Revisiting Diary Entries from Care:  
An Exposition of the Challenges  
of Unregulated Placement Settings

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In September 2020, the Children’s Commissioner for England published a report entitled ‘Unregulated: Children in care living in semi-independent accommodation’, which concluded that some of the country’s most vulnerable looked after children were living in accommodation unfit for human habitation. This observation encapsulates my experience of residing in such a placement between 2009 and 2011. In this article, I refer to diary entries I made during this period, which are photographed and categorised into three areas — challenges I encountered at a micro, meso, and macro level. Following each section, I provide reflection, contextual information, and propose what may have ameliorated these issues. The photographed diary extracts are personal; they were never intended to be published. However, given that the future of England’s care system hangs in the balance in the context of the Independent Care Review, they are offered as insights into the impact of unregulated placements on the physical and mental wellbeing of children. The article proposes that such settings are unsuitable for children and young people who have not yet reached adulthood and should be abandoned in favour of nurturing homes which enable them not just to barely survive, but truly thrive.

**Keywords:** looked after children; care review; adolescent; mental health; unregulated placements; self-harm

Introduction

This article is being written against the backdrop of seismic current events in children’s social care in England, the first being the Independent Review of Children’s Social Care in England, launched in March 2021. The Review, promised in the 2019 Conservative general election manifesto, aims to ‘radically reform the system, improving the lives of England’s most vulnerable children so they experience the benefits of a stable, loving home’ (Department for Education 2021a).
Whilst the Review has been widely welcomed across the sector, concerns have been raised around the ‘manner in which the Review has been announced, its framing, and how preliminary stages have been conducted’ (BASW, 2021a). Such concerns are outlined in both a policy statement written by BASW England and a letter to the Secretary of State (BASW 2021b).

The second is the recent ban on unregulated placements for children under 16 (Department for Education 2021b). Whilst the move to prevent children aged 15 years and under from entering such placements is positive, it fails to extend the same protection to 16- and 17-year-olds in the care system. It was described as a ‘shameful policy announcement [which] entrenches a two-tier care system’ (Article 39, 2021), by denying children under 18 the right to the same level of care they could otherwise expect in foster care or regulated residential homes.

The use of unregulated placements in England is extensive; during 2018/19, 12,800 children – 1 in every 8 children in care – spent time in them (Longfield 2020); 73% of unregulated placements are privately run (ibid). Concerns have been raised that the ‘financial opportunity presented can attract entrants to the market that know little or nothing about the care of children’ (ibid), presenting clear risks to vulnerable children with complex needs.

Unlike children’s homes, which are legally required to be inspected by OFSTED, no such scrutiny exists for unregulated placements.

This is a topic which has been raised by the Children’s Commissioner for England, who stated the following in her 2020 report on unregulated placements:

‘What is common to all types of unregulated accommodation is that the vulnerable children placed there are not entitled to “care”, where children are closely supervised around the clock, but to “support”. “Support” might mean a check in with staff to discuss education or employment opportunities, and limited help with practical things including money management. This effectively means that children supposedly in care are being left to fend for themselves.’ (Longfield 2020, 2).

The report goes on to describe that the settings are:

‘Intended to act as a stepping-stone between care and independent, adult life, generally used for 16-year-olds and older. Many are housed in self-contained flats or in hostels or foyers, of varying quality and with varying levels of supervision by staff. But there are also cases of children being housed in barges, caravans and even tents’ (ibid, 5).

The reasons for their use are complex, however, the report says a combination of pressures on council budgets, an increase in teenagers entering care, and a lack of suitable placements has created a perfect storm (ibid). The increase in demand has not, however, equated to investment in such settings, which were described by the Children’s Commissioner as being ‘barely fit for human habitation’ (ibid, 26).
A recent paper on transitions to adulthood from care in 19th Century England shows how little has changed in over a century, and locates the use of unregulated accommodation today within a long tradition of inadequate support for care leavers; an issue that began to raise concerns as early as the 1850s, when evidence ‘began to emerge about the unsatisfactory life trajectories of pauper children who had been brought up and educated in the workhouse’ (Ward 2021). In this article, I discuss how and why unregulated placements continue to place children under 18 on these unsatisfactory life trajectories.

