

**Engaging 'hard to reach' young people in
adolescent teams: challenges and limitations
deconstructed.**

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Abstract

This research examines the relational dynamics influencing engagement with young people identified as 'hard to reach' within a local authority youth offending service in East London. Using a critical realist epistemology grounded in a decolonial ontology and a systemic perspective, the study explores how young individuals are characterised and positioned at both the organisational ('macro') and individual ('micro') levels.

Using an intra-paradigm methodology, the research integrated ethnographic observations (adolescent team meetings and alternative education provision lunch breaks) with semi-structured interviews (two practitioners and two young people). A thematic discourse analysis, informed by Foucault and Quijano, investigated power dynamics, positioning, and constructions of 'hard to reach' youth.

The analysis identified six interconnected themes: three micro-level themes (language and positioning, relational authenticity, and emotional well-being) and three macro-level themes (structural influences, organisational power, and contemporary service needs). The findings question the existing 'hard to reach' narrative, suggesting that services may present challenges in accommodating young people's needs within existing organisational structures. The research concludes with recommendations for services and practitioners to adopt more critical, culturally sensitive, and trauma-informed practices that prioritise relational authenticity and address systemic inequalities.

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Nasif Nijabat

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1 CHAPTER 1: STUDY OVERVIEW

1.1 Introduction

This study aims to explore and understand how young people, described by professionals as harder to reach, are talked about in a youth offending service - adolescent team. I want to explore and understand what contributes towards engaging young people described as harder to reach (HTR) and how they respond and experience these ways of being talked about. I am particularly interested in the societal discourses influencing the power dynamics between young people and services.

Interest in this area initially arose from my experiences during adolescence as a Global Majority male and being described as hard to reach/engage by the adults around me. This was partly due to the negative role models and subsequent life choices that I made. In addition to my personal experiences, my curiosity surrounding young people labelled as HTR is also embedded within a career that has spanned over twenty years from grassroots as a support worker. My curiosity was piqued during my work as a systemic psychotherapist who worked as part of a multi-disciplinary team within social care youth offending service from a child and adolescent mental health services (CAMHS) perspective. The young people within my work were described as vulnerable, at risk of being or have been groomed and exploited and hard to reach.

I became curious about the role of services when deciding who the HTR were and the power dynamics within this. Did the young people know they were described as such – if so, what did they think about it? I wondered about wider society and its role in young people being described this way – if any.

I also wondered what fostered ‘good’ engagement between health, social care and education with young people. What were the strengths, limitations, or barriers within these processes? Did age, race or rapport matter? Or did wider contextual issues effect the relational processes of engagement too? These questions have been a catalyst that has led to the fruition of this study being carried out.

My research uses a qualitative, insider researcher, intra-paradigm methodology to address how services ‘talk about’ HTR young people. This approach combines two qualitative approaches, ethnography and semi-structured interviews, to elicit and provide a richer and more detailed understanding of a complex social phenomenon (Anguera et al., 2018; O’Reilly et al., 2020; Morse, 2009).

A Foucault and Quijano-informed, thematic discourse analysis has been used to analyse the discourses and power dynamics within the construct of HTR young people open to the adolescent team.

This introduction consists of several sections that will provide the landscape for this study. These are:

- Situating the harder to reach
- Social care context
- Adolescent team
- Current models of practice
- Why this area of study is essential
- Insider researcher and my context
- Philosophical underpinnings
- Portrayal of young people in the UK
- Power as a concept

- Research question

1.2 Situating the harder to reach

Broaching the subject of HTR young people within children's social care, youth offending services – adolescent team will be no mean feat as it is broad and far-reaching.

Defining the harder to reach

The origins of the term HTR can be found within social marketing, aiming to affect change in consumer behaviour via marketing tools and techniques adopted from the private sector (Beder, 1980; Walsh, et al. 1993; Brakertz, 2007).

The term was then adopted by health and medical researchers, where HTR was equated to services' ability to reach difficult-to-contact sections of society (Faugier & Sargeant 1997; Freimuth & Mettger 1990; Brakertz, 2007; Walsh et al. 1993).

However, there is no singular definition of HTR, a lack of clarity about what it means, and an inconsistency in the way the term is used (Jones and Newburn, 2001).

Brakertz (2007) explains that the term is used to describe minority groups such as Global Majority (ethnic minorities), homeless or LGBTQ+ people, older people or people with disabilities. It is also used to refer to hidden populations of society who do not want to be contacted. Such as, gang members or people who use illegal substances.

From a health, social care and education services perspective, it is often used to describe those who are service resistant, slip through the net and/or are from the Global Majority or are socio-economically disadvantaged (Jones & Newburn 2001).

Freimuth and Mettger (1990) explain that the term is problematic due to its stigmatising nature and implies homogeneity within separate groups, which does not automatically exist.

Thus, the term HTR is open to interpretation and broad in that it can mean different things for different people within different organisational contexts.

1.3 Social care context

Multiagency work is a common feature within health and social care services with the intent of becoming more integrative and collaborative, placing children, young people, and families at the heart of the work.

A relational, systemic model of practice approach is fast becoming the preferred model for service delivery within children's social care across the UK (Isokuortti et al. 2020; Isokuortti and Aaltio, 2021; Lobatto, 2021).

A systemic model of practice approach is informed by the reclaiming social work model, which emerged during 2017–2019 and was guided by the Munro Report (2011), basing its theory and approach on core systemic principles which were applied at all organisational levels of children's social care (Goodman and Trowler, 2012; Laid, et al. 2017).

The adolescent team sits within the youth offending service (YOS) in children's social care in the UK, in an East London Borough, working with young people aged 10-17 and their families. It was created due to the Department for Education (2018) new way of Working Together to Safeguard Children guidance, which included attention to adolescents who are “*vulnerable to abuse or exploitation from outside their families*” (p.7).

It is a specialist, multi-agency service that supports young people at risk of exploitation or have been exploited via a grooming process. Exploitation includes but is not limited to missing children, child sexual exploitation, religious radicalisation, county line, modern slavery, trafficking, gangs, and criminality.

In all instances, interventions are outreach, home-based and in the community, and the team consist of experienced practitioners who specialise in risk and contextual safeguarding (Firmin, 2017). Contextual safeguarding refers to the extra-familial harm posed to young people. It is the preferred model for statutory safeguarding teams nationwide.

In most cases, the young people are open to YOS and have mandated court orders, including participation with the adolescent team, highlighting tensions in power dynamics surrounding engagement and autonomy. The adolescent team is seen as a specialist service within the wider organisation. It has a reduced caseload compared to other teams, focusing on engaging and building relationships with the young people.

The adolescent team's dilemma is engaging young people who do not want service involvement. Interventions are underpinned by criminal justice court orders - such as needing to have therapy rather than young people wanting therapeutic support. Resulting in a push from service leaders for practitioners to engage with vulnerable young people who are described as harder to reach in more creative ways.

1.4 Adolescent team

Presenting issues within the adolescent team's caseload are primarily behavioural, conduct disorder, youth justice involvement and risk of school exclusion. In all cases, the young people are vulnerable to being (or have been) groomed and exploited.

The young people are described by service practitioners and professionals as a being *child in need* or children at risk of *significant harm* under UK law (section 17 and 47 of The Children Act, 1989) and also hard to reach/engage.

In most cases, the risk of harm to young people is assessed as being outside the family home rather than due to parental/guardian neglect. Social workers are faced with the dilemma of explaining to parents/guardians why they had chosen to categorise their children/young people under *emotional neglect* when the risk was outside of the family home. This highlights the complexity and gap in the child protection and safeguarding process when there are extra-familial presentations, also known as contextual safeguarding (Firmin, 2017) concerns.

The borough in which the adolescent team sits, has high levels of deprivation, low educational attainment, crime, and poor parental attachment. Punctuating the low resilience to exploitation amongst young people in the borough. For instance, it has the 11th highest level in England and the 4th highest level in London for income deprivation affecting children. 15% of dependent children live in workless households compared to an 11% London average. It also has the highest proportion of 0-19-year-olds in the UK, equating to 33% of the borough's total population, and 62% of them are Global Majority, compared with 51% of the borough's population.

These statistics are reflected in the adolescent team's current caseload, as highlighted in the figures below:

Total young people open to the Adolescent Team: 45

Adolescent team caseload by gender

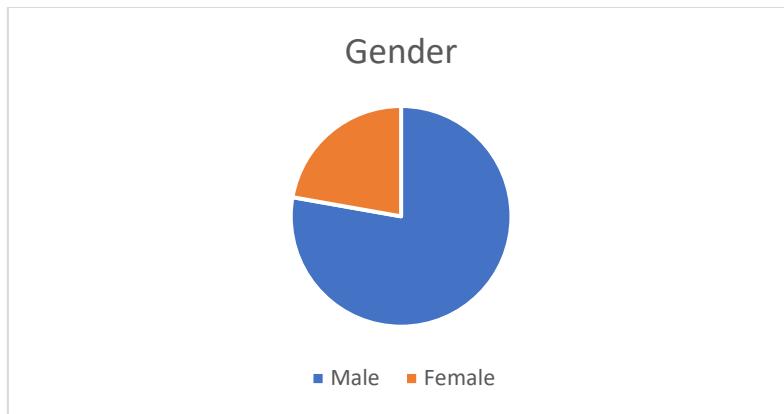


Fig 1: 35 males, 10 females

Adolescent team caseload age

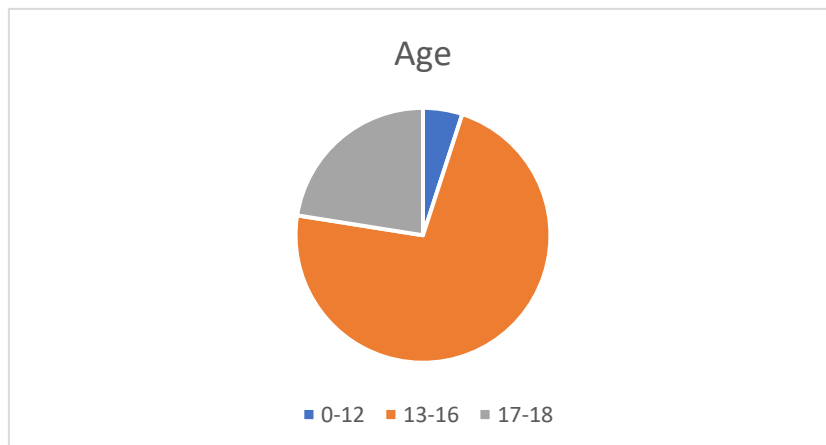


Fig 2: Ages: 0-12 x 2. 13 – 16 x 29. 17 -18 x 9

Adolescent team caseload by ethnicity

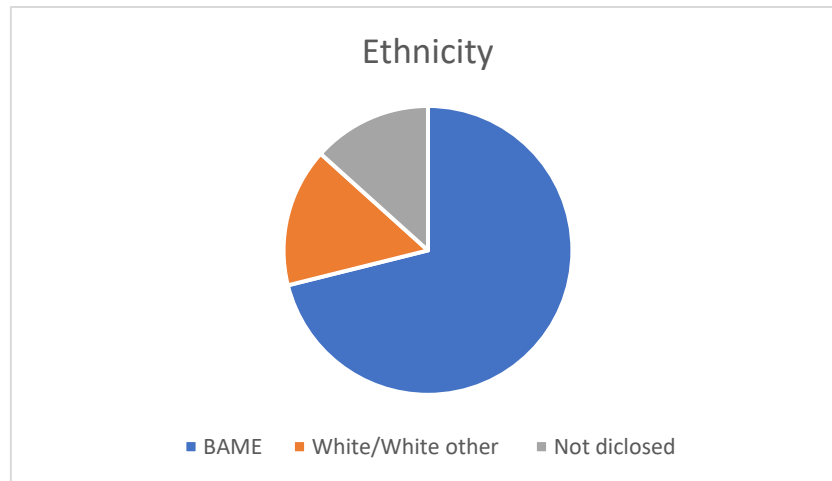


Fig 3: BAME x 27, White/White other x 8, Not disclosed x 10.

The overrepresentation of Global Majority young males open to the adolescent team is apparent. The main issues are youth justice involvement and being excluded or on the verge of school, resulting in interventions predominantly being provided to the parent/guardians instead of the young people due to non-engagement.

Practitioners in the team are encouraged by senior management to be more creative in their approaches towards engagement, resulting in a reduced caseload in comparison to the rest of children's social care and more time given for focused and intensive work.

It is apparent that young Global Majority males within the adolescent team are the harder to reach. Smith (2012) posits that the term harder to reach, in the context of health, social care, and education, is stigmatising and homogenising and locates the problem in clients rather than within service delivery. This is something which will be explored further in this research study.

1.5 Current models of practice

This study focuses on the contributing factors to engaging young people described by services as harder to reach within a local authority, youth offending service - adolescent team.

However, the HTR population goes beyond the remit of this study. It is a subject that also covers the spheres of health, social care and education. Therefore, an overview of individuals and groups assigned with the label within these contexts will be provided.

As highlighted the HTR tend to be those from underrepresented groups, invisible to services or underrepresented - resulting in their needs not being considered or heard. It is an issue that is widely acknowledged, for instance, the National Institute of Health and Care Research (NIHR) who are one of the major funders of health and care research in the UK, surveyed in 2019 highlighting:

The majority of public contributors to NIHR research were White British (77% - UK-87.2%), female (58%; UK-50.6%), older people (62% 50–79- UK-34.8%), and ethnic minorities (Global Majority) and young people were significantly under-represented. Only 2% of public contributors surveyed in 2018–2019 were under 25 (UK – 18.9); 14% were aged 26–49. The survey also concluded that those from lower socio-economic and the Global Majority felt less valued in their contributions towards research and co-production of services than their White and higher socio-economic counterparts (NIHR, 2019).

This punctuates that the HTR are predominantly from the Global Majority and/or socio-economically disadvantaged backgrounds and that a vast gap exists between

young people's views being communicated within health and care research in the UK.

Within the context of children and young people's education, mental health, and social care in the UK, studies and practices have tried to address the gap between harder to reach young people and services. For Example:

Education

Shaw et al. (2017) carried out a systematic literature review of HTR students and methods of engagement for the higher education for funding council in England to exemplify the broad and abstract nature of the term.

Their aim was to understand better what it meant when people talked about HTR students, clarify how the label was being used, and identify good practices for engaging people described as such.

The authors concluded that, in many cases, the term was used as a stand-in for widening participation groups or other protected characteristics. The term had most commonly been used when discussing students from low socio-economic classes, as well as the Global Majority. Furthermore, they had found that the lack of clarity was not simply down to the range of uses of the term. As it was the third most frequent occurrence of the term in the literature, with no definition of who the term was referring to. Shaw et al. (2017) argued that the term had the potential to be stigmatising and that those that used the label fell prey to a range of complex power relationships and responsibilities – which was a cause for concern as it is used with little justification or rationale. The authors recommend that the term is used with greater clarity and that people defined as HTR should be based upon evidence.

Shaw et al (2017) used the list below to categorise students who may be identified as 'hard to reach', using both attitudinal labels and demographics. The list is not exhaustive

Black and Minority Ethnic
Low Socio-Economic Class
Young +
Disabled
Undereducated
Low Motivation
Emotionally Detached
Cultural Minorities
Offenders
Vulnerable or Marginalised Population
Distance Learners
Mature Students
Gays and Lesbians
Single Parents
Commuting Students
Technologically Advanced Students

fig.4 Descriptors of 'hard to reach' Shaw et al (2017).

Health – child and adolescent mental health service (CAMHS)

Camilleri and colleagues (2017) carried out a study aimed at engaging young people described as HTR by children's health services

The aim of the study was to describe the social and mental disorders of young people from a newly set up walk in health centre within an inner city in the UK and compare with a matched sample who attended a community mental health team.

The authors describe HTR young people as being at risk, disadvantaged, marginalised and sometimes homeless with mental health presentations of multiple and complex needs, having a poor prognosis, being at the highest risks to self or harm to others, yet are not picked up by the healthcare system or are offered services that are ill-equipped to meet their needs (Camilleri et al., 2017).

The authors concluded that the term describes a state that may be often temporary, as opposed to lifelong. Camilleri et al, (2017) posit that a bespoke service offering a developmental theoretical framework with regular reviews and an individualised care plan would be able to engage young people described as HTR to reduce comorbidity within a health service context. The idea that the label is not static, gives flexibility to the individual that the term is ascribed to. Yet, it remains a term given by services that highlights the complex power relationships as punctuated by Shaw et al. (2017).

An example of a model in practice within an NHS CAMHS setting that came before Camilleri et al. (2017) was Conway and Clatworthy (2015) Grow2Grow model which is underpinned by developmental psychodynamic psychology as a means to engaging HTR young people who present with complex mental health needs.

The Grow2Grow model, based on an organic farm and education centre in Kent, England and made of a multi-disciplinary team, addressed engaging adolescents through combined mental health and vocational support outside the clinic setting.

The model's authors highlight the barriers to young people accessing services, such as lack of confidence in service providers, stigma, CAMHS waiting list times, and young people not liking clinical environments. They further explain that approximately 50% of clients prematurely drop out of talking therapies delivered within mainstream CAMHS (Conway and Clatworthy, 2015).

Results from the research analysing the efficacy of their model, highlighted high rates of young people's satisfaction and successful completion of mental health interventions, education or employment outcomes.

The studies discussed highlight the importance of determining who services see as HTR and the need for professionals to adopt more creative and dynamic approaches toward what is considered as engagement from a service delivery perspective

Social care - YOS – adolescent team

In the context of this study, the presenting issues for the young people within the adolescent teams' caseload is primarily behavioural, conduct disorder, youth justice involvement and risk of school exclusion - in all cases, the young people are vulnerable, groomed and exploited (which is assessed by health and social care practitioners prior). In most cases, negative structural influences, socio-economic issues, poverty, class, race/ism and child protection concerns are present.

To situate the young people into the broader professional landscape within YOS, the National Clinical Guidance for Conduct Disorders in young people Recognition,

intervention, and Management (NICE, 2013) recommend the following treatments/interventions:

1. Parenting skills (psychosocial education).
2. Improving family functioning (Multi-Systemic Therapy. MST. Functional Family Therapy. FFT, and Multimodal therapies).
3. Anger management and child interpersonal skills (cognitive behavioural therapy CBT).
4. Overcoming difficulties at school (in the form of one-to-one and specialised support concerning special learning needs).
5. Ameliorating peer group influences – extra familiar group work (this is punctuated as an area of concern as few interventions have aimed to address this)
6. Medication (where there is comorbid hyperactivity in addition to ASB and conduct)

USA studies have shown that MST and FFT reduced Anti-Social Behaviour (ASB) and recidivism in young people. However, findings were ambiguous outside of the USA, fuelling an incentive for the promotion and efficacy of systemic interventions in the U.K.

MST is an intensive family and home-based intervention for families with young people aged 12-17 who present with severe ASB. Therapy is over a 4–6-month period, with the therapist on call 24 hours a day, seven days a week, intending to do 'whatever it takes' to improve the presenting issue (www.mstuk.org).

MST is influenced by the social-ecological approach of Bronfenbrenner (1994) and utilises techniques drawn from strategic, structural family therapies and behavioural

and cognitive-behavioural therapy (Henggler and Borduin, 1995). Therapy is caregiver-focused as they are seen as the drivers for change in achieving sustainable outcomes. MST is highly structured, and an MST expert supervises therapists, ensuring the model and outcomes are continually reviewed and followed (Henggler et al., 1998).

FFT overlaps with MST and is more consistent with 'conventional' Milan group therapy (Palazzoli et al., 1980). The functionality of FFT is suggested in its home-based and flexible approach for behavioural issues that are less severe than MST referrals.

The two models integrate behavioural and systemic approaches while remaining informed by intrapsychic perspectives (Breuk et al., 2006; Sexton and Alexander, 2003). FFT focuses on improving family communication while decreasing dysfunctional behavioural patterns. In comparison, MST focuses on young people being embedded in several interrelated systems.

Within the context of YOS across the UK, resources have been primarily focussed on the planning and delivery related to the risk of 'future' offending and that 'cognition and lifestyle' issues appeared to reduce re-offending rather than early intervention or therapeutic approaches. A review by the Ministry of Justice looking at YOS interventions concluded that an individualised approach at a local level was adopted rather than a standardised intervention model nationally (Wilson, 2013). An updated review of YOS has not been carried out since the writing of this thesis.

1.6 Why this is essential.

The harder to reach as a societal issue and a concept is broad and far-reaching, going beyond the adolescent team and applying it to health, social care, and education settings.

The exploration of young people deemed as HTR by services requires further unpacking as it is a label given to young people rather than how they describe themselves. Moreover, it may provide insight and understanding into the factors contributing to the engagement process with vulnerable young people who present with complex needs.

The relevance of future systemic research in this area, I suggest, will provide a richer understanding of a highly relevant social issue and, in turn, may address organisational issues by highlighting the power dynamics between practitioners and young people.

1.7 Insider researcher and my context

Braun and Clark (2013) explain that a researcher is considered an 'insider' when they share a particular attribute with the participants of a study. Whereas a researcher is considered an 'outsider' when he or she does not belong to the group to which the participants belong (Bukamal, 2022).

Upon seeing me, one would immediately assign me as an insider when researching HTR young people within the UK's social care youth justice service – adolescent team. This would be due to me visually being from the Global Majority, but a minority within the UK, as a British Pakistani man, and also being described as HTR in my adolescence.

Being a second-generation to migrant parents, who were trying to navigate the cultural and racial tension between East and West in my adolescence. Such as, parental/family expectations of being a good Muslim, Pakistani boy, versus not being seduced by Western customs, such as alcohol, or overly socialising and placing my own needs over my family's was a source of contention within my formative years. Impacting directly on my emerging identity as an adolescent growing up in the UK which resulted in toxic masculine behaviours such as school expulsion, a gravitation towards criminality and being labelled as harder to reach by the adults around me.

I work for the NHS in a middle management role as the service and clinical lead and systemic psychotherapist and social worker for the mental health support teams within the borough in which this study was carried out.

I have over twenty years of experience working from a grassroots level in the children's health and social care system with marginalised young people and families who present with complex needs and high risk. During my career, I have gained a reputation for mediating high conflict situations and engaging clients labelled as HTR by services. This arguably has been due to my lived experiences and my relationship to conflict, risk and being brought up in an area that is socio-economically deprived and similar to the one in this study. For example, in different organisational contexts, I would be asked to speak with an unhappy client or do a home visit/outreach work in an area notorious for gangs and criminality. This then fuelled my curiosity surrounding the power dynamics, relational-based approaches, what facilitated 'good' engagement, and whether my similarities to the young people fostered a way 'in' with them.

These experiences place me in a unique position as an insider researcher to study a complex social and organisational phenomenon. As I will be privy to certain aspects of knowledge, access to people and information that an outsider researcher may not have. This, in turn may further enhance knowledge and understanding surrounding HTR young people and the engagement process from a service perspective.

Furthermore, it is argued that insider research honours the process of practice to be explored rather than the outcome (Bonner and Tolhurst, 2002), which fits well with my interest, as a systemic psychotherapy is also concerned with process (over content) with the view to understanding a presenting issue or problem.

However, Bonner and Tolhurst (2002) caution insider researchers as they may fall prey to their subjectivity, explaining that one could advocate for what they are studying rather than taking an objective, non-biased position. Or that a reliance on certain participants within the study with whom the researcher feels comfortable with and possibly focusing on the dramatic events rather than the routine.

I suggest that the position of psychotherapist insider researcher, along with my personal historical experience provides an exclusive opportunity to gain understanding of the engagement process with young people open to the adolescent team who are described as HTR, which otherwise would be difficult to access and to analyse.

1.8 Philosophical underpinning

Onto-epistemology

Both ontology and epistemology enquire about existence and knowledge. Ontology is concerned with what is real or true. Epistemology refers to what can be known and how you can know about it (Willig, 2013).

Saunders et al. (2009) explain that both provide the foundations of a research inquiry and range from a positive perspective (scientific, deductive, statistical quantitative approaches) to interpretive positions (observational, inductive, qualitative approaches).

A philosophical underpinning in research is important because it provides a framework to support understanding and explain how knowledge can be obtained. Furthermore, it defines how research is carried out, decisions are made, and data analysis methods are used.

Systemic theory as a worldview

Key concepts within systemic theory are the belief that individuals exist in a system or network that is interconnected and relational (von Bertalanffy, 1950); and context (Bateson, 1972) gives meaning to any given situation, with a focus on process over content, whilst appreciating differing perspectives, realities and truths.

A systemic approach applies to families, organisations, and society. Ultimately, attending to complexity rather than taking a reductionist stance towards presenting issues or dilemmas. A systemic perspective is interested in how the interconnected 'parts' within a system contribute towards the overall functioning of that system. Therefore, systemic thinking can be positioned as a way of looking at the world, supporting this research study in making sense of a complex social phenomenon.

As this study is interested in the contributing relational factors for engaging harder to reach young people within the adolescent team, taking a systemic approach towards understanding this would mean attending to the relationship between the young people, practitioners and how societal discourses impact and influence the organisational positioning of young people described as harder to reach.

Furthermore, a systemic lens will invite me to consider both the macro and micro themes and issues – therefore, zooming in and out will be required. Thus, a systemic lens as an umbrella worldview or philosophy will guide this study.

In true systemic fashion, an attendance to differences to provide a richer and more holistic understanding will be adopted. I will use multiple philosophies/methods/theories as suggested by Patton (1999) for a more comprehensive approach.

Social constructionism (SC)

SC is widely known for being the more preferred epistemology within talking therapies. It assumes that reality is socially constructed rather than an objective truth that can be described and discovered (Harper and Spellman, 2006). SC gives systemic psychotherapy more flexibility in creating client options, enabling a multiplicity of truths, realities, and social worlds to be co-constructed relationally.

However, SC has been labelled anti-essentialist, meaning it does not search for fixed, discoverable psychological principles. Psychology has predominately adopted a positivist paradigm, recognising only that which can be verified via scientific rigour and that knowledge is obtained objectively.

Nevertheless, a SC epistemology fits this study well as it respects complexity and difference. Furthermore, this research study is not searching for a reductionist, essentialist, universal or singular objective truth. Rather, it focuses on the numerous subjectivities and how these are made possible through the sociocultural contexts and participants' talk (Taylor and Ussher, 2001; Timberlake, 2015).

Critical realism

Critical realism (CR) represents a mixture of perspectives that contrasts with those connected to traditional interpretivist and positivist stances. It is an ontology theorised by Bhaskar (1975), who argues what is considered 'real' cannot exist or be observed separately from human constructions, theories, and perceptions. As we understand it, the world is constructed through what is observable and based on our subjective experience. Thus, unobservable structures cause observable events – and social phenomena can only be understood if we understand the structures that generate the events.

In other words, critical realism believes the world exists separately to our perceptions, but our social contexts and experiences shape our understanding of it. It proposes that reality has a deeper, underlying structure that we cannot always directly observe through science and research.

Burr (2003) and Timberlake (2015) explain that taking a macro (organisational and societal) perspective within social constructionism is generally associated with CR. This level of analysis places discourse (talk) within an institutional context and is related to power, with a focus on the available discourses within a culture (UK, East London, urban community) and how they construct subjects (people) and objects (things – organisations) of which they speak (harder to reach, young people), (Willig, 2008; Timberlake, 2015).

CR ranks reality into three spheres:

- **Real:** consists of hidden social structures (underlying processes) that enable or constrain people's actions within a social setting that trigger processes which can affect other structures (causal mechanisms). For example,

organisational policy and procedures that informs employee's practice/behaviour.

- **Actual:** consists of people performing (or refraining) actions that lead to events (or non-events) which are governed by the underlying (real) social structures. It is the social system that governs the actions available to a person and it is the person's actions that maintain, create and change structures.
- **Empirical:** represents actual events-effects that are observed or experienced.

(Haigh et al. 2019).

For example, what contributes to engaging HTR young people may be observable empirically by asking service practitioners and young people about their perspectives. The 'actual' sphere consists of what happens when components such as education, access to resources, and health and social care interventions are factored in when practitioners work with young people positioned as HTR. These events/effects can only be understood and explained in connection to the real sphere, where unseen causal powers associated with entities such as capitalism, racial inequality, gender, or class are triggered.

Critical realism posits that we can try to make sense of reality or the world 'out there' by looking at the structures, causes and patterns that exist whilst recognising that our perspective of the world is influenced by things like, history, culture and personal prejudice and bias.

A critical realist framework can help explain the outcomes and events in their natural settings and places an emphasis on structures of rationality, power and values that enable or constrain people's actions.

Social constructionism or critical realism?

The choice between onto-epistemologies will be determined by several factors, including the nature of my study, the research question, my research goals, the methods I intend to use, and how I view nature and reality.

Social constructionism and critical realism meet the abovementioned factors and would be well suited to this study. However, social constructionism is considered an epistemology, focusing on how knowledge is created via social interactions and cultural contexts. In contrast, critical realism combines ontology and epistemology and is considered a meta-theory. It focuses on discovering the hidden causes and structures behind what we observe.

The key difference between social constructionism and critical realism is that the former assumes that all knowledge is linked to social constructions, whereas the latter assumes that there is a real world that is independent of human and scientific theories, and it can represent the deep structures of the world (Alveson et al. 2009).

Social construction is helpful as it facilitates understanding ideas and new concepts by sharing perspectives. However, critical realism is argued to be compatible with moderate versions of social constructionism and is more suited to research that wants to uncover and challenge mechanisms that lead to human oppression (Taylor et al 2021). In this sense, critical realism fits better (than social constructionism) with my personal values and in exploring the contributing factors to engaging HTR young people.

Although, social constructionism and critical realism appear to be similar and compatible (for this study), Harper (2011) explains that critical realism and social constructionism can be contradictory. As constructions from a critical realist

viewpoint are positioned as connected to the material world. Thus, reality offers limitations and constraints on what can be said and how (Willig, 1999; Timberlake, 2015).

Thus, I will be adopting a critical realist epistemological approach towards this study as it will support me to understand both surface level facts and the deeper causes behind them. That is, looking beyond what is immediately visibly when researching HTR young people within the adolescent team. Such as symptoms or outcomes and to explore and investigate the underlying forces that shape those outcomes.

Decolonial perspective

Systemic psychotherapy connects well with critical realism, as it is interested in the underlying process of the phenomena under inquiry.

However, these concepts are from the global West, which are positioned as examples to follow and applicable to all, regardless of their context. As systemic thinking privileges difference it seems appropriate that a decolonial lens be adopted throughout this study, so that these differences can be honoured, and the taken-for-granted approaches used can be critically reflected upon.

Too often, and for many, colonisation is understood as a thing of the past and is associated with patriotism, located in conquests that no longer occur. However, colonialism's long-lasting effects are seen and felt in our present times.

Decolonial theory is geographically located in Latin America and attributed to Anibal Quijano (2000), who coined the concept of colonality of power (colonial matrix of power – CMP), which refers to the logic, metaphysics, ontology, and matrix of power created by the massive processes and aftermath of colonisation and settler-colonialism.

Decoloniality does not reject modern medical, social, scientific, and ethical advances. Rather, decoloniality is a way to investigate colonisation, settler-colonialism, racial capitalism, and modernity and how they have displaced an array of approaches of being, living in our natural world. Decoloniality reveals the dark side of modernity and how it is built on the backs of others, that modernity racializes, erases, and objectifies (Mignolo, 2010). It relates to social history, political institutions, economic inequality, revolution, violence, and political identity.

Therefore, the ideas of modernity and coloniality are seen as inseparable, as a DP seeks to draw attention to the relationship between colonialism and the narrative of modernity through which much of the world's history has come to be understood. Decolonisation is about the psychological, cultural, and economic liberation of oppressed groups of Global Majority people within privileged, White, patriarchal systems, structures, and processes.

The implications of a Western way of knowing and doing as the guiding beacon for professional practice, research and learning must then be scrutinised. As the assumption that 'one size fits' all may promote complacency, intellectual arrogance and perpetuate a colonising mentality.

Furthermore, a 700-year colonial legacy of institutional structures, systems and processes governed by law and policy (Meghji, 2020) and the influence and impact this has on how we work with harder to reach young people in the UK should be unpacked.

Although a decolonial ontology and critical realist epistemology come from different schools of thought they are considered compatible philosophies as both perspectives recognise the depth and complexity of reality. A decolonial ontology critiques the

reductionism of colonial knowledge systems promoting multiple, non-Western ways of knowing and doing. Critical realism focuses on uncovering the underlying mechanisms of reality and is open to the idea that knowledge can emerge from a diverse range of positions and perspectives. Thus, aligning with a decolonial critique that traditional epistemologies have been shaped by power dynamics and can exclude marginalised ways of knowing.

Put simply, both approaches complement each other for this study as the aim is to understand complex and multilayered realities relating to groups that are marginalised.

Thus, the chosen onto-epistemology guiding this research study is a critical realist epistemology within decolonial ontological frame.

Self-reflexivity

The relationship between the subject (self/I) and the object (other/thou) and how one makes sense of it is at the core of knowledge production in research and practice. Popoveniuc (2014) asserts that self-reflexivity is the ontological basis of all existence and is linked to the Hegelian philosophy of absolute idealism, with self-reflexivity becoming the paradigm for the method, process and outcome and necessary path for the evolution in the understanding of the world around us.

Self-reflexivity has been a key component in the genesis of systemic thinking and has developed significantly from first-order cybernetics to our current time. For example, Bateson's (1972) feedback, Palazzoli et al. (1980) circular questioning, Rober's (1999) inner conversations, Burnham's (1992) relational reflexivity and Krause's (2012) culture and the reflexive subject.

For instance, my curiosity surrounding the engagement process of adolescents deemed as HTR is undoubtedly influenced and positioned by my personal experiences of being described as harder to reach in my formative years. The interventions I choose in a clinical setting may say more about me than the client, such as focusing on issues of gender, culture or power rather than class or ability as a line of inquiry.

Hence, self-reflexivity and one's position in research or practice are important, with the invitation to scrutinise our prejudices, biases, or assumptions in attempts to mitigate oppressive and discriminatory practices, especially when working with vulnerable clients. 'Positioning' is a dynamic (rather than static) process with '*the assignment of fluid parts*' or '*roles*' (Harré and van Langenhove, 1998. p.17) to speakers in the discursive construction. Individuals can both position themselves and be positioned by others (Harré and van Langenhove, 1998).

I intend to authentically honour participants in this study by being systemically and critically self-reflexive. However, I am aware of running the risk of falling into the trap of my research becoming autobiographical or solipsistic and losing sight of my research aims (Butz and Besio, 2009). Furthermore, reflection is a cognitive activity that occurs after the event and is in retrospect; therefore, being entirely self-reflexive is limited to the complexity of what is being observed and subject to my gaze. Taking up a self-reflexive stance is paradoxical in itself, as without it, we negate any critique of our attitudes, positions and biases regardless of the context.

Reflexivity as interpretation facilitates and reveals a deeper understanding of 'beneath the surface' power constructions, privilege, and bias via rigorous critical analysis (Pillow, 2015). Conversely, Crapanzano (1992) and Krause (2012) caution

against positioning our interpretations as universal and that our subjective experiences, ideas, and attitudes are culturally constructed.

However, the importance of self-reflexivity and the positions we take are continually promoted within the systemic field, and we are invited to take a meta-view of our inner dialogue in relation to the other, which is in constant motion, which I describe as an internal tussle or struggle. That is, the negotiation, navigation and attendance to ethical dilemmas that may arise in research and practice.

Guillemin and Gillam (2004) attend to this internal tussle by inviting researchers to navigate the micro-ethics within their inquiries. However, this can also be extended to practice as it is a discursive tool that articulates and validates ethical dilemmas that researchers may face from moment to moment, punctuating the importance of self-reflexivity at every stage of the research journey.

Thus, a systemic, self-reflexive stance will be adopted throughout this study. This means, incorporating a decolonial perspective and my personal cultural values. For instance, the role of honour, translated as Izzat in Punjabi (the spoken language of my family), and Khidmat, translated 'to serve', is a collective belief and moral obligation taught from childhood. The notion that happiness and contentment are found in one's expression and potential to serve others is a fundamental religious and cultural duty. These values will underpin this thesis and guide my approach with the participants who are placed at the heart of this of study.

1.9 Portrayal of young people in the UK

To begin to understand the discourses surrounding HTR young people and the contributing factors to engagement within the adolescent team, we must also

consider how young people are generally seen by wider UK society, as it has implications for service delivery.

Adolescence is seen and accepted by society as a period of transition where young people experience physical, behavioural, cognitive, emotional, and social change.

The general consensus, within academic fields of biology, sociology, developmental and behavioural studies and psychology, describe young people as:

- Sexually curious
- Pushing boundaries
- Unable to assess and manage risk
- Lacking effective impulse control and decision-making
- Having a dependency on adults to guide and instruct
- Being confused about their identities concerning their social contexts

Risk-taking appears to be a core part of the developmental makeup of adolescence, which is seen as a negative aspect within the portrayal of young people within society (Gullone et al. 2000; Spruijt-Metz, 1999; Kloep et al., 2009).

Research evidencing the negative societal portrayal of young people in the UK is vast (deMause, 1976; Hendrick, 1997; Heywood, 2001; Davis and Edwards, 2004; Aldridge and Cross, 2008). Critcher (2002) explains that these portrayals serve a purpose, to influence UK policy and public agenda. For example, the government and media's promotion of the Respect Initiative (Home Office, 2006) influenced the implementation of the Anti-social Behavioural Orders (ASBO).

Jenks (1994) suggests the social construct of young people has changed through different epochs. For instance, newspapers in the 1870s described young people as hoodlums. In the 1970s, Punks, 1980s football hooligans, 1990s to our present time Chavs, ASBOs, Yobs, Hoodies and Postcode gangs (Feast, 2011).

Young people have arguably been the casualty of a duality within UK societal discourse that simultaneously positions them as ignorant, dependent, vulnerable, generally incompetent, risk takers and needing protection (Hendrick, 1992). This is reinforced by UK child protection law and legislation such as The Children Act (1989) or the Working Together to Safeguard Children (2015).

Adolescence is a challenging time for all. Attempting to navigate themes of identity, relationships, acceptance or belonging and trying to make sense of wider societal discourses surrounding gender, sexuality, or class is complex enough as it is. Incorporating issues of abuse, trauma, and unhealthy transgenerational scripts/patterns of behaviours can facilitate spaces for vulnerability and susceptibility for grooming and exploitation to occur – like the young people within this study and who are open to the adolescent team.

From a systemic theoretical perspective, adolescence is a nodal point in the Family Life Cycle (Carter and McGoldrick, 1988) and is a term used to describe this developmental course. As individuals develop, families as a system also grow and change over time.

The theory supports practitioners in making sense of how families manage change at specific points during a family's life journey. Embracement of this change (specifically by the parental/guardian system) is flexible, ridged, or a bit of both.

Subsequently, determining the output concerning feedback of information via behaviour and communication on how the family manages this change.

However, the family life cycle alongside psycho-social and developmental theories on adolescence and young people are a narrow and normative Eurocentric colonial set of ideas and part of the Western capitalist landscape which arguably restricts thinking. Canella and Viruru (2005) take this view further, by asserting the concept of childhood (and adolescence) was a development of the Enlightenment period, and scholars of that time were '*...profoundly intrigued by the belief in their superiority*' (p.89) which arguably is the case as White Western patriarchy is privileged within society. The writers argue that the theories from the Enlightenment period created a discourse considered more advanced than those outside the global West.

Cannella and Viruru (2012) further explain, '*If an objective and enlightened study could be conducted with children, then the origin of man could be revealed*' (p.90). Thus, children were seen as the evolutionary baseline for revealing human truths. As a result, child studies and later developmental psychology were created as avenues for observation, surveillance, judgment, and measurement that would reveal human progress.

Therefore, it could be argued that progress has placed younger human beings at lower hierarchal levels than those labelled as adults. This reinforces enlightenment/modernist beliefs of Western patriarchal superiority, constructions of truth, and universalism.

As we can see, the construct, positioning and general view of young people is problematic, multifaceted and has a predominantly negative portrayal in the UK and the West. This may be exacerbated further by the over-representation of clients that

are open to services from the Global Majority (Macpherson, 1999; Lammy, 2017; Bywaters, 2020) which is punctuated by the number of young people open to the adolescent team – namely, Global Majority males.

Having an awareness and taking a critical lens towards the portrayal of young people within mainstream society has implications for this research inquiry. As it brings into question the services, policies and practices that are delivered to young people whereby contexts for injustice and legitimisation of control over those labelled as harder to reach may be created.

1.10 Power as a concept

Power as a concept has been a vital element of human survival, and its signs and manifestations are felt in every aspect of social life, from interpersonal relations economic transactions to spiritual and political disagreements (Bealey, 1999).

In politics and social sciences, power is the social production of a result that determines individuals' beliefs, actions, conduct, and capacities (Barnett and Duvall, 2005). Power does not only refer to the use of force/coercion or threat but is also exerted through different means, such as institutions.

Power can take structural forms in relational systems, placing individuals into a hierarchy. For instance, between the householder and their relatives, a parent and their children, an employer and their employees, a health and social care practitioner and their clients, a master and an enslaved person, or a political representative and their voters.

Foucault

Foucault (1972) is useful for attempting to understand power and discourse. He suggests that discourse is a set of statements that formulate objects and subjects attributed to a specific period, culture or community. Van Dijk (1998) scaffolds upon this by proposing social domains of discourse, such as political, medical, and so on.

Such domains draw upon several (discursive) genres; for example, '*political discourse*' is constituted by political speeches, 'press conferences', 'government legislation' and so on (Richardson, 2007. p. 238) young people would therefore fall under the discourse genre of adolescence where they are seen as children in the eyes of UK law (under 18), requiring guidance and upskilling so they can contribute positively to society.

Foucault (1980) proposes that those in power create dominant discourse, which becomes the accepted way of viewing a subject since it is repeated so much. He asserted that modern society is a disciplinary society - power in our time is largely exercised through disciplinary means via institutions –referred to as *Bio-power*. Such as prisons, schools/universities, governments, the army, and health and social care services.

Thus, dominant discourse relates to political, economic, and social positions society accepts as truths given by those in powerful roles. Such as economists, politicians, religious heads, medical professionals etc. (Burr, 1995).

Institutional power exists when authority has been socially approved and accepted as legitimate. In other words, institutions get their power from society agreeing that they have a right to authority over others. How these institutions use their power depends on the type of society.

Foucault did not consider human nature naive and argued that if people understood that they were being controlled, they would not stand for it. He saw power as a crucial aspect of the task of power, as it *“is tolerable only on condition that it mask a substantial part of itself”* (Foucault, 1975. p. 86).

Quijano

An alternative perspective to Foucault's ideas on power and society is Quijano's (2000) Colonial Matrix of Power (CMP). CMP is the invisible power structure established from the legacy of colonialism in the modern world system. CMP characterises the political, geographical and onto-epistemological extension of Western control through four interconnected domains: authority, gender/sexuality, economy and knowledge and functions through big businesses, academic institutions, governments (including local authorities) of the world and other entities.

CMP functions by establishing systems of racialised hierarchies, including systems of culture and knowledge centred on Europe. It involves a rejection of knowledge production to colonised societies and peoples and a denial of Indigenous, pre-colonial or non-European systems of knowing, being and doing. Coloniality permeates all levels of society and subjectivity in the modern world system, including gender, identity and sexuality.

The logic of CMP applies to the practitioners within health, education and social care, who work with Global Majority young people and their families as the legacy of colonialism influences all aspects of service delivery. The idea is that 'we' are saving clients from the turmoil of their non-conformity and inviting them (via subtle coercion) into a more preferred, acceptable way of being that aligns with the UK status quo. I

suggest that this way of working with young people described as HTR and from the Global Majority should be scrutinised in order to promote better outcomes.

As such, this research study will employ Foucault and Quijano's theories on power and society in an attempt to facilitate a more balanced perceptive.

Admittedly, attempts in trying to strike a balance by using multiple perspective will be a challenge. However, systemic thinking invites us to consider multiple perspectives as a way to understand the overall functioning of a presenting issue, as well as all things being interconnected. These core principles underpin and provide the rationale for using multiple perspectives/theories within this research study.

1.11 Research question.

This research inquiry specifically aims to explore and analyse:

‘What factors contribute to the relational processes for engaging ‘hard to reach’ young people in adolescent services?’

It is my intention to identify those ‘factors’ which contribute (or hinder), the ‘relational’ process for ‘engaging’ HTR young people via a thematic discourse analysis informed by Foucault and Quijano's ideas on power and society.

Discourse is defined as going beyond verbal and written communication between people and looks at the overall meanings conveyed by language in context. Context refers to the social, cultural, historical and political backgrounds of the discourse.

The rationale for conducting a thematic discourse analysis is that it supports in understanding the underlying meanings and power dynamics within a discourse, which can provide insight into how power is distributed and plays out in real life.

Therefore, it is best suited in addressing my research question and may provide a foundation for future research

2 CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

This chapter will provide a literature review. A discussion on the purpose and relevance of a literature review will be given. This will then be followed by a wider engagement with literature relating to HTR young people within the fields of education, health social care. I will then provide a justification for narrowing my review to the systemic field, which will then be followed by the method for conducting this literature review and the literature specific to this study.

I will analyse and critique concepts across differing professional fields whilst connecting them to my overarching research question. I will then outline the literature on engaging HTR young people within the systemic psychotherapy field.

2.2 Why a literature review?

A literature review involves formulating a research question, followed by a literature search, guided by the limits set based on the research aims and questions.

However, it goes beyond just being a descriptive report or a library of results. The task is to build an argument which involves being selective on a particular topic to make a new and/or important contribution to knowledge (Randolph, 2009; Rudestam and Newton, 1992; Aveyard, 2010; Bell and Waters, 2018; Siddaway et al. 2019).

Baumeister (2013) suggests that the best literature reviews evaluate, comment on, extend or develop theory whilst bringing together, critiquing, and synthesising one or more works of literature to provide an overall impression of a research question whilst highlighting gaps between what we know and what we need to know.

2.3 Adapted research question

I anticipated that this research inquiry would change me professionally and personally. At the time of writing this chapter, the data analysis had been completed, it was in-depth, time-consuming and immersive, challenging my worldview more than I had envisaged. For example, how I think about systemic psychotherapy, interventions and community work and the interplay between power, politics, and wider societal discourses.

I did not predict that my research question would change because of the immersive nature of this study.

I started with:

What factors contribute to the relational processes for engaging ‘hard to reach’ young people in adolescent services?’

During the study and analytic process, the newly emerged question surfaced.

What factors should be considered when engaging ‘harder to reach’ young people relationally in adolescent services?’

The question of what ‘should be considered’ rather than ‘what factors contribute’ felt more pertinent and congruent with the participants' ethnographic and interview process.

The ‘contributing factors’ were something that I had been interested in since my professional journey began – which was positioned by my personal experience.

However, the emerging question of ‘what should be considered’ is a direct result of the immersive nature of this study. Although the new question is a minor change, it is more refined and places the participant voices at the heart of the study.

2.4 An overview of the literature relating to hard to reach young people

I intend to gain a more comprehensive understanding and deeper insight into a complex UK societal discourse within health, social care and education services relating to HTR young people.

Therefore, research and literature on health, education and social care will be explored to demonstrate the broad nature of groups and individuals being described as harder to reach by services.

The term HTR poses significant issues; it carries stigmatisation, lacks clarity, and often refers to individuals from low socio-economic backgrounds and/or the Global Majority (Shaw et al. 2017). Therefore, when engaging with marginalised communities in health, social care, and education, it is vital to have an awareness and understanding of their socio-political, religious and cultural contexts. This understanding is essential for fostering inclusive practices and empowering marginalised groups who services have labelled as HTR.

Systemic psychotherapy has a rich history of engaging with individuals from marginalised communities and tackling social injustices within its theory to enhance practice. The shift from first- to second-order thinking in the late 1970s and early 1980s (Anderson and Goolishian, 1988; Hoffman, 1985) significantly influenced theoretical progress, emphasising the importance of cultural contexts in shaping social relationships. This period brought heightened awareness to the therapist's identity, social inequalities, and power dynamics in therapeutic settings, particularly in relation to race, culture, and social class (Krause, 1995; Waldegrave & Tamasese, 1993; White & Epston, 1990; Young and Mooney, 2024).

From Minuchin's (1974) work with marginalised families to contributions from Hare-Mustin (1978), Goldner (1985), White and Epston (1990), Hardy and Laszloffy (1995), McGoldrick (1999), and Krause (2010), there has been a focus on placing social justice and intercultural dialogue at the centre of systemic psychotherapy.

However, cultural competence in systemic psychotherapy has received criticism for its tendency to depict the Global Majority and marginalised groups as a monolithic entity. In turn, simplifying inequality to mere 'difference' which fails to cultivate a critical understanding of the structural systems that sustains discrimination (Kourgiantakis & Bogo, 2017; Young and Mooney, 2024).

To highlight the importance of cross-cultural work within systemic practice, Young and Mooney (2024) conducted a qualitative study that looked into therapists' perspectives on culturally sensitive systemic psychotherapy in Northern Ireland. The authors uncovered challenges tied to a 'culture of silence' and the persistent influence of Whiteness in a primarily White society. Participants expressed a guardedness about discussing cultural and ethnic identities due to fears stemming from Northern Ireland's sectarian history and the lack of racial diversity, resulting in a limited cross-cultural therapy experience among therapists, which reinforced a White dominant perspective.

Young and Mooney's (2024) findings punctuate the importance for systemic practitioners to be aware of local socio-political contexts when working cross culturally. They also recommend the incorporation of anti-racist and social justice training within systemic courses to facilitate anti-oppressive practices when working with marginalised people

As we can see, cross-cultural practice and sensitivity are not only limited to marginalised groups from the Global Majority but also intersects with those from disadvantaged socio-economic and political contexts. Therefore, being labelled as HTR is complex and multi-faceted, which also extends to the school setting, as demonstrated in the next research study.

Crozier and Davies (2007) examine home-school relations amongst Pakistani, and Bangladeshi families described as HTR by schools in northeast England. The study adopted a qualitative methodological approach, which included participant observations and interviews.

The researchers found that teachers viewed South Asian parents as lacking interest in the children's education due to non-engagement with schools; however, the study explained that this was a misconception stemming from a lack of proactive outreach work on the services behalf.

The study also found that the parents lack of engagement was due to a lack of cultural misunderstanding, communication and assumptions made by school staff. Additionally, the schools failed to create inclusive environments that considered the cultural backgrounds of Global Majority families.

The authors concluded that schools need to reassess their strategies for engaging with diverse communities and recognise their barriers to communication and involvement rather than labelling parents as hard to reach.

In another study, Putwain et al. (2016) carried out in an alternative education provision (for children who are at the brink of exclusion from mainstream school) to examine instructional practices set in the north of England focusing on re-engaging students disconnected from mainstream education and described as HTR.

The researchers employed a qualitative approach, interviewing students and staff alongside classroom observations. They analysed their findings via an interpretative phenomenological approach to explore participants' experiences and perceptions.

