This is a repository copy of *They sat and actually listened to what we think about the care system': the use of participation, consultation, peer research and co-production to raise the voices of young people in and leaving care in England*.

White Rose Research Online URL for this paper:
https://eprints.whiterose.ac.uk/id/eprint/133912/

Version: Accepted Version

Article:

Submission for: Child Care in Practice Special Edition – Raising the Voice of Children and Young People in Care

Title:

'They sat and actually listened to what we think about the care system': the use of participation, consultation, peer research and co-production to raise the voices of young people in and leaving care in England.

Authors:

Jo Dixon   Research Fellow, Department of Social Policy and Social Work, University of York, Heslington, York, YO10 5DD   01904 321275 jo.dixon@york.ac.uk (corresponding author)

Jade Ward   Research and Participation Assistant, Department of Social Policy and Social Work, University of York, Heslington, York, YO10 5DD 01904 321270 jade.ward@york.ac.uk

Sarah Blower   Research Fellow, Department of Health Sciences, University of York, Heslington, York, YO10 5DD   01904 328107   sarah.blower@york.ac.uk

'They sat and actually listened to what we think about the care system': the use of participation, consultation, peer research and co-production to raise the voices of young people in and leaving care in England.

Abstract

Over recent years there has been increased recognition of the importance of hearing the views of children and young people in and from care about the services and decisions that affect their lives. This emphasis on young people's voices has aimed to give weight to and raise awareness of their experiences and outcomes and the need for policy and practice improvements.

This paper discusses the development of methodologies for hearing and acting upon the voices of children and young people in care. It charts the journey towards increased levels of active involvement, from research participation and consultation to peer research and co-production. Using examples from our own empirical studies, the paper outlines key features of these different techniques and the opportunities, challenges and impact they engender. In early studies, views tended to be gathered via research interviews and analysed and presented by researchers. Consultation followed whereby children and young people were consulted on key decisions that might affect them. In more recent years there has been a transition towards greater participation through peer research and co-production in which children and young people are active and equal agents in the production of services designed to address their needs and in the design and production of research aiming to evaluate those services. Finally, we provide our reflections and those of some of the young people we have worked with to offer recommendations for meaningful and authentic engagement with the voices of care-experienced children and young people.

Keywords: participation, peer research, co-production, care-experienced, young people's voices

Background and introduction

The number of children in care in England increased to 70,440 in 2016, the highest it has been in over thirty years. The number of young people leaving care for independent adulthood each year is around 10,000 and estimates suggest that over 40,000 care leavers aged 16 – 25 are currently within the service. Whilst these numbers make up less than 1% of the total youth population in England, they nevertheless represent a substantial and distinct group of children and young people for whom the state and local councils are the corporate parent. They are also a group that historically has been at greater risk of vulnerability due to the reasons that brought them into care; stigma due to negative stereotypes and a lack of understanding about the circumstances that can lead to care; and due to systemic disadvantage arising from a lack of awareness of the particular needs and strengths of the group - something that the care-experienced poet, Lemn Sissay, refers to as being 'hidden in plain sight' (Lemn Sissay, 2017).

Furthermore, whilst care-experienced young people are arguably asked more than any other child to voice their own stories over and over again to professionals and carers, paradoxically they have tended to be denied a voice when it comes to making decisions about their lives, both at the individual level and at the wider level of care and leaving care service provision. Whilst there have been improvements in attempts to seek young people's views, there remains an unheard section within the care population. An example of this was demonstrated in our own research on leaving

care, where almost half of those interviewed said that they had little (16%) or no (32%) choice in when they left their care placement for independent adulthood (Dixon, et al. 2015) and in a sample of 800, almost one quarter (23%) felt that they had not been 'heard' or had their views considered (Dixon & Baker, 2016).

In recognition of these issues, there have been increased efforts by children's social care professionals, children's charities, and researchers to provide platforms for care-experienced young people to raise their voice by sharing their views, experiences and demands about their lives and how best they can be supported. International research highlights the importance, experiences and impact of using participatory methods to hear the voices of young people (Checkoway, & Richards, 2003; Daly, 2009; Hojer, & Sjoblom, 2010) and the need to improve methods to facilitate this (Cashmore, & O'Brien, 2001).

This paper focuses on the UK context to explore some of the approaches that have been used. It draws upon existing practice, the research and participation experiences of the authors in their research with young people in contact with children's social care and also the voices of young people involved in our research.

Approaches for raising the voices of young people from care

This section looks at the role that research can play in providing young people with a chance to have their say and, importantly, to be heard. We describe four different approaches; participation, consultation, peer research and co-production and present examples from our own research as well as illustrating how these approaches can also be used in the context of service development.