This article is informed by my own journey into care. I entered the system aged 16 after experiencing childhood domestic abuse. I initially ‘sofa-surfed’ and stayed with friends for 4-5 months, after which a local pastor, with whom I briefly stayed, referred me to a local unregulated placement. It was a hostel-type setting in a deprived seaside town, located close to an area known as the local sex-industry centre. The accommodation provided 28 bedsits for teenagers and young people of mixed genders aged between 16-25, where each consisted of a small room, micro-kitchen, and bathroom with a top-up electricity/gas meter.

The placement was run by a national charity. I do not know what fee was charged, but the lack of resources contributed to poor outcomes. The placement had several residential staff, and one social worker who met with residents every fortnight.

I write with the duality of lived and professional experience. I am a social worker who has worked in various local authority child protection settings (though I no longer have a frontline role). I accessed a 2-year master’s course after completing an undergraduate degree in a different subject. The journey to university in and of itself was fraught with difficulties often associated with the cliff-edge of care: a lack of financial and practical resources, an absence of a ‘safety net’ during the holidays, and lack of emotional support.

As a practitioner, I decompartmentalised the two identities of care leaver and social worker; they were difficult to integrate. I had once felt powerless but was keenly aware that I possessed some ‘power’ which felt alien to me. In addition, I did not disclose my care experience to colleagues for fear of the stigma I had experienced in other settings such as university.

Whilst preparing to write this article, I revisited diaries I kept between 2009-2011, when I lived in care between 16-18 years old, and in unregulated accommodation between 17-18.

Initially, I undertook this as a form of research to help me to remember my thoughts, feelings, and behaviours at the time. However, I soon realised that it made sense to refer directly to the entries in the spirit of capturing the voice of the child/young person.
Materials and Methods

Throughout the article, I adopt an auto-ethnographic approach, defined as ‘an autobiographical genre of writing that displays multiple layers of consciousness, connecting the personal to the cultural’ (Ellis and Bochner 2000). Through this approach, the researcher’s own experience becomes ‘a topic of investigation in its own right’ (ibid). I would describe my approach as ‘staggered auto-ethnography’, in that I reflect on my lived experience from two snapshots in time. The first ‘snapshot’ is taken from 2009-2011, where I wrote some of the central text to this article in the form of contemporary diary entries. The second ‘snapshot’ is taken at the time of writing in 2021, where I discuss the entries retrospectively.

As an approach, auto-ethnography is not without criticism. From an epistemological standpoint, many have questioned the validity in using personal narratives as primary source material (Wall 2008). Indeed, the entries represent my own subjective experiences in a specific timeframe and location. They do not represent the experiences of other care leavers then or now, although there is some evidence to suggest that mine were not unique (Longfield 2020). As an adolescent I was also impervious to much of the ‘behind the scenes’ running of the unregulated placement and cannot comment with full confidence about how it operated.

Others have argued that autoethnography risks ‘overreliance on the potential of a personal writing style to evoke direct emotional responses in readers’ (Duncan 2004). I would argue that whilst this potential exists, the entries simply reflect my lived experience. They were not intended to evoke this reaction — in fact, they were never intended to be published at all. I was merely recording events, and my perceptions of them, in which the emotional realm was an integral part which cannot be edited out for the sake of objectivity.

It is also important to note that memory is fallible. I cannot recall exactly how I experienced, felt, or processed events at the time.

There are certain ethical questions surrounding the approach. I was unable to obtain the consent of the child/young person I was at the time I wrote the entries. In truth, I imagine that I would have intensely disliked the idea of them being published. This poses an existential question — am I the same person I was just because my biological shell remains the same, as does my history and some of my memories? It is perhaps an unanswerable question.

However, I feel the consent I give at present overrides previous lack of consent. As does my motivation for publishing these entries, which stands to highlight the consequences of unregulated placements on children’s physical and mental wellbeing, within the context of the Independent Review of Children’s Social Care. I cannot time travel to gain consent from my younger self, though I am convinced that if she knew there was a small chance that releasing the entries would result in some good, or at least some increased awareness, she would — albeit reluctantly — agree.
In terms of the structure of this article, when discussing the challenges I faced in care, I refer directly to short photographed extracts from contemporary diary entries. I then provide context and reflections around my entries in accordance to Bronfenbrenner’s ecological systems theory (see below), and discuss what factors, if any, enabled me to overcome the challenges I refer to — or alternatively what could have helped.

