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RESEARCH REPORT

Expressions of Self:

Race, Religion and Representation of
minoritised children and young people
in the British Care System

Professor Sariya Cheruvallil-Contractor, Dr Alison Halford and Dr Kusha Anand
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Notes on the Authors

Professor Sariya Cheruvallil-Contractor is Professor in the Sociology of Islam at the Centre for Trust, Peace and Social Relations, Coventry University, UK. She is Chair (2020-2023) of the Muslims in Britain Research Network (MBRN) and edits Research in the Social Scientific Study of Religion (RSSR). As a feminist sociologist, she interrogates the power dynamics within knowledge production and the implications of the processes and systems of knowledge on society as a whole. She started undertaking research *with* and *for* children in care after becoming an adoptive mum, just under a decade ago. She has led research and published in this area, funded by the Department for Education, the Nuffield Foundation, the Heritage Lottery Fund and Barnados. From her other research, she has published on Digital Religion, Muslim communities in Britain, Inter-religious relations and women's history including her most recent title *Muslim Women in Britain, 1850–1950: 100 Years of Hidden History* (Hurst / OUP 2023).

Dr Alison Halford is an Assistant Professor (Research) and Impact Lead at the Centre for Computational Science and Mathematical Modelling (CSM), Coventry University. As a feminist scholar, her work draws upon intersectionality to promote greater equality and transparency in decision-making to build the capacity and resilience of communities now and in the future. Publications include contributions to the *Routledge Handbook of Mormonism and Gender* (2021), *Palgrave Handbook of Global Mormonism* (2021), and with Professor Sariya Cheruvallil-Contractor has co-authored numerous publications on Islam, young people and lived experiences of religion. Previous research includes looking at domestic abuse in UK Churches, the energy needs and aspirations of displaced people in Rwanda and Nepal, and transdisciplinary approaches to Artificial Intelligence and Ethics. Currently, she is co-investigator on the Nuffield-funded 'Expressions of Self' project, which looks to understand race, religion and representation of care-experienced children and young people.

Dr Kusha Anand is Research Fellow and Co-Investigator on two research projects at the Centre for Trust, Peace and Social Relations, Coventry University, UK. With a decade of fieldwork experience in interdisciplinary projects focusing on ethnic minoritised groups, refugees, and migrants in the UK, she is passionate about the use of arts-based methods to amplify the voices of children from ethnic minoritised groups in the UK.

Acknowledgements

Executive Summary

This research report draws on original research to explore how care-experienced children and young people from minoritised backgrounds understand their identities. Through their narratives, we understand how children in care experience and perceive their identities, as well as their understandings of the care that they receive and desire for their identities.

We rely on children's and young people's voices and stories. Using an intersectional approach, we worked with Black, Asian and mixed-heritage children and young people (aged 14 to 19) to understand their narratives of identity. We focused firstly on understandings of ethnicity and religion and how these change in relation to other aspects of identity and, crucially, by being in care. Secondly, we examined their experiences of asking and getting help from social workers, foster carers, adopters and other support structures that provide for their identities while in care.

By listening to and understanding children and young people's perspectives around ethnicity, religion and identity, we developed a new framework to inform both theoretical and practical work with children in care. We describe our model as *Identities in-flux*, which integrates Kimberlé Crenshaw's Intersectionality and Meredith McGuires' Lived Religion theories to generate new frameworks of reference that support best practice when implementing support plans for young people and children. Within this model, we consider the interplay of changing socio-ethnic-religious factors, as well as young people and children's biological heritage, their being in care and their own agency in determining how they themselves want to be perceived. By broadening discussion from a singular focus on one aspect of identity, such as race or gender, we hope to support inclusive and sensitive practices and policies that reflect and respond to the increasing diversity of children and young people entering care. We have since delivered knowledge exchange workshops and built practice tools on this model that frontline social workers and family practitioners can use in their everyday work. These tools and workshops are accessible here – https://www. researchinpractice.org.uk/children/publications/2024/ january/expressions-of-self-supporting-minoritised-children-s-identity-frontline-briefing-2024/

Through listening to their voices and distilling meaning from their stories, our research has achieved a more complex framing of the identities of looked-after children and young people from minoritised ethnic and religious-heritages. By equipping social workers to become better informed about children's complex identities, we hope to empower social workers with the tools and insights needed to provide more effective and nuanced support that can make a difference in the lives of some of society's most vulnerable constituents.

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Introduction: Why think about Children's Identities

For looked-after children and young people from *minoritised* backgrounds, having a home that offers security, stability and belonging can provide a space to negotiate the complexities of their circumstances and identities. Prior to this work, there was a lack of data on looked-after children and young people that takes an intersectional approach, which acknowledges multiple dimensions of identity, such as age, gender, religion, ethnicity, sexuality and disability (Bywaters et al., 2020). This research report outlines our methods and our original findings around children and young people's negotiations between their multiple identities in social care contexts. Alongside this report, we also have a frontline briefing that provides strategies and tools that social workers can use in their everyday work – https://www.researchinpractice.org.uk/children/publications/2024/january/expressions-of-self-supporting-minoritised-children-s-identity-frontline-briefing-2024/

In this first section of this report, we set the context for this research and outline our theoretical and methodological choices. This research addresses both academic and social work practitioner audiences, and we hope that this section outlines our practice-focused and intellectual motivations to undertake this research.

Section 2 that follows, presents the findings that we have distilled from children and young people's stories. In this section, we offer a new theorisation of identity, whilst also considering implications for frontline practice. Section 3 begins to introduce implications for practice. Throughout we emphasise and amplify the stories that children and young people told us about their lives. By bringing to the fore their unique perspectives, we hope to contribute to a more comprehensive understanding of their needs, challenges, and aspirations, which supports interventions that respect and value complex identities.

By listening to and understanding children and young people's perspectives around ethnicity, religion and identity, our research outcomes inform multiple social care stakeholders when making decisions on how they can best meet children's needs.

1. Background to the Study: Why look at Minoritised Children, Religion and Ethnic Identity in care?

The National Census of looked-after children (SSDA903) currently collects data on ethnicity, but no national data exists on their religious identity. According to the 2021 UK Census, while white British Christians have continued to decline, religions traditionally associated with the global south or populations from Africa, Asia and eastern Europe are more present in Christian Churches means diverse religious populations have increased, particularly in urban cities (Bickley and Mladin, 2020; ONS, 2021). Alongside the growing presence of those affiliated with Hinduism, Sikhism, Black Majority Churches, and Buddhism, those brought up as Muslims are more likely to continue that affiliation as adults (Voas and Bruce, 2019). For minoritised communities, religion can become the 'sacralising' of ethnic identity, whereby the negative consequences of belonging to a minority can be combated through creating a social reality that

reflects and responds to the cultural- heritage context (Knott, [1986] (2022).

Recent governmental figures show more children and young people from diverse backgrounds have entered care than in 2021. In 2022, the number of children looked-after by local authorities in England rose to 82,170, up 2% on last year and continuing the rise seen in recent years. Children from Black, Mixed and Other ethnic groups were over-represented in the numbers of children in care. Children of White ethnicity account for 73% of CLA; 10% were Mixed or Multiple ethnic groups; 7% Black, African, Caribbean or Black British; 5% were Asian or Asian British; 4% other ethnicities and ethnicity was not known or not yet recorded for 1%. 5570 children were classed as unaccompanied asylum seekers (UASC) who account for nearly 7% of the total, which is an increase from 2022 and around

double the number of USAC that were recorded in 2015 (DfE, 2023).[1] It seems the government considers adoptive parents' religion is sufficiently important to capture on a national scale (SSDA903) but religious data on children and young people looked after in Britain is deemed too difficult to collect.

> It is not enough to ask social workers, adopters and foster carers to adjust practices to accommodate identity needs without providing an evidence base on how children and young people from minoritised backgrounds understand and live their identities.

Along with challenges of structural racism in public services (Lavalette and Penketh, 2013), conflicting positions towards religion in social care systems mean that it is vital that practitioners and carers understand the most appropriate ways to support the care journeys of children and young people from minoritised backgrounds. Looked-after children and young people from minoritised backgrounds are more likely to come from religious backgrounds, which carries its own corresponding historical and societal indexing. Children and young people with multiple ethnic heritage are more likely on average to have three or more placements than their counterparts (Ahmed et al., 2022). In order for children and young people from minoritised backgrounds, particularly those with complex heritages, to thrive they will need extra help to make sense of their identity (Newbigging and Thomas, 2011). Yet, while the Equality Act 2010 makes 'race' and 'religion or belief' protected characteristics, since the Children and Families Act 2014, English adoption agencies are no longer required to provide for a child's race, religion or cultural birth heritage when family finding (Cheruvallil-Contractor et al., 2023). Shortages in foster carer and adopter numbers mean that same-ethnic matches are not always possible (Miller and Butt, 2019). Indeed, in some circumstances, same-ethnic and/or religious matches may not always be necessary as our previous research uncovered good practice in some mixed-ethnic families when foster carers, adopters and social workers went

above-and-beyond to meet children's identity needs (Cheruvallil-Contractor et al., 2018).

In response to the governmental emphasis on policies that demonstrate 'every child matters' (Education Committee, 2017), rather than talk to adults who care for looked-after children (which has been the precedent in previous research, including our own), this research understands children and young people's identities by listening to them. Centring the research on their lived experiences, amplifies their voices, giving this least-heard group a space to express their needs, aspirations and how these are (or have been) met by existing practices.

Our emphasis on children and young people's perspectives on religion, ethnicity and identity is crucial because we seek to depart from adult-led understandings of religious identity that is seen as determined by theology, texts or beliefs. Instead, we postulate that children's religious identities are often informed by cultural and social practices as by official doctrine. For example, for children, religious festivals can be more about decorations, presents and the people they meet (Petrelli and Light, 2014). We will listen to children and young people's notions of faith, ethnicity and identity, and aim to translate their understandings into social work tools to inform how they are looked-after while in care.

> By advocating the use of religious-heritage, in addition to ethnic-heritage, and emphasising the overlap in relation to looked-after children from minoritised backgrounds, this research offers social care practitioners more inclusive and culturally sensitive terminology and tools that acknowledge how identities are minoritised.

We hope that recognising the complexities of ethno-religious identities will allow for more reflective social care evaluations that aid the placements for children and young people from minoritised backgrounds.

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1. The UK government define UASC as children and young people who have applied for asylum in their own right and are separated from both parents and/or any other responsible adult. The majority of USAC are from minoritised ethnic groups, in particular Muslim majority countries such as Eritrea, Syria, and Afghanistan, yet there is no central record that documents their religious identity.

2. Aims & Objectives: To Amplify Child-led Understandings of Identity in Care

This project listened to minoritised looked-after children and young people's narratives on ethnicity, religion and identity, to inform policy and practice about their needs. In doing so, it addressed the following objectives:

1. Collate 30 life history narratives from care-experienced minoritised children and young people (ages 14 to 19)

2. Develop a complex intersectional framing of minoritised ethnic- and religious-heritage children and young people's identities in care, particularly around the intersections of ethnicity and faith

3. Develop training and policy initiatives in partnership with practitioners to ensure that children and young people's voices inform social work practice

Our previous research focussed on Muslim-heritage children and showed that faith-identity aids some children's well-being in looked-after care. It also demonstrated that for some children, religion and ethnicity are central to their identities, whereas for others these are peripheral to who they are and the care they need (Cheruvallil-Contractor et al, 2022a, 2022b, 2021, 2018).