Participation

Over the past three decades, research focusing on young people in and leaving care in the UK has tended to involve young people in care or care-experienced adults as research participants, e.g. as respondents to surveys or participants in interviews and focus groups (Biehal, et al. 1995; Jackson, et al. 2003; Dixon & Stein, 2005; Dixon, et al. 2006). In this way research has provided a conduit for documenting and disseminating the voices of young people, enabling them in their own words, to highlight issues affecting them and to vocalise the need for change. The impetus for increased use of participatory approaches in research with care-experienced young people is embedded within the children's rights agenda. The United Nations Convention on the Rights of the Child, ratified by England in 1991, calls for greater provision for children to have a say in decisions and issues that affect them, including research that directly engages with children. Stein (2011), however, traces the history of how the child's rights movement evolved within the care and leaving care arena much earlier. The book describes how young people first came together in the 1970s to talk openly about their experiences of care and used their 'collective resilience' to support each other to campaign for improved services for themselves and future care-experienced young people.

The impact of the increased voice and visibility that research offered care-experienced youth is particularly demonstrated in the development of leaving care services over the past 30 years. Early studies of young people leaving care (e.g. Stein & Carey, 1986; Who Cares Trust, 1993; and Biehal, et al. 1995) involved young people as participants whereby their views and experiences were gathered via face to face interviews and focus groups and disseminated through publications and seminars aimed at academic, practice and policy audiences as well as service user groups. This research

enabled young people to become more vocal and served to highlight the lack of provision and the variability of support for young people leaving care at 16. This was accompanied by a growing movement within organisations working with vulnerable youth and adults (e.g. Barnardos, Shelter and First Key) that were in turn hearing the stories of care-experienced service users and harnessing their voices to lobby for change. The coming together of research that was evidenced by young people's own words, and service user evidence from organisations working with vulnerable groups, led to what Stein describes as 'the awakening of leaving care in the professional and political consciousness' (Stein & Wade, 1997, p.4).

This amplification of young people's voices and experiences of care and leaving care offered a strong driver for the consultation paper *Me Survive Out There?*, which drew further upon young people's words to influence an overhaul of services for care leavers. The consultation document acknowledged that by 'working in partnership and listening to young people themselves we can make a change for the better' (Department of Health, 1999, p.11). This became a lever for the enactment of the Children Leaving Care Act 2000, the primary legislation for young people leaving care today.

Research within the arena of leaving care has continued to seek the direct views of care-experienced youth to better understand their experiences and to provide critical first hand evidence of the need for change. The growing use of grounded research evidence to inform practice provides scope for services to be aware of and respond to the voices of care-experienced young people. The challenge inherent within this approach, however, is to ensure that such views are represented authentically and not diluted or distorted by the interpretation of the academic researcher. Attempts to minimise this include methods that place young people more firmly at the centre of the research process, as discussed below.

Consultation

Consultation expands on the traditional involvement of young people as research subjects by offering a more formal opportunity for young people to adopt an advisory role to directly impact study processes. Consultation recognises their particular expertise in providing informed opinions on the topic and the subject group. Consultation can take the form of interviews, focus groups and surveys, however, there is an explicit expectation that is will have a direct influence on the course of action. A recent English example is the New Belongings (NB) Programme[1]. NB was developed by the Care Leavers Foundation and introduced in 2013. It was taken up by 29 (19%) English Local Authorities and had the specific aim of maintaining young people's voices at the centre of service improvement by requiring that all local authorities consult with all local care leavers as a condition of programme membership. Most local authorities opted to carry out this consultation via a survey. The resulting messages from 800 young people on their care and leaving care experiences 'represented a powerful voice and presented important messages for services' (Dixon & Baker, 2016). Messages from the surveys were used directly to inform work plans for leaving care service and policy development. Though the programme formally ended in 2016, many local authorities continued to apply the principles of the NB model.

---

[1] See http://www.thecareleaversfoundation.org/About_New_Belongings

Consultation is also evident in young people's steering and reference groups, where care-experienced youth contribute to research design (including information leaflets and questionnaires), sample recruitment methods, data collection tools and providing a sounding board for the interpretation of findings. This approach was used in the evaluation of the 2015 Step Change (SC) project, which brought together three English local authorities and a national children's charity to provide evidenced based interventions for adolescents in and on the edge of care (Blower, et al. 2017). A reference group was formed from an existing group of six care-experienced young people from a local authority Children in Care Council (CICC), to advise the evaluation team on the development of recruitment and data collection materials. Accessing an existing group, rather than forming a specific group, allowed the researchers to benefit from an already engaged and operational group, thereby enabling consultation to begin as early as possible within the evaluation timescale. The aim of the evaluation was to understand the impact of new approaches to supporting young people in and on the edges of care. The reference group contributed to the evaluation set-up and used their own experiences to inform the research questions and analysis to ensure that interviews were relevant and the findings applicable to young people. This was facilitated by quarterly meetings throughout the evaluation and by attending a residential research workshop along with young people's references groups from two other studies, on analysis and dissemination skills. Feedback from the reference groups indicated a positive experience for young people as well as the evaluation team:

'It was absolutely amazing to see what we can achieve in a short time I feel like we have done something and done it well' (Young person, Step Change Project (Blower, et al. 2017)).