Bronfenbrenner’s ecological systems theory maintains that as a child develops, their interaction with their environment, categorised into micro, meso and macro levels (see Figure 1) increases in complexity as their physical and cognitive structures mature (see Paquette and Ryan 2001). I use the theory to demonstrate the impact of the immediate and local environment on my time in care (the micro and meso), and how these were compounded by systemic issues at a policy level (the macro) which continue to have a significant impact on children in care on a national scale. The act of reflecting on, and writing about these diary entries represents my engagement with the chronosystem.

The theory describes the micro level as ‘the setting in which the individual lives...[including] a person’s family, peers, school and neighbourhood’ (Christensen 2016). I could apply this to numerous facets of my experience in care but, given the limitations, I have selected mental health and wellbeing. The meso level refers to ‘relations between microsystems or connections between contexts’ (ibid); I apply this by reflecting on the housing and social support I received which bridge several microsystems. The macro describes...
the broader socio-political climate and cultural contexts, including ‘socio-economic status, [and] poverty…cultural borders, laws and rules’ (ibid). I apply this by reflecting on gender inequality and regional inequality, given that the intersectionality of being an adolescent girl in a deprived town were so significant to my experience of care. The chronosystem, added by Bronfenbrenner in 1989, refers to the ‘development of the external systems in time’ (Bronfenbrenner 1989). I am actively engaging this level through writing this paper.

It is important to set out some disclaimers before continuing. Firstly, some readers may find the entries distressing. Secondly, as an adult, I feel somewhat self-conscious about them — I never expected them to be read and they are deeply personal. Thirdly, the handwriting is hard to decipher, so I have typed each extract below, being true to incorrect use of language and misspelling. I have redacted parts I wished not to share.

**Micro Level: Challenges**

The photographed diary entries below are an exposition of the micro-level challenges I encountered in an unregulated placement; the key themes are deteriorating mental health, suicidal ideation, trauma, and self-harming behaviours, which relate directly to inter-personal interactions (or a lack of them).

**Context and Initial Reflection**

It has been several years since I revisited these diaries, and I was taken back by the depth of anguish they contained; that the first page of the diary (Figure 2) is witness to suicidal thoughts sets the scene for the following entries.
Shortly after I discuss the complexity of my emotions (Figure 3) and the impact this had on my physical health and day to day functioning (Figure 4). The avenue through which I felt I could express such intense emotions is also represented (Figure 5).

I was struck by the progression, over time, from exploring my mental health from a philosophical standpoint as in Figure 4 to an almost clinical one (Figures 6 and 7). It is as though I transferred from the ‘why’ to the ‘what’, having given up on the former. In Figures 6 and 7, I listed my symptoms as though attempting to document them. It appears I was trying to create sense and order out of mental health which was often unpredictable.

For context, I was diagnosed with depression in October 2009 (Figure 8), and, for the following 18 months, was given increased doses of citalopram (an anti-depressant medication) by my GP. Locating my experiences within those of care leavers more generally, my own mental health struggles were not unique; indeed, ‘many suffer with poor physical and mental health, and are at even greater risk of suicide’ (Barnardos 2021).

Given the lack of supervision in the placement, I did not take the medication regularly. I also engaged with a mental health nurse who undertook low-level Cognitive Behavioural Therapy (CBT); however, I recall I did not find this, or the medication, effective. My mental health notably improved when I left this environment and started university in 2011, although I found the transition challenging. After leaving the placement I did not receive support from children’s social care, though I was eligible for a one-off grant from the national charity who ran the placement, which was gratefully received. Whilst this ‘cliff edge of care’ is often discussed, perhaps what is less talked about is the subsequent task of what I would call the ‘scaling the cliff’ — the arduous task of rebuilding a life from below ground level.

Much has been written about the transition support (or lack of) for care leavers. Research into the area shows many young care leavers have a ‘short and severe journey to adulthood’ (Stein and Morris 2010) on account of coping with major changes in rapid succession — and without vital support. These ‘accelerated and compressed transitions ... deny care leavers the psychological opportunity’ (ibid) of processing them over time, unlike most young people. My own experience, then, is but a snapshot of a much wider pattern.
In this section I will reflect on the micro challenges I faced (and what, if anything, helped counter them to bring me to my current vantage point a decade on) through the lens of Bronfenbrenner’s chronosystem. I adopt the same approach — surveying the issues through the passage of time — for both the meso and macro sections to follow.