Very little is known about the extent to which minoritised looked-after children and young people's different views and experiences of religion and ethnicity are included in decisions made about their lives.

This research presented in this report addresses this by understanding religion through children's voices. Rather than textual or adult-led paradigms, throughout the research we focussed on the ways in which children understand and describe faith, and how *they* say their experiences vary with ethnicity and other aspects of identity such as their age, gender, sexuality and class. We were open to multiple interpretations of religious experience and explored the ways in which young people and children engage with faith whilst in care and documented transitions and transformations within their faith identities including around exiting or leaving faith.

3. Our Approach: Trifurcate Thinking

3.1 Permeable Identity Boundaries

This research focusses on looked-after children and young people from Black (largely of Christian-heritage and to a lesser extent of Muslim-heritage), South Asian (largely of Muslim-heritage, but also of Hindu- and Sikh-heritage) and mixed heritage children and young people, who may have dual religious heritage but are less likely to have a distinct religious identity (Arweck and Nesbitt, 2010). According to the Adoption and Special Guardianship Board (2021), these children and young people are those who wait the longest for a permanent or long-term placement.[2]

Innovatively, and drawing upon this team's disciplinary training in sociology, our approach to how we understand these multi-faceted identities was influenced by three conceptual frameworks 'Minoritisation', 'lived religion' and 'intersectionality'. This led us to think about identity and identity categories in ways that are not essentialised and as having 'permeable identity boundaries', which fluctuate as circumstances, contexts and personal preferences change. By bringing these three ways of thinking together to develop a typology of identities (see section 2) underscored by notions of permeability and interconnectivity we have been able to foreground young people and children's voices and stories in our findings and in new theoretical and practical developments,
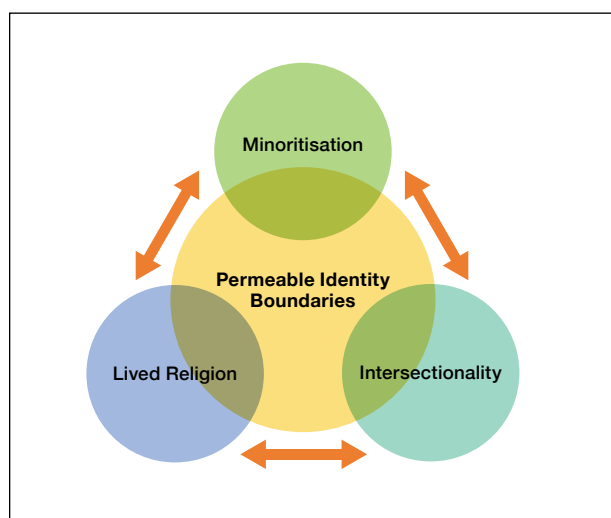
Figure 1: Permeable Identity Boundaries

For British-born Black and South Asian young people, whether in care or not, their identity is often shaped by being children or grandchildren or great-grandchildren of migrants. This dynamic often gives rise to a contested sense of belonging within Britain and/or Europe. This includes navigating the complexities of diasporic belonging and negotiating their relationship with the majority culture (Nielsen, 2014). Modood further observes that for some ethnic minority groups, religious affiliation may be 'associational', a way of expressing a group and/or political identity rather than to do with piety and possibly a vehicle to gain social and political agency (2010). For children or young people in care, our research shows that their sense of identity is complicated as they have to negotiate their biological parent/family traditions, as well as social work professionals, adoptive parents or foster carers perceptions of religious, cultural, and ethnic identities (Cheruvallil-Contractor et al., 2021). With this in mind, we have purposefully chosen to use the term 'heritage' in relation to a child or young person's ethnic and religious background. This allows us to distance ourselves from definitions imposed by adults and towards a theoretical space that considers religious identity and religiosity in context to children's evolving experiences.

3.2 Minoritisation

In our discussions around categorisation of identity, we prefer the term 'minoritised' over acronyms like BAME (Black, Asian, and Minority Ethnic) or BME (Black and Minority Ethnic). The terms BAME and BME are problematic for their lack of specificity, propensity to homogenise and emphasis on skin colour. Furthermore, few people from these backgrounds identify with these terms (Miller and Jumbe, 2020). According to Sevarajah et al. (2020), current categorisations mask the centring of Whiteness and flatten or erase difference and mask inequality. The term 'minoritised' provides a socially-grounded understanding that particular groups of people are minoritised by others rather than naturally existing as a minority (Gunaratnum, 2003). Minoritisation as a term thus emerges from and acknowledges the social power hierarchies within society that determine how various social groups and individuals are perceived within society. In the context of Black and South Asian communities in Britain, in addition to visible racial differences, they are also minoritised as 'forever migrants' or the 'supreme and ultimate strangers' (Alexander, 1996, p.6).

In this research, using the term minoritised to describe looked-after young people and children's ethno-religious

identities acknowledges the diversity among these children. The social hierarchies that minoritise these children's ethnic identities also shape how their religious identities are perceived and catered for while they are in care. We envisage that using the term minoritised will facilitate acknowledgement that social workers, foster carers and other social care actors are part of the same social hierarchies that determine which groups are minoritised in society.

'Minoritisation' can offer a reflective, conceptual and professional space within which social workers can think about conscious and unconscious biases that influence how and why decisions are made for minoritised children and the care they receive.

3.3 Lived Religion

This research is underpinned by lived religion, a sociology of religion theoretical framework, which works across disciplines to study religion in its social contexts, as experienced and negotiated by people within their identities and communities (McGuire, 2008). Rather than presume uniformity in practice and beliefs, lived religion seeks to uncover the complex, untidy negotiations that take place in a person's life to construct a religious identity, which may at times differ from official doctrine (Ammerman, 2014; McGuire, 2008; Harvey, 2013; Nyhagen, 2017).

For this research, lived religion allows an exploration of religion that privileges children's experiences and perceptions. For example, in our previous research, it was apparent that children experienced religion through their social contexts and cultural practices, what they wore or ate, rather than texts of beliefs (Cheruvallil-Contractor et al., 2021). In this project then, religion is understood through the 'lived' everyday negotiations that take place as people (social workers, children, carers) live and inform their religious understandings in ways that contextualise who they are, where they live, who they interact with and their personal circumstances (Ammerman, 2013; McGuire, 2008).

Lived Religion allows for understandings of religious identity that are not deterministic. Instead, religious identities may be understood as continually evolving with ethnic and socio-cultural norms and changes in an individual's life. Lived religion focuses on 'embodied practices', such as dress, food, education, and even play, which overtime become forms of worship or expressions of spirituality (Harvey, 2013). The researchers' previous work on Muslim-heritage children in care has shown that understanding

religion as 'lived' allows for more dialogic and less didactic social care evaluations (Cheruvallil-Contractor et al., 2022a, 2022b, 2021, 2018). Our lived religion approach allowed the inclusion of a variety of perspectives around faith: from those who are devout believers, those who practice faith as a cultural habit (Yilmaz, 2014), those for whom religion is a matter of identity (Modood, 2010, 2005) and those who reject religion. In this process, instead of delving into various theologies and texts, our focus is on prioritising everyday actions. We emphasise these actions to the extent that they influence the lives of children in care, allowing us to better understand and interpret their religious and cultural context.

Framing the research through lived religion avoids identity silos and could give space for further understanding on how other aspects of their identities, including their gender, caste, sexuality, class and disability, inform how they negotiate their race and religion

3.4 Intersectionality

Inherent also to this research is an emphasis on 'intersectionality', a term that illustrates the multiple realities and layered identities possible within everyday human existence (Crenshaw, 1989), which collude to either marginalise or privilege particular actors and voices in society. An individual's identity consists of multiple constructions, gender, ethnicity, religion, class, education, geographical location, which together determine how they are perceived and received by wider society and how they perceive themselves.

Our previous research demonstrated that the ways in which children and young people experience both faith and ethnic identities are shaped by their age, gender or other identity characteristics. For example, Muslim girls might have less access to the Mosque; and babies and younger children have very little, if any, understanding of biological identity (Cheruvallil-Contractor et al., 2021a). This sense of fluidity is captured in this quote from a young care-experienced gay Christian who told us,

"I struggled with who I was and initially felt rejected by Christian communities due to my gayness and LGBT+ communities due to my faith [...] as I grew older I became more comfortable in who I was"

As a care leaver, he also felt excluded from the majority of young people his age. Our use of intersectionality, when combined with ideas of lived religion allows for our research findings to reflect the specific contexts and identities of each young person who participated in our research.

4. Methodology: Many Conversations

Framing the research using minoritisation, lived religion and intersectionality allows for analysis of what ethnic identity or 'being religious' means to a child or young person, develop understanding of fluidities and how these might be taken into consideration in caring for vulnerable children.

Specifically looking at ethnicity and faith as not two discrete social categories but as intersecting identities will raise awareness of how best to provide for the multiple and layered identities of minoritised ethnic- and religious- heritage children in care.

The overarching principle of the research is to position children and young people from minoritised ethnic- and religious-heritage as the makers of meaning and negotiators of identity. The investigators drew upon a sample of 26 children and young people in care or care leavers aged between 14 -19 years old in England, including three participants who identified themselves as Unaccompanied Asylum Seeking Children (UASC).

In relation to care experiences, we focussed on children and young people who are in or have experienced adoptive, foster care or institutional care. We did not include looked-after children and young people who are cared for under special guardianship or kinship-care arrangements as usually it is expected that they will have some continuity accessing social networks, culture and customs (Ince, 2009). In adoptive, foster and institutional placements, children and young people move to different homes, communities and cultures. Even where social workers have attempted same-ethnicity or same-religion family matches, children and young people may nevertheless experience the loss of key cultural markers in their lives, generating what Pitcher and Jaffer describe as 'cultural confusion' (2018, p.219). The questions that this research asks around children's identity and identity-needs are therefore most significant for children in adoptive, foster care, and institutional/corporate care.

4.1 Sampling

To facilitate an intersectional examination of identity, we recruited a diverse sample consisting of black, south Asian and mixed / dual heritage children and young people as noted in Table 1 below. Within this category we included children and young people from a variety of religion or belief backgrounds including those from Christian, Muslim, Hindu and non-religious backgrounds. Less tangible and more difficult to achieve, but equally important was to ensure a range of religious lived experience in the sample from children and young people who are only nominally affiliated to a religious identity to those who foreground it in their lives.

To recruit children and young people we worked with gatekeepers such as support groups for UASC, social workers, adoption and fostering agencies, local authorities children's services, adopters and foster carers. Negotiating access to children and young people was complicated. The fieldwork for this research took much longer than was initially planned. Access to children and young people was complicated due to a variety of reasons such as bureaucracy within local authorities who usually held parental responsibility for children and young people living in foster care or institutional settings; confusion around who could give consent; adoptive parents hesitancy to allow / facilitate their children's participation; and young adults' hesitation as they perceived their care-experience as a taboo subject. Often initial meetings would suggest that a number of potential participants could be available within a local authority. However responses to call-outs for participants within organisations was always poor. A black male social worker who supported this research to access children and young people was concerned about he described as apathy. He complained:

> When it's a trip to Alton towers, you get 200 responses. When it is something meaningful like a conversation about racialized inequalities you get a bolt on the door

Nevertheless we accessed and heard the stories of 26 children and young people. We ensured geographical spread across England in the sample. To minimise the risk of harm to children and young people, we aimed for children and young people aged 14-19 and strived for an equal numbers of male and female participants. In practice, two of our participants were older, 21 and 23 respectively – they were keen to tell their stories and so we included them in the research.