Factors that contributed to the success of the reference group's involvement in SC included a shared understanding of the role from the outset. For example, during the first meeting the young people and researchers created a terms of reference for the project, outlining what was expected of both parties. This gave a clear direction for the project and provided a common ground and equal footing for all parties, in taking the research forward.

Consultation is increasingly used as a means of utilising the views of care-experienced young people to ensure that service provision, procedures and policies are aligned to their needs and fulfil local and national government's corporate parenting role to listen to their children. Examples include the development of CICCs in local authorities across England, introduced under the Care Matters agenda 2007. Through this the government formalised efforts to give young people a say and to be heard so that 'every child has the opportunity to air their views….and should be able to put their experiences of the care system directly to those responsible for corporate parenting' (Department for Education and Skills, 2007, p. 21). Whilst the majority of local authorities (97%) now have CICCs and many have equivalent councils for care leavers, there is variation in the extent to which these mechanisms have proved effective in impacting on policy and practice change and in representing the voices of all care-experienced young people, including the harder to reach groups (ANV, 2011).

Peer Research

Peer research is embedded within participatory methods that enable members of the subject group to take on the role of researcher. The aim is to empower both the respondents and the peer researchers and to maximize the scope for deeper insight into issues through a common experience

or understanding (Lushey, & Munro, 2104; Kilpatrick, et al. 2007). Peer research with young people has developed alongside sociological paradigm shifts, which have re-conceptualised childhood, leading to children being acknowledged as competent social actors (Nind, 2011). Such approaches tend to hold more traction in research with marginalised or difficult to reach populations who have historically lacked a voice, such as young people (Kelly, et al. 2017; Kelly, et al. 2016; Nind, 2011; SOVA, 2005).

There are several examples of research involving care-experienced young people as researchers in studies of children and young people from care. One of the first was What Makes the Difference (WMTD) in 2005[2], a collaboration between Catch22 NCAS and National Children's Bureau, which involved 265 care-experienced youth being interviewed by 33 of their peers about how care had affected them. The success of the project was wide ranging: it empowered young people to support each other to speak out and share their stories; it impacted on policy (e.g. feeding into the 2007 Children and Young Person's Bill); and it also provided a blueprint for further national peer research carried out by Catch22 NCAS, including the Staying Put project (Munro, et al. 2012) which explored the feasibility of young people remaining in foster care until the age of 21 and research on Corporate Parenting (CP), which explored support and outcomes for young people in and leaving care (Dixon, et al. 2015). The latter study was one of the largest peer research projects of care-experienced young people at the time. Thirty six care leavers aged 18 and older attended residential workshops on introductory and refresher interview training and received on-going support from academic researchers and a youth participation team to undertake qualitative face to face interviews with over 500 young people in and leaving care across 12 English Local authorities. The project was successful in delivering generally good quality data (there was some variation as would be expected in any study involving newly trained and large numbers of interviewers) and also insights into young people's progress and lives in care. It also provided the peer researchers with transferable personal, social and work experience skills, including communication skills, organisation skills and the ability to engage with a range of stakeholders including other young people, corporate parents and research professionals. The approach adopted by the study replicated the WMTD model in that young people were included in all aspects of the research process from advising on the research questions, recruitment materials, data collection, data analysis (via a series of workshops on thematic analysis) and dissemination activities. This included support with developing presentations for their peers, their local authorities, and national and international conferences for policy, practice and research audiences. The study involved an independent evaluation of the peer research methodology, which included interviewing peer researchers, social workers and leaving care workers who supported young people's participation and an anonymised survey of 120 young people who were interviewed by the peer researchers (Dixon, et al. 2015, Appendix 1). This evaluation concluded that the peer researchers had benefited greatly from their experiences:

'The depth of [young person's] involvement made them feel valued and caused them also to value the experience of those that they interviewed. Because they were being asked to be such an integral part of the project, they understood the value to the project of their own and others' lived experience' (see Dixon, et al. 2015, p.147).

---

[2] See http://www.communitycare.co.uk/2008/06/03/research-children-in-care-spell-out-their-needs/

This was confirmed by peer researchers themselves:

'I gained more self-esteem and confidence as a result of doing the peer research. I was able to relate to young people better and it also led to me doing different pieces of work with young people within the local authority' (Corporate Parenting Peer Researcher, p28).

