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THE UNIVERSITY *of* EDINBURGH
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Contributing to the development of social pedagogy in the UK: a case study at "Santiago 1" residential care home in Spain

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ABSTRACT

In recent years there has been a growing interest in social pedagogy in the UK, much of which has focused on residential care for looked after children, a system that has been under scrutiny over recent decades. Research carried out in other European countries where social pedagogy is an established academic discipline and profession, alongside pilot programmes, training courses and practical initiatives in the UK, have shed light on what not that long ago was an unknown field in this country. These European studies suggest that social pedagogical approaches might potentially help to improve residential care in the UK.

This research aims to contribute to the development of social pedagogy in the UK through the study of its practice in Spain, where there is a significant tradition in this field. In order to do it, I have carried out a case study in a residential care institution working to a social pedagogic approach named “Santiago 1”. In a time when the tendency is to provide small family-like homes for children in care, Santiago 1 offers an example of a big institution (around 100 residents in total) where education, both in its more formal and informal versions, is at the core of their intervention. Through this case study, I have sought to find how its practice can inform a conceptualisation of social pedagogy and the possible implications of this for the current residential care situation in the UK. I designed an inductive study, using qualitative ethnographic methods (participant observation and semi-structured interviews) for data collection, followed by a thematic data analysis. The findings arguably make such desired contribution.

The findings confirm some of the notions and principles already existing in the academic body of knowledge in the field of social pedagogy. However, they also give insight into aspects that are frequently overlooked, such as creating an educative intervention that goes beyond the target group to have an impact on the community, and making use of group work and living as a cornerstone for the social pedagogic intervention. These perspectives lead to a discussion in which I point out the implications of trying to implement these social pedagogic ideas and practices in the UK and argue for the need for several changes in the current residential care system and the regulations that frame it that would be required in order to do so.

LAY SUMMARY

Social pedagogy is an academic discipline and a profession underpinning work with children in care in many European countries. Social pedagogy uses an educational approach which seeks to help children become integrated members of society.

Meanwhile, the social pedagogic approach is relatively new to the UK. In the last two decades there has been a growing interest in considering whether this could help improving services provided for children and young people living in residential care homes in this country. However, despite some useful efforts made to understand the social pedagogic approach, there is still a need to reach a better understanding of its theoretical foundations and how this can be brought to practice in the field of residential child care in the UK context.

This research aims to make a contribution to the understanding of social pedagogy in the UK through a case study in Spain. This involved spending several months in a residential care home, named “Santiago 1”, that uses a social pedagogic approach, aiming to learn as much as possible about how they put it in practice through observations and interviews with the professional social pedagogues working there. The research findings drawn from this are discussed in the light of the current understanding of social pedagogy in the UK. The findings’ implications facing a potential implementation of this approach in UK residential care homes are also discussed.

The findings of the thesis confirm several aspects of the existing understanding of social pedagogy and provide examples of how these are put in practice. The research findings also highlight aspects or characteristics of the social pedagogic approach that were not known or given particular importance in the UK, which provide a wider perspective in the discovery journey of developing social pedagogy in this context.

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Chapter 1. Introduction

Contemporary residential services for children and young people in care in the UK are under scrutiny (Kendrick et al. 2011). Previous decades have shown a clear tendency towards alternative services such as family adoption or foster care, which are considered more suitable for looked after children, so the number of residential care homes has reduced considerably. Meanwhile, scandals of sexual and physical abuse in residential care homes and poor outcomes have contributed to the emergence of a 'deep and official public concern with the failures of the system of residential care for children and young people' (Cameron and Moss 2011, p.18).

Under these circumstances which urge the need for 'rethinking and restructuring' the children´s workforce in the UK (Cameron and Moss 2011, p. 22), social pedagogy has emerged as a potential alternative, or at least as a discipline that can contribute to the improvement of the current residential care system. However, as I show next, social pedagogy has just recently started to emerge in the UK and efforts are still being made towards a better understanding of its conceptualization, how it is put in practice and what has to offer to the field of residential care for children.

1.1. Setting the context: The emergence of social pedagogy in the UK

Social pedagogy is a discipline which underpins social interventions with vulnerable people, including children in care, in many European countries (Smith 2012). Chapter 2, literature review, presents a definition of social pedagogy and its main principles. The origins of social pedagogy can be found in Germany during the 19th century, and afterwards several countries around Europe such as Denmark, Norway, France, Italy or Spain embraced the ideas developed by German thinkers such us Natorp, who is considered the 'pioneering writer on social pedagogy' (Storø 2013, p. 19). In these countries social pedagogy continued developing as a discipline and a social profession

until today, and each of them have their own tradition in social pedagogy (Hämäläinen 2003) which share common roots but vary from country to country (Stevens 2010) since it has been adapted to their different social, political and educational contexts. However, as Hämäläinen (2003) pointed out, in the early 20th century social pedagogy was still unknown within the Anglo Saxon world.

Despite the wide spread of social pedagogy across Europe from the 19th century onward, the discipline did not have the same influence in the UK and did not take roots in this country. The reasons for this are speculative and varied. Petrie (2013) suggests that some of the reasons for social pedagogy not having the same influence in the UK as it did in Europe can be the distancing from continental Europe that took place after the Napoleonic wars, the fear of European revolutionary ideas challenging the social order and even simply a lack of competence in other languages. Alternatively, Lorenz (2008) points out that one major reason for this is that social intervention in the UK was developed but in a different way that in other countries such as Germany. He observes that:

> *'Both countries (Germany and the UK), however, came to diverge later over the ways of achieving this state of rationality, with the UK choosing, on the whole, the path of psychoanalytically inspired casework whereas, in Germany, a 'sensible public' had first to be educated collectively to this aim.' (Lorenz 2008, p. 630)*

These different paths taken meant that different professions in charge of the social intervention were developed in the UK and other European countries. While in the UK social work, a profession based on a casework individualised model, took over the social intervention, in other European countries social pedagogy as a profession and its educational approach underpinned it. This different approach taken in the UK has influenced the current situation where there is a clear distancing between social care and education (Petrie 2005) which means each of these are developing 'within their own logic' (Coussée et al. 2010, p. 791). Thus, since social work is focused in casework intervention and social care does not integrate an educational approach, there is currently a

gap which could potentially be addressed by the implementation of social pedagogy.

Although social pedagogy did not develop in the UK as it did in other European countries, it has been argued that some of its main principles or its educative approach might have a common ground with ideas and practices used to work with children in the UK (Cameron and Moss 2011, Cameron et al. 2011). For instance, Smith and Whyte (2008) highlighted similarities between the Scottish social care tradition and social pedagogy and (Whyte 2009) argues that there is a long tradition of social pedagogy in the UK that has yet to be recognised and tapped.

The potential of social pedagogy to fill the gap observed in social care has caused a growing interest in social pedagogy during the last decade across the country and it has started to emerge strongly as a discipline that could benefit social care services in the UK (Smith 2012). Although social pedagogy is a discipline which aims to help any sector of the population in need, it has been the social pedagogy for children and young people in residential care which has attracted more interest in the UK (Petrie et al. 2006).

Already almost two decades ago Petrie (2001) suggested that social pedagogy could have something to offer to children´s services in the UK, while a few years later Boddy et al. (2005) supported the introduction of social pedagogy as part of a reform of the children´s workforce. More recently Coussée et al. (2010) highlight a triple potential of an implementation of social pedagogy as it would bring a ‘better co-ordination and integration in care and support’ (p.793.), ‘better conditions for the workforce’ (p.794) and a ‘holistic, child-centred care’ (p.795) while Cameron and Moss (2011) have argued that there is evidence that a social pedagogic approach for working with children would be beneficial in different ways such as, for example, enabling ‘significant changes to daily life for young people’ (p.16).

The growing interest in social pedagogy in the UK has materialised in a series of initiatives which seek to understand, develop and implement this discipline in several services for children and young people across the country. Some of these initiatives are:

- An evaluation of a project aiming to develop knowledge about the social pedagogic approach amongst residential care workers (Bengtsson et al. 2008)
- A pilot programme developed to analyse the work of social pedagogues recruited in Germany and Denmark and its impact on the quality of residential care homes in England (Cameron et al., 2011).
- The development of degree level courses in higher education (BAs and an MA) at several universities across the country in or including social pedagogy (Hatton 2013).
- Several local authorities providing training in social pedagogy in their residential care (and other) services (Cameron and Moss, 2011).
- Short private training programmes in social pedagogy for organisations working with children and young people (Stevens 2010; Cameron and Moss, 2011).
- Research analysing the potential of the implementation of social pedagogy in the UK (Hatton 2013).
- The creation of the social pedagogy Development Network (SPDN) which carries out national meetings twice a year aiming to provide a space where practitioners embracing social pedagogy in their services can share their experiences (Cameron and Moss, 2011).
- The development of a recently created journal named 'The International Journal of Social Pedagogy' based in the UK.

1.2. Rationale: Motivation and aim of this research

Despite the interest in social pedagogy and the increase of social pedagogy based initiatives, the development of this discipline in the UK is still at an early stage. This is evident both in theory and practice. The current body of knowledge focuses on the understanding of social pedagogy in its broad sense and its potentiality in the field of residential child care in particular. However,

despite the effort to reach a better understanding of this discipline in the UK, the situation is that social pedagogy is still little known and understood in the UK (Lorenz 2008; Cameron and Moss 2011) and the creation of the professional figure of social pedagogues 'impracticable' (Paget et al. 2007, p. 32).

Regarding practice, the situation is similar since there is still a lack of experience of how to implement social pedagogy based initiatives as the existing ones in the UK are still in their infancy. Initiatives like the Social Pedagogy Development Network (SPDN) which gathers practitioners interested in the implementation of a social pedagogic approach in their services have helped to cover some of the gaps created by such a lack of experience but it can be argued that there is still a long way ahead in terms of developing a social pedagogic practice.

The recent emergence of social pedagogy in the UK contrasts with its situation in other European countries. As Cameron and Moss (2011) highlight, social pedagogy is found in most countries of Continental Europe, from Russia to Portugal and from Slovenia to Norway. In most these countries social pedagogy was established during the second half of the 20th Century (or even slightly earlier) and has been developing for decades. More specifically, as the 'Consejo General de Colegios de Educadoras y Educadores Sociales' (Spanish Social Pedagogy Associations Board) shows in a comparative study of the professional situation of social pedagogues across Europe (CGCEES 2013, p. 23), social pedagogy is a regulated social profession with its own qualifications in 18 of 30 European countries (considering those in the EU plus Norway, Iceland and Switzerland).

The long tradition and experience in social pedagogy of some of these countries have been beneficial during the emergence of this discipline in the UK. As Cameron and Petrie (2009) point out, social pedagogy cannot be imported as a pack from other countries, but the improvement on understanding of social pedagogy in this country has in great part been possible thanks to comparative researches which have explored its conceptualisation in some of the European countries where it is an established and developed discipline. A good example of this is the study carried out by Petrie et al. (2006) which analysed the social

pedagogic approach and policies for residential care services in Belgium, Denmark, France, Germany and the Netherlands, and provided light in the process of understanding this discipline.

Given the considerable room for improvement in the understanding and development of social pedagogy in the UK and the effectiveness in this sense shown by research projects which studied this discipline in some European countries, I proposed to extend this work with a research in a European country to which less attention has been put yet: Spain. As I will show later in the literature review chapter, Spain has a long tradition in social pedagogy with a strong influence from early ideas about this discipline in Germany but also with its own conceptualisation and its practice implementation which have been developed through decades of work.

The reasons behind my research proposal can be found in my personal and professional situation and experience as I explain next. My personal background is Spanish since my family and I were born and grew there. Moreover, I am qualified in social education (social pedagogy equivalent in Spain) and have experience working in residential child care settings both in England and Spain. This gave the opportunity to experience the differences in the approaches between these two countries and in the role of the professionals working in them. In particular, I was struck by how in the UK the approach focused on care and safeguarding while the social pedagogic approach in Spain revolved around an educational aim. Such realization motivated me to towards trying to find answers regarding what was different and why.

Considering my Spanish background, qualification and experience in the field in both countries, I was in a position where I could make a unique contribution by offering access to part of the knowledge and experience about the social pedagogic approach existing in Spain to a British audience. As Cameron and Moss (2011) point out, 'social pedagogy has made a strong showing in the UK in recent years because of various intermediaries – individuals, groups and organisations – who have been able to interpret and explain the social pedagogic approach to a UK audience' (p.18) and I was in an ideal position to do that. Moreover, since most of the previous studies had focused on northern

European countries, I considered that Spain provided a fresh opportunity for adding southern European knowledge and experience about social pedagogy to the UK.

In order to access to that knowledge and experience I decided to focus on how social pedagogy is practiced. Social pedagogy is a discipline in which theory and practice are constantly nurtured and shaped by each other (Pérez Serrano 2004) but the links between them are notoriously complex. It is a discipline with 'both a theoretical field *and* one concerned with practice' (Petrie 2013, p.4) and these fields are not static but develop in a dynamic way (Eichsteller and Holtoff 2011). This dynamism poses difficulties for the theoretical field to reflect all the richness of its constantly changing and adapting practice. As Storø (2012) suggests, sometimes social pedagogues 'do not feel that their work is described in theory, and that they cannot gain much help from theory' (p.21). Therefore, social pedagogy is a discipline that, in order to be understood needs to be analysed not only from a theoretical perspective but also by studying how it is put in practice.

Following this rationale, I identified that a) there was an interest in improving the understanding of social pedagogy in the UK, particularly in the field of residential care for looked after children and b) I was in a position where I could offer access in UK to Spain's tradition and experience using a social pedagogic approach in that field. Thus the aim for this research was to contribute to the understanding of social pedagogy in the UK drawing from a study of its practice in Spain and this aim was the base for the development of the research questions that I show next.

1.3. Research questions and overview of the methodology

Considering those aspects and the aim of this research I developed the following research questions which lead the design of this research:

- What are the characteristics of a social pedagogic approach in a Spanish residential child care facility?

- How do such characteristics fit with existing knowledge from the emerging discipline of social pedagogy in UK?
- What might be learned from such social pedagogic approach facing the implementation of social pedagogy into residential child care practice in the UK?

These questions have been the pillars of this research and influenced how the methodology has been developed. Thus, from planning the fieldwork and choosing the methods for data collection and analysis to how the findings and discussion of this research are reported, I have constantly aimed to provide the most accurate answer to these questions.

Since my aim was to obtain knowledge about social pedagogy from its practice in residential child care in Spain, the approach I took for this research was inductive (see chapter 3.1.1). Thus, what I tried to achieve was to search for characteristics of social pedagogy through the observation of its practice and then discuss what that data could offer given the current understanding and development of social pedagogy in the UK.

In order to try to answer the research questions and given the inductive nature of the research, I chose to take a qualitative approach. As I explain in detail in the methodology chapter (see chapter 3.1.1), this approach is ideal for inductive research (Bryman 2016) but also very appropriate due to nature of the social pedagogic intervention. Since its practice is strongly shaped the cultural and socio-economic context where the intervention takes place it becomes a complex social phenomena and therefore I chose a qualitative approach which offered me richer outcomes in details and nuances which are key to understanding such complexity.

For the research design I chose to carry out an ethnographic case study, which is very frequently used in inductive researches like this as it allows the level of focus and depth required to build knowledge from it. For the case study I selected a residential care home in Salamanca, Spain, named Santiago 1, and the reasons why I chose this are both pragmatic and quality related. This is all detailed in the methodology chapter (see chapter 3.1.2).

The methodology chapter also sets out the methods used in this research in order to collect data during the fieldwork I used the two more commonly used ethnographic methods: participant observation and interviews. Thus, I planned fieldwork at Santiago 1 in which I participated in the daily life of the care home and collected data based on my observations, experiences and reflection, and then I carried out semi-structured interviews with members of the educative team. As I explain in that chapter, using a combination of different methods, known as triangulation, allowed me to contrast and complement the information acquired with each of them so I could obtain a better picture of the reality and therefore better quality of data.

Later in the methodology chapter I explain how the analysis and report of the findings were done using a thematic analysis theory, which was very suitable for a research with an inductive approach like this. It involved a process of coding and categorisation into themes of the data that facilitated an analysis and report that encapsulated the information previously collected. This process allowed me to identify the characteristics of the social pedagogic approach in Santiago 1 which reflect the theoretical underpinning to their practice. The findings are all available in chapters 4 and 5. Chapter 4 presents findings related to the education approach and the different educational strategies, while chapter 5 shows characteristics related to risk management, participation and relating to the wider community.

Finally, I develop a discussion in chapter 6 in which I reflect on the findings obtained in the light of the research questions and the literature reviewed. In this chapter I discuss how existing theoretical aspects of social pedagogy are integrated in practice, the weight of these aspects in the social pedagogic intervention and how the characteristics of Santiago 1 and the intervention developed allow it.

The findings that I discuss include theoretical aspects which have been already explored in the process of trying to understand social pedagogy in the UK in recent years such as such as the centrality of the relationships and the group for the intervention, the importance of activities as a common third that enhances those relationships and creates learning opportunities or an approach

to risk which is not risk avoidant but embraces its educational potentialities, but also some of them which are particular of the Spanish approach and not easily identifiable in approaches coming from other northern European countries. Some of these are an aim to have an impact not only in residents but also in the community around them in search of their empowerment and social justice or the educational element of their intervention which places the focus on creating learning opportunities for residents in order to open doors for a better future instead of doing it on their deficits and problems.

Furthermore, I also include reflections about how all those aspects would fit in the UK given the current situation of residential care in this country and the challenges, barriers and changes that would be needed should a social pedagogic approach like the one studied wanted to be implemented.

Chapter 2. Literature Review

Introduction

The aim of this literature review is to provide an overview of the existing academic literature regarding the aspects that are relevant for this research, in order to allow a discussion of findings in the light of the current knowledge in the field. Hence, this literature review is going to be focused on showing the current situation of residential child care and the understanding of social pedagogy in the UK on the one hand, and to complement it with a similar overview of residential care and a preliminary account of the development and definition of social pedagogy as a discipline in Spain on the other hand.

The first section focuses on social pedagogy in the UK. It consists in a review of the main publications addressing this topic, particularly those concerned with social pedagogy for children and young people´s social welfare. It starts with an analysis of the current understanding of social pedagogy within the British body of knowledge and the main key ideas which are considered to be at the core of this approach. The section continues with an explanation of the relationship between social pedagogy and education and the particular approach to risk offered by social pedagogy in the field of residential care. The end of the section shows some of the critics raised towards the interest on this approach as an alternative for residential child care in the UK.

The second section explores the situation of residential child care in the UK. It starts with an overview of the historical development of residential care in recent decades and the debate around its purpose nowadays. The section continues with an overview of the current situation of residential care, exploring the differences between the four nations, the characteristics of the different provisions for child care and the profile of the children in residential care.

The third section shows the development of social pedagogy in Spain and provides an overview of how this discipline is understood and conceptualised in that country. The first part of this section covers the development of social pedagogy reviewing its historical progress since its emergence at the end of the

19th Century until today. The second part provides a brief explanation of its definition as a scientific discipline and the third part focuses on some of the characteristics of social pedagogy in the field of working with children and young people.