The study found that factors contributing to student re-engagement were: tailored teaching methods, non-punitive discipline which incorporated care trust and attention to basic needs and addressing students' unmet needs and taking a holistic approach. Such as hygiene, sleep, and nutrition, created a foundation for better focus and learning.

The authors concluded that tailored instructional strategies effectively re-engaged students who struggled in traditional settings, and the importance of professional expertise in adapting teaching methods to meet the needs of the students.

The connecting theme between both studies carried out within schools is the need for services to adapt their approaches for the communities that they serve rather than adopting universal approaches and the labelling of marginalised groups as HTR.

The complexity of the term is further demonstrated in a study carried out by Boag-Munroe and Evangelou (2010), who conducted a systematic literature review relating to HTR families. The study covered literature published over the preceding twelve years (from 2010) in the UK, USA, Canada and Australia.

Their aim was to gain further understanding into the term within education, health and social care services and to explore how services have successfully engaged the families.

The review included fifty-four relevant papers from journals and books with texts being published from 1990 onwards. A key theme from the review was that complex

issues need complex solutions, which needed time to implement. Additionally, services needed to co-produce and develop a different type of support to meet the diverse needs of the families they served.

The systematic review also highlighted that common barriers to engagement were unwelcoming environments (buildings, offices, etc), stigma and lack of resources. Also, building relationships via trust, empathy and non-judgmental approaches was crucial for effectively engaging vulnerable/marginalised families.

Boag-Munroe and Evangelou (2010) concluded that engaging families labelled as HTR was multifaceted, requiring an understanding of various barriers and the need for tailored approaches and services needing to take accountability for their role in the engagement process, which requires adaptations to their methods to meet the needs of families better. Additionally, policymakers needed to consider sustained funding, interagency collaboration, and creative, holistic strategies for effectively supporting families facing complex challenges rather than placing the issue within the description of HTR

Another study carried out by Flanagan (2010), who aimed to address the existing inequalities between health and social care services and socially excluded sectors of society, as well as the ambiguity of what she refers to as the contested term of HTR.

A qualitative methodological approach was used via interviews within eight organisations across the voluntary, community and health sector organisations and a thematic analysis was employed to determine themes. The study determined that the HTR included marginalised groups that were drug users, refugees, and ethnic minorities.

Barriers to engagement included past negative experiences, service accessibility, and funding issue. Key facilitators to engagement were respectful treatment, trust-building, service flexibility, and partnership working.

Flanagan (2010) concluded that services across all sectors within the study needed to adapt their interventions to better suit HTR clients and emphasises co-production between services and clients.

Although not explicitly stated, Flanagan's (2010) study explores the contributing factors to engaging HTR groups to promote more equitable access to resources for marginalised people. This provides a valuable springboard for future research in the area, such as the one within this thesis.

From a health perspective, Herd (2017) researched working with HTR young people. Her research explores the complexities and inner workings of the label assigned to young people accessing CAMHS.

The author defines HTR young people as people who present with a variety of problematic behaviours but do not align with typical diagnostic categories; with an emphasises given to the relational trauma being a direct result and contributing factor to the young people's challenges.

Herd (2017) promotes a framework alongside a multifaceted and relational approach for practitioners and services to consider when engaging young people described as HTR accessing CAMHS. The framework has four components for presentations, each linked to specific domains of intervention.

1. Biological (stress): Viewed through a neurodevelopmental framework, this encompasses emotional dysregulation and the need for safety.

Domain: Management and Safety

2. Unconscious (feelings): Young people's behaviours stem from early experiences, impacting their emotional expression and memory.

Domain: Therapeutic

3. Relational: Emotional and relational immaturity leads to attachment issues; the need for genuine, caring relationships is vital.

Domain: Relationship

4. Environmental/Contextual: Social factors like poverty and exclusion affect young people, requiring a contextual understanding of their circumstances.

Domain: Social/External

(Herd, 2017).

This model is helpful as it offers insights into addressing the challenges faced by traumatised and marginalised young people and the contributing factors surrounding the positioning of their hard-to-reach'ness.

From a research practice perspective specifically related to children's social care, Curtis-Tyler and colleagues (2004) address the issue of researching HTR young people. The authors highlight the limitations of traditional interview methods, specifically with marginalised and vulnerable young people.

Curtis-Tyler et al (2004) also punctuate the need for flexible, creative and engaging research methods such as the use of visual aids and participating in activities as well as the use of the internet. The authors encourage researchers to involve young

participants in all aspects of the decision-making process to promote and enhance the validity of findings and improve their research experience.

The above literature are examples of the complex, broad and far-reaching nature of the term hard to reach. A reoccurring and connecting theme within these studies is the importance given to co-producing, adapting interventions, being more creative, having a local/geographical awareness, having more funding and fostering or facilitating meaningful dialogue between services and people described as harder to reach.

This highlights the importance of bespoke interventions that meet the individual and community's needs, which is context-dependent and will not be universally the same for all groups or individuals with the service given label of harder to reach. As the assumption that one size fits all can create spaces for oppressive and discriminatory practices.

2.5 Narrowing the literature down

This study will focus on an adolescent team within a youth offending service in children's social care in an East London borough in England. I intend to understand better the contributing factors towards engaging HTR young people open to their service. As such, this literature review will focus solely on systemic psychotherapy.

The rationale is that a systemic, relational-based practice model is promoted within the adolescent team. Additionally, as a systemic psychotherapist and insider researcher with experience working within youth offending services from a CAMHS perspective, I argue that remaining solely within the systemic field will provide an invaluable contribution towards the current knowledge base.

Narrowing down my literature to a specific field does not come without its limitations, as it could be argued that excluding broader literature may miss connections, implications or contexts and may not include contradictory views. However, in contrast, literature reviews that are kept broad (across differing spheres) may lack depth or specificity.

The research discussed so far (across all spheres) encourage non-universal approaches towards engaging HTR people (in practice and research) as doing so may foster contexts for inequity and discrimination to occur. Furthermore, one must take into account that this study is localised and specific to the borough, such as having its own nuanced customs, rituals and cultures rather than being generalisable and comparable.

2.6 Relevant literature applicable to this study: planning and structure

I will draw upon Siddaway et al. (2019) guidance for conducting a systematic review to support me in planning this literature review. A systematic review provides advantages when the review aims to integrate qualitative studies across different fields, referred to as a meta-ethnography (Nobilt and Hare, 1988; Schreiber et al. 1997).

Due to the broad nature of my study, a meta-ethnography appears appropriate, as it synthesises qualitative studies on a particular topic to find key theories or themes that provide new or powerful explanations for the phenomenon under review.

2.7 Method

Search strategy.

An online search was carried out in December 2022 in the following databases using DISCOVERY: PsycINFO, PsycArticles, PubMed, PsycExtra, EBSCO, NICE Evidence Search, Social Care Online and SocINDEX.

Multiple variations of the following terms were inputted, 'Hard to reach', 'hard to engage', 'young people', 'adolescents', and 'teenagers' and were combined with 'systemic psychotherapy' and 'family therapy'.

My research question directed the decision to use these terms, filters were not applied, producing over 30,0000 results. The 'harder to reach/engage' subject was topical across health, social care and education and applicable to all client groups.

The results were refined to those in the English language and studies carried out in the UK. The rationale was to focus on studies that were relevant locally. However, my search would require broadening.

Selection of articles – inclusion criteria

The inclusion criteria for my literature review were:

- Articles specific to the family and systemic psychotherapy field
- Terms included 'Hard to reach/engage' in the title or abstract.
- Related to young people, adolescents, or families.
- Articles published Between the 1995 and 2023

Exclusion criteria

- Editorial, Commentary or Reports
- Outside of the systemic and family therapy field
- Those not published in a family or systemic psychotherapy journal.

- That did not include terms: hard to reach/engage, young people, families, teenagers, or adolescents.

The article selection process is depicted using the three-phase *Preferred Reporting Items for Systematic Reviews and Meta-Analyses* (PRISMA) 2020 flow diagram.

Systemic and Family Psychotherapy Journals

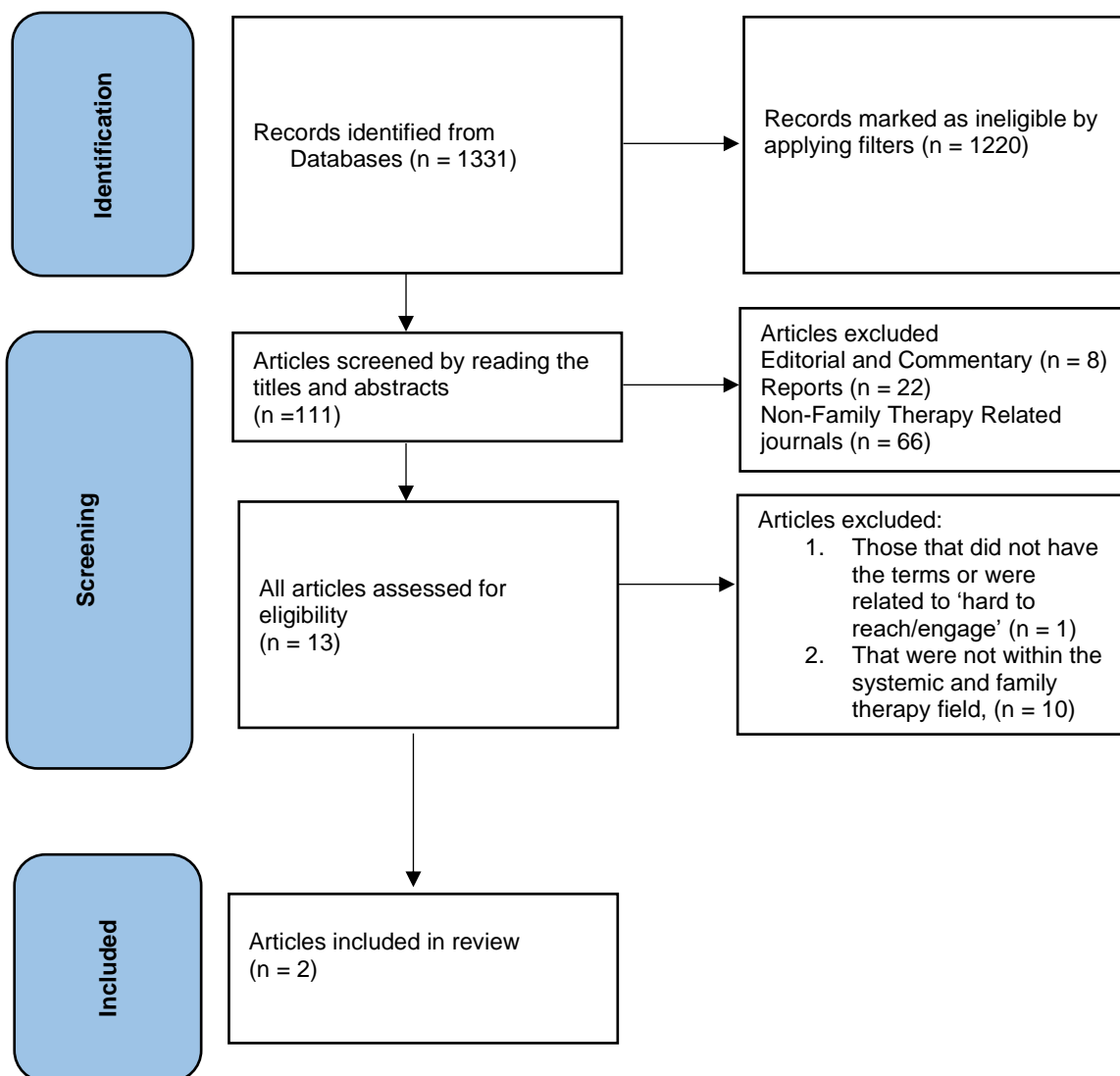


Figure: 5. PRISMA 2020 Flow Diagram

Two articles were found within the systemic psychotherapy literature from a 'special edition' journal focusing on the 'harder to reach' and related to social justice in the UK.

Due to the sparsity of literature, I adopted what Baumeister (2013) refer to as a 'zoom out' of the literature, focusing on the health, education, and social care field (rather than systemic psychotherapy alone) to facilitate an overview and integration of literature from different academic and professional spheres.

Phase 2: Selection of articles – refined.

The inclusion criteria:

- Articles specific to the health, social care and education field
- Terms that included hard to reach/engage in the title or abstract.
- Related to young people, adolescents, or families.
- Articles published Between the 1995 and 2023

Exclusion criteria

- Editorial, Commentary or Reports
- Outside of the health, children's social care and education field
- Those not published in an academic journal.
- That did not include terms: hard to reach/engage, young people, families, teenagers, or adolescents.

The PRISMA (2020) flow chart below depicts the article selection process

Health (CAMHS), Children's Social Care Services and Children's Education

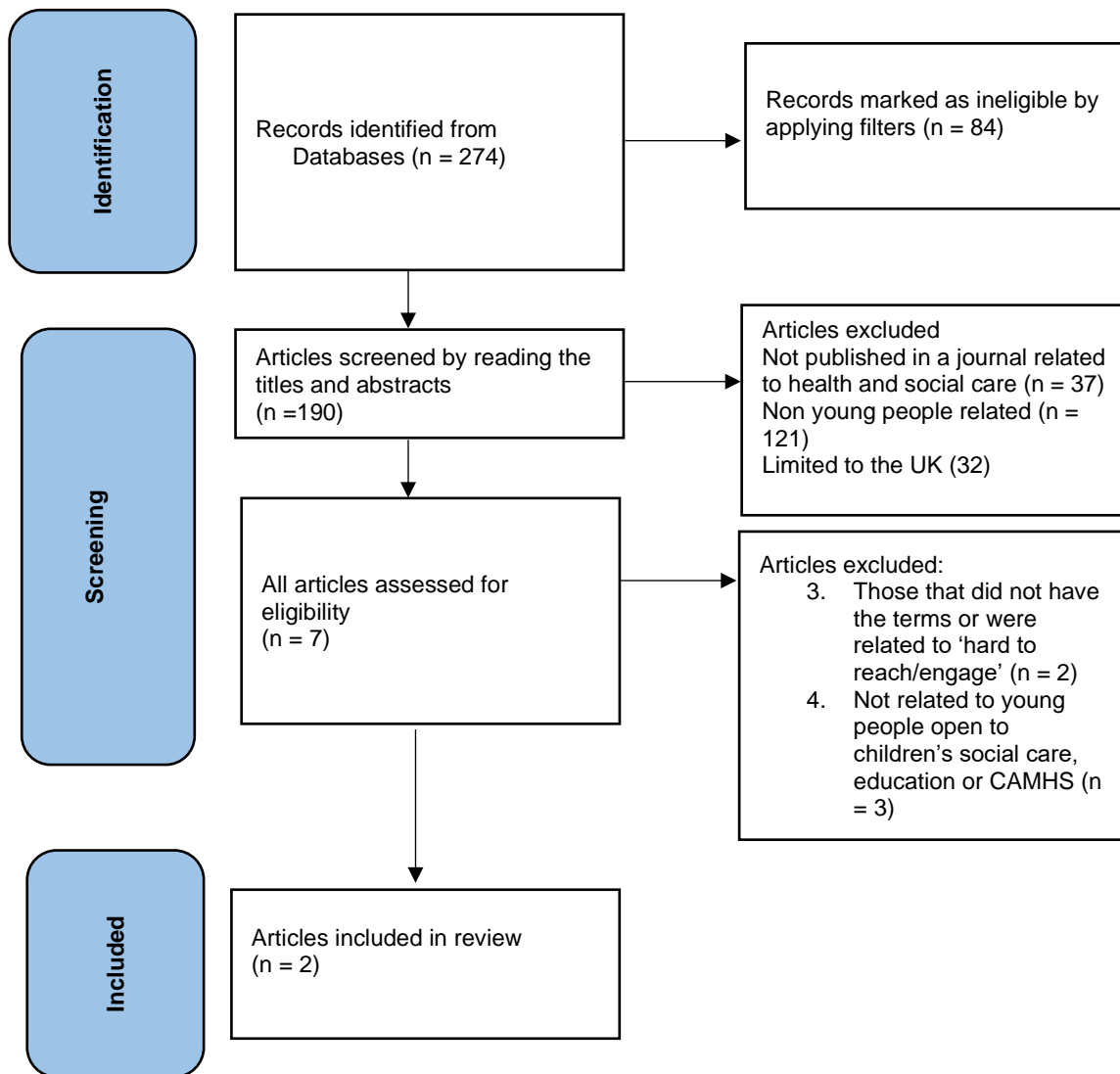


Figure 6: PRISMA 2020 Flow Diagram (<http://www.prisma-statement.org/>)

Once the literature review was completed, I faced the dilemma of being left with specific articles rather than negotiating which articles to choose from.

Results

A total of 4 articles to evaluate remained, from different but connected professional disciplines.

Which were:

2 x systemic psychotherapy

1 x non-statutory

1 x Education setting

The articles are summarised in the table below:

Figure 6: Summary of Articles Table

Article	Journal/field of study	Aim of literature	Method	Conclusion
Aggett et al., (2015). 'Seeking Permission' : an interviewing stance for finding connection with hard-to-reach families.	Journal of Family Therapy: Family and Systemic Psychotherapy	The work of an outreach, home-based therapy team is described. They aim to challenge service access constraints and social injustice related to outreach and community work with families described as harder to reach	permission is suggested as an interviewing stance for practitioners.	The authors suggest that their methodology may assist outreach therapists in managing the competing demands of treatment, protection, consent, and information-sharing.
Donovan, M. (2015). Systemic psychotherapy for 'harder to reach' families and	Journal of Family Therapy: Family and Systemic Psychotherapy	To explore the relationship between systemic psychotherapy and the model of mentalization-based	The author provides the basis for discussion via a critical analysis.	The author asserts that dialogue between systemic and mentalization perspectives can extend well beyond the empiricist framing of MBT-F.

politics of empiricism		therapeutic interventions for families (MBT-F) presented by Eia Asen and Peter Fonagy.		
Evangelou et al., (2013). Seeking to Engage 'hard to reach' families: Towards a transferable Model of intervention	Children and Society: Education.	The article describes an exploratory evaluation of an experimental 'drop-in' service seeking to attract and engage 'hard-to-reach' families in one of the most deprived areas of a Midlands city.	A mixed methods design where the authors attempted to document the core components of a potential transferable intervention model.	The authors propose that the provision enabled flexibility to see what works best, and this 'trial and error' approach gave rise to various new ideas.
Cobett, S. (2016). Reaching the HTR quantitative and qualitative evaluation of school-based arts therapies with young people with social, emotional, and behavioural difficulties	Emotional and Behavioural Difficulties	The study aimed to examine the efficacy of school-based arts therapies as an intervention that might be effective for young people with social, emotional, and behavioural difficulties (SEBD) in educational settings.	A mixed method approach was adopted. The data was analysed using Interpretative Phenomenological Analysis (IPA).	Themes emerging from data suggest that young people felt that the arts brought various benefits to their therapy that augmented the verbal side and helped them to engage in therapy.

2.8 Findings

Through my analysis of the four articles, four connecting themes emerged.

- Social constructionism and language
- The harder to reach/engage, the global majority and social inequality.
- Solution, method, and approach
- Wider political context

Social constructionism and language

Two of the four papers (Donovon 2015; Aggett et al. 2015) were explicit in their epistemological positions which were the systemic psychotherapy articles. The remaining two papers (Evangelou et al. 2013; Cobett, 2016) did not state their philosophical approaches. However, the privilege given to meaning being co-constructed via dialogue between participants and the researchers was apparent, therefore the assumption that a social constructionist epistemology was adopted seems appropriate.

The harder to reach, the global majority and social inequality

All four papers were not specifically related to young people described as HTR, instead related to HTR families.

The overarching concept which joined all papers was their definition and positioning of the harder to reach/engage. Clients described as HTR were specifically associated to how services described clients, rather than clients giving the label to themselves or being aware that it was the way they were described. The implied consensus across the articles was those positioned as the HTR could not access services, refused to be compliant, or were service resistant.

The link between the marginalisation (from mainstream society), socio-economic issues, deprivation and being from the Global Majority was a key component for clients being described as HTR.

Solution, method, and approach

All four papers had taken a solution-focused approach towards HTR families. The focus appeared to be on providing strategies and a demonstration of approaches of interventions.

Wider political context

Although not explicit, the year of publication across all four papers (Agett et al. 2015; Donovan, 2015; Cobbett, 2016; Evangelou et al. 2013) is relevant as the wider societal context informs the writing/studies.

The period between 2012-2016 was led by a coalition government underpinned by socio-political divisiveness. Issues surrounding immigration, terrorism, unemployment, the NHS, crime and a rise in mental health issues among children and young people were the main themes in UK society (UK Parliament, 2012 - 2016).

In the context of health and social care relating to children and families, policymakers focused on early intervention as an awareness of adverse childhood experiences and their long-lasting effects into adulthood was becoming apparent. The promotion and justification for government investment in early intervention and preventative work was, at the time backed by several organisations publishing figures for the potential returns through long-term savings.

For example, the Wave Trust (2012) report for the Department for Education and Public Health England report suggested for every £1 invested in quality early care and education saves up to £13 in future costs, with early interventions having a higher rate of return than later interventions.

At the same time, UK Parliament (2015), commissioned a review of the youth justice system to examine several areas needing reform. Recognising early intervention and therapeutic support were required in the context of the financial implications for society in the long run. The government pledged £1.25 billion to improve children and young people mental health services,

The Department of Health and NHS England published a paper: 'Future in mind', detailing the work of the children and young people mental health and well-being taskforce, which was set up to identify ways of improving mental health services and access to these services for children and young people.

Within this context, a drive-in government initiative specifically focused on helping 'hard to reach' families, such as the troubled families initiative (Department for Communities and Local Governments, 2012, 2014), targeting multi-problem, multi-agency families facing issues such as crime, unemployment, school truancy and antisocial behaviour.

Thus, the need to support, evidence and research children and families deemed 'harder to reach' was high on the health, social care, and education agenda.

2.9 Discussion

The following discussion will be put forward in ascending order relating to the year of publication, which is intended to provide the evolution of ideas over time.

Evangelou et al. (2013) research aimed to evidence the effectiveness of engaging harder to reach families via a drop-in service in a shopping centre in a particularly deprived area in the Midlands. Which intended to support parents with education-related, early years interventions. The researchers aimed their study towards all practitioners within health and social care settings.

The researchers used a mixed methodology over three years to see what processes enabled parents to take their first steps into the provision and acquire the confidence to access the services they needed. Unstructured observations, questionnaires and semi-structured interviews were conducted within the setting four to five days a week over three months. A researcher took field notes and was described as mainly a non-participant observer.

The quantitative element of the study was their use of a 'snapshot' questionnaire, which was used to identify the participant's socioeconomic statistics and demographics. Six families were highlighted as HTR by staff within the project.

The staff's positioning of families as harder to reach becomes problematic, as the families' presenting issues, experiences or context are not shared. Resulting in a possible stigmatising or prejudice on the researcher's behalf.

Second-order cybernetics emphasises the observed and observer being inseparable. Therefore, a curiosity surrounding how participants made sense of the non-participant observer's lack of interactions, and if this was disempowering for them.

The research aimed to propose the efficacy of their approach, ironically, the lack of engagement with families may have had the opposite effect to what they intended - to engage families described as non-engaging.

Their findings highlight that the average age of the users was 29.7 years (ranging from 20 to 42), who were predominantly female (95%). Two-thirds of users were White British, followed by Black African (7%) and Pakistani (7%). English was reported to be the sole language spoken by 71 per cent of the participants. The remaining 29 per cent were multilingual and non-English-speaking.

The writers position their pop-up shop's location as a key feature in the engagement process, which aimed to appeal to passers-by, hoping that their window display would entice users. This holds value as it is located in an accessible area with the potential for attracting a diverse range of families, including marginalised and described as HTR. Also, as the study was conducted over three years, it provides an added reliability and validity for their findings.

Evangelou et al. (2013) description of the HTR as being from communities that are predominately non-white and non-English speaking. Bringing into question the over-representation of White attendees and their confidence as English speakers.

However, a strength of the project is that it can foster social connections (due to its accessibility) among parents, facilitating marginalised people feeling less isolated and building trust and confidence through shared experiences.

A curiosity surrounds who gains access to services and resources, as non-English speakers (as a first language) may have felt nervous or unable to read what was offered. Resulting in the 'real' HTR groups not being engaged. Therefore, it can be argued that the findings from this research are not representative of the area.

Nevertheless, the creative and adaptive approach towards the project's curriculum appeared to be able to meet the needs of the families, providing both structured and unstructured play opportunities. This flexibility in approach is highlighted by researchers across all public sector services as being a vital component for engaging HTR groups (Flanagan, 2010; Boag-Munroe and Evangelou, 2010; Putwain et al, 2016; Herd, 2017).

However, Evangelou et al. (2013) do fall into a trap of making generalised claims regarding their framework being a transferable model (tentatively) to all. The authors do not attend to the complexity of the contributing factors to why families might be harder to reach, apart from providing a description, and links to socio-economic issues and minority groups which may have provided a richer and more personal account of family's experiences.

The authors explain that the area where the research was carried out is one of the most deprived in England, providing statistics and demographics to uphold this view. It would have been useful to have expanded on the issues more localised and contextually (for example, client experiences, presenting issues etc). I also wonder if the project acted as a glorified creche whilst the parents shopped rather than providing interventions the way the researchers intended.

Regardless of my critique, the study holds value for the potential for replication as it may serve as an example for further improvement, which could be adapted to different contexts (such as youth offending teams), which may bridge the gap between marginalised families and people accessing services.

The next article was written by systemic and family therapists Aggett et al. (2015). The article is not a research inquiry, but a proposal of a technique/approach, which

they describe as: '*Seeking Permission*': an interviewing stance for finding connection with HTR families.

A clinical case study is provided in the paper's body, and a micro-analysis of initial interactions with a family is described. The article aims to demonstrate the writer's method for engaging HTR families. The article is primarily aimed at systemic psychotherapists working with social care agencies and HTR clients from a health perspective.

The authors describe the dilemma they faced when working primarily with mothers who had histories of partner violence and had children (who tended to be boys aged between 5 -13 years old) who presented with severe conduct disorder. In most instances, the writers explain that their work has been with people marginalised by society, socially and economically deprived and English not being the mother's first spoken language.

The writers describe a need to '*directly seek to challenge service access constraints and social injustice*' (Aggett et al. 2015, p.191). The overarching theme within the article is for the reader to adopt their inquiry framework via a dialogical process with clients.

Aggett et al. (2015) argue that using their method redistributes power and autonomy for clients. The writers also use terms such as honouring and respectful approaches whilst using systemic concepts of curiosity (Cecchin,1987) and interventive interviewing (Tomm,1987) to further scaffold their approach.

I suggest the authors of a permission-seeking stance, face a dilemma as the idea of seeking permission is not a novel concept as they imply, nor exclusive to White Western approaches.

For example, in Asian cultures, respect and permission-seeking are seen as a religious duty and cultural etiquette focused on the family and formally shown through gestures and language (Sugirtharajah, 1994). This suggests that Aggett, et al. (2015) have not fully considered the cultural construction of permission-seeking and how this takes shape in different cultural contexts.

I propose that permission seeking is a *strategic* intervention (Haley, 1963) rather than being positioned as something that is collaborative. This is also linked to the positioning of health professionals in children's social care in the context of mandated child protection procedures, and bureaucratic pressure and compliance and pressures.

Scaffolding upon the strategic nature of the interviewing stance, the authors do not explore the notion of families declining support, which I suggest is a fundamental oversight.

My intention is not to be overly critical of the author's approach but to challenge the assumptions that appear to presume applicability to all scenarios. Moreover, the approach does not go without its merits, as its flexibility and adaptability to the home environment can create spaces where contextual cues and family dynamics occur where they may not be apparent in a clinical setting, in turn enhancing the therapeutic process regarding building trust and rapport. This then may result in the promotion of cultural sensitivity and awareness as the approach may foster opportunities for unique narratives of marginalised families to arise, which may lead to more effective engagement.

However, Aggett et al. (2015) write about their work being predominately with single mothers from the Global Majority. But they do not attend to the cross-cultural issues surrounding the concept of gender, which I suggest is vital.

For instance, attending to the socio-cultural norms and expectations relating to womanhood or being a mother may have facilitated a more meaningful intervention with the families they worked with. Additionally, to question and show curiosity surrounding the accepted norms and expectations of mothering and gender in Western society and how this impacts professional and personal interactions with mothers from Global Majority backgrounds.

The authors provide a theoretical rationale citing family therapy literature to uphold their main argument of a lack of family therapy literature linking the '*...nitty-gritty...with the broader issues of social justice*' (Aggett et al. p.92).

This argument is put forward to expose a gap in systemic writing, which punctuates the complexity of outreach work with families where presentations of social injustices are present relating to the marginalisation of minority groups in the UK.

However, the notion that the systemic field has not appropriately addressed the *nitty-gritty* of social justice, I would argue, is misleading. As writers such as Beitin and Allen (2005), McGoldrick (1999), and Goldner (1985) have attended to the interweaving dilemmas of social justice issues in family therapy in depth.

Reviewing the literature more broadly in family therapy, writings on harder to reach clients are *scant*, as Aggett et al. (2015) suggest. Yet, within the realm of psychology, education and social care, are numerous accounts of engaging the HTR. For example, Lister and Gardner (2006) collated several strategies for engaging HTR clients in varying clinical psychological settings. There are also

examples of working with indigenous peoples in Australia, described as HTR within a social care context (Brakertz, 2007; Cortis, 2012).

Since Aggett et al.'s (2015) publication, authors such as Nijabat (2018), Hodes (2020), Wyse (2020), Hammond and Nasser (2020) have written about community work, social injustices, and 'how to' engage HTR clients—highlighting the relevance of a highly topical subject within systemic psychotherapy in the UK.

A permission seeking approach has value as it promotes co-production and can also provide as a useful tool for empowering marginalised families as the authors suggest. As it facilitates spaces for individuals to regain a sense of control, authority and agency within a context where it may not generally be the case.

The third paper under review and also from the systemic field is by Donovan (2015). Donovan proposes a need to adopt a reflexive and creative use of the principles of mentalization when working with families with complex presenting issues. Her case is argued by critiquing Asen and Fonagy's (2012) model of Mentalization-based Therapeutic interventions for families (MBT -F).

Donovan (2015) questions the MBT -F model, focusing solely on the technical aspects of mentalization and punctuating issues relating to the empiricism and politics of evidence in the systemic field. The writer concludes the article by tentatively suggesting the usefulness of the AMBIT approach with HTR families.

Donovan (2015) provides a comprehensive and critical analysis by examining the intersections between systemic psychotherapy and mentalisation-based interventions, enhancing the understanding and value of both fields. The author also challenges the dominance of empiricism within psychotherapy, inviting practitioners

to take a broader view, and encourages consideration being given to the ethics and politics underpinning the status quo in research and practice.

However, it could also be argued that Donovan's (2015) critique, could be seen as scathing of Asen and Fonagy's (2012) MBT-F model. Arguing that the latter do not acknowledge the systemic psychotherapeutic techniques within their approach. Donovan's (2015) defence of systemic psychotherapy is passionate and convincing, emphasising that MBT-F model positions itself, or implies that it is a novel idea.

Asen and Fonagy (2012) take a positivist stance to give their MBT-F approach more validity and credibility, in a possible attempt to appeal more broadly as the intervention of choice when working with families who present with complex mental health needs.

However, I do not see how this approach would work with young people open to social care or the adolescent team or the relevance of Donovan's (2015) article for engaging harder to reach families, as it seems that MBT-F would be more suited as an intervention that comes post-engagement.

Donovan (2015) does not address the engagement process with HTR families, such as the therapeutic alliance, relational aspects, or the complexity of working with marginalised families. Alternatives, recommendations, or suggestions for engaging families are not provided either. The paper's focus is solely a critique of the MBT-F relating to the non-acknowledgement of systemic psychotherapy by the model's authors.

A strength of the article is that Donovan (2015) successfully demonstrates a possibility for the integration of concepts which, in the context of HTR families has

value as it promotes flexibility, adaptability and creativity within clinical practice which is punctuated as being integral for engaging HTR individuals and groups.

Donovan (2015) does not describe who, or what HTR means, apart from citing Aggett et al (2015). The ambiguity is exacerbated by concluding that the MBT-F approach '*may be useful*' for working with harder to reach families (p. 163).

However, Donovan's article encourages future research, highlighting a clear gap within the systemic field regarding HTR families conveying the relevance of a highly topical subject matter.

The final article under review is Cobbett's (2016) study conducted in an educational setting. The research examined the efficacy of school-based arts therapies as a possible intervention for young people with social, emotional, and behavioural difficulties (SEBD) in schools.

A mixed methodology was employed, with the quantitative strand collecting data from clinical work carried out with young people based across two schools in London. Interventions comprised the provision of art therapies across three years study, with 52 participants.

Outcomes were assessed using Goodman's (1997) teacher-rated, Strengths and Difficulties Questionnaire (SDQ). This was due to the difficulty of reliably obtaining parent-rated ones. SDQ assessments were made at the start of therapy and 1 year into treatment. Resulting in an overall control group of 29 young people.

The findings highlight significant improvements in SEBD levels for young people receiving art psychotherapy compared to the control group, with large effects on conduct and emotional difficulties.

Where evidence-based research is seen as the 'gold standard' within health, education and social care, Cobbett's (2016) study provides empirical evidence for the effectiveness of art therapies in improving the outcomes for young people with emotional well-being and mental health issues, which has value for informing policy and clinical practice.

Additionally, the findings posit a compelling argument for art therapies being an alternative to traditional talking therapies as it contributes to understanding how it can facilitate cognitive integration, emotional regulation and engagement.

However, Cobbett (2016) study does not provide comparable rates for health and social care (for example, CAMHS). which suggests that the data may be a standalone statistic.

Furthermore, the exclusion of the parent experience, I suggest was an oversight. Compiling client data may have provided more insight and curiosity for further discussion and contributed towards the efficacy of the art therapies the author sought.

The qualitative element of the research comprised of semi-structured interviews of Six young people who had previously received art therapy. The children Ages ranged from 10 to 16, the data was analysed using Interpretative Phenomenological Analysis (IPA)

Cobbett (2016) asserts that his findings indicate the effectiveness of arts therapies in treating young people with SEBD and then promotes some of the reasons why arts therapies may be preferable to traditional verbal psychotherapy with HTR young people.

Context, demographics, and case examples are not provided. Additionally, the assumption that art therapies can be universally applied to all HTR young people is also an oversight due to the reductionist nature towards a complex social phenomenon, which requires honouring and attending to in-depth.

However, the study's strengths lie within its findings, punctuating the need for services to be creative when engaging young people described as HTR – in turn guiding future practice and research.

Furthermore, Cobbett (2016) is the only writer under review who further explores the positioning and contributing factors of harder to reach young people. Links between SEBD, adverse childhood experiences, and societal factors, such as long-term increases in income inequality and the increase in diagnosable children's mental health and emotional well-being issues, are discussed.

Resulting in a more comprehensive understanding of the wider socio-cultural and political contexts of the young peoples lived experience, which may result in a richer understanding of the term (HTR) set out by services – which is invaluable for future research within the field.

Language, Whiteness, and assumptions

Returning to the four themes that connect the literature, is the privilege given to social constructionism, dialogical methods and the English language positioned as the overarching connector for meaning-making. Whether explicitly stated or not, I argue is short-sighted and assumptive. Due to the non-attendance towards the cross-cultural implications of conducting research with Global Majority clients. The authors appear to hold the assumption that words used in dialogue have the same meaning for all. Furthermore, none of the authors discuss how language differences

and translation might affect how the families, practitioners and researchers understood the words they used.

This seems odd, as Evangelou, et al. (2013) Aggett, et al. (2015) and Cobbett (2016), except Donovan (2015), clearly highlight the link between social inequalities and the Global Majority as a key feature in describing the harder to reach families within health, and social care, or education context.

I propose the author's supposition that their world is the same as the family's and that dialogues are the same across cultures is a significant oversight. I suggest that it could be seen as a form of intellectual arrogance underpinned by White, Western, patriarchal systems which assume universal approaches to language, theories, and practice.

Of all the writers, only Aggett et al. (2015) provide their context (being white middle-class therapists). Therefore, one is left to assume that the remaining authors are also White and middle-class due to their names and the related privilege associated with academia and writing.

The writer's non-attendance to their own, as well as the client's cultural/ethnic context, may be due to *White fragility* (DiAngelo, 2018). Which refers to a White person's discomfort when confronted with the idea or information about racial injustice or inequality. Sub-conscious bias may also be a factor for the authors when considering culture, context, and the families they work with.

Undoubtedly, the writers may see themselves as promoting meaningful interpersonal relationships with the participants in their studies and writing; however, as Dennis (2014) posits, participants' experiences within a qualitative research inquiry are mainly taken for granted. For instance, the overriding factor for the writers may have

been motivated by career progression or status rather than truly honouring participant voices and lived experiences.

This implies that the writers may adopt a more realist/positivist stance towards their work as they do not follow the consequences of their social constructionist position. Evangelou et al. (2013), Agett et al. (2015), Donovan (2015) and Cobbett (2016) do not locate themselves culturally or personally within their writing.

In turn, upholding the view that they were merely '*looking over the shoulders*' to whom the experiences belong rather than genuinely being a part of the family system they claim to be supporting/advocating for (Geertz, 1973, p.452).

None of the article's authors address, apart from Cobbett (which is limited to two paragraphs), attend to the contributing factors of clients described as HTR, the function it may serve societally or what it might mean for their respective services. Moreover, the writers do not directly ask the young people or families what this might mean to them.

2.10 Summary

The authors discussed in this chapter demonstrate the highly complex, broad, and problematic nature of working with people described as harder to reach. The themes that connect the research and articles, regardless of their context, is the need for services to be flexible in their approach, adapt interventions, and be creative.

The literature provides a useful starting point for unpacking the social injustices marginalised groups face for practitioners working in the community. However, the cultural context and cross-cultural implications are not met in depth – especially within the review relevant to this study.

Additionally, consideration of Global Majority families' lived experience and related trauma of loss and migration and exploration of the client's autonomy in declining therapy without fear of health and social care reprisal should be analysed further.

As such, I propose that a deeper understanding of the contributing factors to engaging HTR young people be explored to provide more insight rather than solely solution-focused approaches.

There is a clear gap and need, not only in systemic psychotherapy literature/field but also more broadly, to explore the contributing factors, influences, and dynamics for engaging HTR young people open to youth offending services adolescent teams.

My intent is not to solve problems or provide answers but to further understand a multifaceted social issue. Contributing to the current body of knowledge may inform future service delivery and professional practice. which may promote reflection, anti-discriminatory practice, and the empowerment of marginalised Global M young people and their families positioned as harder to reach.

3 CHAPTER 3: METHODOLOGY

3.1 Introduction

Chapters 1 and 2 provided the intent, context and rationale for my research question and research. This chapter presents the procedure used to answer my research question.

This chapter has seven sections.

- Design of the study
- Setting the scene
- Ethnography
- Semi-structured interviews
- Ethics
- Analysis
- Limitations of this study

This study looks at how young people are 'talked about' at an organisational (macro) level and how young people respond and experience these ways of being talked about at an individual (micro) level. As a reminder, the research title is: 'Engaging 'hard to reach' young people in adolescent teams: challenges and limitations deconstructed. And the adapted research question is: 'What factors should be considered when engaging 'harder to reach' young people relationally in adolescent services?

I intended to gain a more comprehensive understanding and deeper insight into a complex UK societal discourse within health, social care and education services.

3.2 Design of study

Onto-epistemology

The epistemology and ontology underpinning this research study is a critical realism within a decolonial frame.

Critical realism takes an inclusive approach towards research, fitting methods and designs to the problem at hand, seeking to overcome the dualistic nature between objectivism and subjectivism. Critical realism is interested in the underlying mechanisms and structures within social phenomena and recognises that reality has different levels, which are influenced by agents, structures and causal mechanisms which are in constant flux.

Critical realism can provide more relevant, explanatory and nuanced questions that address the underlying conditions and causes and conditions of a research problem rather than measurable or observable outcomes. For example, rather than asking how many young people open to services are described as harder to reach or what is 'good' engagement, one could ask why some young people are described as HTR and others not and what factors enable, constrain and contribute towards young people being positioned as HTR.

Additionally, it could be argued that critical realism is a more balanced view than social constructionism (as it posits that reality is mainly constructed through social interactions and processes) and it recognises the influence of social constructs whilst affirming the existence of objective reality. And it is this balance that fits well with systemic thinking (as it privileges different perspectives) and for this study as I aim to gain a more holistic view of a complex social phenomena (Tinsley, 2022).

A decolonial ontology refers to the way of understanding reality that challenges, seeks to move away from and takes a critical lens towards Western-centric frameworks and perspectives. It emphasises the importance of valuing diverse ways of knowing, being and doing – especially incorporating those of marginalised and indigenous communities. In other words, a decolonial ontology seeks to foster more equitable and inclusive ways of understanding reality that honours difference in socio-cultural historical narratives and contexts. It seeks to create a more inclusive and equitable understanding of existence that respects various cultural and historical contexts.

Although the emphasis of critical realism and decoloniality may be different (critical realism's focus on structures and processes that shape knowledge and decolonialism emphasises alternative worldviews) they can inform and enrich one another - especially on topics of social injustices, complexities within social phenomena and the human experience and knowledge production (Tinsley, 2022).

Furthermore, the young people open to the adolescent service are predominantly from the Global Majority and males. As we have seen in the previous chapter, the HTR tend to be people who require intercultural understanding when it comes to engagement and interventions.

Therefore, a decolonial approach will be incorporated. This means taking a critically reflective stance and attending to the cross/inter-cultural dynamics and the power structures that intersect for the participants of this study.

Methodological approach.

The suitability of my research design will match the nature of my inquiry, which will be spearheaded by my research questions and aims.

A qualitative approach seemed appropriate as I am interested in gaining a deeper understanding of the underlying and contributing factors toward engaging HTR young people in the adolescent team. I am interested in the experiences, meanings, power structures and discourses surrounding HTR young people.

Intra-paradigm

O'Reilly and colleagues (2020) critically reflected upon using a mixed-method (quantitative and qualitative) approach, explaining that it lacked epistemological congruence. As such, the writers proposed combining two qualitative approaches, which they call intra-paradigm. That is, within an overarching qualitative framework, different qualitative methodologies or methods are used. The writers assert that doing so creates a synthesis of methods rather than a mixing. Authors explain that adding two data collection methods within an intra-paradigm design adds value by integrating or separating the analysis that derives from them (Anguera et al., 2018; O'Reilly et al. 2020; Morse, 2009).

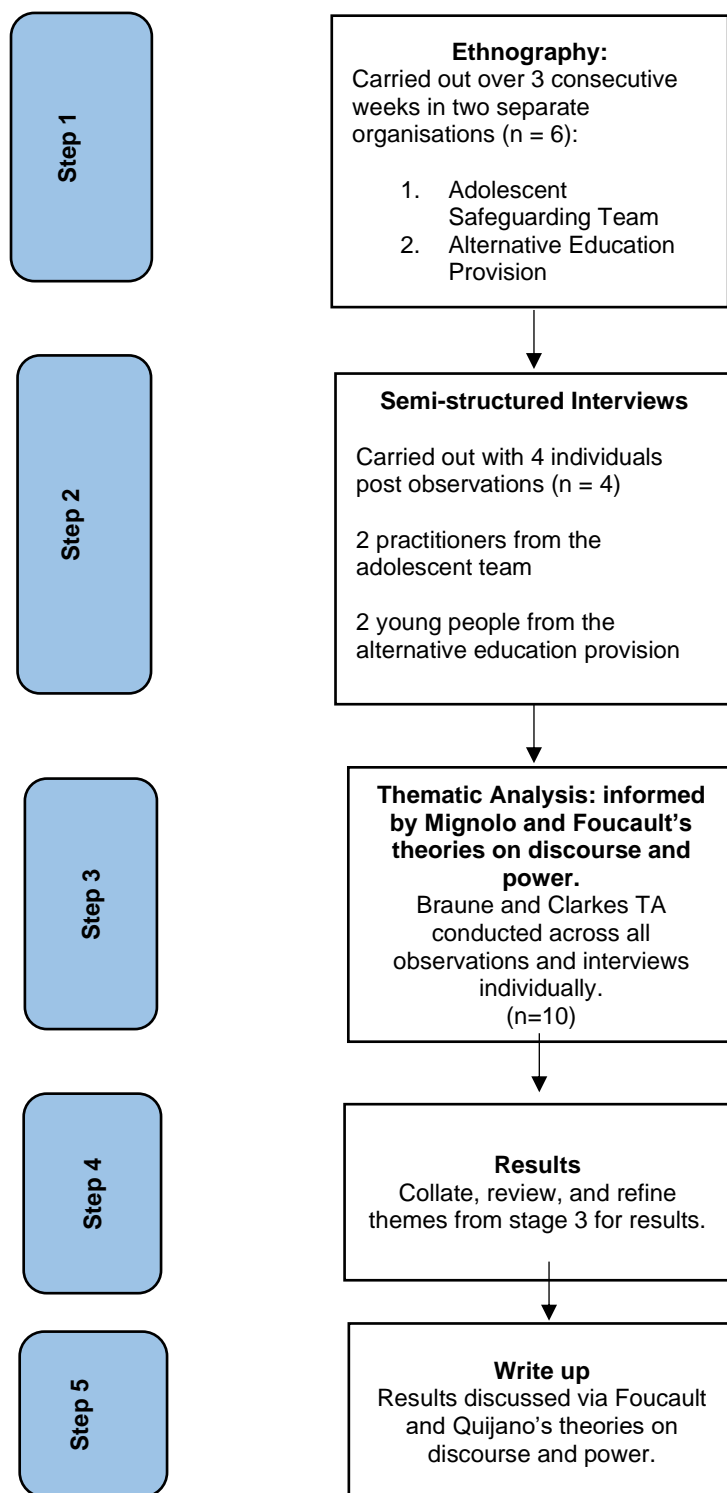
I was drawn to this design as it applies differing but compatible methods which fit well with my overall research aims of honouring complexity and inclusion of differing perspectives.

Overall design – at a glance

There were four main phases to this study. Steps one and two are the practical elements for data collection - the 'doing'. Steps three and four are the application of the analysis method (which will be expanded upon further in this chapter).

The overall methodological design of my study is presented in the flow chart and section below.

Fig. 8 Methodology Flow Chart



Stages one and two contain three steps following the other.

1. Ethnography (active participant observations)
2. Themes from the observations will act as a primer and inform the next step.
3. Semi-structured interview

The participant observations were carried out concurrently in two different organisational settings over three weeks, for one and a half hours once per week, on the same day in both organisations. The participant observations facilitated a space for the questions for the semi-structured interviews to emerge, as they were not formulated prior (see appendix for all field notes and semi-structured interview transcriptions).

Two participants were recruited from both organisations for the semi-structured interviews – totalling four interviews. These were carried out post-observations over a month and were standalone interviews that lasted no longer than one hour.

The data was then individually collated, analysed and synthesised (six field notes and four interviews).

A Foucauldian and Quijano-informed thematic discourse analysis was adopted to analyse the data and also informed the design of this study.

3.3 Setting the scene

The study was conducted over two months - January to February 2023. It was conducted in two different organisations in different locations within an East London borough which was a particularly socio-economically deprived area. As of 2023, it was recorded as having one of the highest child poverty rates, the highest recorded domestic abuse offences and the third-highest knife crime in London. It had the fourth highest unemployment rate in the UK, with 69.1% of the population from the

Global Majority, the 10th highest in the country and the fastest-growing population of young people in the UK (gov.uk).

These statistics are just a snapshot of the poverty, complexity and disadvantages the community faced compared to other boroughs and counties nationwide.

The study was carried out in this borough as it has been my place of work for the past eight years of writing this thesis. I worked for the NHS as a systemic psychotherapist who covered the borough. I supported the initial development of the YOS exploitation team from a health perspective in 2017, which has since developed into the adolescent team.

Organisations

1. Local authority Youth Offending Service (YOS):

The Adolescent Team is a multi-disciplinary team of social workers, therapists and support workers, which is a part of the YOS. The team works with young people who present with contextual safeguarding concerns and are at risk or have been exploited. The building is located in the town centre, a six-storey office building. Young people attend the offices for meetings generally. However, the adolescent team focuses on community work as most of the young people are described as HTR – which the team was set up for.



Fig 9: adolescent team and YOS offices

2. Alternative Education Provision (AP)

Previously referred to as alternative pupil referral units (PRU), the AP is one of two in the borough, providing full-time education and support for 11- to 16-year-olds who have had difficulties with their learning and behaviour in mainstream school. The young people have been permanently or at the risk of being permanently excluded from mainstream schools and reintegration is the focus. Contextual safeguarding concerns surrounding grooming and exploitation is a consistent theme for the young people attending the AP, with presentations of violent and anti-social behaviours, gang membership or affiliation, criminality, child sexual exploitation and county lines, with domestic violence being a common factor also.

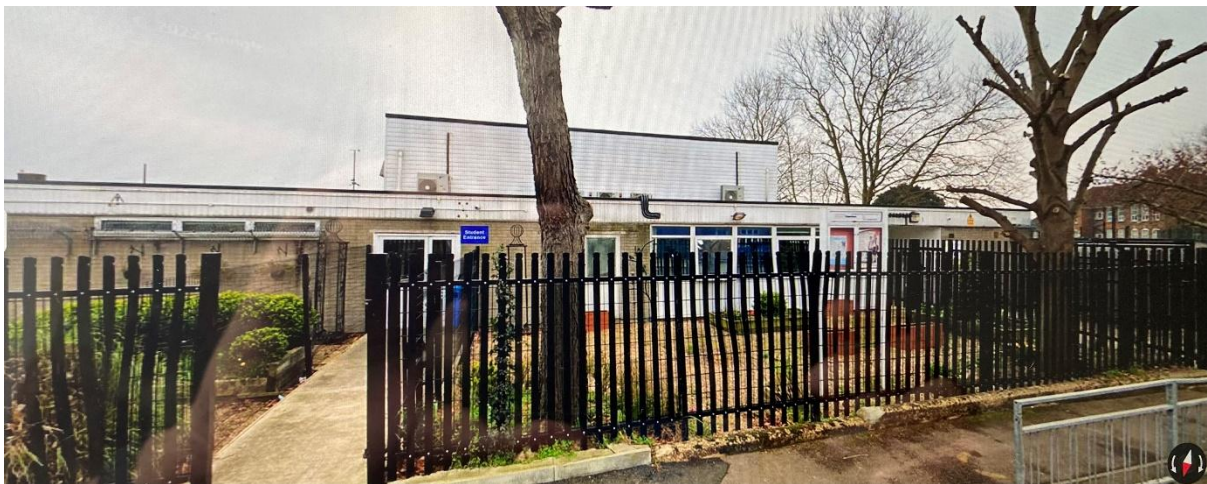


Fig 10. AP building

The AP is set within a suburban area on the borough's outskirts. Local amenities are approximately one and a half miles away from the building. The building appears to have been built in the 1970s and is guarded by a 7-foot-high metal fence, surveillance cameras, and security operated doors for access. It needed painting, as it looked, in parts, in disrepair.