It was also confirmed by workers, who also considered the training and the peer research experience to have increase young people's skills, confidence and for some, the ability to contextualise their own experiences:

'He found the insight into other young people's experiences very interesting and reflected on these deeply…. so I think he was keen to continue with the study in order to find out more and feel that in some way he was contributing to improve future experiences of young people.' (Corporate Parenting worker, p139)

Furthermore, most young people (57%) who were surveyed about their experience of being interviewed by the peer researchers said they would prefer to be interviewed by someone with care experience and 69% felt that young people should always be involved in projects about issues that affect them.

Whilst peer research interviewing can provide an empowering opportunity to stimulate and echo the voices of care-experienced young people, it is enhanced by their involvement beyond the data gathering stage by contributing to the interpretation of findings and advising on how they are used, to ensure that their voices are not just heard but also understood. It also relies heavily on the resources and support of staff and researchers to enable a positive and empowering experience for those young people interviewing and those being interviewed. In this sense, peer research can be a more costly and resource intensive method than the more traditional method of including young people as research participants only.

Co-production

The final, and arguably most contemporary approach, is the use of co-production methods with care-experienced young people in both research and service development.

The Social Care Institute for Excellence (SCIE) (2012) notes that co-production appears to be increasingly applied to work with young people in and from care. The concept, which varies in definition, is not unlike peer research in its aim to empower young people and tap into their wisdom and personal experiences to improve the efficacy and relevance of research and/or services. SCIE identified some of the key strengths of the method as a means to: (a) define people who use services as assets with skills; break down the barriers between people who use services and professionals; (b) build on people's existing capabilities; (c) include reciprocity (where people get something back for having done something for others) and mutuality (people working together to achieve their shared interests); (d) work with peer and personal support networks alongside professional networks; and (e) facilitate services by helping organisations to become agents for change rather than just being service providers.

The LIFT children's home project (Catch22, 2016), which used co-production with children in residential care to develop transition services, provides a useful outline of the cycle of co-production. Co-production here is described as a process that identifies a need and an opportunity, stimulates interest, explores choices and barriers, agrees a plan, takes action and reviews and reflects.

Within our own research and evaluation of projects, we have applied the concept of co-production as a means of bringing together research participants (service users) and professionals to co-create and co-deliver a piece of work. The primary idea is that co-production works to ensure young people are active and equal agents in the production of services designed to address their needs and research designed to reflect their experiences of those services. This collaborative style of working is based on the premise that no one party is more important than the other and that those who live the experience are experts within their situation.

An example of this in action is The House Project (HP) (Dixon & Ward, 2017), which involved one local authority using co-production to set up a supported housing project based on co-operative principles, run by and for care-experienced young people. The HP aimed to give young people greater involvement and choice in their transition and to improve housing stability, education, employment and well-being. Young people in care were involved in designing and running the project, in taking control of their aftercare accommodation by choosing and refurbishing the property and using their collective voice to promote the project to their own and other councils, something which carried significant weight:

'One of our young people in care spoke to [the chief executive officer] and told him...about moving to independence...he said how moved he was by that direct conversation...it was a demanding thing to do but actually that was a very powerful and important thing' (HP Professional, Dixon & Ward, 2017).

The HP co-production approach was mirrored in the evaluation methodology, which enabled young people to identify what a positive outcome would look like, suggest the means by which data was gathered, interpret key messages, contribute to dissemination of findings locally and internationally as well contribute data as participants. Young people met with the evaluation team 15 times over the course of one year. These sessions included team building days, focus groups, observations and one-to-one interviews. The range of visits allowed researchers to work closely with the HP young people to gain an understanding of how the project was set up and delivered, how the role of the young people within the project evolved and to hear young people's individual stories. In commenting on the experiences of the HP, young people reported increased feelings of confidence, decision making, empowerment and being taken seriously:

'You get to share your views and opinions, and the difference is it's listened to here' (HP YP1).

'I'm listened to a lot more by staff and our opinions matter they're not just chucked away' (HP YP2).

The NB care leaver programme, as outlined above, provides similar examples of how co-production approaches served to strengthen the voices of young people from care. The core aims of NB were to increase the extent to which young people's voice and experiences are used by councils to inform the development and delivery services for care leavers and to ensure that councils engaged their

strategic leads and wider corporate parenting community to improve the lives of care leavers. The formation of a national panel of care-experienced youth provided opportunities co-deliver the model, whilst area based care leaver groups impacted upon local service improvement at council and CP committee meetings, utilising the power of their own words to bring focus to the key issues and have their chance to be heard:

'We went to a corporate parenting panel and they sat and actually listened to what we think about the care system, not what everyone else thinks, but what we think…and I told them how it was, how it had been for me' (NB Young person, p 98).

