

Conclusion: Going over the edge

*Adrian D. van Breda, Veronika Paulsen, Inger Oterholm
and Samuel Keller*

Introduction

This book has aimed to present research about edgy facets of leaving care – understudied groups of care-leavers, fresh methodological approaches and innovative theories. The research has been conducted and chapters written by authors from across the world who are, mostly, on the edge, transitioning between postgraduate student and scholar. It is our hope that the book opens fresh perspectives and angles on care-leaving research and inspires continued innovation in this field. In this concluding chapter, we draw together key findings regarding these three facets, highlighting what has been learned collectively through this project. And finally, spring-boarding from these new insights, we attempt to imagine what leaving-care research will look like in the future and where the new edges might be. We draw attention to the many gaps and edges that remain and suggest possibilities for ongoing research that pushes the boundaries yet further forward.

Groups of care-leavers

Much of the research on leaving care has focused on care-leavers as a single, homogeneous group, and less focus has been given to the particular characteristics, challenges and needs of specific groups within this larger group. The edgy contribution in this book is thus to give attention to groups that have not been visible in previous research and that potentially could have different challenges and needs in transitioning to adulthood from care. Together, these chapters point out that in future leaving-care research we need to differentiate the group ‘care-leavers’ to get a more nuanced understanding of care-leavers’ different trajectories into adulthood.

Studying groups of care-leavers that have been given little attention brings new perspectives and understandings, which are also relevant for understanding care-leavers’ transitions and trajectories in general. For example, by studying unaccompanied minors, the gaze is set on networks in a different way and their findings bring in a new perspective on social support, when highlighting the importance of integrating young migrants’ families digitally. Unaccompanied migrants, compared with their peers, show higher levels of satisfaction with their families, with whom they were able

to maintain contact through phone and online messaging. These insights, together with previous research that underlines the links between social support, and outcomes and wellbeing in adult life, make visible a dimension of social network and social support that has been under-focused in care-leaving research: the possibilities of digital contact as a source of social support. This edgy finding broadens the view on what social networks are and where and how young people leaving care could find sources of social support. This can affect both further research and practice with care-leavers in general, not only with unaccompanied minors. It also makes visible that research needs to consider how society changes and thus affects people's lives. For research to be 'up to date', we need constantly to be aware of the social context that young people live in.

Another understudied group in leaving-care research is young people who identify as LGBTQIA+. The chapter explores how theories of minority stress, life course, resilience and anti-oppressive frameworks may be used to help conceptualise how experiences of discrimination impact the health and development of these youth over time, and develop research, policy and practice approaches that are theoretically grounded in strengths-based perspectives. In particular, the author discusses the need to integrate critically based practice with structural approaches to provide a more culturally responsive and effective platform for increasing the health and wellbeing of these youth. The chapter highlights that more research is needed to gain a better understanding of the needs, experiences and outcomes of LGBTQIA+ young people. While research highlighting adversities is integral to understanding the experiences of LGBTQIA+ youth in foster care, it is also important to identify and promote the ways in which this population may be resilient to these risks and challenges.

Another group that has been given little attention is care-leavers living on the streets. One of the chapters focuses specifically on young people ageing out onto the streets in Bolivia, though the findings are also relevant for young people with street experience in other countries, care-leavers in general and young people in general. The chapter also raises the edgy question of who should have the power to define what are 'good outcomes' and that 'good outcomes' also are connected to experiences in the past. For the group of young people interviewed in this chapter, being homeless or living on the street is not merely a negative 'outcome', as it is in most care-leaving research, but a return to an ecology that they had experienced prior to coming into care. The researcher discusses that 'outsiders' may have thought that care-leavers with a street-connected past would avoid life on the streets, but the reality for those in this study is that life on the streets is the only or a preferred solution, as the streets became the most familiar and preferred place to be when they were turfed out of care. This also makes visible how adults' and societies' views on what is a 'good life'

and ‘good outcomes’ are not always in line with the views of the young people themselves.

Another chapter, located in South Africa, similarly considered care-leavers who had come into care from the streets, but who had not transitioned out onto the streets. This chapter considered the resilience processes that these young people mastered on the streets and how these shaped their lives in care and after care. This chapter brings new insight by showing that while on the streets, participants reported building safe, collaborative family relationships with other street-connected children – this approach to building fictive kin relationships continued in and after care. They also show how life on the street taught the young people to identify and mobilise meagre resources for survival, which they reported continuing to do after leaving care. And they cultivated a reflective, self-aware approach to life on the streets, which helped them after care to navigate towards young adulthood. These narratives point to long-term growth through resilience and the drawing forward of learnings across multiple life phases and social contexts.

