked after girls rated themselves in the low range in comparison with boys.¹¹³ We selected young people aged 11-15yrs to compare with data published¹¹⁴ on differences by sex of children (10-15yrs) in the general population. In the general population girls (age 10-15yrs) also rate themselves lower on each of the scales in comparison with boys but the difference was much greater for those looked after (Table 12).

Table 12: Low ratings (0-4) on the ONS scales by sex and comparison with peers

Well-being scales	General population Boys 10-15yrs	Looked After Boys 11-15yrs	General population Girls 10-15yrs	Looked After Girls 11-15yrs
Low life satisfaction	2.9%	10.7%	4.8%	18.1%
Happiness yesterday	5.8%	14.3%	7.4%	21.8%
Things done in life are worthwhile	3.8%	7.2%	5.1%	14.1%

¹¹³ Girls compared with boys: Life satisfaction $\chi^2=18.851$ [n=1,651] df1 p<.001. Happiness yesterday $\chi^2=15.988$ [n=1,647] df1 p<.001 Things done in life are worthwhile $\chi^2=20.711$ [n=1,624] df1, p<.001

¹¹⁴ <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/datasets/childrenswellbeingmeasures>



Positivity about the future

“

I'm glad because it has made my life better. It has also made me be able to have a better future with more options to choose from.

11-18yrs

”

Optimism about the future is linked with happiness and resilience.¹¹⁵ The children who helped develop the *Your Life, Your Care* survey thought that the questions used in the Children Society/Children's World 2014 surveys on happiness, life satisfaction, life worthwhile and being positive about the future were important questions to ask. These national surveys have since removed the question on positivity about the future, but we retained this question as children in care felt it was important. When the ONS reviewed their children's well-being indicators they found that future prospects, including having the skills and education to live independently and develop their careers were important to children.¹¹⁶ In the Children's Commissioner 'Big Ask' survey, children in care generally reported similar aspirations to other children, i.e., 'to get on in life'. Top aspirations were 'a good job or career', 'enough money to buy the things they need', and 'good friends'.¹¹⁷



In addition to the three ONS well-being questions, the *Your Life, Your Care* survey asks young people (11-18yrs) if they feel positive about their future with responses on a 0-10 scale. The scale is categorised into 0-4 (low/pessimistic), 5-6 (moderate), 7-8 (high) and 9-10 (very high positivity) about the future

Almost 9 out of 10 were positive about the future

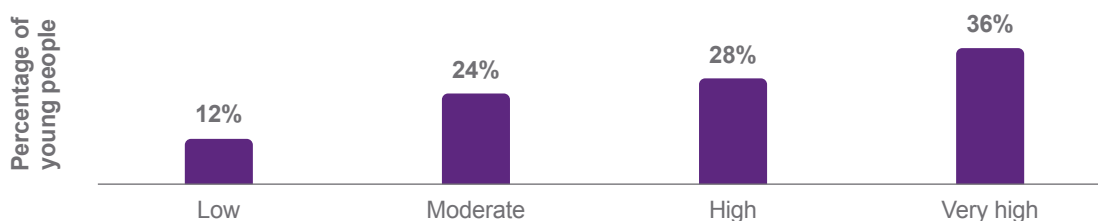
¹¹⁵ Conversano C, Rotondo A, Lensi E, Della Vista O, Arpone F, Reda MA. (2010) Optimism and Its Impact on Mental and Physical Well-Being. *Clinical Practice and Epidemiology in Mental Health*, 6, 25-29.

¹¹⁶ ONS (2020) *Children's well-being indicators review, UK: 2020* <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/childrenswellbeingindicatorreviewuk2020/2020-09-02>

¹¹⁷ Children's Commissioner (2021) *The Big Answer* https://www.childrenscommissioner.gov.uk/wp-content/uploads/2021/11/occ_the_big_ask_the_big_answer_2021.pdf

The majority (88%) of young people (11-18yrs) were positive: 12% rated themselves as pessimistic (Figure 36).

Figure 36: Young people’s positivity about their future



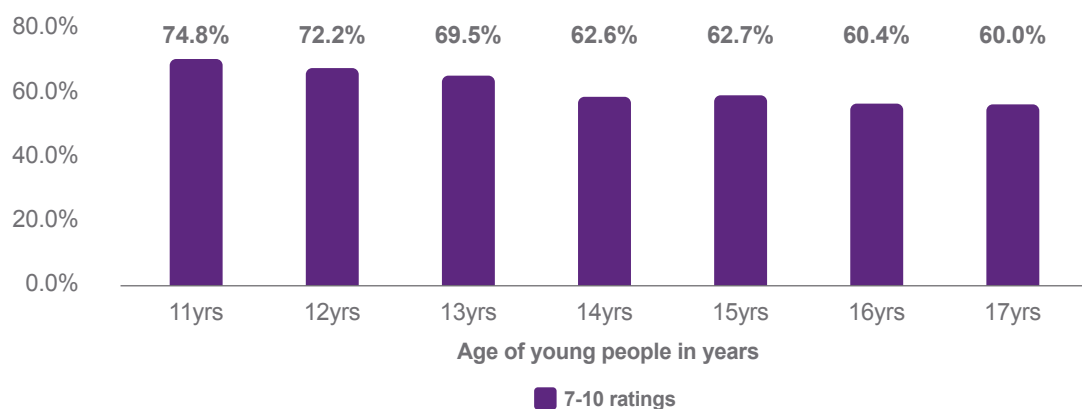
Base: 5,284 Young people 11-18yrs

- ▶ Girls (11-18yrs) were on average more pessimistic about their futures than boys: 14% of girls compared with 10% of boys rated themselves as low (0-4 on the 0-10 scale).¹¹⁸
- ▶ The ethnicity of the young person (11-18yrs) was associated with their feelings about the future. Fewer Asian (10%), White (11%) and Black (11%) young people felt pessimistic (scoring 0-4 low) compared with 17% of young people who described their ethnicity as Mixed or Other.¹¹⁹
- ▶ Placement type was also associated with optimism about the future. About 10% of those in foster and kinship placements, 18% of those in residential care, and 21% of those living somewhere else rated themselves as pessimistic about their future.¹²⁰

Optimism about the future decreased as young people got older and more girls than boys felt pessimistic.