The benefits of hearing directly from young people not only served to empower young people and raise awareness of the care population, but provided opportunities for young people and senior leaders to engage in direct conversation, which helped to challenge some negative stereotypes. One committee member reflected on the impact of hearing from young people:

'I only hear about the problems…didn't realise the majority were educated and articulate' (p 66).

<u>Other opportunities to have a say</u>

While we have focused on four key techniques that have developed to offer a wider menu of options for hearing from young people, it is important to acknowledge that there are other ways in which young people, particularly those who are care-experienced, can have their say become active change makers.

The existence of young people in care groups during the 1970s such as the Who Cares? Young People's Working Group provided first-hand accounts of issues facing those in and leaving care, some of which were documented by Page and Clark (1977). Their book served to promote the rights and needs of care-experienced youth and helped shape the development of care and leaving care services. Furthermore, it led to the founding of the Who Cares Trust and established a model for the formation of forums for care-experienced young people across local authorities such as National Association of Young people in Care, and the Catch22 Young People's Benchmarking Forum. The latter involves care leavers from over two-thirds of local authorities coming together to identify key issues that require focus and improvement. Examples of their work include the production of service-user guides and policy and legislation guides based on peer advice, presenting to the National leaving Care Managers forum (a group of over 90 leaving care managers) and awareness-raising with government via meetings with the Department for Education and the Children's Ministers.

Another innovative example of utilising the expertise and voices of care-experienced youth is the ongoing Lifelong Improvement for Looked After Children (LILAC) programme. Introduced in 2007, and delivered by a charity set up for and managed by care leavers, LILAC is itself an inspection process for assessing the participation and involvement of young people in and leaving care within a local authority or agency. LILAC assessors are care-experienced young people who gather information from a range of sources with which to assess the local authority against a set of key standards: The standards include: Shared Values, Style of Leadership, Structures, Staff, Recruitment and Selection, Care Planning and Review and Complaints and Advocacy. Following the assessment a report is developed for the LA or Agency including recommendations of areas to be improved.

The 'Involved by Right' project in England, Sweden and Italy worked across Europe to produce a set of guidance on involving young people in alternative care to ensure children and adolescents are part of the decisions that concern them. By including young people in participatory approaches including focus group participants and interviewees, young people were able to have their voices heard and produce guidance for policy makers (Involved by Right, 2013).

Opportunities and challenges for approaches to raising young people's voices

There are many opportunities and potential benefits that arise from participatory work with young people, which aim to empower them to have their say. It is important, however, to also be realistic about the challenges of such approaches.

Benefits and opportunities

The potential benefits of using the various participatory models are wide ranging and manifest not only in the outcomes of the research or service development process but also in the development of the skills, experience and circumstances of the young people who participate.

Having young people involved gives participants an opportunity to learn skills and gain valuable experiences that can be transferred into other aspects of their lives. Skills and other benefits derived from participatory approaches such as peer research, co-production and consultation include confidence and self-esteem, communication skills, advocacy and speaking out in support of and on behalf of their peers, agency and control of information about themselves and their peers (Kelly, et al. 2017; Kelly, et al. 2016).

In several of our studies we have planned and costed in training events and opportunities for young people to be included in all parts of the research process including dissemination. This has included resources to support them to attend and present at conferences and events locally, nationally and internationally, offering opportunities that the young people may not otherwise have had the chance to embark on.

Working in a co-produced ensures that service users and professionals work together as equals, building relationships and understanding from both sides. This allows young people to build on and develop their individual and group work skills, better preparing them for the future. Alongside empowering young people, this method allows staff to gain understanding of the impact that their services have on participants. Furthermore, advocates of peer research suggest that research materials and methods that are developed and delivered in consultation with members of the research subject group are more likely to garner a more open and honest opinion from interviewees, who perceive greater rapport and empathy facilitated through a shared understanding and common language (Kelly, et al. 2016).

Additionally, peer researchers are often regarded as experts by experience, (SOVA, 2005) which affords them recognition and respect and empowers them to provide positive role models to those being interviewed. Importantly, employing care leavers as peer researchers also provides them with actual work experience that brings with it opportunities to gain valuable training and wider life and social skills that can increase future employability (Dixon & Baker, 2016; Dowling, 2016).

Challenges

Despite the many benefits arising from participatory approaches that aim to raise the voices of young people in and leaving care, there are a number of common challenges faced by those implementing the approaches we have described. Realistic timescales, costs and flexibility are key areas to get right when working with young people in this way. Open and honest communication is also paramount to ensuring the success of the project. Many young people will have limited experience of research and will require tailored training and support to play the more active roles that would typically be seen in consultation or co-production. The field of co-production is still in its infancy and consensus around the key features of effective co-production has not been reached. There is a risk that such approaches can be tokenistic with limited ownership from both sides, leading to reduced potential for the project or service to have a meaningful impact.