Participants

Adolescent Team consisted of:

- Two team managers (one White woman, one White man)
- One senior social worker (White woman)
- Five social workers (three Global Majority women, one Global Majority man)
- one ASYE social worker (Global Majority woman)
- one NRM coordinator (White woman)
- two missing children coordinators (Global Majority women)
- one woman and girl's practitioner (White woman)
- one CAMHS worker (White man)

Alternative Education Provision

The provision had approximately 30 children on-site when at total capacity.

The staff team included:

- Headteacher (White woman)
- Five Senior leaders (two White men, one Global Majority man, two White women)
- Seven teachers (White women)
- Three learning support professionals (two Global Majority men and one White woman)
- Three Admin and business support team (two White women and one Global Majority woman)
- One care-taker (Global Majority man)

3.4 Ethnography

Rationale

Ethnographic research aims to record, engage, and interpret social meanings, structures, and values. It addresses the ethical responsibility to confront processes of injustice and inequality within a particular domain (Madison, 2020).

Thomson (2008) and James and Prout (1997) position ethnography as the favoured methodological approach with young people as it places them at the heart of the research - promoting inclusivity and participation. It invites researchers to let go of presumptions and assumptions about a group of people to effectively learn anything about them and to immerse themselves in their communities and socio-cultural contexts (James and Prout, 1997).

An Ethnographic approach allows flexibility, as it offers a rich exploratory, narrative account of the culture (HTR, young people, social care and educational contexts) rather than aiming to verify a general theory or test a hypothesis, which fits well with this study's intra-paradigm method.

Ingold (2014) insists there is more to ethnography than mere descriptions and cataloguing of habits and customs. Instead, it is an observation from the inside, and researchers immerse themselves as active participants listening to what others say to each other and observing and experiencing the behaviours, rituals, and activities. However, a common critique of ethnography is the researcher's involvement and impact of subjectivity. Writers argue that it compromises accurate data collection, and that participation and observation are contradictory (Madison, 2020; Campbell and Lassiter, 2015). Meaning, how can one simultaneously watch and join in?

I suggest the role of subjectivity within the ethnographic process has value, as it requires researchers to attend to what participants are doing (in every sense and at

all levels) while attempting to reflect in action. Consequently, making it possible to generate knowledge collaboratively, making accurate guesses about what might or might not be an appropriate response to the research question.

I intended to avoid objectifying participant experiences regarding notions of empirical knowledge, validity, and positivism. Instead, to join, understand, and honour the young people described and positioned as HTR by services.

Ethnography has a lot in common with systemic psychotherapy. Both pay attention to relationships, intersubjectivity, meaning, rituals, culture and the broader context. With the use of self-reflexivity, ethnographic research may further complement my effort in attending to the complexity of the topic of HTR young people.

Hence, the rationale for an ethnographic approach towards my methodological design is to provide a more in-depth understanding of what transpires at the local (micro/individual) level and how it is affected/positioned by wider contextual (Macro) issues.

The themes from my fieldwork will provide an introductory but comprehensive overview towards the research design's next step in formulating questions for the semi-structured.

Ethnographic study - Adolescent team

An ethnography (participant observation) was conducted in the adolescent services multi-disciplinary team meeting (MDT). These were held online rather than in person, and I attended once a week for three weeks, on a set day for one and a half hours.

The rationale was to gain insight into some of the discourses surrounding how practitioners talk about and engage HTR young people at an organisational level.

The whole team was present for the duration of the observations.

The most challenging aspect of the observations was carrying it out online rather than in person. I felt like something was lost, as highlighted in the following field notes extract:

Extract 1: Participant observations - adolescent team meeting

...the managers guided me to turn off my camera whilst I observed in our introductory meeting - which made me a little anxious, as I wondered how this would affect the observation. especially by doing it virtually, would I pick up on the nuances of relational interactions? Wouldn't it punctuate my presence and what might the team think of this? I wonder now why I did not question being told to turn off my camera - maybe because I did not want to seem rude, but grateful for being allowed to be in the team meetings.

The team managers explained that the meetings were conducted online to facilitate flexibility which they had embraced. I wondered if the practitioners were being compliant due to the power dynamics between them and their managers.

Furthermore, my inability to challenge the request to turn off my camera and question the online meetings may have reflected compliant behaviour due to feelings of gratitude and imposition of joining their meetings as a researcher.

Ethnographic study – alternative education provision

Observing the young people open to the adolescent team would have been ideal, as they are positioned as HTR by services. However, due to their ongoing vulnerability, child protection, youth justice, and safeguarding issues, it would have proved to be problematic in the context of observing vulnerable young people out in the community.

Thus, the participant observations were conducted at the AP once a week, for three consecutive weeks, on a set day during the lunch break. The observations ran on the same day prior to the adolescent team meetings.

I was aware of the AP, from my work in the NHS, however none of the participants were known to me, nor I to them.

The rationale for conducting my research in the AP during their lunch break was:

1. Young people were described as Hard to Reach (HTR) by health, social care and education services.
2. During their break, the young people engage in activities such as pool, sports, etc., with specialist/targeted practitioners such as youth workers, therapists and teachers.

On the day of the observations, the primary participants were:

- Students (no more than 20 at one time) who were predominantly Global Majority boys
- A mixture of seniors, teachers, and support practitioners

The AP is the final stop for young people accessing education when excluded from mainstream schools – this ultimately means that services offered will cease if the AP does not work out for the young people. Many attending the AP are open to the children's social care and adolescent team. The main presentations are contextual safeguarding, youth justice concerns or behavioural, mental health and emotional wellbeing issues. The young people who attend the AP are described as HTR by services.

It could be argued that the young people already engage with the provision.

However, their attendance is underpinned by a punitive measure enforced by local authorities and guided by government guidance (Department of Education, 2013).

Punitive measures include parents/guardians being financially penalised or criminally prosecuted for the children's non-attendance, enforcing youth justice orders and/or social care involvement.

The corrective approach by practitioners struck me from the outset in my initial interactions with the AP's deputy head (DH).

Extract 2: Participant observation – AP

Attempting to arrange an introductory meeting with the deputy head prior to going in, was in part directed by ethics and my personal display of a show of respect. Meaning, I did not want to show up and the DH not know who I was...I contacted him via email, and the tone of his response was a little (as I perceived it) curt, explaining that he did not really have the time. This upheld my initial hypothesis surrounding being 'dumped on him'...

Once the meeting had started, I noticed that the DH was in the school front office with people surrounding him, from the start other staff members were asking questions. I was, jarred by the experience and found it disrespectful as it set the tone for the meeting. 5 minutes in of introducing myself, I stated that I did not think it was appropriate for a meeting to continue in the context of him being in a public place and I was sharing things that were personal in

nature. The AD apologised and stated that it was rude of him and that he would call me over the phone in 10 minutes - which he did.

The extract above highlights the pressures that services face. The AP focuses on young people behaviour and risk management who display challenging and violent behaviours, which may have informed the DH approach towards me. In retrospect, I also wonder if I was reacting to my historic narrative and relationship to authority and school environments as I was excluded from six schools as a youth and did not respond well to harsh approaches and wondered further if this was how the young people also felt.

3.5 Semi-structured interview

James and Prout (1997), Jamshed (2014), Burgess (1984) and Spradley (1979) all promote the use of interviews post-ethnographic study to develop a more in-depth understanding of a research topic. As I wanted to understand my research topic better, the interview process seemed fitting rather than relying solely on conversations within the ethnography.

The use of unstructured interviews tends to be around broad themes, such as the research question in this study. The direction is (or can be) influenced by the interviewee as much as the researcher. Furthermore, it allows for flexibility in creating fewer formal spaces, where power is evenly balanced, and the emergence of a meaningful and organic conversation (Banister et al.1995; Kvale and Brinkmann, 2009).

A critique of the semi-structured approach is that it can be considered an artificial form of interaction, weakening chances to discover areas of analytic interest, such as discourses (Potter and Hepburn, 2005; Coopooosamy, 2016). Also, leading questions may create a bias in the interview process. However, the subjective and

conversational (with a purpose) style of questions may facilitate something to occur that is meaningful and of value for and on behalf of the participant.

The relational aspect of the semi-structured interview style should not be ignored either, as Spradley (1979) asserts that a rapport is built upon trust, which has developed from the ethnographic process, can then enable a free flow of information between researcher and participants.

Decolonising approaches

I wanted to take a critical, self-reflective approach towards the methods used, including the questions that had emerged from the ethnography. For instance, the assumption that meaning and language are co-constructed effectively between the researcher and the interviewee could be considered an oversight, as language barriers may be a factor (Marshall and While, 1994; Kakilla, 2021).

I was acutely aware of the power dynamics from the outset. In my search for a richer understanding of a complex issue, I did not want to fall prey to what I was trying to avoid – a colonising mindset. That is, leading the conversation in a way that suited me and not considering the participant's needs.

Participants

Requests for volunteers were put in a month before the study via information sheets and verbally by the leads within both organisations. Two volunteers from each setting were requested to provide insight into macro (practitioner) and micro (young people) perspectives. The interviews lasted no more than one hour.

Adolescent team

A Global Majority male social worker and a White female senior social worker volunteered by contacting me directly for the interviews. The interviews took place after the observation and were conducted online.

Alternative Education Provision

Information sheets were provided to the school prior, and verbal updates via school staff leads were given to the young people at the time of the observations and toward the end.

The school had appointed one Global Majority boy and one Global Majority girl who had volunteered for the interviews. The interviews occurred post observations in a classroom at the AP.

Both students had been permanently excluded from mainstream schools for behavioural issues, and the teachers described them as having 'contextual safeguarding concerns' – which I took as being open to the adolescent team.

Upon reflection, the allocation of the young people was out of my hands and, from my perspective, random. I now wonder about the positioning of the young people regarding their contextual safeguarding issues (staff knowing I was researching the adolescent safeguarding team). Meaning, was the young people chosen, knowing that they would engage and possibly provide a favourable depiction of the AP. If so, this brings into question the AP want or need to be seen in a positive light and the implications this has for the interview being authentic.

The questions

The questions emerged from the participant observations naturally. They were not totally blind and were guided and informed by my research question and Foucault and Quijano's ideas on power and discourse (which is expanded upon in the next chapter).

Four semi-structured interviews with two young people from the AP and two practitioners from the adolescent team were conducted (see appendix).

Kallio et al. (2016) guide researchers in conducting semi-structured interviews – outlining 5 stages.

1. identifying the prerequisites for using semi-structured interviews
2. retrieving and using previous knowledge
3. formulating the preliminary semi-structured interview guide
4. pilot testing of the guide

(Kallio et al. 2016, p. 2954).

I followed these steps loosely to support me in keeping focused on:

1. what my research aims were
2. questions informed by the knowledge gained from the literature review
3. The formulation of my questions which arose from the participant observations.
4. I then reviewed the questions with my peers and supervisors

The questions generated for the young people were not the same as the ones for the adolescent team practitioners – but had similar themes (see appendix).

For example,

Questions for Practitioner:

- *What does engagement of young people look like or mean to you in relation to adolescent team*
- *Does age, gender, and being from the area matter and why?*

Question for the young person:

- *What is important to you when it comes to working with adults professionals?*

- *Does it matter if it is a man or a woman? (Does it make it easier to relate to them and why)*

Transcription

The interviews were video recorded and then transcribed by an external academic agency for analysis (see appendix).

The rationale for choosing an outside agency was to avoid a labour-intensive process. Also, a professional agency would be more thorough, and errors would be minimal. The transcription process was completed within two weeks.

The rationale for choosing transcribed written text over analysing the video recordings was to accurately preserve the dialogue's details so that it could be referred back to during the analysis.

3.6 Ethics

Ethical approval

Ethical approval to conduct this research was granted following the Tavistock and Portman Ethics Committee application in 2022 (See Appendix).

For the confidentiality and safeguarding of the young people, I was not known to any participants within either organisation. I was neither aware of any specific young people open to health and social care services nor the adolescent team.

The rationale for not observing young people open to the adolescent team was to mitigate risk and any ethical dilemmas regarding their vulnerability and the research being carried out in the community. Confidentiality was maintained throughout this study and in this thesis. All names, locations and identities have been anonymised in line with ethical policies and data protection procedures

Issues of consent

Organisational context

The head teacher of the education provision and the service director of the youth offending services were keen for me to carry out my study within their organisations. This may have been informed by valuing the research process to enhance future learning and practice.

However, the influence of power that service leads have should be acknowledged. Although team members had the option not to take part in the study, it may have made it challenging for the team members to communicate this through pressure/fear of not seeming compliant with their bosses.

Children, young people and their parents and guardians

I was encouraged by the head teacher to provide an 'opt-out' option rather than individual consent. It was explained this was how the school gained consent, and it was a more streamlined and practical way of gaining permission from parents/guardians and young people.

The dilemma with opt-out is the assumption that consent is given without being explicit. To address this, the staff at the AP discussed this with all participants and providing information about the study in their school newsletter.

Young people interview

I had requested that the young people volunteer themselves by approaching the staff. This was conveyed in the information sheets and verbally in the observations.

However, teachers had put certain young people forward as more 'engaging' and knowing they had contextual safeguarding issues. I became curious and reluctant at

the prospect and invited a discussion surrounding feeling judged and ethical practice which resulted in two young people volunteering.

Procedures

Adolescent Team

An initial meeting with managers took place a month before the beginning of the study. The heads of service (gatekeepers) facilitated introductions with the managers. The team managers were given written information sheets about the study via email (see appendix), and consent was embedded via an online link within the information sheet. The managers disseminated these, and I had emailed the team a week before to remind them of my arrival.

Alternative Education Provision

I had initially spoken to the headteacher of the AP several months in advance, who was keen for me to conduct the research in her school. Information sheets were provided to the headteacher, who introduced me to the deputy headteacher.

A meeting occurred with the deputy head a month before the study started, and the offer to go into the school to discuss and answer questions was offered. But not taken up.

Three different Information sheets were provided (electronically) and disseminated to all staff, parents/guardians and young people (see appendix). Although the information was similar across all documents, they had been adapted in terms of language for the audience that they were intended.

Consent was embedded within all information sheets, with an 'opt-out' option as advised by the heads of the school. It was agreed that I would join school lunch

times, which were an hour long on a Thursday for three weeks consecutively. Full consent was gained from the young people, their parents/guardians and staff.

3.7 Analysis

As I am interested in the relational and power dynamics between practitioners, services and the young people, I have drawn upon Foucault and Quijano's theories on power and discourse which informed and guided all aspects of the study and analysis.

The participant observations informed the questions for the interview part of the study. For instance, I wondered what role did gender, race or culture have upon the engagement process? Did it influence or promote the relational aspects of engagement with HTR young people? or what is the role of power in the engagement process with young people described as HTR, and/or what role or impact did UK society have on the organisations who describe the young people as HTR?

Although I had some idea of the questions I wanted to ask participants, I was unclear. However, I was surprised at how quickly the questions emerged via the lens I looked through within the ethnography.

A note on the term 'data'

The problematic nature of the term 'data' must be addressed. A decolonial approach can be considered a metaphor for confronting and critiquing the positions of power and dominant culture - often assumed to be universal. Therefore, the implications of a colonial position towards research analysis and the positioning of people from the Global Majority must be highlighted before proceeding.

The following (two of the three) theories/approaches utilised (Foucault and thematic analysis) are Western approaches. The purpose for choosing these was their suitability to my research aims (which will be expanded upon further in this chapter).

Furthermore, a systemic perspective emphasises difference, context and multiple perspectives. Therefore, Quijano's colonial matrix of power has been used to provide an alternative perspective to the more dominant and utilised theories such as Foucault. Doing so may provide a more balanced view of my research findings and my method of analysis.

The dilemma occurs when participants are reduced to categorisations, statistics and/or 'data'. For instance, placing the focus on the research outcomes and my personal goals rather than the young people who are at the heart of this study. This creates a tension and a context of oppression for the participants, which is a contradiction towards my research aims in wanting to honour the participant experience. As such, an acute awareness towards the term 'data' as a description for participant experiences is acknowledged and attended to.

Foucault and Quijano's theories provide a theoretical framework for informing the thematic analysis as a means for addressing this study's research inquiry. The following will lay out how their key theories were used.

3.8 Discourse and Foucault

From Foucault's (1980) perspective, dominant societal discourses are created by those in power via institutions. Dominate discourse becomes the accepted way of looking at a particular phenomenon since it is repeated so much.

Therefore, dominant discourse is related to political, economic, cultural, and social positions which are accepted as societal truths by those in powerful roles, such as members of parliament, local authorities, health, education, and social care.

The construction of knowledge and assumptions about 'truth' within a Foucauldian discourse -analysis is consistent with a social constructionist epistemology.

Furthermore, Foucault (1984) asserts that 'truth' is constructed through rules which coincide with power relations and knowledge is considered to be created through social processes which are bound by power relations within a social constructionist positioning (Burr, 2003; Coopposamy, 2016).

A key factor for drawing upon Foucauldian ideas within a thematic analysis is how his concepts can inform analytic questions; whilst also attending to the implications of wider socio-political and socio-cultural contextual issues.

How Foucault informed the analysis

The following areas were used to inform the participant observations and interviews to support the identification of codes and themes during the analysis process (Willig, 2008; Coopposamy, 2016).

- Discourses

Burr (2003) defines discourses as the construction of a particular topic through knowledge and language. However, discourse is not limited to linguistics. Arribas-Ayllon and Walkerdine (2010) argue that discourses are a relationship between statements and rules. This fits well with a Foucauldian-informed analysis, where power dynamics influence the discourses available through rules or conditions and where actions become important within discourse (McHoul and Grace, 1993; Coopposamy, 2016).

- Positioning

Positioning refers to subject positions within discourses, which are socially available and can be taken up to allow identities to be formed. In turn, creating or constraining social action. For example, to understand the subject positions of young people described as HTR by practitioners in the adolescent team who access the AP, would allow for an exploration of the discourses available to them (practitioners and young people). The importance given to how subject positions, knowledge and power are connected is something that Kendall and Wickham (1999) punctuate. For instance, the discourse on adolescence in the UK is likely to be based on the interplay between the power attributed to this group (being vulnerable, impulsive, deviant, needing direction) and the discourses of adolescence available (via Western academia relating to psychology and development), and how the subjects (young people) position themselves regarding these discourses.

- Practice

This focuses on the relationship between discourse and practice. It considers the practices that emerge from discourses accepted as normal because of organisational power, which is maintained and serves a purpose in society. From a Foucauldian-informed analysis perspective, practices refer to the social action made possible through subject positions (Willig, 2008).

Young people being positioned as HTR appears to have been constructed through the descriptions of health, social care and education services. Resulting in additional labels such as vulnerable, challenging which further fosters an environment for marginalisation, injustice and inequity.

Attending to practices within the thematic analysis allows for forming of themes. This matches other areas of analytic interest described above, such as discourses or subject positions. For example, how practitioners engage with young people open to the adolescent team may depend on how they view gender, class, culture or race. In turn, informing how they position young people as harder to reach.

- Problematisations

Problematisations explore the circumstances contributing to groups or individuals who may be positioned as problematic and relate to endorsed and counter-discourses – therefore allowing an examination of wider political issues (Arribas-Ayllon and Walkerdine, 2010; Cooposamy, 2016).

As highlighted in the introduction, young people are predominantly portrayed in a negative light in UK society, who require behaviour management and guidance (deMause, 1976; Hendrick, 1997; Heywood, 2001; Davis and Edwards, 2004; Aldridge and Cross, 2008), Meaning, young people are generally seen as a ‘problem’. Services adding additional labels of HTR, challenging and vulnerable may exacerbate the context for engagement as these constructs inform service delivery and practice.

By attending to the problematisations within a Foucauldian-informed analysis, it may allow for an exploration of themes. For instance, it may include a combination of deprivation, race/ism and behaviour.

Several examples exist of researchers outside systemic psychotherapy carrying out a Foucauldian-informed thematic analysis which this method of analysis takes inspiration from (Timberlake, 2015; Cooposamy, 2016; Botelle and Willott, 2020; Brunton et al. 2018). I could not find research that carried out a Foucauldian-

informed thematic discourse analysis within the systemic arena. Furthermore, the incorporation of Quijano's (2000) colonial matrix of power (CMP) as a method of analysis was also not present in systemic literature and wider afield. The lack of attention to Quijano's CMP by systemic researchers may have been due to a sub-conscious bias or the privileging of 'tried and tested' Western methods of analysis such as a Foucauldian discourse analysis.

3.9 Quijano

Foucault's ideas are a Western concept positioned as universal and applicable to all. Mignolo (2011) who reinforces Quijano's (2000) theories, upheld the view that Foucault's ideas were not universal but regional, and biopower can only account for a portion of the mechanisms of the colonial matrix of power (CMP).

Quijano's CMP (2000) is a concept intersecting the legacies and practices of European colonialism in our current forms of knowledge and social orders. Born out of Latin America, the theory identifies the racial, social and political hierarchical orders and contexts imposed by European colonialism that give value to certain peoples/societies while disenfranchising others.

Quijano's CMP takes three forms: systems of hierarchies, systems of knowledge, and cultural systems. CMP highlights how this heterogeneous structural process shapes our modern world. In this sense, colonialism refers to domination where one group subjugates another (Kohn and Reddy 2017).

In addition to CMP systems of hierarchies, there are four interrelated domains: control of economy, control of authority, control of gender and sexuality and the control of subjectivity and knowledge (Quijano, 2000).

There are numerous instances where researchers have used CMP (outside of systemic psychotherapy research) to support thinking around systems of power (Zaragocin and Caretta, 2021; Mothoagae, 2021; Valenzuela, 2019; Santa Cruz, 2018).

Mignolo acknowledges that Foucault's biopower and Quijano's CMP are two major concepts of contemporary intellectual debates (de Onrubia, 2013). Highlighting their significance in the analysis of power structures and dynamics.

Although they can be comparable, coloniality functions through racism and exclusion, whereas biopower was/is used as a tool of emerging nations/states.

Alcoff (2007) explains that both are used to analyse power relationships, '*...but they do not work the exact same way, "coloniality/racism is a decolonial concept while biopolitics/biopower is a postmodern concept"*' (p.43).

How Quijano informed the analysis

From the literature search, I could not find a TA discourse analysis specifically applying Quijano's colonial matrix of power therefore, I did not have a framework to follow.

I aimed to use Quijano alongside Foucault's concepts on power to inform my thematic discourse analysis to explore my research question:

'What factors should be considered when engaging 'harder to reach' young people relationally in adolescent services?'

I focused on the local and regional context within CMP's four domain categories for guidance. In this case, the local refers to the specific borough in the region of East

London. This includes its localised customs, cultures, trends and the local authority policy and procedures in a health, education, and social care service context.

For example, the following areas were used to inform the thematic analysis (and all aspects of the study) to support the identification of codes and themes during the analysis process.

- Economy

Quijano (2000) attends to the corporate legacy of the Eurocentric capitalist and the effects it currently has over the globe, including land appropriation, labour exploitation, mass production, control of local resources and the role of Western ideals of individualism over socialism.

Applied to this study: consideration was given to the participant's access to resources, social class, funds provided by local authority, ownership of businesses, social class, and employment rates.

- Authority

Quijano (2000) argues that the emergence of 'modern nation-states' resulting from European colonial dominance, in essence, means two things for our current global state:

1. The state became the new central authority of imperial/colonial domination, and that the 'nation' in Europe was mainly constituted of one ethnicity, articulated as 'whiteness.'
2. Its control of dominance and authority over the global south

Which is exercised via institutions such as governments, banks and the army (Mignolo, 2011).

Applied to this study: the role of health (CAMHS), children's social care (youth justice service – adolescent team) and education (alternative education provision) relating to the power and authority over young people and practitioners within this study.

- Gender and sexuality

The control of gender and sexuality addresses the effects on both men and women and how the genders are constructed from a Western colonial perspective. It is argued that European colonialism was primarily about privileging White patriarchal system of power and enforcing religious Christian morals and ideals surrounding women, sexuality, mothering, and the expectations of what a nuclear family is and should be (Lugones, 2010)

Applied to this study: the role of gender positioning, constructions of the family concerning race, religion, patriarchy, and the relational power dynamics between services and the young people.

- Knowledge and subjectivity

Quijano (2000) explains that the colonality of power is based on a Eurocentric system of knowledge, which privileges, promotes and prioritises the use of European knowledge production. Quijano (2000) asserts that "*Europe's hegemony over the new model of global power concentrated all forms of the control of subjectivity, culture, and especially knowledge and the production of knowledge under its hegemony*" (p.540) which has resulted in a superiority/inferiority relationship enforced by the hierarchical power structures.

Applied to this study, the role of knowledge production extends beyond the formal administration of colonialism. The impact of education, mental health and social care interventions when engaging HTR young people will be considered. The role of

TV/film, and social media relating to socio-cultural expectations and standards relating to image/identity will be considered, and the role of policy, legislation, and research on current service practices were considered.

3.10 The Dilemma

I was clear from the outset that I wanted to adopt a decolonial approach towards this study and the data analysis and had initially aimed to do a 'full' Foucauldian discourse analysis (FDA). However, I did not know what this 'looked like'. Specifically, carrying out an FDA on themes drawn from an ethnography rather than text or interviews alone.

This was a dilemma that I did not have a solution to, and I relied on something emerging organically regardless of how anxious I was becoming. Also, the critique of TA as being elementary was something that I wanted to address. Adopting a DP and FDA (aside from being a suitable fit for my research) could give more academic credibility to my analysis.

During my ethnographic study, I came across research examples using Foucault's theories of 'informing' TA such as Coopoosamy, (2014). I was inspired but wondered whether this motivation was an attempt to be creative for creativity's sake. I wondered if I was disingenuous using the word 'informed'. Was I trying to find loopholes or diluting the theories rather than adopting the full frameworks prescribed? Modelling Quijano's CMP on a Foucault 'informed' approach made me feel I needed permission.

Another tension was that the four domains of CMP are not far removed from Burnham's (1993) Social Graces or Crenshaw's (1984) Intersectionality. Meaning

that all three, attempt to address oppressive practices within different social categories.

Fanon (1967) would be critical of CMP explaining it remains within the oppressed mindset (Timberlake, 2015). I agree with this in part. However, CMP explicitly places race/ism as the higher context and within a colonial frame – which cannot be ignored when working cross-culturally with marginalised and vulnerable groups.

The greatest dilemma faced within this study was the inadvertent colonising practices. The question is whether I was imposing a liberal, academic, saviour mentality upon the participants. This research is located within a White Western frame – is this not reinforcing colonial ideals of universalism and privilege?

These ethical dilemmas are issues I continue to grapple with. But I am anchored by my ability to reflect on the interplay of power dynamics when working cross-culturally and this equates to addressing inequality and social injustice in practice. I am reminded there is no end goal for decoloniality but an ongoing struggle to challenge the status quo and de-centre structural racism and those in power.

3.11 Thematic analysis (TA)

A TA was adopted due to its suitability for research being conducted in its early stages, where themes are proposed as a start point for future development. As the study of HTR young people open to adolescent services will be the first of its kind, I hope that this study will provide a foundation for further research.

TA is a flexible approach that supports analysing large amounts of information, dividing the research into sets, and analysing multiple observation/participant ‘data’ – allowing for adaptations in the study design if needed. This allows research objectives

to evolve or change during the process (Kiger, 2020; Clarke, 2005; Coopposamy, 2016; Botelle and Willott, 2020).

However, critiques of the method have also described it as simplistic due to its reductionist, subjective and categorising approaches (Dallos and Vetere, 2005). To counteract this critique, I aim drawing upon Foucault and Quijano's theories to inform the analysis.

A theme is a systematic reoccurrence or pattern identified in a dataset where meaning can be grouped around a main issue (Brink and Wood, 1997).

There are several approaches to TA: The inductive approach involves deriving meaning and creating themes from data without prior knowledge. A deductive approach involves the development of a hypothesis where there is prior knowledge.

Braun and Clarke (2006) highlight two components for data analysis, semantic and latent. A semantic approach identifies themes based on what is explicitly stated or written. A latent approach focuses on underlying meanings involving interpretation. Therefore, this research study will adopt an inductive, latent approach.

Braun and Clarke (2006) recommend a 6-step framework for conducting a TA:

1. Become familiar with the data
2. Generate initial codes
3. Search for themes
4. Review themes
5. Define theme
6. Write-up.

This process was designed to be recursive, prompting a review of earlier steps concerning new data or emerging themes that merit further investigation (Kiger and Varpio, 2020).

Applying Foucauldian and Quijano's concepts helped an interpretative process, which expanded and extended the thematic analysis - thus supporting analytic claims (Braun and Clarke, 2006; Coopooosamy, 2016).

This analysis aims to explore and identify constructions of the 'discursive objects' (Arribas-Ayllon and Walkerdine, 2010), specifically the HTR, which was supported by referring to the research question: '*What factors should be considered when engaging 'harder to reach' young people relationally in adolescent services?*'

Banister et al. (1995) state that analysis within qualitative research is not considered linear and often involves refinement. However, for coherence, the stages of analysis are presented in a linear format.

This study included:

- Six separate participant observations
- Four semi-structured interviews

The analysis consisted of two stages:

1. TA was conducted individually across all 'data sets' (ten in total).
2. Results were then thematically analysed for the final results (see appendix).

TA – the process

Step 1: Becoming familiar with the data:

I thoroughly read the field notes and the transcripts for familiarisation before the coding process, paying attention to words to identify potential patterns and

impressions. For the transcripts, non-verbal communication, such as tone and pauses, were considered so that meaning and their implications could be derived holistically. Thus, enabling me to be fully immersed in the 'data'.

Step 2: Generating initial codes:

Saldana (2016) defines a code as a basic raw data element that can be assessed meaningfully, however goes on to explain that coding is not a precise science but an interpretive act.

Filed notes and transcripts were explored according to the following analytic steps.

These were informed by Foucault and Quijano's theories and my research question:

1. Identify the events, objects, and experiences by considering the following questions: what is being constructed? How is it being constructed? What is not being talked about (what is absent)?
2. Identify discourses: topics constructed through language and knowledge (Hall, 2001) and influenced by power relations (McHoul and Grace, 1993; Coopoosamy, 2014) and the role of colonial control of knowledge and subjectivity within it.
3. Identify positioning: what positions are constructed relationally within the available local and cultural discourses (Kendall and Wickham, 1999; Coopoosamy, 2014) and the role of colonial control of gender and sexuality.
4. Identify practices: the social action made possible (Willig, 2008) through relevant constructions, subject positions, and the role of colonial control of authority within it.
5. Identify problematisations: who or what is being positioned as problematic regarding discourse and the consideration given to the wider socio-political

context (Arribas-Ayllon and Walkerdine, 2010; Coopposamy, 2014); and the role of colonial control of authority within it.

6. Note any contradictions and areas of clinical or theoretical interest or clinical ideas relating to HTR young people.

(It should be noted that the above points are interwoven and connected. Each colonial domain linked to Foucault's ideas was intended to provide focus and clarity for the analysis stage).

I summarised and condensed the data, creating a preliminary list of ideas that I organised into groups of significance. For example, the concept of mental health cross-culturally, the perception of HTR young people relating to the organisation and the power dynamics within this.

I used 'open coding' (Saldana, 2016), developing and modifying it as I worked through it. I was aware of the potential of taking a reductionist approach towards participants' experiences and upholding a colonising mentality. The fascination with making meaning of 'things', and systematically categorising experiences into hierarchy and labels could defy what I set out to do (Maclure, 2013) - to convey participant voices and to gain insight into a complex social issue.

All field notes and transcripts were explored using the above format. They were then re-read and refined to clarify the Foucault and Quijano informed interpretations, providing a reminder of earlier interpretations.

Stage 3: Searching for themes:

This phase aimed to establish potential themes according to codes to support the development of themes and subthemes. Codes were organised into broader themes, which said something specific about my research question. Relating it to Foucault

and Quijano's informed notations which were predominately descriptive, highlighting patterns.

Braun and Clarke (2006) assert there are no set rules about what makes a theme and is characterised by its significance. Suggesting considerable overlaps between coding and identifying preliminary themes.

The codes were then examined with some clearly fitting into a theme, for instance, services positioning of the young people, or practitioners wanting to be heard. I considered how different codes could combine, forming an overarching theme whilst acknowledging that they did not simply emerge. Instead, are constructed through analysing, combining and comparing how codes relate to one another (Keiger and Varpio, 2020; Coopooosamy, 2016).

Stage 4: Reviewing themes:

This stage aims to develop coherence and distinction between themes. I drew upon Maguire and Delahun (2017) who propose two principles: internal homogeneity and external heterogeneity. Data inside themes should be meaningfully related and differentiable whilst ensuring commonality and coherence.

Stage 5: Defining and naming themes:

This stage aimed to clarify the themes, considering if and how they represented the dataset into a coherent narrative. I refined the themes by summarising the scope and contents relating to Foucault's and Quijano's concepts on power and the research question.

Stage 6: Producing the report:

This stage is the final stage of an analysis, where final themes and extracts are developed and presented as a report based on the research question and relevant literature. The results and discussion will be presented in the next chapter

4 CHAPTER 4: ANALYSIS AND RESULTS ¹

4.1 Introduction

The purpose of this chapter is to present the analysis and findings from this study.

4.2 Analysis

This section depicts three themes, alongside five subthemes, from a Foucauldian and Quijano-informed thematic analysis of the ethnographic and semi-structured-interview data. The individual (micro) perspectives, experiences and constructions of this study's young people and professionals will be analysed below.

The remaining three organisational (macro) themes and the seven subthemes will be presented in the next chapter, which is informed by this chapter's themes. The next chapter's themes will be orientated within the theoretical sphere of Foucault and Quijano's ideas in broader terms.

4.3 Themes from a Micro perspective

1. Language, stigma and positioning of young people

The first theme from the data analysis is the language, stigma, and positioning of young people by practitioners in the adolescent team and the alternative provision.

Sub-theme i. Language and positioning

The first two extracts are in conversation with the practitioners from the adolescent team, who give their perspectives on engaging young people who are described as hard to reach/engage

Extract 1 - semi-structured interview: practitioner 1

For me, I think 'engagement', as a word, is one I've always struggled with quite a lot. I think the reason is because it puts the onus on the young person to link in

with the service, when actually it's not their responsibility in that, and the power around that in terms of us...

Practitioner 1 problematises using the term engagement for the young people she works with. She explains that engagement places sole responsibility upon the young people as something they have to do rather than the organisation/practitioner.

Practitioner 1 goes on to say:

Extract 2 – semi-structured interview: Practitioner 1

They have to come to us, which actually needs to be very much the other way round, which is why I think the word - the term - 'hard to reach' is much more appropriate than 'hard to engage'...

Practitioner 1 further constructs the organisation as needing to put the work in when it comes to the engagement of young people within the adolescent team.

These two extracts present a potential barrier that practitioners may face when attempting to engage young people positioned by their service as HTR, or more specifically – hard to engage.

The acknowledgement by Practitioner 1 of the expectation placed upon the young people by services to engage as a one-way process (rather than reciprocal) demonstrates the power of language and positioning of the young people from the outset. This becomes problematic as it portrays the young people negatively, creating constraints in the 'engagement process.'

As a British Pakistani man and insider researcher who was described as hard to engage and having an 'attitude problem' by the adults around me in my adolescence bring into focus Practitioner 1's points surrounding the negative positioning of the young people within the adolescent team and alternative education provision.

For example, being described as having an attitude problem led me to 'act into role', arguably facilitating a self-fulfilling prophecy resulting in my expulsion from several schools and creating a recursive pattern of unhelpful positioning and labelling by some of the adults around me. This recursive pattern may have been exacerbated by the expectation for me to show a willingness to engage with adults. Furthermore, I may have been waiting for an adult to pay an interest in me as a demonstration of care and trust.

The following extract is taken from the participant observations within the alternative provision. My curiosity about age, race and relatability was piqued in conversation with the deputy head (DH) of the provision, who explained the thinking behind the staff he employed.

Extract 3 – participant observations: alternative provision

The DH continued by stating that they would employ almost anyone with any background, if they had the right 'mindset'. I was curious about what this looked like, and who decided who had the right mindset - but did not ask this out loud.

The deputy head constructs having the right mindset or approach as a key factor to working in the AP. One could hypothesise that from this statement, the deputy head is implying that the staff's background can be overlooked in respect of having similar experiences to the young people they worked with.

Extract 4 – participant observation: alternative provision

...Again, I wondered why the DH was saying this to me, as I had become curious about the amount of young BAME staff, and then wondered about the

relatability between younger staff, younger black staff, and the older senior white staff. Did age and colour matter, did something get lost if you were not the same colour, younger or from the area or had a colourful past?

These questions then made me think about my historic narrative, my relatability and ability to engage those who were not 'engageable' in my professional and personal life, but also that I was a rarity in respect of my senior's leadership role and academic achievements. Meaning, I talked and sounded like a support worker but was still able to speak the 'language' at a senior management level.

This was specifically noted by a staff member as she noted that I did not sound like a researcher or clinical lead – meaning I sounded cockney and 'street'.

The above extract further highlights the complexity within the positioning of what is perceived as relatability or 'sameness'—being able to sound or look the same as the young person is constructed in the above extract as a key factor in engaging HTR young people.

However, sameness may constrain curiosity, hindering the relationship between the practitioner and the young person. Furthermore, the positioning of predominantly Global Majority practitioners as being relatable can be restrictive regarding professional stereotypes and opportunities – where senior roles may not be achieved.

The above observations and reflections informed the questions for the interview component of this study. In the following extracts the participants were asked if gender, age, ethnicity, and/or location were important for the relational process for engaging young people described as HTR.

Extract 4 - semi-structured interview: practitioner 1

Yes, I think it does, and, I think, in lots of different factors...I don't know if it's a benefit or not, being really young in this job, or not. I'm not really young.

(Laughter) I'm in my 30s now, but it's that thing of relatability, I think....

...So, I think I've had to be a little bit older to do this job and to do it in a position I feel comfortable with...being from the area, yes, I can definitely see that being a help. I think young people definitely resonate with practitioners that know the local area well, and are from that area and have grown up there themselves...

...So, to be honest, I think young people think I'm this quite strange woman that turns up. (Laughter) Just, yes, they think I'm bizarre, quite honestly, just with things I like, the things I wear, the things I say.

Practitioner 1 positions age as a factor in engaging young people in her work – she constructs having practitioner experience as an essential component and having similarities with the young people, such as being from the same neighbourhood and having comparable experiences.

Practitioner 1 does not address the question of race/ethnicity nor gender explicitly in the conversation but positions herself as being a quirky woman. We can surmise that practitioner 1 difference of 'strangeness' facilitates engagement.

As she explains:

Extract 5 - semi-structured interview: practitioner 1.

I think it's about acknowledging difference from the outset. I think the thing is young people will see through as soon as you step into the room, (Laughter) and they'll know who you are. You must just acknowledge it, so you can never pretend to be something you're not, because, as soon as you do that, you've lost them.

Practitioner 1 talks about a need for transparency with young people from the outset, which appears to be constructed as being important for the relational process. She implies the process is reciprocal and two-way – rather than something the practitioner outputs.

Practitioner 1 also seems to contradict herself, as she constructs similarities as a benefit but positions her difference as a benefit also, which she names from the outset as relational intervention with the young people.

In the following extract, Practitioner 2 was asked the same questions as Practitioner 1.

Extract 6 - semi-structured interview: Practitioner 2

...it really doesn't matter at all. And the reason I say that is, for example, me and [name omitted], I'm a Black male, she's a White female. She's an amazing social worker. She's insanely amazing at her job. So, for me, I don't think race, gender, and these things play a role.

...if someone turned around and said to me, "There's a load of these social workers, they're White, or they're female. They can't work in this- you wouldn't be the best to work in this borough." I'd say, "That's nonsense."

It appears that Practitioner 2, constructs age, gender, ethnicity/race as being non-factor when engaging young people open to the adolescent team. He positions his colleague, White and female, as a talented practitioner, negating race/ethnicity as a factor to consider when engaging young people. He challenges the idea that Global Majority young people needing male Global Majority practitioners for the relation engagement process, constructing it as 'nonsense'.

Practitioner 2's views are in direct opposition to practitioner 1's perspective. Bringing into focus wider societal discourses on Global Majority males and the need for similarities to promote healthy role modelling. Furthermore, practitioner 1 may have been demonstrating a White fragility and sub-conscious bias. For instance, being a White woman may have brought on insecurities (from her perspective) surrounding the taboo topic of race – regardless of her training and learning.

The following extracts draw upon the young people's views relating to the same questions posed to the practitioners.

Extract 7 - semi-structured interview: student 1

No, it wouldn't matter. It's just about, like, what you see and where you're from, innit?

...Like, if you come from somewhere, like where I've come from, you'll

understand it more. And if you don't understand it, you're not going to have the same respect or the same understanding as me.... I'll look at you, you might feel my pain, but I'm just going to laugh because I know you don't, you know what I'm saying?

Extract 8 - semi-structured interview student 2

No, to me, I just think it's the same. It just depends on how they talk to me.

You know? It doesn't matter which gender they are to me. It's just...I don't

know how to explain it. If they approached me in a nice way, in a respectful way,

I would do the same back.

In both extracts (7 and 8), the young people construct race, gender, and age as not being as important as being genuine – which I describe as ‘relational authenticity’.

That is a meaningful and reciprocal connection that is genuine and transparent. As both students are from the Global Majority, it further leads to a curiosity surrounding practitioner 1's possible discomfort at explicitly addressing and/or naming race within the interview.

This may cause a barrier in the engagement process, as it appears that practitioner 1 problematises differences in race via an avoidance to address it directly. We can hypothesise this may also be the case in sessions with young people – an avoidance of race, arguably a vital aspect of the young people's lived experiences.

The positioning of young people as HTR, who present as challenging and displaying anti-social behaviours (by wider society) is challenged by the practitioner within the adolescent team, as highlighted in the following extract.

Extract 9 - semi-structured interview: practitioner 2

There's trauma that these young people have faced in the community and have seen. Whether they've been victims, or perpetrators, whether they've just been walking to school, and they've seen these signs of people being killed all the time. There's an erosion of self-confidence, self-esteem, and an identity issue.

Practitioner 2 appears to construct young people's behavioural issues being underpinned by a trauma which is related to violent crimes. He links this, consequently, to identity and self-esteem issues. Resulting is a possible need for the young people to seek out validation, acceptance and belonging in the wrong places, such as gangs.

This highlights the complexity and possibly a lack of understanding when attempting to engage young people with contextual safeguarding issues. In turn, something to consider when trying to build a relationship with young people described as HTR. As demonstrated further in the following extract:

Extract 10 - semi-structured interview: practitioner 2.

I think many of the young people that we work with have additional learning needs, maybe in PRUs and things like this. There is a lack of them being diagnosed, and properly assessed...

...It's recognised that they have these issues, or that they're in the PRU [Alternative Education Provision], or they need assessments. But these things rarely happen, rarely take place... I think, obviously, there's a problem there with the way we look at these children, and sometimes, they're being criminalised, and sometimes, there's adultification stuff happening.

Practitioner 2 appears to locate the issue within services rather than young people. He constructs the way services position 'these children' as being criminals, seen as adults, rather than children who are traumatised. He also problematises a gap in appropriate and timely support beyond behavioural issues.

National statistics for the number of pupils AP for 2022/23 had increased by 13%, and over 70% of attendees were boys, of which a quarter were from the Global Majority (Fleary, 2023).

A Department for Education report into the special educational needs and disabilities of pupils (2023) found that 5.4% of Black Caribbean pupils were on an education, health and care plan, which came in second highest to pupils of an Irish traveller background who had a higher percentage.

These statistics link to Practitioner 2's assertion that the young people open to his caseload and attending the AP fall between the gaps within health, social care and education system due to a lack of appropriate assessment beyond behaviour management and social control.

Educationalists argue that AP's exclude children from mainstream schools to inflate exam success and impress Ofsted inspectors (Fleary, 2023; John, 2010). In light of this, a curiosity surrounding structural violence, poverty, institutional racism, gender,

racial stereotyping, profiling, and positioning is now brought into view, which undoubtedly are themes that intersect.

Extract 11: participant-observation – AP:

[deputy head] asserted that he felt that consistency and discipline worked with children with challenging behaviour and further explained that he felt that the children in the hall were not hard to engage as they were engaged.

The deputy head constructs discipline and consistency as key factors when managing challenging behaviours. He also appears to position the young people as not being HTR as they attend the school.

This extract punctuates the differing professional remits/contexts that inform the interventions and approaches towards the young people. One could argue that the deputy head's disciplinarian method reinforces Western societal expectations of children and social control.

The view that the young people were engaged could be seen as forced – as they attended the AP as a punitive measure and as a last chance. Their autonomy and choice were restricted and confined to a secure education facility, resulting in disguised compliance. The positioning (by services) of predominantly Global Majority male young people having behavioural issues rather than being children who have experienced complex to severe trauma highlights the power that language has when talking about HTR young people. Possibly creating a distance and desensitisation between practitioners and young people who become othered and treated like adults.

McAra and McVie (2016) found that expelled students were four times more likely to be jailed in adult life. Highlighting the vulnerability and need for trauma-informed

early interventions for the young people open to the adolescent team and those who attend the AP.

Thus, the theme of language, stigma and positioning of the young people described as HTR within the adolescent team and alternative provision is something that practitioners are invited to consider during the engagement process.

Sub-theme ii: Relational Authenticity

‘Keeping it real’ was a keyword and component constructed as essential to both young people when engaging with practitioners, regardless of the service they worked for.

Keeping it real appeared to mean transparency, mutual respect, authenticity and being relational, a two-way process. Thus, ‘relational authenticity’ is the term used to capture this.

Extract 12 - semi-structured interview: student 1

Real is, like, talking to your friends, like- Not that, yeah, you're still

remembering you're- I've still got the respect, like...

...It doesn't mean, like, you have to belittle me.

...I'm already getting punishment; I don't want to be here, bro. Like, you, getting paid for this on top of that, yeah, is just going to get me more annoyed that you think you could get put an opinion or something, like stuff like that...

Student 1 appears to problematise interactions with practitioners at the AP, which is framed by interventions being a punitive measure. For instance, attending the AP and sessions with adolescent team members due to a mandated court order.

He constructs ‘being real’ with practitioners as talking to a friend whilst understanding the interaction context. He punctuates mutual respect, not being disrespected, and

being treated like a 'normal' person, as opposed to (it appears) a child (as a negative) who is looked down upon, othered, and punished.

Extract 13 – participant observation: alternative provision.

Whilst at the table several young males asked who I was, I explained and at times [name omitted] also supported me with this, sharing what I was there to do. Two young people (boys, one Asian and one White) passionately, explained that Hanna, is really 'good' member of staff. I became curious and asked what this looked like and what made her good. They explained that she keeps it real, listens, she cares, and pays an interest in them, checking in without them asking. The young people in extract 13 further punctuate 'keeping it real' or relational authenticity as a vital part of a relationship with adults regardless of race, age or culture.

Bolton and Laaser (2021) highlight the importance of relationship-based work with young people who attend AP (which could be extended to mandated services such as the adolescent team). The writers coin the term 'structural toxicity' to refer to the policies, structures and policies which guide AP's where contexts of compassion, empathy and sensitivity are not facilitated due to behavioural management and social control being top of the agenda.

Toxicity, as asserted by Bolton and Laaser (2021), is experienced by practitioners within AP's in different ways. This point can be clearly linked to the theme of practitioner ambivalence, disconnection and meaning making within this study. This may be a consequence (as discussed) of practitioner burnout and disillusionment, which may translate into structural and relational toxicity in the interventions provided to the young people.

The writers explain that relational work between practitioners and students is infused with levels of intimacy maintained through different expressions of compassion, which can inhibit or foster meaningful interventions and relationships with young people (Bolton and Lasser, 2021).

This also appears to be the case for the young people within this study as fostering meaningful relationships via relational authenticity was an important part of the engagement process for the young people.

Sub-theme iii: Love and compassion.

Undoubtedly, relational authenticity and respect are intrinsically connected to the emotional health and mental well-being of young people within the study. Love and compassion were also a themes that emerged from the data. Although not made explicit, it was suggested as a vital component and contributor towards engaging young people described as HTR as the following extract demonstrates.

Extract 14 - semi-structured interview: student 1

...but I've been to places like [PRU's] where they don't care. They're just there to get paid. With these people here, they actually, like- I don't know. They're interested, you get it?...

...I'm not saying that you have to have love for me or nothing. I'm just saying you've got to actually care. Like, it's a bigger role than just a job, you get what I'm saying?

Student 1 constructs paying an interest in him, equating to demonstrating care, punctuating there is no expectation of love.

However, it could be argued that love, empathy, and compassion are what student 1 is yearning for and needs (as he constructs his current AP being better than previous

experiences due to this 'interest' in him), which he may otherwise not have been used to or experienced; due to possible feelings of self-consciousness due to toxic masculine scripts, learnt behaviours and/or societal narratives, where love and compassion are perceived as a weakness. Furthermore, student 1 may have normalised his trauma (gang violence, crime, etc), creating desensitisation towards risk as it may be all he has ever known.

Complex trauma describes both children's exposure to multiple traumatic events, which often are of an invasive and interpersonal nature. These events are severe and pervasive, such as abuse or profound neglect. For example, domestic violence, physical, verbal, emotional, and sexual abuse; exposure to interpersonal violence; and physical and emotional neglect (Cobbett, 2022; May-Chahal and Cawson, 2005).

Resulting in a possible negative recursive cycle, where young people such as student 1, seeks out unhealthy attachments in search of validation and acceptance in the context of his developmental transition through adolescence.

Extract 15 - semi-structured interview: student 1

With these social workers and all of that, you need to- Like, bro, put this into your position. Imagine this was your nephew or your niece, how would you feel?

You get it?

In the above extract, student 1 appears to invite practitioners to demonstrate empathy by standing outside of themselves and imagining that they were working with a member of their own family. He continues by questioning how 'we' (practitioners) would respond and feel and appears to invite us to consider this dilemma, whilst adopting the same approach with other young people, like himself.

Extract 16 - participant observation: AP

I initiated a conversation with him, asking how long he had been coming to the school. He replied, nearly 1 year and stated that he did not like it because it was a prison (this has been stated as a negative by staff and young people repeatedly), and proceeded to say, nevertheless, some of the staff members were cool. I asked what made them cool, and he said that they paid an interest - and used anon as an example (this was the second time a young male had described anon as paying an interest and that is why he liked her).

The young person in the above extract further highlights the importance of practitioners paying interest, as he constructs his 'favourite' practitioner as paying the 'most' interest in him.

The theme of paying a genuine interest in the young people's lives, in addition to respect, appears to be constructed and possibly internalised as a show of care and compassion.

According to Carona et al. (2017), "...interpersonal relationships, compassion can be viewed as a flow: there is the compassion we feel for others, the compassion we are open to receive from others, and self-compassion" (p.240). The idea of flow within compassion fits well with the exchange and reciprocal nature of a systemic and relational authentic way of being.

Extract 17 - semi-structured interview: student 1

I don't know, like... Sometimes we don't need medicine. Sometimes all we need is a hug. And I don't think people realise that. Like, that's all I would say, to be real.