At 11 years old three-quarters of young people reported high positivity about the future compared to only six out of 10 at age 17yrs. (Figure 37)

Figure 37: High or very high positivity about the future by age



Base: 2,492 Young people 11-17yrs

¹¹⁸ $\chi^2=34.832$, [n=5,168] df2, p<.001

¹¹⁹ $\chi^2=18,240$ [n=5,209] df4, p<.001

¹²⁰ $\chi^2=57,920$ [n=5,231] df3, p<.001

Young people wrote about their hopes and concerns:

We talk about things, but they do what they want to do anyway. When I leave care, I will have to go into some horrible bedsit or something. I haven't done well at school and don't want to go to college but there is nothing else. I couldn't earn enough to support myself. I just look forward to a life on benefits like my family. I think I came into care too late, problems at home went on for ever and foster care didn't make things better. 11-18yrs

Planning is sometimes talked about too soon and I then get anxious (I am an anxious person generally). I know we have to talk about when I am 18 but that is scary stuff and it is all "possibly" or "maybe" nothing definite. I could be living anywhere when I am 18 as nothing can be paid for before this? I don't want to stay with my foster carers, as I want to try and be independent, but I don't want to live in a hostel or YMCA or anything like that. I probably won't be able to afford a flat or a bedsit though, so I don't have many options. Shared housing can be scary if you are with other care leavers - they all seem to have so many problems. That's life though, isn't it, SCARY. 11-18yrs

I'm happy. I want to learn to be a mechanic. 11-18yrs

So many good things for me. I am now going to college and my English is improving very fast. I look to the future with confidence. 11-18yrs

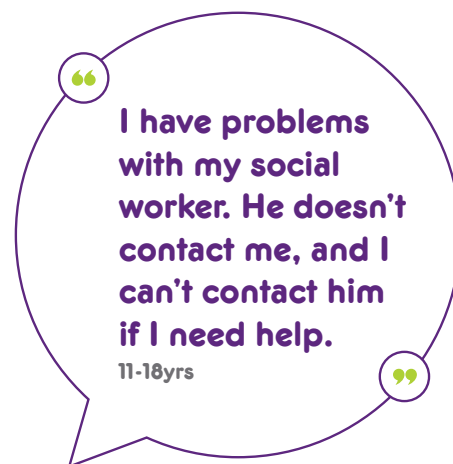


Low well-being 11-18yrs



Young people were categorised as having low well-being if they rated themselves as 0-4 on two or more of any of the four well-being scales in the *Your Life, Your Care* survey (life satisfaction, happiness yesterday, things done in life worthwhile, positivity about the future).

1 in 6 young people (11-18yrs) gave responses that suggested they had low well-being.



All the survey questions were statistically associated with low well-being. To identify which of the indicators had the most influence on young people's low well-being, a series of logistic regression models were used (see the appendix for the detail). Some questions could not be included in the model because they had either been recently added to the survey or were highly correlated with each other.

Compared with young people who rated themselves positively on each of the indicators below, the odds of having low well-being increased:

- ▶ **2.7 times if the young person mistrusted their carer and felt that they were not trusted**
- ▶ **2.6 times if they disliked school**
- ▶ **2.3 times if they worried 'always /sometimes' about their feelings or behaviours**
- ▶ **2.2 times if they felt unsafe where they lived**
- ▶ **2 times if they didn't have a trusted adult in their lives**
- ▶ **1.8 times if they felt they could not do the same things as their peers**
- ▶ **1.7 times if not given opportunities to practise life skills**
- ▶ **1.5 times if they felt excluded from decision-making compared to those who felt included**
- ▶ **1.5 times if they were unhappy with how often they saw parents and siblings**
- ▶ **1.3 times if they found it difficult to contact their social worker**

The odds of having low well-being were 1.6 times greater for girls compared with boys and 7 times greater for those who disliked their appearance.

Not statistically associated with well-being was whether parental contact was occurring. It was not that contact was unimportant for well-being, but it was the young person's rating of satisfaction with the frequency of contact that was associated with well-being rather than its presence or absence.¹²¹

Young people with low well-being wrote:

I hate foster care. They make you feel like rubbish and make you want to hurt yourself. 11-18yrs

Don't know my social worker. School is shit. Wtf would make anything better for care? Care might as well die. 11-18yrs

I hate being in care and if I say something that is worrying me, it gets blown out of proportion. 11-18yrs

I hate where I am living. I tell my SW (Social Worker) that I am too far away from friends and college, but he doesn't care. I don't cook in the house because the kitchen is dirty. The keyworker is never happy to spend time with me. It is lonely. 11-18yrs

It feels like you have to bottle stuff up otherwise social workers find out and are sly and unreliable. 11-18yrs

¹²¹ Lewis, S. et al., 2021 Staying Connected: children and young people's views of their contact arrangements. Rees Centre/Coram Voice <https://coramvoice.org.uk/for-professionals/bright-spots/resource-bank/staying-connected/>

Very high well-being

To identify those with very high well-being, young people who rated themselves as 9 or 10 on two or more of any of the four well-being scales in the survey were selected.