The edgy chapters on specific groups of care-leavers make visible that there are many similarities when it comes to challenges and needs of young people leaving care: the feeling of being dumped out of the care system, abrupt transitions, no aftercare system and lack of family and social support. What is especially interesting in the studies of specific groups is that they help us see the importance of paying attention to and recognising each unique person’s life story and identity, whether it is identifying with the LGBTQIA+ community, living on the street, being an unaccompanied minor, or simply having been in care. The chapters make visible how the experiences of coming into, living in and leaving care continue to ripple through their lived experience and social connectedness and are relevant in how they approach and experience the transition to adulthood. This shows us the importance of paying attention to young people’s life stories prior to entering the care system and the importance of recognising the young people’s own perspectives of what is ‘safe’ and ‘a good life’.

Research methods

A wide range of methods have been used in the book. Even though there are more qualitative than quantitative studies, the qualitative studies draw on a variety of designs, including different types of interviews (both open and more structured), longitudinal and cross-sectional studies, fieldwork, mixed methods and studies with an emphasis on theoretical approaches. Several of the chapters also combine different approaches.

The four chapters with a particular methodological emphasis highlight important themes that are relevant for developing new knowledge about diverse groups of young people ageing out of care. These chapters thematise

how to involve hard-to-reach groups in the leaving-care population, the importance of expanding the concept of research ethics and conducting research in a caring way, reflections around being an insider researcher with care experience and how to access the institutional aspects of the care-leaving experiences. Overall, this contributes to edgy methodological themes. They raise questions about who are included in research, and ways to include the variety of the care-leaving population, as well as questioning who the researchers are and institutional aspects that are rarely addressed.

In order to generate valid knowledge about young people ageing out of care, research must include the breadth of the population, including those who are hard to reach. Excluding them or other disengaged young people weakens the rigour of the research. An important topic in the book is how to design research that involves groups that are under-researched, such as disabled care-leavers, early parents and homeless youths. If these and other groups are not included in care-leaving research, there is a risk of overlooking their perspectives and important knowledge about their situation, consequently not recognising what kind of support they need.

There could be several reasons why young people do not participate in research. Young people with a care background may have traumatic experiences that give them reason to be sceptical of researchers. Furthermore, they may feel stigmatised as care-leavers and wish to distance themselves from this part of their background. Three of the chapters give important examples, reflect on ethical and scientific methodological questions and outline practical thoughts and suggestions for how to overcome these challenges. The book chapters highlight the importance of creative and trauma-informed research designs with the goal to avoid, or at least minimise, tokenism or the re-traumatisation of participants, while maximising reach and impact. Across the chapters, practical advice is given based on the experiences from research in different countries with different groups of care-leavers. Overall, the themes highlight how important the research design is, regarding how groups are categorised, how recruitment is done, the value of inclusive research tools, and how to respond to the individual needs of the young person while avoiding the risk of paternalistic, disablist or age-inappropriate approaches. One of the chapters also presents an adaptive participation model to identify several key considerations for choosing approaches that are suited to engage young people on the edge of different fields in research. Together these methodological innovations bring concrete examples of how to conduct research that can open up experiences from new groups of care-leavers and also research in more ethical ways.

Following a hermeneutic understanding, all researchers bring with them preconceptions that influence how a situation is understood. Being reflective and self-critical is important. Several of the chapters argue for participation by care-leavers in the entire research process, from conceptualisation to

dissemination of findings. Having a care background gives one another position, raises other questions and challenges power differentials. Another example of how lived experience can inform research is institutional ethnography. Within this approach, lived experience is used as a starting point of inquiry into the institutional context of leaving care. This framing of research is less developed in care-leaving research. The chapter on institutional ethnography uses the standpoint of both care-leavers and social workers, to show how individual experiences of receiving or providing aftercare support are shaped by institutional forces.

Beyond traditional ethical questions, like avoiding harm and ensuring caring conduct, the chapters highlight the importance of young people benefiting from being involved in research. This is related to the impact of the research itself, to the research process being conducted in a caring way and to what young people learn from being part of the research process.