In the above and final extract, student 1 constructs a need for a hug over 'medicine', which we can infer as an intervention fuelled by a need to solve a problem. Such as disciplinarian, punitive, safeguarding and/or psychological measures.

We can hypothesise that a need for physical touch may be seen, positioned, and constructed as a demonstration of love. Love, in its purest form, and without hidden agendas.

Love, as a Western construct and from experience, appears to be taboo within talking therapies. However, there are many examples where love (in the non-erotic, romantic or desired sense) conveys a dedication towards empowering clients to live fulfilling and healthy lives.

There are examples of therapeutic alliance, joining and other therapeutic processes that encapsulate ethical love in relationships between the therapist and the client.

For instance, Roger's (1951) person-centred approach considers the unique and multifaceted nature of the client and accepts them in their entirety – which is referred to as 'unconditional positive regard'. Buber's (1965) theory of genuine dialogue proposes that dialogue is much more than just talking; at its core, it is an authentic form of communication and the relational process of being truly present and holding the other in mind. Or systemic core ideas that emphasise client differences, contexts, and realities, which is (ideally) demonstrated via profound respect for supporting families/clients in achieving their goals.

Furthermore, I suggest that practitioners who demonstrate relational, empathetic, compassionate, sensitive, and understanding approaches towards clients are versions and reframes of love.

Thus, Love and compassion role-modelled thoughtfully and ethically in interventions may facilitate a more meaningful relational process for engagement with young

people such as student 1. Who explained that paying an interest, showing respect, treating clients like family members, and sometimes needing a hug is all it takes, rather than academic and theorised solutions.

The extracts above provide a snapshot into the lived experience of the young people within this study. The themes thus far are not intended to be generalisable to the wider population in the UK. However, it may provide insights into some of the key factors to consider when attempting to understand the issue of engaging young people labelled by services as HTR or engage.

Links to Foucault

The formulation of the themes presented was informed by Foucault and Quijano's theories; thus it is fitting to highlight how their ideas informed this analysis and findings.

Foucault (1977) considered young people a vital social group in challenging and resisting power structures. Positioning them as agents of change, able to transform and question political and social dynamics. He asserted that identities are shaped by social institutions (such as AP's and the adolescent team), which includes young people. However, he argued that young people are more able to rebel against social norms and expectations due to their identities being constantly constructed. For instance, as young people transition and navigate their way through adolescence, they attempt to make sense of who they are about the world around them. This means navigating where they 'fit' (or not) in the context of wider socio-political ideologies and discourses.

Foucault rejects that power can be exercised or is exclusively in the hands of one set of people, asserting that "*power is everywhere*" (Foucault, 1977, p.93). Gallagher

(2008) invites us to look at ways power is implemented through “*networks of relations*” (p.399), which may be a more helpful way of thinking about power dynamics between young people and services.

For example, the student’s voice in the AP may be facilitated in the context of a student voice forum. Power, in the Foucauldian sense, would consider how power is exercised by the members in the forum and how the wider network of students in the AP influences and has power over the student forum members (and vice versa). Included in this network of power would be the teachers and head teachers and the influence of power and governance over the student voice forum, the network of power grows further, considering the influence of the adolescent team, local policy, and law.

Thus, power can be considered systemic and relational as it involves more than two objects (institution/organisation) or people. It will vary according to the context and nature of these relationships and the resources available to them – such as social, material, and cultural influences. It is suggested that focusing on power networks in relationships between students and practitioners (specifically) may be useful for promoting student participation and co-production (Prout and Tisdall, 2006; Gallagher, 2008).

It is further suggested an awareness of the systemic, and ‘relational network of power’ between adolescent services and young people described as HTR may provide further insight into how to navigate some of the challenges faced when formulating and providing interventions. For instance, how do the young people exercise their power to fulfil, resist, colonise, reproduce, or appropriate the power exercised over them by social workers, teachers, therapists and so on? How do the

practitioners (within their differing professional remits) exercise their power bound by their organisation's aims?

Furthermore, paying attention to the relational network (connections) of power between objects and people and decolonising approaches may be helpful when working cross-culturally with young people positioned by services as HTR, regardless of the professional context.

Links to Quijano

Quijano's control of knowledge and subjectivity within his colonial matrix of power helps us understand the role of power from a decolonial perspective within the sub-theme of compassion and love. If decolonisation is about recognising what we consider acceptable, and the norm is a result of Westernisation; then this includes what we consider as family, fun and even love – which has been shaped by colonisation.

When love comes to mind, we tend to relate it to romance or eroticism, framed by Western morals and values surrounding monogamy, marriage righteousness, union, family, and sanctity. TallBear and Wiley (2019) explain that non-monogamy is profoundly political and has its roots in capitalism, which was enforced through violence upon colonised Indigenous peoples who were seen as barbaric and in need of civilising. They further explain that our current global standard for relationship structures resulted from British colonial evangelical ideals. Where non-monogamy is positioned as immoral, debase, a disguise for non-commitment, and/or selfishness. The monogamist, couple-centric nuclear family is seen as the universal standard for all to conform to.

Thus, societal discourses surrounding heterosexuality, gender positions and monogamy influence us from childhood to adulthood via outlets such as the media, film, arts, literature, institutions such as schools, etc. Romance is, therefore, positioned as something to aspire to and is the highest context within these relationships.

In this sense, love becomes taboo within a professional setting, as it is generally equated to romantic love. As may have been the case for student 1 when describing what he wanted from practitioners, which was care, a hug and interest in him.

Student 1 explicitly stated he was not asking to be loved, which may have been through a fear of rejection and/or a Westernised colonial control over subjectivity and knowledge regarding what is societally perceived as love.

To show our clients compassion and love, this must begin with ourselves and extend to our professional contexts. However, as demonstrated and discussed, this is not as easy as conveyed.

Considering how societal, colonial conditioning on love, emotions and what it means to be a professional would mean taking a 'relational risk'.

Mason (2018) explains that relational risk-taking can promote and enhance the therapeutic alliance, resulting in trust being built with clients. It invites the practitioner to 'own' their position and its influence on the therapeutic relationship. In other words, it means the risk of having something to lose relationally by sharing something with someone. However, it can be at the cost of feeling fearful, anxious, or worried that you might be making a mistake, look silly or offend, resulting in embarrassment.

For example, practitioner 1 appeared avoidant regarding her Whiteness in engaging young people, underpinned by her insecurity. Therefore, taking a relational risk

brings into question one's *relationship* to risk. Taking a risk would mean having an element of confidence and assertiveness, which all may not be comfortable with, regardless of the intent and/or training.

For instance, having been excluded from several schools in my childhood, as well as being brought up in a particularly deprived area of London with high numbers of crime and violence, may have desensitised me to risk-taking.

Hence, the vital importance of continually reflecting on one's ethics and intentions when working with vulnerable people, as what we do, arguably says more about ourselves than the clients that we are working with.

Links to self

Student 1 profoundly impacted me, specifically his statements requesting to be treated as if he was one of my own family, needing a hug and love rather than to solve the problem. This left me feeling embarrassed as I wondered if I had fallen into a possible ambivalence and complacency with clients due to organisational pressures similar to those in this study.

I wonder if my intervention's focus has fallen into an intellectual/theoretical frame, where the need to explain/evidence my intentions via formulations and hypotheses had become the overriding factor. Furthermore, had the core fundamentals within human relationships been lost, which should be compassion and love at its core? Undoubtedly, theory informs and encourages my practice to be thoughtful, collaborative, and ethical whilst placing the young people at the forefront. However, as this study has shown, there are dilemmas in the 'relational network of power' between Global Majority young people framed within a criminal justice and social care context and described by services as harder to reach or engage.

2. Agents of the state versus agents of social change

The second theme of this study is primarily a result of the ethnography, which was based on my observations within the adolescent team meetings. Practitioners appear to construct and navigate the implicit (and explicit) tension between bureaucratic procedure, evidencing of their work, and having time to build meaningful connections with young people described and positioned as HTR.

In the first extract, practitioner 2, a social worker in the adolescent team problematises the organisation (social care senior managers) as not taking into account the time it takes to foster meaningful relationships with the young people.

Extract 18 – semi-structured interview: Practitioner 2

It [the organisation] doesn't take into account the support they [young people] need. It doesn't take into account how much time they would need to actually build a relationship, do constructive pieces of work. So, we have very limited time that organisations give us, and they don't acknowledge the complexity of these individuals.

Practitioner 2 appears to construct the lack of acknowledgement by senior staff members to imply that process's such as report writing, evidencing of work and timeframes may take priority over the time required for engaging young people described as HTR.

Practitioner 2 goes on to explain:

Extract 19 – semi-structured interview: Practitioner 2

...I think another thing that we're not in touch as organisations with what is happening in our communities...If it's community work, surely, you're spending the majority of your time outside. So, then, how do you balance? we're

constantly on the go, doing the practical, but we don't get the balance to do the actual work, which impacts on the quality of the work, on the ability for professionals to reflect and plan...And on the ability to actually measure progress. If they're going to measure via the documents, and the things that we write.

Practitioner 2 further problematises senior managers within his organisation as not 'being in touch' with the work that the team has been set up to do, that is, outreach/community work. He poses the dilemma of not having the time to accurately reflect, formulate and translate the work in his report writing.

This further implies a pressure placed upon practitioner 2 to evidence his work by senior managers. In turn, this contradicts the purpose of the adolescent team's focus –to have a reduced caseload to enable more time to engage young people with contextual safeguarding concerns.

The compassion and empathy displayed by Practitioner 2 is apparent. However, the pressures placed upon him to evidence his work within timeframes question what becomes privileged. That is, the young people or the organisations need to adhere to bureaucratic processes. For example, getting the young people to comply with their youth justice orders, engage in education and contribute positively to the community that they live in.

The following extracts further demonstrate the need for practitioners within the adolescent team to evidence their work (inadvertently placing the organisation above the young people), which upholds practitioner 2's dilemma of weighing out

evidencing his work versus time spent forming meaningful relationships in the community.

Extract 20 – participant observation: adolescent team meeting

The managers spoke about 'thresholds' being higher and the need for more "evidence" when disclosures are made - which has implications for cases...I appreciated why we had forms, process and procedures in place, but it felt very binary and mechanical with a lot of time spent on discussing the literal 'ticking' of a box on a form...

Extract 21 – participant observation: adolescent team meeting

...the same topic as the last session, social workers needing to provide more evidence when making referrals. [Anon] acknowledged that it was harder for their team to provide evidence when there were disclosures made rather than concrete 'evidence.'

Again, I was just as struck by the bureaucratic language as I was in the first session - I was curious about the mechanic and repetitive nature of the way the team spoke about the children - I wondered if they were desensitised to the human and relational elements of the 'cases' they discussed and if the organisational process created a distance between vulnerable human beings and the team/professionals.

Extract 20 and 21 punctuate the need for adolescent team members to evidence their work, which is constructed as thresholds of acceptance of lower referrals and possibly capacity issues regarding community needs and what the team can offer.

The following extract further upholds the view of practitioners being positioned as placing the needs of the 'state' or organisation above the needs of the young people.

Extract 22 – participant observation: adolescent team meeting

Further talk surrounding record keeping and it being up to date - such as chronologies, case summaries were had - again the team remained quiet. I wondered about the role of 'big brother' always watching - big brother being the senior bosses. I thought about trust, and autonomy and the ability to be able to speak out and challenge. I also wondered about the training, theory, policy, and practice promoting collaborative, partnership working but something becoming lost in practice - I also thought about how this related to practice with the young people. For instance, the team members possibly feeling powerless, which may be how the young people and families feel when working with the adolescent team.

I wondered about the doubled themed message that the management was sending out to the team; being supportive as well as being under surveillance - and wondered if this was contradictory and if the team felt like this too.

Furthermore, how this equated or was it mirrored within the client/caseload system - interactions with the young people.

I felt uncomfortable (across all the observations within the adolescent team meetings), at the drive for organisational procedure being the higher context rather than discussing the barriers/constraints or what was working when engaging the

young people. As I write this, I wonder if this discomfort was due to my silence as a participant observer and not commenting on the disconnection between what the adolescent team was set up for and what was high on the agenda within team meetings – to evidence and meet thresholds.

Bringing into question the true nature of the adolescent team's function and the expectations of the members within it. To be agents of the state (local authority/organisation) or agents of social change.

The silence I displayed was a connecting theme across all ethnographic observations within the adolescent team meetings. As the following extract demonstrates

Extract 23 – participant observation: adolescent team meeting

I was struck by the silence of the team, I expected or maybe hoped they would take this point up or be triggered by the injustice and maybe challenge what was being said. Maybe this was in the context of social work being a role to address the injustices in society...

The incongruity between the team meeting's organisational agenda surrounding the process versus the work that practitioners were commissioned to do, which was community/outreach work, was a tension that was apparent, not only for me but as demonstrated via this study, the practitioners also. This was further exacerbated by the practitioner's silence within the team meetings, which can be hypothesised as a communication of the disillusionment and/or burnout from the organisational pressures they faced to meet deadlines, targets and evidence the work that they were doing, rather than placing the young people at the heart of the work.

It can be argued that social care (and health) practitioners unintentionally became agents of the state (government) by reinforcing the status quo of what is societally deemed acceptable and expected of the young people who were open to the adolescent team or attend the alternative education provision—resulting in practitioners promoting a coercive form of social control on behalf of the state/local authority/organisation.

Social control is an essential part of modern societies. Governments secure adherence to societal norms, morals, and principles and suppress any form of deviance away from the social order (Foucault, 1980; Feldman, 2020; Deflem, 2015; Higgins, 1980).

Feldman (2020) suggests that practitioners as agents of social control go hand in hand but are less discussed than practitioners creating social change and addressing the inequalities within our society.

Beckett and Herbert (2010), Piven and Cloward (1993), Soss and Weaver (2017) and Feldman (2020) assert that social control focuses more on the marginalised groups than the rest of society, which creates a bias in itself. For example, the ‘stop and search’ policy by police related to Global Majority young people within this study focuses on public concerns regarding Global Majority adolescents and anti-social behaviour.

Quijano (2000), Mignolo (2010) and Lugones (2010) would scaffold upon this view by adding that the social control positioned by the government privileges and benefits White patriarchy and is a direct result of colonialism, which is currently promoted as a universal and superior approach towards democracy, civilisation, and modernity.

The question remains whether practitioners in the adolescent team were able to balance a both/and stance towards being agents of social change for the young people and social control for the state.

From this study, it appears that practitioners were, reluctantly, agents of the state due to pressures from the organisation, resulting in being agents of the state, which outweighed being agents for social change.

It also appears this dilemma is yet to be reconciled. It is constructed as a barrier to consider when engaging HTR young people within the YOS, adolescent team and contextual safeguarding context.

3. Professional ambivalence – disconnection and meaning-making.

Professional ambivalence was a theme that was observed within the participant observations. As shown in the following sub-themes, it became apparent that a possible ambivalence towards their work was connected to wider organisational pressures and demands as shown in

Sub-theme i: Emotional well-being

In the following extract, practitioner 1 discusses the lack of resources equating to time being taken away from forming meaningful relationships with young people—also, the lack of appreciation for social workers and the team being overstretched.

Extract 24 - semi-structured interview: Practitioner 1

'The point, I think, I'm trying to make was just that what we do isn't reflected, necessarily, in our caseload. Yes, it doesn't, by any means, mean we have more time, necessarily, even to engage young people, because there are similar pressures in terms of paperwork... I guess, all services are stretched to some

extent, so everyone is under the pressure. So, if everyone was better resourced, I think that would have a knock-on impact'.

It appears that practitioner 1 was constructing her pressures of being overstretched and under-resourced and her work not being captured fully in her paperwork as something more generalised that all health and social care teams faced.

I wondered whether practitioner 1 felt unable to take ownership of her feelings due to a lack of containment, trust, or safety, as one might get in clinical supervision.

Furthermore, I wondered if Practitioner 1 worried about how her views may be perceived – such as being negative or complaining. Therefore, the hypothesis that she used the term 'everyone' to provide a buffer or distance between herself and the organisation is placed in a negative light.

The following extracts are taken from the same observation which scaffolds upon the idea of emotional and psychological safety and trust.

Extract 25 - participant observation: adolescent team meeting:

...there was an apparent (or at least to me) 'us and them' between the social workers and managers. I was struck by the silence of the team...

... Again, the team was very quiet, which wasn't talked to, I wondered if it was like this all the time. [Manager] then talked about team members managing risk and social worker autonomy...Using their own judgment vs managers telling what to do...However, a female black social worker challenged this stating that, being autonomous in theory was all well and good, however would she be reprimanded in practice.

The silence in the adolescent team meetings was a consistent theme across all observations. The link between practitioner 1 feeling overstretched and the silence and divide between practitioners and management in the above two extracts implies practitioners' feelings of a lack of safety and trust.

The practitioner who speaks out in the above extract upholds the view of lack of safety by problematising a disconnect between managers' good intentions and how this equates to practice. Organisational pressures (as we will see), such as needing to justify the spent in the community, may have resulted in feelings of disillusionment and undervalue, creating a context of desensitisation and/or burnout relating to the engagement with young people.

Extract 26 - participant observation: adolescent team

The black male (the only one in the team) spoke about being exhausted but, reframed this as getting out what you put in with clients, that is, working all hours is a necessity in the context of their young people.

The male practitioner initially appears to position his exhaustion to convey his emotional well-being. However, then constructs it as a service requirement for young people with complex needs. I wondered what this re-positioning meant for the team and how his gender influenced it (being the only male). That is societal gender positioning, toxic masculine discourses on emotions as a sign of weakness and asking for support. Did the practitioners reframe of exhaustion position the rest team regarding expectations to go 'above and beyond' at the cost of your well-being? And did the male practitioner's views hold more value than others regarding his gender in the context of a society that privileges patriarchy?

Extract 27 - participant observation: AP

...another white female teacher came over to me, explaining that she was the English teacher and was at the start of her PhD. She shared her views on how staff speak about children in meetings with other professionals, that it was not relational, and something gets lost, and they (young people) are seen as 'cases.' I wondered at this point, why she felt so comfortable to share so much with me, as was the case with the Head teacher, Deputy Head, [name omitted] and, the Pastoral care.

The above extract appears to convey a need, for practitioners (across both organisations) to be heard, valued and possibly their anxiety contained. The practitioner's role (regardless of remit) was to attend to and contain vulnerable young people. I wondered if the practitioners were looking for the same human, relational connection and containment they were employed to do with the young people but were not getting from their peers or managers.

Resulting in possible desensitisation, compassion fatigue and/or ambivalence when working with the young people. Additionally, the lack of clinical supervision, or therapeutic support for practitioners across both organisations may have contributed towards the disconnection between engaging young people described as HTR.

Extract 28 - semi-structured interview: student 1

but it's a thing where it's like, I will open up to you if you show me, you're a real person. And that's what I don't like, because people- "Oh, you got a big job, yeah? So you're going to move like you're not a human- You're forgetting..."

That's what it is, you want to move like you're not human and follow this law and that, you're going to make me feel like an animal and I'll just start moving [and that, you get it, like? 0:13:27] And that's what it is.

Student 1 constructs and locates the problem within the practitioners' approach towards him. He speaks of being treated like an animal and practitioners being non-human. This non-human or mechanical approach may be linked to the disconnection, ambivalence and lack of emotional support practitioners receive within the organisational setting.

In a nationwide study using a large representative sample, researching the mental health statistics of burnout within health and social workers in a social care setting in 2023 highlighted that 91% of UK social care practitioners scored high for moderate to high emotional exhaustion and 60% of social workers experienced anxiety, with 33% of practitioners who experienced high burnout rates worked within the field of child protection (McFadden, 2023).

These statistics are essential for punctuating the role of managerial support and healthy emotional well-being, and effective service delivery for the practitioners in this study, especially in the context of working with highly vulnerable and complex trauma needs with young people.

The theme of practitioner ambivalence and disconnection relating to the work of the practitioners within this study, as the data demonstrates, may be a result of compassion fatigue, feelings of disillusionment in their role and a lack of support from their organisational leads, which is something to be considered when engaging

young people described as HTR and may also be a hindrance to the relational process.

Sub-theme ii: Isomorphic process

As the observations and the data analysis progressed, it became apparent that a more pertinent question had to be asked. 'Who' was the harder to reach - the young people or health, social care, education practitioners, and me?

This question arose from what systemic psychotherapy refers to as Isomorphism. When a family's (or, in this case, the young people/clients) problem interactions/patterns (being HTR) are replicated within the therapist/client (practitioner/organisation) interactions (Bernard and Goodyear, 2009; Kaufman, et al. 2001; White and Russell, 1997), simply put, it can be seen as mirroring the client system.

The hypothesis the practitioners within this study were mirroring the young people's presentations for validation, and human and relational connection is plausible. Scaffolded upon the theme of professional ambivalence and meaning-making, one could argue that it is the service that are the harder to reach rather than the young people and it is this that contributes (albeit negatively) to the relational processes for engaging 'hard to reach' young people in adolescent service.

As the following extracts demonstrate:

Extract 29 - participant observation: alternative education provision.

The English teacher carried the conversation on towards the end as I needed to be let out of the building, it seemed as though she was in a need for a space to talk and be heard. As she walked with me to the car park, she shared things

that were personal to her and her experience of social care services, the conversation felt very rushed, bordering manic, and secretive as she repeatedly stated that she had to be back on the premises. I felt like we were going to get into trouble, or we were doing something wrong, and were going to get caught out at any moment.

The teacher I encountered three times seemed to want to be seen and heard. This was also the case with several other AP practitioners. It invoked a curiosity about the practitioner's role as moderator of young people behaviour and a lack of compassion, empathy or relational engagement, which arguably would impact their interactions.

The question arose upon reflection within my data analysis and in conversation with peers and supervisor. I began to realise that I was possibly mirroring the ambivalence and/or disconnection within the system that I was observing and as a result playing out the interactions of disengagement between the practitioners and the young people.. Thus, the theme (although not explicit) of isomorphism arises and becomes plausible and pertinent.

Extract 30 – participant observations: alternative provision

...As I left the car park in my car, I felt emotionally heavy - which I now locate in my direct experiences with the teachers...I wonder whether the professionals whether it be in health and social care or education were feeling burnt out and were yearning for a connection or the same therapeutic, relational, emotional support that they gave the children they were working with.

The above extract highlights the emotional strain I felt, which I located directly from the interactions with the practitioners at the alternative provision. I also constructed this emotional strain at the time as I direct mirroring (isomorphism) of the participants and young people I had interacted with.

I wondered if the isomorphism being played out was related to my role and status as an insider researcher. Being privy to the inner workings and functioning of the professional networks and being a Global Majority male that could relate to some of the young people's experiences. Such as having a negative relationship with education settings, authority figures and direct approaches may have exacerbated my feelings of disconnection and ambiguity.

In the extract below, I was invited by some of the practitioners to join some of the young people out in the garden to play football. I declined and remained in the main hall to continue the observations.

Extract 31 – participant observations: alternative provision

I noticed that the remaining staff members, on the surface did not fit the 'cool' trendy or hip-hop/grime/drill music energy/look that the PE staff had. Which I initially located in their attire, that is, they were not wearing track suits, Nike Air max etc. I wondered whether this made the PE staff more relatable and relational in the eyes of the young people? Did it help more with engagement? And what did engagement look like for each person? Was it the same? Or different?

In the above extract, I initially constructed the clothes practitioners wore as a form of social hierarchy that facilitated engagement. That is, the more studious or 'geeky'

looking staff were observed to be engaging well with the less popular or sporty young people. This, at the time, created a curiosity surrounding relatability and sameness. However, taking a systemic lens towards the system I was in, I now wonder if an isomorphic process underpinned the interactions.

The different layers of isomorphism such as the organisation being hard to engage rather than the young people due to their desensitisation or burnout and/or the mirroring of clothing to facilitate the engagement process was now coming to the forefront.

Extract 32 - semi-structured interview: practitioner 1:

...young people are powerless, practitioner is powerless. I think also a lot of the agency, or the decision-making of the young people is taken away from them because they're part of the youth justice system, or they have to do something on a court order to prevent them going to custody. So, yes, it's really difficult because actually, they're very powerless in the system that's there to protect them.

Practitioner 1 appears to locate the problem within services, constructing a dilemma of 'agency' being taken away from young people. This creates a bind, as the purpose of the adolescent team is to engage HTR young people in relational ways, but this is intruded upon by the powerlessness that both practitioners and young people experience.

One could argue that the powerlessness and strategic nature of the work within the adolescent team and also extended to the AP, is something that contributes towards

the disconnection or the lack of relational authenticity when working with HTR young people and resulting in a mirroring (isomorphism) within their work.

Links to Foucault

Foucault (1980) referred to normalisation (and discipline) as a vital component of bio-power. He argued that what is deemed a societal truth, the status quo or 'normal', is legitimised and runs concurrently with new knowledge and other techniques of social control that stem from bio-power.

Thus, it could be theorised that practitioners within this study working to the point of exhaustion is normalised as one must work harder to succeed and make a difference in the young people 's lives; via a societal expectation that is reinforced by the organisation (mechanisms of power) to privilege social control and behaviour management over relational, human connectedness and social change. Resulting in a possible disillusionment, ambivalence and mirroring of the client system on the practitioner's part.

Links to Quijano

The CMP domain of authority applies to practitioner ambivalence, disconnection and meaning making. The practitioners appeared disillusioned and on the brink of burnout due to bureaucratic pressures.

The policies and procedures of services (the organisation/institution), Quijano (2000) would suggest, are bound and informed by White Western ideals. Meaning, that health, education, and social care are located as being the highest authority (power) concerning young people's life outcomes and opportunities.

Thus, it can be argued that the practitioners in the adolescent team are unwitting agents of colonial control of authority who are tasked with facilitating social control and behaviour management. Western constructs of young people who fall outside of the status quo are deemed deviant and in need of civilising.

Additionally, practitioner ambivalence and disconnection may be the byproduct of a lack of cross-cultural understanding, which has been constructed as non-engagement. Wilson and Powell (2001) assert that awareness of a young person's family and cultural background is key to effective practitioner and young people communication. However, Teater (2014) explains that this can be difficult as the less verbal young people who may find it challenging to express themselves will impact their engagement.

Therefore, practitioners must know the broader systemic contributing factors to engage young people described by services as HTR. This includes awareness and sensitivity (beyond tokenistic gestures and tick-box exercises) towards culture, religion, social factors, migrant stories, and the young people and their family's views on mental, physical, emotional, and spiritual health. And what this might look like in the context of health, social care and education provision and interventions.

A further domain that was useful in thinking about the role of power within the sub-theme of isomorphism is the colonial control over gender and sexuality. It is argued that our current views on gender and sexuality are direct results of colonialism, which introduced patriarchy into Indigenous societies – the belief that men are better than women and deserve more power.

Lugone (2010), who scaffolds upon CMP, asserts that the control over sexuality and gender is in place to privilege Western patriarchal systems, which are embedded

with Christian morals and principles regarding mothering, chastity, heterosexuality and what a nuclear family should look like.

Linking these ideas to the practitioner's ambivalence and isomorphism brings into question the role, positioning, and Westernised constructions of women as carers and mothers in health and social care and White men (predominantly) being leaders.

This is evidenced as women comprise three-quarters of all NHS staff and 80% of the workforce within social care. Despite this, women are still the minority in senior roles, with only 37% in leadership. Furthermore, the pay gap between men and women, carrying out the same role in health and social care, has men as the highest earners (42%), although the overall workforce is 32% (Gov.uk, 2022).

These statistics highlight the ingrained, entrenched, and unhelpful societal views surrounding gender roles. Men are positioned as dominant, disciplinarians ambivalent to emotions, and authority figures over women and children who are positioned as 'weak, vulnerable and emotional'.

It could be argued that both organisations in this study are maintaining the status quo of systems of hierarchy that privilege patriarchy. Furthermore, the practitioner's inadvertent disconnection towards young people (due to being overworked, undervalued and compassion fatigued) may mirror societal discourse and social constructions of gender.

That is, people in the community of the borough in which this study was carried out may feel ambivalent, undervalued, and disconnected towards services and the government due to the socio-economic deprivation, structural violence, and racism in the area. The themes from this study would suggest that these discourses are being

maintained and sustained (inadvertently or not) within the organisational contexts of the adolescent team and the alternative education provision.

Moreover, the need for more men in services to be role models could be considered a reinforcement of colonial gender positioning. Therefore, understanding that gender positions and stereotypes require further scrutiny beyond Western theory, such as social constructionism within health and social care, should be considered when working cross-culturally.

Links to Systemic Theory

Burnham's (2012) Social GRRAAACCEEESSS supports practitioners in thinking about the social categories related to one's personality. It is promoted as the tool of choice within the adolescent team to address the power dynamics, and aspects of difference which are seen, unseen, voiced and unvoiced. Practitioners adopt a curiosity-driven stance towards these differences, which apply to both practices with the young people and between peers.

The promotion of curiosity surrounding Gender and/or sexuality from Burnham's (2012) perspective with the young people in this study is useful in facilitating a more flexible, not-knowing, non-expert position (Anderson and Goolishian, 1988) when working cross-culturally. For instance, the adolescent team have a form to fill out, which prompts the use of Burnham's framework.

The completion of Burnham's Social Graces (within the adolescent team) could be argued as being a tick-box bureaucratic procedure for working with Global Majority young people. Moreover, (related to practitioner ambivalence and disconnection) the social graces could be perceived as a smoke screen for attending to anti-

discriminatory practices rather than being fully invested in forming understanding, trusting and meaningful relationships within cross-cultural work.

Furthermore, the social graces also take a reductionist approach towards one's differences. For example, religion, culture, ethnicity, class, and gender are not inseparable but inextricably interwoven and connected (Butler, 2017). Crenshaw's (1989) intersectionality is more appropriate and relevant as it honours complexity and positions society's subcategories as being LGBTQ, being from the Global Majority and experiencing poverty as being as being entangled.

The promotion of Burnham's (a White man) Social Graces over Crenshaw's (a Global Majority woman) Intersectionality could be seen as a reinforcement of the colonial patriarchal system of power.

Links to self

I wondered about the Global Majority male practitioner from the adolescent team, speaking about feeling exhausted and this being a 'part of the job'. Aside from unhelpful patriarchal discourses, I wondered what might have informed his ideas. Did the practitioner feel responsible for the team as the only male, and did the team position him as such? Furthermore, as a Global Majority Black man, did the practitioner feel a responsibility to work himself to exhaustion in the context of serving vulnerable Global Majority males, and did his White senior managers enable this exhaustion by allowing him to 'act into role' as he was seen as being best placed to engage the young people due to his skin colour.

As the study progressed, I also wondered whether I was becoming desensitised towards the staff members, as highlighted in my interactions with the teacher from the AP. The isomorphism became more apparent as she seemed to want to engage

me and was met with a rushed response and lack of empathy or compassion. I now wonder whether my response to her was also an ambivalence which mirrored societal discourses surrounding patriarchy and White superiority. In this case, it was a White woman seeking out acceptance and validation (possibly) from a visually brown/south Asian doctoral student. Did my role as an insider researcher give me more status, and was my disregard towards the teacher underpinned by a lack of respect for adults with power, women or White people in general? These are uncomfortable thoughts; however, the micro-politics of power within this interaction highlights a possible ambivalence or disconnection within the organisational system at a practitioner level that was felt by the young people and between the practitioners.

Defining myself (and being positioned and constructed by wider society) as a British, Pakistani, Muslim man makes me curious about the privileges afforded to me in the context of my work. The discussions on patriarchal systems of power and hierarchy bring into question my position and the influence I had in shaping the participants' views in this study.

Did my position as a man with a lighter skin complexion than a Global Majority woman hold more authority, status, and creditability in how those see me in this study? If I was a black woman, wore a hijab (Islamic veil), or if I were a darker-skinned male who had a beard and wore a skull cap, would this impact and influence the outcomes of this study differently? Based on the findings, it is suggested that, yes, the outcomes would be different against a backdrop of global universal discourses that privilege colonial control over gender.

As I have an invested interest in this study, it leads me to question whether I was unwittingly colonising the participants by leading them in my chosen direction. Being born and brought up in the West and wanting this study to be validated via Western academic institutions that will result in creditability is something I cannot deny.

However, as stated throughout this thesis, there is no end goal for a decolonising approach; it is an ongoing process. For me, it is set as the higher context within a self-reflexive frame, and in doing so, ethical practices which privilege and promote cross-cultural work in research and practice will be encouraged.

4.4 Summary

This study has aimed to look at what factors should be considered engaging 'hard to reach' young people in adolescent services via a Foucault and Quijano-informed thematic discourse analysis. I have found that a complex and interwoven array of themes has emerged which are informed by political, institutional and socio-culturally contexts. I have analysed and deconstructed the strengths and limitations of some factor's practitioners should consider when attempting to engage young people described and positioned by services as harder to reach.

As a result, the thematic analysis led to an exploration of three main themes from the ethnographic and semi-structured interview data within this study:

1. Language, stigma and positioning of young people

The positioning and language used to describe the young people within the adolescent team and alternative provision are punctuated as problematic, with the onus placed upon the young people by services. Resulting in a possible barrier towards engaging HTR young people due to preconceived ideas and stigma.

2. Agents of change vs agents of the state

The pressures of organisational procedures appeared to be a factor for adolescent team members carrying out their work in the community and, consequently, the engagement process with the young people. This seemed to create a dilemma for the practitioners where the organisation (local authority/the state) became the higher context, rather than the young people.

3. Professional ambivalence – disconnection and meaning-making

Practitioners' emotional well-being appeared compromised due to organisational demands, leading to a possible disconnection and ambivalence towards their work with the young people. This was a dominant theme across both organisational contexts. Upon further micro-analysis, there appeared to be an isomorphic process between practitioners and the young people. The service seemed harder to reach due to the above intersecting themes rather than the young people.

5 CHAPTER 5: ANALYSIS AND RESULTS 2

5.1 Introduction

This chapter aims to provide the analysis and findings from an organisational (macro) level, directly related to the results discussed in the previous chapter.

5.2 Analysis

As a reminder an inductive approach was employed towards the ethnographic and semi-structured interviews components of this study. This meant themes from the data emerged without prior knowledge or pre-existing hypothesis (Braun and Clarke, 2006).

A deductive approach was used towards the thematic analysis in this section as the following themes are based upon the pre-existing concepts and theories which were informed by the participants' views and experiences.

This chapter consists of three organisational (macro) themes and the five subthemes. They will be orientated within the structural, contextual and theoretical sphere of Foucault and Quijano's ideas in broader terms.

5.3 Themes from a Macro perspective

1. Structural violence

Structural violence explores how societal structures such as institutions, poverty, racism and the legacy of colonialism can create systemic barriers to the relational engagement process with the young people within this study.

The following sub-themes of racism and intersectionality punctuate how these broader social factors affect Global Majority young people disproportionately. In turn

creating significant challenges for the practitioners within this study seeking to build meaningful relationships with the young people.

The link between the adolescent team and the alternative education provision (AP) as institutions (social structures) and societal discourses surrounding HTR young people may be harming them by impinging on their basic needs of self-determination due to inequalities surrounding access to services/resources and the socio-economic deprivation in the borough.

Structural violence refers to social institutions or structures that cause harm by preventing people from meeting their basic economic well-being needs and/or self-determination (Lee, 2019; Jackson and Sadler, 2022).

Structural violence looks at the marginalisation of certain segments within society that are discriminated against and face deprivation, social injustices and/or denial of human rights.

Galtung (1969), who coined the term structural violence explains it is the invisible violence that leads to unequal opportunities to fulfil one's human needs. It is an *'avoidable impairment of fundamental human needs', and it manifests itself in the form of racism, ageism, sexism, political and economic inequalities and so on* (p. 145). The political, economic, and cultural structures of society cause it and is externalised by culturally embedded behaviours, making it not easily identifiable or perceivable by the members of a given group or culture (Galtung, 1969).

Structural violence can normalise physical harm through the social constructs about certain groups. Components such as racism, gender and sexuality can contribute to the construction of stereotypes in a society that standardises violence against a given group (Lee, 2019; Vorobej, 2008; Rylko-Bauer and Farmer, 2017). For

example, young people are positioned as HTR (by services) due to their challenging behaviours, which is informed by societal constructs surrounding unhelpful, gender-specific roles and/or being stereotyped into a culture or race.

Extract 1 - participant observations: Alternative education provision

Arriving at AP did not feel as harsh as it had done the times prior - maybe I was becoming accustomed or desensitised to the building and its surrounding. The backdrop being a residential setting in a particularly deprived part of...

In the above extract, I visit the alternative provision a second time and construct the experience as not feeling as 'harsh'. This harshness is related to the provision itself and the buildings surrounding it – where poverty was visually apparent in the form of buildings being in disrepair and the area being known for its crime. The felt experience of deprivation is further constructed as a desensitisation which piques a curiosity as the following extract demonstrates.

Extract 2 - participant observations: Alternative education provision

...I wondered about my possible 'desensitisation' and thought about this being 'normal' for the young people and some of the staff from the area. Did they have anything to compare it to? Meaning, the area, the schools and so on. As I know from my own personal experience working with children from the area, that some of them have not even been out of the area, to a farm, or been provided with alternate perspectives due to their socio-economic circumstances.

In the above extract I problematise the possible desensitisation towards the building and area in which the alternative provision is located. I also construct this as a

normality for the young people and wonder about alternative realities other than to which they belong.

The link between this extract and structural violence is that it illustrates how limited opportunities, and normalised deprivation can constrain the experiences of young people and staff within a socio-economically disadvantaged area. Furthermore, the lack of exposure to experiences beyond their immediate context is not a personal failing, but a direct consequence of systemic inequalities ingrained within structural violence. The 'normalcy' of limited opportunities and horizons is in of itself a form of structural violence shaping the young people's worldview and potentially limiting their access to support and resources – and further fostering spaces for the gap to widen between services and young people described as HTR.

The following extract further highlights the role and theme of structural violence via the location and physical appearance of alternative provision.

Extract 3 - participant observations: Alternative education provision

...I also thought about the staff within the school, possibly feeling the way, I did, coming into their workplace, which in essence, was like a prison - encased in metal fencing, grey and white concrete, cctv and buzzers. The deprivation within the locality was palpable, as the surrounding streets were predominantly made up of residential houses that have been converted into flats, with groups of young men on the corner of one of the roads, making drug deals. I know this as I sat in my car, observing it as I was 10 mins early.

The physical appearance of the building alongside the surrounding social context creates a sense of confinement, reinforcing the limited opportunities available to both young people and staff. Moreover, my observations of the drug deal punctuates the lack of safety and palpable deprivation underpinning how structural factors create and maintain conditions where barriers towards engaging young people described as HTR becomes exacerbated.

In the next extract the focus on procedural compliance as an unintended structural violence by the practitioners within the adolescent team meetings comes into focus. This is also connected to the previous chapters theme of practitioner's dilemma in navigating the tension between being agents of the state/social control versus agents of social change.

Extract 4 - participant observations: Adolescent team meeting

The managers spoke about 'thresholds' being higher and the need for more "evidence" when disclosures are made - which has implications for cases. I was particularly struck by the use of language and the number of times thresholds and evidence was used - I lost count past 10 times on both

The managers appear to construct institutional language and position process as the higher context when working with young people. The need for practitioners to justify their work by providing evidence and meeting thresholds implies ongoing scrutiny and pressure from managers/the organisation.

The link between organisational pressures, bureaucratic language (such as 'thresholds') and structural violence becomes apparent as it can overshadow the relational engagement process with young people described as HTR and in turn

create power imbalances and inequities in meeting their basic needs surrounding opportunities and potential.

Furthermore, the connection between 'evidence' and 'process' may come from a need to show how the taxpayer's money is being spent, which requires evidence from service leaders to the central government .

Local authorities get their money from three primary sources: direct funding from the national government, a tax on business, and a tax on residential properties (Studdert, 2021). Some local authorities are more reliant on grant funding as a proportion of their overall budgets, due to being from more deprived areas (such as the borough within this study). This connects to structural violence and inequalities within society – specifically in the area in which this study was conducted – as services lack the resources and funding that may be appointed to more affluent areas.

Those from less affluent, socio-economically deprived areas will likely suffer more when the government cuts budgets. Related to children's social care services specifically, Bywaters (2020) highlights that children from the most deprived neighbourhoods are over 10 times more likely to be in care or on protection plans than children from the least deprived.

Highlighting the possible reduction of life chances due to unfair access to services and/or aspirational fulfilment for young people open to the adolescent team or those who attend the AP.

Furthermore, the adolescent team (as an organisation) emphasis on processes, documentation as well as having limited resources, may inadvertently exacerbate the

inequalities and power imbalance between practitioners and the young people within this study, thus hindering the relational process to engagement.

Consequently, bureaucracy can act as a mechanism perpetuating the very structural violence it aims to mitigate.

The next extract punctuates the impact of structural violence upon some of the young people open to the adolescent team via a practitioner's perspective.

Extract 5 – semi-structured interview: Practitioner 2

I think it's about helping parents to also understand that it's very complex. And actually, sometimes, children aren't making this choice, and if they are, then, at times, they're making that choice either because they've been exploited, or they're seeking safety, in some way. Or they are- they've come to a point where they actually feel disillusioned about their ability to be able to achieve in society.'

Practitioner 2 constructs concern for the young people's presentations as being more than behavioural or criminal but multifaceted and complex. Positioning the young people as seeking safety and implying that it is due to a lack of self-worth results in the absence of aspirations and disillusionment in society and adults in general.

The young people can be placed in the context of class-based structural violence. The adolescent team and AP work with predominantly Global Majority people – specifically black, who are poor and positioned by services as being far removed from the status quo.

Classism is a core component and practice of our society – and it normalises structural violence (Hosken, 2016) towards those who are distanced from the status quo. This includes unequal access to education, quality employment, community infrastructure, welfare opportunism, housing and/or health.

Health, social care, and education (for instance) are middle-class normative standards by which British society is measured. The rituals, practices, shared values, and the consensus of what is deemed ‘normal’ within organisational and professional discourses, policies, structures, and practices affect people differently based on their class background. (Hosken, 2016).

People internalise social norms through ongoing socialising, thus becoming inherent to what we do as practitioners—resulting in reflective practice and critical thinking to challenge personal prejudice and bias. However, it does not negate organisational and structural agendas, such as what collectively is considered as a good, healthy and compliant client.

Practitioner 2's observations highlight how structural violence can shape the experiences and opportunities of young people labelled as HTR. The cycle of marginalisation is perpetuated by the lack of attention given to underlying trauma and self-worth (which stem from systemic inequalities such as poverty and unequal access to education) over the focus on behavioural issues. Resulting in the positioning of the young people in this study, who are predominantly from the Global Majority as seeking safety rather than recognising their agency within a context of structural violence, which reinforces the societal biases that maintain the status quo and hinder spaces for relational authenticity within the engagement process to occur.

Sub-theme i: racism and intersectionality

As we can see, the overrepresentation of Global Majority young people (within this study) who experience intersecting forms of marginalisation (such as poverty, gender and/or race) within the label of HTR punctuates how systemic inequalities and social injustices shape their experiences.

Structural violence is deeply interwoven with racism and intersectionality which significantly impacts on the engagement process from a macro perspective for the young people within this study. As the following extract will demonstrate.

Extract 6 – semi-structured interview: Practitioner 1

a lot of the young people we work with come through from referrals from the police, either from arrests - mainly from arrests...

... disproportionality, we know of young black... Black young people, males, being stopped and searched, being in the youth justice system. I think that all feeds in, in terms of coming to police attention, and particularly from the stop and search...

The disproportionality of Global Majority males open to the adolescent team related to police 'stop and search' is problematised by practitioner 1. It appears this is being constructed as a contributing factor to engaging HTR young people.

The overrepresentation of Global Majority young people within the youth justice system, health and social care and the link to structural racism in the UK is highly evidenced (Macpherson, 1999; Lammy, 2017; Bywaters, 2020).

Research carried out by Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (2021) on the disproportionate use of police powers when using

stop and search between 2019 and 2020 found that Global Majority young people were stopped and searched at a rate of 4.1 times higher than White young people.

Highlighting the inherent prejudice (conscious or not) within the police force as an organisation. The devastating impact this may have on the young people open to the adolescent team regarding disillusionment in services, adults or society – is a lived and hard-felt reality.

The symbiotic relationship and intersections between structural violence and structural racism is long-standing, with origins connected to European colonialism.

Sharif and colleagues (2022) assert that:

‘Throughout history and across global contexts, structural violence is the mechanism that carries white supremacist principles forward, impeding health equity through genocide, human rights violations and widespread detainment, and exploitation of people of color. Together, structural racism and violence have created, sustained, and exacerbated social, economic, and health inequities and influence policies, practices, and scientific knowledge production processes’ (p.1)

Unfortunately, Global Majority people continue to face the battle for inclusion and equity within the UK. For instance, young people who attend the AP are considered as being given a last chance and it is the last stop. As an overriding factor, the drive for behaviour management may result in services losing sight of the young people's needs.

The intersections and relationship between the multiple forms of oppression within structural racism, structural violence, class, and gender is something that Crenshaw (1989) explains shapes how different groups and individuals experience

discrimination. Thus, it is not just factors such as structural violence but also gender, race, socio-economic class, and other factors which shape the unique young people experiences of discrimination, oppression and marginalisation.

Therefore, broader systemic issues/themes, such as those discussed, cannot be negated when considering the contributing factors to engaging HTR young people as it may provide a further understanding of the relational and contextual factors for the engagement process.

Thus, understanding and addressing these interconnected forms of structural violence (racism and intersectionality) is paramount for creating effective and equitable strategies for the engagement process with HTR young people.

Links to Foucault

Foucault 's (1977) concept of disciplinary power refers to modern societies' reliance upon social control. An example of disciplinary power is the police 'stop and search' policy. The criminalisation of Global Majority young people as punctuated by professional 1 and the racist societal discourses which are upheld via police brutality cases are exemplified in the following cases.

Edson Da Costa died as a result of being accosted by four police officers in 2017, with one officer placing a knee on Da Costa's neck. A few months later, a teenager, Rashan Charles, was restrained similarly and died resulting from the restraint by the police. These examples are not in isolation and not as high profile as Mark Duggan, who was shot by police in 2011 who believed he had a firearm. Or of institutional racism in the police force when it came to the racist killing of Stephen Lawrence by White men in 1993.

The over-representation of Global Majority young people open to the adolescent team who attend the AP, which is considered as the last chance, can be regarded as a disciplinary power. As it targets young people because of 'behavioural issues' in attempts to reintegrate and condition them into a more compliant and acceptable ways that fits within societal norms.

Links to Quijano

The colonial matrix of power, the domain of economy is relevant to this study's theme of structural violence. Quijano (2000) would argue that the economic inequality we observe today is a direct result of European colonial legacy. Through its expansion, exploitation, and domination, it formed an international division of labour between Whites and non-Whites, which mirrored within our present capitalist world system (Wallerstein, 1974, 1979, 1991).

Quijano (2000) and Mignolo (2010) further assert that what we consider modernity privileges the rich and that poverty and unemployment have been politically engineered as a tool that benefits those in power. Specifically, White patriarchal systems. This benefits those in power to keep the Global Majority poor due to them being cheap labour.

When writing this, the borough in which this study was conducted had one of the highest deprivation rates in the UK. Added factors, such as the post-COVID living crisis, exacerbated poverty levels – leading to almost one in four residents in the borough having only one hundred pounds as savings (McRae, 2022). Highlighting the violent nature that poverty can have for the young people within this study. Leading them into situations and making choices which arguably are beyond their control. For instance, being able to afford basic needs such as food, electricity and/or

gas due to lack of employment may result in desperation, leading to criminality through a need to survive.

National surveys have indicated that young people (13 to 17) who live in poverty contribute significantly to criminality in attempts to acquire items they could not afford (The Children's Society, 2011). This may suggest that constructions of material wealth due to structural violence, the local economy and social inequality will likely differ between adults/parents/guardians and the young people (Coopoosamy, 2016).

Links to Systemic Theory

Systemic psychotherapy is positioned as having a longstanding interest in the role of macro-systems and social context on family functioning (Chin et al. 2022). Structural racism under the umbrella of structural violence is something that systemic practitioners Chin and colleagues (2022) write about, conveying the detrimental and systemic impact of racist societal discourse on families and how they can create environments of social disadvantage and impact negative emotional well-being. They invite systemic practitioners to '*...actively engage with the context of structural racism in order to build decolonising practices* (Chin et al. 2021, p.77)' when working cross-culturally.

There are plenty of examples where systemic practitioners inform, influence and work with organisations utilising a systemic approach (Campbell et al.2015; Jensen, 2017; Tate, 2010; Rousseau, 2015). The interconnectedness between all things within systems is fundamental to system thinking. Every system is part of a larger system. For instance, the organisational system of health and social care is a part of the market, state, and region, very often, the patterns from the larger system (central government, colonial legacy and so on) reflect the smaller system.

Thus, the disadvantages that the young people face within this study, can be seen as inseparable from wider societal and organisational factors – which could be argued as being strategic in nature. Meaning, keeping the rich, rich and the poor, poor.

Links to self

The theme of structural violence was not apparent to me from the outset – but something that emerged from the thematic analysis.

I felt a sense of embarrassment at the prospect of having to confront the issues of racism, gender, and class. As **an insider** researcher and employee of the NHS, the prospect of putting the organisations in this study in a negative light did not bode well, as I wondered what this would mean for me professionally and personally.

Themes of fitting in, ‘not rocking the boat’ and conforming as a British Pakistan male may be a result of an internal conflict, shame and internalised racism that stems from my adolescence and unhelpful generational scripts located within a colonial/imperialist British empire’s rule over India where Whiteness (within my family) was considered as right and the model to follow.

However, the feelings of discomfort anchored and overridden in my belief that this research and their findings (both micro and macro) will facilitate more understanding towards the engagement process in supporting marginalised young people labelled as HTR by health, social care and education services.

2. Organisational power

The second overarching theme from this Foucault and Quijano informed thematic analysis within a macro perspective (and more broadly) is organisational power.

Organisational power underpins the vital need to consider the influence of hierarchal structures and bureaucratic process when engaging young people described as HTR within this study. The inherent power imbalances within adolescent services and the alternative provision which often prioritises administrative duties and demands over engagement can significantly hinder efforts to build meaningful relationships with the young people – which the adolescent team ironically was set up for.

As demonstrated throughout this analysis, the role of the organisation as constructed by the participants appeared to be a key component to consider in the engagement process with HTR young people.

For instance:

Extract 6 – participant observation – adolescent team meeting

The managers then stated they would be less available for the next couple of months to the team. Due to recruitment etc. this felt very contradictory to the previous encouragements of self-care. Although I do understand the work pressures within health and social care, I wondered what it was like for the team hearing this from their boss's.

The manager's availability is problematised as a tension between organisational demands and service delivery of relational practice in engaging HTR young people. Which as a consequence contradicts their earlier emphasis on the team prioritising self-care. In turn, punctuating how organisational power can place a pressure upon managers to prioritise process and efficiency over relation-based work which undermines the very efforts that the adolescent team was set up for – to have the time to foster meaningful relationship in engaging HTR young people. Thus,

demonstrating the impact (and barrier) of organisational power upon the engagement process.