The fourth section offers an overview of residential child care in Spain. Similarly to what is done in the second section for the UK, this section provides an overview of the historical development of residential care in recent decades and explains the particularities of the current residential care system and its regulation. The section continues with an exploration of the situation of the debate about the purpose of residential care in Spain before describing the characteristics of the provisions existing at the moment and the profile of children in residential care . The section ends showing the main principles that guide residential child care in Spain.

The fifth and last section explores some of the characteristics of the educative interventions in residential care in Spain, focusing on the importance of the care plan for each child in care, the development of an individualised programme of intervention with them and the use of group based programmes in residential care homes.

2.1. Current understanding of social pedagogy in the UK

2.1.1. What is social pedagogy?

In order to understand the current situation and recent emergence of social pedagogy in the UK it is important to consider first the origin and definition of this discipline internationally.

As Cameron (2004) points out, social pedagogy is the discipline that underpins residential care work with children and young people in many mainland European countries. However, as Hallstedt and Högström (2005, p. 47) assert, social pedagogy does not only aim to help children and young people in care, but anybody in a difficult situation, including ‘abused children, youth with problems, drug addicts, ex-convicts, old people with special problems and

people with learning problems' among others. Cannan et al. (1992) defined social pedagogy as:

> '*A perspective including social action, which aims to promote human welfare through child-rearing and education practices; and to prevent or ease social problems by providing people with the means to manage their own lives, and make changes in their circumstances' (p. 73).*

This definition highlights two main characteristics of social pedagogy. On the one hand, social pedagogy exists in order to tackle social problems. Its roots can be found in 19th century Germany, when industrialisation and urbanisation processes created new social problems derived from the fragmentation of the traditional agrarian social order (Hämäläinen 2003). Social pedagogy emerged then as a response to these social problems and soon spread towards other European countries which were facing similar social changes. Its main aim can be described then as 'to promote people's social functioning, inclusion, participation, social identity and social competence as members of society' (Hämäläinen 2003, p. 76).

On the other hand, social pedagogy consists in educational initiatives. It is based in educational processes where a person learns and another person (the social pedagogue) promotes this learning. The social pedagogue tries to educate the person, providing them with support to develop the capacity 'to be able to define the situation and to find proper solutions' by themselves (Hallstedt and Högström 2005, p. 49). The concept of education in social pedagogy needs to be understood as 'education in the broadest sense of the term' (Petrie et al. 2009).

Aiming to provide a more specific definition of social pedagogy and how it is practised becomes a difficult task due to diversity of its contents (Petrus Rotger 1997) and the complexity of the relationship between theory and practice (Sáez Carreras 1997). Therefore, trying to reduce the definition of social pedagogy to the explanation of a method or a set of practices would be failing to reach its full richness and complexity. As Hämäläinen (2003) explains, social pedagogy consists more on a particular approach or way of thinking rather than a series of methods:

'An action is not social pedagogical because certain methods are used therein, but because some methods are chosen and used as a consequence of social pedagogical thought.' (p. 77)

Therefore, when trying to define social pedagogy it is more appropriate to refer to some of its key ideas and principles as these can help understand social pedagogy, taking into consideration that it cannot be reduced to these.

Petrie et al. (2006) point out a set of principles which are part of a social pedagogic intervention in the field of work with children and young people, which help to understand the basis of social pedagogy. These principles are:

- There is a focus on the child as a whole person, and support is oriented towards the child's overall development.
- The practitioner sees himself/herself as a person, in relationship with the child or young person.
- While they are together children and staff are seen as inhabiting the same life space; not as existing in separate hierarchical domains.
- As professionals, pedagogues are encouraged constantly to reflect on their practice and to apply both theoretical understandings and self-knowledge to the sometimes challenging demands with which they are confronted.
- Pedagogues are also practical, so their training prepares them to deal with many aspects of the children's daily lives and activities.
- Children's lives in groups are seen as an important resource; workers should foster and make use of the group.
- Pedagogy builds on an understanding of children's rights that is not limited to procedural matters of legislated requirements.
- There is an emphasis on team work and on valuing the contribution of others in 'bringing' up children: other professionals, members of the community and, especially, parents.
- The centrality of relationships and, allied to this, the importance of listening and communicating. (Petrie et al. 2006, p.22)

Based on the current understanding of social pedagogy in UK context, several authors have summarised a number of key ideas which are at the core of the social pedagogic approach with children and young people in the UK:

Haltung

The practice of social pedagogy revolves around an ethical stance which comes before any set of skills and knowledge during the social pedagogues' intervention: Haltung. (Smith 2012) According to Eischsteller and Holtoff (2011) the german term Haltung translates as 'attitude', 'mindset' or 'ethos'. Based on the practitioners' values and philosophy, haltung in social pedagogy affects how they conceptualise the people they work with and their behaviours towards them. Thus this notion is considered a conceptual foundation within social pedagogy (Smith 2012, Bain and Evans 2013) which denotes an emotional connectedness to other people and a profound respect for their human dignity (Eischsteller and Holtoff 2011) that transversally affects and shapes all the principles of social pedagogy and how they are developed and put into practice.

The 3 ps

The 3Ps model refers to three dimensions of the self of social pedagogues as human beings: the private, the personal and the professional. The private is the part that "is kept apart from those we (social pedagogues) work with" (Smith 2012, p.50) as it "should not be in any relation with a child in care" (Bengtsson et al. 2008, p.9). This part includes aspects of the social pedagogues' self that belong to their lives outside their working environment and are not appropriate or helpful for their practice (Eischsteller and Holtoff 2011). The personal refers to the aspects of the social pedagogues´ life that they share with the people they work with, such as "enthusiasm, knowledge and skills" (Cameron et al. 2011, p.37). Meanwhile, the professional self "involves theories and professional practices regarding others' behaviours that are routinely used in practice" (Kirkwood et al. 2019, p.5). This comprises the "professional knowledge, skills and attitudes" (Cameron et al. 2011, p.15) that social pedagogues bring to their work.

An awareness of these three aspects of their 'self' and their appropriate use during practice is essential for social pedagogues. As Smith (2012) argues, the use of "the professional and personal 'selfs' combine to support the 'self in action' endeavour that is at the heart of direct work with people." (p.50). Bringing their personal self into practice allows social pedagogues to interact with the people they work with being authentic (Bengtsson et al. 2008). This allows them not to be "afraid to express feeling, or talk about their lives, or share humour and fun" (Cameron et al. 2011, p.15) and 'to show authenticity and to build connectedness and attachment' (Vrouwenfelder et al. 2012, p.15). Working with people based on the relationship with them is at the core of the social pedagogic intervention (as I explain later on in more depth), and therefore social pedagogues make use of their personal ´selfs' as an intrinsic aspect of their roles. As put by Bengtsson et al. (2008, p.10) 'if you want to build a relation with a young person, you have to put yourself into the relationship so the young person can relate to you'.

Given the importance of making use of their personal "selfs" during their educative interventions, social pedagogues reflect upon their practice and 'the interplay between each P of the 3P model' (Vrouwenfelder et al. 2012, p.15). This way they are able 'to maintain an authentic interaction with young people and at the same time protect their "inner self"' (Bengtsson et al. 2008, p.10).

Head, heart and hands

Social pedagogy´s holistic perspective has been referred to as 'Head, heart and hands'. These three words refer to the need for social pedagogues to use their intellectual (head), practical (hands) and emotional (heart) skills and abilities in their intervention (Moss and Petrie 2019).

Bringing their "heads" to their work allows social pedagogues to 'draw on theoretical understandings of behaviour' (Kirkwood et al. 2019, p. 5), relating this way their practice with their professional knowledge. As Bengtsson et al.(2008) point out, 'the Social Pedagogue uses theory, the head, to understand and to reflect on what is happening in a relationship between him/herself and the young people, what adjustments need to be made in the relationship to

continue to support the young people and what is the best way to go about it' (p.10). This is an essential aspect of the social pedagogic approach as social pedagogues do not 'simply' carry out their interventions based on their intuitions or their intrinsic capabilities, allowing the relationship with the people they work with to flow in a "natural" way. Instead, they take the time to reflect upon what is best for their practice and the people they work with, and make use of their professional knowledge, skills and experience to provide an intervention that suits their particular needs.

Using their "heart" means putting emotions in play as part of the social pedagogic intervention. In words of Cameron et al. (2011) 'social pedagogues should bring their hearts to their work as ethical and emotional beings. They are aware of their own emotional reactions to the work and how these can affect their relationships and communications with children and others.' (p.15). Emotions are an intrinsic aspect of social pedagogues as human beings, and play an important role in the process of building and developing relationships between them and the people they work with. These emotions are 'the fundamentals of trust, hope and authenticity' (Bengtsson et al. 2008, p.10). which allow relationships to involve a real connection between two people. Therefore, far from being kept away of their professional roles, social pedagogues need to make use of emotions as part of their educative intervention.

The "hands" refer to the 'practical skills and activities' (Milligan 2009, p.9) that social pedagogues make use of in their practice. As Smith (2012) points out, part of the social pedagogues' training 'involves learning recreations and cultural skills. (…) they have a repertoire of artistic, sporting and cultural skills that they can share with those whey work with'(p.50). These skills allow social pedagogues to create an intervention in which practical activities play an important role as meaningful ways to spend time together with the people they work with while creating learning opportunities (the importance of these activities is explained in more detail in the next point).

The common third

The common third refers to the range of activities carried out by social pedagogues and the people they work with together. Some of these are part of the day-to-day routine (such as washing up, tidying shoelaces, shopping, watching TV), others are specifically developed with a pedagogic intention (such as artistic crafts, dancing, sports, workshops). As Milligan (2009) points out, 'Common Third is central to social pedagogic practice. Essentially the Common Third is about using an activity to strengthen the bond between social pedagogue and child and to develop new skills' (p.9). This quote highlights two of the aims of using activities as part of the social pedagogic intervention. On the one hand this helps to develop skills by engaging in practical experiences and on the other hand the joint activities help social pedagogues and they people the work with to develop relationships.

The use of activities as part of social pedagogic practice helps to develop new skills, for example, 'music, drama, dance and the visual arts open eyes to wider dimensions of existence and richer possibilities '(Petrie and Chambers, 2009, p. 3) while 'everyday practices such as how to shake hands, how to greet a visitor and how to offer a cup of tea (…) seemingly mundane tasks equip children to take their place in society' (Cameron et al. 2011, p. 37). Furthermore, as Cameron et al. (2011) point out, these activities allow participants to have meaningful experiences which contribute 'to foster children's self-confidence, their sense of being valued, to enhance the children's social and practical skills and to promote group life' (p. 37.) And theseprovide opportunities for social pedagogues and the people they work with to enjoy 'playing and having fun together' (p. 15). All these aspects show the richness that the development of a wide range of activities can bring to a social pedagogic intervention.

Common third activities are also mediums for the relationship between social pedagogues and the people the work with to get established and strengthened (Cameron et al. 2011). They 'can be so much more than merely doing something – it is about creating a commonly shared situation that becomes a symbol of the relationship between the social pedagogue and the child' (Milligan 2009, p. 10). Going through the experience of participating together in activities

on daily basis provides a fertile ground for these relationships to develop during the course of the pedagogic intervention.

Moreover, the way these activities are conceived in a social pedagogic practice sets the basis for an approach that puts both the professional and the person they work with at the same level in their interaction. In a social pedagogic intervention, the activities shared as common third are chosen and carried out on equal terms since 'the pedagogue and the client share and have a joint claim on an activity in all of its different stages, from idea to execution' (Smith 2012, p.51). During the process of taking part in these activities the roles of social pedagogues and the people they work with are not of expert and learner. Instead these roles are 'reversed or both parties are learners, thereby involving greater equality in their interactions' (Smith 2012 cited in Kirkwood et al. 2019, p.5). This way, what can seem mere day-to-day activities become, in a social pedagogic intervention, opportunities with a great pedagogic potential.

Shared lifespace

Not only activities are good opportunities for learning, but anytime during the day spend by the social pedagogue and the children and young people they work with together presents opportunities to promote growth and learning. In order to achieve this, social pedagogues 'see themselves and others they work with as inhabiting the same 'lifespace', rather than occupying some separate hierarchical domain' (Moss and Petrie 2019, p.398). They seek to avoid a differentiation between 'us and them' and the feelings emerging from this (Cameron et al. 2011). This way they are already creating a lifespace that promotes an equal participation of all the members. This lifespace has been defined as 'a mini society in its own right, in which people learn to interact, build relationships and feel included' (Smith 2012, p. 51). Social pedagogues make use of it as a source of learning opportunities to be made the best of. For example, conflicts emerging in the day to day life, can be used by social pedagogues to show the people they work with how these 'can be solved in other ways than previous negative experiences' (Bengtsson et al. 2008, p.11).

Reflective practitioners

Social pedagogy requires a reflective practice, not only at an individual level to be ready to act when the situation dictates, but also as a group practice that improves the social pedagogic intervention. At an individual level, reflection is an important tool that helps social pedagogues to develop an intervention that is soundly aligned with the social pedagogic approach. For instance, I have highlighted above the importance for social pedagogues to manage their personal and professional 'selfs'. Bringing these 'selfs' into their practice and negotiating appropriate boundaries in relation to these and the private self, is of great importance and requires social pedagogues to be 'self-aware and reflective' (Smith 2012, p. 50). Futhermore, as Bengtsson et al. (2008) point out, reflection allows social pedagogues to build on various theories when developing their intervention and to evaluate the progress of the people they work with. At group level, reflection is also a powerful tool for social pedagogues. As (Bengtsson et al. 2008) argue, group reflection facilitates social pedagogues' setting aims for the people they work with and their development, and therefore group reflection techniques are part of their training.

Importance of context

Social pedagogic intervention does not rely on a set of universal guidelines but it depends on the particularities of the person, the situation and the context, which informs the way to act in each particular circumstance. Social pedagogues understand 'that every child and situation is unique and that there is no algorithm that will tell them what to do.' (Smith 2013, p.9) Therefore, they need to be prepared to use reflection and theoretical knowledge to adapt their intervention to the uniqueness of each person they work with and the particularities of their context. Given this, Smith (2012) argues that rhetoric in the UK about 'best practice' does not fit within a social pedagogic approach since 'what is "best" will be determined in the particular circumstances that pertain in any situation' (p. 51)

2.1.2. Social Pedagogy and education

As noted earlier, social pedagogy revolves around a concept of education which needs to be understood 'in the broadest sense of the term' (Petrie et al. 2009). Social pedagogues are not limited to promoting the learning of certain sets of skills or knowledge, but they seek to pursue the development of the person as a whole, in their particular social context. They are 'upbringers' acting on behalf of the society, Cameron and Moss (2011) claim.

This notion of education in the broadest sense needs to be differentiated from education understood as 'schooling'. Smith (2019, webpage) points out that while schooling is concerned with the transmission of knowledge to be stored and used to pass tests, education involves engaging with other people and the world around, and it 'entails being with others in a particular way and adopting a certain mindset or orientation'. This underscores the importance of the social dimension of education in social pedagogy. However, education can be developed in a range of formality degrees. Whereas formal education involves a curriculum to be followed, informal education is rooted in conversation. Many approaches to education can be found at some point in the spectrum between those two (Smith 2016, 2019). Although informal education is developed through conversations and has a spontaneous nature, it is a deliberate act (Smith 2016, 2019) which requires a high degree of reflection and a clear base of values so educators can respond to emerging situations (Jeffs and Smith 1997, 2005, 2011).

Social Pedagogy has its roots in ideas developed by main theorists of education such as Dewey, Rousseau and Pestalozzi (Smith 2019), so considering their thinking can provide us with an insight into the pillars of social pedagogy. One aspect that is common to these theorists is a focus on the role of the environment and the learning opportunities this provides through the experience of interacting with it. For example, it has been pointed out that Rousseau had 'the focus on the environment, on the need to develop opportunities for new experiences and reflection, and on the dynamic provided by each person's development' (Doyle and Smith 2007-2013) while Pestalozzi 'is concerned with

action, with experimentation and yet, at the same time, he is committed to observation and reflection, and to trying to make sense of experiences and situations' (Smith 1996, 2008). Similarly, Dewey's ideas of education included that 'learning experiences should have a clear purpose, an understanding of the surrounding conditions, knowledge of what occurred before, so that it could allow reflection and analysis of issues and experience' (Sikandar 2015, p. 194). As these quotes show, environment and experience are crucial concepts in their ideas about education, alongside an emphasis on the need for reflection to transform these into understanding and knowledge.

Another key idea that can be found particularly in Dewey and Pestalozzi's work is that education serves to promote social changes that improve the living of the individuals. Thus, as Smith (1996, 2008) points out, Pestalozzi was concerned with social justice and a commitment to work against suffering in society. Education for Pestalozzi was crucial for social conditions' improvement. Similarly Dewey 'saw education as a means of serving the democratic process through making corrections in the economic evils and by obtaining political ends that would lead to progression of a society' (Sikandar 2015, p. 192). Such a political end of education could also be found years later in the work of Freire, who understood education as political in nature (Freire 1986). These ideas have a strong resonance in social pedagogy and influence how the social pedagogic approach is concerned with the improvement of social conditions of the people in the society. However, as Smith (2019) argues, in the UK there has been a tendency to ignore this democratic and social change- oriented nature of social pedagogy, reducing this to a pedagogy for case management.

2.1.3. Social Pedagogy and risk

It has been argued that social pedagogy applied to residential care can contribute to take a different approach to risk that might be more beneficial for children in care. In words of Milligan (2011):

> '…the potential of a social pedagogic approach to equip residential workers to recover appropriate professional confidence and challenge the assumptions behind risk-averse practice' (p. 207)

The author argues that currently high levels of risk-aversion in services for children, including residential care have been noted. Risk-averse practice has been identified as the result of an 'understanding of risk … extensively applied to the social services' (Beddoe 2010, p.1280). This understanding of risk derives from what Beck (1992) has defined a as 'risk society' in which, in a neo-liberal context, the rhetoric of risk is used 'to mobilise fear as an emotive, defensive and strategic medium for advancing the values of safety and security' (Stanford, 2010, p. 1065).

This understanding of risk has resulted in the development of policies and a culture based on risk management in residential care. The management of risk is 'based on the notion that risk can be accurately predicted and managed' (Bates and Lymbery 2011, p.31). Under the influence of ideas from the private sector, standardisation and control have increased while the scope for professional judgement in child protection services is reduced (Munro 2010), which has had significant impact on residential care. As a result of this risk management approach, strict regulations and health and safety obligations have been introduced for organisations in residential care to comply with, although frequently these are not applied appropriately (Milligan and Stevens 2016).

A problematic aspect identified of a risk management orientation is that it creates a fear and blame environment (Smith 2009) in which residential care workers feel at risk when carrying out their duties and organisations produce guidance and procedures which are more concerned with protecting the staff than the young person (Milligan 2011). As a result, children and young people

often miss the opportunity to carry out activities due to the staff´s fear of being blamed if an accident occurs (SCCYP 2010).