While rigorous research education and training as a researcher is vital, being both a trained researcher and a care-leaver adds to these layers of insider–outsider competence. For research to be transparent, researchers with a care-experienced background face other questions which they have to decide upon. Of particular edgy interest are the complex decisions these researchers must make regarding whether, when and how to disclose their care history to research participants; and of how they are perceived and judged by their peers in terms of their so-called ‘objectivity’ as researchers.

The edgy themes of these chapters about methodology foreground the extent to which all knowledge is situated, contextual and partial and not universal. They show the importance of bringing forth knowledge diversity and presenting multiple and varied stories that are both connected to and different from each other. The dialogue between these stories highlights the importance of including different participant groups and researchers with different competencies and backgrounds. What makes knowledge situated includes who is doing the research, what theories inform their research, with whom they do their research and how they do their research. Even though these methodological issues are raised in the methodological literature, they are not often debated in care-leaving research. Following up on the methodological issues in this book can give more in-depth knowledge of the care-leaving process and experiences of different groups of care-leavers that is important to improve practice and policy.

Theories of leaving care

The central epistemological interest here is to define forward-looking theses thanks to ‘edgy’ theoretical backgrounds or combinations. As a theoretical conclusion, future leaving care research needs to take into consideration the following challenges and tasks: owning one’s blind spots as an ‘edgy’

starting point, going ‘on the edge’ of established concepts, and broadening theoretical understandings of care-leavers’ experiences. What we should pay attention to when following the research discussed will be presented here.

Overall, research on leaving care presented in this book has brought together different theories that have shaped the ‘edgy’ research questions, design and/or discussion: we read about theories with more person-oriented focus, such as theories on minority stress, resilience, positive self-identity or theories of life course, and, as a consequence, on concepts of trauma-informed research. Further, some authors discussed theories with a more social focus, such as the theory of social capital and social support, social ecological theory, or habitus theory linked to instability. Others combined theories to differentiate specific issues, like the combination of the Interpersonal-Psychological Theory of Suicide and theories on transitions, or relational bridging of classic dualistic concepts such as micro-meso-macro or agency-structure. Several authors also used power-critical theories to criticise research’s (mis-)use of power, the absence of culturally adapted instruments or so-far empty claims in leaving-care research that we had moved towards postmodern thinking. These theories invite the development of anti-oppressive frameworks, self-critical questioning and re-conceptualisations or re-operationalisations of concepts like ‘stability’, ‘relationships’, ‘family’ and ‘resilience’.

Blind spots as ‘edgy’ starting points: critical reflections on well-established frameworks and concepts

Almost all theory contributions in this book have, as their starting point for the presented research project, an irritation: a questioning or a critique of established terms, concepts or theories. It was even part of some researchers’ visions to contribute to a paradigm shift, well knowing that it is not possible to achieve a complete shift within a single study. Authors questioned, for example, the use of continuity in out-of-home placements as an operationalisation of stability or the abbreviated definition of stability. From these critical points of view, too many previous studies used theories that labelled care-leavers as living unstable lives or as making short-term choices that limit their options for life course planning. In one sensitive field of research – care-leavers’ suicide risks – the author’s criticism is all-encompassing: previous research on care-leavers’ suicide risk has largely neglected existing theories of suicide which led to blind spots.

Other critical reflections as a starting point of an empirical study contribute to a better theory-based understanding of care-leavers’ needs in general or specifically of so-far overlooked groups’ needs. For example, studies started by worrying that the relevance of informal relationships might be overlooked due to a dominant theoretical focus on formal relationships; or by worrying that simplified and colonialist views of research are responsible

for misunderstanding street-involved children's specific context of living and needs.

'On the edge' of concepts: reconceptualisation of theoretical framework by proposing new aspects

As a next step after irritations and criticisms, all authors presented how they either re-conceptualised their research-designs in advance – based on theories with potential to change terms, assumptions or paradigms – or they wrote about their different ways of interpreting the data, thanks to mindset-changing theoretical frameworks. We read, for example, about re-conceptualisations or re-operationalisations of 'stability', 'relationships', 'family' and 'resilience'. Others present supportive theoretical concepts that help researchers to take an alternative perspective: concept of a habitus of instability, theory of social capital and social support, social ecological perspective, or connecting suicidology to concepts of leaving care.