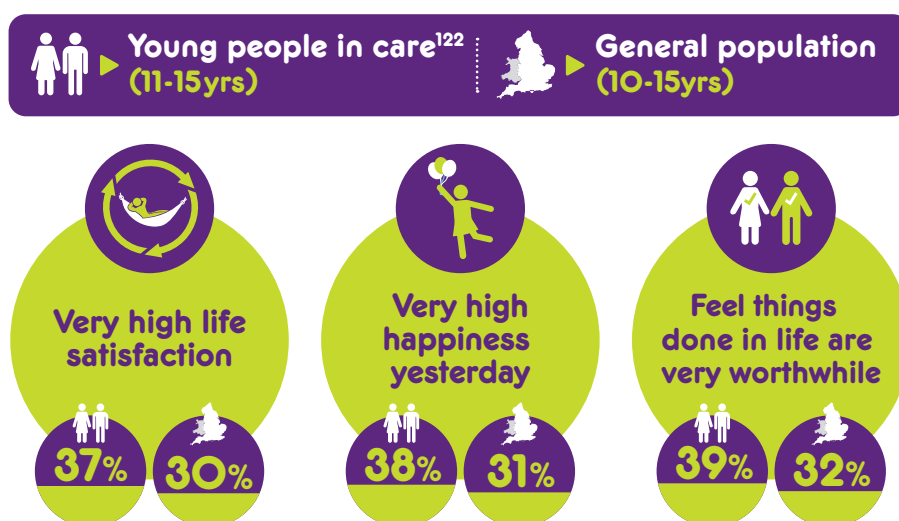
Just under a third of young people (11-18yrs) rated their well-being as 'very high'.

To consider the indicators that had the most impact on 'very high' well-being, logistic regression models were developed in the same way as done for those with low well-being. However, in this analysis, those with 'low' well-being were excluded from the analyses, as we were interested in what differentiated those who scored 'very high' compared with 'moderate' or 'high' well-being.

Compared with those who rated themselves moderately or high (scoring 5-8 on any two of the four scales), the odds of having 'very high' well-being increased:

- ▶ 3 times if young people felt settled in their placements
- ▶ 2.4 times if they liked school
- ▶ 2.2 times if they did not worry all/some of the time about their feelings and behaviour
- ▶ 1.7 times if they had a good friend
- ▶ 1.5 times if they felt included in decision-making
- ▶ 1.5 times if they had a trusted adult in their lives
- ▶ 1.5 times if they trusted their social worker
- ▶ 1.4 times if they had been in care for more than 3 years
- ▶ 1.3 times if they felt contact with a parent was 'just right'

The odds of having very high well-being were 1.2 times higher for boys compared with girls.



¹²² YLYC n=1,668-1,696; ONS n=2127-2297, year 2017-2018 ONS (2018) Children's well-being and social relationships, UK: 2018 <https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/articles/measuringnationalwellbeing/march2018>

Figure 38: Factors associated with well-being for young people aged 11-18yrs



Comments on the 'very high' and 'low' well-being findings

Surprisingly in the 'very high' well-being group feeling 'safe' in placements was superseded in statistical importance by feeling 'settled'. Satisfaction with sibling contact was also not significant in the regression model of 'very high' well-being, but satisfaction with parental contact was. The presence of a 'trusted adult' was also of more importance for those with 'very high' well-being rather than the variable 'trusting carer and being trusted' and so too was 'having a good friend' rather than 'being able to do the same as friends'.

It is possible that young people with very high well-being were in a high-quality placement with a sibling and with the right frequency of contact with one or both parents.

'Not having a good friend' and 'being unable to do the same things as friends' were statistically associated. Therefore, it may be that young people with 'low' well-being feel that it is the restrictions that are preventing them from having a good friend rather than their capacity to make and maintain friendships.

Summary - Well-being



Worrying about feelings and behaviour

- ▶ 58% of children (8-10yrs) worried about their feelings or behaviour 'all/most of the time' or 'sometimes'. Most (86%) thought they were getting help to deal with their worries.
- ▶ 58% of young people (11-18yrs) worried about their feelings or behaviour 'all/most of the time' or 'sometimes.' Girls (60%) worried more frequently than boys (55%). Those living somewhere else (67%) and in residential care (64%) more frequently reported worrying compared with those living in foster care (56%) or kinship care (55%). Of those who worried, 76% felt they were getting help.
- ▶ Although a larger proportion of Asian (65%) or Other (66%) minority ethnic young people reported worrying about their feelings or behaviour compared with White young people, a smaller proportion felt they were getting help.



Happiness with appearance

- ▶ A similar proportion of young people (84%) aged 11-15yrs felt happy with their appearance as their peers (86%) in the general population.
- ▶ Girls (23%), especially those in residential care, more frequently felt unhappy with their appearance compared with boys (7%).
- ▶ White girls (24%) were more dissatisfied with their appearance compared with girls of minority ethnicity. There were no significant differences for boys by type of placement, but Asian boys (12%) were more dissatisfied in comparison with boys of White (8%), Black (7%), Other (6%) or Mixed (3%) ethnicity.



Positivity about the future

- ▶ Overall, 64% of young people (11-18yrs) felt positive about their futures compared to 78% of their peers in the general population.
- ▶ Girls (14%) were on average more pessimistic about their futures than boys (10%).
- ▶ About 11% of White, Black, and Asian young people felt pessimistic (scoring 0-4 low) about their futures compared with 17% of young people who described their ethnicity as Mixed or of Other ethnicities.
- ▶ Type of placement was also associated with pessimism about the future. About 10% of those in foster and kinship placements, 18% of those in residential care, and 21% of those living 'somewhere else' rated themselves as pessimistic.
- ▶ Positivity about the future decreased as young people's age increased.



Well-being children 4-10yrs

- ▶ About 3% of children aged 4-7yrs gave negative responses to many questions suggesting that they had low well-being. These children recorded that they did not feel settled or safe, did not trust their worker or their carers, disliked school, did not have fun at the weekend, and did not have a good friend. They wrote about missing their mums or siblings, not understanding why they were in care, or not wanting their carers to shout.
- ▶ About 9% of children (8-10yrs) gave responses that suggested they had low well-being. Associated with low well-being were the same indicators as those identified for the younger age group. In addition, children who felt they did not have good relationships with their foster carers or their social workers, disliked school, reported bullying, lacked friends, and wanted more contact with their families. Comments from these children reflected their worries about having to change placements and the plans for their futures.