Another issue pointed out about the risk management approach is that it 'cannot eradicate risk; it can only try to reduce the probability of harm' (Munro 2011, p. 38) and by trying to do it, as an study suggests, unforeseen consequences might arise which may be worse than the risk itself (McGuinness et al. 2007). For example, risk assessments are tools introduced under the risk management approach with the purpose of facilitating the safe undertaking of activities (SCCYP 2010). However, in practice, risk assessments, which often are over-complicated, lengthy and tick-box oriented (Munro 2010), frequently become a barrier that prevents children and young people from undertaking activities (SCCYP 2010) and blocks spontaneity and normality in the development of many outdoors activities (McGuinness et al. 2007). The fear environment in which staff find themselves in residential care lead them to believe they must implement risk assessments for every activity, and that they need parental consent forms and insurance checks for these. As a result, children and young people are being denied frequently the opportunity to participate in outdoors activities (Milligan and Stevens 2006).

Missing opportunities to carry out activities due to measures implemented with the aim of keeping them safe is in fact detrimental for the development of children and young people in residential care. As Lindon (2011) point out, with a risk management approach is 'very easy to lose sight of the potential benefits to children' (p.3) that the participation in activities provides them with. Milligan and Stevens (2006) go a step beyond and argue that actually, restricting or denying the opportunities for children and young people in care to experience everyday and ordinary activities may be denying them of some of their human rights.

The benefits of having the opportunity to experience certain activities which involve some degree of risk are frequently plenty. As Milligan (2011) points out, these activities have a crucial importance for the physical and emotional development of the children and young people. Some of the benefits of these experiences have been identified by Milligan and Stevens (2006) and include

the opportunity to build relationships between staff and residents, enjoyment and achievement of competence and expertise that leads to better self-esteem, self-efficacy, self-concept and a pro-social identity, and for a productive development, amongst others.

Furthermore, preventing children and young people from participating in activities involving some risks does not only prevent them from obtaining the benefits of engaging in these activities but also from the opportunity to learn to manage risk by themselves (SCCYP 2010). As Milligan and Stevens (2006) argue, there are dangers when taking an excessively cautious approach in risk management since it reduces the opportunity of learning to manage risk, which 'contributes to healthy physical, psychological and social development, as well as providing opportunities for learning and enjoyment' (SCCYP 2010, p.1). As Rees (2007 cited in McGuinness et al. 2007, p, 13) argues, 'unless children and young people are exposed to risk, they will not be able to develop practical mechanisms for managing risk', and therefore it should be a responsibility of residential care workers to provide children and young people with opportunities to learn how to deal with dangers rather than trying to remove these in advance (Milligan 2011). Thus, providing a safe environment for children and young people should not affect their daily lives by removing interesting experiences from them (Lindon 2011) and a right balance between risk and learning needs to be achieved so risk aversion does not prevent them from the opportunity to learn (Rees 2007 cited in Milligan and Stevens 2006).

Suggestions have been made to improve the situation regarding risk management in the UK. Munro (2011) suggests that the residential care system should be made less 'risk-averse' and more 'risk sensible' and authors like Eichsteller and Holthoff (2009) suggest that the notion of 'risk competence' would be more appropriate than 'risk assessment' in a residential care environment. Another suggestion made by McGuinness et al. (2007) is that 'residential units should have 'user-friendly' risk assessments which are informed by the right to a normal life and which allow children and young people to be exposed to the normal and reasonable risks associated with growing up' (p. 9). Meanwhile, Munro (2010) additionally argues that the focus should not only be on observing if residential care workers implement the procedures and

rules established, but also on learning whether implementing these they are actually serving the best interests of the children or not. These proposals would introduce a new approach that would locate the management of risk within 'a wider frame of the developing child and their rights to learn and participate' (Milligan 2011, p. 211).

In this current situation, social pedagogy has emerged as a possibility that would help bring such desired change in the approach to risk in residential care, since Social pedagogy is based in a holistic approach that is concerned not only with the child but also with relationships and the world they are part of (Smith 2019). As Milligan (2011) points out, social pedagogy provides residential care workers with a framework to justify the development of activities which might involve a certain degree of risk in terms of benefits to the child. The evidence available 'indicates that workers who receive in-service training in the principles of social pedagogy can operate more confidently, and are more willing to undertake activities that they have previously been inhibited from doing' (Milligan 2011, p. 212)

2.1.4. Criticisms to Social Pedagogy

The emergence of Social Pedagogy as an alternative approach to residential care in the UK has raised a lot of interest in the field but not everyone shares the idea that the implementation of this approach can be beneficial or suitable for the current residential care system.

One of the voices who have argued against adopting a Social Pedagogic approach has been Sir Martin Narey, who in his report about residential care in England, indicates that 'I (he) do not believe that social pedagogy is a panacea' (Narey 2016, p.67). Narey points out in this report that what he has learned about Social Pedagogy does not involve a radically different approach and looks like what he would consider a good residential social work in England.

Along the same lines, Smith (2013) highlights that 'the understanding of the complexity and open-ended nature of bringing up children is not confined to social pedagogic traditions but already has a place in much child and youth care thinking' (p. 10) and Kirkwood et al. (2019) raise the question of whether 'perhaps "good" social work might look a lot like social pedagogy?' (p. 6). Kirkwood et al. (2019) point out that social workers who include in their residential care work practice aspects such as reflection, application of theory and good communication skills, and who are engaged personally with their clients appreciating their inherent good are already embracing the main notions of Social Pedagogy. Their evaluation of Social Pedagogy highlights that it has be found that 'staff said they gained a language for describing practices they already used, and said they learned about theory to underpin their practices, without their practices changing' (p. 7). A similar finding, they note, had been observed in previous evaluations regarding Social Pedagogy in the UK (e.g. Cameron, 2016; Roesch-Marsh et al., 2015; Vrouwenfelder et al., 2012).

However, not all evaluations share this view. For example, in the evaluation of social pedagogy pilot programme Cameron et al. (2011) carried out, they acknowledge an awareness of critics that indicate that social pedagogy is very similar to current good residential care practice but argue that the learning from their pilot programme suggests that it is not the case. They point out that the conclusion reached after their pilot programme is that 'the distinctive contribution of social pedagogy in drawing together and making meaningful the values, methods and concepts which could support successful residential care is also apparent.' (p. 77). Along the same lines, Milligan (2011) argues that:

> *'The introduction of social pedagogy into residential child care in the UK should not be viewed as any kind of 'magic wand', nor indeed is the practice it generates completely new. It does, however, bring a largely new philosophical and theoretical framework or orientation to direct care practice with children and young people* '(p.212).

Thus, the implementation of Social Pedagogy from these authors' perspective would not bring a new practice, but this would arguably provide a theoretical

framework and would help practitioners make sense of many of the aspects already present in their practice.

There are other difficulties which have been identified in relation to the implementation of a social pedagogic approach in the current residential care in the UK. Another finding of Cameron et al. (2011)'s evaluation of their pilot programme cited above was that in some cases 'working to improve de life-space was not easy. Some [social pedagogues] found that the culture of the home worked so much against this that it was hard to make any substantial change' (p. 43). In addition, they found that 'there are competing policy priorities around educational performance and criminal justice, for example, that may not coincide with social pedagogic approaches' (Cameron et al., 2011, p. 74). Although the authors acknowledge those difficulties, they warn against considering that the social pedagogic approach could never work in England.

Kirkwood et al. (2019) argue that previous evaluations on Social Pedagogy show that certain aspects of the current context of the UK might affect the possibilities for practitioners to implement a social pedagogic approach. In particular they point out that some of the barriers are 'negative attitudes towards social pedagogy; requiring social pedagogues to practise in line with existing policies and procedures; organisational problems, such as a lack of residents or funding; and risk averse policies and procedures' (p. 7).

Another note of caution about Social pedagogy which has been highlighted is that, although this is generally regarded generally as a practice which can lead to positive social change, it is necessary to address that, due to its educative nature, it can be a double-edged sword. As Lorenz (1994) points out, social pedagogy can be used as an emancipatory practice directed towards a positive transformation of society but also as a way of imposing certain values and social control over the population. A perfect example of the latter can be found in the inter-war period in Germany where social pedagogy was used to impose the Nazi nationalist ideology to the population and in particularly to the young generations (Lorenz 2008). Thus, as Smith (2019) puts it, social pedagogy is a practice which needs to be taken special care with because 'when social

pedagogy becomes detached from democratic pluralism it can quickly deteriorate' into something 'pernicious'.

2.2. Residential care for children in the UK

In recent decades, residential care in Western European countries has been the subject of criticism and debate around its purpose and suitability for children in care. This has led to the implementation of considerable changes affecting not only how it is carried out in practice but also the whole conception of residential care and its purpose. An overview of its historical development in the UK in recent decades and its main characteristics nowadays can help to understand the situation in which social pedagogy has emerged as an alternative approach for residential care in this country.

2.2.1. Historical perspective of residential child care in the UK

Changes in size

Already in the years following the Second World War, criticism was raised regarding how badly orphans were cared for in residential institutions in the UK (Holman 2013). The Curtis Committee in England and Wales (Care of Children Committee 1946) and the Clyde Committee in Scotland (Committee on Homeless Children 1946) published reports which recommended major changes in this area, which were taken into consideration facing the Children Act in 1948 (Milligan and Stevens 2006). One important change recommended by these Committees was the development of less institutional care homes in favour of smaller, family like homes, in order to avoid institutionalization (Milligan and Stevens 2006). This led in the following decades and up to the present times to a shift away from large-scale institutions for children in care towards small residential units and foster care (Tolfree 1995, Kendrick et al. 2011, Fernández del Valle and Smith 2015). The effect of such change is visible

nowadays, when the average places per children's home in the UK are four (Narey 2016).

This shift matches the tendency of the rest of the countries in Europe, which is reflected in the EU and UNICEF's efforts to support programmes to move services from big institutions to smaller homes (Ainsworth and Thoburn 2014). The idea that a better residential care can be provided by smaller family-based units has also been included in the Guidelines for the Alternative Care of Children adopted by the United Nations in 2009, which states that these 'promote appropriate relationships between children and carers, taking into account the importance of attachment and supporting relationships with specific carers to children's well-being' (Kendrick 2015, p. 534).

The shift towards fostering

The decades following the implementation of the Children Act 1948 saw changes happening at a slow but firm pace (Milligan and Stevens 2006). Residential care numbers reached their peak during the 70´s, when around 40,000 looked after children lived in residential care homes, this was 40% of all looked after children at the time (Narey 2016). However these figures decreased drastically in the following two decades.

During the 80's, as the idea that foster care was a better option for looked after children than residential care took hold, the balance between residential care and foster care 'shifted dramatically' (Kendrick 2008, p. 9). Since the 80s and during the following decades the notion that 'every child should have a family placement' developed strongly (Milligan and Stevens 2006, p. 8) and foster care was claimed to be in a much better position to offer this than residential care settings.

This ideological perspective, alongside with the reduced costs that foster care offered compared to residential care (Bebbington and Miles 1989) meant that the numbers of children in residential care and of residential care settings fell considerably in favour of foster care alternatives. Thus, in England and Wales the number of children in residential care fell from 60,000 in 1970 to 13,000 in 1990 (Bullock et al. 1993) and to less than 10,000 in 2000 (Department of

Health 2001b) with only 12% of looked after children in England being placed in a residential care provision in 2019 (Department for Education 2019). Meanwhile the number of residential settings in England decreased from over 25,000 in 1981 to less than 2,000 in 2000 (Kendrick 2012, p. 288).

Negative view of Residential Care (RC)

The 80`s onwards not only saw a decrease on the use of residential care provisions for practical reasons but also in relation to the development of negative views and the notion that it should only be used as a last resort for looked after children, for those cases in which other caring alternatives were not feasible.

Several reasons were behind this notion, including that foster care had grown as an alternative, costs were high, and there were growing concerns and criticisms about RC's standards of care (Sellick 1998) which contributed to see residential care as an option

The negative view of RC increased during the following decades compounded by the emergence of several major scandals of physical and sexual abuse in residential settings during the late 80`s and 90`s in England, which prompted the commission of several reports and reviews aiming for an improvement of residential care (for example NISW 1988, Kahan and Levy 1991, Utting 1991, Skinner 1992, Warner 1992, Kirkwood 1993). These reports and reviews were followed by substantial modifications of residential care provisions for children (Fernández del Valle and Fuertes 2000). As Milligan and Stevens (2006) point out, 'the emergence of these scandals contributed to the poor light in which residential care generally was held' in the UK (p.10).

Internationally, the notion that residential care was to be used only as a last resort materialised in the Stockholm Declaration on Children and Residential Care (2003) in which a large number of academics and experts in the field, from a particular anti-institutional perspective, gathered and raised fierce criticism towards residential care. In this declaration, it was claimed that there was 'indisputable evidence that institutional care has negative consequences for

both individual and for society at large' (p.1) and governments were urged to invest their funds and efforts in alternative care services.

Current view and debate around residential care

Facing the expansion of a negative view of residential care and the strong arguments of the Stockholm Declaration on Children and Residential care against its use, many academics have raised their voice and presented evidence in its defence in the last decades. This disagreement has resulted in an on-going and extensive debate about the use of residential care amongst international practitioners, policy makers and researchers (Little et al. 2005). For example, Anglin and Knorth (2004) pointed out that a previous Malmö Declaration (1990) had found that residential care can be positive and the preferred option for young people at certain points in their lives. Meanwhile, Kendrick et al. (2011) claimed that 'it is important to refute the claims of the Stockholm Declaration which imposes such a negative perspective on the role of residential child care' (p. 13). They argued that an anti-residential care bias had developed which was affecting the development of policy and practice.

An analysis of this debate by Knorth et al. (2008) noticed a shift away from the notion that Residential Care has to be used only as a last resort. However criticisms of residential Care continue to be common and include arguments that it fails to respond to children's needs (Tolfree 1995), delivers poor outcomes (Stevens 2010) or causes that a big number of looked after young people are 'facing disproportionate disadvantage and problems before, during and after being in care' (Cameron and Moss 2011, p.26). From a similar perspective Kendrick (2015) argues that:

> *"There is an urgent need to improve standards in Residential Child Care in order to provide high-quality care which will provide a positive an enriching experience for children and young people'* (p. 534)

Meanwhile, there are counterarguments which warn against the perception that the UK residential care system is somehow failing children. For example, Forrester (2008) argues that reasons behind this perception can include

ignorance of research and care system, an interest in cutting costs and the stigmatisation of the service, while Garrett (2008) points out that it can be understood as part of a neoliberal ideological project to provide a rationale for privatisation.

Recent research data has also contributed to keep this debate alive. On the one hand, Narey (2016) has acknowledged that children in care homes are treated well and Forrester (2008) has claimed that research showed that children generally do better after spending time in residential care. In the same vein, Kendrick (2008) argues that positive research has been often overshadowed by scandals, and voices of children reflecting positively on their experiences have not been heard. On the other hand, it has been claimed that such research is based in short-term outcomes which are not clear that can be attributed to the effect of residential care placement while there is a lack of long term effects research, and there are other studies which have yielded opposite findings (Little et al. 2005).

2.2.2. Characteristics of current residential care system in the UK

Differences among the four UK nations

Residential care in the UK does not have a united system across the country, but it presents differences and particularities across the four nations. The NSPCC (2021) indicates that each UK nation has a slightly different definition of a looked after child and follows its own legislation, policy and guidance in relation to the field. Each nation has a different primary legislation regarding children that regulates the responsibility for taking care of vulnerable children. Currently England and Wales follow The Children Act 1989, Scotland The Children (Scotland) Act 1995 and Northern Ireland The Children (Northern Ireland) Order 1995 (Milligan and Stevens 2006). In the field of residential childcare in particular, the four nations have created their own centres for excellence to promote positive practice in residential care. For example, in

Scotland this the Scottish Institute for Residential Child Care and in England this is the National Centre for Excellence in Residential Child Care (Kendrick 2008). Each nation has established their own National Care Standards and the agencies that inspect care homes to assess whether these are followed, providing the care homes with ratings according to their findings (Care Inspectorate in Scotland, Ofsted in England, Care Inspectorate in Wales, Regulation and Quality Improvement Authority in Northern Ireland).

The differing legislation and policies existing in each of the nations allow for particularities in the residential care systems. This means that their approaches and use of resources vary from nation to nation. For example, as Barclay and Hunter (2009) point out, in Scotland secure children's homes are 'quite different from locked provision for children in other parts of the UK, one of the key differences being that is wholly located within residential child care provision and that a high proportion of young people are admitted primarily on welfare grounds' (169-170). Another example can be found in Narey's (2016) review which highlights that in Scotland the intention is to have graduated staff in children's homes, although Narey controversially urges the government in England not to do it based, he argues, in the findings of his report.

The differences in legislation and policy have a noticeable impact on the nations' residential care systems. For example, the NSPCC (2021) notes that in Scotland it exists a children under a supervision order that allows looked after children to remain at home while having regular contact with social services. While in the other 3 nations the number of children in care have been increasing in the last decade, in Scotland the number reached its peak in 2012 and has decreased since (NSPCC 2021). Thus, although they all share the common aim of providing care to vulnerable children, their particularities lead to a differentiated 'personality' of the residential care systems of each of the nations of the UK.

The variety of current residential care homes

The residential care homes currently existing in the UK are very varied in their nature and organisation. As Milligan and Stevens (2006) point out, although the main purpose of residential care homes continues to be the same as always (providing safety, food, nurture and discipline) this is a field that has evolved and is still evolving. Thus, trying to categorize the large variety of children's residential care provisions in the UK is an arduous task. The variety of institutions providing residential care and their particularities make it difficult to make comparisons between them since the systems and style of homes are not standardised (Bullock et al., 2006). Bullock et al., (2006) noted that several attempts have been made to classify residential care homes for children so the aims, structures and effects of particular types of establishments can be better understood. However, these authors claim, the possibilities for such classification are plenty, depending on the criteria used, and placing a residential place into a comparable category is problematic.

Despite of the difficulties in categorising residential care homes, simplifications are made so a general idea of what is available can be obtained. Thus, as Milligan and Stevens (2006) indicate, the Scottish Institute for Residential Child Care holds a database for residential units in Scotland and uses 14 categories to classify them, 'ranging from 'mainstream' children's homes, to residential schools, to specialist disability services, to secure units' (p. 9). Meanwhile, Ofsted, the agency inspecting the standards of residential homes for children in England, classify these in 4 general categories:

- Children's homes.
- Secure children's homes.
- Residential special schools registered as children's homes.
- Short-break-only children's homes. (Ofsted 2021).

<u>Children's homes</u>

Children's homes are the residential care provisions that accommodate the large number of children in residential care by far. For example, in England

there are 9,699 registered places in children's homes , 234 in secure children's homes, 1,793 in residential special schools and 1,009 in short-break children's homes (Ofsted 2021).

Nowadays, most children's residential care homes are part of the private sector so they are own and managed by private companies with their own values and commercial agendas, while a smaller proportion are run by local authorities and the voluntary sector. This can be observed in Narey's report, which indicates that in England most of these homes are run by private organisations (80%) while some are run by local authorities (14%) and a small number of them by the voluntary sector (5%) (Narey 2016). Given that most of these homes are run by private organisations, each one has their own philosophy, ethos and style of delivering care so this category includes organisations and residential care providers with a large range of styles and ways of delivering their services. For example, in this category fall the therapeutic communities under the care system, which have their roots in the therapeutic communities movement and believe that behaviour 'is a form of communication and that therefore it should be open to systematic enquiry and reflection by the entire community including, where possible, the young people.' (Davidson et. al, 2009, p. 14).