It would be disingenuous to state I have transcended the mental health difficulties I described in these passages, or to propose a ‘solution’. After all,
mental health is not a binary state, rather, it ‘exists on a continuum. It can change — move up and down the continuum’ (New Zealand Defence Force 2015). In the decade since I left care, I have been at both ends, having experienced bereavement and other personal issues, but also periods of joy, discovery, and self-development.

As noted in these entries, at the time of writing, I was self-harming, which some children do, as I did, to ‘feel more in control...[and]...to try to cope with very upsetting experiences’ (Royal College of Psychiatrists 2020).

Eventually, creative activities became a substitute for self-harm. Through them I could imitate the same sense of control and process difficult emotions. Specifically, my late nana worked three jobs to pay for dance & music lessons from the time I was small. Whilst in care, these provided me with a creative platform through which I could channel pain which I could not voice. I was able to express myself in an embodied form where I felt seen, and unlike in the unregulated placement, my existence was truly acknowledged. Through these creative outlets, I was able to develop a sense of identity, which, for children, ‘gives rise to positive self-regard, acceptance of self and an increased sense of meaning and purpose’ (Pierre 2018).

I would argue, however, that living in unregulated placement was a causal factor for poor mental health and a nurturing setting could have prevented much of this distress.

**Meso Level: Challenges**

The photographed diary entries embedded below are an exposition of the meso-level challenges I encountered in an unregulated placement; the key themes here include housing, poverty, lack of safety, and lack of support.

**Context and Initial Reflection**

The link between housing and mental health is well established. Those with housing issues are ‘at greater risk of mental health problems’ (Mental Health Foundation 2021), and ‘good-quality, affordable and safe housing is a vital component in good mental health’ (ibid).

In Figures 9 and 10, I outlined some of the housing issues I experienced. I refer to the placement as a ‘hostel’ — this is how local people referred to it, and though it carried a deal of stigma, it was fitting, because it did not feel like a home.

Firstly, a home should be somewhere with at least some degree of a feeling of longevity. This was not the case, however. In fortnightly meetings with my social worker, much of the time was taken up in registering for/refreshing
applications for local council housing. As such, I was keenly aware of the transient nature of the setting.

Secondly, a home is a place where basic needs must be met as a standard, yet in this placement they were not; food, heating and electricity were all lacking. The flat itself was clinical-looking, with white walls and iron bars across the windows. It had none of the basics which would be expected upon arrival such as bedding, utensils, and so on, nor did I have access to funds for the first 6 weeks due to delays in benefits, so I relied on free meals at college and ate on my shifts where I worked at a fast food restaurant. During this time I recall rummaging through birthday cards in the futile hope of finding a forgotten ten-pound note. In addition, I used to write essays for sixth form under a candle when there was no money for electricity, which had an impact on my ability to engage with education even when the willingness was there. The above issues would not have arisen in a regulated setting.

**Chronosystem — Then and Now**

The factors which helped me to overcome the pressures of my physical environment were respite and relationships. One family allowed me to stay with them when I needed a break, or quiet environment to study. Observing their family dynamics also allowed me insight as to what healthy relationships
looked like, which helped me to develop better communication skills and boundaries.

Consistent relationships were crucial during this time, to counter the ‘silence’ (Figure 9) and ‘loneliness’ (Figure 10) of the flat. My nana and friends provided this within my inner circle, and a support worker at Sixth Form filled this role professionally. This support worker understood the importance of having a ‘both and’ approach when it came to wellbeing; not only did she have an open-door policy, meeting my emotional needs, but she ensured my practical needs were met. Her ingenuity was in making sure the little things were taken care of (such as a bus pass, school meals, and train tickets so I could visit universities), which gave me scope to deal with more pressing matters.

The residential social worker at the placement was helpful — she listened without judgement and validated my experiences and signposted me to other support services, though I would not describe this as nurturing wrap-around care given our meetings were so sporadic. Occasionally, she made comments which made me keenly aware of the temporary nature of my stay, and I sensed that she was under pressure to free up spaces in the placement.