It has been noted that further work needs to be done to ensure that participatory approaches are inclusive of all young people and not just those who are engaged or already motivated to participate in activities that draw on their experiences (Dixon & Baker, 2016; Kelly, et al. 2016). Engaging with so-called 'hard to reach' young people may require more innovative techniques. However, as we have discussed, there is a growing range of methods on offer to capture and amplify the voices of young people in and from care and this can provided opportunities to tailor the approach to meet the needs of different groups. In addition to the methods we have outlined, creative approaches such as the use of social media, poetry, song and photographic artwork are increasing be employed to provide a familiar platform for young people to communicate their views.

Examples of these include the Catch22 NCAS positive messages campaign, which aimed to challenge the negative stereotypes of young people in and leaving care by celebrating achievements and positive messages. The campaign involved care-experienced young people from local authorities across England taking part in a national balloon release during Care Leavers week 2012, where positive messages were attached to balloons or photographed and uploaded to a Flickr account (Flickr, 2012). A short film was made, in which young people echoed these messages (Fixers, 2013). The ongoing Springboard Foundation Project (2014), which aimed to improve outcomes for care leavers by offering accommodation and holistic support, provided opportunities for young people to have a say and raise awareness of care through music (Music4care Project Evaluation, 2015; How to Fly, 2015).

In a similar way, some local authorities participating in our research have reported the willingness to test out new methods to facilitate a more representative voice:

'We have been working hard to develop our engagement with young people so its representative of all voices. We have moved away from a traditional group meeting to reaching out to offer young people a range of engagement choices that suits them and their needs for example…Facebook, email, small topic focus groups''. (Dixon & Baker, 2016)

Recommendations and learning points

Our research and other key studies in the field have highlighted best practice around promoting and amplifying the voices of children and young people from care. Our paper has charted how participatory methods have developed to offer a wider range of options with varying degrees of 'active' participation. Here we attempt to draw out the 'what, how, who, when and where' and

share our experience of effective strategies that might be applied by researchers, practitioners and policy-makers alike.

What?

We have presented four different approaches to engaging young people either as participants in research or as consultants or active partners in both research and practice/policy development. Although these four methodologies have evolved over the years to reflect wider changes in the extent to which children and young people are viewed as active agents, they all remain valid ways of engaging with the voices of children and young people. They continue to operate alongside each other and the emerging creative approaches to provide a wider menu of options for giving young people their say. It is important that the methodology or approach adopted reflects the overall goals and purpose of the research or development work.

How?

Regardless of the technique or general approach (e.g. participation, consultation, peer research or co-production) it is important to have a clear protocol in place that provides an overview of how the work will be undertaken. This should include a step-by-step outline of the process or method, the supervision, training and support that will be offered to young people, expectations of young people, timescales, and clarity around how the voices of young people will be heard and acted upon. In the case of peer research, you might share the protocol with young people (Bowley & Verweijn-Slamnescu, 2012) whereas in the context of consultation you might work with young people to develop a terms of reference and ground rules document. Communication is also important, in our experience to have an effective reference group, young people need to be taken seriously and methods for clear and frequent communication established to seek agreement over key decisions – this not only empowers young people but gives them a sense of ownership of the project.

Who?

Typically participatory approaches are easier to implement where young people can be recruited from established groups such as Children in Care Councils. The advantage of this recruitment or selection strategy is that such groups contain young people who are motivated and confident in their ability to share their views and who have demonstrated some commitment to these efforts. These qualities are especially important for peer research techniques which will likely involve young people engaging in all aspects of the research process and receiving training and support (Bowley & Verweijn-Slamnescu, 2012). However, there is a risk that the most marginalised and disengaged young people are not represented. We must do more to enable all looked after children and young people to share their voice; we have highlighted the use of social media as one potentially fruitful technique.

When?

Timescales need to be realistic and generous enough to allow time for adequate preparation, training and support of young people and time for refresher training and supervision if applicable (Bowley & Verweijn-Slamnescu, 2012). Ideally we would engage in an ongoing conversation with young people that in the practice context might begin during the service design phase and continue through to evaluation and follow-up stages.

Where?

Space and location are factors that might influence young people's confidence and willingness to engage and share their voice. Consider selecting neutral ground such as rooms in community centres or other venues. It is important when selecting location to ensure the space is private enough to ensure confidentiality and has been risk assessed to ensure the comfort and safely of all parties to the discussions. There are additional potential benefits that may arise from carefully considering location, for example in the Step Change project we organised a residential trip for the young people in our advisory group. They visited the University of York for two days and whilst there received a tour of campus and attended a talk by the widening participation team, which offered an insight into university and student life.