This variety is highlighted by Bullock et. al (2006) who identify 8 models of residential work with children: procedural approaches, psycho-social theory based care homes (which include the previously mentioned therapeutic communities), systemic approaches, care homes based in the use of groups and groupings, those with a focus on family inclusion, residential care homes meeting socio-political concerns, homes ensuring a positive role in welfare systems and finally homes ensuring ethical standards. These are all approaches which coexist in this category and offer very varied services within residential care.

Secure children's homes

These residential homes serve for 'young people deemed to require containment and fitting readily within no other setting' (Barclay and Hunter 2008, p.166) and they are usually temporary accommodations aiming 'to take chaos out of a child's life and to keep them safe' (Narey 2016). As Barclay and

Hunter (2008) point out, the young people who reside in these homes fit into two categories: on the one hand those who need a secure environment for their own safety (traditionally seen as in need of care) and on the other hand those requiring control or reform (usually young offenders). However, as these authors highlight, the distinction between these two are blurred since young offenders can be seen as victims of an inadequate care in their infancy and share needs and characteristics with those seen as in need of care.

According to Bullock et al. (2006), 3 types of secure homes can be found, accommodating children of different ages: 1) Secure training centres run by private operators, serving young offenders up to the age of 17; 2) Young offender institutions run by prison service and accommodating 15 to 21 year olds; 3) Local authority secure children's homes run by local authorities for younger offenders aged 12 to 14, except for girls and vulnerable boys who are up to 16 years old.

Residential special schools registered as children's homes

These schools combine both education and accommodation for children in care and, as Narey (2016) observe, these are mainly ran by private companies and voluntary sector organisations. 'Special schools provide education for children and young people with complex learning needs that are unable to be fully met within a mainstream school setting' (Pellicano et. al, 2014, p. 10) and many of these are registered as children's homes since their pupils reside there up to 52 weeks per year. As Pilling et al. (2007) point out, these children used to be placed in long-stay at hospital but are now cared for at home where sometimes the support is not enough to provide a good quality care, leading to an increase in their inclusion into the care system.

Short-break-only children's homes.

Some of the short-break services available include residential care homes for temporary stay. 'Most users of short breaks are disabled children and their families but non-disabled children in need may also receive short breaks' (DCSF 2010, p. 7) and some of them become during this short stay Looked

After Children under the Children Act 1989, and therefore can be considered children in care. These services are of varied nature and usually are conceived to offer a respite to carers of children with severe and complex needs.

The profile of children in residential care

The residential care homes accommodate children for various reasons. In some cases parents agree voluntarily to have their children in care given different circumstances whereas in other cases this is due to the intervention of children services in response to a significant risk for the child, abuse or neglect in their care. A last case is that of unaccompanied asylum seekers under the age of 18 (NSPCC 2021b).

Residential care homes deal with the most damaged and vulnerable children and young people (Berridge and Brodie (1998). As Milligan and Stevens (2006) point out, they enter residential care having experienced severe problems, and usually to be prepared for foster care or as a result of a fostering breakdown, so it is a service 'needed for some of the most troubled and troublesome' (p.13). Furthermore, their negative life experiences have an impact in a wide range of outcomes since 'early exposure to adversity, such as abuse or neglect, is associated with poorer outcomes across social, education and health domains' (Mc Grath-Lone et. al 2016, p.716). Therefore, the children in care accommodated in residential care homes present very particular and complex needs.

In terms of social outcomes, children in residential care often present challenging, disturbed and disruptive behaviours (Heron and Chakrabati 2003). Their relationships in their environment with family and friends, and with people in positions of authority have usually been difficult or limited (Milligan and Stevens 2006) and this affects how they interact with staff and peers in their residential placements. Narey (2016) highlights that 74% of children in residential care in England had displayed violent or aggressive behaviours in the last 6 months in a study carried out in 2013. These behaviours are usually developed before entering care and can be explained by the amount of risk factors they have experienced such as conflict within their families, poor

supervision of their activities, attachment problems and poverty, among others (Hayden 2010). In many cases they have committed offences previous to their entry into the residential care system (Shaw 2012), and frequently their behaviour worsens in relation to the fact that they are moved from their previous environment into a new place with new people they do not know previously, meaning that they are often 'confused, angry or sad' (Hayden 2010, p.463).

Regarding health outcomes, children in residential care present poor outcomes compared to the general population. 'The factors which wider research has shown to be associated with poorer health outcomes in the general population are over-represented in the original family and environment of a significant number of children who enter local authority care' (Scott et al. 2009, p. 35). Behaviours affecting the health of the children in residential care such as smoking, drinking or drug taking are frequently observed (Mc Grath-Lone et. al 2016) and, although these take place in all caring environments, they are more likely to be present in children in residential settings (Scott et al. 2009).

In terms of mental health, a high proportion of children in residential care experience mental health problems (Davidson et. al 2009). They present a higher degree of issues compared with the general population, since in the UK 45% of children in care aged 5-17 present mental health disorders compared to 10% of the general population (NSPCC 2021). This has been explained by the fact that many of them have experienced severe adverse life events prior to entering care and also by the fact that the experience of care itself may pose a further risk for these issues to develop (Beinum 2009).

The educational outcomes of children in residential are also poorer compared to the general population. According to Schofield et al. (2017, p.783) 'low educational attainment is a particular issue' for them. Their social backgrounds, pre-care school experiences, placement instability, the expectations and views of professionals, poor educational support in residential care homes and problems related to corporate parenting and ineffective communication have all been noted as factors influencing this situation (Francis 2009). In relation to these, an important number of children in care are not attending school because

of reasons such as suspension, exclusion or difficulties accessing a place into a new school, according to several studies (Bullock and McSherry 2009).

Statistics show some of the personal characteristics, such as gender, race or special education needs presented by children in care in current times. The NCPCC (2021) indicates that:

- The percentage of male children in residential care (ranging from 53% to 56% in the different nations) is higher than the female counterparts'.
- Children with asian and white backgrounds are underrepresented in residential care while children with black and mixed backgrounds represent a higher percentage than in the general population.
- The percentage of children in residential care presenting special educations needs is much higher than in the general population. While the latter is around or below 5%, around a quarter of children in residential care present these needs.

2.3. The development and conceptualisation of social pedagogy in Spain

As it has occurred in other continental European countries, social pedagogy in Spain has developed as a discipline on its own, broadly know as social education (*educación social*) and differentiated from social work. It counts on its own dedicated research, professional qualification, regulatory bodies and codes of practice. Hence, Spain has a 'well-developed tradition of social education' (Smith and Monteux 2019, p. 5) and it can be considered a good national case example of the implementation and development of this discipline. The following paragraphs provide a brief overview of the Spanish tradition in social pedagogy.

2.3.1. Historical development of social pedagogy in Spain

The first publications related to social pedagogy in Spain date back to the last decades of the 19th century (Torio López 2006), and the term social pedagogy

was first used in a 1902 publication (Mínguez Álvarez 2000, cited in Torio López 2006, p. 40). During the first third of the 20th Century, a flourishing of these publications took place, highly influenced by the imported work from Germany of thinkers such as Pestalozzi, Fröebel or Herbart (Torio López 2006).

The development of social pedagogy in Germany influenced the emergence of the figure of the specialized social educator in Spain (Quintana Cabanas 1994). As it had previously occurred in Germany, this figure emerged in the 1940´s as a response to the population needs linked to wartime (notably the Spanish Civil War, 1936-1939, which resulted in the establishment of the far right francoist dictatorship, 1939-1975) and the economic crisis that was affecting many European countries including Spain. According to Quintana Cabanas (1997) Spain imported from Germany social pedagogy understood as a way of doing social work, with a clear aim to help those who were badly affected by the socio-economic situation at the time. The emergence of the new figure of a specialized social educator favoured the development of social pedagogy as a scientific discipline in the country.

As Nuñez and Planas (1997) point out, every professional activity requires a discipline from which theories and models are built, and it did not take long for the discipline of social pedagogy to start taking shape in different universities across Spain. The pioneer universities which developed social pedagogy as a discipline were Madrid and Barcelona's in the early 1950's (Pérez Serrano 2004). At that point in time several theoretical models started to be developed and taught, as some university degrees related to social sciences introduced modules based on social pedagogy.

The 1960´s and 70´s were periods of political and social unrest for the Spanish society. Influenced by the migration from the countryside to industrialised cities and abroad, a considerable part of the population was suffering social maladjustment, marginalisation and exclusion (Chamseddine Habib Allah 2013). This precarious social situation was a breeding ground for the expansion of social education, understood as a pedagogic professional activity based on the scientific discipline of social pedagogy (Nuñez and Planas 1997), particularly during the years after the end of the Franco's dictatorship in 1975

(López Noguero 2005). This was favoured by the establishment of democracy, the development of the welfare state, and the increase of a sense of responsibility in society towards social problems (Petrus Rotger 1997).

The boost of social education in the late 70´s and early 80´s had a positive impact on the flourishing of social pedagogy in Spain in the following decades. Examples that illustrate this are the creation of a journal in social pedagogy (named Pedagogia Social: Revista Interuniversitaria) in 1986 (Torio López 2006, p.47), the emergence of regional professional associations for social pedagogues in the early 90´s (Pérez Serrano 2004, p.164) and the establishment of social education as a university degree leading to a professional qualification in 1991 (Quintana Cabanas 1997). This situation allowed social educators' role to consolidate as part of inter-professional teams in the state social services and for social educators to develop their work in private sector initiatives and charities during the following decades.

In recent years, the impact of the economic crisis in Spain has affected many practical initiatives and has constrained some of the opportunities for social educators to carry out their work. As Muižnieks (2013) points out, the considerable cuts in social services' budgets from 2012 have had unfavourable effects on the availability, accessibility and quality of these services. These cuts have led to the closure of some of the services and to a reduction in the number of professionals working in these.

2.3.2. The conceptualisation of social pedagogy in Spain

The strong influence of German thinkers' ideas about social pedagogy, in particular Natorp´s work (Quintana Cabanas 1994), makes it easy to find similarities between the current Spanish notion of social pedagogy and its German counterpart. However, as Hämäläinen (2003) points out, different countries, particularly in Europe, have developed their specific tradition in social pedagogy. Thus, the long tradition of social pedagogy explained earlier in this chapter, both at theoretical and practical levels, has allowed the development of a particular Spanish conceptualisation of social pedagogy.

As a social science, social pedagogy has a theoretical-practical nature (Garrido Arroyo 2009; Petrus Rotger 1997). Its practice emerged as a response to social needs and its theory is created through reflection and applied research (Garrido Arroyo 2009). Therefore, social pedagogy is configured through the relations and constant connection between theory and practice (Pérez Serrano 2004). The complexity of the relations between the theories and social and educative practices which shape social pedagogy means that its conceptualisation is not an easy task (Sáez Carreras 1997). This resulted in a process of continuous reconceptualization of social pedagogy´s meaning since the concept emerged at the beginning of last century, until some common understanding of social pedagogy main characteristics was reached. However, such shared understanding at a given point in time should not be considered as a definitive understanding but as part of this continuous process.

Quintana Cabanas (1994, p. 25, my own translation) for instance, have defined social pedagogy as 'the science of the social education of individuals and groups, and of the attention to the socio-human problems which can be treated with educative interventions'. This definition highlights one of the main characteristics of social pedagogy as a science which is that it has two different subjects of study: the pedagogy of socialisation and the pedagogy of social 'maladjustment'.

The pedagogy of socialisation (or normalised pedagogy) is based on educative initiatives directed towards the general population, aiming to help people to develop behaviours which favour social harmony (Quintana Cabanas 1997). Meanwhile, social pedagogy facing social maladjustment (or specialised pedagogy) refers to the 'educative alternatives in situations of specific social problems' (López Noguero 2005, p. 62, my own translation). It seeks the re-adaptation of individuals in a specific situation of social maladjustment which can include people who are marginalised, isolated or dependent older people, drug abusers, offenders or people experiences problems related to migration, amongst others (Garrido Arroyo 2009).

2.3.3. Some characteristics of Specialised social pedagogy

The social education of children and young people in residential settings is part of specialised social pedagogy. In fact, as López Noguero (2005) points out, the first experiences of specialised social pedagogy in Spain were in the field of the attention to children and young people in need.

The aim of specialised social pedagogy with children and young people is to help to solve, through educative strategies, problems derived from a social maladjustment. The focus in on the social difficulties and conflicts experienced by the children and young people, rather than on problems of psychological or psychiatric nature (López Noguero 2005).

The areas or contexts where specialised social educators carry out their jobs vary depending on the particular situation of the individual they work with. These can be divided into open spaces, non-specific institutions (families, schools, etc.) and other institutions which are created specifically for an educative intervention (López Noguero 2005). Residential care homes are part of the later area since these are created for a particular educative intervention with children and young people, and, as Grietens (2014) points out, these are 'one of the major fields of practice that social pedagogues are involved in.' (p.288)

Social pedagogy´s educative interventions can be divided according to their aims into preventive interventions (to avoid future problems) and re-educative interventions (to deal with problems which are already there). Both of these interventions do not only focus on the individual person and their characteristics but also on their context and social situation (López Noguero 2005).

2.4. Residential Child Care in Spain

As previously done in this chapter with residential care in the UK, this section provides an overview of the historical development of residential care in Spain and its current situation in order to allow an understanding on their similarities

and differences. This understanding provides the opportunity to contextualise the findings of this research so I have considered including it as part of this literature review.

2.4.1. Historical view

Residential institutions for children have existed in Spain since the Middle Ages, when hospitals and hospices, usually based around monasteries, took care of abandoned children amongst other people in need. Meanwhile, the first homes which took care of children specifically can be traced back to the 14th century (Fernández del Valle and Fuertes Zurita 1996, Cifuentes et al. 2002). During the 19th century these institutions flourished and increased considerably their number (Fernández del Valle and Fuertes Zurita 2000, Cifuentes et al. 2002). This was influenced by developments such as the increase in the number of people living in cities following the industrial revolution (Domingo 2003). These institutions were mostly of charitable nature and run by religious orders (Domingo 2003, Fernández Millán et al. 2011, Fernández del Valle et al. 2013).

At the beginning of the 20th century the Spanish 'Law for Child Protection' was enacted, under which residential institutions commenced to become the responsibility of the state (Fernández Millán et al. 2011). Many residential institutions however continued to belong to religious orders although under supervision of the state which was responsible for their right functioning according to the newly created law.

While halfway into the 20th century residential care institutions along Europe were experiencing major changes towards a reduced institutionalisation, in Spain the effects of the civil war and the subsequent dictatorship delayed those changes (Bravo and Fernández del Valle 2001, Fernández del Valle et al. 2013). Moreover, changes took place, including a handing over of secular residential care homes to religious orders (Cifuentes et al. 2002) or the return to charitable practices (Fernández del Valle et al. 2013), that meant an involution of the progress experienced after the introduction of the Law for Child Protection of 1904.

Changes during the 1980s and 90s

An important reform occurred in Spain after the end of the dictatorship and the development of a new constitutional state which had a major impact on the whole system of social services and specifically children services including residential care. Alongside the introduction of the Spanish welfare state, a new system for residential care was developed. Responsibility for this was handed over from the central State to the Spanish autonomous regions which started to draft their own child protection legislation (Fernández del Valle et al. 2013).

One of the major changes introduced was related to the pursue of a normalised life for children in care, hoping to provide them with a place and 'living conditions as close as possible to those of the majority of children their age' (Cifuentes et al 2002, p. 31, my own translation). Such change was prompted, like in many other European countries, by the knowledge developed about the allegedly negative effects institutionalisation has on children at emotional, socio-psychological and behavioural levels (Delgado et al. 2012). Thus the priority was to create new residential homes with an environment as similar as the homes of the majority of children in society and with everyday dynamics of interpersonal relationships as close as possible to those experiences by other children at their age (Casas 1988). The result was a shift away from large institutions in which children were raised without contact with the rest of the society to smaller units aiming to integrate them into their communities by the use of the community services (Fernández Millán et al. 2011).

Another major change brought about by the 80s reform was the professionalisation and secularising of the services. The workforce at residential care homes had historically being formed by religious people (monks, priests, nuns…), volunteers and some professional social workers and teachers. The reform made room for the creation of a new professional figure specialised in working with children and people in need which led to the creation of a 3-year university degree on social Education in 1994 (Casas and Fernández del Valle 2002). Psychologists and pedagogues were also included as part of the staff in residential homes and the development of programmes and individual projects of intervention with children in care (Fernández Millán et al. 2011).

2.4.2. Spanish residential child care system

The current residential care system in Spain is part of a wider child protection system which has similitudes with its British counterpart as it can be observed in the following diagram showing the most significant pathways in Spanish child protection.

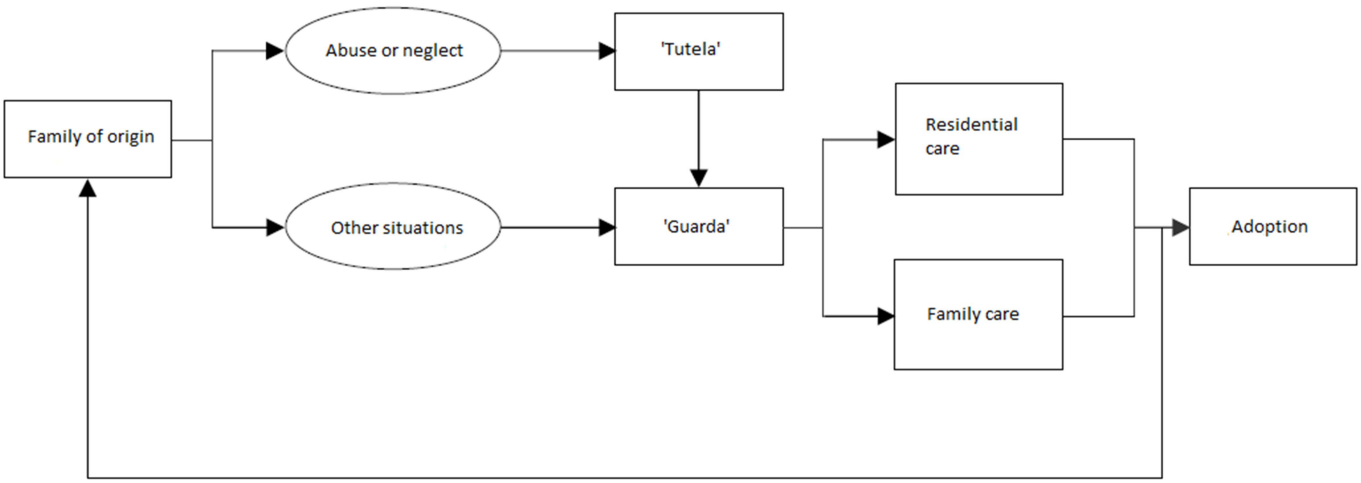


Figure 1. Spanish child protection system *(*Obervatorio de la Infancia (2011, p. 3 my own translation)

In cases where a child is suffering abuse or neglect, the state assumes the guardianship 'tutela' of the child which means that it takes over the parental responsibilities from their family of origin and looks after him or her. In other situations where the family of origin cannot, for any reason, provide adequate care and meet the basic needs of a child at a particular time, the state assumes a temporary custody or 'guarda' to guarantee the satisfaction of their needs but the parents maintain the parental responsibilities. In both situations, 'tutela' and 'guarda', the child is placed into care, either family care (with other relatives or foster parents) or residential childcare. Following these placements, underage children can return to the family or, if the return to the family of origin will not possible, they can be considered for adoption.