These different uses of theories led to new understanding of what contributes to placement stability or to new understanding of how care-leavers position themselves in relation to experiences of instability. Other theories allowed new perspectives on the impact of meaningful and trustworthy relationships over time, on resilience and positive self-identity, or new perspectives on mismatching normative concepts of family and participants' sources for resilience in building family-like connections in the streets. And key factors of the Interpersonal-Psychological Theory of Suicide could be found again in concepts of specific experiences when leaving care. Thus, it is not only about new theories, but also about new combinations of theories or new combinations of theories and specific research fields.

'Over the edge': extension of theoretical understanding of care-leavers' experiences to strengthen the value and impact of research

In conclusion, it became apparent how theories support research designs and discussions to recognise, define and understand resources, as well as the needs of children living in and leaving alternative care around the globe. This is an important base – for children, practitioners and researchers – to create safe and collaborative alternative care and aftercare settings. The complexity and dependence on circumstances of this research field require more than repeating well-established theoretical frames that prescribe how to look at and talk to and about children and youth. Nevertheless, questioning established concepts does not inevitably have to falsify or discredit them. Rather, questioning allows us to take over new perspectives and new understandings of different perspectives on leaving care. And it allows one to develop clear, ethical and theoretically grounded applications for research,

policy and practice approaches. Of course, a coordinated critical discussion is also a central prerequisite for being able to transcend established knowledge in favour of new research paradigms.

But if we take this metatheoretical conclusion seriously, it also means that the theoretical concepts highlighted in this book, which led to new insights and knowledge, should also not become static or fixed. Rather, they also need to be questioned in future dialogues as they have been questioned here. And since they made their theoretical framing clear, this will be quite possible – as opposed to imprecise definitions of terms or theoretical embeddings. A dialogical research discourse finally supports ethical and participative culture in child- and youth-oriented research and practice around the globe.

Reaching into the future

This book has aimed to address some of the edgy, understudied or marginalised facets of leaving-care research, with a focus on three themes: theories and conceptualisations of leaving care that could generate new insights into care-leaving; groups of care-leavers who need greater attention; and methods of care-leaving research that are innovative and could generate fresh data. We, the editors, have framed the book as ‘living on the edge’, because we see those leaving care as living in the liminal space or on the edge between care and post-care, between childhood and adulthood, between dependence and independence (or rather interdependence). In addition, we have used the notion of ‘living on the edge’ because most of the authors are working at the liminal space between student and researcher, junior and senior academic. And, third, we have drawn on the term ‘edgy’ to emphasise our collective effort not to do ‘more of the same’ (repeating what has already been published), but to find fresh, innovative and contentious facets of care-leaving research.

As much as we have emphasised the liminal, transitional spaces between past, present and future in the lives and work of care-leavers and leaving-care scholars, we have also been mindful of the liminal space between the present and future of leaving-care scholarship itself. Where is leaving-care research going? What are the unacknowledged, uncomfortable and even conflictual edges that we should focus on in future?

First, edgy care-leaving researchers need to consider the tensions between focusing on small sub-groups of care-leavers versus focusing on care-leavers as a collective. Traditionally, care-leaving research has tended to aggregate care-leavers into a unitary group. There is value in disaggregating care-leavers into more nuanced groups; and even then, to recognise the diversity within these groups, so as to recognise and validate the edges between care-leavers. Not all care-leavers are the same: their histories, personalities, family constellations, life experiences, cultures, contexts, identities and sexualities

are different (along with numerous other differences, as with other people). While we caution against disaggregating to such an extent that each young person finds themselves in a group of just themselves, and while we advocate the value of interconnectedness between collectives of diverse care-leavers, we do also recommend that, going forward, leaving-care scholars give greater attention to the diversity of care-leavers. This book has helped to open new insights into some of the most understudied care-leavers, such as those with a street-connected history, those in the LGBTQIA+ community, those who are unaccompanied migrants, those who are disabled, and those who are early parents and/or are suicidal.

Groups that we could not include in this book, but believe warrant more attention, are, for example, Indigenous peoples, those who experienced abuse or neglect while in care, and those from countries where no known leaving-care research has been conducted. In practice, researchers should continue to study aggregates of care-leavers – there is value in such studies, particularly with large samples. But we do recommend that such studies provide more information about the profile of these groups and that, where relevant, disaggregated analysis be conducted on key demographic and life variables. In particular, actively identifying sub-groups that are large enough to do meaningful quantitative, qualitative or mixed-methods research on and with, could assist in focusing in on groups with distinctive care-leaving experiences.