Extract 8 – participant observation – adolescent team meeting

The manger then talked about team members managing risk and social worker autonomy. Creating space and time to make decisions for themselves. Using their own judgment vs managers telling what to do. However, a female black social worker challenged this stating that, being autonomous in theory was all well and good, however would she be reprimanded in practice. This made me think of a Top-down approach in leadership style as well as team members not feeling they can speak out whilst be encouraged to challenge.

It made me think about the organisational system and style (culture etc) and the tension between theory and practice, talking a good talk but not walking the walk - which may be due to policy constraints and senior leadership pressures. So, on surface, collaborative and partnership working within the team is promoted, but it is not something that is felt and lived (possibly). There was an awkwardness between the manager and the social worker and within the team (as they were silent). The social worker continued by stating that space should be given to all of them to do their work...

This extract exemplifies the complex interplay between organisational power and the impact upon service delivery of engaging HTR young people within the adolescent team. The manager appears to construct practitioner autonomy and decision making

as a form of collaboration and empowerment of her team members. However, this is problematised and in turn challenged by the social worker within the team who highlights the potential for being reprimanded.

This demonstrates a top-down power structure where the promoted values of co-production, social justice, equalities and autonomy conflicts with the lived reality within the organisational culture. The subsequent silence and awkwardness between the social worker and the manager further punctuates the tension between organisational ideals and the power they hold over practitioners – when in reality it directly impacts their ability to engage HTR young people effectively.

Sub-theme i. Bureaucracy

The need to justify and comply with the organisational, procedural processes was a weaving and ongoing theme that appeared as a barrier towards engaging young people described by services as HTR throughout this study.

The bureaucratic pressures practitioners faced to tick the relevant boxes on forms to evidence their work became apparent.

Services (health and social care) pursuit of efficiency and economy led to the new public management reforms, which drew upon private sector organisational approaches, causing management to focus on control, accountability, risk management, and fragmentation of services and leading to increased demands for paperwork and procedural compliance from practitioners (Lapsley, 2009; Pascoe et al. 2022).

The increased demand for adherence to bureaucracy seemed to impact and influence service delivery. For instance, the frequency and quality of visits to young

people and/or the emotional well-being and mental health implications for practitioners.

Extract 9 – semi-structured interview: Practitioner 2

They [the organisation] don't...take into account the fact that actually, the work that we now need to do with this group, and with teenagers, is not popping in for an hour a week. That's normal social work. And don't give a shit who says it isn't. It's like facts, that's normal social work. Let's not lie to ourselves. But with this group, this doesn't work. It's not going to work. It's not enough. It doesn't take into account the support they need. It doesn't take into account how much time they would need to actually build a relationship, do constructive pieces of work. So, we have very limited time that organisations give us, and they don't acknowledge the complexity of these individuals...

In the above extract, practitioner 2 appears to problematise the lack of time to focus on fostering meaningful connections with young people, which is constructed as the leaders of his organisation not understanding the complexity of the young people that he works with. Practitioner 2 also appears to imply that the focus on evidencing interventions via procedural pressures is the higher context.

Extract 10 – semi-structured interview: Practitioner 2

*...And we also become a reactive service. Because we have children who have been arrested today, and then remanded tomorrow, and then, taken to court...
...So, we're constantly on the go, doing the practical, but we don't get the*

balance to do the actual work, which impacts on the quality of the work, on the ability for professionals to reflect and plan. And on the ability to actually measure progress. If they're going to measure via the documents, and the things that we write.

Practitioner 2 constructs the adolescent team as a reactive service due to client presentations. However, problematises not having the time to formulate and measure the progress the organisation mandates. This appears to be a contradictory bind/dilemma – not having enough time to do the paperwork versus not having the time to create meaningful connections.

The adolescent team was set up specifically to engage highly vulnerable young people in the community – resulting in smaller caseloads. However, due to organisational pressures of needing to evidence, justify and measure change via procedural processes appears to be in direct contradiction and conflict with the service aims and in turn, hindering the engagement process with HTR young people open to the team.

Sub-theme ii. Power imbalance

The organisational pressures that the practitioners faced can, as a consequence, create unintentional power imbalances between the services and the young people described as HTR within this study and also between internal and external services.

In the following extract, the positioning of the adolescent team members as experts within wider services appeared to be constructed as an added pressure and punctuated the power imbalance between services.

Extract 11 – semi-structured interview: Practitioner 2:

...I think there's a lack of training around contextualised safeguarding, and I don't think there's just a lack of training. I also think local authorities are falling into this idea where people that work in this area, yes, we are specialists and should be treated as such. And should be given this training. But actually, all social workers can do this. So, we're limiting also who can do this type of work, and I think that's impacted on by training.

Practitioner 2 acknowledges his specialism within contextual safeguarding and high risk but appears to problematise it too. He positions contextual safeguarding as being teachable to all but it not being the case and resulting in an elitism and limiting others. Consequently, the adolescent team may be a barrier towards wider services engaging young people described as HTR. The perceived expertise may mean others not taking on cases due to feelings of inadequacy or lack of skills.

Extract 12 - semi-structured interviews: Practitioner 1

I think this idea of us doing community work does not fit well. Because what it then like is that we are out in the community all the time. But we're paid nine to five, eight hours a day, and we are also dealing with children who have multiple professionals around them, and multiple complexities. So, therefore, it just doesn't balance out.

The 'balancing out' that Practitioner 1 constructs highlight the demand for organisational governance over fostering meaningful connections to support better life opportunities and choices with the young people.

The expectation for the young people to fit the service framework of 9-5, Monday to Friday, is problematised and implies that non-conventional approaches are needed. Punctuating an implied and coercive power imbalance where the young people (open to the adolescent team) lose out to bureaucratic organisational demands. Resulting in a barrier in fostering meaningful relationships within the engagement process with HTR young people.

Extract 13 - semi-structured interviews: Student 1

...Some social workers move like they're doing more than what they actually are. You get it, like? And that's what I don't like, they'll be acting like they're doing so much for you and that, but it's like, "Hold on, you're calling me once a week, checking on me for five minutes, you know, thinking you're doing so much, but because I didn't text you to tell you that I couldn't answer now because end of the world" and that, that's what I don't like, that.

Student 1 appears to problematise social workers based on his experiences, explaining that they place importance on their interactions with him more than he does. He further implies that the lack of time and attention given to him is a factor for not wanting to engage with professionals, as it seems disingenuous.

The young person's experience punctuates the tensions between organisational demand for governance placed upon practitioners versus relationship building with

young people (as constructed by practitioner 1 and 2 and also student 1) which inadvertently creates a gap that tips the balance of power in favour of the organisation.

Sub-theme iii. Hierarchy of race.

The following sub-theme highlights the importance of considering the role of race and the role of hierarchy within this when engaging HTR young people who are open to the adolescent services within this study. Racial hierarchy which is closely related to structural violence and intersects with gender and class impacted and influenced the engagement process and power dynamics for practitioners across both the alternative education provision and the adolescent team.

I became aware of the senior members of the team (across both organisations) being White and predominately male. I wondered about White privilege, sub-conscious bias and wider societal discourses surrounding race that informed the process of recruitment for leadership posts and if this impacted upon service delivery with young people described as HTR.

Extract 14 - Participant Observations: Alternative provision

...I had become curious about the amount of young global majority staff, and then wondered about the relatability between younger staff, younger black staff, and the older senior white staff. Did age and colour matter, did something get lost if you were not the same colour...

...There were aprox 18 young people including the new faces and 14 members of staff.

Young people ethnicity:

4 Asian (1 of which a girl)

4 white (1 girl)

Rest black and mixed race

Aprox 4 girls rest boys

Staff members:

PE staff (although they feel like support workers and the core of the staff team that are popular with students) 4 x black and 1 x white. (2 female 2 male)

The rest of staff are teachers who are predominately female and all white. (one man and one female). I continue to be struck by the 'front line' staff being 'relatable' 'down with the kids' global majority folk, but senior staff being white...

Scaffolding upon my curiosity in the extract above, on 'front line' staff being from the Global Majority and the senior staff and teachers being White, brings into question a possible disconnect between the leadership/senior team and those who work directly with the young people. Those who make decisions are informed by policy and theory and the impact this practically has on those delivering the work.

I further wondered if this approach was truly collaborative, or is it being 'done' to the young people via practitioners being 'told' what to do – and is this any different from a colonising mindset?

The following extract further exemplifies the point where a hierarchy of race may be at play within the alternative provision and young people open to the adolescent team.

Extract 15 - Participant Observations: adolescent team meeting

... Seniors are white. Predominately male. In both settings. Support workers young, in social work team women and black 2 white and one man... the manager was on annual leave, so (name omitted/2nd manager) was leading. She explained from the beginning that she had to leave at 3pm (the meeting finishes at 3:30) and that (name omitted) a white female would be taking the lead in her stead...

I thought about hierarchy, whiteness, and privilege - maybe this was based on my current writings on decolonial approaches, or being a Pakistani male, or both. Either way, I wonder why (name omitted) had to chair - and why could it not be any of the others?

I construct the seniority of staff across both organisations as being problematic due to the unequitable representation and potential for biased decision making by senior staff in the context of their race. This is demonstrated in the privilege given to the social worker to cover the meeting rather than anyone else.

Furthermore, the predominantly White and male senior leadership across both organisations contrasted with Global Majority support workers points to a possible racial hierarchy influencing the power dynamics which inevitably will impact upon engagement strategies with HTR young people.

Links to Foucault

Foucault asserts power is not under the control of one person or object. But exercised through the collective acceptance of historical discourses by societies. When considering the role of power, race and organisations, Deflem (2015) asserts that power is not a 'thing' but a relation, which operates at micro levels of social relations and is omnipresent at every level of society.

Foucault (1980) argued that racism had its roots within psychiatry when the concept of abnormality was established, and this is where 'internalised racism' is formed (Saleem, 2021; Foucault, 1980).

He asserted modern racism is not merely a form of socio-political discrimination, illogical prejudice or motivated by political ideology. Rather, it is a form of government (bio-power) designed to manage and protect mainstream society against the 'abnormal' and the 'insane' (Su Rasmussen, 2011; Foucault, 1980).

Applying this concept to this study, it could be argued that the community within the East London borough and wider society requires protection against Global Majority, HTR young people open to the adolescent team and also those who attend the AP due to their challenging and behavioural issues being perceived as being against dominant social norms.

However, Foucault's discussions on racism are incomplete, and he does not attend to the impact and legacy of colonialism or the history of the idea of race, which may be a consequence of his White privilege.

The notable hierarchy of race within this study is underpinned by structural violence and racist narratives which privilege White patriarchy over the Global Majority and matriarchal societal discourses.

Links to Quijano

The most applicable domain, from Quijano's CMP to the theme of organisational power, is authority.

Quijano (2000) would assert that the current 'modern nation-state', such as the UK, has become a central authority in our present time due to Western European colonialism over the global south.

He explains that systems of global hierarchies are based upon racial differences and classification and were a strategic creation by the European colonists. In this racial structure, the Global Majority are positioned as inferior to White people.

The authority and power that White Western people have in contemporary society are in institutions such as banking, government, education and health and social care, which position the global socio-political and economic standards.

Applying Quijano's concept of hierarchical systems to this study's sub-theme of a hierarchy of race and bringing White privilege and/or unconscious bias into the discussion can be argued as the direct remnant of Western, colonial beliefs and ideals.

Links to Systemic Theory

Harré and van Langenhove (1998) write about how one can be positioned by others via discursive constructions. Positioning theory is useful when thinking about the meta-position (organisation and society) on how HTR Global Majority young people within this study are seen, (positioned) and act into roles and behaviours set up by society. For example, practitioners must protect, rehabilitate, and guide young people away from their deviant, criminal and challenging behaviours.

Applying a key systemic concept to the sub-theme of a hierarchy of race within the theme of structural violence, we could hypothesise (Palozolli et al. 1980) that the function for maintaining a negative stereotype of the Global Majority young people and/or keeping Global Majority practitioners in predominantly 'front-line' work is the organisation's way of maintaining the status quo in upholding the current structures of power surrounding White patriarchy and superiority.

Furthermore, locating the problem in (via the media and central government) Global Majority young people may serve as a function societally. Distracting the UK population away from the central government and from issues such as poverty, elitism, classism, budget cuts, the crisis of living, poor mental health, political divisiveness, and racism.

Links to self

Through the themes within this study, I am confronted by a curiosity surrounding opportunities provided to Global Majority practitioners and tokenism. Being employed in a middle management position in the NHS, I wonder if I would be willing to step aside for Global Majority women, who may have fewer professional opportunities than me due to the structural violence, colonial legacy of White privilege and patriarchy within organisations and wider society.

In theory, I would, however, it would mean giving up something for someone else to gain - and therein lies the dilemma of power and politics within relationships.

Admittedly, I do not think in practice I would be as noble as in theory. I also think that this internal conflict and dilemma of navigating how to empower the marginalised and dismantle structural racism is something that continues to be grappled with.

However, the ability to facilitate spaces where Global Majority practitioners are given equitable opportunities to progress academically, professionally, or both is something which those in power can do without stepping down or aside from their role.

Something which I believe that I am actively and conscious of and attempt to do.

3. Contemporary services

The final theme from a macro perspective as a result of **this Foucault and Quijano informed thematic discourse analysis was the need for adolescent services to be more contemporary. This emerged directly from the participant observations and interactions but is linked more broadly within a macro perspective and intersects with the theme of structural violence (poverty, class, race, deprivation, access to resources).**

A contemporary approach requires the organisation (adolescent services) to adapt to the changing needs, contexts and lived experiences of young people, moving beyond outdated models, spaces and practices that may inadvertently marginalise or alienate them further.

As we will see, the following will directly address the research question of factors to consider when engaging HTR young people relationally.

Extract 16 - semi-structured interview: Practitioner 2

There are no services for these teenagers. The only service there is, you go to school. If you don't go to school, you go to the PRU [AP], and then after school, there's nothing for you to do, Bruv. Facts. That's the reality of the communities that we're living in. And I think another thing that is a real complexity is that we're not in touch as organisations with what is happening in our communities.

Practitioner 2 appears to position the young people on his caseload as having nothing else offered by services except education. This is problematised as he appears to construct the issue as being in children's services. He also constructs services as being 'out of touch' with the communities that they work in. Resulting in an expectation for the young people to fit the service interventions provided, rather than the service fitting to the individual needs of the young people.

Extract 17 - semi-structured interview: Practitioner 2

'We need to work around our clients, and we need to also start to look at engagement completely differently. And we need to stop being caught up on process.'

Practitioner 2 constructs the bureaucratic processes as his work's primary focus, which takes away time spent with the young people and a barrier to the engagement process. He further punctuates the point of services, needing to approach the role of engagement differently. Placing more emphasis on practice rather than procedural processes.

Practitioner 1 scaffolds upon her colleague's view in the following extract.

Extract 18 - semi-structured interview: Practitioner 1

I think it's being given the space, as a practitioner, to try different methods, try different ways to work with young people. It's about being valued.

(Laughter) It's about your morale being kept up because, yes, what you're doing is being recognised...

Practitioner 1 constructs the support of management (the organisation) as a key aspect in engaging HTR young people. Furthermore, it appears that space equates to time for practitioners to be creative in their relational approaches. Which includes understanding and addressing issues of cultural relevance, power imbalances, and systemic inequalities to foster genuinely meaningful and effective relational engagement. In-turn promoting a sense of self-worth, validation, and support.

Extract 19 - semi-structured interview: Practitioner 1

So, yes, definitely greater investment in preventative services and early-help offer, like a really strong, early-help offer, I think, is vital for a lot of the young people that end up, yes, with huge amounts of risk around them and that we have to try and manage, but yes, a lot of that could have been prevented if they'd been given the right help, the right support at the right time, beforehand.

Practitioner 1 constructs the importance of early intervention as a possible solution to disrupting the process of young people becoming HTR. Additionally, the need for the

central government to provide further funding is problematised as a constraint when managing high risk for the young people on her caseload.

Research highlighting the importance of early intervention before young people are placed into an alternative provision to better their long-term life opportunities are highly evidenced (Walker and Donaldson, 2010; Ross et al. 2010; Widnall et al. 2023). Punctuating the importance in understanding the complexities within the engagement process with young people described as HTR by services.

Furthermore, funding for early interventions may also be cost-effective, generating longer-lasting benefits, which may reduce the need for more specialist services such as the adolescent team.

Sub-theme ii: The building/location

The location of the alternative provision was a significant theme that had emerged from this analysis and something to consider when engaging HTR young people within this study. As I will demonstrate in the following extracts, the physical environment, reflecting wider societal inequalities coupled with structural violence can create barriers to engagement process.

Extract 20 - participant observation: AP

The building itself, was grey and white concrete, square in shape and seemed like a design from the late 60' or 70's. It was surrounded by high metal fencing and cameras, with several entry points. I wondered whether they were safeguarding the children within the school from those outside or safeguarding those outside from the children within. The building was grim, it was run down

and was in need of a lick of paint and repair, as there were tarps covering a window - I wondered if a child smashed it. The backdrop of the building was in a residential street's, in a particularly deprived part of...

The building's condition and location may communicate a lack of value or investment in the young people, potentially undermining their sense of self-worth. This, in turn, affects their trust in services and their willingness to engage with services.

Addressing these contextual factors is essential for creating a more supportive and welcoming environment that facilitates and fosters trust and encourages meaningful relationships between the young people and services.

In the extract below, a practitioner at the alternative provision gives his perspective on the building.

Extract 21 - participant observation: AP

...[Anon] reiterated the point stating it was 'literally a prison'. Which made me think about the accolades and positive outcomes displayed in the reception - which I was questioning in respect of the children not being allowed out and therefore 'had to' conform and comply.

The description of the alternative provision as 'literally a prison,' coupled with the observation of accolades and positive outcomes displayed in the reception area, punctuates the contradiction between the institution's outward presentation and the young people's lived experience.

This contradiction directly relates to the research question of what factors should be considered when engaging HTR young people relationally in adolescent services as

it demonstrates how the physical environment and context (as a consequence of resource allocation and structural violence) can create a coercive atmosphere impacting upon the engagement process. The young people's lack autonomy which is constructed in the extract as 'had to conform and comply' punctuates the need to consider environmental factors and power dynamics inherent within the organisational setting when attempting to engage young people who are described as HTR

Extract 22: participant observation – AP

I then wondered about him [young person] being stuck in the building, as he described it as a prison and that he 'had' to stay on the premises. Therefore, being put in a position where he 'had' to get along with staff. He looked pensive, but was not able to answer, saying 'maybe' and he was not sure.

The young person in extract 22 reinforces my observations in extract 21, by constructing the building (alternative provision) as a prison, further inviting a curiosity surrounding his autonomy, choice and the role of engagement. Furthermore, practitioners describe the alternative provision as the 'last chance', meaning if young people (such as the one in the extract) does not conform or modify their behaviour, then this will lead to exclusion. Marginalised, not only from mainstream schools but also mainstream society, vulnerable and susceptible to being groomed and exploited and consequently further HTR.

It appears that early intervention, at the stage of AP or prior, becomes a key factor in disrupting the process and recognition of young people becoming HTR open to adolescent services.

Extract 23 - semi-structured interview: Practitioner 1

I think we're lacking on that in terms of just physical space where we can meet with young people outside of family home. I don't know if the office space we have at the moment is big enough or child friendly...there needs to be a space where the young people feel is theirs...

Practitioner 1 highlights the importance of young people having a physical space to feel safe, secure, and call their own. She appears to construct having a contemporary, young people friendly physical space as a factor to consider when engaging HTR young people. Rather than dated buildings, which conveys a lack of emotional warmth, desensitisation and privilege given to the institution over the young people.

New materialism is applicable here as it considers the relationship between the material (young people and practitioners) and the non-material (the building, cameras, fencing, doors, etc). It invites us to think about how people do not act exclusively by themselves. Instead, human action requires complex socio-material interdependencies. For instance, the grey concrete building that looked grim and in disrepair is relevant and autonomous to the interplay, impact, and affect upon the participants and me.

These themes are relevant to this study's research question and should be considered **when attempting to engage young people described as HTR relationally** within adolescent teams.

Links to Foucault:

Foucault's (1975) panopticon concept applies to the young people who attend the AP and society. The panopticon is a metaphor for how modern society exercises its control and power over individuals in subtle yet pervasive ways via surveillance and punishment. Resulting in *disciplinary institutions* (Foucault, 1975) such as the AP where power operates via surveillance, discipline, and normalisation, resulting in shaping and influencing behaviour and social norms.

The AP is located within a residential area on the outskirts of East London, which was hypothesised as keeping the young people out of sight from the rest of society, may highlight the perceived 'worst parts' that mainstream society does not want to face.

Links to Quijano

The domain of Knowledge and subjectivity within Quijano's (2000) CMP applies to the need for contemporary services. The coloniality of power in the modern sense is based on a Eurocentric process that privileges, promotes and prioritises White patriarchal knowledge systems. Bringing into question the practices that we use. Practitioner 1 suggests more funding from the central government would foster meaningful relationships with the young people. She highlights a need for an appropriate building that would enable time and creativity in approaches towards engagement. However, the likelihood (if funding was granted) of interventions being informed predominantly by Western academic principles is high.

For services to be contemporary would mean taking a critical, cross-cultural approach towards working with Global Majority young people in the community. This would mean investing the time to build relationships with key figures in the

community, such as faith leaders, elders and people from the community that the practitioners work in. The current service provisions of the adolescent team nor the alternative education provision appear to meet the young people's needs. More integrated approaches, such as systemic social work or therapeutic interventions, should consider the influence and impact of colonialism, especially when working cross-culturally with young people. rather than decolonial surface-level, token gestures towards difference. But incorporating local community understanding, co-production and collaboration.

Links to Systemic Theory

Carr (2011) posits that therapists are '*influence experts who use their power to ameliorate symptoms*' (p. 39). He argues that the tension arises between the therapist and parts of the client that are resistant to change and that it is the therapist's job to map out the power dynamics and develop strategies to create change for the client system. Placing sole responsibility for creating change on the therapist. Therefore, power from a systemic perspective is context-dependent – as it depends on one's potential to influence others to do what he/she may not want to (Carr, 2011; Bateson, 1975).

However, if a context is set where young people are positioned as needing guidance due to non-conformity, then sole responsibility in facilitating change falls upon the practitioner where demands of expertise and authority are set by Western societal norms surrounding class and status. Thus, seemingly setting a context for Global Majority HTR young people open to the adolescent team to fail.

Any room for the young people's perspectives to be genuinely taken on board is negated and the values and principles that practitioners uphold, who ultimately, I

suggest are unwitting ambassadors of social control, promote and uphold Western ideals and values – become the higher context.

British studies of systemic approaches within a social care context demonstrate how practitioners can adopt a more linear approach or expert position in their work due to the expectations and reliance of families on services due to being on legislative ‘orders’ (Syrstad and Ness, 2021). Resulting in a power imbalance where practitioners may get recruited into a more colonising, ‘I say, you do’ mentality.

Therefore, the need for more contemporary approaches towards working cross-culturally is vital for services to fit the system/organisation to the needs of the young people, rather than trying to fit the young people to the current organisational system.

Links to self

I was surprised at how quickly I became used to the alternative provision building – from initially being shocked by its appearance. I wondered if this ‘desensitisation’ was how the practitioners felt – and am curious how this impacts their relationships to the young people and their work. Furthermore, a curiosity surrounding funding between local authorities for early interventions, such as recognising and providing the relevant assessment within mainstream schools, resulted from primarily structural injustices specific to the area in this study rather than a broader issue.

5.4 Summary

As a result of thematic discourse analysis, which was informed by Foucault and Quijano’s concepts on power had led to the following three macro themes for discussion:

1. Structural violence

An interwoven and umbrella theme arguably underpins all themes within this study to understand the possible contributing contextual factors for engaging HTR young people open to adolescent services and the alternative provision. The link between the social structures (institutions) and societal discourses within the UK, specifically the local authority within this study, may inadvertently harm young people and their families by not meeting their basic needs. This may have been perpetuated and exacerbated by the positioning and labelling of the young people by services as harder to reach, in addition to the findings from the previous chapter.

2. Organisational Power

The organisation's role (social care, health, and education) appears to be a key driver towards the contributing factors for engaging young people within the adolescent team. as punctuated in the findings from the thematic discourse analysis in the previous chapter, such as professional ambivalence, disconnection and meaning-making or the dilemma of being agents of the state versus agents of social change, maybe a direct result of the organisational bureaucratic pressures, hierarchy of race and patriarchy in the context of senior roles and/or power imbalance between services and young people. These are argued as being a contextual barrier that practitioners should consider when engaging HTR young people within the adolescent team.

3. Contemporary services

The role of contemporary services was a broader macro theme highlighted by practitioners within this study, which organisational leaders are invited to consider. This means being up to date with local affairs regarding interventions, processes,

and procedures and consideration given to the investment and funding being placed into the buildings and physical spaces that the young people are expected to attend. That is, fitting the organisational system to the young people /family rather than vice versa.

The macro themes discussed within this chapter are argued as a crucial systemic factor (which are directly linked to the participant's views in this study) for services and practitioners to consider when attempting to engage young people described and positioned as harder to reach.

6 CHAPTER 6: DISCUSSION

6.1 Introduction

The final chapter of this thesis consists of four parts.

- Summary of findings
- Clinical implications
- Strengths and limitations of this study
- Conclusion

I want to bring attention back to the title.

Engaging ‘hard to reach’ young people in adolescent teams: challenges and limitations deconstructed.

The newly emerged question that underpins this research study:

What factors should be considered when engaging hard-to-reach young people relationally in adolescent services?

6.2 Summary of Findings

This research explored the complex interplay of factors influencing engagement with young people labelled by services as ‘hard to reach’ within adolescent services and an alternative education provision. The study utilised a mixed method approach combining ethnographic observations of team meetings and lunch time breaks and semi-structured interviews with practitioners and young people. The analysis employed a thematic discourse approach informed by Foucault and Quijano’s theories of power and coloniality. Six main themes emerged from this study, three from a micro (participant experiences and views) perspective and three from a macro (organisational and societal) perspective.

The micro-level analysis (Chapter 4) reveals that while practitioners intended to engage young people relationally, their language and approach often created barriers. The terms used ('hard to reach,' 'engagement') placed the onus on the young people, disregarding systemic issues. This echoed the concerns raised in Chapter 2's literature review (Shaw et al., 2017; Smith, 2012), which highlighted the stigmatising and homogenising nature that the label brings. Young people, however, valued relational authenticity—genuine connection marked by empathy and respect, moving beyond transactional exchange which aligned with the growing emphasis on relationship-based interventions in the existing literature (Herd, 2017). Additionally, some practitioners experienced powerlessness and emotional distress similar to that of the young people (isomorphism) due to professional burnout and/or fatigue. This aligns with current literature that emphasises the difficulties in applying rigid, standardised methods to diverse populations and further punctuates the importance of creating flexible and supportive contexts for practitioners (Curtis-Tyler et al., 2004; Flanagan, 2010).

The macro-level analysis (Chapter 5) contextualises the micro-level findings more broadly, revealing how structural violence, organisational power and the need for contemporary services are interwoven and affect the engagement process.

Structural violence which is deeply rooted within societal inequalities related to the location in which this study was conducted, racism and the lingering impact of colonialism created the very population labelled by services as 'harder to reach'. The physical environment of the alternative education provision - its design, location, and state of disrepair—became a stark symbol of this structural violence, reinforcing marginalisation and limited opportunity. These findings directly connects to existing literature's exploration of structural barriers to accessing services and resources,

particularly for marginalised communities (Crozier and Davies, 2007; Putwain et al., 2016; Boag-Munroe and Evangelou, 2010).

Organisational power (health, social care and education services) dynamics created significant imbalances. The emphasis on evidence-based practice and meeting bureaucratic demands frequently overshadowed the relational engagement process with young people described as 'hard to reach' within the study – which contradicted what the adolescent services was set up for. The need for contemporary services stemmed from the failure of existing frameworks and services to adapt to the lived experiences of marginalised young people open to adolescent services - further reinforcing the systemic barriers to engagement with young people described as 'harder to reach' or 'engage'. This connects with existing literature's critique of standardised/universal interventions and the need for more individualised/bespoke and culturally adaptive approaches (Wilson, 2013; Shaw et al., 2017; Camilleri et al., 2017). The pressure to 'evidence' work inadvertently shifted practitioners from agents of positive change to agents of social control, reinforcing systemic inequalities.

In essence, this study reveals a disconnect between the intended and actual engagement practices and process with young people deemed as 'harder to reach/engage' by services. While services aim for relational engagement, their language, approach and organisational structures often inadvertently create barriers, mirroring and exacerbating broader societal injustices and inequalities. The tension and contradiction between intentionality, and reality punctuates the need for contemporary, inclusive, and trauma informed services to foster meaningful relational engagement. This study directly challenges the simplistic labelling of young people as 'hard/er to reach' and highlights the importance of recognising their

agency and resilience within complex structural and organisational power imbalances.

Contributions from this study

This thesis employs a mixed-methods approach, consisting of ethnography and semi-structured interviews, a critical realist epistemology within a decolonial framework, and a thematic discourse analysis informed by Foucault and Quijano. This approach is innovative in the systemic field and more broadly, aiming for a comprehensive understanding of the engagement process with young people described as ‘harder to reach’ within the adolescent services and the youth justice system in the UK.

This study contributes towards research and practice by:

Highlighting the limitations of the ‘hard to-reach’ label

This study challenges the use of the term ‘hard to reach’, demonstrating that it often places responsibility of engagement upon the young person rather than the service. This punctuates the needs for services such as the adolescent team and alternative provision to adopt more relational and flexible approaches.

Exploring the interplay between micro and macro factors

This research analyses both individual (micro) and organisational (macro) structures and discourses, providing a holistic perspective which reveals the interconnectedness of individual challenges and systemic barriers.

Identifying the impact of power dynamics

This research uses Foucault and Quijano’s theories to analyse how power dynamics within the adolescent services and wider societal structures affect the engagement

process with young people positioned as 'harder to reach' by services. It also reveals how organisational pressures, and systemic inequalities can hinder meaningful relationships and connections.

Promoting a relational and trauma-informed approach

The findings in this study suggest that authenticity, respect and compassion are more vital than surface level relatability in engaging young people. This study emphasises the need for services to adopt a trauma-informed approach (over a focus on behaviour) that recognises the impact of the hardships young people face. A trauma-informed approach in this context involves understanding and addressing the impact of structural violence on young people's lives. This includes factors like poverty, social inequalities, and racism, which significantly affect's their emotional and mental well-being. Rather than a solely focus on behaviour and/or criminality, this study suggests that the primary focus and higher context be on the young people's underlying trauma and wider systemic contributing factors. Furthermore, young people may not always recognize the trauma they have experienced due to desensitisation to their lived experiences. Therefore, a trauma-informed approach is essential.

Exposing the tensions practitioners face between being agents of social change and agents of the state

This research shows how the adolescent team's focus on meeting bureaucratic demands can conflict with its aim of facilitating meaningful engagement with young people. This punctuates the need for services to balance the demands of the organisation with the needs of the young people.

Addressing the limitations of Western-centric perspectives

This thesis adopts a decolonial lens, highlighting how Western ideas surrounding love and family may not align with the experiences of Global Majority young people – which promotes further research that anchors the experiences of marginalised communities.

6.3 Clinical Implications

The clinical implications from this study suggest that education, health and social care services should consider transitioning from problem-focused practices to relational and trauma-informed approaches.

Operationalising this requires a multifaceted approach:

1. Reframing language and perceptions

Practical implications: replace the term ‘hard to reach’ with more person-focused language that avoids stigmatization and problem saturated thinking. Focus on understanding young peoples lived experiences and perspectives rather than assuming resistance or positioning their issues as behavioural and/or criminal.

Operationalisation: Train staff on person-focused language and communication skills. Develop new assessment forms that gather information about strengths, experiences, and challenges. Regularly review the language used in case notes and documentation to ensure it reflects a strengths-based approach.

2. Fostering relational authenticity

Practical implications: An emphasis given to genuine relationships based on trust, respect, love, compassion and empathy. This involves being transparent about service’s aims, respecting the young person’s autonomy and valuing their contributions.

Operationalisation: The provision of regular training on relational based approaches and practice which includes skills in active listening, transparency, respect, reflective practice and culturally sensitive communication and honing in on practitioner's personal lived experiences as a way of connection. Create opportunities and time for practitioners to build genuine rapport with young people. Supervise practitioners to support them develop self-awareness of their own biases and the impact they have on relational interactions and the engagement process.

Relational authenticity – unpacked further

In the example of the fictitious case and name of 'Billy', who is open to the adolescent team and his attendance at the alternative education provision has reduced. A practitioner being relationally authentic means:

Being real, and not fake: which means being yourself and not putting on a professional 'act' – not pretending to know everything or being perfect.

Transparency: explain to Billy why you are there, taking a non-problem focused stance, for instance: 'Billy, your parents, the school and I are worried about you bunking school. I'm not here to punish you, or focus on why you're doing it - but to understand what going on for you...'

Acknowledging power: You recognise you're in a position of authority. 'I know it might feel like I'm just another adult telling you what to do, and I get that. I want to work *with* you, not just tell you what to do...'

Valuing Billy's Input: 'What do *you* think is going on? What's making it hard to go to school? What would actually help you?' a practitioner's display of genuine curiosity and active listening to the answers even if they're not what you expect.

Being honest about limits: for instance, 'I can't magically make all your problems disappear, and I can't promise I can fix everything. But I can promise to listen, try to understand, and help you find support that might help...'

- **Instead of:** 'Okay, Billy, let's talk about your attendance record. You need to be in school, and I'm here to make sure that happens' (This is transactional, behaviour/problem focused and power-based).
- **Try:** 'Hey Billy, thanks for meeting with me. I know you probably don't want to be here, and you might be thinking that I am just another adult telling you what to do. But we are really worried about you missing school and I just wanted to have a chat. To be honest, I'm not sure how helpful I can be, but I'm willing to listen if you're willing to talk. What's been going on?'

Showing Love and Compassion

Showing love and compassion isn't about romantic love but about demonstrating genuine care and concern for the young person's well-being. It looks like:

Active Listening and Validation: paying close attention to what the young person is saying, both verbally and nonverbally. Validating their feelings, even if you don't agree with their actions.

Empathy: trying to understand the world from their perspective. Putting yourself in their shoes and acknowledging their pain, struggles and issues. Treat the young person as if they are family, genuinely invested in their success.

Kindness and patience: being patient and understanding, even when the young person is challenging or difficult. Offering words of encouragement and support with a focus on tone and posture

Advocacy: standing up for the young person's rights and needs regardless of the remit of work or the service. Supporting them to navigate complex systems and access resources.

Respecting boundaries: understanding that some young people may not be comfortable with physical touch, overly emotional displays or the approach.

Respecting their boundaries and allowing them to set the pace, whilst checking in for feedback on the process of the relationship and engagement.

- **Instead of:** 'You need to stop bunking school. It's hurting your future.' (This is judgmental and focuses on the problem and behaviour)
- **Try:** 'It sounds like things are really tough right now. I can see that you're going through a lot. I'm here to listen, and I want to help you figure out what's going on and how we can make things better. What's been the hardest part for you lately?'
- **Instead of:** 'I know it's hard, but you need to try harder.' (This is dismissive and invalidating and problem/behaviour focused)
- **Try:** 'That sounds really frustrating and crap. It makes sense that you're feeling like you can't be bothered with it all. I'm wondering if there's anything I can do to help make things a little easier...'
- **Instead of:** 'I'm here for you.' (This can feel insincere or 'fake')
- **Try:** 'I'm here to listen and help you figure things out. I'll check in with you next week to see how things are going. If you need anything before then, here's how you can reach me.' (This is specific and demonstrates commitment).

Key points

- **It's about being human:** relational authenticity, love, and compassion are about being a genuine and caring human being within the context of a professional relationship.
- **It's not about being a friend:** maintaining professional boundaries is essential. It's about being supportive, empathetic, and respectful, not about becoming a peer.
- **It's about the young person:** the focus should always be on the young person's needs, experiences, and goals that is seen within their context.
- **It's a process:** building trust and rapport takes time and effort and can be clunky. Patience, consistency, and a willingness to adapt your approach is a vital part of the process.

By prioritising relational authenticity, love, and compassion, practitioners can create a more supportive and empowering environment that fosters meaningful engagement and positive outcomes for young people open to youth justice services adolescent teams.

3. Addressing systemic barriers

Practical implications: Address and acknowledge the systemic barriers to engagement, including bureaucratic processes and procedures, resource limitations and power imbalances. Promote organisational change by prioritising relational practices and ensuring adequate resources are allocated for these plans.

Operationalisation: Actively engage in collaborative work with organisational leaders to highlight challenges of procedural compliance and the negative effects on

meaningful engagement with young people. Advocate for increased funding for staff training, clinical supervision and resources that support relational based approaches and practices. Develop data collection methods that gather information about the impact of these barriers on service delivery and outcomes with the view to implement change.

4. Integrating trauma-informed care

Practical implications: Recognise that many young people's challenges stem from trauma. To ensure that all interactions are trauma-informed, that is, practitioners/services are sensitive to the potential impact of trauma on interactions and behaviour.

Operationalisation: To provide training on trauma-informed approaches which includes recognising the signs of trauma, implementing safety and risk managing strategies and fostering collaboration with families and communities. Conduct regular risk assessments of both young people and the practitioners, paying close attention to their emotional and psychological wellbeing.

5. Promoting cross-cultural understanding

Practical implication: Acknowledge and challenge the influence of Western-centric biases. Cultivate culturally sensitive practices that respect diverse languages, beliefs and cultural norms. Engage in collaborative partnerships with members of the community.

Operationalisation: Include cultural competency training as a mandatory component for all staff training that is relevant to the area/location. Engage in regular consultation with community leaders and members of marginalised groups to gain a deeper understanding of the context within which the service operates. Develop

culturally sensitive interventions that take into consideration the specific needs and experiences of Global Majority young people.

6. Addressing isomorphism

Practical implications: Pay close attention to the possibility of mirroring (isomorphism) between the challenges of young people and the emotional state of practitioners. Recognise that practitioner's burnout, ambivalence, and disillusionment can negatively impact on their ability to engage effectively with young people relationally.

Operationalisation: Provide regular opportunities for clinical supervision and support that address these issues. Implement strategies to mitigate potential isomorphism, for example providing opportunities for self-care, peer support and interdisciplinary collaboration.

Operationalising these implications requires a commitment to systemic change. It's not simply about training practitioners but reforming organisational structures and practices to foster relational and equitable service delivery.

6.4 Limitations of this study

Complexity as a paradox

Attempting to honour the complexity within the concept of harder to reach young people by taking on both macro and micro themes via multiple theoretical approaches may not have done the themes in this study justice, as opposed to focusing solely on one aspect – such as the organisation or the young person. Also, thematic analysis relies heavily upon the researchers' beliefs, which can result in a non-balanced analysis of the study.

However, as stated throughout this thesis, I believe that a systemic approach requires considering multiple perspectives, which may then provide a richer, comprehensive and more holistic understanding of the power and relational dynamics of hard to reach young people open to services. Therefore, the 'easy' route of solely focusing on one aspect was not considered.

Generalisable and comparable outcomes

Further limitations are that the participant-observation period may have been too short in duration, resulting in possible isolated occurrences rather than recognising socio-cultural patterns (specific to that community) emerging over a longer time. It may have also been helpful to have compared adolescent teams across London and interviewed more participants. This may have provided further insight into trends and themes across services.

As explained from the outset, the most significant limitation and challenge was being a participant observer in the alternative provision rather than interviewing and observing young people who are open to the adolescent team out in the community. This would have provided an added layer and perspective in the engagement process and the wider discourses surrounding it.

However, this research study was never intended to be generalisable nor comparable, as the borough in which it was carried out, is unique, with its nuanced customs, rituals and sub-cultures. Furthermore, any attempts to create universal and generalised conclusions from my findings would go against what the research study set out to do. To decentre the more dominant practices within health and social care that are assumed applicable to all.

6.5 Conclusion

This research study investigated the relational processes and contributing factors influencing engagement with young people described as 'hard to reach' within the adolescent team in youth offending services. The findings revealed a complex interplay of micro and macro factors, challenging existing assumptions and highlighting significant systemic issues.

This study found that the 'hard to reach' label is problematic, often creating barriers to engagement by placing the onus on the young person rather than the service. Young people themselves did not identify as 'hard to reach' but punctuated the importance of relational authenticity, compassion, and love in building meaningful relationships with practitioners. Equally, the practitioners demonstrated ambivalence, possibly mirroring the young people's own experiences of disillusionment and lack of agency as a result of the organisational pressures they faced.

The study's macro-level analysis exposed significant systemic challenges, including structural violence, organisational power imbalances, and a lack of culturally sensitive and trauma-informed approaches. Bureaucratic processes and the pursuit of evidence-based practices often prioritised procedures over relational engagement, perpetuating a cycle of marginalisation.

While some might perceive the suggestions offered as idealistic. Idealism in this context, is not a weakness but an important catalyst for change. It inspires practitioners to move beyond problem approaches and towards holistic, person-centred care. It motivates advocacy for marginalised communities, promoting equity, access to resources, and social justice. This study's aim is not about rejecting Western thought but critically examining and challenging its limitations in the context

of working with 'hard to reach' young people, especially those from the Global Majority. This research does not advocate for an anti-White stance but rather calls for practitioners to actively disrupt oppressive systems within their practice.

This study offers a vital contribution to the field by highlighting the systemic and relational complexities influencing engagement. It punctuates the need for a relational, trauma-informed approach that prioritises genuine connection and empowers both practitioners and young people. Further research should focus on refining interventions and organisational strategies that genuinely reflect this nuanced understanding of the challenges faced. This study's goal is to encourage a paradigm shift in how services engage with vulnerable youth, not to offer simple solutions, but to spark necessary discussion and inspire transformative change.

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Appendix A: Field Notes – Adolescent team meetings.

26/01/23: adolescent team meeting: session notes 1

Having met with both [REDACTED] and [REDACTED], the managers of the adolescent team a week prior as a way of introduction, was helpful. They were keen for me to join, and stated that they had already tentatively discussed my research with the team, and that they too were interested and keen to be involved. I was curious about their interest and thought about the need to be heard or seen.

They explained that their team meetings were predominately online but they do also have it face to face sometimes. I was also made aware that their team meetings were fortnightly, on a Thursday and from 13:00 to 14:30.

On the day of the observation I was pumped up from my observation at [REDACTED], with an hour between and wondered how it might position and influence my observation in the adolescent team meeting. I recalled also, that the managers guided me to turn off my camera whilst I observed in our introductory meeting - which made me a little anxious, as I wondered how this would affect the observation. especially by doing it virtually, would I pick up on the nuances of relational interactions? Wouldn't it punctuate my presence and what might the team think of this? I wonder now why I did not question being told to turn off my camera - maybe because I did not want to seem rude, but grateful for being allowed to be in the team meetings.

There was an initial check in with all members of the team and then I was asked to introduce myself to the team, explained what I would be doing and the purpose of the research, reiterating that I was available to discuss further if required. A few of the team members seemed particularly interested in my study exclaiming the importance and relevance for it. I felt particularly proud in this moment. I was sat in the comfort of my home chair in my office, looking at a grid of 2D squares, it was hard to gauge the 'energy' of the meeting as the presence of one another's being was lost.

I then turned off my camera and sound as the agenda for the meeting was presented by Josh and Lorraine (managers). I was struck by the bureaucratic, process driven themes on the agenda - which shouldn't have surprised me, as I am a qualified social worker and have consulted to social care for years. Maybe it surprised me more as I had come from the lunch time break with young people and was looking through a researchers/witness lens/position.

The first topic for discussion was the services (YOS) practice week that was coming up, and the request for the adolescent to share their views on 'how to' engaging harder to reach young people who are exploited. A conversation ensued surrounding how the rest of YOS saw them as specialists and that trainee social workers would be shadowing some of them.

I was curious about this, the positioning of the team and the positioning of young people as harder to reach. I wonder about the pressure and anxiety and expectations this came with.

The meeting was particularly quiet, which in experience (from doing it online) can be painstakingly awkward - there was an apparent (or at least to me) 'us and them' between the social workers and managers.

The managers further spoke of exploitation needing to be recognised and most that are exploited, do not know they have been. At this point, I began to wonder if the conversation was for my sake - I further began to make the link to the previous observation where I thought, that staff wanted to be heard, and possibly recognised for their hard work rather than judged for what they were not achieving. But this was a hypothesis.

The topic then went onto process and procedure in filling out a specific form. The NRM - which stands for, The National Referral Mechanism. which is a framework for identifying and referring potential victims of modern slavery and ensuring they receive the appropriate support.

The managers spoke about 'thresholds' being higher and the need for more "evidence" when disclosures are made - which has implications for cases. I was particularly struck by the use of language and the number of times thresholds and evidence was used - I lost count past 10 times on both. I also appreciated why we had forms, process and procedures in place, but it felt very binary and mechanical with a lot of time spent on discussing the literally 'ticking' of a box on a form.

The team then discussed whether further consultation would be had regarding the form, as it seemed prejudiced against unaccompanied asylum seekers. And that there were currently a lot of unaccompanied children in hotels, but the process of the NRM is driven from a adults perspective (as stated by the manager) and that it is Not child focused and that there are Broader issues and concerns around CSE etc. A further exploration primarily by the managers was had around 'reasonable ground' thresholds and the dilemma surrounding it in the context of the new development for the NRM.

I was struck by the silence of the team, I expected or maybe hoped they would take this point up, or be triggered by the injustice and maybe challenge what was being said. Maybe this was in the context of social work being a role to address the injustices in society, or that it was positiond by my need and want to challenge, which arguably stems from my childhood, being the eldest and being outspoken.

I then wondered about professional burnout and disillusionment against the 'system', this felt quiet negative and tiring - wondered further if the adolescent team's quietness was a reflection of their tiredness.

The discussion, or at least lecture (as it felt at times) by the managers was on to get information from children who don't disclose or know they are being groomed. As gathering evidence does not fit with the assessment process, the obscurity of adolescent grooming and exploitation in regards to process and procedure started to become apparent.

I found myself becoming a little bored, and wondered if this was how the rest of the team was feeling, as their voices were not the prominent one in the meeting. I attempted to re-engage, and wondered how the team saw 'engagement' and what it looked like for them in the context of their work. Was it a full assessment? A telephone conversation? I brought my attention back to the meeting, and reminded myself to keep the question in mind for the 2 stage of my study.

One manager spoke of this new development possibly being uncomfortable for social workers and added further stress on them.

The topic of discussion went onto the need to engage younger siblings of children that were open to them - and what this might look like with primary aged children. Further case discussion was had in a more generally sense rather than specific cases surrounding stabbing and shootings in the area and a fear for social worker safety.

This point was also striking, as I wondered what measures were in place for the social workers, and is this what they signed up for? They further spoke of 2 girls that were involved in CSE cases open to the team but there were cross borough issues and how they would navigate this.

I began to get a real sense of the complexity not only within the organisational procedures and process but also the interface between the actual work they were employed to do and how they went about navigating it. One social worker spoke of the dilemma faced where a young person on their caseload makes disclosures about other people who are being groomed and exploited and gathering information on these other young people was challenging and problematic. I really was curious at this point about what got in the way, and why was it problematic - but these questions were not taken up, I also didn't feel it appropriate to ask, as I was acutely aware of my otherness in the team and felt positioned by the managers not to speak.

The topic for discussion turned to the staff team dealing with very emotionally challenging circumstances at the moment in relation to super complex cases. The team was reminded of therapeutic support that was offered within the local authority - something that Josh testified to going to and it being of use to him. Again, I wondered if this was for my sake - in the context of being a therapist and a display of care and consideration. I also wondered what my cynicism might have been about, was the inner child in me being triggered from the previous obvious and was I being defensive of him in relation to professionals with power who were talking about 'cases'. I further

wondered if Staff Mirroring the children's crisis as they hadn't the time to sit and unpack their issues even though they were being encouraged to.

The managers then stated they would be less available for the next couple of months to the team. Due to recruitment etc. this felt very contradictory to the previous encouragements of self-care. Although I do understand the work pressures within health and social care, I wondered what it was like for the team hearing this from their boss's. being a manager of a team myself, I felt like I would have been explicitly curious about this.

In total there were 10 members in the team. Including two managers. It was explained that a clinical lead (a man who has a nursing background) would be joining the team. the managers were white as well as the senior social worker in the team and the rest were BAME. Of the team two are men (one being the manager) and the rest women.

Josh spoke of disproportionate boys on the case load and a space to think about what this might be about. I had some thoughts on this, but again refrained from commenting.

Management reiterated their case load being only 12 cases and the need to justify this in respect of the rest of the service - they being seen as specialists and their cases load requiring intensive support and engagement In the context of exploitation, It felt again the justification was for my sake.

Towards the end of the meeting, it was relayed that senior leaders had requested that all staff members keep their camera's on when in meetings. At this point I turned mine on, to honour the request even though I am not staff. I felt relief at doing so, and I was met by smiles and 'welcome' by the managers.

Further topics for discussion, again by the managers was around being Relational and their work being crisis work - and critical thinking was to be promoted with Hypothesis generating encouraged.

Again, the team was very quiet, which wasn't talked to, I wondered if it was like this all the time.

Lorraine then talked about team members managing risk and social worker autonomy. Creating space and time to make decisions for themselves. Using their own judgement vs managers telling what to do. However, a female black Social worker challenged this stating that, being autonomous in theory was all well and good, however would she be reprimanded in practice. this made me think of a Top down approach in leadership style as well as team members not feeling they can speak out whilst being encouraged to challenge.

It made me think about the organisational system and style (culture etc) and the tension between theory and practice, talking a good talk but not walking the walk - which may be due to policy constraints and senior leadership pressures. So on surface,

collaborative and partnership working within the team is promoted, it is not something that is felt and lived (possibly). There was an awkwardness between Lorraine and the social worker and within the team (as they were silent). The social worker continued by stating that space should be given to all them to do their work. It made me think about trust in the team, trust in their ability and in turn, I wondered if the team/organisation and staff trusted the children and families they worked with.

Furthermore, the theme from the interaction, for me was about 'what your saying isn't reflected in practice'. it also made me think about a Crisis driven organisational culture which was possibly reactive and not responsive.

Seniors are white. Predominately male. In both settings. Support workers young, in social work team women and black 2 white and one man.

09/02/23: adolescent team meeting: session notes 2

I kept my camera on this time, and the team were asked to do a 'check in', Josh was on annual leave, so Lorraine was leading (being the second manager). She explained from the beginning that she had to leave at 3pm (the meeting finishes at 3:30) and that Suzie (a white female) would be taking the lead in her stead, which Lorraine said that Suzie was not aware of, in a jovial way.

I thought about hierarchy, whiteness, and privilege - maybe this was based on my current writings on decolonial approaches, or being a Pakistani male, or both. Either way, I wonder why Suzie had to chair - and why could it not be any of the others? Coming from the school's observation, it felt as though the team members where the untrusted children and the managers the teachers.