	Ethnicity	Religion	Gender
1	African	Islam	Male
2	African	Islam	Male
3	African and White British	Islam	Male
4	Jamaican and White British	Christianity	Male
5	British Black (Algerian)	Christianity	Male
6	Caribbean and White British	Withheld	Female
7	Black and White British	Christianity	Female
8	South Asian Afghani	Islam	Male
9	Iraq (Kurdish)	Islam	Male
10	British Asian Pakistani	Islam	Female
11	British Asian Indian	Hindu	Female
12	British Asian Pakistani	Islam	Female
13	Eritrean	Christianity (Protestant)	Male
14	Eritrean	Christianity (Orthodox)	Male
15	Unknown	Islam	Female
16	British Asian Indian	Hindu and Christianity	Female
17	British Asian Indian	Hindu	Male
18	Mixed (British and Asian])	Islam	Female
19	British Asian Indian	No religion	Male
20	Mixed (Malawi and Indian)	Atheist	Female
21	African	Islam	Male
22	Mixed (Caribbean and White British)	No religion	Male
23	Congo	No religion	Female
24	Mixed (Jamaican and Bajan)	Christianity	Female
25	African	Christianity	Female
26	Asian Indian	Christianity	Female

Table 1: Participants' (self-reported) demographic details.

The demographic details that we captured do not follow neat or standard categorisations. Whilst we draw upon heritage as a frame of reference in our work in regards to religion and ethnicity, such as Muslim heritage or South Asian heritage, the above categories reflected how participants self-described their identity. This is because we were led by *children and young people's definitions of how they identified themselves*. For example, a participant who identified as 'trans female,' requested the gender be categorised as 'female.' The categorisations for ethnicity, religion, and gender were therefore cross-checked with the participants, so as to ensure that we were true to their descriptions of identity.

4.2 Methods

The majority of our work with children and young people took the form of narrative life-history interviews. Taking inspiration from McAdams and Mclean's (2013) work on narrative identity, we understand narrative life history work as the way we construct stories about ourselves that are contextually bound to how we and others frame our identity. Adopting a narrative approach to interviews allowed space for children and young people to share how they understood their past, how they see themselves now, and what they envisaged will be their future (Ray et al., 2023).

In documenting 26 life history narratives, we drew upon a mix of visual, verbal and written techniques including photo-elicitation and creative visualisation of identities through drawing and other artwork. Some participants showed us and allowed us access to their social media accounts allow us greater insights into their identities. Providing a range of methods to capture life history narratives can facilitate unaccounted for themes while allowing young people and children to represent their experiences in diverse ways (Holland, 2009). The open and indexical nature of images makes visual methods a useful tool as it links the social and cultural worlds of children and young people and the research topic. These images then become a catalyst for creative conversational spaces about community, collective reflections and common challenges (Meo, 2010). We will discuss these themes as they emerged in Section 2.

In all our work, we encouraged such bridge-building or 'responsive' data to produce deep, 'thick', meaningful material (Geertz, 1973, p. 310). Although we had a list of questions prepared for the interviews, these were to serve as prompts to aid the young people and children

in making meaning out of their life history. During the adolescent years, meaning-making, as in the ability to make sense of personal events, becomes more developed giving them the greater skills to translate social interactions into perceptions of self (McLean, Breen, & Fournier, 2010). Narrative interviews were instrumental in supporting meaning making as it allowed us to move those we interviewed from recounting events to exploring how those events have shaped their sense of self, including the way they position themselves in the world around them. For example, during interviews we often digressed to talk about issues that mattered to the child or young person being interviewed, we spoke about make-up, football, the art they created and their future career plans, which lead to better understanding of less visible aspects of their identity.

Moreover, the interviews afforded the co-creation of knowledge, transparency about a researcher's social location and address asymmetry in the research process (Oakley, 2005; Ramazanoğlu with Holland, 2002). This was evident in a group interview that we ran in collaboration with a Black Social Worker. He attended and co-facilitated this discussion with us, which three young Black female care leavers attended. His attendance and facilitation enabled trust-building with participants. During this focus group discussion we all drew our identities and then discussed our drawings. The researchers and researched *all* drew and *all* participated in the discussion. This approach enabled r*esearch-researched boundaries to be dissipated* at least partially in this focus group discussion.

The *presence of social workers or other trusted adults* was a help in some interviews, allowing participants to feel comfortable. In one interview, a foster carer encouraged the child in their care to be more reflective during the interview, providing more detail of particular incidents. In other interviews, the presence of the social worker was a barrier, either because the child felt unable to share their views or because they sought validation from their social worker. We acknowledge there are challenges when there are other adults in the room as in constructing stories about themselves, children and young people may disclose aspects of their identity that are unknown or still evolving. Similarly, when their narratives coalesce with the social worker or trusted adult's interpretation of the young person or child's life history, it may limit the child or the young person's ability to reflect differently on those constructions and reinforce essentialised performances of identity.

As feminist scholars of religion, we also interrogated our own *positionality* to critique how the research process reinforces hierarchies and privileges certain worldviews. Our personal identities as a South Asian visibly-Muslim woman, a White not-visibly Christian woman and South Asian woman, had an impact within the interview process, just as we were impacted by our conversations with children and young people. Young people reacted to us differently and we plan to reflect on this in a journal article on this subject.

Future researchers need to be aware of the politics and negotiations that necessarily take place when interviewing a looked after child. Interviews were emotionally fraught for the researchers and for the researched. When interviewing an unaccompanied asylum- seeking child, they said that they felt unable to discuss freely prior to receiving their settlement documents to live in the UK. After receiving their documents, they felt much freer to express their views. Critically, we learnt to reflect on *what was said and what remained unsaid*. We found that becoming an attentive listener was key to the meaning-making processes, in particular the usefulness of silence as a tool of empowerment as the children and young people could decide when and if they wish to further elaborate their narrative.

4.3 Analysis

For this work we used thematic narrative analysis (TNA), a method of analysis that combines thematic analysis principles with a narrative-focused perspective. Unlike thematic analysis, which relies on coding of words to uncover commonalities or repeated patterns of behaviour, TNA emphasises narratives in their entirety as the unit of analysis (Riessman, 2008). This approach allowed us to explore themes around 'in-flux' identities' by underscoring the importance of preserving the integrity of the narratives throughout the analytical process.

Drawing upon Braun and Clarke 's (2012) work on thematic analysis, we implemented a five-stage process:

Step 1: Data Familiarisation and Note-taking.
We begin by immersing ourselves in the collected narratives to capture initial impressions and observations.

Step 2: Identity Categorisation.
We then categorised the narratives based on the shared characteristics, every day experiences, and aspirations to see where the connections and disconnections between identities arose. This step allowed us to test the relevance and appropriateness of our theoretical framework.

Step 3: Definition of Identity Types.
The next step was to refine and define each identity type in line with our identity types (layered; oscillating; child-determined). We then crafted concise definitions and assigned narratives with recurring themes or patterns of behaviour to each identity category.

Step 4: Systematic Theme Exploration.
Using manual coding techniques, we noted the impact of a certain event, feeling, or decision against each identity category to ensure consistency and clarity throughout the analysis process.

Step 5: Case Reconstruction (Stapley et al., 2021).
We selected exemplar narratives that represent each identity type and its associated themes (as seen in the report). These exemplars serve as concrete examples in ensuring rigour, validate, and significance of the research.

4.4 Ethics

The research was conducted only after risk assessment and ethical approval was obtained from Ethics Committees at Coventry University. The project raised specific ethical considerations around engaging with looked-after children and young people who already face lines of questioning from numerous social workers, carers and others adults involved in their lives. During their lives, these vulnerable young people may have faced severe trauma, neglect and rejection from those meant to care for them. As researchers, we felt a duty-of-care to minimise any risks of them reliving memories of trauma. We mitigated negative impacts on children through two routes. First, we engaged with older children and young people, aged 14 to 19, who may have more understanding (than younger children) of their circumstances in care. As noted above we positioned looked-after children and young people as key stakeholders in the research. We are keen to work with them, to give them a sense of ownership and agency within the research.

Secondly, the narrative life history interviews we conducted used a variety of stimuli – questions or themes, photo elicitation, drawing – to engage with children and young people through methods that they feel work for them. Nevertheless, there remains an additional responsibility to approach recruitment and consent with an 'ethics of care', paying particular attention to the value of empathy, responsibility, and relationships (Gilligan, 1982). We worked with gatekeepers whom the children know and trust. This was not unproblematic, when participants' opted to do their interviews in the presence of their trusted gatekeeper, this sometimes enhanced the quality of the discussion as it allowed them to feel more supported. On other occasions, this became a barrier as the child or the young person looked to them to answer the question for them or sought some form of validation.

During interviews, we were observant of the impact of questioning on participants. To minimise any adverse impacts, we conducted interviews in places that the young person was comfortable within. Usually this was their home or the institution they lived in. One participant who at the time of his interview lived independently preferred to be interviewed in his previous foster carer's

home. She was somebody he trusted and her home was a safe place for him. Around half of our participants preferred to be interviewed online. Other locations for interviews included a meeting room at the young person's local council, booked via their social worker and the garden of another child's home. We implemented a shared diary system to ensure that researcher-safety was not compromised by visiting private homes.

Interviews were usually audio recorded. In some cases, the young person preferred not to be audio recorded, so interviews were captured via detailed notes and we used a case reconstruction approach to write their stories/narratives. Furthermore, we had to consider issues around who holds parental responsibility for these children. Throughout the research written consent was received from appropriate adults before conducting interviews, along with consent from the children and young people before interviewing them. All three members of the team completed DBS checks prior to engaging with children.

Maintaining anonymity and confidentiality is key to this research as there are safeguarding issues associated with looked-after children. When translating children's stories for use in publications including this report, we pay particular attention to anonymising their stories at three levels to ensure that their identities are completely masked. Firstly, we ensure that recordings and transcripts are only identified by code. Names are stored separately. Secondly, we clean transcripts, photos and drawings to remove anything that is identifiable including place names, details of events or particular habits that may render a child identifiable. When using extracts or quotes from children's stories in publications or as part of impact tools, we double-check to ensure sufficient contextual information to make these case studies meaningful. However, we also make changes or modify stories to mask identity while retaining the crux of the narrative. In addition to these specific ethical concerns, the project team adhered to checks and balances to mitigate the usual ethical challenges in sociological research around informed consent, no coercion in research, processes for participants to withdraw if they want to and storage of personal and sensitive information.