Well-being young people aged 11-18yrs

- ▶ Three 0-10 well-being scales were completed by young people: a) overall satisfaction with life, b) happiness yesterday, and c) feeling that things done in life were worthwhile. These questions are also used to measure the general population's well-being and are published by the ONS as part of the wider data on well-being. The scales are categorised with ratings of 0-4 (low), 5-6 (moderate), 7-8 (high) and 9-10 (very high). The majority (84%) of young people did not rate themselves as having low well-being on these scales.
- ▶ However, between 16% and 20% of young people (11-17yrs) in care rated themselves as 'low' on one of the three ONS questions, which is a much higher percentage compared to the level reported (8%-9%) by their peers aged 10-17yrs in the general population.
- ▶ A larger percentage of older young people rated themselves as 'low' (age 16-18yrs compared with 11-15yrs) or were girls or of Mixed or Other ethnicities.
- ▶ Using the three ONS scale questions and the scale on positivity about the future, young people were categorised as having 'low' well-being if they rated themselves as 0-4 on two or more of the four scales. Just over one in six (16%) young people (11-18yrs) gave negative responses that suggested they had low well-being: more girls (19%) than boys (12%).
- ▶ To identify which of the indicators had the most influence on low well-being a series of binary logistic regression models were developed. Some questions could not be included in the models because they had either been recently added to the surveys or were highly correlated with each other.

- ▶ In order of influence in the model predicting 'low' well-being were young people (11-18yrs) who: mistrusted their carers and felt they were not trusted, disliked school, worried about their feelings or behaviour 'always/sometimes', felt unsafe in their placements, did not have a trusted adult in their life, felt unable to do the same things as friends, lacked opportunities to learn life skills, felt excluded from decision-making, thought contact with siblings and parents was not "just right" and who found it difficult to contact their social worker. They all increased the odds of having low well-being.
- ▶ Just under a third of young people had very high well-being i.e., they rated themselves as 9 or 10 on two of any of the four well-being scales. Surprisingly in the 'very high well-being' group feeling safe in placements was superseded in importance by feeling settled. Satisfaction with sibling contact was also not significant in the model for 'very high' well-being but satisfaction with parental contact remained significant. It is possible that this group of young people were in a high-quality placement with a sibling and had the right frequency of contact with one or both parents. Girls had increased odds of having 'low' well-being compared with boys.
- ▶ The odds of having 'very high' well-being increased if young people felt settled in their placement, liked school, 'hardly ever/never' worried about their feelings or behaviour, had a good friend, had a trusted adult in their life, trusted their social worker, felt included in decision-making, had been in care for more than a year, and felt contact with at least one parent was 'just right'. Boys had increased odds of having 'very high' well-being compared with girls.

Discussion



Although our research found that all the indicators were associated with well-being, some appeared particularly important. For the younger children (4-10yrs) we looked for trends in responses, whereas for older young people (11-18yrs) we used statistical analysis (binary logistic regression) to find out which indicator was most strongly associated with high and low well-being.

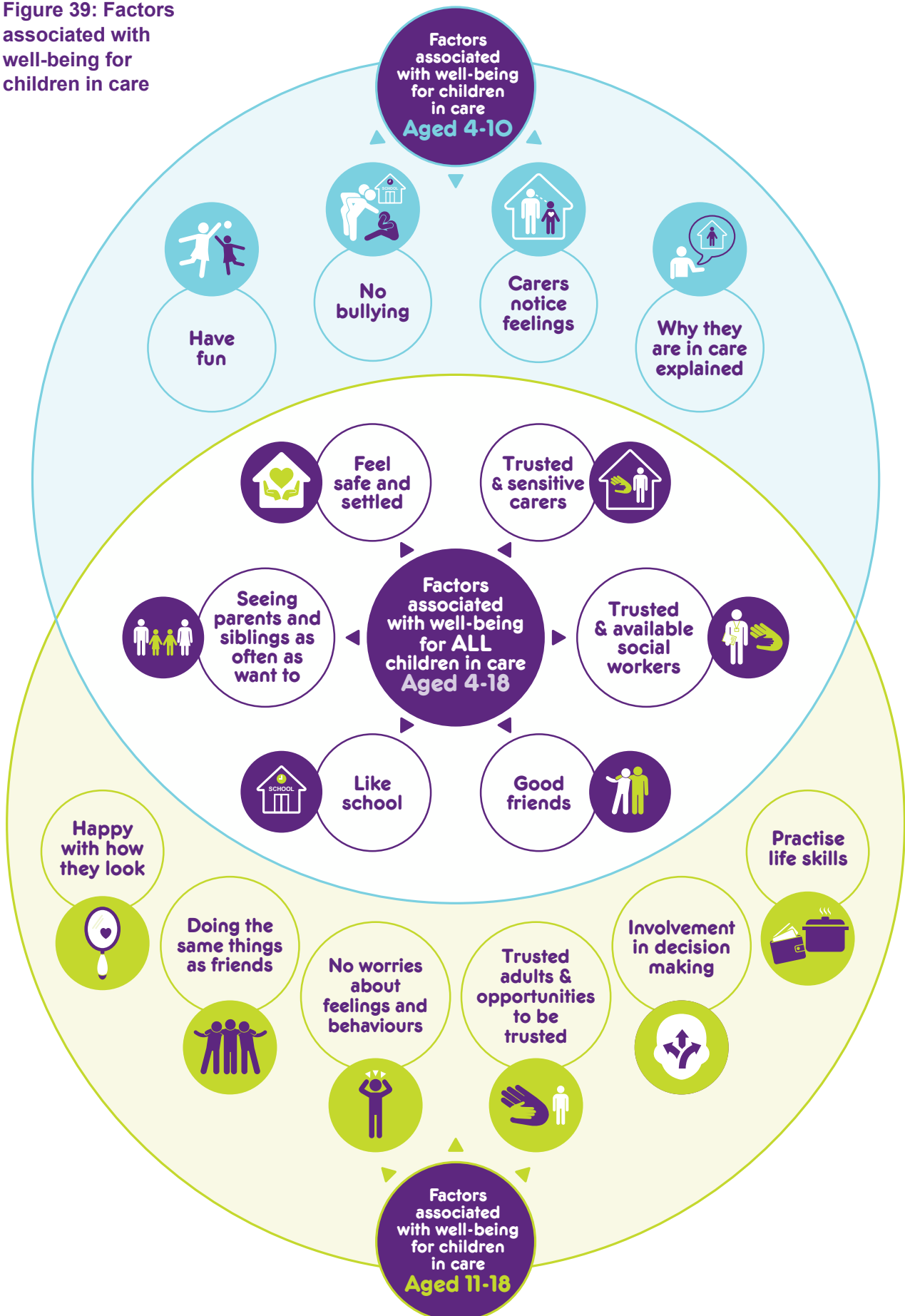
What all age groups had in common:

- ▶ For all children and young people having **good friends** and **trusting and supportive relationships** were really important. This included **trusting carers and social workers**.
- ▶ **Liking school** influenced well-being for all age groups.
- ▶ Feeling **safe and settled where they lived** was important for children in care whether they were 4 or 17.
- ▶ Staying connected to family by **seeing mothers, fathers, brothers and sisters** as often as they wanted was highlighted by all age groups.

Differences in what questions were asked and age differences showed that:

- ▶ The youngest children (4-10yrs) wanted to have **trusting relationship with carers** who **noticed their feelings** and **did not shout**. For the oldest age group, having **trusted adults**, as well as being given **opportunities to be trusted** was associated with well-being.
- ▶ While relationships with carers was also very important for the older young people, the support gained from friends was also key to their well-being, especially being able to **do the same things as peers**. Younger children were asked a different question and for them **having fun at the weekend** mattered.
- ▶ A larger percentage of younger children felt **afraid to go to school because of bullying** compared with 11-16 year-olds. Teenagers with low well-being often struggled with **worries about feelings and behaviour** and girls in particular were **unhappy with how they looked**.
- ▶ Nearly half of the youngest children (4-7yrs) did not feel that the **reasons they were in care had been fully explained**, whereas being **involved in decision making** and **practising life skills** was associated with well-being for older young people in care.

Figure 39: Factors associated with well-being for children in care




Although 'happiness with appearance' was strongly associated with low well-being it was not entered into the final regression models as it was also highly correlated with other variables and did not meet the assumptions necessary to be entered into regression models. Being unhappy with appearance was primarily a concern for girls.

The high correlation of happiness with appearance with other well-being indicators does raise questions about our theoretical understanding of young people's well-being. It may suggest that being happy about appearance may be an integral aspect of well-being rather than being a separate and explanatory factor. We wondered if 'happiness with appearance' was an important part of understanding adolescence well-being, or an important domain in its own right that taps into different concepts such as self-esteem and identity that explain different levels of well-being? How do young people determine their level of happiness with appearance? Do young people compare themselves with others and if so, who? We need to understand much more about the importance of appearance in young people's lives and how it seems to have a central role in young people's well-being.

Bright Spots Programme informing policy and practice

The Bright Spots programme is more than a research programme, it is about putting children and young people's voices at the heart of children's services. We continue to work with local authorities across the UK to use the *Your Life Your Care* survey and inform policy and practice development. Examples of what local authorities have done in response to their findings are captured in our resource bank <https://coramvoice.org.uk/for-professionals/bright-spots/resource-bank/>.

Key findings and recommendation for policy and practice can be found at www.coramvoice.org.uk/10000-Voices-Report



Appendix - Methodology

The Bright Spots Programme

The programme offers local authorities the opportunity to conduct the *Your Life, Your Care* survey with looked after children. The data in this report uses responses from the Your Life, Your Care surveys gathered between 2015 and 2021.

Local authorities who use the surveys are supported by Coram Voice to distribute the survey to their care population. To ensure that children and young people are provided with the opportunity to take part, an initial working group meeting is held with key staff (and in some cases young people) to consider how lesser-heard voices (e.g., young people out of area, seeking asylum, in custody, or with disabilities) can be included. Professionals are encouraged to support young people who need help in completing the survey, but local authorities are also advised to avoid using foster carers or social workers as many of the survey questions ask about those relationships. Twice weekly response rates are shared with the local authority to keep them on track and make them aware of how effectively the survey is being distributed. Young people complete the survey anonymously: individual identifiers such as names and locations are not collected. Once the survey has closed and results analysed each local authority is provided with a bespoke report on an analysis covering their local cohort. Follow-up meetings to disseminate the findings and explore how they can inform services are held.

Distribution of the *Your Life, Your Care* surveys

Your Life, Your Care is available primarily as an online survey although paper surveys are also available and used where no internet is available, or when the child/young person prefers this method. *Your Life, Your Care* surveys differ by age group: a) 4 - 7 years (16 questions), b) 8 - 10/11 years in junior school (31 questions), and c) young people of secondary school age 11-18 years (46 questions). A core set of 16 questions appear in all three surveys. Children and young people are usually asked to complete the online survey in school over two weeks and, where appropriate, with a trusted adult present. The trusted adult is usually the designated teacher, learning mentor or SENCO. The adult is asked to record what the child said if the child was unable to complete the form. All the questions are optional to allow children to make their own decisions about which questions they answer and therefore the number of responses differs by question.