It was noticeable the effort Lorraine was putting in to be relational and thoughtful with the team from the outset, to the point I did wonder if it was a little forced or if she felt insecure or anxious that she was alone without Josh. I also wondered if it was this for my sake, to 'prove' that she was a 'good' and thoughtful manager or was it to be liked by her team. As I do know what it is like first-hand being a manager and the power dynamics that come with it in relation to an 'us and them'.

Whilst team members checked-in a scaling question was asked in relation to their current mood - which I was interested in as it positioned team members into 'having' to answer whether they wanted to or not. As I write this, I am aware of the critical tone that this might have, and am beginning to wonder what it is about? what does it say about me and my approach to this study and how might I remain more curious rather than becoming married or fixed to one idea or position?

Lorraine brought up the same topic as the last session, the RMN process and 'reasonable threshold' being more stringent - and social workers needing to provide more evidence when making referrals. Lorraine acknowledged that it was harder for

their team to provide evidence when there were disclosures made rather than concrete 'evidence.'

Again, I was just as struck by the bureaucratic language as I was in the first session - I was curious about the mechanic and repetitive nature of the way the team spoke about the children - I wondered if they were desensitised to the human and relational elements of the 'cases' they discussed and if the organisational process created a distance between vulnerable human beings and the team/professionals.

Lorraine then spoke about senior leadership (her boss's) asking for the team's visits being evidence on the system so that she could justify their lower-case load due to their intensive work in comparison to the rest of the youth offending service.

I thought about 'demand vs output' demand for inequalities and injustices to be addressed (safeguarding) by social workers vs what social care services could practically deliver with the resources that they had (workforce, money etc). I now realise 'demand vs output' is just as mechanical language as 'thresholds and 'evidence' and the pressure on services - which may be a reflection of wider society issues surrounding deprivation, divisiveness, inequality and vulnerability - and the need for justification of tax payers money on commissioners which in-turn trickled down into services.

I thought about buffers and containment - who contained who? Or a organisational culture of blame and risk. Risk of social workers losing their jobs, risk of children dying and being blamed for it. It felt like a pressure cooker of anxiety, red tape and silencing ready to boil over. Was there a disillusionment in the team that reflected the local community's disillusionment towards the local authority and government?

The team meeting was still as quiet as the last time, with Lorraine prompting replies. The next agenda item was another process/business point, the purpose of Permanency planning meeting and its applicability to their team - long term plans for children in care was discussed.

This then led onto a children in care discussion led by Suzie the senior social worker and Lorraine, with the remaining team members remaining quiet. Suzie spoke of needing to know what the expectations were of residential providers, such as: key working session notes etc, which required clarification from commissioners.

A reflective conversation between the Suzie and Lorraine continued surrounding placements not seeming to do welfare checks when children were in police custody and needing clarification of what the expectations are of placements. This was in the context, of Suzie's client, who was currently in care and there were safeguarding concerns regarding the welfare of the young person which had promoted these questions and discussion. The young people was described as turning 18, white and lesbian.

I wondered about some of the prejudices against this young person and how her needs we not met in the same way as other children in the home. Also how different homes differed, in respect of approach, what they provided and the amount of children in one home, and how this impacted the care of looked after children who were extremely vulnerable.

Lorraine then spoke about children held in custody - and the impact on the child, as they are held in for significant amount of time. And the team having access to the children but others in service aren't able to and that further training surrounding the awareness of the emotional wellbeing and mental health impact on children held in custody would be put forward for good practice events.

a staff member (male, black) spoke of being emotionally drained, due to their cases load and the issues his young people were presenting with (gangs and criminality) but nothing a good sleep wouldn't fix. This I found interesting and emotive, as the only male in the team, it seemed as though (at least to me) that he was putting on a brave face, which then made me think about gender positioning especially in the context of their work, in which there were mainly women. Was there an expectation for him to contain the team too? Was he placing this expectation on himself? Or was this my projection as the eldest son, who felt he had to contain others? Maybe it was a bit of both.

The meeting finished 40 mins earlier, however Lorraine asked me about my thoughts and if I was able to reflect on some of the conversations, I explained that I was very curious about the young person in care, and wondered about unconscious bias in the context of class, age and sexuality.

I further spoke about being a participant observer, but was aware of not wanting to perturb their meeting too much. Lorraine seemed particularly keen for me to get involved in future discussions - I wondered how the rest of the team might have felt about this, but kept quiet (when ordinarily I wouldn't have), but felt If I did, it might belittle Lorraine's role or seem as overly challenging for a researcher even though it was at her request.

23/02/23: adolescent team meeting: session notes 3

Today was the final observation with the adolescent team, and also my final observation and semi-structured interviews with the young people from [REDACTED] school.

Having come into the meeting, which was online, I was aware and saddened that I was not able to meet the team in person. Furthermore, the interviews with the young people prior this meeting, had a profound impact on me, in a way I hadn't expected - which made me feel aligned to the young people over the adult professionals. This was something I wanted to be mindful of, in respect of positioning, bias and lacking curiosity in the adolescent team.

I arrived at the online meeting to be greeted by the team, Lorraine was chairing, and explained that Josh would be joining later as he was in another meeting. The usual check in was carried out and the consensus was one of feeling drained and tired.

Scaling questions were employed by Lorraine to check in with staff as an indication to see how each team member was feeling (as was the case in previous sessions). I wondered about their use, and if one of the team said that they were at a 2 (two being not feeling/doing great), how this would this be held or attended to.

I was curious if management felt the need to be solution focused when it came to low points on the scale and what might this might mean for Lorraine and Josh in respect of service delivery and their management style and approach. Did they see low scale points as a reflection of their management of the team. I then thought about burnout, feeling valued and how this might be linked to wider societal feelings of burnout and disillusionment towards the government in respect of our current living crisis, access to resources, the rich getting richer and the poor getting poorer.

The black male (the only one in the team) spoke about being exhausted but, reframed this as getting out what you put in with clients, that is, working all hours is a necessity in the context of their young people.

Another social worker on the team spoke of feeling frustrated with external agencies, and this was draining her. She talked about anxiety in the professional system regarding taking on cases which in turn raises risk for the young people and families, this felt like a hypothesis but she did not expand on the anxiety, which I was curious about.

Susie, the senior then spoke about her case load in the context of her check-in and that he had two young people who were about to breach theory placements (as they were looked after children), and that they were nearly being excluded from school. She spoke about feeling tired and drained at fighting against the system - in respect of advocacy and attempting to get services such as education. She spoke about the frustration of services not thinking about the long term, and impact on these children - and requiring more thoughtful and systemic approaches towards interventions. I was very curious about this, as this was emotive and something I am very passionate about.

She further spoke about only news is bad news shared from placements.

The check in took up quite a bit of time, more than the last three meetings.

Being drained is a consistent theme and pattern. I wonder about the impact on the children and quality of interventions - I thought about swimming against the tide for some reason and fatigue.

Lorraine attempted address, and create solutions regarding the teams low score on the scale as well as feeling drained - which I think felt quite negative to her, or possibly a representation of her and Josh's management. She spoke of them both being their for the team (which I now note has been a consistent message in all three meetings), which I do not doubt, although there seems to be an apparent tension between being there for the team, and the bureaucratic nature of the job which is related to the top down, statutory process and procedures and demands of the team to provide evidence, etc.

I wondered if Lorraine, did not try to solve the issue but just honoured what the team were going through, was witness to it - or just acknowledged it. what that might look like. I was also mindful in my curiosity that I am positiond by my therapeutic lens. However, this does not negate compassion, empathy and understanding - the need to always solve things may come across as disingenuous.

I noticed how Lorraine gave Susie quite a bit of space to talk things through, rather than Paula who spoke about her frustrations with services. I do not think it was deliberate but unconscious - they both scored themselves at a 5 and spoke about the same feelings. I wondered about the role of race in this instance and hierarchy and familiarity and power.

Josh then joined the meeting and was invited to check in, he spoke about being very busy and that there were serious youth violence incidents over the past two weeks which does not get reflected in the news (as two young people were stabbed and killed) and if society was de-sensitised to this, or that they did not care - as it wasn't news worthy. I wondered if the team were also de-sensitised due to fatigue, feeling drained and overworked in a system/society that felt oppressive.

I think it important to state, that at the time of writing up these field notes post observation and intermittently which is based upon hindsight, retrospect, upon reflection, as well as in discussion with my supervisor, has highlighted that although I allude to it, (as has looked at my writing), I have not explicitly talked about race, racism, or institutional racism in the context of my field notes, or my chapter draft handed into him.

This came as a shock to me, as I consider myself a decolonial thinker, however possible avoidance of race may be located in my historic narrative and relationship to having experienced racism overtly - which was verbally and physically abusive.

As such, naming the elements within the MDT, such as the privilege given to Susie, to speak more, the boss's being white and the workforce being BAME as well as the clients being predominately BAME is something that requires addressing. I wonder what the role of sub-conscious bias plays here? Or white saviour mentality - admittedly, it is uncomfortable to write this, which aging may be located in my want and need to be accepted and feeling shame surrounding my Pakistani heritage as a child and wanting to be white.

I also wonder if these conversations are attended to by Lorraine, and Josh and their seniors, who are also white - do they speak to white privilege and the power afforded to them in the delegation of their powers. What might this feel like in person? If the meeting was not online, how might Paula have felt in the moment, did she notice that Paula had more 'air' time as I did? What might this have felt like for her? Did the drained feel, incorporate themes of white privilege and institutional power.

Returning to the agenda, of the meeting, the items were discussed.

A project was discussed, called the 'Big house' which runs programs for children with an interest in music. The Application process discussed, as well as there being limited spaces. I wondered at this point, who and how would the team choose who they should put forward. What social workers would be privileged? And would it be the more vocal or dominant voices in the group such as Susie the white, senior female worker or Derek the black male. Which further made me think about the power and privilege afforded to the male gender in the context of patriarchal systems of oppression.

A lengthy discussion was had on record keeping on liquid logic (the social care database). Lorraine and Josh spoke of random audits being carried out and the need for records and forms being up to date. They further punctuated that this was a action that was requested by the 'big boss's'. I wondered about how Josh and Lorraine felt, about calling the team out on their record keeping as it felt punitive. I wondered if Josh and Lorraine used the bosses as a way of deflection, so that they wouldn't be perceived as the 'bad guys'. Connected to the theme of the team feeling drained, I wonder how this discussion of record keeping and the team not being up to date might influence and/or demoralise.

During this discussion, which was not really a discussion but a 'talking to' by the managers, the remaining team members remained silent (which is a theme during all three observations). Further talk surrounding record keeping and it being up to date - such as chronologies, case summaries were had - again the team remained quiet. I wondered about the role of 'big brother' always watching - big brother being the senior bosses. I thought about trust, and autonomy and the ability to be able to speak out and challenge. I also wondered about the training, theory, policy, and practice promoting collaborative, partnership working but something becoming lost in practice - I also thought about how this related to practice with the young people. For instance, the team members possibly feeling powerless, which may be how the young people and families feel when working with the adolescent team.

Josh continued to talk about the team inheriting cases from other services which further made me think about the remit of the adolescent team, and specifically having a reduced case load so that intensive support could be provided to young people open to them - which was specifically the harder to engage and those who have been groomed and exploited.

However, this felt disingenuous by those in power, as previously in the team meeting the team were being scrutinised to justify their reduced case load to senior management, in addition to being given more cases to support with wider service pressures. This, I felt was a guise, and wondered what message the adolescent team members were receiving. I was curious about the exacerbation of fatigue, feelings of drained and burn out.

Susie, then addressed the challenges she faced in respect of having time to do her work with young people in addition to all the paper work, and spoke about the number of emails they received and had to go through which took time in of itself. As the rest of the team remained quiet, I wondered about Susie's role in the team and the expectation she might have felt in respect of being a senior member and maybe feeling that she had to be the spokesperson for them.

Lorraine and Josh then talked about mandatory training and that team members has to attend, this was done through humour, however there was an undertone from management that there were things that to be done. This felt a little contradictory, as the attempt to be friendly, jovial and humanistic was overridden by procedure and process. again, I understand that this must be done, but I wondered about transparency and authenticity surrounding management's role rather than a need to be possibly liked by the team.

The conversation then turned to the overall service looking for volunteers within the adolescent team. senior management, it was explained (by Lorraine and Josh) were looking for volunteers to join a panel on a monthly basis for approx a year or so to discuss matters such as universal services, and how they might step things across to early help. The team remained silent, Josh and Lorraine explained that Susie, was the rep and had been up until now, and tended to volunteer for most things and that others would need to step up (my words). Susie spoke about being a rep for lots of things and it being interesting, such as the children's practitioner council, which is about Inclusion and advocacy for young people. Opportunity to discuss on the ground that needed to be thought about from bottom. Management further stated, if No one volunteered they would appoint someone. They explained, that before anyone asked or through it, Managers cannot do it due to their duties.

This again, felt punitive and contradictory to the idea or message of support that management were attempting to convey throughout the meeting and previous session/observations.

Susie further spoke about more volunteers needs to join panels so that they could feed up their experiences to those at top. I wondered about this, again about Susie's role, her race and privilege and power - and where some voices were heard more, over others. Or if the rest of the team members felt like it would be worth volunteering in

this context - especially in respect of them feeling over worked, under-resourced and drained.

Lorraine asked what might be getting in the way of people putting themselves forward as the team remained quiet - it felt extremely awkward, I felt tense for Lorraine and Josh. There were not any answers, and the team remained quiet. I felt bad for Lorraine, as she was actively attempting to engage the team, which made me think about the harder to reach young people.

The meeting continued with the theme of record keeping, and Josh discussed those who were not up to date with their paper work on the liquid logic (national database) and who had not done what they had supposed to do - Derek then spoke up, which felt like he was being positioned by the managers to speak out, (all though they did not say his name). it felt a little shaming, as the team remained quiet, and still in regards to their facial expressions on the screen. Josh then made light of it, stating if team members felt that they were behind, to send them an email stating so.

I wondered about the doubled themed message that the management was sending out to the team; being supportive as well as being under surveillance - and wondered if this was contradictory and if the team felt like this too. Furthermore, how this equated or was it mirrored within the client/caseload system - interactions with the young people.

Lorraine and Josh, then spoke about the team becoming larger and interviews for senior posts would be commencing - both for internal, as well as external candidates.

The agenda items for the meeting had finished and Lorraine and Josh, invited the team members to discuss any other issues they had, or cases they wanted to reflect on. Again, there was blanket of silence, as well as non-animated/expressive faces within the square boxes on the screen - with blurred out backgrounds. I wondered about the etiquette for online meetings, now that it was the new normal since covid. Squares. Non animated faces.

Lorraine spoke about Josh and her having the team's back, and an acknowledged Majority of the risk that they have to manage and deal with out in the community in regards to their case load and young people. Josh spoke about being the buffer between them and the senior staff - which further made me think about, the words evidence and scrutiny. Evidence that the team were doing their jobs effectively, and feeling scrutinised by senior management - and that a buffer was required by their managers (Josh and Lorraine). I also wondered, if Josh and Lorraine, were attempting to demonstrate that they were on 'their side' - and I further wondered what this might be about, was it strategic in nature regarding a top down and collaborative approach (both/and)

The managers continued to invite conversations which was not picked up by the team, which then led onto a process led talk by Josh, explaining 'things' to be done and it's not

being done, (this, again felt punitive). He then spoke about not being able to defend the team if something goes wrong (in respect of record keeping). I then thought about the contradictory messages being conveyed again and the theme of team stress, feeling drained and being able to speak out. Also, if the team felt desensitised to the talk about record keeping and had 'switched off.'

The managers continued to attempt to engage the team in attempts to foster an environment of collaboration - but silence continued to reign.

Josh then spoke about having expectations of the team regarding service delivery, process and procedures however, if team don't say anything or speak out or challenge - then they (Josh and Lorraine) can't help them or defend them, when it comes to seniors questioning them. I wondered if Josh felt frustrated at the lack of engagement by team members and then wondered if this is how the team members felt with non-engaging young people and what that might look like in respect of interventions and interactions.

I also thought about the role of power and hierarchy, and how this impacted on team members ability to speak out. Did they feel that they could, or if they did speak out, would it be actioned and would they be supported in the way that managers spoke about? Josh spoke about audits being carried out in the service, and I wondered about the ripple effect of this - the pressure of having things done, versus working with vulnerable young people.

Susie then spoke out, (again I thought about her role as the spokesperson for the group) and stated that everything that the managers were saying 'made sense'. I thought about compliance and hierarchy in respect of Susie being a proactive team member who puts herself forward and is a senior, and how this might position others as well as how they might perceive her. Susie, Josh, and Lorraine spoke about it being about sharing and managing risk - which was the over-riding factor.

Lorraine then invited a conversation, for the remaining time, inquiring how work was going with their children - after a moment of silence, a black female social worker spoke about, a child where the work was coming to an end. She stated that she was sad but the work had been positive, and that he was now moving borough.

The energy and mood in the team, shifted and lifted, and felt more positive, engaged and active - as the team members faces were more animated and, reflections on how well the social worker has done to engage the young person.

Josh scaffolded on the conversation explaining that he was in a team meeting and was asked by other managers what the adolescent team does differently to the rest of the service.

Appendix B: Field notes – Alternative education provision.

26/01/23: [REDACTED] field notes 1.

The lead up to the observation was interesting, as I have a working relationship with the 'gate keepers' from my previous roles/work. That is, I know the head teacher, who was very eager for me to do the research and was supportive. I was then signposted to the deputy head via email who, I imagine is over-stretched and overworked due to my experience of working with health, social care and education colleagues; and that I will be 'dumped on him,' as he is 'told' to facilitate the research for me in amongst all the work that he has to do.

Attempting to arrange a introductory meeting with the deputy head prior to going in, was in part directed by ethics and my personal display of a show of respect. Meaning, I did not want to show up and the DH not know who I was, as well as being able to answer questions, if he had any. I contacted him via email, and the tone of his response was a little (as I perceived it) curt, explaining that he did not really have the time. This upheld my initial hypothesis surrounding be 'dumped on him'.

He was also referring to me by my second name, which got my back up as, it conveyed he really was rushed to the point he did not have time to read my email, where I introduced myself as Nasif Nijabat, and what I was known by. I replied correcting him and explained I felt it important to have a 30 min Introductory session - he replied requesting I liaise with his administrator next week but he was stretched.

I was thankful for his time, and thinking retrospectively now wonder if I was over thankful, over grateful taking a one down position which is informed by my meek south Asian family culture.

An online introductory session was arranged two days prior to the observation commencing. Once the meeting had started, I noticed that the DH was in the school front office with people surrounding him, from the start other staff members were asking questions.

I was, jarred by the experience and found it disrespectful as it set the tone for the meeting. 5 minutes in of introducing myself, I stated that I did not think it was appropriate for a meeting to continue in the context of him being in a public place and I was sharing things that were personal in nature. The AD apologised and stated that it was rude of him and that he would call me over the phone in 10 minutes - which he did.

On the phone it felt as though he was attempting to make up for his rudeness and inquired if I was the head of service in my profession, as he stated that he had looked over the information sheet as well as spoke to a colleague about me. He further stated that he thought I was a student psychologist - which I was curious about. Did this inform his approach towards me, what had changed? Did he see psychologist's as being inferior to other roles? He told me that his wife also did her PhD.

He became curious about my research giving his perspective and giving advice to what I should do. This was frustrating, as I was not going to go back to TREC and redo the whole research based on his views, which I tried to explain in a polite way.

I now wonder about my responses to him, specifically, my annoyance and frustration which was apparent. I think it may have been a clash of ego and power but also, possibly my relationship to authority figures - specifically in regards to school. Having been expelled from six schools during my adolescent years and being positioned as harder to engage myself. Furthermore, he being a white middle-aged man in a power position, which I find triggering regardless of the context. That is, I become quite anxious, overthinking my responses wanting to not look stupid. This also was part of my upbringing, to revere white people, and it's 'brightness' and 'rightness' which I now understand as a remnant of colonialism, divide and rule policy from India. My grandfather and father, hold in high regard the royals, class, and western education as the pinnacle of all that is 'civilised'.

Arrival at the school:

I arrived at 11:20 with my DBS in hand as requested prior, I knew the building/school from years before, within a different capacity but it did not take away from feelings of anxiety within me. Anxiety surrounding meeting children and staff in the role of an observer but also, what schools evoke in me - being expelled from six schools and my negative associations to it. relating to authority, a binary, 'top down' punitive use of language and what felt (to me) like a lack of understanding and compassion.

The building itself, was grey and white concrete, square in shape and seemed like a design from the late 60' or 70's. It was surrounding by high metal fencing and cameras, with several entry points. I wondered whether they were safeguarding the children within the school from those outside, or safeguarding those outside from the children within. The building was grim, it was run down and was in need of a lick of paint and repair, as there was tarps covering a window - I wondered if a child smashed it. The backdrop of the building was in a residential street's, in a particularly deprived part of Dagenham

I had to buzz through three separate buzzers, to gain access to the main reception area. The children entered at a different place to visitors and staff, which was highlighted by signs on the outside and at opposite ends of the building.

Once inside the reception area, which was within a square shaped room. I wondered about the 'squareness' of the building, the reception area was partitioned off with a double-glazed glass window separating myself from the admin staff behind it, which had the feel of a GP/medical surgery to it. I signed in as a guest on the electronic pad, and admin staff stated that they were expecting me, they also said that they had read my information sheet regarding my study, which was on the wall in their staff room too.

The reception had pictures/paintings/artwork on the wall which was created by the students. There were Pictures/art of Tupac relating to his song 'change's' and various Mexican death skull pictures which I found curious as the stark difference of culture, death and change added to the grim feelings when entering the building. I wondered if this is how the teacher and other visitors felt. There were various certificates and accolades highlighting the schools 'runner up' to various awards. I wondered what the children's entrance was like.

Once in the building I was taken over/introduced to Hanna and Nathan who were the PE members of staff, in a room that was off from the main hall. The main hall, where I knew the observation was to take place was a large square (again with the square!) with various rooms coming off it, all rooms fob security operated - meaning that you could not enter or leave a room without a member of staff allowing you to do so. The rooms were classrooms and offices.

Surrounding the top edge of the hall ceiling was glass windows which lit the room up with natural light from outdoors which illuminated the parquet flooring and its deep mahogany. There were two table tennis tables at the top end of the hall with 4 foldable canteen tables with bench/seat attached. Two were faced vertically at opposing ends of the hall, facing each other and two across the middle between the two tables at the side. The tables reminded of prison canteen, as seen on American tv programmes.

When in the room in with Hanna and Nathan, there were two desks with computers and sprots equipment laid around the room and on walls which felt quite messy. Hanna took the lead, and explained that the children would not be out until lunch which was at 12:15. Nathan asked what I was looking for in my research. I went over the study explaining that I wasn't looking for anything specific but am interested in relationships between the young people and professionals and what was important to the young people when engaging them.

It seemed, or at a least felt, that Hanna and Nathan, as well as other members of staff who came in and out of the room, felt possibly judged and scrutinised by my presence. I

broached the subject explaining that I was aware that it might be a little weird having an outsider present and how it might change the dynamics of things.

Nathan explained that he had two young people in mind for the interviews/chat at the end of the observations. It felt at this point, that the staff team wanted to 'prove', be helpful or show me what 'good' relationships looked like rather than it emerging naturally in the observation.

Once in the hall I went to one of the tables which was in between the two against the sides, opposite the table tennis tables. Hanna sat with me, and a group of boys sat at the table too, once they slowly started coming out for lunch. Within 3 to 4 minutes approximately, there were approx 17 young people and 10 staff members.

The deputy Headteacher came over and explained that there had been an altercation a couple of days before, and there tends to be a lull and a reduction of student's attendance. And that when an altercation happens between students, they are separated out across different sites (there are three in total across the borough)

the DH continued sharing his views on hard to engage young people, becoming visibly animated in his gestures as he displayed his enthusiasm, I was again becoming a little irritated as he wanted me to engage with him, but the observation had started and the young people were curious about who I was.

He asserted that he felt that consistency and discipline worked with children with challenging behaviour and further explained that he felt that the children in the hall were not hard to engage as they were engaged. I was not in the mood to explain my method, or rationale again as it felt as though he was not hearing me.

The DH then after two minutes of talking, suggested that we should go into his office so that we (he) could talk - as he was progressively becoming more passionate about the topic. I then asserted, in a jokey but sarcastic way that he was not the research and the observation had commenced. In retrospect, it was rude on my part and he looked taken aback. I am curious now about the DH possibly wanting to be seen by me as a 'good guy', or possibly being judged by me the researcher.

Whilst at the table several young males asked who I was, I explained and at times Hanna also supported me with this, sharing what I was there to do. Two young people (boys, one Asian and one white) passionately, explained that Hanna, is really 'good' member of staff. I became curious and asked what this looked like and what made her good. They explained that she listens, she cares, and pays an interest in them, checking in without them asking.

There was an apparent separation visually of the senior staff and the support/PE workers in the clothing that they wore - which felt like gangs or cliques' colours, which was ironic considering the children in the hall were known affiliates of gangs.

Senior staff wore, formal wear, such as shirts and trousers and the support/PE staff wore trainers, tracksuits, and less formal clothing. I wondered about this in respect of engagement with young people and being seen as more relatable. It made me think about the clothes I wore and what this might mean. As I wear 'street wear' and always have, and also being a senior member of staff, this is something that I have continued to do, in the context of my identity rather than being 'down with the kids'. Clothing, street wear is culture that stems from music, black music, such as the Hip hop and grime music culture. All young people wore uniforms and there was an expectation for them to do so, as was observed, as senior staff reminded several young people about their attire commenting on it.

All staff members wore badges, fobs/keys around their necks, which contributed towards the prison warden effect and feel. The children were served food from a small makeshift trolley that was portable, the children went up to it to collect their food and then sat down at the tables.

I was initially 'sized up' by some of the male black and brown young people, who then eventually came over to me, I felt ok with it, as it took me back to something I felt familiar with, not to be intimidated and the 'street code' of eye contact, but not in a confrontational way, I nodded at a few of them, and in turn they came over and fist pumped me as a gesture of respect.

Two south Asian boys, one Bangladeshi and the other Pakistani asked my name and inquired where I was from and my religion. They then commented on my tattoos, and asked about them stating 'how have you got them?' and 'what did your mum say?' from which a conversation ensued surrounding the good, bad and the in between, I spoke about being a proud British Pakistani man. The young boy from Bangladesh explained that he was not proud of being British - and I was curious, he then asked me why I was proud, and I explained that I was born in the UK, this was my home, and my parents were from Pakistan, so it was the best of both 'worlds' for me. The young person, went quiet and explained he did not think about it like that.

At this point I thought about the role of critical thinking, colonising minds, and the impact I was having - was I inadvertently modelling a more relatable, liberal and 'progressive' way of thinking for these boys? What might this mean in the family context and what assumptions was I making about south Asians, based on my own experience.

The table at which I sat became full, with Hanna on the same table the noise, and interactions was energetic and electric in mood and atmosphere. It felt authentic and not forced. Once lunch time came to an end, staff members indicated verbally that it

was over and they all returned to their classes - without the sounding of a bell - which surprised me.

I thanked Hanna and Nathan and asked to be let out of the building and that I would see them next week. On the way out, Both members spoke about the building feeling like a prison, in the context of me being 'let out', and I agreed. Nathan, reiterated the point stating it was 'literally a prison'.

Which made me think about the accolades and positive outcomes displayed in the reception - which I was questioning in respect of the children not being allowed out and therefore 'had to' conform and comply.

02/02/23: [REDACTED] field notes 2.

I arrived at 12:00, and the school building did not feel any more inviting than it did from last week. The grey overcast backdrop of the sky, made it feel gloomier and grimmer. I reminded myself to be more curious and open and not position the school by my own experiences and prejudices.

I felt more comfortable entering the premises, knowing the layout and the people. I was buzzed through the three sets of gates/doors (outer gate, main reception and reception into the main hall). The reception staff, was the older woman of the two, and who I did not have interactions with the last time I was in. I experienced her as brash, and borderline rude; I am not sure what I expected, but I did, or at least expect her to be professional in the sense of being the first point of call when entering the building. I further wondered if she was having a good day, or if I was being overly sensitive.

The layout, pictures on the walls, remained the same without changes - this made me wonder how old the display art work and accolades were on the walls, as well as the layout of the hall space and the positioning of the furniture.

I made my way over to the PE room where I knew Hanna and Nathan would be, as they facilitated the lunch time activities and I was told prior to head over to them. I wondered about my role as a researcher and being 'lumbered' onto others, that had a job to do. Did they feel like I was an extra chore, or if I was scrutinising them? I also thought about why this had come to mind now. Maybe it was how the children felt in the school, being 'lumbered' on the staff as a last resort or that they were being scrutinised in the context of being excluded from mainstream school, and now being assessed to see if they were 'fit' enough to return.

Once lunch time began, I counted approximately the same amount of young people, although there were a couple of new members. Nathan explained, this happens daily, and all new young people are assessed prior to being moved to different sites, but they all come to the [REDACTED] campus first.

I thought about the disruption this may cause to the current students and staff, and the dynamics surrounding this. It also made me think about bravado, in respect of young people, their identity and wanting to fit in. Furthermore, there were young people known to be gang members and open to the adolescent team. I wondered how that would work with rival gang members in the same place for assessment.

There were aprox 18 young people including the new faces and 14 members of staff.

Young people ethnicity:

4 Asian (1 of which a girl)

4 white (1 girl)

Rest black and mixed race

Aprox 4 girls rest boys

Staff members:

PE staff (although they feel like support workers and the core of the staff team that are popular with students) 4 x black and 1 x white. (2 female 2 male)

The rest of staff are teachers who are predominately female and all white. (one man and one female).

I continue to be struck by the 'front line' staff being 'relatable' 'down with the kids' BAME folk, but senior staff being white - I wonder why this is?

The layout of the hall was the same as before, and I asked Hanna if it ever changed. She stated that it did not. I headed over to a different table, stating that I sat at the same one last week (with Hanna), she encouraged me to come over to the same table as before where she sits. I felt I couldn't say no, as the invitation was in earnest and didn't want to seem impolite.

Once I sat down, I noticed that the same groups of people sat at the same tables, including staff members and where they stood. I was curious about this and asked Hanna - she seemed coy, but with a cheeky/mischievous humour in her response, explaining that there were different groups on each table and that they had names.

This made me think of cliques, gangs, or crews - and the importance of identity and belonging. Furthermore, that staff were included in this and somewhat proud. The informal, groups allocated by table were named (by Hanna) as:

the sports captains (popular)

Key stage 3 (year 7 and 8)

The "others"

Mean Girls (predominantly girls table)

I found this fascinating, as it made me think about how adults in group dynamics tend to be drawn to the 'familiar'. Whether that be in race, peer group, class, employment etc. it also made me think about the previous week and the role of uniform, and the separateness or divide this might have created.

A female white teacher, gravitated towards me, I noticed this by the way she looked over, catching my eye and then smiling, and then heading over. She introduced herself as the pastoral worker and explained that she felt the 'gang kids' were easier to engage due to them wanting identity, wanting to fit in and coming from predominately complex backgrounds.

However, the children that had, more 'stable' home life and backgrounds were harder to engage. I was really interested in her view and wanted to know more, however she was interrupted due to a young person pushing past 3 members of staff in attempts to leave school.

Young people ultimately were locked in the premises until school finished, Hannah explained as the pastoral care worker left, and that there were mock exams today, so the children 'were not in the mood' hence wanting to leave and were being extra challenging.

The boys that I was sitting alongside (the 'sports captains') requested to go outside to the football cage, the whole table alongside 4 members of PE staff (including Hanna and Nathan) Went outside to the cage. I was invited to join by several members of staff, explaining that I would get to see how staff engage with the young people.

It really felt that the staff were trying to be helpful, to showcase what healthy and positive engagement looked like from their perspective. I felt compassion for the staff in that moment, as I was aware that I may have lost my curiosity towards them in the last observation, which may have been positioned by my own historic narrative and relationship to school and people who hold power and authority.

In that moment, I was faced with a dilemma, do I say no and remain in the hall, as that is where my observation is being conducted, but at the cost of possibly rejecting the members of staff as well as appearing ungrateful? Or do I go with them, and miss out what might happen in the hall. I kindly rejected their offer, as I was interested in how the dynamics within the hall might change, and with the popular group gone, what might this look like for other 'groups'.

The atmosphere within the hall automatically changed, the 'other's' table got louder and more vocal which was not the case when the 'popular' or sports captains were in the room - who dominated the space when they were in it, (which was apparent now they were gone).

I was now sat on the table alone, which felt very different to before, I felt a little awkward, I wondered if I should get up and go over to another table, or to stand. But then another white female teacher came over to me, explaining that she was the English teacher and was at the start of her PhD. She shared her views on how staff speak about children in meetings with other professionals, that it was not relational and something gets lost and they (young people) are seen as 'cases.'

I wondered at this point, why she felt so comfortable to share so much with me, as was the case with the Head teacher, Deputy Head, Hanna, the Pastoral care. It made me think about climate or culture the school, the adolescent team and wider society (locally and nationally). That is, staff members attending to, and containing vulnerable young people, and I wondered further if they were looking for, or even yearning for the same human, relational connection, containment and anchoring they were employed to do and promote.

I wondered if the school staff want to be heard, to prove they were doing a good job, that they too needed having their story told and heard? Furthermore, wider societal discourses surrounding the cost-of-living crisis, anxiety (post covid), deprivation in the local area and desperation was being mirrored by the staff within the prison like alternative provision.

Whilst talking to the teacher, the Asian Pakistani young male from the week before said 'salaam' to me, which I responded by 'walikumasalaam' and he headed over to the table tennis table with a staff member. I also observed the teachers, that seemed quieter than the 'PE' young and hip staff, were also more vocal (maybe this was just because the others who left were louder), but noticed that the staff too were more animated, more interactive.

I noticed that the remaining staff members, on the surface did not fit the 'cool' trendy or hip-hop/grime/drill music energy/look that the PE staff had. Which I initially located in their attire, that is, they were not wearing track suits, Nike Air max etc. I wondered whether this made the PE staff more relatable and relational in the eyes of the young people? Did it help more with engagement? And what did engagement look like for each person? Was it the same? Or different?

I noticed a lot of the male children were wearing their trousers low and had to be told to pull them up on several occasions. This piqued a further curiosity in me, about what was appropriate, what wasn't and who decided? As some staff members wore sports gear and others did not. I wondered about a colonising mentality and its legacy and influences regarding clothing, the institution, education and acceptable behaviour.

The English teacher carried the conversation on towards the end as I needed to be let out of the building, it seemed as though she was in a need for a space to talk and be heard. As she walked with me to the car park, she shared things that were personal to her and her experience of social care services, the conversation felt very rushed, bordering manic, and secretive as she repeatedly stated that she had to be back on

premises. I felt like we were going to get into trouble or we were doing something wrong, and were going to get caught out at any moment.

I thought about professional burn out, clinical supervision, compassion, and empathy and whether these we luxuries only afforded to some within health services. As I left the car park in my car, I felt emotionally heavy - which I now locate in my direct experiences with the teachers, which was something that I did not anticipate.

I wonder whether the professionals whether it be in health and social care or education were feeling burnt out and were yearning for a connection or the same therapeutic, relational, emotional support that they gave the children they were working with.

██████████ - There were aprox 18 young people including the new faces and 14 members of staff.

Young people ethnicity:

4 Asian (1 of which a girl)

4 white (1 girl)

Rest black and mixed race

Aprox 4 girls rest boys

Staff members:

PE staff (although they feel like support workers and the core of the staff team that are popular with students) 4 x black and 1 x white. (2 female 2 male)

The rest of staff are teachers who are predominately female and all white. (one man and one female).

I continue to be struck by the 'front line' staff being 'relatable' 'down with the kids' BAME folk, but senior staff being white - I wonder why this is?

09/02/23: ██████████ field notes 3.

Arriving at Maybrook did not feel as harsh as it had done the times prior - maybe I was becoming accustomed or desensitised to the building and its surrounding. The backdrop being a residential setting in a particularly deprived part of Dagenham.

I wondered about my possible 'desensitisation' and thought about this being 'normal' for the young people and some of the staff from the area. Did they have anything to compare it to? Meaning, the area, the schools and so on. As I know from my own personal experience working with children from the area, that some of them have not even been out of the area, to a farm, or been provided with alternate perspectives due to their socio-economic circumstances.

I also thought about the staff within the school, possibly feeling the way I did, coming into their work place, which in essence, was like a prison - encased in metal fencing, grey and white concrete, cctv and buzzers. the deprivation within the locality was palpable, as the surrounding streets were predominantly made up of residential houses that have been converted into flats, with groups of young men on the corner of one of the roads, making drug deals. I know this as I sat in my car, observing it as I was 10 mins early.

Once in the main hall, I went over to the PE room, where I was greeted by Nathan. He looked tired, and explained that Hanna was not in today, and that there were several new students, so everyone was on 'edge'. He further explained that it had been a manic few days because of it, and that it felt like it is going to 'kick off' any moment with the new young people attempting to establish themselves in the group, with power plays attempting to be made. Nathan did not explain it like this, but spoke of 'kids fronting' (bravado). This made me think about the anxiety within the professional system and whether it fed the entire school system and culture (young people) and if it made the situation worse.

I headed over to the same table that I had sat at for the last two weeks, this was strategic on my part, as I wanted to see what might be different now that Hanan was not in work. The difference was very noticeable and stark, the energy in the room felt electric and tense. Staff members interactions with the young people where minimal as they stood around the side, rather than sitting and standing, but observing and talking to each other (adults).

There were two other young people sat at my table, the rest and most of the boys were behind me lining up for lunch at the lunch stand. PE, male staff, were firm in their approach towards the boys, it felt like they too were establishing their roles within the hall. At the same time, teachers were telling several boys to pull up their trousers as they were down past their bottoms.

There was visibly more young people (black boys) and a lot more physical movement in the room and energy, but less interactions between staff members and the young people. It felt less calm than times before - and I was curious as to what it might be like if Hanna was present.

This made me further think about calmness, compassion, curiosity, and kindness, rather than guidance, structure, discipline, rules, and boundaries as it felt now. The staff seemed on high alert and hypervigilant. I was previously told that new arrivals to the school was a daily occurrence, and I wondered about the consistency that the DH was talked about in our first conversation, as it felt contradictory now, as the staff were visibly unsettled as well as the children.

The two young people then got up and left the table, I felt awkward and was not sure what to do, as I was observing the movements around me. I felt like I they were

already under surveillance and even more so, with my twist and turns of my head in attempts not to miss anything. The only thing that separated me from the staff, was my 'visitor' badge, which was bright red and said so around the lanyard

I also overheard the DH go up to several pupils asking them about a possible apprenticeship as a way of opportunity for them. I wondered if this was a way to engage the new pupils to highlight how different their school was. The pupils did not seem interested, which then made me wonder if someone else asked them the same thing or maybe at a different time, if it would it have a different impact.

The DH then came up to me and spoke to me about the same thing, explaining that it is a great opportunity for the young people, he then shared a success story with a previous student who had an apprenticeship with the London underground. I found myself internally becoming a little irritated by him, and put this down to our initial meeting, but could also see that he was trying to join with me in some way - so reminded myself to remain curious and compassionate towards him, as well as being curious about what was going on for me. He then shared he preferred longitudinal studies when it came to research studies, I think this was for my sake and his attempt to be relational, I became a little cynical, agitated, and defensive - but redirected my thoughts to one of curiosity again.

He then explained that they were on half term next week and not to come in. I reminded him that the next observation would be my last and requested volunteers for my semi-structured interviews with the relevant consent. He said, that he would allocate people to me that were open to the adolescent team. a conversation ensued around the ethic of this, and it being voluntarily. The DH explained that most were open to the adolescent team in social care under exploitation.

Whilst we were having the conversation, the energy in the hall was still tense, and the young people and staff felt separate and disconnected being under surveillance and observation.

The DH continued by stating that they would employ almost anyone with any background, if they had they right 'mindset'. I was curious about what this looked like, and who decided who had the right mindset - but did not ask this out loud.

Again, I wondered why the DH was saying this to me, as I had become curious about the amount of young BAME staff, and then wondered about the relatability between younger staff, younger black staff, and the older senior white staff. Did age and colour matter, did something get lost if you were not the same colour, younger or from the area or had a colourful past?

These questions then made me think about my historic narrative, my relatability and ability to engage those who were not 'engageable' in my professional and personal life, but also that I was a rarity in respect of my senior's leadership role and academic

achievements. Meaning, I talked and sounded like a support worker but was still able to speak the 'language' at a senior management level. This was specifically noted by a staff member as she noted that I did not sound like a researcher or clinical lead - meaning I sounded cockney and 'street'.

Whilst standing talking to the DH, I felt like I was sticking out, something I had not felt in the last two sessions. I wondered whether the tense atmosphere and my awkwardness were to do with Hanna not being there, maybe there was something that Hanna brought to the dynamic as well as the mood. Was it her active attempt to be relational, in comparison to a slight standoffish 'ness from other PE male staff - or was this me over thinking things? or maybe it was to do with the study coming to an end.

The Asian Pakistani boy that had spoken to me the two weeks prior nodded and gave me a fist pump. He too seemed a little aloof. I initiated a conversation with him, asking how long he had been coming to the school. He replied, nearly 1 year and stated that he did not like it because it was a prison (this is been stated as a negative by staff and young people repeatedly), and proceeded to say, nevertheless, some of the staff members were cool.

I asked what made them a cool, and he said that they paid an interest - and used Hanna as an example (this was the second time a young male had described Hanna as paying an interest and that is why he liked her). This in turn made me think, about other staff not paying in interest in the same way, and what might get in the way.

I then wondered about being him being stuck in the building, as he described it as a prison and that he 'had' to stay on the premises. Therefore, he put in a position where he 'had' to get along with staff. He looked pensive, but was not able to answer, saying 'maybe' and he was not sure. I asked him what was it about Hannah that he liked, again he was unable to expand further saying 'I don't know, she's just nice'.

I felt more conscious today too, again maybe it was to do with me not getting much sleep last night because of baby Noah keeping me up, or maybe because I knew it was the study was coming to an end and I was feeling anxious about the expectations of me from the school in regards to my 'results'.

I was then invited out to go and watch the young people play football in the cage by two teachers, this time I decided to go even though the observation was in the hall as I did not want to come across as rude. Once outside, we (the staff and myself) stood outside the cage, whilst the young people played football, to which they became very boisterous and loud, displaying a 'lad' mentality. I stayed outside for aprox 10 minutes, and noticed that there was minimal engagement or interactions from staff, bar one that was inside playing football with them.

I went back inside to continue with the observation. I continued to notice the lack of engagement between the staff and the young people. This is not a negative observation

or criticism but a statement. I also now wonder whether my lack of engagement was mirroring the system I was in.

Next week will be half term, and the week after will be my final observation and semi-structured interviews. I have found that questions have now emerged, which initially I was dubious about.

Appendix D: Interview questions.

Engaging 'hard to reach' young people in adolescent teams: challenges and limitations deconstructed. *What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'*

Questions to the Professionals in adolescent team:

1. *What does engagement of young people look like or mean to you in relation to adolescent team*
2. *What gets in the way of engaging a young person/young people?*
3. *Does, age, gender, being from the area matter and why? (in regards to relatability*
4. *What works?*
5. *If you could change things (in relation to the service and engaging harder to reach young people) – what would that look like/How would you go about it?*
6. *Is there anything else you would like to share or say on the topic that I might have missed?*

Questions for Young people:

I am interested in what is important to you when it comes to working with adults. This does not mean teachers, or in school. But also social workers, therapists or the police.

1. What is important to you when it comes to working with adult professionals?
2. Does it matter if it is a man or a woman? (Does it make it easier to relate to them and why)
3. Does their colour, age, or if they are from the area matter (and why)?

4. What do you think gets in the way, or makes things difficult when working with adult professionals (what might get in the way or why might you not want to work with them)?
5. What works (Even when you do not want to work with them)?
6. If you could change things (the way adult professionals work with you and other young people) – what would it be, what would you change?
7. What is important to you when working with professionals – what would you like them to know?
8. Is there anything else you would like to share or say on the topic that I might have missed?

Appendix E: Local authority information sheet.

Information Sheet for Team Members in the Adolescent Team

Study Title: Engaging 'hard to reach' young people in adolescent teams: challenges and limitations deconstructed

This information sheet provides an overview of the study and our obligations regarding data protection, so that you have overview of the study can decide whether or not to take part.

Who am I?

My name is Nasif Nijabat but most know me as Nij. I am student on a professional doctorate at the Tavistock and Portman NHS Trust. I work as a clinical and service lead for [REDACTED]
[REDACTED]

What is this study about?

At present, there is a drive for mental health and social care services to engage with vulnerable adolescents who present with extra-familial, safeguarding, grooming and exploitation issues, in more creative and dynamic ways.

My aim is to look at how young people are 'talked about' from an organisational level, and also from a service user perspective, in the hope of gaining a more comprehensive understanding and deeper insight into a complex social issue.

The aim of this study is to look at how the adolescent team 'talks' about 'hard to reach' young people and to also look at some of the barriers, challenges and also what works when it comes to engaging them.

I will also be conducting the same study design at an alternative school provision within [REDACTED]

Why have I been asked to take part?

I would like to observe interactions and participate (where appropriate), in your weekly professional meetings with the hope of understanding the concept of 'hard to reach' young people from an organisational perspective. My focus is not on specific cases but to draw upon themes within the discussions.

Do I have to take part?

No, it is entirely up to you and you have the option to opt out. I will describe the study and go through this information sheet with you. If you agree to take part, I will then ask you to sign the consent form. You are free to withdraw from the study at any time, without giving a reason.

What will happen if I take part, and what will I have to do?

There are two parts to the study:

1. The observation
2. Interviews

Observation

I will join your weekly professional's meetings, for one day a week, for a month at the same time and day. I would like you to continue with your meeting and work as you normally would. I will observe interactions, conversations and participate where appropriate.

I will be making notes after each session on my lap top which will be password encrypted. All names and identifying details will not be used and will be anonymised.

Interview

Two members of the team (from the observations) will be invited to put themselves forward for an interview conducted by me. The interview will be for one hour and will happen only once. The interview will be audio recorded using an encrypted Dictaphone and then transcribed. A copy of the transcribed interview will also be provided to you.

Can I change my mind?

You do not have to take part unless you want to. Even if you start, the interview or observation you can stop by letting me or your manager know. After that, all information and your involvement will be removed up until the study ends.

What are the risks or disadvantaged of taking part?

You may feel a little unease at having an outsider join your meeting. I would like to reassure you that I am not there to judge you as an individual/professional but to try and draw out organisational themes. Your service lead and I will ensure that the whole team know why I am there and when. I am also happy to discuss prior and post meeting any concerns or questions you may have.

The individuals taking part in the interviews may find it time consuming, or it might trigger things that may not have been expected. You will be reminded that you do not have to answer any questions or provide any information you are not comfortable with.

What are the possible benefits of taking part?

The information I get from this study will contribute towards the learning and practice for health and social care professionals working with young people described as 'hard to reach'.

Will my taking part in the study be kept confidential?

All information gathered will be handled with the utmost confidence and respect. The University of Essex is the accrediting body for the Tavistock and Portman Centre where I study. All data will be stored securely on the university database and on an encrypted laptop.

If disclosures of imminent harm to self/others is made, the relevant process's will be followed and people informed. I will ensure to inform you of the process throughout.

All data generated during the study will be retained in accordance with the Tavistock and Portman Trust's Data Protection and handling Policies. You can find all information related to this in the following link:

<https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/>

Will I get feedback about the study?

If you would like a summary of the research, I will email the details to you. A summary of the final report will also be provided to the service leads.

What will happen to the results of the research study?

The aim is to publish the study in academic journals, and present at national and international conferences with the hope of informing future professional practice and learning.

Who has reviewed this study?

The Tavistock Research Ethics Committee (TREC) has reviewed this study and has given me permission to carry it out.

Where can I find out more information?

If you have any concerns or require any further information, please get in touch with Nasif Nijabat (Nij), [REDACTED] mobile number [REDACTED]

Stephen Mills: [REDACTED] my research supervisor

Simon Carrington: [REDACTED] who is the head of academic governance and quality assurance.

What should I do now?

If you are happy take part in this study, please could you sign the consent which has been provided to you via the following link (right click to open hyperlink):

[Consent Form](#)

Thank you for taking the time to read about my study.

Appendix F: Alternative education provision staff information sheet.

Information Sheet for Team Members in [REDACTED]

Study Title: Engaging 'hard to reach' young people in adolescent teams: challenges and limitations deconstructed

This information sheet provides an overview of the study and our obligations regarding data protection, so that you have overview of the study can decide whether or not to take part.

Who am I?

My name is Nasif Nijabat but most know me as Nij. I am student on a professional doctorate at the Tavistock and Portman NHS Trust. I work as a clinical and service lead for [REDACTED] [REDACTED]
[REDACTED]

What is this study about?

At present, there is a drive for mental health and social care services to engage with vulnerable adolescents who present with extra-familial, safeguarding, grooming and exploitation issues, in more creative and dynamic ways.

My aim is to look at how young people are 'talked about' from an organisational level, and also from a service user perspective, in the hope of gaining a more comprehensive understanding and deeper insight into a complex social issue.

I would like to understand what factors contribute to young people being described as 'hard to reach' by children's social care adolescent teams. My hope is to look at how the adolescent team 'talks' about 'hard to reach' young people and to also look at some of the barriers, challenges and also what works when it comes to engaging young people.

Why have I been asked to take part?

I would like to observe and participate in conversations and activities between the young people and the staff at Mayebrook Park School Campus. This is because the young people that attend the school are excluded from mainstream schools. I hope to learn from the young people what the process of engagement with staff/adults means to them.

Do I have to take part?

No, it is entirely up to you and you have the option to opt out. I will describe the study and go through this information sheet with you. If you agree to take part, I will then

ask you to sign the consent form. You are free to withdraw from the study at any time, without giving a reason.

What will happen if I take part, and what will I have to do?

I will join the schools lunch break session in the main hall, at the same time, on the same day, for one month on a weekly basis.

There are two parts to the study:

1. The observation
2. Interviews

Observation

I would like you to continue with your work as you normally would, interacting and taking part in activities with the young people. I will observe interactions, conversations and participate where appropriate.

I will be making notes after each session on my lap top which will be password encrypted. All names and identifying details will not be used and will be anonymised.

Interview

2 young people will be invited to put themselves forward for an interview, which will be conducted me. The interview will only happen once, for one hour and at school.

The interview will be audio recorded using a password protected Dictaphone and then it will be written up. All information used from the interviews will be made anonymous and may include the use of anonymised quotes. A copy of the written interview will also be provided to the young person.

This study is about noticing themes and trends in the engagement process between the young people and the staff at the school. This study is not focused on sensitive subjects or specific situations or topics.

Can I change my mind?

You do not have to take part unless you want to. Even if you start the observation you can stop by letting me or your manager know. After that, all information and your involvement will be removed up until the study ends.

What are the risks or disadvantages of taking part?

You may feel a little unease at having an outsider join your lunch breaks sessions. I would like to reassure you that I am not there to judge you as an individual/professional but to try and draw out themes surrounding the relational processes of engagement with young people described as 'hard to reach'.