5. Closing this Introductory Section

This research project listened to care-experienced children and young people's opinions about their identities. These children and young people entrusted us with their life stories: memories of sadness, fear, future worries on the one hand, but on the other and they shared with us stories of joy, hope and aspiration. Most of all we were inspired by their agency and resilience. We were moved by their desire to change care system for future children who entered it. They were motivated by our desire to hear their stories and amplify their voices. This research journey has been fraught with emotional upheaval for all involved and is by no means an unbiased academic exercise. Indeed, in the tradition of feminist scholarship we recognise that objectivity is impossible. Furthermore, we assert that false commitments to objectivity have obscured the stories and lives of those at the margins, by a 'one size fits all' approach. By listening to vulnerable children and young people, we believe that our research challenges traditional commitments in academic research to objectivity. In outlining our methodological choices, we clarify the possibility of doing this with methodological rigour.

Based on our analysis of children's narratives, we have developed a new theoretical framework to inform policy and practice, which we discuss in Section 2 that follows. Knowledge exchange was key to our approach.[3] Here we present a selection of non-academic audiences to who we presented our research. We have already[4] shared these findings with over 350 frontline social workers, social work leaders[5] and 500 academics.[6] Audiences have overwhelmingly accepted these findings as useful and relevant to their practice, as has making a positive change in the care that they provide. In theorising, interpreting and representing the lives of these young people and children we intend to produce insights into identities as complex social constructs bound to specific socio-historical contexts.

Our vision is that complicating understandings of what it means to be a minoritised child or young person of religious heritage, will lead to provision that is better-equipped to support children and young people's complex identities as they journey through care.

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3. Appendix 5 lists the Knowledge Exchange events completed by the time of writing this report.

4. Writing in September 2023

5. This is via workshops delivered to CoramBAAF's membership, Cornwall Local Authority and Coventry Local Authority

6. This is via Supporting Families – Family Law Reform conference, Birmingham University (https://www.birmingham.ac.uk/research/law/family-law-reform-now/supporting-families.aspx) and the European Scientific Association on Residential And Family Care for Children and Adolescents (EuSARF) conference in Brighton (https://eusarf.org/)

Amplifying Children and Young People's Voices: Learning from everyday lived experiences

1. Introducing *in-flux Identities*

During this research project, we collated identity stories from 26 children and young people from minoritised backgrounds. Our aim with these interviews was *not* to produce generalisable data. Instead we took a 'deep dive' approach to gather thick and rich qualitative data about how care-experienced children and young people perceive and experience their identities while in care, and how their needs are met whilst in care. The stories we gathered had some similarities, for example the trauma (of different kinds) that led them to being in care. Most of our participants preferred not to discuss the reasons that led them to being in care, perhaps they did not want to recollect the trauma, or as was also reported in our previous research they associated being in care with stigma (Cheruvallil-Contractor et al., 2018). Another shared element of the stories we heard, was the resilience of storytellers. Their desire to change their lives for the better and also to change the care system, so that children who entered it in the future had better journeys. However more than often, the stories we heard were very different from each other. These were stories of young people who were much more than their ethnicity or their religion, as shown in the quote below:

> I consider myself to be a thin black man. I enjoy making new friends, socialising, and learning new things. I'm also friendly. Additionally, I have a deep belief in religion. [...] I like playing football. So, they [the others] view me as maybe a good footballer, a good storyteller and a funny guy. We make stories around our migration background, football, and music.
> **Kingsley,[7] African Male, Living in Foster Care, aged 17**

In understanding identities as not stable properties, we are aware children and young people will explore with us how identities are constructed, carried and modified through social interaction in a particular context. We were keen to uncover evidence of the ways children and young people encounter that process and to develop practice tools to enable social work practitioners and decision-makers to better meet children's and young people's needs during their care experience. *In-flux Identity* is our attempt to distil from these stories a sense of how these different identities as experienced in the British care system may be pivoted to develop new practical and theoretical frameworks to understand and cater for children's identities in care. This section clarifies and outlines the concept of in-flux identity. We start this process by introducing Aleena, a young woman of Pakistani heritage who was living in foster care when we interviewed her:

Aleena[8] is a young Pakistani-heritage woman who came into care aged 11. Prior to coming into care, Aleena lived with her deeply devout Muslim biological family. She said that when she lived with her biological family, "All I knew was prayer and *naths* or Urdu-language religious songs". Like many participants we spoke to Aleena preferred not to disclose the reasons why she came into care – she said that this was something she wanted to keep to herself. We asked Aleena about her ethnic identity. She described herself as Pakistani. When we asked her what this meant, Aleena described various aspects of Muslim religious practice. In the past she prayed, fasted and wore a *hijab* or head scarf – this was what her Pakistani-ness meant to her. Thus, Aleena conflated her religious and ethnic identity.

When Aleena first came into care, she found strength in her Islamic faith. She continued her deep and reflective practice of Islam and was really happy when after a few moves she was placed with Muslim foster carers. She told us how aged 11 or 12, with the help of her social worker she organised an *umrah* or lesser pilgrimage to the holy cities of Mecca and Madina in Saudi Arabia. She went on this *umrah* trip with her foster carer, and their family. She described this *umrah* was a deeply spiritual moment for her. She said that she held the *kiswa* or the black cloth that covers the *kabah* and wept tears of joy – she was so moved by being in its presence. She lived happily with these foster carers, but had to move again.

Fast forward three years later, to when we interviewed her, Aleena said that she was no longer religious. Islam mattered to her, but only when she had contact with her biological parents. When she met her parents, she wondered if she was somehow letting them down. These days she defined her identity through her love of football and makeup. She travelled 45 minutes and took two buses to play with a female-only team. There was a team much closer to where she lived, however she felt uncomfortable plays with males. She loved her make-up, but her attitudes towards using it had changed. Whereas as previously she used make-up to hide her ethnicity, she now used it to emphasise her skin tone and her ethnicity. We asked Aleena, had she rejected Islam? She said that she, "I am not sure". At the moment, she was not practicing Islam but retained the possibility of going back to it at some point in the future, if she wanted to.

Case Study 1: Aleena's Shifting Identity Positions

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7. This is a pseudonym

8. This is a pseudonym

Aleena's story brings to the fore a number of components of *in-flux* identity that we shall explore in detail in this section. Aleena's adherence to her faith had changed from deep religiosity to something that was in the periphery of her identity. From holding the *kabah* and crying, to her current personal thinking that religion no longer mattered to her. She was now committed to football and makeup, but her usage of make-up had also changed over the years, from attempts to hide who she was by using "pancake make-up" [her words] to these days showcasing her ethnicity. Her story raises questions around how the children and young people's views around religion (in Aleena's case Islam) are acknowledged in decision-making. That Aleena was able to organise an *umrah* pilgrimage shows both her agency in negotiating her religious needs with the foster carers and with her social workers who were making decisions for her. It shows that the social workers and foster carers *listened* to her. Her story also emphasises the importance of understanding religion as lived – Aleena had moved away from religion and did not really believe anymore. Yet she chose to go to a female-only football club. While she was no longer practising Muslim, she retained an element of everyday Muslim morality.

These shifts in her identity also play out in Aleena's wondering whether she is in some ways letting her parents down. This part of her identity is contextual and dependent on who she is with and the environment she is in – so when she's with her parents she holds herself to Islamic moral codes. However, when she is with her foster carer who is culturally Muslim, but not religious, Islam is less important to her.

In-flux Identity is our theoretical and practice-focussed framework to enable academics, social work leaders and frontline practitioners to understand how children make sense of who they are.

We use the term in-flux firstly because far from being static, children's identities, both religious and ethnic are constantly fluctuating. In Aleena's story, her commitment to religion changed from a position of piety to rejecting it.

Other participants described an evolving sense of the significance of ethnicity in their lives. Secondly, children in care interact with a variety of external stimuli including the identities of the different people who care for them, so they learn to adapt their identities accordingly. Therefore, Aleena's identity was possibly shaped by the people she lived with, suggesting children and young people in less permanent placements are having to constantly negotiate and renegotiate their identity in order to navigate the care experience. A black female care-leaver described this as code-switching – she behaved and spoke differently when she was with her foster carers, when she was at work and when she was with her biological family. These different behaviours could occur within a few hours of each other, depending on where she was and who she was with.

Another black female care leaver, Anna, [9] asserted that she was more religiously Christian now than when she lived with her biological family. She narrated how her biological family was not very religious. She then lived with a religious Muslim family and was impressed by their discipline and adherence to various religious practices. Then when she lived with a Black Christian family, she inculcated their practices and beliefs, which have stayed with her.

The support children need from social workers can vary with changes in their identity.

Whereas Aleena needed support in exiting her faith or at least moving away from it, Anna wanted better support to understand her newfound religion. This is why a key outcome of this research is to complicate understandings of children and young people's identities.

As we envisage it, there are three overlapping aspects to *in-flux identity*: (1) Layered Intersectional Identities, (2) Oscillating Identities and (3) Child-Determined Identities. In the paragraphs below we explore each of these three elements and then return to develop our theoretical understanding of identity as being in a state of flux.

9. This is a pseudonym

2. Layered Intersectional Identities

In the previous section, we introduced intersectionality as part of the conceptual framing of this research. The term 'intersectionality' emerged from within feminist scholarship to illustrate the multiple realities and layered identities that are possible within everyday human existence (Crenshaw,1989; Phoenix and Brah, 2004) and the interconnections between different social hierarchies that collude to either marginalise or privilege particular actors and voices in society. An individual's identity is made up of a number of aspects that together determine how an individual is perceived and received by wider society, as well as how an individual perceives themselves. Children in care have layered and complicated ideas that determine their care needs.
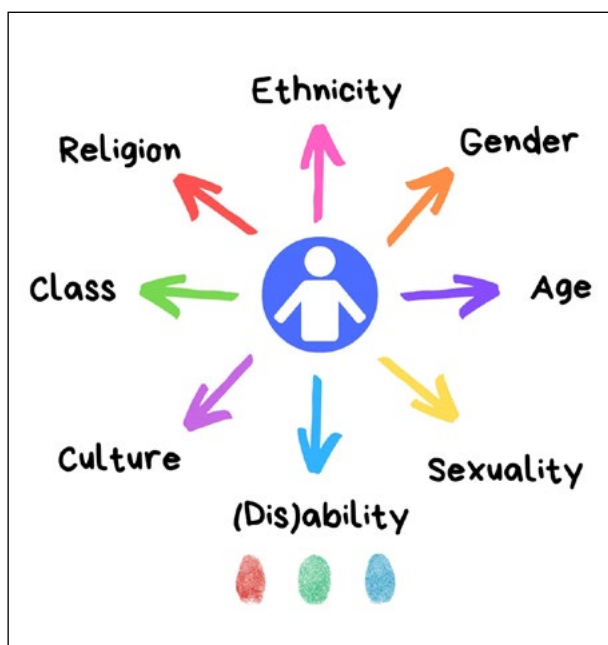
Figure 2: Intersectional Identity[10]

Theorisation around intersectionality provides a useful lens through which to understand the complex identities of children in care. Children's layered identities include among other aspects their ethnicity, religion, level of commitment (or not) to their faith, gender, age, family and community ties, cultural heritage and disability. This complexity in children's identity is demonstrated in the following quote

I consider myself to be European. In terms of religious identity, I refer to it as "Islamic culture." Ethnicity comes first for me, followed by religion. Gender is completely irrelevant. [...] I formerly held a religious conviction. I had faith in Islam. But now I've given it up.
Hisham,[11] Dual Heritage Male, Living in Institutional Care, Aged 15

In Aleena's case, prior to coming into care, she wore the *hijab* – this is specifically a gendered experience. That she sought out a female football club is an experience of faith from a genderered lens. In Aleena's case, she had moved away from her faith, yet every time she had contact with her biological family, she felt pangs of guilt and a sense of returning to her faith for their sake. For some young people and children, irrespective of whether they live with them family and community ties are key determinants of children's identities in relation to how they understand religious, ethnic and other aspect of their identity.