On reflection, no amount of personal or professional support could have accounted for being placed in an unregulated setting, which failed to meet my needs, and continues to fail those of children on many levels.

There was a global lack of support, as seen in Figure 10, where I wrote ‘if I needed help, I could shout no one’. And, aside from a lack of available emotional support, the practical-financial support was lacking. Despite having a part time job at a fast-food restaurant and receiving income support, if an unforeseen expense came up or there was a delay in receiving benefits, I was left in poverty.

Figures 11 and 12 highlight the extent to which I tried to engage with education in extremely challenging circumstances, juggling studying for exams and balancing a part time jobs, to escape such poverty.

Furthermore, the ‘limited support’ mentioned by Longfield is something I can attest to; despite the best efforts of support staff, my self-harm behaviours were not monitored, to the extent to which I was hospitalised on two occasions in 18 months. One of these resulted in a 4-night stay. Perhaps this could have been avoided with more consistent support in a foster care or regulated residential setting. My own experience is not unique; self-harming
can often go under the radar, as highlighted by Longfield’s report which found ‘young people with issues... [such as]... self-harm... were receiving next to no support from the staff who were meant to be helping them’ (Longfield 2020, 2).

**Macro Level: Challenges**

The photographed diary entries embedded below are an exposition of the macro-level challenges I encountered in an unregulated placement; key themes include systemic sexism, regional inequality, physical safety, and sexual assault.

**Context and Initial Reflection**

Issues surrounding gender discrimination and regional inequality are connected and have a cumulative impact; they are well documented and there is not scope to discuss them here. Patriarchal oppression is ubiquitous and exists at ‘the personal level through individual biases and prejudices against women; the institutional level through policies and bureaucratic procedures that valorise men’s contributions; and culturally in socially embedded everyday norms and assumptions that devalue women’s work’ (Dominelli 2019).

Regarding regional inequality, scholars note ‘systemic bias against fully addressing the needs of deprived neighbourhoods in service planning and resource allocation’ (Hastings 2009). This has been corroborated in research into trends in children’s services expenditure during austerity in England between 2010 and 2015, where the most deprived Local Authorities saw the
largest decreases in £-per-head...relative to their expenditure in 2010-11 (Webb and Bywaters 2018).

To locate my care experience in terms of regional and gender inequality, my unregulated placement was in a deprived coastal town. It ranks in the bottom 10 local authorities for educational attainment, teenage conception rates, NEET status and disability-free life expectancy, ranking lowest overall (Plan International 2020). These factors are interconnected, ‘each one tipping women and girls further into poverty...[as] Lack of education leads to lack of opportunity, leads to lack of income, leads to reduced health and life-expectancy, and so forth (Pierre, cited in Watters 2021). These issues are amplified by the lack of supervision available in unregulated settings.

The placement was in a deprived area of a seaside town, near the local area known for its sex-industry. As a result of my gender — and arguably location, I faced threats to my safety, as can be seen in Figure 10, where I wrote that at the entrance of the placement, there was an ‘angry mob’ who would often be found ‘leering’. The placement was intimidating and hostile before even crossing the threshold.

On one occasion, about 50 yards away from the placement, I was sexually assaulted by a group of adult men, who photographed the incident. This happened on a summer day in a tourist hot-spot, and no one intervened. The psychological impact of this was significant and contributed to my lack of self-esteem and desire to self-harm. Whilst sexism and negative gendered experiences are ubiquitous, the location of the hostel in the centre of the sex-tourism hotspot of the town likely increased both their frequency and intensity. Had the state placed me in a more nurturing setting such as a foster home in a less deprived location, I might have been shielded from these experiences.

Outside the placement I was at risk of sexual assault, but inside I was also exposed to an environment in which sexual activity was actively encouraged even when 25-year-old men lived with 17-year-old girls. At the reception of the building there was a box of condoms on the counter; whilst this was positive in preventing STD’s and teenage pregnancy, residents saw these whenever they entered or left the building. Not only did this fail to create a nurturing environment, but it contributed to feelings of embarrassment whenever there were guests. In a foster placement, contraception could have been discussed and made available in a more discreet and caring way. In addition, there was never any education around consent or healthy relationships to accompany the readily available contraception.

**Chronosystem — Then and Now**

From my current vantage point ten years later, women and girls continue to face widespread abuse on account of their gender. A 2021 UN report found
that 97% of young women in the UK have experienced sexual harassment — a staggering figure.