According to the latest data, (Observatorio de la Infancia 2020) in 2020 the number of looked after children in Spain was 38,465 including 31.237 'tutelas'

and 7.228 ‘guardas’. Out of this number of looked after children, 21.283 are placed in residential care services and the rest in family care. This means that around 55% of currently looked after children are in residential accommodation in Spain. Compared with the UK’s, this percentage is very high as it can be observed in the following table:

Table 1. Number and percentage of children in residential care in the UK and Spain

	Total of Looked After Children	**Looked After Children in residential care**	
		Total	**Percentage**
Spain	38.465	21.283	55.3 %
Scotland	14,736	1,518	10.3 %
England	78,150	9,500	12 %
Wales	6,845	470	6.9 %
Northern Ireland	2,638	149	5.6 %

Sources: Observatorio de la Infancia (2020), Scottish Government (2020), Statwales (2020), Department for Education (2019), Department of Health (2020)

While in the UK the percentage of looked after children placed in residential accommodation is under or just over 10 % in each of the four nations, in Spain more than one in every two looked after children are placed in residential care services. Bravo and Del Valle (2009) claim that there are two main reasons for this high percentage. On the one hand, they argue, the complexity of the needs of the currently looked after children requires a specialised attention which can only be provided by specialised residential services, and on the other hand,

there is a lack of families able to foster children, reducing the possibilities of alternatives to residential care.

Residential child care regulation in Spain

Residential child care in Spain, as well as all other services for child protection, is underpinned by the current child protection law 'Ley Orgánica de Protección Jurídica del Menor'. This dictates on the one hand the rights of the child and on the other hand the interventions that public services must carry out in order to provide child protection (BOE 1996). However this law only indicates the main principles that all child protection services must follow and not the specific regulation for each of these services. Instead these services are regulated by the government bodies of each region as I explain next.

Spain is divided into 17 'autonomous regions' (in Spanish 'comunidades autónomas') which have their own elected regional governments. These governments have the authority to regulate public services such as education, health, social and child protection services (including residential childcare), in order to adapt these to the particularities and needs of their region's population. Thus, for residential child care provisions each regional governing body dictates their own regulatory decree which establishes requirements in terms of aspects such as management and administration, service implementation, evaluation of outcomes and service staff among others. Although in 2012 minimum standards for residential childcare were created (Del Valle et al. 2012) these only act as guidance for the governments of each of the regions to develop their own regulations.

The fact that the regulation of residential childcare services is the competency of each regional governing body means it is not possible to refer to a general Spanish regulation for these services. Instead, as many different regulations as regions are in Spain can be found and their requirements for the services might be different in each of the regions. Therefore, it can be argued that in Spain there is still not such a thing as a standard practice for residential care (Casas and Fernández del Valle 2002). For instance, the requirements in terms of qualifications for educators working in residential care homes might differ from

one region to another. Hence, analysing these requirements in three regions of Spain, it can be observed that there are significant differences; while in the region of Andalucía 'there will be a tendency for educators having a degree in social or educational sciences, and preferably will hold a qualification in social pedagogy' (BOJA 2003, p. 26776, my own translation), in the region of Galicia the only requirement for educators is 'to be adequate for the characteristics of the services users and the activities they will carry out' (DOG 2005, p. 14272, my own translation) and in the region of Castilla y León there is no other requirement for educators than carrying out their functions according to their professional category and the particular organisation of the service (BOCyL 2005).

Given the differences in regulations for residential care, each region in Spain has its own Inspection Service which monitors the compliance with the regulations set by each of the regions with regard to minimum resources required in a care home, registration as care home, capital resources, equipment or qualifications of staff amongst others (Del Valle et al. 2012).

Current situation and debate

The current situation of residential care in Spain has some similarities with its situation in many other European countries, having been the subject of criticism and arguments against its practice.

The reforms which followed the end of the Francoist dictatorship meant important changes and improvements on residential care services as explained above, but also the development of alternative services such as family care support or fostering and adoption. As in other counties, scientific evidence of the negative effects of institutionalisation led to the development of the idea that residential care should be minimized in favour of family care alternatives. Such notion informed new laws during the 90s, such as the 'Organic Law 1996' which established that the intervention with children in care had to prioritize a family context for them (Bravo and Fernández del Valle 2009).

The debate about residential care, its purpose and raison d'être was started (Domínguez Alonso and Mohedano, 2014) and continued during the following decades as the following quote illustrates:

> *'The questions remain open: should residential care be a valid alternative for children at risk? If so, what role should it take and under what conditions can it develop optimally its goals?'* (Fernández del Valle and Fuertes Zurita 2001, p.409, my own translation)

As Fernández del Valle et al. (2014) point out, after the reforms of the 80's, residential care started to be seen as a resource that had negative consequences for the children's development and should only be used as a last resort. Criticisms against residential care appeared to be based on the idea that the natural environment for raising children is a family and that residential care homes were a negative heritage that should be avoided (Cifuentes et al. 2002; Palacios 2003; Campos et al. 2011). Research (Fernández Millán et al.,2009; García et al. 2012) showed that living in residential care led a worse social adjustment.

Statistics show that during the 90`s there was an increase in the number of children in family care and there was a belief that residential care's future was to be replaced by family care services and adoption. The total number of children in residential care decreased from 24,406 in 1991 to 15,697 in 1999 while family care services increased from 3,203 to 10,379 during the same period (Domingo 2003).

However, the tendency to consider that residential care is to be replaced by family care seems to have changed during the last two decades and several reasons might be behind this. On the one hand, more recent research has shown that, on the contrary to what it had been generally accepted or believed, there are positive outcomes for children in residential care. Martin et al. (2007)'s study showed that the educative projects implemented in several care homes have positive outcomes for residents; De la Herrán et al. (2008) and Martin and González (2007) found improvement in many aspects in children after being in residential care; Fernández del Valle et al. (2003) found that most children do well as adults after being in residential care and that the cases that presented

deviation and social marginalisation were only 15%; De la Herrán et al. (2008) found that children who had been in residential care had a high level of integration in their communities while Martin and González (2007) found that young adults tend to see their time in residential care as something positive.

On the other hand, arguments have been put forward to defend the important of the existence of child residential care. Hence, authors such as Fernández del Valle and Fuertes Zurita (2001) have pointed out that many criticism to residential care have not been based on scientific or technical views, but these have come from people with political or economic interests. Fernández Millán et al. (2011) highlight that these might be the result of a negative stereotype of residential care which does not match with the positive outcomes found through research.

Nowadays, it can be argued, it seems to be broadly accepted that residential care cannot be replaced by family care since, as Cifuentes et al. (2002) point out, 'experience is showing that family care or adoption is not possible in all cases of abuse in which a child cannot or must not continue to live with their parents or carers' (p. 36, my own translation) and therefore residential care is considered 'another option in the continuum of possible alternatives and an adequate option for certain type of problems' (Fuertes Zurita and Fernández del Valle 2001). Hence, as Cruz (2011) argues, the debate now should not be around yes or no for residential care but on what conditions are necessary for it to succeed.

Statistics also reflects this view showing that whereas during the 90`s the tendency was for residential care to decrease in favour of family care, during the following decade this tendency stopped and the amount of children in residential care remained very stable. For example, during the period between 2003 and 2011 the number of children in residential care fluctuated but always remained between a minimum of 13,276 and a maximum of 15,643 (Observatorio de la infancia 2011). However, this number has risen again in the last decade and, according to last data available, from 2018 the number of children in residential care was 21.283 at the time (Observatorio de la infancia 2020).

Variety of current residential care homes

As it is the case in the UK, in Spain residential care homes are very varied in their nature and characteristics, depending on the philosophy and style of the organisations running them. As Defensor del Pueblo (2009) notes, residential care homes can be:

- owned by the regional public administration and managed by it,
- owned by public administrations but run by a private company
- owned and run by a private company or a voluntary sector organization.

According to the latest statistics, 75% of the residential care homes in Spain are managed by private and voluntary organisations (Observatorio de la Infancia 2020).

The residential care facilities in Spain are usually categorised according to the degree of freedom that residents have to enter and leave the premises. This way, these can be differentiated between open homes (those in which residents can enter and leave) and close homes.

<u>Open homes</u>

In this category belong most of residential care homes which accommodate children with a wide range of needs and characteristics. The open homes were categorised by Martinez and Fernandez (2009 p. 195 my own translation) following simple criteria such as size, general purpose and temporality:

- First [response] care homes which accommodate children when they first enter care. There, they go through processes of assessment and diagnosis of their needs and characteristics.
- Short-stay homes for children who stay no longer than a year due to a punctual need.
- Residencies, which are big institutions where a large number of children in care reside.
- Care homes which accommodate a small number of residents and try to recreate a homely environment

The first two categories involve homes where children usually reside no longer than a period between 6 months and 1 year, before moving into one of the homes in the last two categories, where placements are usually longer according to their needs. As Fernandez del Valle and Bravo (2007) point out, residencies and care homes have specialised as an answer to the emergence of new profiles of children in care. Thus, current care homes and residencies can be categorised according to the profile of the children they accommodate as follows:

- Care homes for children under 3 years which accommodate babies and toddlers who cannot be placed in foster care.
- Care homes for children with a wide range of ages which try to recreate a family home and daily coexistence.
- Care homes for adolescents which prepare them for living independently. These homes accommodate those children who are close to becoming adults as they turn 18 and their circumstances do not allow them to return with their families of origin.
- Care homes for unaccompanied foreign children (known as MENAS) whose particular needs are very different to those of the rest of the children in care.

(Adapted from Bravo and Fernandez del Valle 2009, my own translation).

Closed homes

Closed homes are residential care homes where children are not allowed to enter and leave at freewill and offer additional security measures to guarantee that this requirement is met ant to ensure a safe environment for all residents. The need for these homes to limit freedom of movement means that they are subject to a stricter regulation, which is set at national level. This category includes two types of care homes:

- Homes for children who have committed an offense and have been sentenced to spend a set time in a residential care institution. These homes accommodate a large number or residents and their aim is to promote their social integration through the adaptation to a set of norms

and the recreation of socialisation processes (Morente and Dominguez 2009).

- Homes for children with severe emotional or behavioural problems who have received a psychosocial diagnosis in relation to these problems (Síndic de Greuges 2018) and pose risks of harm for themselves or others (Bravo and Fernandez del Valle 2009). These homes have been only regulated since 2015 and must comply with international standards and quality controls (Síndic de Greuges 2018). They usually accommodate a small number of residents and have a higher ratio of educators and psychotherapists (Bravo and Fernandez del Valle 2009). These represent about 7% of residential care homes (Observatorio de la Infancia 2020)

Profile of children in residential care homes

The profile of children in residential care is heterogeneous but they commonly present a wide range of issues since, otherwise, they would have been placed in family care (Martínez and Fernández Sánchez 2009). These issues are usually derived from the experiences of neglect they suffered before entering care (Martín et al. 2007) and include emotional and behavioural problems, mental health conditions, violence against their families and criminal offenses, amongst others (Bravo and Fernandez del Valle 2009), together with educational problems (Fernandez Millan et al. 2009).

Emotional and behavioural problems

Bravo and Fernandez del Valle (2009) argued that children in care increasingly present emotional and behavioural problems revealed through aggressions towards educators and other residents, absences, anxiety breakdowns and other manifestations which complicates the intervention with them. The reasons behind these issues which have been identified by Graña Gómez and Rodríguez Biezma (2010) include a lack of attachment, opportunities, success, gratifying experiences, positive role models, norms and limits, personal safety and educative incentives, together with demotivation, little resources and

personal strategies to cope with crisis and to make the necessary changes to improve their life styles.

The behavioural problems presented by children in care have become an important challenge within residential care (Boada and Casas 2010) since the intensity of conflicts has increased and children and young people´s inadequate learning experiences are more consolidated and resistant to the intervention it is argued (Fernandez del Valle and Bravo 2007)

Mental health issues and conditions

Around half of the children in residential care homes present mental health conditions according to research studies (Fernández del Valle et al. 2012) and in general they show low levels self-steem and self-concept (Graña Gómez and Rodríguez Biezma 2010). As pointed out by Martínez and Fernández Sánchez (2009), the main mental health conditions diagnosis found in a research study have been:

- Intellectual disabilities. They affect 5% of the total of children in care (Observatorio de la Infancia 2020).
- Behavioural and personality disorders.
- Hyperactivity.
- Developmental and mood disorders, together with sporadic anxiety and psychotic disorders.

Mental health issues are usually presented by children in residential care in a larger percentage than behavioural problems (Bravo and Fernandez del Valle 2009). For example, an study showed that problems related to anxiety and depression in children in residential care were present in 65% of a sample while other issues such as use of violence, substance misuse, absences or offenses were present only in 35% of them (Fernandez del Valle and Bravo 2007). However, another study carried out in Spain found that only 27% of children in residential care are under treatment for mental health conditions (Sainero, Bravo and Fernandez del Valle 2014) and only some regions in Spain have therapeutic residential care homes for children with severe mental health problems (Bravo and Fernandez del Valle 2009).

Educational outcomes

Research has shown that near 70% of children entering residential care have an educational level which is below the average corresponding to their age (Delgado et al. 2012) and almost half of them, 45%, have been through episodes of absenteeism (Moreno Manso et al. 2010). This has been explained as the result of their families' situation and the traumatic experiences lived before being in care (Casas, Montserrat y Malo, 2010). Children who end up in residential care present more personal and socio-familiar difficulties, and many of them have experienced their family care or adoption being interrupted (López, Del Valle, Montserrat y Bravo, 2010).

As a result of these issues, it is argued, children in residential care present poorer outcomes than average in their educational settings and less than 6% reach university (Delgado et al. 2012). Difficulties related to attention, concentration, use of language, problem solving, focus of perception and thinking, amongst others are common among children who are looked after in residential care (Moreno Manso et al. 2010). Furthermore, a study carried out by Martin et al. (2007) found that children in residential care suffer rejection from their school peers in a higher degree than other children.

Young offenders

Studies show that children in residential care are overrepresented among children who commit offences (Martinez and Fernandez 2009). In addition to this, Bravo and Fernandez del Valle (2009) point out, all children under 14 who commit an offence are referred to social services, leading to an increase in the number of child offenders in residential care. This involves a challenge for residential care and specific programs are required to deal with children in this situation since they face a process of inadequate social adaptation (Bravo and Fernandez del Valle 2009).

Personal characteristics

Not much information about the personal characteristics of children in residential care in Spain is available, but statistics from Observatorio de la Infancia (2020) indicate that currently 74% of them are males while only 26%

are females. This can be explained by the fact that most foreign children in care (88%) are male and foreign children represent currently the 60% of the total of children in residential care. Meanwhile, considering only Spanish children in residential care, 53% are male, which is a number more in concordance with statistics from other countries.

Principles for residential care

As it has been discussed, Spain has a tradition in social pedagogy and, in particular, for residential care. The educative interventions that are carried out by Spanish social pedagogues in residential care settings are nourished by this tradition and the experience obtained in the field. Nevertheless, social pedagogy knowledge and values shared by social pedagogues and the organisations they work in are not always materialised into academic publications as these are very often transmitted during social pedagogy education and practice as practice wisdom instead. However, in recent years there has been a growing emphasis on the publication of nationally shared principles and standards of practice for residential care (see Fernández del Valle and Fuertes Zurita 2000, Fernández del Valle et al. 2012).

Indeed, the social pedagogic intervention in residential care cannot be reduced to a series of activities and use techniques, it requires a complex system that includes planning, developing and evaluating strategies aimed to meet the individual needs of the children through an educative intervention. The new standards are helpful for achieving this. It can be argued however that an extensive debate in the academic field about the strengths, limitations, and possible alternatives to these principles and standards and their scientific basis has not taken place yet. This is in contrast with the ample academic debate that has existed in the UK about the benefits and problems of standardisation, and quantification of residential childcare practice models and assessment of outcomes (including quantifiable models for assessing and managing risk) (e.g. Munro, 2010). The following overview of the principles and characteristics of social pedagogy interventions in residential childcare in Spain, necessarily needs to be approached bearing in mind this will necessarily draw on the limited literature available and the perspective of its authors.

Regarding the shared principles for residential care practice in Spain, Fernández del Valle and Fuertes Zurita (2000), based on the previous and extensive work produced by Muñoz, Redondo and Torres (1998) alongside official institutions and professionals from many different regions in Spain, have developed a list of 10 principles which, it is argued, summarise the standards that residential care intervention pursue nowadays in Spain. Those principles can be summarised as follows:

Individualisation: An intervention which pays attention to the individual needs of each child and which can be materialised into the welcoming of the resident, a set of norms based on individual needs rather than group control, personal spaces, respect for ethnical and cultural backgrounds, individualised intervention plans and special attention to deficits, deficiencies and trauma suffered.

Respecting children and their families' rights: Putting children's rights at the core of the intervention, including the right to communicate with their families in an appropriate condition and environment, the right to participate in matters that affect them in concordance to their age and maturity, the right of confidentiality of the information about them, the right to be treated with dignity, the right to be aware of sanctions imposed over them and to be able to raise suggestions and complaints through appropriate channels, and the right to have physical contact with their families unless the particularities of the case require to avoid it.

Adequate meeting of material basic needs: Including aspects such as an appropriate home in terms of location, equipment and rooms' distribution, food, clothing, pocket money and transport.

Schooling and educative alternatives: An intervention which avoids considering educational dropout as an aspect almost inherent to children in residential care and prioritises a normalised schooling pathway, searches alternatives for young people and provides an appropriate level of support and motivation so they can achieve their goals.

Promotion of a healthy lifestyle: Understanding than keeping children healthy not only involves meeting their medical needs but it also involves providing education about aspects which affect directly their wellbeing such as personal hygiene, balanced diet, drugs misuse or sexual education.

Normalisation and social integration: Normalisation understood as having a lifestyle as similar as possible to people of their same age and allowing contact with outer space of the care home through aspects such as social relationships and leisure outside the care home, use of television and other media, use of community services and resources, a coeducation and role modelling that allows children to learn from educators as figures of reference for building their own personalities, flexibility in structure and scheduling in order to avoid becoming too static, and weekends as a time to relax and enjoy activities of their choice.

Focus on development and preparation for adult life: An intervention should be intensive in their application so educators are continuously exploring ways to adapt it to the needs of the children, focused on deficits and personal issues to be overcome, having positive expectations and reviewing interventions' effects. Decisions need to be made at the right time and be helpful for children to learn the acquisition of responsibilities and skills that would help them cope with independent living once they reach adulthood.