Intersectionality allows us as academics and social work practitioners to consider how different aspects of children's identities manifest to shape their lives and experiences in care.

For example, in a group interview we asked participants to draw their identities. Anna, a black Christian care leaver drew an image of the Black lives matter fist. She said the black lives matter movement gave her a deep sense of her own blackness. More than ever before, she felt rooted in her ethnic identity.

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10. Image source: https://medium.com/dna-s-blog/identity-beyond-disability-3d59d19b1dad

11. This is a pseudonym

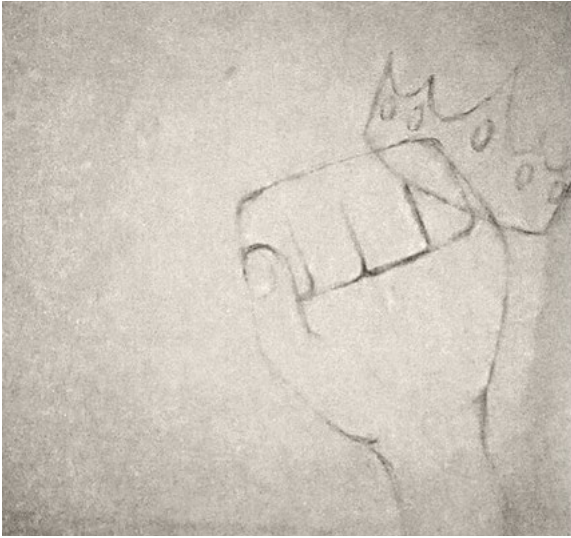*Image 1: Anna's Identity – A Strong Black Queen*

Reema feels strongly connected to lower-caste communities in India, which she proudly embraces as part of her identity. This is despite the fact that her adopted parents are of upper-caste Hindu background. She proclaimed that her lower caste origins truly define her. Surprisingly, her ethnicity is more important to her identity than her gender or religion. Despite the fact that her adoptive parents are religious, Reema has developed a strong spiritual bond with Hinduism and a deep devotion to Lord Ganesha. She finds solace in the temple area in her house, and it also develops a strong, geographically transcending connection to her Indian heritage.

Case Study 2: Reema's Transnational Identity

She included a crown in her drawing. Anna, like all the black young people we spoken to, had experienced some form of racism, including from the adults who were meant to care for her. She had felt devalued whilst in care, with not even access to basic skin or hair care support. She said that this was because, she was not an "angry black girl", as she had been described many times whilst in care. Instead, aligning herself with black lives matter, she felt she was a queen, who was part of a rich and diverse cultural heritage – she was a "strong black queen".

Reema's journey serves as a testament to the enduring richness of cultural heritage and the strength of her personal beliefs in the intricate interplay of her multifaceted transnational identity. Her story also highlights the need to be reflective of a child's needs in what might at least superficially seem to be a perfect match placement. Reema and her adoptive parents were both of Indian ethnicity and were followers of the Hindu faith. Yet there were important differences in their identities, including differences in caste, in their skin tones and in their levels of belief. Reema's skin tone was much darker that her adoptive family's skin and when combined with Indian attitudes that favour lighter skin, this meant that Reema faced teasing and banter. The tone in which she discusses this suggests that the teasing and banter is not always pejorative. Indeed from her narrative there is also a sense of comfort and belonging in this 'teasing and banter' from her loved ones. Teasing is part of family dynamics but may be excluding for those that are adopted or fostered as they do not necessarily feel secure enough in the relationship to discern if this is an expression of family closeness.

In a one-on-one discussion, Reema shared information about her self-discovery and identity construction, revealing the critical roles that her profound enthusiasm for *Bharat Natyam* (a type of Indian classical dance) and her strong ties to her cultural roots have played (see image 4 later on in this report to see Reema's illustration of her identity). She describes herself as British Asian Indian, but her "Indian roots" remain dear to her heart. Reema's life changed dramatically when she was adopted at the age of four, as she entered a world that was markedly different from the lower-caste upbringing of her biological family. Despite some teasing from her family and friends, she has embraced her deeper skin tone as a source of great pride; it remains a valued aspect of her unique identity, which she affectionately refers to as her "ethnicity".

Despite a deep sense of loyalty and love for her adoptive parents and the privileges that accompany higher caste life, Reena's loyalties to her lower caste heritage is noteworthy. This points to the enduring significance of biological heritage for looked after children. Particular aspects of children's identities came to the fore at particular times.

2.1 A Stone Stack

The idea of a stone stack is useful to understand children's intersectional identities. As an example, we consider Amir's identity. He is a young Afghan-heritage British man who came into care due to his family's inability to understand his disability.
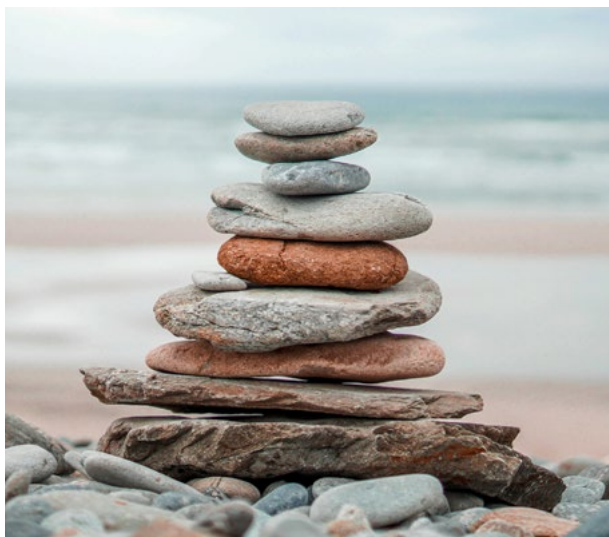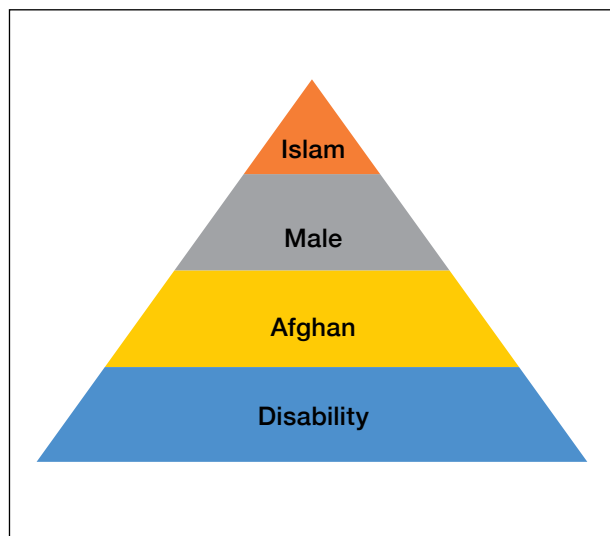

Image 2: An Identity Stone Stack[12]

Figure 3: Amir's[13] Identity Pyramid

When we asked Amir about his identity, he said he was first and foremost Muslim (represented at the top of the pyramid), then he was male, then he was Afghani (which he characterised largely by his language and by Afghani cuisine) and finally he spoke about his disability. However, from his interview it was also apparent that his disability was often at the fore of his identity, especially as perceived by those who cared for him and also in relation to his care needs – he came into care partly due to his disability. While in foster care, he needed medical support to manage his disability. This medical support also needed to take account of his religious needs – during his interview he reminisced about how his foster carer became an advocate for him, lobbying for his needs at school, with social workers and with medical practitioners. Whereas Amir put his Muslimness at the fore of his identity, the support needed to meet his disability meant that this aspect of his identity was also a critical feature in determining his experiences and needs. It may be difficult for practitioners to determine how best to accommodate identity needs when a young person prioritises one aspect of their identity (like Amir's strong commitment to his Muslim faith) while potentially having less insight into the impact of a less acknowledged identity (such as his disability) on care planning.

The idea of a stone stack is useful to understand children's intersectional identities for several reasons:

- Variability in Size Reflects Individual Components: Just as each stone in the stack has its own size, shape, and characteristics, each layer of an individual's identity has its unique attributes, experiences, and significance.

- Foundation and Stability: The larger stones often form the base, symbolizing foundational aspects of identity. These might represent primary or deeply-rooted cultural, ethnic, religious or familial ties. The smaller stones, potentially more changeable or yet to be developed aspects of one's identity, are supported by these foundational elements.

- Cumulative Identity: A single stone does not represent the entirety of the stack, just as one aspect of identity doesn't define an individual completely. It's the combination of all the stones that create the stack, reflecting the idea that it's the sum of all layers of identity that makes an individual who they are.

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12. Photo by Romain HUNEAU on Unsplash

13. This is a pseudonym

- Interconnectedness: The stones, while distinct, lean on each other for support, signifying how different layers of our identity are interconnected and influence one another.

- Natural Evolution: Just as stones are shaped over time by natural elements, our identities too are shaped, eroded, polished, and redefined by our experiences, relationships, and environments.

- Visible and Hidden Elements: In a stack, some stones might be partially obscured by others, mirroring the idea that certain aspects of our identity might be more visible or pronounced at different times, while others remain more concealed.

- Structural Fragility: The entire structure is not solid. Just as external stimuli such as a strong gust of wind might collapse a stone stack, children and young people's identities and / or their confidence in their identities might collapse. This could lead the mental and physical challenges for a child or young person

- Ability to be rebuilt: Just as a stone stack may be easily rebuilt, child and young people are resilient and with the right support, their identities and their confidence can be restored. It is important to realise that in rebuilding a stone stack the stones may not be in the same order. As a child or young person grows, their identities change and evolve in response to the challenges and opportunities they experience.

3. Oscillating Identities

Aleena's story, the Pakistani girl in foster care, demonstrates her changing commitment to faith. When we interviewed her, she stated that makeup is something that she is interested in. As noted before, her relationship to makeup has changed too, from using it to alter her skin tone to appear lighter, she now uses it to highlight this same aspect of her physical appearance. Children and young people's evolving and changing identities were a recurring feature in our interviews. Care experienced young people and children's identities are impacted profoundly by change with their life trajectories including entering into care, recollections of biological families and ties with them, their carer's identities, their social contexts, a desire to fit in or a sense of not belonging. Some of these aspects that leads to a child's changing identity are illustrated in Mark's story below:

Mark, a black African care leaver, came into care when his father and mother died in a car accident. His parents were Muslim, as was he. When he was left destitute, his Christian uncle adopted him. Mark moved to the UK to live with his uncle who took good care of him. Gradually, and without really realising when, Mark became Christian. He said that this was out of loyalty to his uncle. He said that he remembered his Muslim name, when we asked him what it was he said it with a hint of pride.