Your service lead and I will ensure that the whole team know why I am there and when. I am also happy to discuss prior and post meeting any concerns or questions you may have.

What are the possible benefits of taking part?

The information I get from this study will contribute towards the learning and practice for health and social care professionals working with young people described as 'hard to reach'.

Will my taking part in the study be kept confidential?

All information gathered will be handled with the utmost confidence and respect. The University of Essex is the accrediting body for the Tavistock and Portman Centre where I study. All data will be stored securely on the university database and on an encrypted laptop and hardcopies will not be used.

If disclosures of imminent harm to self/others is made, the relevant process's will be followed and people informed. I will ensure to inform you of the process throughout.

All data generated during the study will be retained in accordance with the Tavistock and Portman Trust's Data Protection and handling Policies. You can find all information related to this in the following link:

<https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/>

Will I get feedback about the study?

If you would like a summary of the research, I will email the details to you. A summary of the final report will also be provided to the service leads and young people and parents/guardians if requested.

What will happen to the results of the research study?

The aim is to publish the study in academic journals, and present at national and international conferences with the hope of informing future professional practice and learning.

Who has reviewed this study?

The Tavistock Research Ethics Committee (TREC) has reviewed this study and has given me permission to carry it out.

Where can I find out more information?

If you have any concerns or require any further information, please get in touch with Nasif Nijabat (Nij), [REDACTED]

Stephen Mills: [REDACTED] my research supervisor

Simon Carrington: [REDACTED] who is the head of academic governance and quality assurance.

What should I do now?

If you are happy take part in this study, please could you sign the consent which has been provided to you via the following link (right click to open hyperlink):

[Consent Form](#)

Thank you for taking the time to read about my study.

Appendix G: Alternative education provision parent information sheet.

Information Sheet For Parents

Study Title: Engaging 'hard to reach' young people in adolescent teams: challenges and limitations deconstructed

This information sheet provides an overview of the study and my obligations regarding data protection, so that teenagers and their parent/guardian can discuss the study together and decide whether or not to take part.

Who am I?

My name is Nasif Nijabat but known by most as Nij. I am student on the professional doctorate at the Tavistock and Portman NHS Trust and also work as the clinical and service lead for [REDACTED]
[REDACTED]

What is this study about?

I would like to understand what factors contribute to young people being described as 'hard to reach' by children's social care adolescent teams. My hope is to look at how the adolescent team 'talks' about 'hard to reach' young people and to also look at some of the barriers, challenges and also what works when it comes to engaging young people.

I will also be doing the same study in the children's social care youth services but with the professionals in a specific team. By doing this, I hope to gain a full picture and better understanding from both the young person's perspective and the team members in social care.

Why have I been asked to take part?

I would like to observe and participate in conversations and activities between the young people and the staff at Mayebrook Park School Campus. This is because the young people that attend the school are excluded from mainstream schools. I hope to learn from the young people what the process of engagement with staff/adults means to them.

I am inviting young people (11-16 years) who attend the school to take part in this study. In order to take part, the young person needs the permission of a parent or guardian especially if they are under 16 years old.

Do I have to take part?

No, it is entirely up to you and the young person. It is your choice. I will describe the study and go through this information sheet with you. If you agree to take part, I will

then ask you to sign the consent form. You are free to withdraw from the study at any time, without giving a reason.

What will happen if I take part, and what will I have to do?

I will join the schools lunch break session in the main hall, at the same time, on the same day, for one month on a weekly basis.

There are two parts to the study:

1. The observation
2. Interviews with 2 young people over the age of 14

Observation

The young people are asked continue as they normally would when they attend the school, engaging with staff, other young people and enjoying the activities during the lunch break.

I will be making notes after each session on my lap top which will be password encrypted. The young person's names and details will not be used and will be anonymised (nobody will know who they are)

Interview

2 young people will be invited to put themselves forward for an interview, which will be conducted me. The interview will only happy once, for one hour and at school.

The interview will be audio recorded using a password protected Dictaphone and then it will be written up. All information used from the interviews will be made anonymous and may include the use of anonymised quotes. A copy of the written interview will also be provided to the young person.

This study is about noticing themes and trends in the engagement process between the young people and the staff at the school. This study is not focused on sensitive subjects or specific situations or topics.

Can my child change my mind?

Your child does not have to take part unless they want to. Even if they start, the interview or observation they can stop by letting me or a staff member know. After that, all information and their involvement will be removed from information up until the end of the study.

If a young person does not want to take part in the observation, they are able to use alternative spaces that are provided which are supervised by staff as normal.

What are the risks or disadvantaged of taking part?

Some young people may find it strange having someone that they don't know in their school. The school lead and staff will ensure that all the young people know why I

am there and when, which will include information sheets being given to them like this one.

The young people taking part in the interviews may find it boring, or it might make them think about things that they don't want to think about. They will be reminded that they do not have to answer any questions or provide any information they are not comfortable with.

I am also happy to discuss any concerns or questions the young people may have before and after each session. The school staff will also be available to do the same.

What are the possible benefits of taking part?

The information I get from this study will contribute towards the learning and practice for health and social care professionals working with young people described as 'hard to reach'.

Will my taking part in the study be kept confidential?

All information gathered will be handled with the utmost confidence and respect, and the University of Essex is the accrediting body for the Tavistock and Portman Centre where I study. All information (which we call 'data') will be stored securely on the electronic database at my university and also on a password protected laptop. No hardcopies (paper) will be used for this study.

If the young person reveals that they are at risk of harm to their self or others, I will then stop the study and the relevant people will be informed. I ensure that the young person and you (parent/guardian) is also aware of what is going on and when.

All data generated during the study will be kept in line with the Tavistock and Portman Trust's Data Protection and handling Policies. You can find all information related to this in the following link:

<https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/>

Will I get feedback about the study?

If you or the young person would like a summary of the research, I will email the details to you. A summary of the final report will also be provided to the staff at the school.

What will happen to the results of the research study?

The aim is to publish the study in academic journals, and present at national and international conferences with the hope of informing future professional practice and learning.

Who has reviewed this study?

This study has been reviewed by the Tavistock Research Ethics Committee (TREC) who have given me permission to carry out this study.

Where can I find out more information?

If you have any concerns or require any further information, please get in touch with:

Nasif Nijabat (Nij[REDACTED])

Dr Stephen Mills: [REDACTED] my research supervisor

Simon Carrington: [REDACTED] who is the head of academic governance and quality assurance.

What should I do now?

If you are happy for your child to take part in the study, please could you sign the consent which has been provided to you by following the below link (right click to open hyperlink):

[Consent Form](#)

Thank you for taking the time to read about my study.

Information Sheet for Young People

**Study Title: Engaging 'hard to reach' young people in adolescent teams:
challenges and limitations deconstructed**

Who am I?

My name is Nasif Nijabat but most know me as Nij. I am student researcher at the Tavistock and Portman NHS Trust. The aim of this information sheet is to invite you to take part in some research that I want to do at your school.

What is Research?

Research is a way of finding out answers to questions when we don't know enough.

What is 'hard to reach', 'engagement' and 'adolescent teams'?

HTR is sometimes used by some health and social care service professionals to describe some young people when they do not want to engage with services.

Engagement means to take part in something. For example, talking to a teacher, social worker, therapist or researcher.

The adolescent team is a part of children social care and is a team of social workers and therapists who work with young people who might need support because of issues outside of their home. For example, young people who might be involved with gangs, in trouble with the police or who might not be going to school.

What is this research about?

I would like to learn about what is important to young people when it comes to working with professionals who work in adolescent teams. I also want to learn about how the adolescent team talks about young people too. By doing this, I hope to help professionals look at what is important to young people like yourself when working together in the future.

Why me?

I am inviting you to take part because you go to [REDACTED] Campus and you do not go to a mainstream school. I would like to hang out with you during your lunch break, which means that I will want to watch, take part in conversations and activities with you, staff and other young people, so that I can try and understand what is important to you when engaging with adults.

Do I have to take part?

No, you don't have to take part if you don't want to. Please read this sheet and talk to your parents or carer before you decide. If you don't want to take part, just say no.

What will happen if I take part, and what will I have to do?

I will join the schools lunch break session in the main hall, at the same time, on the same day, for one month on a weekly basis. I will also ask your parents or carer for permission too, so they know what I am doing too.

There are two parts to my research:

1. The observation
2. Interview

Observation

I would like to hang out with you once a week for one month during lunch time break only in the main hall. I would like you to carry on like you usually would, playing pool or other games. I will be paying attention to what I see, and also will chat and take part in activities if you want me to.

The interview

I will ask for two young people to spend some time with me to have a chat about what is important to you about engaging with adults. It will be for 1 hour in a quiet room at school. I would like to speak with you alone if that's ok, and it will be for one time only.

Can I change my mind?

Yes. Just let your parents or carer, teacher or me know at any time. Even if you've started the interview or don't want to be in the main hall any longer, you can stop any time. Just tell me or teacher.

What's good about taking part?

Taking part will help me learn about what's important to young people when engaging with professionals. What I learn will then help me let other professionals in health and social care know what is important when engaging young people in the future.

Will anyone know what I say at lunch time or when we have a chat?

I will not let anyone know what you have said unless I am worried about your safety or the safety of another person. For example, if you tell me that you are at risk of harm or danger, or that you are going to harm someone else or they are in danger, then I will stop what we are doing (the research) and the school headteacher and your parent/carer will be told.

However, I will let you know first that I will speak with your parents, carer or teacher.

Will anyone else know about this research?

Only my teacher (who I call a supervisor), your parents, carers and teachers will know. Nobody else will know you're taking part because I will change all names, the location and the schools name also.

Will I get feedback about the study?

If you would like a summary of the research, I will email the details to you. A summary of the final report will also be provided to the head teacher and young people and parents/guardians if requested.

What will happen to what I find out?

I will put the information in magazines that other therapists, social workers and teachers read. I will also be teaching other professionals about what I have learnt. I will also write a summary of the results for you to read if you would like.

How can I find out more about this research?

Your parents or carer may be able to answer more questions for you. You can also ask your teachers and me also.

What happens if I am worried or have any concerns?

You can speak to a teacher and your parent or carer who also have the contact details for my supervisor and my university where I study.

For more information

If you have any questions, please get in touch with Nij



If you are happy for me to hang out with you and also want to put yourself forward for the interview please click and sign the link below (right click and 'open hyperlink')

[Consent Form](#)

Thank you!

Appendix I: Ethical approval.

The Tavistock and Portman **NHS**

NHS Foundation Trust

Quality Assurance & Enhancement
Directorate of Education & Training
Tavistock Centre
120 Belsize Lane
London
NW3 5BA

Tel: 020 8938 2699
Fax: 020 7447 3837

Nasif Nijabat

By Email

2 November 2022

Dear Nasif

Re: Trust Research Ethics Application

Title: Engaging 'hard to reach' young people in adolescent teams: challenges and limitations deconstructed.

Thank you for sending your response to the conditions set by the Assessor with regards to your TREC application. I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee your application has been approved. This means you can proceed with your research.

Please note that any changes to the project design including changes to methodology/data collection etc. must be referred to TREC as failure to do so, may result in a report of academic and/or research misconduct.

If you have any further questions or require any clarification do not hesitate to contact me.

I am copying this communication to your supervisor.

May I take this opportunity of wishing you every success with your research.

Yours sincerely,



Paru Jeram

Secretary to the Trust Research Degrees Subcommittee

T: 020 938 2699

E: academicquality@tavi-port.nhs.uk

cc. Course Lead, Supervisor, Course Administrator

Appendix J: Thematic discourse analysis – procedural analysis.

Professional 1 – semi-structured interview : Thematic Analysis - Braun & Clarke

(2006) 6-step framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>i. Initial impressions</p> <p>ii. Coding identified and refined</p> <p>7 groups formed from the observation and interactions.</p> <p>121 codes generated.</p>	<p>Grouping 1: language and positioning</p> <p>1st stage of coding/initial impression: a theme of the challenge behind the language use and positioning of young people as HTRwas problematic as it put the onus/responsibility on the young people.</p> <p>Coding refined and patterns between code. Othering. Marginalisation. Dominant discourse. Power. social constructs. Western notions. Positioning. Expectations. Self-fulfilling prophecies. Prejudice. Assumptions. Bias. Lack of curiosity. Stereotype. English. Meaning. Truth. Reality. Western, societal truths. Localised.</p> <p>Grouping 2: Putting in the work</p> <p>The interviewee spoke about the practitioner needing to put in the work with the young people open to their team, not the other way round.</p> <p>Coding refined: trust. Consistency. Compassion. Kindness. Effort. Hard work. Engaging. Transparency. Authenticity. Honesty. Reaching out. Idealism. Theory to practice. long road. Time.</p> <p>Grouping 3: No quick fix</p> <p>The idea and pressure from an organisational perspective upon practitioners to provide outcomes and quick turnaround times was flawed</p> <p>Coding refined: linear thinking. In it for the long run. Pressure. Stress. Procedure. Process. paperwork. Goals. Evidence. Measures. Outcomes. Resources. Money. Tax payer. Organisational. Agents of the state.</p> <p>Grouping 4: Organisational support</p> <p>A theme of organisational support came to the fore, and I was struck by the subtle and non-verbal tension that the</p>

	<p>interview faced when discussing being supported vs needing support from senior managers within children's social care.</p> <p>Coding refined: Power. needing space and time to do the work. Allowing creativity. Pressures. Evidence. Justify. Paper work. Resources. Expectations. Justifications. Process. procedure. Containment. Anxiety. Stress. Fatigue. Emotions. Mental health</p> <p>Grouping 5: School exclusions and the harder to reach</p> <p>the link between school exclusions, young black males, youth crime (stop and search) and their vulnerability to being exploited and groomed can not be ignored as highlighted by the interviewee.</p> <p>Code refined: disproportionality. Racism. Subconscious bias. Children. Exploitation. Prevention. Stop and search. Black. Males. Gender. stereotype. Society. Mental health. Deprivation. Racial profiling. Education. Social care.</p> <p>Grouping 6: Preventative services</p> <p>a conversation ensued about the importance of early intervention services being the focus to disrupt and counteract young people in the adolescent team being marginalised and getting to the point of being described as 'harder to reach'.</p> <p>Coding: staff: early intervention. Resources. Funding. Understanding. Complex social issue. Importance. Relevance. Children. Care. support. Guidance. Early support. Access to resources. Compassion.</p> <p>Grouping 7: Power Imbalance</p> <p>the interviewee spoke about the overt power imbalance between the young people and the practitioner which is framed by a context of youth justice and safeguarding. Therefore, the idea that true partnership and collaboration is maintained is in fact, flawed and a possible smoke screen (my language)</p> <p>Coding: covert. Positioning. Risk. Guidance. Safeguarding. Children. Disingenuous. Direction. Mistrust. Incapable. Childish. Immature. Mentor. Role model. Contradictory. Confusing. Policy. Law. Social care. health.</p>
Step 3: Searching for themes:	<p>Grouping 1: Language & Positioning</p> <p>Codes: Othering. Marginalisation. Dominant discourse. Power. social constructs. Western notions. Positioning.</p>

Search for patterns with the main question in mind – combining and finding meaning. (highlighted)

Expectations. Self-fulfilling prophecies. Prejudice. Universalism. Assumptions. Bias. Lack of curiosity. Stereotype. English. Meaning. Truth. Reality. Western, societal truths. Localised.

Grouping 2: Putting in the work

Codes: trust. Consistency. Compassion. Kindness. Effort. Hard work. Engaging. Transparency. Authenticity. Honesty. Reaching out. Idealism. Theory to practice. long road. Time.

Grouping 3: no quick fix

Codes: linear thinking. In it for the long run. Pressure. Stress. Procedure. Process. paperwork. Goals. Evidence. Measures. Outcomes. Resources. Money. Tax payer. Organisational. Agents of the state.

Grouping 4: Organisational support

Codes:

Power. needing space and time to do the work. Allowing creativity. Pressures. Evidence. Justify. Paper work. Resources. Expectations. Justifications. Process. procedure. Containment. Anxiety. Stress. Fatigue. Emotions. Mental health

Grouping 5: School exclusions and the harder to reach

Coding:

disproportionality. Racism. Subconscious bias. Children. Exploitation. Prevention. Stop and search. Black. Males. Gender. stereotype. Society. Mental health. Deprivation. Racial profiling. Education. Social care.

Grouping 6: Preventative services

Coding:

early intervention. Resources. Funding. Understanding. Complex social issue. Importance. Relevance. Children. Care. support. Guidance. Early support. Access to resources. Compassion.

	<p>Grouping 7: Power Imbalance</p> <p>Coding:</p> <p>covert. Positioning. Risk. Guidance. Safeguarding. Children. Disingenuous. Direction. Mistrust. Incapable. Childish. Immature. Mentor. Role model. Contradictory. Confusing. Policy. Law. Social care. health.</p>
<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>5 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Practitioner transparency and authenticity – linked to the idea of practitioner putting the work in and meeting the young people where they are at. Which is further linked to psychological ideas of attachment, identity, belonging etc.</p> <p>Power Imbalance – the imbalance between practitioner and the young person can be linked to the organisational, and legislative structures and process in place. This too is linked to the importance of early intervention.</p> <p>Positioning and language – this theme can be linked to the above point also; however social constructionism is privileged by western health and social care academics as a way of understanding and making meaning. This, however bring into question the concept of marginalisation, racism and access to resources.</p> <p>Organisational power – linked to the concept of role structural violence surrounding hierarchy of race and the role of bureaucracy and accountability.</p> <p>Organisational support –how does the organisation support and create spaces that facilities time and creativity to engage young people (linked to the above point)</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p><i>The question is now emerging from my observations of: what factors should be considered when engaging HTRyoung people relationally, in adolescent services?</i></p> <p>4. <u>Organisational Power</u></p> <p>The role of the organisation continues to be a key driver within the contributing factors towards engaging young</p>

	<p>people – and how this not only the young people and their families, but also the practitioners. Sub theme within this category includes:</p> <ul style="list-style-type: none"> i. Power imbalance (between service and young people: access to resources etc) ii. Supporting practitioners iii. Race <p>5. Structural Violence</p> <p>This theme is linked and interwoven into all themes.</p> <p>6. Positioning and language related to young people described as harder to reach</p> <p>This includes the following sub-themes:</p> <ul style="list-style-type: none"> i. Social constructions ii. Privileges given to western thought and concepts iii. Cross cultural work iv. Race and racism (over-representation of young black males) <p>7. Early intervention and support services</p> <p>The need for early interventions that prevent school exclusions which in turn fuel vulnerability of young p[people being groomed and exploited, marginalised and postioned was a key theme within the interview. This theme, arguably may be a outcome or ‘solution’ to the above and also linked to organisational support.</p>
Step 6:	Write up

Professional 2 – semi-structured interview : Thematic Analysis - Braun & Clarke

(2006) 6-step framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>iii. Initial impressions iv. Coding identified and refined</p> <p>11 groups formed from the observation and interactions.</p> <p>229 codes generated.</p>	<p>Grouping 1: Relational and Authentic</p> <p>1st stage of coding/initial impression: being authentic and relational was a key point that the interviewee made and punctuated this by explaining that age, gender, sex, or being from the area made no difference, as long as the practitioner 'joined' with the young people and in way that fit for them</p> <p>Coding refined and patterns between code. Honesty. Original. Trust. Effort. Time. Consistency. Perspectives. Difference. Non-jargon talk. Real. Connected. Meaning. Interconnected. Human nature. Humankind. Compassion. Kindness. Respect. Love. Care. respect. Ethics. Morals. Justice.</p> <p>Grouping 2: Putting in the work</p> <p>The interviewee spoke about the practitioner needing to put in the work with the young people open to their team, not the other way round.</p> <p>Coding refined: trust. Consistency. Compassion. Kindness. Effort. Hard work. Engaging. Transparency. Authenticity. Honesty. Reaching out. Idealism. Theory to practice. long road. Time.</p> <p>Grouping 3: Being current</p> <p>A consistent theme throughout the interview was that of being current in-service approaches towards cyp open to the adolescent team; and the focus not being on the young people fitting the service</p> <p>Coding refined: bureaucratic. Power. organisation. Government. Policy. Resources. Creativity. Freedom. Space. Time. Authentic. Governance. Positioning. Young person first. Agents of change.</p> <p>Grouping 4: The expert position</p> <p>The interviewee spoke of being positioned as experts and that contextual safeguarding was becoming an 'elitists' approach towards safeguarding. However, it was something that all practitioners should be taught.</p>

	<p>Coding refined: Power. Pressures. Evidence. Justify. Paper work. Resources. Expectations. Justifications. Process. procedure. Containment. Anxiety. Stress. Fatigue. Emotions. Mental health. Othering. Experts. Not-knowing.</p> <p>Grouping 5: contextual safeguarding</p> <p>It stuck me of the importance of contextual issues that contribute to the vulnerability and susceptibility for children and young people to be groomed in respect of safeguarding. And that it was/is an issue that effects all cyp within all spheres of life and services (regardless of class, gender etc and health, education, or social care involvement).</p> <p>Code refined: exploitation. Belonging. Validation. Attachment. Context. Systemic. Environment. Relationships. Nurture. System. Safety. Risk. Safeguard. Children. Transitions. Contributing factors. Social care. families. services.</p> <p>Grouping 6: Interagency working</p> <p>The need for services to be more integrated, whereby all services worked off one plan, was a consistent them throughout. It struck me as, it made sense, however there were holes in it (from my perspective), but the more integrated way of working made an impression on me, as I assumed that that was the way things were heading in their service.</p> <p>Coding: staff: early intervention. Resources. Funding. Understanding. Complex social issue. Importance. Relevance. Children. Care. support. Guidance. Early support. Access to resources. Compassion. Intervention. Engagement. Vulnerability. Need. Training. Theory vs practice.</p> <p>Grouping 7: Early Intervention</p> <p>The need for preventative and early intervention was discussed at length and it beginning in schools, and not excluding children.</p> <p>Coding: early support. Disrupt. Care. support. Love. Compassions. Kindness. Respect. Role model. Equity. Social justice. Sensitivity. Aware. Culture. Society. Future. Systemic. Resources. Funding. Need. Long-term. Understanding. Up-skilling. Training.</p> <p>Grouping 8: marginalisation</p>
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	<p>The interviewee spoke of services exacerbating the issue of marginalising young people and families in the context of the process and procedure being a barrier and getting in the way – which in turn only then fuelled young people being further marginalised.</p> <p>Coding: othering. Sub-conscious. Process. oppression. Colonialism. Process. law. Barrier. Counter-productive. Contradiction. Contributing factor. engagement. Positioning. Barrier. Governance. Community work. relational. Out-reach. Flexibility. Time. Care. organisational support.</p> <p>Grouping 9: Agents of the state (bureaucracy)</p> <p>The bureaucratic process, procedural work was felt as a major barrier to the community work that was being requested of the service and bosses, which in turn brought about the curiosity of the practitioner working for the state, rather than the families and young people as theory and learning would suggest.</p> <p>Coding: challenges. Barriers. Control. Power. governance. Accountability. Funding. Expectations. Justification. Evidence. Record keeping. Organisational. State. privilege. Stress. Pressure. Paperwork. Process. social care. health. Mandatory.</p> <p>Grouping 10: different perspectives</p> <p>the interviewee spoke about gender, race, culture, location not being an overriding factor to engaging young people described as harder to reach. And that people of difference (in comparison to the young people and families) provides differing perspectives and realities to what they might be used to.</p> <p>Coding: hope. Differences. Opportunity. Hope. Motivation. Out of reach. Role model. Curiosity. Narratives. Truths. Realities. Context. Social graces. intersectionality. Theory into practice. relational. Language. Transparency. Authentic. Honest. Ethical. Human. Compassion. Empathy. Respect. Alliance.</p> <p>Grouping 11: Trauma</p> <p>The relationship between complex trauma, conduct disorder and the daily struggles that the children are exposed to is a contributing factor as the interviewee explained. The fact that these children witness stabbings of friends and family on their way to and from school, let alone, abuse, neglect, deprivation etc is something that cannot be considered when</p>
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	<p>engaging young people positioned as harder to reach within the adolescent team.</p> <p>Coding: complexity. Systemic. Mental health. Compassion. Vulnerability. Risk. Safeguarding. Children. Wider context. Societal. Epidemic. Marginalised. Minorities. Oppression. Power. equality. Equity. Access to resources. Public money. Policy. Law. Procedure. Over-representation. Violence. Structural. Intersectionality.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: Relational and Authentic</p> <p>Codes: Honesty. Original. Trust. Effort. Time. Consistency. Perspectives. Difference. Non-jargon talk. Real. Connected. Meaning. Interconnected. Human nature. Humankind. Compassion. Kindness. Respect. Love. Care. respect. Ethics. Morals. Justice.</p> <p>Grouping 2: Putting in the work</p> <p>Codes: trust. Consistency. Compassion. Kindness. Effort. Hard work. Engaging. Transparency. Authenticity. Honesty. Reaching out. Idealism. Theory to practice. long road. Time.</p> <p>Grouping 3: being current</p> <p>Codes: bureaucratic. Power. organisation. Government. Policy. Resources. Creativity. Freedom. Space. Time. Authentic. Governance. Positioning. Young person first. Agents of change.</p> <p>Grouping 4: the expert position</p> <p>Codes:</p> <p>Power. Pressures. Evidence. Justify. Paper work. Resources. Expectations. Justifications. Process. procedure. Containment. Anxiety. Stress. Fatigue. Emotions. Mental health. Othering. Experts. Not-knowing.</p> <p>Grouping 5: contextual safeguarding</p> <p>Coding: exploitation. Belonging. Validation. Attachment. Context. Systemic. Environment. Relationships. Nurture. System. Safety. Risk. Safeguard. Children. Transitions. Contributing factors. Social care. families. services.</p> <p>Grouping 6: interagency working</p> <p>Coding:</p>

	<p>early intervention. Resources. Funding. Understanding. Complex social issue. Importance. Relevance. Children. Care. support. Guidance. Early support. Access to resources. Compassion. Intervention. Engagement. Vulnerability. Need. Training. Theory vs practice.</p> <p>Grouping 7: early intervention</p> <p>Coding:</p> <p>early support. Disrupt. Care. support. Love. Compassions. Kindness. Respect. Role model. Equity. Social justice. Sensitivity. Aware. Culture. Society. Future. Systemic. Resources. Funding. Need. Long-term. Understanding. Up-skilling. Training.</p> <p>Grouping 8: marginalisation</p> <p>Coding:</p> <p>Sub-conscious. Process. oppression. Colonialism. law. Barrier. Counter-productive. Contradiction. Contributing factor. engagement. Positioning. Barrier. Governance. Community work. relational. Out-reach. Flexibility. Time. Care. organisational support.</p> <p>Grouping 9: Agents of the state</p> <p>Coding:</p> <p>challenges. Barriers. Control. Power. governance. Accountability. Funding. Expectations. Justification. Evidence. Record keeping. Organisational. State. privilege. Stress. Pressure. Paperwork. Process. social care. health. Mandatory.</p> <p>Grouping 10: Different Perspectives</p> <p>Coding:</p> <p>hope. Differences. Opportunity. Motivation. Out of reach. Role model. Curiosity. Narratives. Truths. Realities. Context. Social graces. intersectionality. Theory into practice. relational. Language. Transparency. Authentic. Honest. Ethical. Human. Compassion. Empathy. Respect. Alliance.</p> <p>Grouping 11: Trauma</p> <p>Coding:</p> <p>complexity. Systemic. Mental health. Compassion. Vulnerability. Risk. Safeguarding. Children. Wider context.</p>
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	<p>Societal. Epidemic. Marginalised. Minorities. Oppression. Power. equality. Equity. Access to resources. Public money. Policy. Law. Procedure. Over-representation. Violence. Structural. Intersectionality.</p>
<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>7 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Contemporary services – the adolescent and wider youth offending services needing to fit the system to the child and family rather than the other way around. Furthermore, being current and relevant in the context of outdated process and procedures. Room for creativity, authentic joining with young people and integrated services.</p> <p>Early intervention – understanding the underlying issue as a contributing factor and is a consistent them with the interviewee’s surrounding early support in respect of mainstream schools and community work. and the systemic implications of school exclusions regarding young people becoming harder to reach and being open to social care services (YOT, resorting to crime and youth offending)</p> <p>Trauma vs behaviour – the young people being exposed to extreme violence, exploitation, (gangs, criminality, drugs, DV etc) which has a backdrop of deprivation, systemic and multiple abuse, neglect, lack of opportunity or hope and school exclusions – which in turn can be positioned as behavioural issues rather than a complex trauma which may have desensitised all, especially the young person to the horrific and traumatic contexts and situations in which they live</p> <p>Agents of the state – practitioners within the adolescent team being agents of the local authority rather than facilitators of social change or advocates of the young people and families. which may be a result of the bureaucratic pressures of governance, evidence providing, process and policy. In-turn possibly becoming a barrier to the community work that they are trying to promote</p> <p>Organisational power – linked to the concept of role structural violence and agent of the state; surrounding hierarchy of race and the role of bureaucracy and accountability.</p> <p>Authenticity – practitioners putting in the work, being consistent, transparent, trustworthy and difference being valued to provide and facilitate/role model new possibilities for inspiration, motivation, and change</p>

	<p>Structural violence – an overarching theme which encompasses the structural and organisational barriers and facilitators of marginalisation due to the bureaucratic process, subconscious bias and privilege towards race, and the overrepresentation of minority's open to the adolescent services.</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p><i>The question is now emerging from my observations of: what factors should be considered when engaging HTRyoung people relationally, in adolescent services?</i></p> <p>8. Organisational Power</p> <p>The role of the organisation continues to be a key driver within the contributing factors towards engaging young people – and how this not only the young people and their families, but also the practitioners. Sub theme within this category includes:</p> <ul style="list-style-type: none"> iv. Power imbalance (between service and young people: access to resources etc) v. A barrier and a paradoxical factor when engaging young people in the community vi. Hierarchy of race, subtle racism and subconscious bias <p>9. Structural Violence</p> <p>This an overarching theme, and linked and interwoven into all themes. Sub themes of:</p> <ul style="list-style-type: none"> i. Emotional wellbeing and mental health consequences ii. Punitive/criminalising attitudes over understanding of complex trauma (trauma informed approaches) and therapeutic approaches. <p>10. Being Authentic</p> <p>A key theme is honesty, integrity and relational approaches towards engagement regardless of practitioner demographics. Sub themes of:</p> <ul style="list-style-type: none"> i. Confidence and relational risk taking ii. Bound by the organisation

	<p>iii. Putting the work in, consistency, having the time (organisational support)</p> <p><u>11. Contemporary services</u></p> <p>Services needing to be up to date and current with local affairs regarding interventions and procedure. This includes:</p> <ul style="list-style-type: none"> v. Fitting the system to the young person/family (not the other way round) vi. Authentic understanding of local community and needs vii. Cross-culturally understanding (other ways of knowing and doing apart from western only thought and practice) viii. Linked to early intervention <p><u>12. Early intervention and support services</u></p> <p>The need for early interventions that prevent school exclusions which in turn fuel vulnerability of young p[people being groomed and exploited, marginalised and postioned was a key theme within the interview. This theme, arguably may be a outcome or 'solution' to the above and also linked to organisational support.</p>
Step 6:	Write up

Student 1 – semi-structured interview : Thematic Analysis - Braun & Clarke (2006)

6-step framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>v. Initial impressions vi. Coding identified and refined</p> <p>7 groups formed from the observation and interactions.</p> <p>229 codes generated.</p>	<p>Grouping 1: being honest and genuine</p> <p>1st stage of coding/initial impression: the young people spoke about services (professionals) having their own agenda and 'pretending' to be relatable. Being upfront and honest with young people earns more respect in the long run regardless of the remit of the work.</p> <p>Coding refined and patterns between code. Respect. Partnership. Mutual. Collaborative. Power. belittle. Condescending. Child. Law. Policy. Assessment. Agenda. Barrier. Work. care. honesty. Transparency. Care.</p> <p>Grouping 2: Keeping it 'real'</p> <p>A consistent theme throughout the conversation. It was important to the interview that professionals were transparent, which is linked to honesty and being genuine. He further spoke that 'keeping it real' wasn't linked to age, gender, sex or where the person came from in regards to it being a factor to promoting engagement. Keeping it real – was an overarching and what seemed like an umbrella term for various sub—themes</p> <p>Coding refined: trust. Consistency. Compassion. Kindness. Effort. Hard work. Engaging. Transparency. Authenticity. Honesty. Reaching out. Agenda. Covert. Explicit intent. Collaborate. Power. fake. Truth. Reality. Difference. Respect. Integrity. Professionalism.</p> <p>Grouping 3: Belittling approach</p> <p>The young people shared what he had been exposed to and seen in his life, most adults could not comprehend. And being spoken to like a child, rather than an acknowledgement of mutual respect, is something that creates barriers to the engagement process.</p> <p>Coding refined: trauma. Experiences. pain. Suffering. western perspectives and approaches. interventions. Concepts of child. Adolescence. risk. Safeguard. Respect. Mutual. Partnership. Power imbalance. Condescending. Patronising. Saviour. Being told. Direction. Guidance. Recommendation. Role model. Kindness. Empathy. Honour. Stories. minority.</p>

	<p>Marginalisation. Sub-conscious. Privilege. Intersectionality. Systemic.</p> <p>Grouping 4: more than a 'job'</p> <p>The young people spoke of professionals needing to widen their gaze and treat young people as if they were their own children. And not to treat them like 'another job' or act like robots but to care.</p> <p>Coding refined: love. Care. compassion. Empathy. Kindness. Work. justice. Equity. Liberation. Action. Society. Vulnerable. Family. belonging. Curiosity. Genuine. Authentic.</p> <p>Grouping 5: mutual respect</p> <p>The importance for mutual respect and honouring of young people (as the interviewee put it) and not treating them like children was of great importance. Especially in the context of service delivery</p> <p>Code refined: honour. Acknowledge. Accept. Respect. Power. humility. Integrity. Ethics. Theory to practice. lived experience. 2nd class citizens. Children. Law. Sub-conscious. Deviants. Anti-social. Gangs. Groomed. Guidance. Discipline. Youth crime. Violence. Positioning.</p> <p>Grouping 6: not intentionally 'bad'</p> <p>The young people spoke of not planning to be 'bad' but being a product of his environment and not having choices.</p> <p>Coding: complex. Deprivation. Marginalised. Oppressed. Justice. Equality. Social action. Support. Access to resources. Unfair. Unjust. Misunderstood. Assumptions. Stereotype. Human. Children. Young people. Behaviour. Emotional wellbeing. Desensitised. Trauma. Intervention. Early support. Exclusions. Vulnerability. Identity. attachment. Belonging. Acceptance. Hope. Despair. Pain. Suffering. family.</p> <p>Grouping 7: Trauma</p> <p>the young people spoke of his pain and service professionals not being able to fully understand what he has been through, and the need for a mutual respect and realism on services part, in efforts to engage people like him. I thought about the normalisation and positioning of young people like him, as having behavioural issues – rather than the focus or services losing sight, of the young people being traumatised, and desensitised to the horrors of their circumstances.</p>
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	<p>Coding: vulnerable. Therapy. Therapeutic approaches. desensitised. Understanding. Complexity. Complex trauma. Complex ptsd. Trauma informed. Whole systems approach. Contextual safeguarding. Training. Understanding. Support. Early intervention. Prevention. Relational. Human. Compassion. Love. Care. kindness.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: being honest and genuine</p> <p>Codes:</p> <p>Respect. Partnership. Mutual. Collaborative. Power. belittle. Condescending. Child. Law. Policy. Assessment. Agenda. Barrier. Work. care. honesty. Transparency. Care.</p> <p>Grouping 2: keeping it real</p> <p>Codes:</p> <p>trust. Consistency. Compassion. Kindness. Effort. Hard work. Engaging. Transparency. Authenticity. Honesty. Reaching out. Agenda. Covert. Explicit intent. Collaborate. Power. fake. Truth. Reality. Difference. Respect. Integrity. Professionalism.</p> <p>Grouping 3: belittling approach</p> <p>Codes:</p> <p>trauma. Experiences. pain. Suffering. western perspectives and approaches. interventions. Concepts of child. Adolescence. risk. Safeguard. Respect. Mutual. Partnership. Power imbalance. Condescending. Patronising. Saviour. Being told. Direction. Guidance. Recommendation. Role model. Kindness. Empathy. Honour. Stories. minority.</p> <p>Grouping 4: more than a job</p> <p>Codes:</p> <p>love. Care. compassion. Empathy. Kindness. Work. justice. Equity. Liberation. Action. Society. Vulnerable. Family. belonging. Curiosity. Genuine. Authentic.</p> <p>Grouping 5: mutual respect</p> <p>Coding:</p> <p>honour. Acknowledge. Accept. Respect. Power. humility. Integrity. Ethics. Theory to practice. lived experience. 2nd class citizens. Children. Law. Sub-conscious. Deviants. Anti-social.</p>

	<p>Gangs. Groomed. Guidance. Discipline. Youth crime. Violence. Positioning.</p> <p>Grouping 6: not intentionally 'bad'</p> <p>Coding:</p> <p>complex. Deprivation. Marginalised. Oppressed. Justice. Equality. Social action. Support. Access to resources. Unfair. Unjust. Misunderstood. Assumptions. Stereotype. Human. Children. Young people. Behaviour. Emotional wellbeing. Desensitised. Trauma. Intervention. Early support. Exclusions. Vulnerability. Identity. attachment. Belonging. Acceptance. Hope. Despair. Pain. Suffering. family.</p> <p>Grouping 7: trauma</p> <p>Coding:</p> <p>vulnerable. Therapy. Therapeutic approaches. desensitised. Understanding. Complexity. Complex trauma. Complex ptsd. Trauma informed. Whole systems approach. Contextual safeguarding. Training. Understanding. Support. Early intervention. Prevention. Relational. Human. Compassion. Love. Care. kindness.</p>
<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>4 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Keeping it real— being authentic and relational was an integral and consistent theme within the conversation. And was also a umbrella term for: genuine, trust, consistency and professionals approaching them as humans and not just a 'job'.</p> <p>Mutual respect – feelings of being treated like a child by professionals when it did not fit the young people lived experiences – which would outmatch what most adults have gone through. Themes of condescension, belittlement and saviour mentality were highlighted within this.</p> <p>Trauma – the young people being exposed to extreme violence, exploitation, (gangs, criminality, drugs, DV etc) which has a backdrop of deprivation, systemic and multiple abuse, neglect, lack of opportunity or hope and school exclusions – which in turn can be positioned as behavioural issues rather than a complex trauma which may have desensitised all, especially the young person to the horrific and traumatic contexts and situations in which they live</p>

	<p>care and compassion – to be treated as if the young people was one of the practitioners’ own children and not just a case, client or service user (language and positioning)</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging ‘hard to reach’ young people in adolescent services?’</i></p> <p><i>The question is now emerging from my observations of: what factors should be considered when engaging HTRyoung people relationally, in adolescent services?</i></p> <p><u>13. Keeping it ‘real’</u></p> <p>Being relational, authentic, and humanistic is integral theme to the engagement process regardless of age, gender, ethnicity etc. sub themes within this are:</p> <ul style="list-style-type: none"> i. Positioning and language of young people ii. Consistency and putting in the work <p><u>14. Saviour mentality</u></p> <p>Practitioners, position themselves as providing a service that is above and beyond anything the young person has ever had.</p> <ul style="list-style-type: none"> iii. Mutual respect iv. The practitioner (service) fitting the young person and not the young person fitting the service v. Professionalism vs being human <p><u>15. Love and compassion</u></p> <p>Wanting a hug, not intending to be ‘bad’ and being treated as though the young person is a member of the practitioner’s family encapsulates the want and need for love, compassion, empathy, and human connection.</p> <ul style="list-style-type: none"> iv. Bigger than a job v. Trauma vs youth offending and behavioural issues (early intervention and prevention) vi. Appreciation for the young person’s experience (not just an ‘ordinary child’)

Student 2 – semi-structured interview : Thematic Analysis - Braun & Clarke (2006)

6-step framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>vii. Initial impressions viii. Coding identified and refined</p> <p>7 groups formed from the observation and interactions.</p> <p>98 codes generated.</p>	<p>Grouping 1: Keeping it 'real'</p> <p>1st stage of coding/initial impression: although the interview was shorter, and prompts to engage the young people were numerous, the impressions that I was left with, was that of practitioners/professionals, being genuine and honest.</p> <p>Coding refined: trust. Honesty. Respect. Integrity. authentic. Relational. Transparent. Kind. Compassion. Empathy. Human. Equal. Power. young person focused. Patient. Putting in the work. consistent. Relationship. Time.</p> <p>Grouping 2: Being Calm</p> <p>The young people spoke of the importance of being spoken to 'nicely' and calm – and professionals having a tendency for being Patronising and shouting.</p> <p>Coding refined: trauma. Respect. Mutual. Partnership. Kindness. Compassion. Adults. Children. Power. positioning. Ideas. Constructs. Discourses. Reality. Education. Social care. punitive. Direction. Structural. Guidance. Being told. Condescending. Patronising. Belittling. Not worthy. Immature. Calm. Conduct. composure. role model. Understanding. Awareness. Regulation. Complexity. Contextual. Behaviour.</p> <p>Grouping 3: mutual respect</p> <p>The young people relayed a consistent theme of being respected and adults having patience and being calm.</p> <p>Code refined: partnership working. Equality. Equity. Empathy. Patience. Understanding. Reflection. Training. Difference. Perspectives. Cross-cultural.</p> <p>Grouping 4: building relationships (putting in the work)</p> <p>The young people spoke of professionals needing to put in the effort with young people, and show that they care. this stuck me, as at a basic level, this should go without saying, however – something was being missed within the context of the organisational processes and procedures (possibly?)</p>

	<p>Coding: complex. Deprivation. Marginalised. Oppressed. Justice. Equality. Social action. Support. Access to resources. Unfair. Unjust. Misunderstood. Assumptions. Stereotype. Human. Children. Young people. Behaviour. Emotional wellbeing. Desensitised. Trauma. Intervention. Early support. Exclusions. Vulnerability. Identity. attachment. Belonging. Acceptance. Hope. Despair. Pain. Suffering. family.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: keeping it real</p> <p>Codes:</p> <p>trust. Consistency. Compassion. Kindness. Effort. Hard work. Engaging. Transparency. Authenticity. Honesty. Reaching out. Agenda. Covert. Explicit intent. Collaborate. Power. fake. Truth. Reality. Difference. Respect. Integrity. Professionalism.</p> <p>Grouping 2: being calm</p> <p>Codes:</p> <p>trauma. Respect. Mutual. Partnership. Kindness. Compassion. Adults. Children. Power. positioning. Ideas. Constructs. Discourses. Reality. Education. Social care. punitive. Direction. Structural. Guidance. Being told. Condescending. Patronising. Belittling. Not worthy. Immature. Calm. Conduct. composure. role model. Understanding. Awareness. Regulation. Complexity. Contextual. Behaviour.</p> <p>Grouping 3: Patience</p> <p>Codes:</p> <p>partnership working. Equality. Equity. Empathy. Patience. Understanding. Reflection. Training. Difference. Perspectives. Cross-cultural.</p> <p>Grouping 4: building relationships</p> <p>Coding:</p> <p>complex. Deprivation. Marginalised. Oppressed. Justice. Equality. Social action. Support. Access to resources. Unfair. Unjust. Misunderstood. Assumptions. Stereotype. Human. Children. Young people. Behaviour. Emotional wellbeing. Desensitised. Trauma. Intervention. Early support. Exclusions. Vulnerability. Identity. attachment. Belonging. Acceptance. Hope. Despair. Pain. Suffering. family.</p>

<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>4 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Keeping it real— being authentic and relational was an integral and consistent theme within the conversation. And was also a umbrella term for: genuine, trust, consistency and professionals approaching them as humans and not just a ‘job’.</p> <p>Mutual respect – feelings of being treated like a child by professionals when it did not fit the young people lived experiences – which would outmatch what most adults have gone through. Themes of condescension, belittlement and saviour mentality were highlighted within this.</p> <p>Patience – for professionals to take their time, consistency, earning trust and building a relationship. Putting in the work</p> <p>Being Calm – in the context of punishment, punitive approaches, being seen as children who require instruction and guidance – rather than contextual and personal circumstances being the higher context (trauma informed)</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging ‘hard to reach’ young people in adolescent services?’</i></p> <p><i>The question is now emerging from my observations of: what factors should be considered when engaging HTRyoung people relationally, in adolescent services?</i></p> <p>16. <u>Keeping it ‘real’</u></p> <p>Being relational, authentic, and humanistic is integral theme to the engagement process regardless of age, gender, ethnicity etc. sub themes within this are:</p> <ul style="list-style-type: none"> iii. Positioning and language of young people iv. putting in the work (time, consistency, relationship building) <p>17. <u>Patience and Respect</u></p> <p>Partitioners treating the young people with calm regard and mutual respect in the context of their lived experiences and trauma</p> <ul style="list-style-type: none"> vi. Mutual respect

	vii. The practitioner (service) fitting the young person and not the young person fitting the service.
Step 6:	Write up

Adolescent Team Meet Obs 1 – week 1: Thematic Analysis - Braun & Clarke (2006)

6-step framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>ix. Initial impressions x. Coding identified and refined</p> <p>9 groups formed from the observation and interactions.</p> <p>218 codes generated.</p>	<p>Grouping 1: Online meetings</p> <p>1st stage of coding/initial impression: I wondered about what might be lost or gained in a online meeting rather than in person, and I further wondered how this might translate for the work that the team did with young people.</p> <p>Coding refined and patterns between codes: 2D. pixels. Cold. Distant. Disconnected. Dis-engaged. Comfortable. Uncomfortable. Aloof. Squares. Digital. Loss. Expressionless. Half-a-body. Curious. New-normal. Post-covid.</p> <p>Grouping 2: wanting to be seen and heard</p> <p>The professionals within the adolescent team were keen for me to hear their stories within the team, about the good work they were doing and how passionate they were.</p> <p>Coding refined: under-appreciated. Unseen. Undervalued. Acknowledgement. JudGlobal Majorityent. Human. Compassion. Kindness. Over-worked. Anxious. High-risk cases. Complexity. Support. Clinical-supervision. Impressions. Seen. Validated.</p> <p>Grouping 3: Bureaucratic process</p> <p>I was struck by how heavily conversation surrounding process and form filling dominated the conversations led by management.</p> <p>Coding refined: Process. mechanic. Cogs in the machine. hierarchy. Power. organisation. Policy. Law. Legislation. Institution. Control. Surveillance. Authority. Division of labour. Society. Compliance. Governance. Capitalism. Colonialism. Dominance. Subjugation. Language.</p> <p>Grouping 4: Risk</p> <p>The complexity and risk of the professional's case load that they held within the team was also very apparent. I wondered about who contained the team and the anxiety within.</p>

	<p>Coding refined: anxiety. Fear. Management. Desensitised. Complexity. Containment. Care. young people. Stuck. Blame. Accountability. Governance. Record-keeping. Bureaucracy. Social care. adolescent team. exploitation.</p> <p>Grouping 4: The Adolescent Team</p> <p>The team were positioned as specialists/experts by the rest of children's social care (which emerged in the discussions).</p> <p>Code refined: Expertise. Knowledge. Anxiety. Not-knowing. Answers. Accountability. High-risk. Hierarchy. Othered. Elitism. Marginalised. Expectations. Pressure. Performance. JudGlobal Majority. Showcasing. Teaching. Learning. Institution. Organisation. Constraints.</p> <p>Grouping 5: Language</p> <p>I was struck by, and curious about the use of language within discussions, particularly in the context of the young people on the teams 'case-load' and how this translated in their work with the young people.</p> <p>Coding refined: Thresholds. NRM's. Evidence. Ticking boxes. Mechanic. Cold. Society. Jargon. Acronyms. English. Western. Colonising. Social care. policy. Knowledge. Segregation. Subjugation. Social construction. Power. stiGlobal Majority. Labels. Sub-conscious bias. Identity. unquestioned. Hierarchy. Institutional.</p> <p>Grouping 6: staff/professional engagement</p> <p>My initial impressions were at the lack of engagement and dynamics between team members and the management within the team meeting.</p> <p>Coding: staff: harder to reach. Dis-engaged. Tired. Aloof. Silent. Disconnected. Disillusioned. Burnt-out. Pressure. Anxiety. Boredom. Blamed. Scrutiny. Accountability. Management: lecturing. Harder to engage/reach. Pressured. Time-frames. Bureaucracy. Experts. Accountability. Justification. Policy. Institutional process and procedures. Authority. Governance. Bossy. Top-down. Targets. Deadlines. Budgets. Public spending.</p> <p>Grouping 7: young people open to the adolescent team (caseload)</p>
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	<p>Minimal conversations ensued regarding the young people on the caseload of the adolescent team. however, when it did, I was struck by the way in which the team spoke about them.</p> <p>Coding: disclosures. Risk. Complex. Unengaging. Misunderstood. Grooming. Exploited. Stabbing. Under-resourced. Gangs. Justification. Deprivation. Disadvantaged. Males. Ethnic minorities. Crisis work. Mediation. Mental health. Criminality. Youth justice. Care. policy. Law. Support. Rehabilitation. Reparative. Early intervention. Family support. Culture.</p> <p>Grouping 8: Race</p> <p>the over-representation of the black and brown males within the team was highlighted and discussed, as well as those boys being the least engaging too.</p> <p>Coding: sub-conscious bias. Privilege. Segregation. Stigma. Racism. Subjugation. Profiling. Societal discourses. Disadvantage. Religion. Culture. Othered. Marginalised. Misunderstood. Fear. High risk. Mental health. Conform. Assimilate. Migrants.</p> <p>Grouping 9: Theory and Practice</p> <p>I was reminded that what we learn theoretically does not always translate to practice.</p> <p>Coding: Gap. Academia. Universalism. Righteous. Colonialism. Arrogance. Reality. Good intentions. Challenges. Resources. Privilege. Access. Knowledge. Western. Disillusionment. different language. Talk.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: Online meetings</p> <p>Codes:</p> <p>2D. pixels. Cold. Distant. Disconnected. Dis-engaged. Comfortable. Uncomfortable. Aloof. Squares. Digital. Loss. Expressionless. Half-a-body. Curious. New-normal. Post-covid.</p> <p>Grouping 2: wanting to be seen and heard</p>