Analysis

Data from September 2015 to March 2021 were merged to create three new data sets. In total surveys were completed by 9,472 children and young people after removing duplicates and any that were partially completed: age 4-7yrs (n=1,482), 8-10yrs (n= 2,423) and 11-18yrs (n=5,567). Age was recorded when the children and young people completed the survey.

Missing data analysis

There were two questions where the response options had been changed in the surveys. The question, 'How happy are you with the way you look?' was originally on a five-point scale and was changed to a 0-10 scale in 2018 to enable comparisons with the general population. The other question asked about opportunities to explore the outdoors and the response options had changed from 'All the time/most of the time', 'sometimes', 'hardly ever/never' to 'every day', 'more than once a week', 'weekly', 'not at all'. There was also a new question added in 2018, 'How often do you talk to the adults you live with about things that matter to you?' Due to the way the survey had developed over the years responses on these variables were not available for the whole sample.

A Little's Missing Completely At Random (MCAR) test was run on the data (excluding those mentioned above) to see if missing data on the remaining variables was random or whether there were patterns. In each of the data sets (4-7yrs, 8-10yrs, 11-18yrs) tests showed that there was no evidence to suggest that data were not missing at random. There was no variable with more than 7% of responses missing.

Age 4-7yrs: 19% of children had at least one question unanswered. The questions with the most missing responses were

- a) Has an adult explained why you are in care? (5% missing)
- b) Do the adults you live with notice how you are feeling? (5% missing) and,
- c) How happy did you feel yesterday? (3% missing).

Age 8-10yrs¹²³ 25% of children had at least one question unanswered. The three questions with the most missing data were

- a) ethnicity (4% missing),
- b) Do you see your dad? (4% missing) and,
- c) Do you like school? (7% missing)

Age 11-18yrs 23% of young people had at least one question unanswered but there was no statistically significant pattern to the missing data¹²⁴. The questions with the most missing data were

- a) Overall, to what extent do you feel things you do in your life are worthwhile? (5% missing)
- b) How positive are you about your future? (4% missing)
- c) Do you trust the adults you live with? (4% missing)
- d) Does your carer notice how you are feeling? (4% missing)
- e) How much do you like school? (4% missing)
- f) Are you ever afraid of going to school because of bullying? (4% missing) and,
- g) Can you do the same things as your friends? (4% missing).

¹²³ Little's MCAR test: Chi-Square = 24.308, DF = 27, Sig. = .613. The null hypothesis is that there is no systematic pattern to the missing data.

¹²⁴ Little's MCAR test: Chi-Square = 3.821, DF = 27, Sig. = 1.000

The survey data were not weighted because there was no reliable published data on what the sample should look like such as ethnicity and sex by age, and therefore, any weighting scheme developed would be based on a set of assumptions that are difficult to verify. Also, the goal of this study did not include making any inference for the whole care population, as we already know that there is wide variation at the local authority level. Instead, the aim was to study characteristics associated with low/very high well-being using the rich survey data that shed light on children's voice. Nevertheless, we suspect that boys were underrepresented in the 11-18yrs age group.

Descriptive analysis

Descriptive analysis included examination of basic frequencies and means/modes of question responses and cross-tabulations examining associations by sex, ethnicity, placement type etc on each indicator. Correlations were also examined, including conducting the Spearman's correlation test, Somers' D and the Mantel-Haenszel test of trend for categorical/ordinal variables. A Bonferroni correction was applied for multiple comparisons.

Categorising well-being

Low well-being was calculated for children aged 4-7yrs and 8-10yrs by selecting those who had responded that they were unhappy the previous day. For this group, their responses to all the other questions (including written comments) were examined and if three or more responses were negative, they were classified as 'low well-being'. For young people aged 11-18yrs low well-being was calculated using the four well-being scales: overall life satisfaction, happiness yesterday, doing things in life that have meaning, and positivity about your future. Young people who scored low (0-4) on any two of the four scales were classified as having low well-being. Young people who scored 9-10 on any two of the four scales were classified as having very high well-being. Logistic regression models were used in the 11-18yrs age group to examine which of the indicators (questions) had the most influence on 'low' well-being or 'very high' well-being.

Regression models

Several factors affected our decisions on which explanatory variables were tested in the logistic regression models. Two new questions were not included (frequency of going outdoors and talking to carers about things that matter), as they were recent additions and would have reduced the sample size considerably if they had been included.

We also knew from the descriptive analysis that some indicators were strongly correlated (meaning as one indicator changed higher or lower, so did the other). For example, feeling safe in the current placement was strongly correlated with feeling settled. For this reason, both indicators could not be tested in the model, and the stronger predictor of the two was chosen. Including both would have violated one of the key assumptions of regression analysis, which is that each explanatory variable is independent of the others. The model aims to isolate the relationship between each of the indicators and the binary outcome variable (e.g., low well-being compared to moderate/high well-being). The regression coefficient (how much of the variation is explained) represents the mean change in 'low' well-being when holding all the other indicators constant. By including two highly correlated explanatory variables unreliable estimates would have been produced due to a multicollinearity issue.

The first models included the question, 'Are you happy with the way you look?' that had been added as a 0-10 scale to the surveys in 2017-18. We knew that this indicator was strongly associated with well-being but the consequences of including it reduced the number of respondents to 53% of the total sample. We conducted a sensitivity analysis and examined whether there were differences in the sample populations for those who could or could not be included in the analyses. The proportions of girls/boys, types of placements, and length of time in care were very similar but the ethnicity of young people did vary between the two. In the early versions of the survey that did not include the happiness with appearance question, 50% of the young people identified as White but in later surveys, 68% did so.

We also examined the correlation between the two forms of continuous and categorical variables. Some assumptions have to be met for the results of logistic regression to be valid. The data did not meet a key assumption. We found that happiness with appearance was not linearly related to the logit of the dependent variable (Box-Tidswell procedure $p < .009$) and there was a moderately high correlation (point bi-serial coefficient .430, $p < .001$). Transformations did not resolve the problem and therefore a nominal version of the variable was tested (low, moderate, high, very high happiness with appearance) but was still correlated (Somers' D = 0.621 $p = .000$). The model estimates were not stable enough, with the indicator happiness with appearance explaining about 43% of the variance (Nagelkerke R²).