Mark's experience in the UK was one of isolation and prejudice. His uncle loved him and cared for him, but was busy with work and making ends meet. He did not speak about his adoptive mother. Thinking about his intersectional identity, he spoke English with an accent. He was black. He said that he experienced racism everywhere he went including in school. He spoke about a football coach excluding him from the football team, despite him being very good – this he felt was racist. He said that his teachers and his coach who were meant to look after him, were racist towards him too. His uncle tried to help, but he was too busy.

We asked Mark about his Christian beliefs. He said he loved the Church. We asked him why. He replied that this was because it was the only place where he did not experience any racism. Here he had friends who were white. In the Church he felt safe.

Case Study 3: Mark and his Church where he felt safe

In becoming a Christian, Mark's religious identity had changed as a direct result of his being adopted. For children and young people, particularly care-experienced children and young people, in transitioning into new environments and to accommodate different norms, seemingly immutable factors, such as ethnicity or deeply ingrained religious beliefs become mediated. Identity characteristics that appear as constants – such as ethnicity, or deep-rooted religion, are also susceptible to change. This has implications about how they might want those around them to perceive and treat them.

In adopting strategic approaches, as exemplified by Mark, where he altered a specific facets of his identity in order to integrate, he felt it showed gratitude to his uncle and a way of assimilating into the family. Mark felt he was agential in changing this aspect of his religious identity, but as he becomes more independent he may wish to connect in some way to his biological family religious heritage, that may create potential internal and external conflict. Another participant who was in a transracial placement was not sure of her ethnicity – was she white or was she South Asian? (please see Laxmi's story – case study 4). All children and young people in this research, spoke about the need to move away from "set in stone" or firmed up categories of identity.

When we asked Aleena about her identity she said, "I am still finding out who I am".

4. Child-Determined Identities

Children determined their identities in a variety of ways. When we asked Laxmi how she identified herself, she said, "my family is my identity". Below is her story:

Laxmi is a 23-year-old adult South Asian-heritage adoptee placed with white adopters, aged 21. Growing up she said that she was the only brown girl in her entire town. She knows she was adopted from India and has no sense of her biological heritage, other than this. She loves her adoptive parents dearly and says that throughout her life she experienced their unconditional love. She remembers experiencing racially motivated bullying in school. Her parents supported her fully to resolve matters. Yet she also made the comment that, "you cannot fully understand something that you do not experience".

Laxmi's sense of identity constantly varies. She spoke about feeling very white on certain days and on others feeling very South Asian. On her social media, she displays images of her wearing Western clothes on particular days and very traditional South Asian fashion on others. The photos are accompanied by captions that document her oscillations between different identities. On some days she is keen to find her birth mother and on others she does not feel this is important. Laxmi's story very clearly demonstrates the changing fluctuating sense of her identity.

Due the bullying she experienced, Laxmi has long term and severe mental health issues that determine her everyday life. From an intersectional lens in addition to the two ethnicities she inhabits, the next most significant aspect of her identity is her mental health. When we asked Laxmi what her identity was. She said,

"Family is my Identity"

Case Study 4: Laxmi, transracial adoptee

Laxmi's statement that "Family is my identity" can be read as a simplistic statement, but deceptively so. It can also be understood as a profound statement of her negotiations between her biological and adopted heritage. Laxmi finds herself caught in a veritable tug of war of identities. She is devoted to her adoptive parents and siblings with whom she shares a relationship of unconditional love. They have supported her through life struggles, yet she is unsure whether they fully understood the racism she faced. On certain days she is extremely aware of how she is different from them and how she has roots in culture that is so different to that of her parents. Laxmi would rather not identify with ethnicity – perhaps she is not sure if she was white or South Asian. She is devoutly Christian, a faith she learnt from her adoptive parents. In a manner that resonates with the experiences of many other looked-after children, Laxmi's way to mediate the very different cultures that are inherent to her sense of self meant subsuming her own identity within the broader context of 'family'. In forming their identities, children and young people in care mediate the different cultures that are inherent to their journey's through care. They also need to forge a unique sense of self that allows them to manage the challenges of adapting to new family dynamics and acknowledge their religious, ethnic, and cultural heritage. This is exemplified in the quote below from another young woman of South Asian heritage

Growing up as a British Asian girl, I always felt the difference between my heritage and the culture around me. [...] At times, I felt like I didn't belong to either culture, but as I grew up, I realized that this difference was actually a strength. It allowed me to bring the best of both worlds and create a unique identity. Growing up in Britain was wonderful as it exposed me to various cultures and traditions. I have learned to embrace both my British and South Asian identities, and I am proud to be part of both communities.
British South Asian, Female, Adopted, aged 16

Many participants used either religion or ethnicity or both to describe their selves. Others chose to describe themselves in ways that completely bypassed these categories. Some like Laxmi chose to identify themselves with aspects of their journeys through care. Many children sought to move away from ideas of ethnicity or religion and instead defined themselves through their hobbies or the skills that they had, as

shown in Raj's story below. This shift in self-identification might be attributed to a desire for a sense of agency and independence, as well as a means to foster a more inclusive and universally relatable self-concept that transcends potentially divisive markers like ethnicity or religion. This approach may reflect how care-experienced young people and children are using this as strategy to form connections with others on a broader, shared ground.

Raj, a male participant of South Asian-heritage, stated that the title of "artist" best described his identity. He created fascinating artwork on his time in care. Raj explained that each piece of artwork symbolises his struggles and resilience while in care. Raj learned these skills while growing up on the colourful streets of India. He now has a degree in fine art.

Raj stated unequivocally that he destroys every art masterpiece he created. He does this because he is hesitant to share his work with others. He chooses to keep his experiences private. Raj shared that a friend wanted to bring these unpublished art treasures to the world through social media, but Raj agreed with a strange condition: he will not see or be tagged in the social media handle that is used to share his artwork. Raj believes that being labelled a "artist" has nothing to do with being seen, but rather with the personal journey of care he takes with each brushstroke.

Case Study 5: Raj, an Artist

Raj's identity is not determined by his ethnicity, he barely spoke about this during interview. Instead, what mattered to him was his art. We encountered a dual heritage child who was writing a book about his experiences in care. He wanted to be known as an author. Other young people were poets and one was a carpenter. In choosing these alternative identities, these young people were demonstrating their resilience – they had skills despite being in care. Many spoke about wanting to use their skills to help others who were in care like them and to improve outcomes for children who entered care in the future. Indeed this was why they had participated in our research.

Image 3: Reema's Drawing of her Identity
(Please see case study 2 for further details of Reema's identity)

Reema, the young adoptee of South Asian heritage whose story we highlight in case study 2, drew the image above as a representation of her identity, which she characterised by an enduring fondness or loyalty for her Indian heritage. This is represented in the image above by her love for *Bharatanatyam* – a classical form on Indian dance. In describing her identity, she spoke about the British and Indian aspects of her understanding of herself. Parts of how she understood herself, stemmed from her biological heritage – her darker skin tone, her 'Indian-ness' and her identification as being from a lower caste. Her adoptive heritage gave her "a chance at a better life", a life free from want and *her* 'British-ness'. Bridging both aspects was the colourist banter she faced from her wider adoptive family about her darker skin tone and her love for dance. *Bharatanatyam* allowed her to bridge identities so that she could express herself through an art form and perhaps briefly forget the complex and often-conflicting aspects of who she was. Her art form became a safe space where she could negotiate and navigate the different identity pulls that she felt.
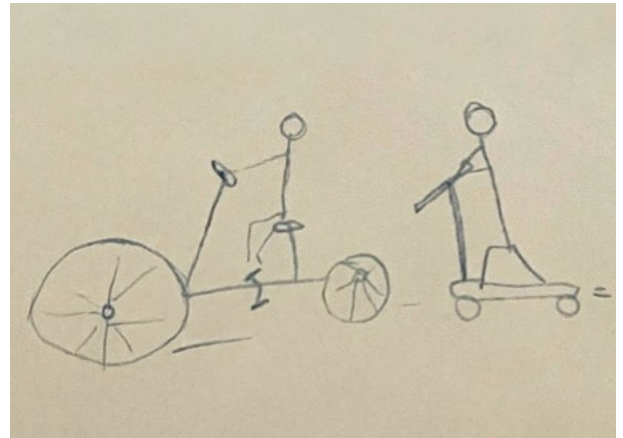
Image 4: Rose's Freedom

When we asked Rose, a young female Black care leaver, to draw her identity, she drew the image above. She said her drawing represented freedom. She shared vivid memories from her childhood, when her biological father had bought her a bike. She went biking with him and spoke about feel free from life's worries, which she had even as a child. That bike and the freedom it represented was also a signifier of happy memories that she held onto. She still bikes and feels free. These memories and the act of biking help her navigate the challenges of her past and present, contributing to her overall well-being and personal sense of identity. It's a way for her to reconfigure a memory as an expression of identity that gives her a deeper understanding of her past experiences and why they matter to her. This connection to her past helps inform her sense of self and provides a foundation for her continued growth and resilience

5. Returning to in-flux Identity

In-flux Identities offer a new framework that synergises Crenshaw's Intersectionality and McGuires' Lived Religion. It acts as a theoretical and practice space within which minoritised children and young people's identities can be understood. This is a theoretical and practical way of understanding care experience children's identities as:

- Negotiated – in articulating their identities, children have to navigate many external stimuli whilst in care including the identities of those who care for them

- Nuanced – their identities are intersectional, with particular aspects coming to the fore at particular times in their journeys

- Empowering – when children and young people are listened to and are given space to evolve, their identities can be agentive

Figure 4: Identity See Saw

The seesaw symbolises that identities change. It also represents the aspects of identity that are important at a given time. The seesaw shows one moment in time, whilst recognising that the significance of particular aspects of identity may change based on the child or young person's experiences, choices or particular contexts. The seesaw's movement is largely governed by the child or young person on it showing that individuals have agency in shaping their identity. At the same time, its movement happens within wider social contexts, including the beliefs, values and identities of the adults

caring or making decision for them. These external and internal elements can significantly shape identity and as these elements change, so does the young person's identity. For example, when Aleena first came into care, her religious identity was a significant marker of how she saw herself. Three years later, religion remained in her life, but its significance was much depleted, replaced instead by new interests and perceptions of self. Aleena's seesaw from three years ago would look very different from her see-saw now.

The concept of *In-flux identity* acknowledges the socio-ethnic-religious contexts of birth family and experiences of care. It insists that children's voices, experiences and opinions are accounted for in decisions about their care. For a young South Asian heritage transgender person, such a space enabled them to navigate their sense of self:
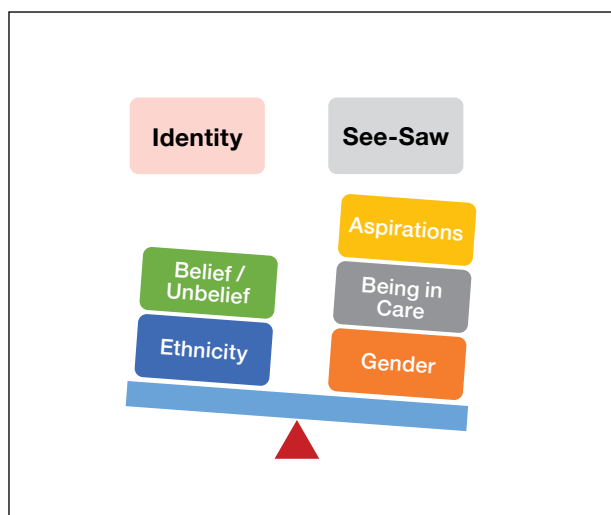
> School can be tough sometimes, especially when you don't fully fit in with your ethnic or religious community. But I've got some awesome parents and teachers who've helped me out along the way. They always encouraged me to embrace my unique identity and to be proud of who I am. They helped me learn more about my culture and heritage, which is super cool. And, as I've grown up, my ethnicity and religious background continue to shape my life in important ways.
> **British South Asian, Transgender, Adopted, Age 15**

Such a framing accounts for the significant diversities within ethnically minoritised communities in relation to religiosity, levels of religious practice and other aspects of identities. In the next Section, we will consider the implications of this theoretical framing for social work practice.