Other considerations

Participatory approaches can be relatively expensive to implement. In order to maximise the benefits for all stakeholders (including researchers, practitioners, policy-makers and young people themselves), it is imperative that this type of work is costed accurately and funded appropriately.

It is also important that due consideration is given to ethics frameworks to ensure that opportunities to engage with young people are carried out with safeguarding in mind. Training and support for peer researchers, for example, should include strategies for conducting research interviews safely for both the researchers and the participants. This involves practicing strategies for safely ending interviews that might become upsetting or unsettling for either party. Having robust protocols for confidentiality and reporting and responding to disclosure is also essential to ensuring that young people's stories can be voiced can be heard safely and respectfully

Conclusion

The focus of our article has been on children and young people involved in the care system, however the learning and recommendations are relevant and transferable to those seeking to hear, and meaningfully engage with, the voices of other groups of children, young people and adults in a variety of contexts. We have described the opportunities and challenges of empowering young people to have a voice. However, it is important that we also listen to and act upon what is being voiced about the research we are conducting or the services we are delivering, in order to shape policy and practice that has the best chance of making a positive difference to their lives.

The final comment rests with the words of one young person who participated in a co-produced project (Dixon & Ward, 2018). In reflecting on their experience whilst presenting findings at an international conference on care, they encapsulate the powerful and wide ranging impact of having the opportunity to raise their voice:

'It has increased my confidence immensely. I have come to realise that my voice is just as valuable as my peers. It has made me realise that I create change now rather than waiting for someone else to do it. It has also made me feel connected to other cultures because no matter where another person is from I know that I'll always find something in common with them. It has generally enhanced my

debating, critical thinking, leadership and problem-solving abilities, which I will carry with me for the rest of my life'.

References

1. ANV (2011). CICC Mapping Project, 2010-2011 CiCCs across England. Retrieved December 5, 2017 from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/190631/cicc_mapping_project_november_2011.pdf

2. Biehal, N., Clayden, J., Stein, M., and Wade, J. (1995). *Moving on: Young people and leaving care scheme*. London: HMSO.

3. Blower, S., Dixon, J., Ellison, S. P., Ward, J., Thorley, K., & Gridley, N. (2017). *Step change: An evaluation*. London: Department for Education. Retrieved December 6, 2017 from https://www.gov.uk/government/publications/step-change-evaluation

4. Bowley, S., & Verweijn-Slamnescu, R. (2012). *Peer research: How to make a difference.* London: National Care Advisory Service.

5. Cashmore, J., & O'Brien, A. (2001). Facilitating participation of children and young people in care. *Children Australia*, 26(4), 10-15. DOI: 10.1017/S1035077200010427

6. Catch22 (2016). Lift Children's Home Project. Retrieved 19th July, 2017 from https://www.catch-22.org.uk/wp-content/uploads/2016/08/LIFT-Childrens-Homes-Project-Overview.pdf

7. Checkoway, B., & Richards-Schuster, K. (2003). Youth participation in community evaluation research. *American Journal of Evaluation*, 24(1), 21-33.

8. Daly, W. (2009). "Adding their flavour to the mix": Involving children and young people in care in research design. *Australian Social Work*, 62(4), 460-475. DOI: 10.1080/03124070903265732

9. Department for Education and Skills (2007). *Care matters*: *Time for change*. London: The Stationery Office.

10. Department of Health (1999). *Me survive out there? New arrangements for young people living in and leaving care.* London: Department of Health. Retrieved December 5, 2017 from http://www.nationalarchives.gov.uk/webarchive/, and http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4010312

11. Dixon, J., & Stein, M. (2005). *Leaving care, throughcare and aftercare in Scotland.* London: Jessica Kingsley.

12. Dixon, J., & Lee, J., with Stein, M., Guhirwa, H., Bowley, S., and Catch22 NCAS Peer Researchers (2015). *Corporate parenting for young people in care: Making the difference?* London: Catch22.

13. Dixon, J., & Baker, C. (2016). *New belongings: An evaluation*. London: Department for Education. Retrieved December 1, 2017 from https://www.gov.uk/government/publications/new-belongings-programme-evaluation, and http://www.thecareleaversfoundation.org/About_New_Belongings

14. Dixon, J., & Ward, J. (2017). *Making a house a home: The House Project Evaluation (Children's Social Care Innovation Programme).* London: Department for Education.

15. Dixon, J., and Ward, J. (2018). Expanding employment horizons for young people in care: An evaluation of York Cares' Bright Futures Project. Executive summary. Retrieved May 10, 2018, from https://www.york.ac.uk/spsw/research/cwrg/themes/

16. Dowling, S. (2016). *'Finally someone who doesn't judge me!' Evaluation of Peer Research Method for the YOLO Study: Transitions and outcomes for care leavers with mental health and/or intellectual disabilities.* Belfast: Queen's University Belfast.