Support for families: Working together with the families of the children in care has to be a priority so educators need to put in place strategies to create bonds with the families and educate them in parental skills and shared responsibilities. They need to work collaboratively with social services so the work carried out from the educative team at the care home is aligned with the plan designed by the social workers in charge on the case.

Safety and protection: This includes keeping children safe from physical harm and abusive relationships which requires follow ups after they spend time out of the care home or receive visits, education in self- protection, the provision of affection which is a powerful tool for safety and protection and a

commitment of educators to defend the rights and interests of the children when facing any kind of power abuse situation.

Collaboration and coordination focused on the children and their families: In addition to the coordination with social services, successful intervention in residential care requires good coordination with schools and other educational institutions, professionals and services working with the children and having an active role in the community.

2.5. Educative interventions in residential care

As it has been explained earlier in this chapter, each region in Spain sets its own regulation for residential care and this creates differences between each region. However, the shared social pedagogic tradition in residential care across Spain and the current emphasis existing towards the development of national standards of practice (see Del Valle et al. 2012), means that some of these aspects can be found in most of the residential care services, as below.

2.5.1. The importance of the 'Plan de caso' (case plan)

Although case plans are usually written by social workers before the child enters a residential setting, they have a vital importance and underpin all aspects of the design and implementation of the educative interventions carried out by social pedagogues. Thus, the starting point for social pedagogues is the analysis of these plans and the development of educative interventions to meet the objectives established in them (Sáez Tejerina 2001).

The main aspect that social pedagogues in residential care need to identify in a case plan is the aim of the placement of the child when entering residential care. As it has been explained in previous sections, residential care is conceived as a temporary measure for children in Spain and therefore its use must serve as a bridge towards other alternatives of care. Case plans indicate which alternative has been chosen as the most suitable for the child or young

person and the aim of the residential placement must be designed to prepare them for the next stage.

As Del Valle and Fuertes Zurita (2000) point out, there are three possible pathways at the end of residential placement which are a) returning with their parents (or other close relatives as appropriate), b) moving into family fostering and c) preparation for independent living (only for young people close to reach adulthood). In the first case the educative intervention seeks to address the issues that caused the entrance of the child or young person into care, in the second case this has to be oriented towards a progressive transition into the fostering family and in the last case the main aim is to help them achieve autonomy and skills for independent living (Del Valle and Fuertes Zurita 2000).

2.5.2. The educative intervention

The educative intervention is carried out in order to meet the aims established in the case plan of each individual. The design of these interventions is divided in two main parts: the individual educative project (in Spanish 'Proyecto Educativo Individual' or PEI) and the group work project.

The 'Proyecto Educativo Individual' (PEI)

The PEI is an individualised plan which includes educative strategies aiming to meet the individual needs of the child or young person and to support their socialisation (Sáez Tejerina 2001). It has been defined as:

> *"a flexible and dynamic document which includes the objectives to be achieved in all different areas and which main function is to facilitate an individualised attention to each child"* (Fernández Millán et al. 2011, p. 221)

As Fernández del Valle, Bravo and Santos González (2009) indicate, the development of the PEI seeks two main objectives: promoting the personal development of the child and improving their social integration. As these authors explain, the former includes strategies aiming to contribute to an

adequate development at cognitive, emotional, social and wellbeing levels, while the latter seeks to improve the social integration of the child in their family context, the school (or workplace) context, the residential home context, and the community context (p. 105).

Sáez Tejerina (2001) summarises the main characteristics that a good PEI must have:

- It must be individualised to each child or young person.
- It has to be functional, influencing positively on the child in all of their contexts.
- It needs to be operational, including realistic, achievable and measurable objectives.
- It has to be global, covering all the areas of development and functioning of the child.
- It must be constantly reviewed to be adapted to the changing conditions and needs of the child.

The development of the PEI usually involves several phases which, according to Fernández del Valle and Fuertes Zurita (2000), are a) an initial evaluation of the information received from social services about the child and their circumstances, b) an evaluation carried out by the social pedagogue after a first stage of the child in the residential home (approximately after a month), c) the design of educative strategies and activities and their implementation and d) an evaluation of their outcomes and design as appropriate.

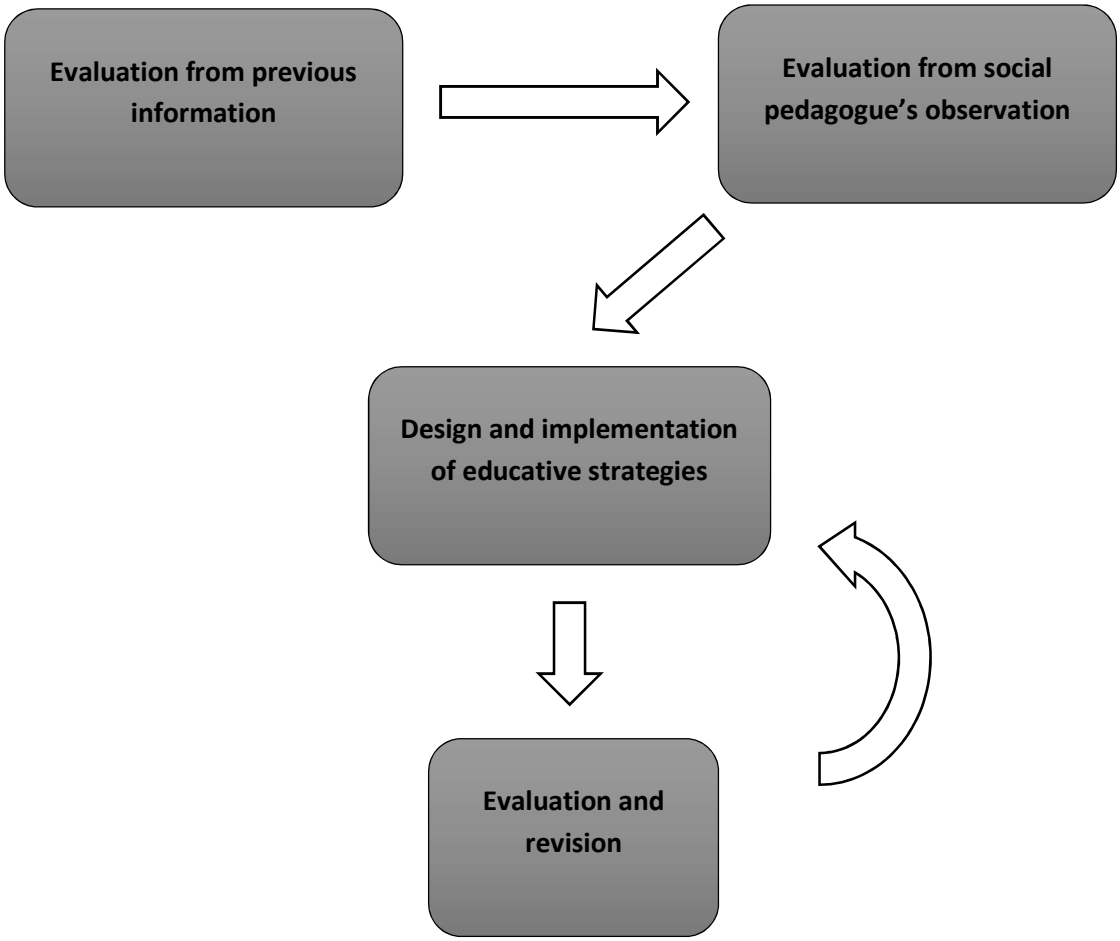


Figure 2. Phases of PEIs

This is the most commonly used design of PEIs. Although there are other suggestions about different designs, these are usually very similar to the one shown in the diagram above. An example is the design proposed by Sáez Tejerina (2001, p.30) which includes the same 4 phases but adds an admission phase at the beginning and a publication of results phase at the end.

It is important to highlight that the educative strategies used by social pedagogues are very diverse, as they are the objectives set up to meet the needs of the children and young people in different care homes. This variety can be seen as a rich heritage of different experiences and approaches to social pedagogy. However, as Del Valle and Fuertes Zurita (2000) point out, there is a lack of development of theoretical models for these strategies to be used in residential care practice. Thus, they argue, some of the educative

strategies used in residential care have very little theoretical foundations and therefore there is a risk of some these strategies not being beneficial for the adequate development of the children or young people in the residential care settings.

Group work programmes

Alongside the development of the PEIs to work to meet the individual needs, social pedagogues in residential care develop programmes to work with the children and young people as a group. As Sáez Tejerina (2001) points out, most children and young people in care show difficulties in their social interactions as a consequence of the difficulties experienced in their previous care. The residential care environment where they are part of a group of peers can offer a great opportunity to deal with those issues. These programmes include, for instance, those dealing with the improvement of problem solving skills, improvement of social and interpersonal skills, development of altruist and pro-social behaviour, development of moral reasoning and improvement of self-control (Sáez Terejina 2001, p. 18).

Group work programmes not only allow social pedagogues to educate on issues of social interaction, but also to work on needs that the children and young people in the residential care home have as a group. As Fernández Millán et al. (2011) point out, these programmes, although directed towards the group, aim to meet individual needs that all (or most) of the children and young people part of that group have. Some examples can be found in Bravo and Del Valle (2009) who highlight the usefulness of group work programmes dealing with sexual education, drug consumption, social wellbeing and prevention of violence and healthy eating habits. Another example is the programme developed by Maillo et al. (2011) which seeks to improve the self-concept of children and young people in residential settings through the development of a journal, designing it and contributing to its contents.

Conclusion

This chapter has offered an overview of the development and current situation of residential child care both in the UK and Spain. This allows a comparison that shows many similitudes but also some differences in this field in each of these countries in aspects such as the particularities of residential care in each of their nations or regions, the diversity in the sector in terms of the different types of care homes available and the profile of children in residential care at the moment. It has also explained the main principles that guide residential care for children in Spain to provide a broader picture of the notions that guide it.

The chapter has also shown the current understanding of social pedagogy in the UK and the main ideas considered to be at its core. It has also explored the educative approach embraced by social pedagogy, the critics towards its implementation as an alternative for residential care in the UK and the particular approach to risk offered by this approach in the field of residential child care. Meanwhile, the chapter has shown the conceptualisation of social pedagogy in Spain as an academic discipline, its historical development and the characteristics of the specialised social pedagogy in the field of residential child care.

Finally, the chapter has offered an overview of the educative interventions in residential care in Spain and the importance given to both the development of individualised care and educative plans and the group programmes in residential care homes.

After exploring the main aspects regarding residential child care and social pedagogy in the UK and Spain, the next chapter shows the characteristics of the methodology used for this case study research, including an explanation of its qualitative approach, the ethnographic methods for data collection, the analysis of data and how all these was designed and implemented during my fieldwork.

Chapter 3. Methodology

Introduction

In this chapter I explain the methodology I have used to carry out this case study research. It starts describing the research strategy followed, indicating the philosophical assumptions behind this research and the qualitative approach taken in its design and implementation.

The chapter continues with a detailed explanation of the methods used for the research, including the choice of case study as the main method and the reasons why Santiago 1 have been selected for such case study. In this section there can also be found the ethnographic methods of participant observation and semi-structured interviews chosen for data collection, the reasons for using them, how they have been designed and implemented during the course of the fieldwork. This section also explains the methodology used for the analysis of the data collected and how the analysis process was carried out.

Finally the chapter concludes with an explanation of the different considerations that have underpinned this research. This includes the ethical considerations developed during the design stage of the research and the mechanisms developed to make it ethically sound, and other considerations regarding the quality of the research.

As a reminder, since the choice, design and implementation of the methodology of this research have been developed considering how to best answer the research questions posed, I show my research question once again:

- What are the characteristics of a social pedagogic approach in a Spanish residential childcare facility?
- How do such characteristics fit with existing knowledge from the emerging discipline of social pedagogy in UK?

- What might be learned from such social pedagogic approach facing the implementation of social pedagogy into residential childcare practice in the UK?

3.1. Research design

In this section I describe the design developed for this research indicating the research strategy followed, the methods chosen and its implementation and the considerations underpinning this research.

3.1.1. Research strategy

Philosophical assumptions

Before going into more practical aspects of the methodology, I would like to give an overview of the philosophical considerations which underpin this research, since, as D'Cruz and Jones (2014) point out, it is important that the researcher explains their position so others can understand how and why the research has been designed in a particular way.

The main two, and usually confronted, epistemological standing points are positivism and interpretivism (Bernard 2013). As Bryman (2016) explains, positivism is based on the assumption that there is a reality external to the individuals which can be explored using classical scientific methods, while interpretivists claim for the use of different methods since they consider that such external reality does not exist and the only way to explain the social world is through individuals' interpretations. However, my epistemological assumptions are not based on any of these two but in a 'third way' (Robson and McCartan 2016, p. 41) which is realism.

Realism is a philosophical standing point which acknowledges that there is an external reality produced by a series of mechanisms (Robson and McCartan 2016) which can be observed not directly but through the analysis of their effects (Bryman 2016). What differentiates the epistemological assumptions or realism and positivism is that for realists the external reality observed is 'specific

of a particular time, culture and situation' (Robson and McCartan 2016, p. 34) and therefore the knowledge generated through research cannot be used to make universalist claims.

Since my epistemological standing point is realism, the design of my methodology is going to be orientated towards the analysis of the mechanisms that form the reality that I am going to study instead of towards how the individual actors describe such reality.

A qualitative approach

In order to select the best strategy for this research I considered the main approaches to social research: the qualitative and the quantitative approaches. After analysing the pros and cons of each of these, I decided to use a qualitative approach. As Punch (2014) argues, 'how we do something in research depends on what we are trying to find out' (p.7), and observing my research questions I reached the conclusion that the qualitative approach is the best strategy for this research, for the reasons that I explain next.

Firstly, one of the reasons which influenced my decision of taking a qualitative approach is the fact that the topic of this research, social pedagogy, is better studied using qualitative methods. As Petrus Rotger (1997) argues, 'research in the field of social pedagogy is orientated mainly towards qualitative methodologies as there are considered more appropriate for the understanding of the complex social reality' (Petrus Rotger 1997, p. 379, my own translation). That 'complex social reality' includes, amongst others, individual characteristics, relationships between two people or in groups, social context and particular situations which are key aspects in social pedagogy and have a strong influence on how a social pedagogic intervention is carried out. It seems coherent that in order to study a social pedagogic intervention, a researcher needs to pay attention to the details of all of those intertwined aspects of the social reality. Therefore, it can be argued that a qualitative approach, which allows a 'deeper understanding of the social phenomena' than a quantitative strategy (Silverman 2005, p. 10) and provides more detail and depth to the

research (Greener 2011), is more appropriate to be used in this particular research than a quantitative approach.

Another reason influencing my decision has been the importance of the social context for a social pedagogic intervention. As it can be observed in the literature review (chapter 1) the social context in which a social pedagogic intervention is taking place has a considerable impact on such intervention since it creates a particular circumstance that the social pedagogue needs to take into consideration. As Smith (2012) points out, social pedagogy recognizes that the different situations and the different people involved in them require a particular intervention adapted to them. In order to decide what is best in each occasion, social pedagogues consider that 'what is 'best' will be determined in the particular circumstances that pertain in any situation' (Smith 2012, p. 51). Hence, social context becomes a key factor in any social pedagogic intervention.

Taking into consideration such importance of the social context in social pedagogy, a qualitative approach seems more useful for this research since qualitative strategies tend to consider the context as a critical aspect of the research. In words of Neuman (2011), 'in qualitative research, we usually emphasize the social context because the meaning of a social action, event, or statement greatly depends on the context in which it appears' (Neuman, 2011, p. 175). This emphasis of qualitative research on the social context has allowed me to explore this aspect of social pedagogy which would be less likely to be achieved by using a quantitative approach.

The aim of this research, as it can be observed in the research questions, is to generate knowledge regarding the way a social pedagogic intervention is implemented, and this is another reason why I considered that a qualitative approach was more appropriate. As Bryman (2016) explains, such generation of knowledge or theory is usually found in inductive research where 'theory is the outcome of research' (p.26) in opposition to deductive research where the main aim is to test a hypothesis emerging from the existing theory. Since the aim of this research is to study how methods and strategies are developed by a particular social pedagogic intervention, its approach is clearly inductive.

Given the inductive approach in my research, a qualitative strategy seems more appropriate because, as Bryman (2016) points out, while quantitative research is more concerned with deductive approaches and the testing of theories, qualitative research emphasizes an inductive approach.

Finally, a last reason to be highlighted is practical, but equally influential: the time and resources available for this research project. Thanks to the funding provided by the ESRC for this research and my own availability as full time student, I have been in a privileged position of being able to carry out a qualitative research which otherwise would have been more difficult to do. As Creswell (1998) argues, qualitative research requires time and resources to be carried out successfully since the researcher needs to spend long time in the field and analysing big amounts of data. Given my circumstances, I decided to take this opportunity of planning a qualitative research which I may not have the chance to do in the future.

3.1.2. Research methods

Case study

Yin (2012) argues that case studies are pertinent in research projects seeking to answer descriptive and, as in the case of this research, explanatory questions since it is a method which provides ‘rich descriptions’ and ‘insightful explanations’ (p. 5). Thus, I decided that an effective way to answer my research question would be to carry out a single case study, focusing on trying to encapsulate all the ‘richness’ that its study could provide.

The choice of selecting only one single case is very common when choosing case study as the research method (Gerring 2007), particularly when certain conditions are in place. Some of these conditions which have reassured me in my choice of a case study as the best research method for this research, and which I explain next, are the same that informed my decision of choosing a qualitative approach.

Verschuren (2003) argues that case study 'is especially suitable for studying phenomena that are highly complex and/or embedded in their cultural context' (Verschuren 2003, p. 137). This quote highlights two of the main conditions that make case study the appropriate method in this research: the complexity of the subject and the presence and importance of the social context.

Firstly, as it has already been explained earlier in this chapter, a social pedagogic intervention, like the one subject of study in this research, is highly influenced by the complexity of the social reality which is at its core. Given this complexity, a case study appears as a suitable method to be used since it 'is concerned with the complexity and particular nature of the case in question' (Bryman 2016, p. 66). A reason why a case study is appropriate in research studying complex subjects can be found in the fact at a case study is 'an in-depth investigation' that relies on several methods for data collection and on a variety of empirical data (Hamel et al. 1993, p. 45). Such variety allows a deep analysis of the different factors that creates and influences the complexity of the subject of study.

Secondly, another particularity of a social pedagogic intervention which has been already discussed is the importance and influence that the context has in such intervention. A research exploring the methods and strategies of a social pedagogic intervention without paying attention to its context would be therefore incomplete. In this situation, case study appears as a research method which can fulfil the need of exploring the context of the subject study. As Yin (1994) puts it, 'you would use the case study method because you deliberately wanted to cover contextual conditions – believing that they might be highly pertinent to your phenomenon of study' (Yin 1994, p. 13).