> Our framing of identity as *in-flux* accounts for the significant diversities within ethnically minoritised communities in relation to religiosity, levels of religious practice and other aspects of identities.

Providing for Minorities Children's Multiple realities and Layered Identities in Care

In the previous section, we developed *in-flux* identity as a theoretical and practice-focussed framework to understand looked after children and young people's identities. Our aim with this framework is to facilitate a more complex way of thinking about children's identities that can inform decision-making and the care that children receive. We recognise this approach is challenging and recognise that embracing the complexities of identity can introduce additional layers of difficulty in decision making for social care practitioners, fosterers, and adopters. However, this complexity allows them to move beyond simplistic and homogenous understandings, fostering a deeper appreciation of the diverse and nuanced aspects of each child's identity. By doing so, they will open up opportunities for more child and young person led insights of how they see their identities, ultimately leading to more effective and empathetic support for children in care. In this final section of our report, we consider how this be implemented in everyday frontline social work practice. This section is draws on our research findings as well as on insights gained through knowledge exchange events with social workers. During these events, we shared our research and *in-flux* identity framework with social workers, garnering their feedback and reflections. We start with Eli's story:

Eli (18) is an unaccompanied asylum seeking child from Sudan. His faith is important to him and he used to go to church often to pray to God before he came to the UK. As an orthodox Christian, he is struggling to fit in within British Christian communities and despite speaking English, he feels excluded from English-language Church services. His feelings of exclusion are leading him to lash out against the professionals working with him and he is disengaging from his studies. Concerned about his well-being, his social worker managed to source a copy of the Bible in his own language which she gave to him. She also found a Church where services that were similar to what Eli was used to.

Case Study 6: Eli's Bible

In Eli's case, he had a complex and layered identity. He was black and Christian. Yet 'his' Christianity was very different from accepted norms, practices and customs of Christianity in Britain. Indeed, when he was taken to his local church, most likely Church of England, he felt alienated and lost. He spoke English well, but English language services did not give him the emotional connection that he usually felt. His social worker was concerned that he was going into a shell, becoming less confident and less able to fit in with his peer group. In Eli case, his personality and his life in care took a turn for the better when he was given a bible in his language. This was a simple yet empathetic task, on the part of his social worker. For Eli, this was a meaningful moment. Here was something familiar. Eli finally found a space where he belonged.

On the other hand, we have encountered children and young people who have struggled. A participant, felt "trapped" in his institutional setting by a misjudged insistence from his carers for him to conforms to their understandings of his identity. Despite being cared for my a social worker who was ethnic-match, this child felt that their social worker has no sense of who they were. In another story, a female adult care leaver passionately complained that all she wanted was for the system to listen.

The approach we suggest may be as simple as talking to the child and listening to their views. Simple actions like this have added significance for young people and children in care because they often grapple with feelings of displacement, loss, and isolation. In extending small acts of understanding, social workers can serve as powerful symbols of acceptance and support, helping the child or young person to rebuild their sense of self and create a positive narrative for their future. It reaffirms that they matter, their identity is respected, and they are not alone in their journey through care.

1. Three-point plan of action

It is no longer sufficient that equality and diversity training incorporates religious-literacy or race-awareness. Religious, cultural and ethnic heritage can manifest itself in different ways in the experiences of children. They can have a range of care needs. What is needed is a careful and nuanced approach – we suggest a three-point plan of action:

During the knowledge exchange workshops we run, we tell social workers that on one level our research does not make their jobs any easier. We encourage social workers to think about children's identity as informed by intersectionality and children's preferences, and as constantly changing in response to various social stimuli around them. Our work enables social workers to move away from silo-ed thinking of what it means for a child to have an ethnic, religious or other form of identity. So, it may be perceived that our findings make the job of a social worker much harder. Our *in-flux identity* framework insists that everyone involved in a looked-after child's journey moves away from essentialised ideas of what it means to be black, white, of dual heritage, Muslim, Christian or Hindu.

i. Encourage frames of reference that see religious, ethnic and cultural heritage as a broad spectrum of engagement.

When engaging with children we encourage social workers, foster carers and adopters to recognise that whatever identity characteristic they are dealing with can be experienced in a range of ways. Children's socio-cultural contexts prior to coming into care determine their experience of identity whilst in care. The care experience itself, marked by upheaval and separation from familiar environments, can be destabilising and render them vulnerable, emphasising the critical need for sensitive and personalized support. Engaging them positively with their heritage could be one way of helping them regain a sense of stability and connection during this challenging period.

ii. Think about identity in ways that moves away from rigid understandings of religion or ethnicity and towards a more fluid sense of identities in flux

Children's identities are constantly changing as a result of the people and contexts that they encounter whilst in care. Social workers and others need to recognise that children are still forming a sense of who they are. Children need safe spaces to explore, discover and build resilience in their identities.

iii. Practice 'cultural humility' where social care practitioners learn from young people and children about their everyday cultural and religious norms

Each child's sense of their identity is unique and those caring for them need to listen to the child to understand their own conceptions of what ethnicity, religion or gender means to them. Cultural humility goes beyond cultural competence, which is a set of knowledge and skills about different cultures. Cultural humility emphasises a continuous process of self-reflection and self-critique. By understanding cultural humility as an ongoing process rather than a fixed point, social workers, foster carers and adopters are sensitive to and are prepared for how a child or young person may embrace, reject, or question their religious, ethnic and cultural heritage while in care. This includes supporting them in how and to what extent they wish to express different aspects of their identity, whilst allowing them to decide how they wish to connect to their heritage to foster self-determination.

We have collaborated with Research in Practice to develop a sister publication to this research report. The briefing and linked toolkit offers guidance on how social care practitioners can work with minoritised children and young people to explore their identities, meet their identity needs and promote positive identity development. This briefing provides tools to help social care practitioners think about and explore identity with children and young people, including: the different layers within their identities; how they think, feel and relate to different parts of their inherited identities and how they think about their identities in different contexts and with different people. This briefing and toolkit can be accessed via this link – https://www.researchinpractice.org.uk/children/publications/2024/january/expressions-of-self-supporting-minoritised-children-s-identity-frontline-briefing-2024/

2. Implications for Social Work Practice

Our in-flux model directs children's social work researchers, practitioners and leaders towards a more complicated rendering of children's identities. In-flux recognises that children's understandings are in a constant state of flux. Secondly, it recognises that children's identities are constantly impacted by external influences; identity pulls and pushes, from the adults around them. All identities are shaped by people and communities around them. However, for children in care, this externality is so much more profound – there are so many more people who are involved in these children's lives. It is important to recognise the impact of changing social workers, foster carers, teachers and others who may be involved in children's lives. Both these aspects of in-flux identity syncretically and constantly change who a child is, and how they want to be known.

This more complex rendering of children's identities has ramifications for social work in the formulation of care assessments, decision-making and matching for children. Our overarching recommendation of all this research is to **listen to each child to understand their specific formulation of *their* identity**. Throughout this report, we have illustrated the complex and simple ways in which children want their identities to be known. The quote below if from Abeni, a young black man. Reflecting on his identity, he says:

> My ethnic identity is mostly determined by the colour and tone of my skin, how well it resembles the skin of my ancestors, the struggles that people like me have faced historically, I have had five placements. My current placement is quite different. I live with only a parent, that's the same culture as me. And it's a lot easier because I can learn things about my culture from them, things about my gut, my foods by her skin or history as well.
> **Abeni, Black African Male, in Foster Care**

This work has implications for **transcultural placements**. For Abeni, living with a foster parent who shared their identity, meant that they could explore their culture and gain in confidence. For others including Anna (image 1), who described herself as a strong black queen after she gained confidence in her culture, a matched-placement was not essential. Anna spoke about being moved across multiple placements including some that were matched to either her ethnicity or her religion or both. However, she felt most comfortable and remains

in touch with a foster carer who was from a completely differently culture, ethnicity and religion to her own. From Anna's perspective what made this placement successful was this foster carer's interest in knowing Anna. Early on in the placement, she sat Anna down and simply asked her, "please tell me about you" and they had a long exchange. This open conversation and genuine curiosity from the foster carer helped Anna settle down. This placement differed from others in two ways; there was neither pressure to conform to the foster carer's culture, nor was there pressure to conform to the foster carer's perceptions of what Anna's 'blackness' meant to her.

Finally, this work has ramifications for how social workers' think about *life history work*. A key question here is – how can the complexity and layers of children's identity be represented in life storybooks, in assessments and in other documentation that social workers produce about children. This is especially important for older children who have a clearer and more developed sense of their identity. Rather than think about identity in silos, as practitioner we need to think about overlaps and fuzzy boundaries between identity categories. Rather than describe a child and black or white or Asian – we need to think about what these categories mean to each child, and in their specific context.

3. Concluding Reflections

Children and young people in care are so much more that we make them out to be. Our research insists that in caring and making decisions for children, social workers take an approach, which is child-led and which goes beyond traditional understandings of identity categories. Instead, we offer an approach to a more complicated rendering of identity. This approach to identity captures the layers within it, recognises change as the only constant and amplifies children and young people's voices. We hope that this typology of 'influx identity' is useful because it provides a framework to cater for the dynamic and evolving nature of identity. Among professionals, it aims to promotes self-awareness, inclusivity, empathy, and informed decision-making and challenges rigid categorisation and stereotypes.

This approach may seem difficult to put into practice, but what is often required is empathetic listening. Simple acts of empathy and connection can have a profound impact on the well-being and positive identity development of children and young people in care. At its heart, this approach means talking to children, listening to their views about their identity, and then taking time to reflect on what this means for the child or young person and the people around them.

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Appendices

Appendix 1: Interview Guidelines

'Expressions of Self': Race, Religion and Representation of care -experienced children and young people
Sariya Cheruvallil-Contractor, Alison Halford and Kusha Anand
Draft 1 (submitted to ethics committee) 07.02.2021

Step 1: Pre-Interview: Learning about the child's / young person's background
Prior to meeting any children or young people under the age of 18, we will meet with and briefly interview the key adult/s who care for them. Depending on the child's circumstances, this may be their social worker, adoptive parent/s and/or foster carer. For young people who are 18/19, this step may not be needed.

Pre-interview (if the participant is under 18)
Contact the person with parental responsibility either by email or via zoom to confirm the interview and discuss the following:

- Check person with parental responsibility has read the participant information sheet and address any questions about the research.