Most importantly, there was a conceptual issue around whether happiness with appearance should be understood as a separate explanatory variable that contributes to young people's well-being or if it was an integral aspect of a girl's well-being during adolescence. Putting together the conceptual concerns and the key assumptions of regression models not being met a decision was made to exclude the 'happiness with appearance' variable from the regression models.

Table 13 lists all the indicators and identifies the ones that after checking for confounders were the ones that were selected for the final low well-being model.

Table 13: Indicators tested for association with low and very high well-being 11-18yrs

Indicator	Included in the low well-being model	Included in the high well-being model
Sex	Yes	Yes
Ethnicity		
Live with		
How long have you been in care?		Yes
How many placements have you had?		
Do you like your bedroom in the home you live in now?		
Do you feel settled in the home you live in?		Yes
Do you feel safe in the home you live in?	Yes	
Do you have a pet where you live?		
Has an adult explained why you are in care?		
Do you see your mother...? Do you see your father...?	Yes, derived variable - Contact with either parent is 'just right	Yes, derived variable - Contact with either parent is 'just right
If you have brothers or sisters, do you see them...?	Yes - Contact is 'just right'	
Is your life getting better?		
Do adults do things that make you feel embarrassed about being in care?		
How happy are you with the way you look?		
Do you ever worry about your feelings or behaviour?	Yes	Yes
Do you have an adult you can trust?	Yes	Yes
Do you have a really good friend?		
Do you trust the adults you live with?	Derived variable 'Trust carer' and feel trusted	
Do the adults you live with notice how you are feeling?		
Do the adults you live with show an interest in what you are doing at school?		
Do you know who your social worker is now?		
How many social workers have you had in the last 12 months?		
Do you trust your social worker?		Yes
Is it easy to get in touch with your social worker?	Yes	
Do you know you can ask to speak to your social worker on your own?		
Do you feel included in the decisions social workers make about your life?	Yes	Yes
How much do you like school?	Yes	Yes
Do you ever feel afraid of going to school because of bullying?		
Can you connect to the Internet from where you live?		
Get the chance to show you can be trusted?	Yes, Derived variable 'Trust carer and feel trusted'	
Do the same as friends?	Yes	
Get to practise life skills?	Yes	
Get to have fun at the weekends?		

The final low well-being binary logistic regression model had a binary outcome variable: low well-being (0-4) compared with moderate to high well-being (7-10). Table 14 shows the model.

Table 14: Regression model low well-being n=3,897

Indicator	Responses	Odds Ratio (Expb)	Confidence Interval (95%)	P*
Trust carer and feel trusted				
	All the time/sometimes (ref)			
	Hardly ever/never	2.73	2.09-3.57	.001
Like school				
	A lot /A bit (ref)			
	Not very much/Not at all	2.64	2.12-3.28	.001
Worrying about feelings or behaviour				
	Hardly ever/never(ref)			
	All the time/sometimes	2.34	1.85-2.97	.001
Feel safe in placement				
	Yes always (ref)			
	Sometimes, hardly ever. Never	2.21	1.72-2.84	.001
Trusted adult in young person's life				
	Yes (ref)			
	No	2.08	1.51-2.86	.001
Included in decision-making				
	All the time/sometimes (ref)			
	Hardly ever/never	1.79	1.37-2.33	.001
Able to do the same as friends				
	All the time/sometimes (ref)			
	Hardly ever/never	1.80	1.42-2.30	.012
Opportunity to practise life skills				
	All the time/sometimes (ref)			
	Hardly ever/never	1.72	1.29-2.29	.001
Sex				
	Boy (ref)			
	Girl	1.66	1.34-2.04	.001
Contact with brothers and sister is 'just right'				
	Yes (ref)	1.50	1.20-1.88	.001
	No			
Contact with at least one parent is 'just right'				
	Yes (ref)			
	No	1.50	1.11-2.03	.001
Easy to get in touch with the social worker				
	All the time/sometimes (ref)			
	Hardly ever/never	1.31	1.02-1.68	.034

Odds ratios were more than one, meaning that when comparing those who scored 'hardly ever/never' with those who rated themselves as 'All/Sometimes' the odds of low well-being increased. The model explained 34% of the variability (Nagelkerke R2)¹²⁵ in well-being, was statistically significant¹²⁶, and was a reasonable fit for the data.¹²⁷

Checks on the residuals found nothing of concern: The effect of outliers on the model was checked using Cook's D (Cook's Distance); the figures were all under 1 which means that there were no influential cases having an effect on the model. The Leverage mean (.0036) was close to the expected value $(12+1) / 3,955 = .0033$. The standardised residuals were also examined: two cases had an absolute value over 3 and were retained. Checks for multi collinearity found no concerns after examining the eigenvalues and Variance Inflation Factor (VIF) scores. The model was able to discriminate between young people with and without low well-being. The area under the receiver operating characteristic (ROC) curve¹²⁸ was .831 (CI.813-.850: $p < .001$).

Similarly, high well-being was modelled. However, in this model, those with low well-being were excluded as we were interested in what differentiated those with very high well-being (self-rating of 9-10 on two or more of the 4 well-being scale questions) from those who had been classified as moderate to high well-being (self-rating of between 5 and 8 on two or more of the 4 well-being scales). The reference category was the negative response to the question for most variables (Table 14). Many of the same variables were associated with very high well-being but there were some key differences.

¹²⁵ Nagelkerke R2 provide an indication of the amount of variation in the dependent variable explained by the model.