Second, there are tried-and-tested research methods and methodologies that are and should continue to be used: grounded theory, longitudinal studies, surveys, case studies, mixed methods, and so on. These methodologies are known to generate useful insights into life experiences. But the chapters in this book have raised up several less widely known methodologies that could significantly enrich the kind of data collected and the sense made of that data: institutional ethnography, methods for including disabled care-leavers, techniques to engage hard-to-reach young people, trauma-informed designs, greater attentiveness to issues of power and care, consideration of the gap between researcher and researched, challenges and opportunities for care-experienced researchers, and interviewing a young person's social network and ethnography. Other methodologies that we consider worth more attention are discourse analysis, interpretive phenomenological analysis, visual methods and Indigenous methodologies.

Most studies on leaving care tend to rely on a small number of methodologies. We envisage a future in which leaving-care scholars explore less-well-used methodologies and even create new methodologies that are tailored to this population, and where the cultural appropriateness of methods is critically considered. We also aspire to a future in which the engagement of care-experienced young people as researchers, field workers, advisors, data analysts and writers or presenters becomes the norm, as part

of a broader ethic of care. We do recognise that resources may significantly constrain the ability to make use of these methods, particularly for those in the Global South. Finding creative solutions to collaborate in egalitarian ways across better- and less-resourced contexts is something that should be high on our agenda.

Third, in 2006, Mike Stein famously called out the tendency at that time for leaving-care research to be overly empirical and lacking theoretical framing. At the time, he recommended three theories – attachment, focal and resilience – the first and particularly the third of which have become prominent, while the second almost invisible. While leaving-care scholarship is far more theoretically informed and driven than in the past, and while we agree that not all research needs to be theoretically grounded, this book introduces or revitalises some important theoretical frameworks: the conceptualisation of ‘stability’, the habitus of instability, Joiner’s Interpersonal-Psychological Theory of Suicide and trauma theories. In addition, more familiar theories are sometimes taken from a fresh angle, such as a social ecological approach to resilience, rather than the more familiar psychological and individualistic approach, and fresh considerations of social capital. Other theories that could expand our insights into leaving care include minority stress, interactional resilience, anti-oppressive frameworks, feminism, and decolonial and postcolonial theories.

Conclusion

As we draw this book to a close, we highlight the tensions and benefits between continuity and discontinuity in scholarship, between what is known and what is edgy and fuzzy. In many ways, as we move into the future, we wish to build on the legacy that has been left to us by our predecessors in the scholarship of leaving care – much has been learned over a relatively short time (in relation to how long ‘care’ has been a feature of societies around the globe). But in other ways, which this book has explicitly set out to accomplish, there is a need to carve out new facets of scholarship. These may confirm what we have already learned – that is good. And these may generate revolutionary new insights into the provision of care, the process of transitioning from care and the ‘outcomes’ experienced over the course of adulthood. This is, in our view, a worthwhile, albeit sometimes uncomfortable, adventure.

An important theme going forward is which terms are used by researchers when writing about care-leaving research. Which concepts are experienced as inclusive, ethical and not stigmatising may differ between groups of care-leavers, contexts, countries and languages. Deciding which terms are used is a sensitive and complicated topic that needs to be addressed to a greater

extent than before and researched in an open and respectful way, allowing for diverse contributions and conclusions.

Another important edge in care-leaving research is the experience and challenges faced by care-experienced researchers, particularly professional, academic researchers. While all care-leaving researchers bring a unique set of life experiences to their research, which often includes working in children's services, the experiences of researchers who grew up in care are surely distinctive. Given the findings about the questioning of the legitimacy, bias and rigour of care-experienced researchers' research, this is an edge that needs further voicing.

We wish to emphasise, also, the need to recognise and bring to the centre the experiences and discourses of care and care-leaving from the Global South, through building closer power-conscious partnerships between North and South, including with Indigenous peoples living in Global North countries. Nevertheless, not all dividing lines go between the Global South and Global North. There are still countries within the Global North that have little knowledge about young people ageing out of care, while some countries in the Global South have more research.

Finally, greater interdisciplinarity in a field that has been largely dominated by social workers may introduce fresh methods and theories – social geography, political science and policy, anthropology and youth studies (in sociology) spring to mind as potential candidates. And the global histories and discourses of racism and patriarchy, and heteronormativity and gender dichotomy, also need far more attention as we move into a future that is diverse, inclusive and caring. There will always be edges in research on care-leaving, and we hope that scholars will continue to engage with and push forward at these edges.