- Check if we have written consent from the person who has parental responsibility for the child/young person: for adopted children, this will be their adoptive parents; for children in foster care or residential homes, this will be their social workers.

- Gain an understanding from the adult's perspective what is important to that child's identity, areas that we can discuss during the interview and any areas of the child's life history that are better not discussed as they may cause emotional distress or trauma for the child.

- Check age of child/young person – must be 14 years old by the date of the interview

Pre-interview (if the participant is over 18)
Contact the participant either by email or via zoom to confirm the interview and discuss the following:

- Check the participant has read the participant information sheet and address any questions about the research.

- Check if we have written consent from the participant.

- Share what we will discuss during the interview and extend an opportunity for them to signpost any areas that they do not wish to discuss during the interview.

Suggested questions (if the participant is under 18):
- What led the child/young person coming into care?

- When did they start looking after the child/young person?

- What are future plans for the child/young person?

- What other aspects of the child/young person identity are important to their sense of self – gender, sexuality, friend circles, school, any other?

- Is the child/young person happy to talk about its life in care and prior to coming into care? Are there any areas that are best avoided?

- Would they be happy to show us their lifestory book and talk about their biological family14?

- Where would you like them to be interviewed? Would you prefer your home or another place, like a community centre or library to provide a safe quiet space?

- If we interview in the home, we would need to have two researchers in the home, would they be comfortable with that?

- Any other information that you think will be helpful to us in interviewing the child/young person?

Suggested Questions (if the participant is over 18)
- Are you happy to talk about your life in care and prior to coming into care? Are there any areas that are best avoided?

- If you have a lifestory book, would you be willing to discuss some of the information in that book with us?

- Where would you like to be interviewed? Would you prefer your home or another place, like a community centre or library?

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14. This is a book that is produced by social workers and which records the child's lifestory of coming into care.

- If we interview in the home, we would need to have two researchers in the home, would you be comfortable with that?

- Would you like a trusted adult to attend during the interview?

Consent

No interview can take place until researchers ensure that:

- The participant has been given time to ask questions about the digital recorder/any aspects of the interview.

- Participants and people with parental responsibility understand that they may withdraw all or parts of their data and there is no consequence of withdrawing information and no reason is required.

- Before the meeting, participants and people with parental responsibility are provided with the information sheet and copy of consent form.

- Should participants or and people with parental responsibility wish to make contact following their interview, there should be clearly signposted contact details of researcher in all correspondence.

- Before the interview, ensure participant is happy to continue with the study and has signed and emailed the consent form on the day via email. If certain cases, the consent form can be signed in person as long as the information has been shared before the interview (minimum a week before the interview)

- Researcher to co-sign (written or verbally) the consent form. Explain the form is stored digitally using a two-step verification password protected process and paper copies will be stored in a locked filing cabinet at CTPSR.

Digitally recording the Interview

The researchers will ask each interviewee for permission to record theinterview. We will explain that it is important to capture their words and ideas; recording the session will allow the researcher to do this.

1. In-person interview: Recording will be undertaken using an encrypted digital voice recorder. If a participant prefers not to be recorded then we will make written notes of the interview.

2. Online digital recording using Zoom: As a safeguard, if there is a continuing presence of COVID –19, the interviews will be conducted on a digital platform. Using a digital platform for the interviews requires considered thinking around the security of the meeting. While there have been safety concerns over the use of Zoom over the past few years, these have been sufficiently addressed by Zoom, including the most recent updates. To further enhance the security of Zoom use, we will ensure the meetings are password protected, encourage participants to access the meeting through the web (which goes through more advanced security protocols) and advise participants to use the most up-to-date version. The researcher will:

- Explain although the preferred choice is for the camera to be on during the to aid discussion and interaction between participants, they have the option to turn off the camera and mute themselves during the session at any point.

- The chat box comments can be used if the participants want to say something but we move onto the next topic due to time, or for any reason they cannot verbally share at any given moment. Researchers will ensure that participants understand that if they use the chat function, they can ask the researcher to withdraw their comments after the meeting and up until the data is anonymised

- Remind the interviewees they will be assigned a respondent number to ensure anonymity and the notes and recordings will be kept strictly confidential. Digital recordings, written notes and equipment will be kept in a locked safe and transferred to a password protected computer as soon as possible. Once the transcription are uploaded the recordings will be deleted, according to the data management procedures outlined by the researchers. **Deadline: Data to be anonymised within 4 months of conducting the research and latest by March 1st 2023. Personal details and other identifiable information to be destroyed by this date. Only anonymised data to be held for analysis until 30th June 2032.**

Step 2: Introductory meeting

We will request a trusted adult carer to introduce us to the child (under the age of 18) in a venue that the child / young person is familiar with, usually their home. The adult will stay during this initial introductory interview, and will be invited into the interview if the childs/young person consents or requests their attendance. For young people (above the age of 18) we will similarly hold an introductory meeting. If they prefer not to meet in their home, we will arrange an alternative venue, either at a community centre or safe public space. For over 18s, with their consent, a trusted adult may attend the interview aand/or remain at the venue.

Introduction

- The participant will be introduced to the researcher and vice versa by the trusted adult.

- The participant will be asked to confirm they have received information about the study and have consented to participation (information sheet, website, consent form).

- Brief these children and young people about the research. Offer an opportunity for the participant to ask further questions about the forms and the study.

- Under 18 – Explain the trusted adult will remain during this introductory interview as a safeguard.

- Over-18 – Explain that a trusted friend can remain during the interview, if this is their preference.

- Remind the participant that confidentiality will be maintained but if disclosure suggests harm to themselves or others, it may require Coventry University to contact relevant statutory bodies/agencies.

Step 3: Main Interview

After introductory meeting we will undertake the interview. The interview format will reflect previous discussions with the participant and their carers. Interviews may take the form of a variety of scenarious as discussed below. The scenarios are open for the child/young person to decide and will serve as prompts as the discussions will be led based on participant responses from the previous two discussions. In aiming for the participants to shape the discussion, certain topics may or may not be covered during each interview and one or more sceniaros may be used. Furthermore, depending on responses, the questions s may run in a different order than presented in this guide. We will meet with participants more than once as is needed to complete the interview process. Rather than focus on a set time, be participant-led and conclude the interview when they are ready to end the session. The following guide will be used to prompt discussion

Turn on the recorder and test it together

Date of Interview	
Participant Code	

Beginning the session

- **Ask how they would like to structure their interview:**
    1. Are they comfortable with drawing?
    2. If they have their life story book, are they comfortable sharing it with you?
    3. Would they prefer writing to drawing?
    4. Would they rather talk with the researcher?
- **As much as possible, invite participation.**
- There are no wrong answers.

Scenario 1: Visual map

- Invite them to draw the things they do in a week

- How is this different from what they did prior to coming into care? (if relevant)

- How does this map reflect their ethnic identity?

- How does this map reflect their religious identity?

- How does this map reflect their experience of being in care?

- Invite them to explore what activities/places/people help them feel better

- In what ways does this place/event/person help them with understanding their ethnic identity/religious identity/being in care

Scenario 2: Lifestory book or photo albums

- We will talk about their life journey

- How did they come to live in their current homes?

- What role has their ethnicity and religious identity played in their life journeys?

- What are the things/ events that help the understand about their life history

- Thinking about their life story book, in the future, what are some of the things they would like to see happen

Scenario 3: Artform (either poetry or drawing)

- Can you draw yourself or write a poetry about yourself?

- Why did you represent yourself in this particular way in your drawing or poetry?

- What does this say about your identity and your journey through care

- If others were to draw or write about you, what do you think they would say/do?

Scenario 4: Conversation
• How did you come to be living in your current home?
• How would you describe yourself?
• Thinking about your religious heritage, how important is it to you?
• Have you always been able to talk about your identity with an adult who care for you?
• Did religion, ethnicity or other aspects of your identity come into play when decisions were made about your life either by your self or by adults who were caring for you?
• Do you feel that the people around you understand how you feel about your religion? About your ethnicity? About being in care?
• What things could be done that would help you in understanding who you are?
• What are some of the things that you think have helped in making sense of who you are?
Are there any other examples or insights you would like to share?
Ending meeting
• Thank participants
• Remind participants of the right to withdraw and contact details if they have anything further to add to the discussion.
• Ensure participants have contact details of the researchers and who to contact if they have concerns about the research • Mention if any of the discussion causes them to be concerned to speak with a trusted adult. • Signpost support networks: 'Become' a support network for children in care and their carers Freephone 0800 023 2033, email advice@becomecharity.org.uk ; Muslim youth network https://myh.org.uk/ ; AFRUCA works in UK BME communities to protect and safeguard children from abuse and harm with a centre in Manchester contact https://afruca.org/

Exit strategy and Debriefing After the interview

Participants and people with parental responsibility
• Email participants and persons with parental responsibility to thank them, include a list of resources they can access if needed.
• Ensure the name of the researcher to write if there are concerns is clearly identified
• Make clear what will happen to the data collected and how we will share the findings

Researcher
• Contact a member of the team via email or call (within 24 hours) to reflect on the interview and how the interview has informed understanding of religion, ethnicity and being in care. Reprot back any concerns, including their own well being.
• Upload recording as soon as possible (within 24 hours) onto CRDS (Centralised Research Data Storage and Collaboration).
• Store digital copies of the informed consent forms on CRDS and paper copies in a locked cabinet in CTPSR (within 24 hours).

Appendix 2: Co-Produced event flyer

Appendix 3: Glossary

Bharatanatyam	Bharatanatyam is an Indian classical dance form that originated in Tamil Nadu.
naths	Urdu-language religious songs
umrah	lesser pilgrimage to the holy cities of Mecca and Madina in Saudi Arabia
kiswa	the cloth that covers the Kaaba
hijab	Head scarf

Appendix 4: Research Partners

1. Manchester Children's Services
2. Coventry Children's Services
3. Birmingham Children's Trust
4. Active Care Solutions
5. Arnfield Care
6. Research in Practice
7. Consortium of Voluntary Adoption Agencies
8. CoramBAAF

Appendix 5:
List of Knowledge Exchange Events undertaken so far by this team

Organisation	Date	Event	Attendees
Arnfield Care	26th September 2022	Training Session: Expressions of Self: Children's narratives of identity	c. 25 social workers working with Arnfield care
Cornwall Local Authority	21st March 2023	Training Session: How do children understand identity stories and more?	c. 100 social workers from across Cornwall Local Authority
Consortium of Voluntary Adoption Agencies (CVAA)	30th March 2023	Expert-led Training Session: Muslim-Heritage Children in Care: Religion, Ethnicity, Diversity and Practice Implications for Adoption Practitioners	c. 30 social workers from VAAs across the UK
CoramBAAF	20th June 2023	Lunch & Learn Webinar: Expressions of Self	c. 300 social work leaders and policy makers
Coventry council	June 2023	Training Workshop: Understanding the identity needs of minoritised children and young people	c. 10 social workers from Coventry LA
Muslim Foster Group	18th June 2023	Muslim Fostering Awareness Event	c. 200 community members, social workers and others interested in adoption and fostering
Cornwall Local Authority	14th July 2023	Training Workshop: Understanding the identity needs of minoritised children and young people	c. 30 social workers from across Cornwall local authority