¹²⁶ $\chi^2 = 792.135$ [$n=3,897$] $df=12$, $p < .001$

¹²⁷ Hosmer and Lemeshow Test, a goodness of fit test for a logistic regression model. $p=0.549$ indicating the observed and expected do not differ significantly given the model.

¹²⁸ A diagnostic tool for a model. 0.5 indicates that the model does not contribute to predict the outcomes while values closer to 1 indicates better predictability of the model.

Table 15: Regression model very high well-being n=3,096

Indicator	Responses	Odds Ratio (Expb)	Confidence Interval (95%)	P*
Feel safe in placement				
	Sometimes, hardly ever. Never (ref)			
	Yes always	2.97	2.400-3.720	.001
Like school				
	Not very much/Not at all (ref)			
	A lot /A bit (ref)	2.44	1.965-3.019	.001
Worrying about feelings or behaviour				
	All the time/sometimes (ref)			
	Hardly ever/never	2.44	1.892-2.556	.001
Has a good friend				
	No (ref)			
	Yes	1.72	1.222-2.403	.002
Trusted adult in young person's life				
	No (ref)			
	Yes	1.50	1.012-.2.259	.051
Trust social worker				
	Hardly ever/never (ref)			
	All the time/sometimes	1.50	1.103-.1.977	.010
Included in decision-making				
	Hardly ever/never(ref)			
	All the time/sometimes	1.51	1.092-1.992	.013
Length of time in care				
	Under a year (ref)			
	More than a year	1.40	1.175-1.812	.001
Contact with at least one parent is 'just right'				
	No (ref)			
	Yes	1.31	1.065-1.553	.009
Sex				
	Girl (ref)			
	Boy	1.24	1.068-1.448	.005

Checks on the residuals found nothing of concern: Cook's Distance were all under 1 and the Leverage mean (.0039) was close to the expected value $(10+1)/3,140 = .0035$. The standardised residuals were examined: eight cases had an absolute value over 3 and were retained. Checks for multicollinearity found no concerns after examining the eigenvalues and VIF scores. The model was statistically significant¹²⁹, explained 21% of the variance (Nagelkerke R²) in high well-being, correctly classified 84% of those with very high well-being and 44% of those with moderate to high well-being and was a reasonable fit for the data.¹³⁰ However, the model for very high well-being was not as able to discriminate between those with very high well-being and those with moderate to high (area under the ROC curve .290 (CI .272-.308).

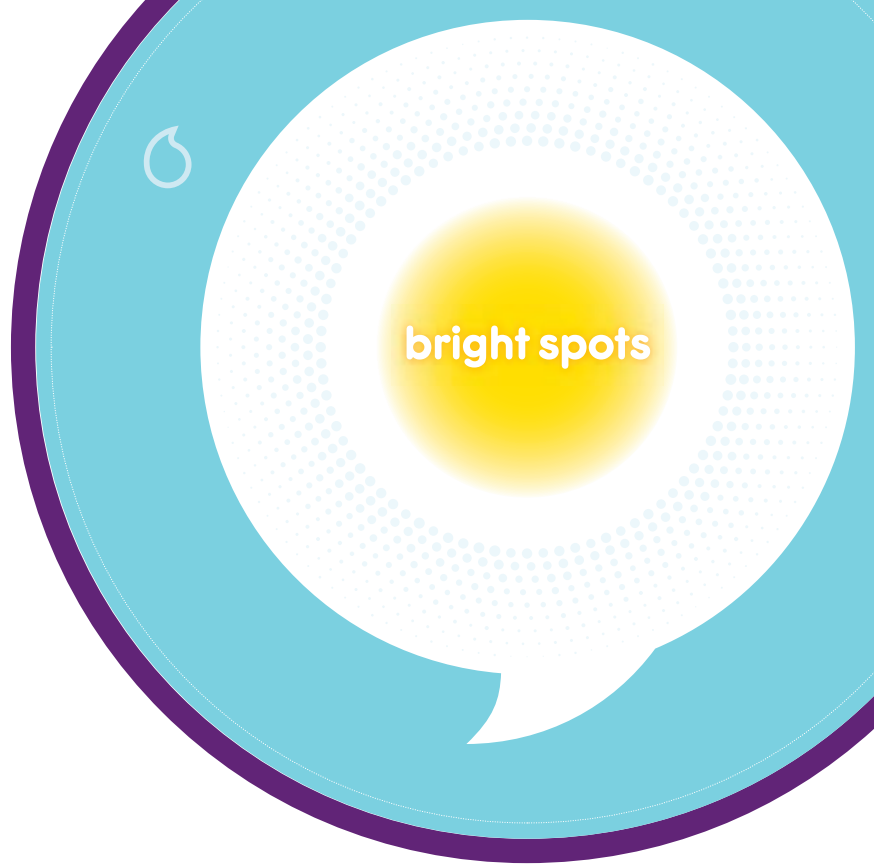
¹²⁹ $\chi^2 = 416.962$ [n=3,140] df13, p<.001

¹³⁰ Hosmer and Lemeshow Test p=0.602

Analysis of written comments

Text comments were entered into NVivo 12 for a reflexive thematic analysis (RTA: Braun and Clarke 2020¹³¹). RTA was chosen because of its flexibility in allowing existing research to be the lens through which the data were analysed as well as allowing new themes to be conceptualised. The RTA began with familiarisation reading all the comments and making notes. Due to a large number of comments, deductive structural coding was used initially. Coding used the response options of the individual questions e.g., 'all/most of the time/sometimes' and 'hardly ever/never'. However, the organisation of codes, themes and sub-themes were also conceptualised through the writing process, enabling a more inductive approach to examine for example the reasons why young people felt they were involved in decision-making.

¹³¹ Braun, V. and Clarke, V. (2020) One size fits all? What counts as quality practice in (reflexive) thematic analysis? *Qual. Res. Psychol.* 18(3) 328-352.



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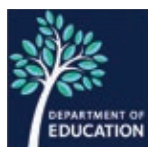
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