It is therefore not possible to discuss which factors helped me to overcome the challenges of gender discrimination at a macro level. However, certain actions may have limited their impact.

Being placed in a more appropriate setting is the first. Looking back, through my social worker lens, that adolescent girls were placed in mixed gender settings for 16-25 year olds raises safeguarding risks about both criminal and child sexual exploitation (CSE) risks. The research is unequivocal; Longfield’s report found that children living in unregulated accommodation were six times more likely to have CSE flagged up as an issue by social workers, and five times more likely to have gangs identified (Longfield 2020).

On reflection, there were clear signs that several girls in the placement were victims of CSE. Others were in frequent contact with police services and had older influencing figures coercing them into selling drugs and stealing goods. On the day I first moved in, a teenage boy introduced himself by saying ‘If you need any green [cannabis], you know where I am’. That drugs were readily available from the first day poses risks which may have been avoided in a more nurturing regulated placement.

Secondly, I would advocate for the professionals who worked in the setting to have had gender-bias training. This would have better equipped staff to acknowledge internalised misogyny, identify and report sexual harassment, and work to increase social mobility so that girls could achieve financial security and independence.

Thirdly, at a policy level, investment into social care, health, infrastructure, and education in areas of regional poverty could have helped. Plan International recommends that the Government ‘invest in safe spaces for girls, better equip and inform teachers and modernise resources to meet the specific needs of girls… especially given that gendered subjects are holding them back from pursuing a range of careers’ (Plan International 2020). Existing in a society which discourages girls from reaching their full potential in this way led to internalised lack of self-worth as I describe above (Figure 13).

Finally, I propose that social workers should also be upskilled to identify digital safeguarding threats increasingly faced by girls, including online

Figure 13. Diary entry from care—August 2011. ‘I often feel useless solely due to the fact that I am a woman. This makes me so angry & frustrated, and makes me want to set up hope for young women showing them what they can do with their potential, & encouraging them to do it.’. Photographed 31 January 2021 at 13:15.
grooming and CSE. Whilst both boys and girls can and do experience these, girls between 11 and 13 are found to have the highest number of self-generated indecent images produced by children online (Martellozzo and Bradbury 2021).

For girls living in areas of regional deprivation (particularly those in unregulated placements who lack both access to finances and support), poverty heightens susceptibility to websites such as Only Fans, a growing ‘subscription-based social media platform where users can sell and/or purchase original content from softcore or X rated’ (ibid). Those living in unregulated accommodation face bureaucratic delays in benefits, or punitive policies such as universal credit caps, and as such Only Fans may appear the only means of survival. Furthermore, according to Childline counsellor notes, ‘underage creators include victims of prior sexual abuse and those with mental health and suicidal thoughts’ (Titherage and Croxford 2021), which children in care may be more likely to experience on account of their circumstances.

**Conclusion**

The use of unregulated placement settings for looked after children under 18 represents a gross failure in the government’s execution of its duty to provide them with care. My own lived experience of such settings, as demonstrated above through contemporary diary extracts, evidences the unique disadvantages which can be experienced by young people who reside in them. At a meso level, a lack of inter-personal interaction can lead to sustained periods of isolation, poor mental health, suicidal ideation, trauma and self-harm. At the meso level, the immediate and local environment of such settings can cause young people to experience inadequate housing, poverty, and a lack of consistent support from staff. At the macro level, the impact of pre-existing social inequalities (such as those related to gender or region) are exacerbated, and can lead to increased risk of poor social mobility, criminal and child sexual exploitation.

As it stands, 16-and-17-year olds exist in a lottery system whereby those placed in regulated settings are able to access the support they are entitled to under domestic law, international human rights legislation and social work codes of ethics, whilst those in unregulated placements are not.

I maintain that the issues discussed in this paper are not historic or confined to my own experience. Whilst two-tiers exist, 16-17-year-olds in unregulated placements will continue to be deprived of the nurture and stability to be expected in regulated settings with significant consequences on their long-term emotional, physical and socio-economic wellbeing. This poses two questions: firstly, why is the state failing in its responsibility to properly safeguard all children and young people? And secondly, with two-tier systems which privilege some children over others, does every child still matter?
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