A third condition that makes case study appropriate for this research is its inductive approach. As Hamel et al. (1993) argue, 'case study is an inductive approach, perhaps even the ideal inductive approach' (p.41). Such 'ideal' characteristic is given by the fact that a case study does not rely on previous literature but tries to create theoretical models from the data collected empirically. In words of Gillham (2000),

> *'Another fundamental characteristic (of case study) is that you do not start out with a priori theoretical notions (whether derived from the literature or not) – because until you get in there and get hold of your data, get to understand the context, you won't know what theories (explanations) work best or make the most sense'* (Gillham 2000, p. 2)

Given the lack of theory related to social pedagogic interventions in Spain observed in the literature review, my aim for this research has not been trying to prove any hypothesis but to produce the basis for generating such missing theory. Thus, the emphasis of case study in creating new theories regardless of previous knowledge about the subject that favours an inductive approach is one the reason why I have considered it the most suitable method for this research.

Choosing Santiago 1 for the case study

Plenty are the reasons that made me chose Santiago 1 as the residential care home for the case study in this research. While some of them attend to practical aspects for access others are related to its suitability of offering an example that contributes to the current conceptualisation and knowledge regarding social pedagogy in residential care in the UK.

As explained in the literature review, social pedagogy is not a specific strategy or method but much more complex than that. Therefore, in order to establish if an intervention can be considered social pedagogic one needs to observe its nature and whether it embraces its main notions. In the case of Santiago 1 I took time to analyse what I knew about it and the information available through its website to decide if its intervention could be considered social pedagogic or not. I learned aspects such as that they base their intervention in pedagogic concepts derived from Milani and Freire amongst others, have an educative approach towards the daily life activities of the care home, have an emphasis on social integration of the residents and have an educative team formed mostly by professional with a background in social education and pedagogy. These aspects made me consider that their intervention can be considered social pedagogic and therefore it was a potential candidate for carrying out this research.

As Bryman (2016) points out, there are different reasons why a particular case is chosen for a case study, and one of them is that the researcher considers that the case 'exemplifies a broader category of which it is a member' (p. 70). This is without a doubt the reason why I have chosen Santiago Uno since I consider that it provides a good example of how a social pedagogic intervention can be implemented in a residential care home. Since social pedagogic interventions are shaped by contextual characteristics, it would make little sense trying to claim that one of them in a certain time and place represents the only way of doing it. Thus, the findings of this research need to be understood as the result of an example, never as the only way of doing social pedagogic residential care.

Santiago 1 offered an excellent opportunity to show examples of social pedagogy in practice due to its big size and considerable amount of aspects of its intervention. When I first heard about it caught my attention the variety of interesting activities that form its educative intervention and when the time came to choose a case study I opted for trying to do it there. This, in my view, has proved to be a right call given the richness and variety of findings that have emerged from this research.

Burguess (2002) points out that gaining access a particular field is an important stage of the research which can be easy or pose difficulties to the researcher. In my case I negotiated my access to Santiago 1 without any problems. Jorgensen (1989) suggests that when carrying out an overt research (like this), access can be gained 'by seeking permission from the highest possible authority' (p. 46). This was exactly my strategy, since, in order to gain access to Santiago 1, I talked directly to the manager of the institution. Although I had not met him before, we had a common acquaintance who had helped me recommending me and giving a positive reference. This proved to be a wise choice since the director agreed to provide me access to carry out my research and act as the gatekeeper that introduced me to the rest of the team and residents, avoiding this way problems that might emerge while trying to gain access to the research target group.

Ethnographic methods for data collection: Participant observation and semi-structured interviews

In order to collect data during my case study, I have chosen to use two ethnographic methods: **participant observation and semi-structured interviews**. These methods are amongst the main sources of evidence that can be used during the process of an ethnographic case study. (Stenhouse 1978; Yin 1994).

Choosing more than one method to collect information and make observations is very usual when doing a case study (Hamel et al. 1993) and the main reason why I have decided to do this is that, as Yin (1994) argues, 'a major strength of case study data collection is the opportunity to use many different sources of evidence' (p. 91). Such strength comes from the opportunity of carrying out what is being named as methodological triangulation which consists in approaching your subject of study 'from different methodological standpoints' (Gillham 2000, p. 13) by using different methods to look at it. This way I am trying to get closer to obtain a true picture of the reality that I am planning to observe since the data collected and the conclusions reached afterwards are 'more convincing and accurate' (Yin 1994, p. 92) thanks to the use of multiple methods. In particular, the combination of participant observation and interviews allows a holistic approach to data collection where situations can be observed first and then described (Atkinson et al. 2003).

Before giving way to explaining each of these methods I would like to point out something that is common to them in this research which is their little structure at the time of entering the fieldwork. This is consistent with the exploratory nature of this research and something that I deliberately decided to do for the reasons that I explain next.

As Punch (2014) indicates, the design of a research project can be found at some point on a continuum that goes from being very structured to the opposite. He explains that usually research designs which are very structured at the beginning of the data collection have a quantitative and deductive approach, while qualitative and inductive approaches usually tend to use a less structured design. In the latter the knowledge to be found with the research is expected to

emerge from it, and therefore cannot be predicted in advance. Thus when doing a case study, and particularly if an inductive approach is taken, the researcher needs to 'start collecting data with as open a mind as possible' (Gillham 2000, p. 18). The idea was that approaching the data collection without a preconceived idea of what exactly I was looking for allowed me to find things that otherwise I could have missed. Therefore, although before entering the fieldwork I had decided the research methods and the instruments for data collection for this research, their specific content (e.g. what exactly I was going to observe or what questions I was going to ask during interviews) was something that emerged during the fieldwork itself.

Participant observation

One of the methods that I chose for collecting data in this research is participant observation, which has been defined as:

> *'the method in which the observer participates in the daily life of the people under study, either openly in the role of researcher or covertly in some disguised role, observing things that happen, listening to what is said, and questioning people, over some length of time'* (Becker and Geer 1957, p. 28).

As Hammersley and Atkinson (2007) points out, this method is characteristic for ethnographic research like this. One of the benefits of choosing this method relies on the opportunity that I had to observe how a social pedagogic intervention was carried out as it normally happens (Denscombe 2007). This way, as O'Reilly (2005) suggests, my data collection did not depend solely on what people involved could tell me about it since I had also the opportunity to observe it by myself. As an observer, I had to pay attention to details related, for example, to personal interactions, contextual situations or behaviours that I witnessed during my fieldwork. These details allowed me to create a picture of how the social pedagogic intervention is implemented there.

Taking a role

Although my presence as observer could provide me with a perspective which I could not gain in any other way, it also could a negative impact on what I was planning to observe due to the influence of my presence in the actors of the intervention. In order to counteract this effect, O'Reilly (2005) indicates that the researcher needs to 'become part of the natural surroundings of the setting' (p. 13).

One way for achieving it was carrying out a covert research. As Silverman (2005) indicates, covert research consists in doing the data collection without subjects' knowledge while overt research implies informing subjects and getting their agreement. However, although a covert approach would have helped me to minimize the impact of my presence in the field as researcher, it would have also compromised the ethical stand of this research (this would be developed further in a following chapter). Therefore, I decided to take an overt role which implied telling everybody that I was there doing research.

I decided to try to 'become part of the natural surroundings' as much as possible by becoming a *participant* observer. Thus I decided to take a participatory role in the residential care home, like any of the volunteers who attend occasionally instead of being just an observer so both social pedagogues and residents could get used to me and act naturally (O'Reilly 2005), but being clear to them that I was there carrying out a research. Furthermore, taking this role helped me to develop relationships with the subjects involved in the research which, as Jorgensen (1989) points out, is a factor that allowed me to gain rapport and to collect accurate and truthful information.

As Denscombe (2007) points out, personal characteristics and qualifications affect strongly to the possibilities of a researcher taking a particular role. In my case, since I am qualified in social pedagogy and have experience working in several care homes, I was in an ideal position that allowed me to take this role. Furthermore, my personal characteristic such us age, native language and social skills did not impede me from taking this role, while other ones such as sex or race did not have a strong impact in this particular case.

One aspect which needs special attention while doing a participant observation is the contradictory aims of the researcher trying to experience what is like being part of the subject study (insider) while at the same time trying to be an impartial observer of the situation (outsider). As Gomm (2008) highlights, an insider perspective provides an opportunity for the researcher to learn why people do things but also carries the risk of becoming a member of the group and take things for granted which can make you miss relevant things. Thus, during my case study I had to deal with this contradictory situation, but being aware of this helped me to be prepared to take this challenge and to be alert to avoid becoming 'too much' an insider. As Denscombe (2007) points out, the success of my participant observation depended on my ability to do this.

Another aspect that I needed to take into consideration was that in participant observation 'the observer is the research instrument' (Robson and McCartan 2016, p.314) and this means that the information collected is going to be influenced by my way of observing what happens. I deal with this later on in this chapter (see reflexivity section).

Designing the observation

Given my inductive approach in this research, the kind of observations that I decided to carry out were not structured. In a qualitative ethnographic research project like this the research methods usually have little structure since the inductive approach requires the researcher to be open to find relevant information in aspects or situations where they had not previously foreseen (Punch 2014) and less structured observations give freedom to researchers to observe what they need (Robson and McCartan 2016). Thus, my observations in the field will not be structured but flexible and adaptable to what I consider that might be useful information once in the field. Such freedom was much needed in my case so I could search for what different situations during my fieldwork had to offer to my research.

However, having a flexible and less structured approach does not mean that I entered fieldwork without and observation plan since, as Guest et al. (2013) point out, in observation designs 'having some structure can greatly facilitate data collection' (p. 92). In my case I considered that having an observation plan

prepared beforehand could help me in my data collection. On the one hand, it allowed me to centre my observations into different aspects of the intervention progressively so I did not feel overwhelmed at the beginning of my fieldwork. On the other hand, it let me to focus my observations in aspects which were relevant to answer my research questions while allowing the degree of freedom that my inductive approach required. I consider that without this plan I would have taken the risk of spending too much time and effort collecting data that could have not be relevant while missing out aspects of the field that could have provided useful data for answering my research questions.

Observation plan

My observation plan consisted in three stages as I started with a descriptive observation and then moved into a focused and a selective observation.

Descriptive observation

At the beginning of the fieldwork, I focused in carrying out descriptive observation and I had several aims with these observations. Firstly, as Jorgensen (1989) points out, these observations can help to become familiar with the setting as I considered it was what I needed at this first stage. This familiarisation process allowed me to start 'absorbing the culture' which, according to Gillham (2000), is a basic step for understanding 'the conventions by which it (the care home institution in my case) works' (p. 28). Secondly, these observations let me set up the context of the fieldwork, both internally and in relation with the local community. I considered that this aspect was very valuable not only for my understanding of the social pedagogic intervention but also for the readers of my research to be able to understand this context without having been there. Finally, carrying out descriptive observations allowed me to create first impressions about the setting, which I considered, were valuable sources of data before learning in more depth how the institution works.

I focused these descriptive observations in several main aspects. Robson and McCartan (2016) indicate that the main aspects to be focused on when doing descriptive observations are 'the setting, the people and the events that have taken place' (p. 320) and Jorgensen (1989) also highlights these same three

aspects as the ones to be taken into consideration by researchers when entering a fieldwork setting (p. 82). Thus, I chose these three aspects as the main categories for my early descriptive observations. In order to lead my descriptive observations about these aspects I made myself some questions at the early stages of my fieldwork for each one. My aim was to use these questions simply as a guide so I did not limit my observations to them.

Some of the questions that I asked myself in order to do descriptive observations about **the setting** were: What are the characteristics of the building? How many rooms are there and how are they distributed? Was the building built for the purpose of residential care? Are there any outdoors spaces that are part of the care home? Who have access to each room and how is this access achieved? Which seem to be the purpose of each room? Where is the institution allocated? What are the main features of the area?

For the purpose of doing descriptive observations about **the people** in the place I asked myself questions such as: How many residents are in the institution? How many workers and what is the role of each one? What are the features of the residents and the workers in terms of age, gender, appearance and other physical characteristics? How many workers and residents are at the institution during the different times of the day? How are they distributed within the institution at different times of the day?

Finally, in order to describe **the events** taking place at the institution I questioned myself aspects such as: What activities do take place in the institution? When and where do these activities take place? Who participates in the activities? Are these activities planned or casual? What do the participants in the event do? Are there any events taking place outside the institution?

Focused observation

After a first stage carrying out descriptive observations I started a second stage of focused observations. As Robson and McCartan (2016) point out, these focused observations are centred on specific dimensions, which helped to answer my research questions. Thus in this stage I narrowed down my observations to the aspects that are concerned to the social pedagogic

intervention, how it is designed and implemented and what the key aspects that can help to understand it. Also, as Jorgensen (1989) points out, moving into more focused observations stage can lead to a greater involvement with the participants and create opportunities to learn relevant information for my research.

As in the case of descriptive observations, and even more, it was difficult, and counterproductive due to my inductive approach, to try to establish what aspects I needed to observe in advance at this stage, but once again I considered that preparing a guide of what aspects would be relevant could help as a starting point for this stage:

Table 2. Focused observation questions

Aspects	**Questions**
Institution	When was the institution created and why? What were the aims that lead to the creation of the institution? What are the main principles that guide the work carried out at the institution? What is the impact of these principles in their work?
Organisation	What is the structure of the organisation? Who is responsible for what in the organisation? How do they divide the different tasks? How is the decision making process at different levels? What are the professional qualifications of the members of the organisation?
Residents	Why are the residents placed into the institution? What is the situation of the residents, are they all looked after children? Who is the legal responsible for the custody of the residents? Who decides what residents are placed in the institution? Are the residents in temporary or long term placement and who decides this?
Educative intervention	How is the intervention designed? What are the aims of this intervention? Who is involved in the design of the different activities? How is the intervention implemented? How is the setting used in order to carry out the intervention? How is the intervention evaluated and who does this evaluation?
Relationships	How is the relationship between residents and workers? What is the importance of this relationship for the intervention? Are relationships maintained only during the placement and inside the institution? How is the relationship between workers?
Behaviours	How is the behaviour of residents and workers during the different events of the day? How do residents and workers behave in particular situations? How does the presence of different people

	affect the behaviours of residents and workers?
Uses of time	What do workers do during their shift? How long are their shifts? What do residents do with their free time? How many planned activities take place during the day?
Uses of space	What are the different spaces in the institution used for? What are workers and residents allow doing in the different spaces? What is the relationship between the intervention and the spaces available?
External contact	Do any external professionals visit the institution? If so, how many and how often? Do residents have contact with outside institutions? Do resident have contact with family and friends? If so, when, where and how often do they take place?

Selective observation

This stage of selective observation, unlike the other stages, did not come straight after the previous stage but overlapped with the previous one for some time. During this stage, I recorded the observations related to the 'participant side' of the participant observation method that I used. In both the descriptive and the focused observation stages I could have carried out the observation acting as an outsider observer, but in this stage I necessarily had to go beyond that and do observations using the perspective as an 'insider' which, as Yin (2009) highlights, 'is invaluable in producing an "accurate" portrayal of a case study phenomenon' (p. 112).

The insider perspective that I was able to obtain as a participant observer allowed me to access to two very valuable sources of information. On the one hand, I had the opportunity to discover the relevant aspects that as an 'outsider' I would have not had the possibility to observe. In words of Denscombe (2007), 'only by experiencing things from the insider´s point of view does the researcher become aware of the crucial factors explaining the culture or event' (p. 217).

On the other hand, I also had the opportunity to obtain information from my personal experience as a participant which, as Jorgensen (1989) points out, is also an extremely valuable source of information since it allows observing emotions and feelings derived from that experience.

In this stage, unlike the other two stages, I considered that having any kind of structured plan to what I could observe was pointless since the experience that derives from the selective observation i unpredictable. Therefore, I decided not to use any structure at all to guide these observations. I simply tried to be aware that these were useful sources of information and use a research diary to record them and turn them into data as explained next.

Semi-structured interviews

A second method that I chose for the case study was qualitative semi-structured interviews. These interviews were carried out with social pedagogues and other relevant members of the social pedagogic intervention studied.

One of the benefits that I obtained from interviews was that they provided me with a different and complementary perspective of the social pedagogic intervention in comparison with the participant observation. If participant observation allowed me to focus on what people do in my case study, interviews helped me to 'get at what people say' (Arksey and Knight 1999, p. 15). But this was not the only benefit that I got by using interviews. On the one hand, interviews helped me to access data that goes beyond what I could observe during my case study. As Rubin and Rubin (2012) argue, 'through interviews you can understand experience and reconstruct events in which you did not participate' (p. 3). Therefore, by doing interviews I was able to obtain valuable information related to events that I did not witness first hand during my observations due to the limitations in time that my fixed and concrete presence in the place had.

On the other hand, as (Arksey and Knight 1999) point out, interviews allow access to the perspectives of the subjects, in my case social pedagogues, which is something that I could not observe or experience by myself. Their perspectives about the social pedagogic intervention, shaped by their experience, provided me with plenty of valuable information to understand it and get closer to get a picture of how it is.

Given the inductive approach to this research which aims to generate theory from the data collected the field, my interviews had little structure and were based on the information that I had already obtained previously during the participant observation. In this process of discovering what data could be valuable for my research, I 'must remain flexible to accommodate new information and adapt to actual experiences and unexpected situations' (Rubin and Rubin 2012, p. 35) and that flexibility could be obtained using interviews with little structure. Hence, I chose to carry out semi-structured interviews which allowed me to obtain 'elaborated "in depth" responses' (Gillham 2000, p. 19) focusing on what I was trying to find out while maintaining a high degree to flexibility and adaptability. This way I could accommodate 'openness to changes of sequence and forms of questions in order to follow up the specific answers given and the stories told by the subjects' (Brinkmann and Kvale 2009, p. 124).

The number of interviewees, the amount of people interviewed, the duration of the interview and some other practical aspects of the use of this method was not decided before entering the fieldwork. Instead, I decided that it would depend on what I considered was necessary in the course of my fieldwork.

Fieldwork

Gaining Access

After completing the design of my research, it was time to start my fieldwork. However, it can be argued that it actually started earlier since I had already had contacted Santiago 1 in order to ask for permission to carry out my research. This was already an important step for my research since, as Silverman (2006) points out, when the research site is private it can pose a challenge for the researcher to gain access to it. What I decided to do was trying to access through a gatekeeper, who is a person who can grant access to the researcher to the research site (Burgess 2002). My gatekeeper was a person I knew which had previously carried out some work in the field with the director of Santiago 1. As Bryman (2016) points out, using friends as a tactic to gain access to the field is a way to make such access easier. Thus, I asked this person to put me in

contact via email with the director since I believed my chances to be given authorization from him to carry out my research were higher than if I had contacted him directly. Being somehow 'introduced' to him by someone he already knew seemed like a good idea as I could be perceived by him as more trustworthy this way.

My first few contacts with the director of Santiago 1 where then via email. In those emails I had the opportunity to introduce myself and explain what I had in mind for my research. At this stage I did not go into much detail but I explained that I would need to do fieldwork during several months at Santiago 1 and the collaboration of the staff to allow me to do so. His answer was very positive as he saw it as an opportunity for making a potential contribution to society from their work. In these emails we discussed the possible dates for me to carry out my fieldwork and finally arranged to meet on my arrival at Santiago 1. This meant that I had successfully achieved access to my research site and I was ready to start my fieldwork.