	<p>Codes:</p> <p>under-appreciated. Unseen. Undervalued. Acknowledgement. Judgment. Human. Compassion. Kindness. Over-worked. Anxious. High-risk cases. Complexity. Support. Clinical-supervision. Impressions. Seen. Validated.</p> <p>Grouping 3: Bureaucratic process</p> <p>Codes:</p> <p>Process. mechanic. Cogs in the machine. hierarchy. Power. organisation. Policy. Law. Legislation. Institution. Control. Surveillance. Authority. Division of labour. Society. Compliance. Governance. Capitalism. Colonialism. Dominance. Subjugation. Language.</p> <p>Grouping 4: The Adolescent Team</p> <p>Coding:</p> <p>Expertise. Knowledge. Anxiety. Not-knowing. Answers. Accountability. High-risk. Hierarchy. Othered. Elitism. Marginalised. Expectations. Pressure. Performance. JudGlobal Majorityent. Showcasing. Teaching. Learning. Institution. Organisation. Constraints.</p> <p>Grouping 5: Language</p> <p>Coding:</p> <p>Thresholds. NRM's. Evidence. Ticking boxes. Mechanic. Cold. Society. Jargon. Acronyms. English. Western. Colonising. Social care. policy. Knowledge. Segregation. Subjugation. Social construction. Power. stigma. Labels. Sub-conscious bias. Identity. unquestioned. Hierarchy. Institutional.</p> <p>Grouping 6: staff/professional engagement</p> <p>Coding:</p> <p>staff: harder to reach. Dis-engaged. Tired. Aloof. Silent. Disconnected. Disillusioned. Burnt-out. Pressure. Anxiety. Boredom. Blamed. Scrutiny. Accountability. Management: lecturing. Harder to engage/reach. Pressured. Time-frames. Bureaucracy. Experts. Accountability. Justification. Policy. Institutional process and procedures. Authority. Governance. Bossy. Top-down. Targets. Deadlines. Budgets. Public spending.</p>
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	<p>Grouping 7: young people open to the adolescent team (caseload)</p> <p>Coding:</p> <p>disclosures. Risk. Complex. Unengaging. Misunderstood. Grooming. Exploited. Stabbing. Under-resourced. Gangs. Justification. Deprivation. Disadvantaged. Males. Ethnic minorities. Crisis work. Mediation. Mental health. Criminality. Youth justice. Care. policy. Law. Support. Rehabilitation. Reparative. Early intervention. Family support. Culture.</p> <p>Grouping 8: Race</p> <p>Coding:</p> <p>sub-conscious bias. Privilege. Segregation. Stigma. Racism. Subjugation. Profiling. Societal discourses. Disadvantage. Religion. Culture. Othered. Marginalised. Misunderstood. Fear. High risk. Mental health. Conform. Assimilate. Migrants.</p> <p>Grouping 9: Theory to Practice</p> <p>Coding:</p> <p>Gap. Academia. Universalism. Righteous. Colonialism. Arrogance. Reality. Good intentions. Challenges. Resources. Privilege. Access. Knowledge. Western. Disillusionment. different language. Talk.</p>
<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>6 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Institutional Power – this theme was explicitly apparent from the outset (and in the context of a team meeting). The bureaucracy – process driven and governance of the team was overt as well as covert.</p> <p>Expertise – the adolescent team and the professionals within positioned and seen as experts within the wider system of health and social care, regarding contextual safeguarding issues (grooming and exploitation)</p> <p>Law and policy – law and policy the guides professionals work and the impact this has on engagement (which appears to be the higher context implicitly.</p> <p>Engaging team members - it was obvious to me due to the silence, awkwardness and non-engagement of the team members, that senior members were attempting to</p>

	<p>encourage, motivate and engage their team. this leads me to wonder about the team being over-worked, burnt out and wanting to be heard and in need of support and possibly being disillusioned with their work</p> <p>Race/ism – team members were predominately from the global majority with senior members being white. As well as most of the case load on the team being black and brown children. Sub themes of: unconscious bias, colonialism, Positive discrimination, and tokenism.</p> <p>Language– the acronyms, and othering nature of language used (such as evidence, thresholds) was surprising, especially in the context of the theory and learning surrounding social constructions, and the power of language.</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging ‘hard to reach’ young people in adolescent services?’</i></p> <p>contributing factors for adolescent team meeting obs 1 week 1: themes are as follows:</p> <p>18. <u>Lack of engaged team members</u></p> <p><i>This may have been due to disillusionment of making a difference. Being overworked, under-resourced and needing to constantly justify their work (being ‘experts’ in their field). Resulting in a ripple effect in the context of engaging harder to reach young people on their caseload.</i></p> <p>19. <u>Institutional Power</u></p> <p><i>The role of legislation, policy, governance, and wider socio-political factors undoubtedly determine and have implications the service delivery of the adolescent team in engaging harder to reach young people.</i></p> <p>20. <u>Race/ism</u></p> <p><i>The role of race within the team and the children and young people open to the adolescent team are predominately from black and brown minority groups. In the context of racism, bias and prejudice – what might be the implications of the positioning of ‘harder to reach’ cyp’s open to the adolescent team.</i></p> <p>21. <u>Language</u></p>

	<i>What is the role and use of the English language and the positioning of young people open to the adolescent team. how might acronyms, and process driven language such as evidence and thresholds impact on the teams work with engaging children?</i>
Step 6:	Write up

Adolescent Team Meet Obs 2 – week 2: Thematic Analysis - Braun & Clarke (2006)

6-step framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>xi. Initial impressions xii. Coding identified and refined</p> <p>8 groups formed from the observation and interactions.</p> <p>130 codes generated.</p>	<p>Grouping 1: Hierarchy</p> <p>1st stage of coding/initial impression: there were clear attempts by the managers to co-produce and be collaborative within the meeting, however, it was also clear to me that there was an explicit chain of command within the team meeting – which I became curious about.</p> <p>Coding refined and patterns between codes: top-down. Seniority. Silence. Power. rank. Organisation. Scale. Pecking order. Position. Groups.</p> <p>Grouping 2: Race – (whiteness and leadership)</p> <p>The reoccurring theme of race and leadership/seniority within the team meeting was something that could not be ignored.</p> <p>Coding refined: white privilege. Power. seniority. Advantage. Organisational advantage. Social advantage. Virtue. Colonial legacy. Structural racism. Racial inequality. Injustice. Bias. Subconscious. Visual. Silencing. Unquestioned.</p> <p>Grouping 3: Engaging team members</p> <p>The manager, went to great lengths in attempting to engage her team, which was minimal. The effort it took was surprising – more so, that this was the second week in a row.</p> <p>Coding refined: awkward. Hard-work. Relational. Effort. Non-engaging. Silence. Tired. Anxious. Divide. Positioning. Judged. Observed. Pressure. Performance. Burnt out. Drained. Disillusioned.</p> <p>Grouping 4: bureaucracy</p> <p>Although I have an awareness of professional language use and the context of professional meetings being 'businesses led within the workplace; I was surprised at how heavily the</p>

	<p>focus for a 2nd week was on the bureaucratic processes and procedures – rather than case discussion.</p> <p>Coding refined: process. acronyms. Desensitised. Mechanical. Distant. Procedure. Disconnected. Repetitive. Evidencing. Cases. Governance. Aloof. Statistic. Dehumanising.</p> <p>Grouping 5: under scrutiny</p> <p>The adolescent team, being relatively new, had to provide evidence to their boss's justifying their reduced case-load (due to the complexity) – which included, rigour governance and justification of time spent with young people and their families; a discussion that I became very curious about.</p> <p>Code refined: justify. Judged. Scrutiny. Pressure. Evidence. Big-brother. Watching. Observing. Governance. Tax payers' money. Public funds. Commissioners. Law. Policy. Politics. Experts. Power. institution. Organisation. New. Pioneering. Review. Caution.</p> <p>Grouping 6: demand vs output</p> <p>An underlying theme/topic within the discussion, was what was realistic when working with young people open to their team and balancing this against social care's (boss's, local authority MP's and the communities) expectations. Furthermore, the demand of vulnerable young people in need, versus getting support to those that needed it.</p> <p>Coding refined: practical. Expectations. Pressure. Resources. Crisis. Reactive. Realistic. Social justice. Equity. Discrimination. In-justice. Over-worked. Under-resourced.</p> <p>Grouping 7: youth offending</p> <p>A young people 's case was discussed and the complexities surrounding the injustices that this individual faced, was heartbreaking. The social workers compassion, frustration and lack of power to implement sustainable change was apparent.</p> <p>Coding: staff: harder to reach. Hope. Disillusioned. Frustration. Care. anger. Injustice. Unseen differences. Inequality. Marginalised. Unfair. Class. Ability. Education. Deprivation. Sexuality.</p> <p>Grouping 8: emotional wellbeing of team members</p>
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	<p>A member of the team spoke about being emotionally drained and tired. But in the same breath, counter-acted the statement by explaining that, all was needed was some rest.</p> <p>Coding: disclosures. Mental health. Clinical supervision. Containment. Risk. Anxiety. Pressure. Burn-out. Self-care. work/life balance. Expectation. Lack of resources in health and social care. self-esteem. Support. Expert. Power. control.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: Hierarchy</p> <p>Codes:</p> <p>top-down. Seniority. Silence. Power. rank. Organisation. Scale. Pecking order. Position. Groups.</p> <p>Grouping 2: Race (whiteness and leadership)</p> <p>Codes: white privilege. Power. seniority. Advantage. Organisational advantage. Social advantage. Virtue. Colonial legacy. Structural racism. Racial inequality. Injustice. Bias. Subconscious. Visual. Silencing. Unquestioned.</p> <p>Grouping 3: engaging team members</p> <p>Codes:</p> <p>awkward. Hard-work. Relational. Effort. Non-engaging. Silence. Tired. Anxious. Divide. Positioning. Judged. Observed. Pressure. Performance. Burnt out. Drained. Disillusioned.</p> <p>Grouping 4: bureaucracy</p> <p>Coding:</p> <p>process. acronyms. Desensitised. Mechanical. Distant. Procedure. Disconnected. Repetitive. Evidencing. Cases. Governance. Aloof. Statistic. Dehumanising.</p> <p>Grouping 5: under scrutiny</p> <p>Coding:</p>

	<p>justify. Judged. Scrutiny. Pressure. Evidence. Big-brother. Watching. Observing. Governance. Tax payers' money. Public funds. Commissioners. Law. Policy. Politics. Experts. Power. institution. Organisation. New. Pioneering. Review. Caution.</p> <p>Grouping 6: demand vs output</p> <p>Coding:</p> <p>practical. Expectations. Pressure. Resources. Crisis. Reactive. Realistic. Social justice. Equity. Discrimination. In-justice. Over-worked. Under-resourced.</p> <p>Grouping 7: youth offending</p> <p>Coding:</p> <p>harder to reach. Hope. Disillusioned. Frustration. Care. anger. Injustice. Unseen differences. Inequality. Marginalised. Unfair. Class. Ability. Education. Deprivation. Sexuality.</p> <p>Grouping 8: Emotional wellbeing of team members</p> <p>Coding:</p> <p>disclosures. Mental health. Clinical supervision. Containment. Risk. Anxiety. Pressure. Burn-out. Self-care. work/life balance. Expectation. Lack of resources in health and social care. self-esteem. Support. Expert. Power. control.</p>
<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>7 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Organisational/institutional power – a reoccurring theme for week 2. The power and overt hierarchy was apparent (although partnership working was attempted). The governance, justification and evidencing of their work in the context of being a new team, may override/get in the way of engaging cyp who are harder to engage etc</p> <p>The bureaucracy and language – the use of mechanical, statistical language via acronyms etc was striking. This point is linked to the above point.</p> <p>White privilege – linked to the idea of power and heirachy. The fact that senior management, senior staff and the leaders of the whole service are white, is something that cannot be</p>

	<p>ignored. I wonder the relevance of this in the context of contributing factors towards engaging harder to reach primarily black and brown cyp on their teams case load.</p> <p>Race/ism – in the context of institutional/organisational racism and linked to white privilege, sub-conscious bias and also the positioning of black and brown social workers (primarily) as relatable and ‘knowing’ with cyp open to the adolescent team.</p> <p>Team engagement (in the meeting with the managers) – the awkward nature, silence, aloofness, tiredness is a recurring theme across the board.</p> <p>Scrutiny – being a pioneering team of experts as positioned by social care boss’s and partners, means that the team are under (what seemed to me) as immense pressure to justify and evidence their work constantly. Which may have fuelled anxiety, stress and feeling burnt out</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging ‘hard to reach’ young people in adolescent services?’</i></p> <p>contributing factors for adolescent team meeting obs 1 week 1: themes are as follows:</p> <p>22. <u>Institutional racism (covert)</u></p> <p>Although anti-racist theory, and practices are being promoted overtly and consciously – it remains that process and procedures (relating to power dynamics) seemingly privilege white people over black, brown and dual heritage which cannot be ignored and may have implications for engaging cyp open to the adolescent team.</p> <p>specifically in the following areas/sub theme</p> <ul style="list-style-type: none"> vii. Leadership/seniority viii. Organisational power <p>23. <u>Organisational/Institutional Power</u></p> <p>The focus on bureaucracy and governance of the adolescent team in the context of being new, pioneering team of experts undoubtedly had implications for working with and engaging</p>

	<p>cyp open to their team. which includes the following sub-themes:</p> <ul style="list-style-type: none"> i. <i>Language, positioning and inadvertent othering of cyp and their families (internally – within services)</i> <p>24. <u>Team engagement</u></p> <p>The lack of engagement of team members in the team meeting, is a reoccurring theme which cannot be ignored and may be related to the following sub-themes:</p> <ul style="list-style-type: none"> i. <i>The mental health and emotional wellbeing of team members (what support is in place for them)</i> ii. <i>Feeling drained and over-worked. (in the context of needing to justify themselves etc).</i>
Step 6:	Write up

MDT Obs 3 – week 3: Thematic Analysis - Braun & Clarke (2006) 6-step framework

(5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>xiii. Initial impressions xiv. Coding identified and refined</p> <p>8 groups formed from the observation and interactions.</p> <p>166 codes generated.</p>	<p>Grouping 1: Positioning</p> <p>1st stage of coding/initial impression: there was an apparent theme of positioning of the team and me. Me, due to having conducted the semi-structured interviews with the young people's prior to the MDT meeting, which created a bias from them which subsequently created a conscious prejudice towards services on my part regarding those with power and those without.</p> <p>Positioning, of the team members by management to be involved in the team meeting, to speak, to be accountable and so on.</p> <p>Coding refined and patterns between code. Bias. Expectations. Disempowered. Empowered. Balance. Subjective. Hierarchy. Preference. Relational risk. Confidence. History. Experiences. Personal. Lived experience. Roles. Defaults.</p> <p>Grouping 2: emotional wellbeing of team members</p> <p>The team at check in, spoke of feeling existed and drained, which has been a consistent theme over the course of the observation.</p> <p>Coding refined: burnt-out. Emotional fatigue. Disillusioned. Bureaucracy. Anxiety. Compassion fatigue. Agents of state control. Tick box. Exhaustion. Drained. Tired. Disconnected. Aloof. Disengaged. Process. performative. Performance. Work. Drive. Motivation. Frustration. Hopeless. Undervalued. Containment. Mental health. Emotional wellbeing. Support.</p> <p>Grouping 3: Thoughtfulness</p> <p>A reflective conversation ensued between the social workers surrounding the need for more systemic approaches towards working with their families. specifically in the context of the wider professional network as their we numerous placement breakdowns on their teams case load.</p> <p>Coding refined: responsive. Thoughtful. Systemic. Compassionate. Kind. Loving. Lack of resources and training. Sensitive. Relational. System. Understanding.</p>

	<p>Grouping 4: Sub-conscious bias</p> <p>The managers and senior social worker are white in comparison to the rest of the team. I noticed and was struck by how the managers gave more time and space to the senior social worker in comparison to the black female social worker and I wondered about this.</p> <p>Coding refined: covert. Sub-conscious. Unaware. Structural racism. Oppression. Structural violence. Power. discrimination. Colonial legacy. White privilege. Subtle. Familiar. Racism.</p> <p>Grouping 5: Serious Violent Crime</p> <p>A reflective conversation ensued around gang related youth murders and the lack of coverage in the news (locally and nationally) regarding this.</p> <p>Code refined: murder. Gangs. Desensitised. Marginalised. Violence. Youth offending. Contributing factors. Care. love. Disconnected. Dis-enfranchised. Lack of opportunities. Race. Stereotype. Society. Children. Belonging. Attachment. Fear. Adolescence. safety. Validation. Identity. Acceptance. Confused. Vulnerability. Red tape. Risk. Safeguarding. Policy. Work. Agent of the state. Agent of social change.</p> <p>Grouping 6: Bureaucracy</p> <p>A lengthy (what felt like) a lecture from the managers regarding record keeping and the explanation for this was had. I wondered, as this was a strong, reoccurring theme in the observations, was that it possibly got in the way of engaging the young people .</p> <p>Coding: staff: power. policy. Law. Legislation. Agents of the state. Barrier. Red tape. Paper work. Process. procedure. Justification. Accountability. Evidence. Observation. governance. Worth. Value. Deflection. Smoke-screen. Punitive. Exhausting. Tiring. Accountability. Hierarchy. Public funds. Resource's.</p> <p>Grouping 7: Mixed messages (supportive vs Governance)</p> <p>I was struck by the contradictory underlying theme of the managers being support of the team versus the heavy need for them to evidence their work out in the community.</p> <p>Coding: contradiction. Balance. Either/or. Both/and. Performance. Pressure. Stress. Trust. Containment. Anxiety. Big brother. Over-see. Explanation. Justification. Confusion. Expectations.</p>
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	<p>Grouping 8: Team engagement</p> <p>A ongoing theme within the meetings has been the lack of engaged from the team. and the people that do interact, are the same people: mangers. Senior social worker and the male social worker.</p> <p>Coding: gender. Privilege. Silence. Trust. Containment. Tired. Exhausted. Power. race. Bias. Prejudice. Disillusioned. Disconnected. Emotional and compassion fatigue. Burn-out. Online. Connection. Meaning. Worth. Value.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: Positioning</p> <p>Codes: Bias. Expectations. Disempowered. Empowered. Balance. Subjective. Hierarchy. Preference. Relational risk. Confidence. History. Experiences. Personal. Lived experience. Roles. Defaults.</p> <p>Grouping 2: emotional wellbeing of team members</p> <p>Codes: burnt-out. Emotional fatigue. Disillusioned. Bureaucracy. Anxiety. Compassion fatigue. Agents of state control. Tick box. Exhaustion. Drained. Tired. Disconnected. Aloof. Disengaged. Process. performative. Performance. Work. Drive. Motivation. Frustration. Hopeless. Undervalued. Containment. Mental health. Emotional wellbeing. Support</p> <p>Grouping 3: thoughtfulness</p> <p>Codes: responsive. Thoughtful. Systemic. Compassionate. Kind. Loving. Lack of resources and training. Sensitive. Relational. System. Understanding.</p> <p>Grouping 4: subconscious bias</p> <p>Codes:</p> <p>Sub-conscious. Unaware. Structural racism. Oppression. Structural violence. Power. discrimination. Colonial legacy. White privilege. Subtle. Familiar. Racism.</p> <p>Grouping 5: serious violent crime</p> <p>Coding:</p>

	<p>murder. Gangs. Desensitised. Marginalised. Violence. Youth offending. Contributing factors. Care. love. Disconnected. Disfranchised. Lack of opportunities. Race. Stereotype. Society. Children. Belonging. Attachment. Fear. Adolescence. safety. Validation. Identity. Acceptance. Confused. Vulnerability. Red tape. Risk. Safeguarding. Policy. Work. Agent of the state. Agent of social change.</p> <p>Grouping 6: Bureaucracy</p> <p>Coding:</p> <p>power. policy. Law. Legislation. Agents of the state. Barrier. Red tape. Paper work. Process. procedure. Justification. Accountability. Evidence. Observation. governance. Worth. Value. Deflection. Smoke-screen. Punitive. Exhausting. Tiring. Accountability. Hierarchy. Public funds. Resource's.</p> <p>Grouping 7: mixed messages (supportive vs governance)</p> <p>Coding:</p> <p>contradiction. Balance. Either/or. Both/and. Performance. Pressure. Stress. Trust. Containment. Anxiety. Big brother. Over-see. Explanation. Justification. Confusion. Expectations.</p> <p>Grouping 8: team engagement</p> <p>gender. Privilege. Silence. Trust. Containment. Tired. Exhausted. Power. race. Bias. Prejudice. Disillusioned. Disconnected. Emotional and compassion fatigue. Burn-out. Online. Connection. Meaning. Worth. Value.</p>
<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>5 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Support vs governance – this felt like an underlying theme which was in direct conflict with each other, rather than being compatible or part of the work that the team had to undertake it seemed like mixed, confused messages were being relayed. This also may be connected to the issue around team engagement and the emotional wellbeing and mental health of the staff.</p> <p>Emotional Wellbeing – the ongoing theme of burnout, fatigue, tiredness, and exhaustion within the team was ongoing. And may be also linked to the organisational pressures they faced</p>

	<p>Structural violence – related to the intersectionality, power dynamics and marginalisation of those positioned as harder to reach and the hierarchy of race within the school</p> <p>Hierarchy of race – institutional racism, and the privileges and spaces created, sub-consciously to those that are white.</p> <p>Institutional power – linked to the process and procedures in place that seemingly cause barriers to their practice, race/ism and the privileging of white dominant discourses against a backdrop of deprivation, and the over representation of black and brown peoples open to health and social care services and the criminal justice system.</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p><i>The question is now emerging from my observations of: what factors should be considered when engaging HTRyoung people relationally, in adolescent services?</i></p> <p><u>25. Structural Violence</u></p> <p>The link between the institutional/organisational (school) and social structures set up within UK society – more specifically within the local authority of B&D may be harming young people and their families by not meeting their needs. which is linked to the following sub-themes:</p> <ul style="list-style-type: none"> ix. Sub-conscious bias x. Colonial legacy and impact on health and social care services xi. Institutional Power xii. Intersectionality (and Graces) <p><u>26. Adolescent team: agents of the state or agents of social change?</u></p> <p>The theme of organisational process and procedure was a weighty theme. which brings into question weather the team were working for their clients or really working for the state. This is link to:</p> <ul style="list-style-type: none"> iii. <i>Organisational power</i> iv. <i>Team engagement</i>

	<p>27. Hierarchy of race</p> <p>The privileges afforded to white professionals in comparison to the global majority, and how might this impact the work that they do with harder to reach young people</p> <ul style="list-style-type: none"> ix. Racism (intuitional and structural) x. Positioning and language
Step 6:	Write up

Obs 1: Thematic Analysis - Braun & Clarke (2006) 6-step framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>xv. Initial impressions xvi. Coding identified and refined</p> <p>6 groups formed from the observation and interactions.</p> <p>152 codes generated.</p>	<p>Grouping 1: The building – Alternative Education Provision</p> <p>1st stage of coding/initial impression: The building itself was striking, and the architecture may have been from the 1970's. it had a prison like feel to it with its security fencing and cameras.</p> <p>Coding refined and patterns between codes: Cold. Grey. Grim. Run-down. Deprived. Security. Metal. Cameras. Fencing. Security locked doors. Prison. Surveillance. Institution. Dim. Control. Discipline. Punishment. Power. youth justice. Crime. Criminality. Exclusion. Rehabilitation. Reparative. Law and policy. Education.</p> <p>Grouping 2: Engaging Professional Network (teachers)</p> <p>Teachers of the alternative education provision, seemed like they did not want me there, that I was 'thrust' or 'dumped' on them by the head teacher.</p> <p>Coding refined: Teachers: over- worked. Burnt out. Joining. Hard to engage. Under resourced. Rushed. Mirror image (isomorphic) of the service users' group. Feeling judged. Scrutinised. Good enough. Show-casing best practice.</p> <p>Grouping 3: Clothing: Senior Staff versus Ground/support staff.</p> <p>There was a clear and apparent divide between senior teachers and those beneath them. This was differentiated (implicitly) by the clothes they wore. Shirts and trousers (formal wear) and tracksuits and trainers (urban wear).</p> <p>Coding refined: hierarchy, divide. Power. Race. Relatability. Gender. Relatability. Age. Class. Urban/street wear. Perceptions. Judgments. Seniority. Informal. Presentation. Expectations.</p> <p>Grouping 4: Race and Gender</p> <p>The young people attend the provision were predominately black and Asian and males, and this too was reflected in the professional network. The senior teachers were white and mainly men and the lower staff were black and men.</p>

	<p>Coding refined: White privilege. Bias. Prejudice. Institutional racism. Racism. Patriarchy. Colonialism. Legacy. Marginalised. Deprivation. Class. Location. Ability. Education. Stigma. Stereotype. Access to resources. Migrants story. Systemic and structural racism.</p> <p>Grouping 4: Engaging young people</p> <p>I was nervous as this was the first participant observation, and these children/young people were positioned as harder to reach and being known to the adolescent team. my aim, was to join with them, but I didn't want it to seem forced, I also wondered if they were nervous too.</p> <p>Code refined: young people: curious. Engaging. Inquisitive. Groups. Males. Urban. Lively. Boisterous. Black and brown. Sagging trousers. Authentic. Children. Gritty. Excluded. Strategic. Marginalised. Othered. Bravado. Macho. Toxic masculinity. Deprived. Gangs. Segregation. Fitting in. Alienation.</p> <p>Grouping 5: the location</p> <p>My initial impression was one of depression, grittiness, and grimness. The school was in a particularly, suburban but highly deprived part of B&D, and it felt out of place. There were no shops nearby nor public transport which added to the prison-like feel.</p> <p>Coding refined: Punitive. Socio-economic deprivation. Poverty. Class. Have-not's. Grime. Grim. Gritty. Grey. Hopelessness. Lack of resources. Want. Need. Denial. Loss. Destitution. Disadvantage. Hardship. Lack. Suffering. withdrawal. Community. Resilience. Hard.</p> <p>Grouping 6: Relatability</p> <p>There was a clear difference of relatability between senior staff and ground support staff with the young people as well as between each other (the staff).</p> <p>Coding refined: between staff: hierarchy. Status. Power. awkwardness. Superiority. Knowledge. Elitism. Class. Gender. Patriarchy. Privilege Between staff and the young people: senior staff: strategic. authority. Power. discipline. Disingenuous. Tense. Directive. Guidance.</p>
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	<p>Between ground staff and young people: authenticity. Relational. Relaxed. Power. advice. Guidance. Care.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: The building – Alternative Education Provision</p> <p>Codes: Cold. Grey. Grim. Run-down. Deprived. Security. Metal. Cameras. Fencing. Security locked doors. Prison. Surveillance. Institution. Dim. Control. Discipline. Punishment. Power. youth justice. Crime. Criminality. Exclusion. Rehabilitation. Reparative. Law and policy. Education.</p> <p>Grouping 2: Engaging Professional Network (teachers)</p> <p>Codes:</p> <p>Teachers: over- worked. Burnt out. Joining. Hard to engage. Under resourced. Rushed. Mirror image (isomorphic) of the service users' group. Feeling judged. Scrutinised. Good enough. Show-casing best practice.</p> <p>Grouping 3: Clothing: Senior Staff versus Ground/support staff.</p> <p>Codes:</p> <p>hierarchy, divide. Power. Race. Relatability. Gender. Relatability. Age. Class. Urban/street wear. Perceptions. Judgments. Seniority. Informal. Presentation. Expectations.</p> <p>Grouping 4: Engaging young people</p> <p>Coding:</p> <p>young people: curious. Engaging. Inquisitive. Groups. Males. Urban. Lively. Boisterous. Black and brown. Sagging trousers. Authentic. Children. Gritty. Excluded. Strategic. Marginalised. Othered. Bravado. Macho. Toxic masculinity. Deprived. Gangs. Segregation. Fitting in. Alienation.</p> <p>Grouping 5: the location</p> <p>Coding:</p> <p>Punitive. Socio-economic deprivation. Poverty. Class. Have-not's. Grime. Grim. Gritty. Grey. Hopelessness. Lack of resources. Want. Need. Denial. Loss. Destitution. Disadvantage. Hardship. Lack. Suffering. withdrawal. Community. Resilience. Hard.</p>

	<p>Grouping 6: Relatability</p> <p>Coding:</p> <p>between staff: hierarchy, Status, Power, awkwardness. Superiority, Knowledge, Elitism, Class, Gender, Patriarchy, Privilege</p> <p>Between staff and the young people: senior staff: strategic, authority, Power, discipline, authentic, Tense, Directive. Guidance.</p>
<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>14 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Deprivation – the area/location and building had a grim, unattractive, and foreboding feeling about it. hopelessness</p> <p>Institution - the surveillance of the young people positioned as harder to reach was apparent divide and othering. This was punctuated by the prison like atmosphere.</p> <p>Power – the power divide was multilayered and intersectional and had sub themes of Discipline, Punishment and Conformity, hierarchy between staff, Patriarchy.</p> <p>Exclusion – the young people are othered from mainstream society, excluded from schools and positioned as harder to reach which may exacerbate the issue further.</p> <p>Law and policy – young people were placed in the PRU under various laws and policy such as CIN/C, early intervention, youth justice and safeguarding.</p> <p>Over-worked</p> <p>Hard to engage staff – who were over-worked, burnt out and in need of support and a ear to listen to their plight. They were harder to reach. Isomorphic process and mirroring of the system.</p> <p>Judgments</p> <p>Racism - unconscious bias, privilege regarding seniority and what is communicated to the young people , overrepresentation of black and brown kids. Positive discrimination and tokenism.</p> <p>Sub-conscious bias – regarding exclusion of young people, harder to reach terms, adding to the problem within the school and wider community.</p> <p>Relatability – stereotyping gender and race to relate to young people from urban areas.</p> <p>Patriarchy – toxic masculinity which is linked to power and wider societal discourses when thinking about harder to reach young people in gangs etc and then seniority of white men as head teachers and leads.</p> <p>Lack of resources (access to and services both/and)</p>

	<p>Institutional racism – the role and legacy of colonial processes that inform and privilege white people over the rest (implicitly or explicitly)</p> <p>Authority – who has it, and is it evenly distributed? Is it strategic in nature in attempts to ‘engage’</p> <p>Authenticity - ground staff seemed more authentic than the seniors. The young people deemed harder to engage where the most authentic and most engaging (in regards to me – when I met them where ‘they were’ and on ‘their terms’)</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging ‘hard to reach’ young people in adolescent services?’</i></p> <p>contributing factors for school obs 1 week 1: themes are as follows including sub themes</p> <p><u>28. Hard to Engage/reach staff</u></p> <ul style="list-style-type: none"> i. <i>Teachers presented as disengaged (with me), not having the time (for me) over-worked, anxious in the context of the presentations and vulnerability the young people, and possibly under appreciated.</i> ii. <i>A hypothesis is that the teachers may be mirroring the system and children they are working with, who are described as harder to reach</i> <p><u>29. Institutional structures and processes</u></p> <ul style="list-style-type: none"> i. <i>the power dynamics, intersections and interplay between staff concerning relatability with the young people was apparent. This was exemplified via their clothing, the keys they wore around their necks and their approach towards the young people.</i> ii. <i>Wider contextual influences such as racism, the role of gender (in the context of power), discrimination and over-representation of minorities groups is not to be ignored. Furthermore, the role of a colonial mentality and past should be considered in the context of the processes and procedures within institutions In B&D.</i> <p><u>30. Deprivation</u></p>

	<p>i. <i>The harder to reach young person is embedded within a backdrop of poverty and disadvantage.</i></p> <p>31. <u>Language and stigma</u></p> <p>i. <i>Positioning of black and brown young people (predominately boys), as the as 'problem' that needs fixing.</i></p> <p>ii. <i>Are service users/clients aware that they are hard to engage? Or is it that services are hard to engage by young people – who may not be/have the right class, race, education etc.</i></p>
Step 6:	Write up

framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?</i></p> <p>xvii. Initial impressions xviii. Coding identified and refined</p> <p>5 groups formed from the observation and interactions.</p> <p>114 codes generated.</p>	<p>Grouping 1: Assessment</p> <p>1st stage of coding/initial impression: new children excluded from mainstream schools attend the site daily, so that they can be assessed by teachers and support workers. I was curious about the impact this would have on the current pupils, as well as the school system (teachers etc).</p> <p>Coding refined and patterns between codes: Change. Excluded. Unsettled. Bravado. Anxiety. Unease. Observation. gangs. Rivals. Young people. Review. Deviants. Social pariah. Youth justice. Criminality. Unwanted. Early intervention. Prevention. Reparative. Role model. Engage. Save. Protect. Saviour. Rescue. Hopeless.</p> <p>Grouping 2: Race</p> <p>The race of the students, staff and support workers was visually striking and something that I could not ignore. The teachers were white, the support workers black and brown and the students black and brown (majority).</p> <p>Coding refined: stigma. Prejudice. Sub-conscious bias. Racism. Privilege. Class. Deviants exclusions. Over-representation. Class. Education. Ability. Stereotype. Culture. Positioning.</p> <p>Grouping 3: Support Workers</p> <p>I was also struck by how the 'frontline' staff or those lower in the hierarchy (as opposed to the teachers) where of the global majority (ethnic minority groups); and wondered if this was strategic and known by the employers in respect of engagement and relatability.</p> <p>Coding refined: black and brown. Minority. Relatable. Positive discrimination. Discrimination. Authentic. Education. Ability. Ceiling limits. Restrictions. Divide. Hierarchy. Privilege. Power. bias.</p> <p>Grouping 4: Groups/Cliques</p> <p>I noticed that the young people sat in groups on sperate tables for example: the louder 'sporty' type, the girls, the quieter young people etc. I also noted that certain support</p>

	<p>workers and teachers sat with those groups through the break – and wondered about this.</p> <p>Coding refined: social psychology. Group dynamics. Belonging. Identity. popular. Un-popular. Familiarity. Engaged. Preferred. Attention. Complex. Inner circle. Fraternity. Crews. Gangs. Mob. In-crowd. Society. Association. Organisation. Context. Assemblage.</p> <p>Grouping 5: staff engagement</p> <p>As this was the second observation, I was struck again by the metaphorical gravitational pull of staff that approached me, and wanting to share their personal stories with me – which I felt, took me away from the children that I was there to observe.</p> <p>Coding: staff: anxiety. Acknowledgmentent. Overwhelmed. Support. Yearning. Emotional. harder to reach. Dis-engaged. Tired. Aloof. Silent. Disconnected. Disillusioned. Burnt-out. Pressure. Anxiety. Boredom. Blamed. Scrutiny. Accountability.</p> <p>Grouping 6: The Building</p> <p>The building continued to be as foreboding and ominous as before, something I hoped may have changed in week 2.</p> <p>Coding: surveillance. Gritty. Grim. Prison. Grey. Un-inviting. Anxiety-provoking. Escape. Context. Matter (the material). Fencing. Camera's. security. Protection.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: Assessment</p> <p>Codes:</p> <p>Change. Excluded. Unsettled. Bravado. Anxiety. Unease. Observation. gangs. Rivals. Young people. Review. Deviants. Social pariah. Youth justice. Criminality. Unwanted. Early intervention. Prevention. Reparative. Role model. Engage. Save. Protect. Saviour. Rescue. Hopeless.</p> <p>Grouping 2: Race</p> <p>Codes:</p> <p>stigma. Prejudice. Sub-conscious bias. Racism. Privilege. Class. Deviants exclusions. Over-representation. Class. Education. Ability. Stereotype. Culture. Positioning.</p>

	<p>Grouping 3: Support workers</p> <p>Codes:</p> <p>black and brown. Minority. Relatable. Positive discrimination. Discrimination. Authentic. Education. Ability. Ceiling limits. Restrictions. Divide. Hierarchy. Privilege. Power. bias.</p> <p>Grouping 4: Groups/Cliques</p> <p>Coding:</p> <p>Social psychology. Group dynamics. Belonging. Identity. popular. Un-popular. Familiarity. Engaged. Preferred. Attention. Complex. Inner circle. Fraternity. Crews. Gangs. Mob. In-crowd. Society. Association. Organisation. Context. Assemblage.</p> <p>Grouping 5: Staff engagement</p> <p>Coding:</p> <p>anxiety. Acknowledgement. Overwhelmed. Support. Yearning. Emotional. harder to reach. Dis-engaged. Tired. Aloof. Disconnected. Disillusioned. Burnt-out. Pressure. Anxiety. Blamed. Scrutiny. Accountability.</p> <p>Grouping 6: the building</p> <p>Coding:</p> <p>surveillance. Gritty. Grim. Prison. Grey. Un-inviting. Anxiety-provoking. Escape. Context. Matter (the material). Fencing. Camera's. security. Protection.</p>
<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? 	<p>6 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Institutional Power – the context of the alternative provision is what informs its practices and process's – that is, the law and policy that shapes and informs health, social care and education in providing support and early interventions to cyp described as harder to reach and who are on the periphery of exclusions and being society's harder to reach.</p>

<ul style="list-style-type: none"> • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>Groups – there were several groups in the hall, not only with the cyp, but with notably in the professional network too. I wondered about tribalism, social psychology and the role/theme of belonging.</p> <p>Professional system wanting/needing to be engaged/heard team members - teachers, purposefully approaching me and in my view, wanting to be contained, hear, and supported. Both personally and professional. which makes me curious about the nature of their role, and the isomorphic process in engaging harder to reach young people.</p> <p>Race/ism – the overtly apparent grouping of people by race was striking. The majority of cyp were from the global majority. The teachers were white and the support team were predominately black and brown. Which leads to a further curiosity surrounding the role of positive discrimination, prejudice, bias, and relatability/relational approaches with marginalised and black and brown young people.</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging ‘hard to reach’ young people in adolescent services?’</i></p> <p>contributing factors for adolescent team meeting obs 1 week 1: themes are as follows:</p> <p>32. <u>Institutional Power</u></p> <ol style="list-style-type: none"> <i>The role of legislation, policy, governance, and wider socio-political factors undoubtedly determine and have implications the service delivery of the adolescent team in engaging harder to reach young people.</i> <i>the psychical environment (building and location) is not to be negated, as a contributing factor to engaging (or hindering) harder to reach cyp – what role and message does this convey to those cyp and families described as harder to reach (lack of resources, prison like feel, run-down and grim building)</i> <p><i>The question now also comes to mind if the harder to reach are the ones who are harder to reach or are resources (teachers etc) harder to access?</i></p> <p>33. <u>Race/ism</u></p>

	<p><i>The role of race within the team and the children and young people open to the adolescent team are predominately from black and brown minority groups. In the context of racism, bias and prejudice – what might be the implications of the positioning of ‘harder to reach’ cyp’s open to the adolescent team.</i></p> <p>34. <u>Staff team wanting to be heard</u></p> <p><i>This may be a mirroring of the system that they working in, and in need of their own support, clinical supervision, and containment. The question has to be asked: does the staff team in [REDACTED] need more engaging and how does this contribute to engaging harder to reach young people.</i></p>
Step 6:	Write up

framework (5 stages to be used – write up once all completed).

Step 1:	Read and re-read transcript to become familiar, paying attention to each word
<p>Step 2: Generating initial codes: With the research question of:</p> <p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p>xix. Initial impressions xx. Coding identified and refined</p> <p>7 groups formed from the observation and interactions.</p> <p>113 codes generated.</p>	<p>Grouping 1: The Building</p> <p>1st stage of coding/initial impression: the building, although still grim and shabby, did not have the same effect (affect) on me as it in the previous two weeks. It didn't feel as 'harsh'.</p> <p>Coding refined and patterns between code. Desensitised. Accustomed. Hopeless. Apathetic. Aloof. Dispassionate. Emotionless. Loveless. Lack of care. just another job. Passive. disinterested.</p> <p>Grouping 2: Change</p> <p>As a new influx of young people (who had been excluded from mainstream schools) and had arrived on site to be assessed, meant a major change and shift within the the [REDACTED]</p> <p>Coding refined: anxiety. Energy. High alert. Aloof. Disconnected. Risk. Manic. Fear. Aggression. Foreboding. Dread. On edge. Gangs. Rivals. Groups. Bravado. Surveillance. Awareness. Masculinity. Security.</p> <p>Grouping 3: High Alert</p> <p>the staff and young people in [REDACTED] were visibly on alert (more so the staff) in the context of the new student's arrival to the premises.</p> <p>Coding refined: anxiety. Violence. Tense. Electric. Disengaged staff. Disconnected. Observation. surveillance. Assessment. Risk. Male. Black. Race. Positioning. Fear. Alert.</p> <p>Grouping 4: vulnerability</p> <p>The overt vulnerability of the children was apparent as most were known to the adolescent service under the category of grooming and exploitation.</p> <p>In all the high tension and risk assessment, I noticed an underlying vulnerability within the children and the staff. This presented in moments, as a not-knowing and searching for support from peers or colleagues.</p>

	<p>Coding refined: process. children. Care. neglect. Empathy. Compassion. Nurture. Identity. belonging. Support. Attachment.</p> <p>Grouping 5: Race and Relatability</p> <p>I wondered about the significance of the ground/support staff being visibly younger and predominately from the Black and Brown ethnic groups.</p> <p>Code refined: race. Relational. Groups. Packs. Belonging. Cool. Urban. Understanding. Similarities. Sameness. Positioning. Restricted reality. Lack of curiosity. Connected. Language. Identity.</p> <p>Grouping 6: Bravado</p> <p>It was noticeable how much masculine bravdo was being exhibited within the lunch break between the cyp – however, I also noticed this a little in the staff team and wondered about this.</p> <p>Coding: staff: isomorphic. Establishing power. group dynamics. Hierarchy. Gender. Brash. Acceptance. Dominance. Confidence. Complex. Trauma. Society. Local. Urban. Street. Urban. Sexuality. Heterosexual. Patriarchy.</p> <p>Grouping 7: Structural Violence</p> <p>If Structural violence refers to the systematic and normalised social, economic, and political oppression of vulnerable populations. i wondered about this in the context of it being an alternative provision and the normalisation of the cyp being postioned as harder to engage. Risky and aggressive – against a backdrop of race and deprivation.</p> <p>Coding: social exclusion. Class. Inequality. Crime. Trauma. Access to care. income inequality. Single parent household. Migrants’ children. Power. abuse. Neglect. Unconscious bias. Privilege. Entitlement. Ableism. Sexism. Stress. Mental health. Complex ptsd/trauma. Conduct disorders. Reinforcing social disparities. Rich stay rich.</p>
<p>Step 3: Searching for themes:</p> <p>Search for patterns with the main question in mind – combining and finding meaning. (highlighted)</p>	<p>Grouping 1: the building</p> <p>Codes: Desensitised. Accustomed. Hopeless. Apathetic. Aloof. Dispassionate. Emotionless. Loveless. Lack of care. just another job. Passive. disinterested.</p>

	<p>Grouping 2: Change</p> <p>Codes: anxiety. Energy. High alert. Aloof. Disconnected. Risk. Manic. Fear. Aggression. Foreboding. Dread. On edge. Gangs. Rivals. Groups. Bravado. Surveillance. Awareness. Masculinity. Security.</p> <p>Grouping 3: High Alert</p> <p>Codes: anxiety. Violence. Tense. Electric. Disengaged staff. Disconnected. Observation. surveillance. Assessment. Risk. Male. Black. Race. Positioning. Fear. Alert.</p> <p>Grouping 4: Vulnerability</p> <p>Codes:</p> <p>awkward. process. children. Care. neglect. Empathy. Compassion. Nurture. Identity. belonging. Support. Attachment.</p> <p>Grouping 5: Race and relatability</p> <p>Coding:</p> <p>race. Relational. Groups. Packs. Belonging. Cool. Urban. Understanding. Similarities. Sameness. Positioning. Restricted reality. Lack of curiosity. Connected. Language. Identity.</p> <p>Grouping 6: Bravado</p> <p>Coding:</p> <p>isomorphic. Establishing power. group dynamics. Hierarchy. Gender. Brash. Acceptance. Dominance. Confidence. Complex. Trauma. Society. Local. Urban. Street. Urban. Sexuality. Heterosexual. Patriarchy.</p> <p>Grouping 7: Structural Violence</p> <p>Coding: social exclusion. Class. Inequality. Crime. Trauma. Access to care. income inequality. Single parent household. Migrants' children. Power. abuse. Neglect. Unconscious bias. Privilege. Entitlement. Ableism. Sexism. Stress. Mental health. Complex ptsd/trauma. Conduct disorders. Reinforcing social disparities. Rich stay rich.</p>
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<p>Step 4: reviewing themes</p> <p>You reach the theme essence by defining and refining step 3.</p> <ul style="list-style-type: none"> • Do the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • If themes overlap, are they really separate themes? • Are there themes within themes (subthemes)? • Are there other themes within the data 	<p>5 themes generated which incorporate sub-themes (refined from step 3):</p> <p>Vulnerability – the vulnerability of the staff was apparent and becoming a theme over the course of the study. More than a possible mirroring, the vulnerability of risk, of being on high alert and an awareness of the risk that the young people may pose to them, each other etc.</p> <p>Relatability – linked to the concept of race, gender and age and the positioning of young people from marginalised groups.</p> <p>Structural violence – related to the intersectionality, power dynamics and marginalisation of those positioned as harder to reach and the hierarchy of race within the school</p> <p>Institutional bias – linked to race/ism and the above point. The privileging of white dominant discourses against a backdrop of deprivation, and the over representation of black and brown peoples open to health and social care services and the criminal justice system.</p> <p>Dis-engaged staff – the lack of resources, disillusionment and emotional fatigue in the context of staff being over-worked and possibly under-appreciated. Furthermore, this may in turn create spaces of lack of love, warmth, and compassion (sub-conscious and inadvertent) awkward nature, silence, aloofness, tiredness is a recurring theme across the board.</p>
<p>Step 5:</p> <p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i></p> <p><i>The question is now emerging from my observations of: what relational factors should be considered when engaging HTR young people in adolescent services?</i></p> <p>35. <u>Structural Violence</u></p> <p>The link between the institutional/organisational (school) and social structures set up within UK society – more specifically</p>

	<p>within the local authority of B&D may be harming young people and their families by not meeting their needs. which is linked to the following sub-themes:</p> <ul style="list-style-type: none"> xiii. Sub-conscious bias xiv. Institutional Power xv. Intersectionality (and Graces) <p><u>36. Team engagement</u></p> <p>The perceived, underlying and covert disconnection between staff and the cyp may stem from the following sub themes:</p> <ul style="list-style-type: none"> v. <i>Not feeling contained – lack and warmth, love, compassion and support from their peers, seniors which in-turn has a systemic effect.</i> vi. <i>The need to save, protect, redeem and the emotional fatigue this involves.</i> <p><u>37. Relatability</u></p> <p>Is being relational or relatable specifically positioned by age, gender, and race in the context of young people labelled as harder to reach (in this setting). Although, theory contradicts this idea, the reality (in practice) seemed to state the opposite.</p> <ul style="list-style-type: none"> i. Positive discrimination and tokenism ii. Similarities and difference
Step 6:	Write up

Appendix K: Thematic discourse analysis – procedural analysis. Final results.

Results: Thematic Analysis - Braun & Clarke (2006) frame work used loosely

Step 1:	Read and re-read the final themes from each individual observation and semi-structured interviews (10 in total).
<p>Step 2: listing, collating, and tallying of total themes.</p> <p>21 in total</p>	<ol style="list-style-type: none"> 1. Hard to engage staff (x1) 2. Insitiutional structures process and structures (x1) 3. Deprivation (x1) 4. Language, stigma, and positioning of young people (x3) 5. Institutional power (x4) 6. Racism (x2) 7. Staff wanting to be heard (x1) 8. Structural violence (x4) 9. Team engagement (x3) 10. Relatability (x1) 11. Language (x1) 12. Institutional racism (x2) 13. Agents of change versus agents of the state (x1) 14. Hierarchy of race (x2) 15. Keeping it real (x2) 16. Saviour mentality (x1) 17. Love and compassion (x1) 18. Patience and respect (x2) 19. Early intervention and Preventative services/approaches 20. Being authentic (x1) 21. Contemporary services (x1)
<p>Step 3. defining and refining themes from step 2.</p> <p>Holding in mind if:</p> <ul style="list-style-type: none"> • the themes make sense? • Does the data support the themes? • Am I trying to fit too much into a theme? • overlapping of themes 	<p>7 themes generated:</p> <ol style="list-style-type: none"> 1. Hard to engage staff 2. Institutional power 3. Language, positioning, and stigma surrounding young people 4. Structural violence 5. Wanting to be heard (staff) 6. Agents of change vs agents of the state 7. Contemporary services
Step 4: results/finding/final themes	<i>What factors contribute to the relational processes for engaging 'hard to reach' young people in adolescent services?'</i>

<p>Define what themes are and what they are not at the end of each phase. summarize the scope and contents of each them in about two sentences.</p> <p>The names should be clear, accurate and evident and transfer to the reader the thing the theme is about quickly.</p>	<p><i>The question is now emerging from my observations of: what factors should be considered when engaging HTRyoung people relationally, in adolescent services?</i></p> <p>Broken down into two ‘umbrella’ perspectives: the organisational (Macro) and the individual/young person/professional (Micro).</p> <p>Macro perspective:</p> <p><u>38. Structural violence</u></p> <p>An interwoven and umbrella theme, which connects all themes.</p> <p>The link between the social structures (institutions) and societal discourses within UK, specifically the local authority of B&D, may be harming young people and their families by not meeting their basic needs. This in turn may perpetuate and exacerbate the positioning of young people and their families described as harder to reach.</p> <p>Sub themes within this category are:</p> <ul style="list-style-type: none"> i. Racism and intersectionality (within B&D) ii. Colonial legacy and impact on adolescent services and alternative education provision <p><u>39. Organisational Power</u></p> <p>The role of the organisation (social care, health, and education) appears to be key driver towards the contributing factors towards engaging young people within the adolescent team.</p> <p>Sub theme within this category includes:</p> <ul style="list-style-type: none"> i. Bureaucracy (Legislation, Policy, procedure, and governance) ii. Power imbalance (between service and young people: access to resources; A barrier and a paradoxical factor when engaging young people in the community) iii. Hierarchy of race, subtle racism and subconscious bias and privilege. <p><u>40. Contemporary services</u></p> <p>Services needing to be up to date and current with local affairs regarding interventions, process, and procedure.</p>
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	<p>Sub themes:</p> <ul style="list-style-type: none"> xi. Fitting the system to the young person/family (not the other way round) xii. Authentic understanding of local community and needs (which includes, Cross-cultural understanding - other ways of knowing and doing apart from western only thought and practice) xiii. early intervention and prevention (school exclusions, the harder to reach and trauma informed, systemic approaches) xiv. The building <p>Micro perspective:</p> <p>1. Language, stigma and positioning of young people</p> <p>The positioning of children described as harder to reach is problematic. Although policy and theory promote anti-discriminatory and reflective approaches, in practice it does not seem to be the case:</p> <p>sub-themes:</p> <ul style="list-style-type: none"> 2. Trauma vs Behaviour 3. Marginalised young black males in B&D (over-representation of black and brown young males open to the adolescent team and placed in the alternative education provision) 4. Desensitisation and privileging of western thought. 5. Respect, love, and compassion (the young person's voice) 6. Authenticity (keeping it real) 7. Professional ambivalence – disconnection and meaning making <p>Practitioners' ambivalence within their work was dominant theme across both organisational spheres, which can be situated within the following sub-themes:</p> <ul style="list-style-type: none"> 8. Bureaucratic pressure (over-worked, burn out disillusionment and under-resourced) 9. Isomorphic process (harder to reach practitioners) 10. Emotional wellbeing and mental health 11. Agents of change vs agents of the state
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	<p>The organisational process and procedures appeared to be a factor in practitioners carrying out their community work, which brings into question who they are working for.</p>
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