17. Fixers (2013). Retrieved December 5, 2017 from http://www.fixers.org.uk/index.php?module_instance_id=11312&core_alternate_io_handler=view_fixer_news_video&data_ref_id=7637&news_data_ref_id=7953&video_no=1

18. Flickr (2012). Positive Messages Campaign. Retrieved December 5, 2017 from https://www.flickr.com/photos/nationalcareleaversweek/

19. Hojer, I., & Sjoblom, Y. (2010). Young people leaving care in Sweden. *Child and Family Social Work*, 15(1), 118-127.

20. How to Fly (2015). Retrieved May 5, 2018 from https://www.youtube.com/watch?time_continue=14&v=OLKpVjkk-vg

21. Involved by Right (2013). Effective participation of children and young people in alternative care settings - guidance for policy makers. The Royal Borough of Kensington and Chelsea. Retrieved April 2, 2018 from Involved by Right Effective Participation of Children and Young People in Alternate Care Settings - Guidance for Policy Makers.pdf

22. Jackson, S., Ajayi, S., and Quigley, M. (2003). *By degrees: The first year, from care to university.* London: The Frank Buttle Trust.

23. Kelly, B., Dixon, J., and Incarnato M. (2016). Peer research with young people leaving care: Reflections from research in England, Northern Ireland and Argentina. In P. Mendes, & P. Snow (Eds.), *Young people transitioning from out-of-home care: International research policy and practice* (pp. 221-240). London: Palgrave Macmillan.

24. Kelly, B., Gilligan, E., Friel, S., Smith, D., Pinkerton, J., and McShane, T. (2017). *"More than we expected": A guide to peer research with young people.* Belfast: Queens University Belfast.

25. Kilpatrick, R., McCartan, C., McAlister, S., & McKeown, P. (2007). 'If I am brutally honest, research has never appealed to me…' The problems and successes of a peer research project. *Educational Action Research,* 15(3), 351-369.

26. Lemn Sissay (2017). Origin stories. Retrieved December 5, 2017 from https://soundcloud.com/user-539732291/lsos-harry-potter-2753-new-sig

27. Lushey C., & Maskell-Graham, D. (2010). Care leavers and homelessness in England: Protective factors offered by Right2BCared4 and Staying Put 18+ Initiatives. *PARITY*, 23(5), 22-23.

28. Lushey, C., & Munro, E. R. (2014). Peer research methodology: An effective method for obtaining young people's perspectives on transitions from care to adulthood? *Qualitative Social Work*, 14(4), 522-537.

29. Munro, E. R., Lushey, C., National Care advisory Service (NCAS), Maskell-Graham, D., & Ward, H. with Holmes, L. (2012). *Evaluation of Staying Put: 18+ Family Placement Programme Pilot: final report*. London: Department for Education. Retrieved April 2, 2018 from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/197616/DFE-RR191a-PEER_RESEARCH_REPORT.pdf

30. Music4Care Project Evaluation (2015). Retrieved May 5, 2018 from https://www.youtube.com/watch?v=ziQjUZVaAio

31. Nind, M. (2011). 'Participatory data analysis: A step too far?' *Qualitative Research,* 11(4), 349-363.

32. Page, R., & Clark, G. (Eds.). (1977). *Who cares? Young people in care speak out.* National London: Children's Bureau.

33. Social Care Institute for Excellence (2012). Towards co-production: Taking participation to the next level, SCIE Report 53, London: Social Care Institute for Excellence (SCIE). Retrieved April 1, 2018 from https://www.scie.org.uk/publications/guides/guide51/what-is-coproduction/

34. SOVA (2005). *Women into Work Pilot Project Evaluation Report. Peer Mentoring Support and Resettlement Pilot*. Sheffield: Sheffield Hallam University.

35. Springboard Foundation Project (2015). Retrieved April 5, 2018 from http://www.foundationuk.org/team/springboard-foundation/

36. Stein, M., & Wade, J. (1997). *Helping care leavers: Problems and strategic responses.* London: Department of Health.

37. Stein, M. (2011). *Care less lives*. London: National Care Advisory Service.

38. Stein, M., & Carey, K. (1986). *Leaving care*. Oxford: Blackwell.

39. Wade, J., & Dixon, J. (2006). Making a home, finding a job: Investigating early housing and employment outcomes for young people leaving care. *Child and Family Social Work*, 11(3), 199-208. DOI: 10.1111/j.1365-2206.2006.00428.x

40. WMTD/Catch22 & National Children's Bureau (2007). *What makes the difference?* London: WMTD/Catch22 and NCB.

41. Who Cares? Trust (1993). *Not just a name: The views of young people in foster and residential Care*. London: National Consumer Council.