Time schedule

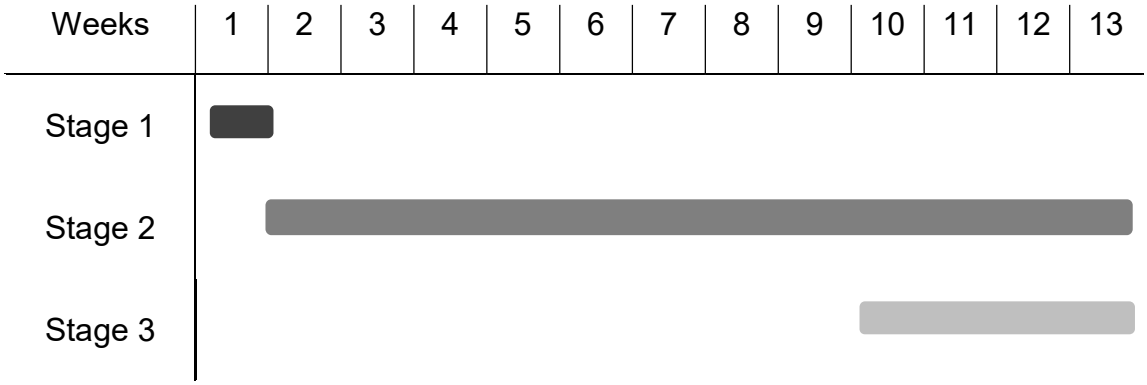
The fieldwork for this research was carried out during 3 months starting around the middle of May 2015 and developed in 3 stages:

- Stage 1 consisted in the arrival and settling in. During this stage I had the chance to meet with Santiago 1 director, participate in an assembly where I was introduced to educators and residents visit the facilities and become familiar with the surroundings.

- Once stage 1 concluded I moved on to stage 2 which consisted in doing the participant observation. At this stage I had the opportunity to participate of the daily life of Santiago 1 and many of the activities taking place, spend time with educators and residents and accompany them to their project in Morocco.

- Finally, towards the end of my fieldwork I developed stage 3, which consisted in carrying out the interviews with educators while continuing with my participation in the activities and daily life of the care home.

Table 3. Stages of fieldwork



Stage 1: Introduction in the field and first steps.

In the first stage of my fieldwork the aim was to arrive at Santiago 1 and set the foundations of the work I was planning to carry out later on. During this first week I focused on introducing myself to the people at Santiago 1 and explain my research so they knew why I was there and had the opportunity to decide whether they feel comfortable being subjects of this research or not. Therefore, I needed to be cautious not entering the field too intensely so they did not feel I was somehow becoming part of their daily lives too intrusively. This is important for the development of my participant observation as I later on explain. Thus, after introducing myself, during this week I mainly tried to become familiar with the surroundings and allowed myself to be around so we could start knowing each other and gaining trust which was going to be essential for me to carry out my data collection.

My first step during this stage was having a meeting with the director of Santiago 1, as we had agreed to do previously via email. My aim for this meeting was to explain in more detail the purpose of my research, the methods

I had designed and how I was planning to carry them out and to arrange how was going to be my participation in the daily life of Santiago 1 in order to achieve this. At this point I was still unsure whether I was going to have 'full access' to all the activities and events taking place at Santiago 1 and that made me feel a bit anxious. Thus I tried to highlight how necessary it was for me to be present not only at scheduled activities but also at the day to day of the staff and residents so I could obtain a better and fuller picture of their intervention. The answer was positive so I could relax since I was assured there was no problem about that as far as I met the commitment regarding confidentiality and anonymity I had explained my research would adhere to. At that point I asked the director to sign the informed consent form I had prepared and that meant I had been given authorization to carry out my research.

In this meeting, the director also decided to explain to me their intervention in a high degree of detail. He told me about the facilities available and the staff, but also explained the foundations of their intervention and how it had developed over the years. This gave me a very useful insight into their educational philosophy and the purpose of their intervention. Afterwards we arranged that the next step for me would be to participate in the home assembly they were planning to have two days later, where I would be able to introduce myself and explain my research both to staff and residents.

In this assembly I was introduced by the director and was given the opportunity to explain my research and how I was planning to carry it out, while informing everyone of the possibility for them to opt out from the research and the mechanisms to do so. The participation on this assembly also allowed me to learn about how they carry these out and the participation and outcomes derived from it, which was also valuable for me as data for my research. At the end of the assembly I was told if I was ok to take part in an 'allow to be asked' exercise where all participant would have a chance to ask me questions about things they were curious about regarding me and my research. I was fine with it so they started asking me questions mainly about me and why I was studying abroad, about my research and why I had the interest in doing it, and also about why I had chosen Santiago 1 to do it, among other questions. It was an interesting thing to do that I had not planned but I believe helped them

understand a little bit better the reasons why I was there and also helped me to enter the field having had the chance to have a chat with both residents and staff and explain my research.

Although I had planned to start my participant observation in stage 2 and use this first stage just to become familiar with the environment and the people in it, eventually during those first days I had the opportunity to start collecting a lot of useful information from the initial interview with the director and also from the assembly. Thus, during those initial days I ensured to allow myself time to record in my notes and my research diary all this information and my first impressions which were highly valuable.

Stage 2: Participant observation.

This stage comprised the period from my second week of fieldwork right until the end the period of data collection. It is during this stage that I had the opportunity to immerse myself in the day to day activities of Santiago 1 and carried out my participant observation. For this stage I planned to 'hang around' during the first days so I could become to learn what they were doing and also to start building a relationship with residents and educators. This allowed me to start my participant observation in a less intrusive way. This was important since participant observation requires the researcher to collect data in a less intrusive way as possible since as a result people are more likely to behave as they would normally do (Schensul et al. 1999). This is known as ecological validity, which takes place when the situation is little affected by the researcher activity (Gomm 2008). To achieve this, an effort is required to 'minimise the extent to which the researcher disrupts' (Jorgensen 1998,p.15). Thus, particularly during this early stage, I tried to keep a low profile, allowing things to develop in a natural way and not forcing myself to be in situations which can be seen intrusive by people at Santiago 1.

During those early days the most fruitful times for me were mealtimes and breaks between activities. I experienced that during planned activities, the educators were focused on their roles as facilitators or participants of the activity while they were supervising that the residents were also participating

and behaving in an appropriate way, so they paid little attention to me in particular. The same occurred with residents, who were more interested in the activity than in chatting to me, or concerned that they were going to be reprimanded by the educators if they did. Thus, it was during mealtimes and breaks between activities when I had the opportunity to talk to them and start getting to know each other. At first it was the educators who approached me during those times to have a chat or ask me something about me. I guess this was because they saw me more as an equal than residents did. However also the more extrovert residents did spend some time talking to me, and little by little I started to have the opportunity to talk to more of the residents during these times. Moreover, it was during breaks that educators and residents invited me to join them in activities that were going to take place later on or to their evening meals at the satellite homes. This was a good way to start joining them in their planned activities without been seen as an intruder, facilitating the build of rapport with them.

After some weeks participating in the daily routine of Santiago 1 in a more natural way, allowing myself to participate in the activities I was invited to, I decide to take more control over what activities I was participating in. This decision was driven by my intention of having the opportunity of witnessing all the wide range of activities taking place. Since I had already spent several weeks in the field, I had managed to build a good relationship with most of the educators and many of the residents too. This allowed me to ask them directly if I could join them in the activities I still had not participated in and pay visits to facilities that I had not been to yet at that point.

Collecting data

It was during this stage that I collected the data using my participant observation in everything that I was experiencing. The instruments of data collection that I used during the participant observation were fieldnotes and a research diary. My fieldnotes consisted in recordings about what I observed which I considered could be relevant to my study. I tried, and manage to achieve in most cases, to record fieldnotes on the day and straight after finishing my time in the field. Several authors (e.g. Jorgensen 1989, O'Reilly

2005, Silverman 2005, Bernard 2013) highlight the importance of keeping the recording as closer in time as possible to the observations to minimize the impact of selective memory, being the ideal situation to be able to record while observing. However, in my case I considered that recording in situ was not a good choice because, on the one hand, it would have interfered with my participation in the activities and, on the other hand, it would have affected negatively to my intention of witnessing the situation as it naturally happens. For cases like this Bryman (2016) suggests that the researcher 'develops strategies of taking small amounts of time out' (p. 448) to take brief notes or 'jottings' (Emerson et al. 2012, p. 29) that jogs their memory when writing the full fieldnotes later on the day. Following this suggestion I tried to organise my participation in the field allowing some time for myself to write down some of these jotted notes and took some little breaks during activities to do it out of everyone else's sight.

The research diary was a complement for the fieldnotes where I also made daily recordings. The main difference with the fieldnotes is that I used the research diary to write down my reflections instead of more objectives annotations about what I observed. As O'Reilly (2005) argues using a diary helps to maintain a distance from the fieldwork and the recordings of reflections and thoughts allowed me 'to begin pulling ideas together ready for analysis' (p. 99). Such preliminary reflection on what I was observing allowed me to focus my following observations and to decide what further information could be relevant.

During this stage, I spent between six and eight hours a day in the field during four or five days a week. I decided to do it like this in order to have sufficient time to do observations in the field but also to have time to work away from it. As O'Reilly (2005) points out, it is important to stand back from the culture or group studied to reflect on what is happening there. Taking time away from the field provided me with that space needed to reflect about it and also to carry out tasks such as writing up fieldnotes, working on my interviews or preparing next steps on my fieldwork amongst others. Given the inductive approach that I was taking, finding what was relevant to my research was an ongoing process influenced by the data that I collected during the process and therefore having time away to work on such ongoing process was key during my fieldwork.

The distribution of these hours varied so I had the opportunity of experiencing what happened during mornings, afternoons and evenings in the place and also covering weekdays as well as weekends. I made a particular effort to try to participate in as many different activities and events as possible, so I could have a wider picture of all that was taking place. Thus, I rarely participated more than two times in any of the planned activities, as doing so would have prevented me from participating in all of them as it was my aim. At the end of this stage I had had the opportunity to participate in all the regular activities planned, in several occasional events and in plenty of day to day activities. This includes taking part in activities happening in all the different facilities of Santiago 1.

However, one of the activities that I did not have the opportunity to witness was the free time spent by the residents outside the care home during late afternoon/evenings. As explained to me by one of the educators, their free time was generally used by residents to have some 'time away from educators' as it was the only time in a day that they were doing something without their supervision. Furthermore, I was told that some residents use this time to have a beer, smoke cannabis or even beg for money or cigarettes and therefore they did not want educators to be around. Thus, following this this discussion it became clear to me this was not an activity I should seek to have access to.

Stage 3: Interviews.

At this stage I continued to carry out my participant observation but I also scheduled and carried out the interviews with the educators that I had planned on doing. I decided to do the interviews at the latest stage of my fieldwork for two reasons. Firstly, I planned to carry out interviews with little structure but aiming to discuss several aspects that had emerged from my participant observation, as I explain later in this point. In order to do it, I had to allow myself time to carry out the participant observation first and to reflect on the data I was obtaining from it before doing the interviews. Secondly, I believed it was important to build some rapport with the educators prior to interviewing them. This way, the interview was not carried out by a complete stranger, an outsider,

but by someone who had spent time with and built more trust. As Brinkmann and Kvale (2009) point out, it is through their relationship how the researcher and the interviewee produce knowledge, and having built up that relationship previously allowed interviewees to participate in the interview feeling more relaxed and willing to share information with me.

The interviews were carried out while educators were on shift. I decided to do it this way so they did not had to make an additional effort to use their own free time to participate in the research, since I believed this could have negatively impacted on their willingness to participate in the interviews. For this I requested authorisation from the director of Santiago 1 who told me to talk directly to the interviewees so they could organise with the shift coordinator the better time to do these without having an impact on the daily running of the care home. It turned out to be an easy task, since the educators quickly reorganised their tasks to allow sufficient time for the interviews.

The interviews were recorded since I wanted to be able to focus on the conversation and not having to take notes during it. As Robson and McCartan (2016, p.274) points out, it is 'essential that you [researcher] take a full record of the interview'. This allowed me to carry out interviews in a more natural way and to make interviewees more confortable while having the opportunity to get back to what exactly was said later on during my analysis of the data, avoiding this way the limitations of memory (Heritage 1984 cited in Bryman 2016, p. 482). I was concerned that the fact of having a recorder in front of them could influence their answers and make them less willing to share information so I made clear the use I was going to give to the recording material. To each participant I requested to sign an informed consent form indicating that they were aware that I was recording the conversation and the use I was going to give to that material, including maintaining confidentiality and anonymity and not sharing the material with third parties not involved in my research. These measures, as Greener (2011) points out, contributed to minimize the possibility of problems emerging during the interview as the participants were aware of what was going to take place and how the information was going to be used and shared. I believe this allowed them to be less worried to talk freely about the aspects we discussed during the interviews.

Collecting data

During my interviews, I aimed for two different things. Firstly, I tried to corroborate what I had previously observed. I decided to carry them out not at the beginning of my fieldwork but towards the end. This way I was able to confirm whether my observations were accurate or not, but also I had the opportunity to ask the interviewees for further details about the intervention. Secondly, I tried to obtain information regarding the social pedagogic intervention which goes beyond what I had observed. This information was very valuable in terms of guiding following observations and narrowing down to find what the keys of the social pedagogic approach were.

Although I planned to do interviews with little structure, there were topics in particular that I wanted to discuss with the interviewees related to what I had had the chance to observe previously. Thus, for the interview I prepared a table with the topics derived from my observation and used it as an interview guide (see appendix 1) which served me as a framework to cover those topics (Arksey and Knight 1999). This guide included some main aspects which were used to 'ensure that the broad topic will be explored' (Rubin and Rubin 2011, p. 134) but always allowing the flexibility required to also explore topics that emerged during the interview and were not foreseen.

In addition to discussing the main aspects present in the interview guide, I also did follow-up questions. These questions cannot be prepared in advanced (Arksey and Knight 1999) but I improvised them during the process of the interview in order 'to get more depth and understanding about an idea, a concept, a theme, an event or an issue suggested by the interviewee that you (I) feel speaks to your (my) research concern' (Rubin and Rubin 2011, p. 173). Therefore, before the interviews I could only be mentally prepared adopting a 'curious, persistent and critical attitude' (Brinkmann and Kvale 2009, p. 135) in order to be ready to make follow up questions to my interviewees.

In order to select the number or participants for my interviews I chose to carry out a purposive sampling, which according to Bryman (2016) allows researchers to select cases or participants strategically depending on their

relevance in relation to the information that is sought and the research questions that want to be answered. As Arksey and Knight (1999) point out, the choice of sampling methods in qualitative research depends on practical matters and the degree of generalizability wanted to achieve by the researcher. Considering that the generalization of findings was not my priority with this research (see generalization later in this chapter) I considered that having the opportunity to select those participants which I believed could provide me with richer information was more critical for this research.

The choice of participants for my interviews was done according to the following criteria. Firstly, some educators were not particularly interested in taking part in the interviewing process, so I chose from those who seemed willing to do it. Secondly, I approached educators who I had spent more time with and had built some rapport with me since I considered that this was key if I wanted to have fluid and fruitful interviews. Finally, the interviews were done trying to cover educators with different roles and experience within Santiago 1 so I could obtain information from their different perspectives. Thus I interviewed members of the psychologist team, educator coordinators, educators who had previously being resident in the care home, educators with short experience at Santiago 1 and also educators with longer experience in it.

In the end I carried out 9 interviews and decided I had gathered enough data with them. I could have tried to do more interviews but I decided not to because I was staring to reach a point where the information I was receiving was repeating from other interviews so I considered I had reached a saturation point. This is commonly the point in researches with an inductive approach when the researcher considers that no new relevant information is going to be generated from further collection (Strauss and Corbyn 1998).

Interviewing residents

During the design stage of my research I faced an ethical dilemma about whether to interview residents at Santiago 1 or not. I could find ethical reasons for both interviewing residents, making them active participants of my research, and also for not doing it as I explain next.

On the one hand I considered that participation of children is an important aspect of carrying out research. It is commonly acknowledged in the UK that the participation of children is essential in order to improve policy and services affecting them (NYA 2007). The UN Convention on the Rights of the Child (UNCRC) in 1989 set the foundation of a policy framework in the UK that highlights the rights of children to be well informed and having their views heard, and this can be applied to research with them (UNICEF 2008). Thus they have the right to be treated as competent research participants according to the current law, policy and guidance in the UK (Alderson 2005). In the past there was a tendency to ignore their voices and views in many aspects affecting their lives (Boylan et al., 2000), including research carried out with them (Smith, A. 2011), and the ratification of UNCRC became a turning point for the inclusion of children as active participant of the research. Some of the benefits of including children as active participants in the research carried out with them include that they have greater control over it, they enjoy it more and the outcomes of the research reflect more their views and experiences (Alderson 2005).

On the other hand, I considered that carrying out formal interviews with residents implies a further intrusion in their daily lives. My experience as social educator in residential care services has allowed me to learn that children in care face numerous situations that divert their lives from being normalised. Having to participate in meetings and reviews, follow health and safety procedures or see staff members and other adults coming in and out of their home can lead to institutionalisation and be distressing for them. Being a researcher carrying out a participant observation in site at Santiago 1 made me already feel aware that I was being intrusive in their daily lives so I tried to keep a low profile and allow relationships to develop as naturally as possible in order to minimise the impact of my presence. Having to ask them to be involved in formal interviews was against this approach and could have a negative impact on them.

Finally, after considering the pros and cons of interviewing residents as part of my research I decided not to do it, even if that meant that I was going to keep them as passive participants of my research. One of the reasons that have a strong influence in my decision was the focus of my research. My aim was to

learn about the characteristics of the social pedagogic intervention carried out at Santiago 1 and for this the views of educators on how it was planned and develop was essential. Meanwhile, the views of residents would have contributed to understand the experiences and outcomes of such intervention from their perspectives but did not add as much value in relation to learning about the conceptualisation and strategies behind this. Furthermore, interviews take long time and effort to be transcribed, translated and analysis, and the amount of time I had available for carrying out my research was limited. Thus, I considered that the benefits of interviewing residents for my research and for the residents did not outweighed the negative impact that it was going to have on them and the effort required to develop them, leading to my decision of not carrying out those interviews.

Data analysis

The data analysis that I carried out was driven by the inductive approach of this research. An inductive approach for data analysis has the purpose of allowing findings to 'emerge from the frequent, dominant, or significant themes inherent in raw data' (Thomas 2006, p.238). It is widely considered that the inductive approach in its purest form is the grounded theory method which 'focuses on creating conceptual frameworks or theories through building inductive analysis from data' (Charmaz 2006, p.187). Thus, my method of analysis consisted in trying to build the findings of the research from the data collected as this is ideal when using an inductive approach. However, my approach to data analysis was not as purely inductive as the grounded theory for several reasons.

On the one hand, a purely inductive approach to data analysis like the grounded theory requires the use of theoretical sampling. This implies that the researcher 'collects, codes, and analyses his data and decides what data to collect next and where to find them, in order to develop his theory as it emerges' (Glaser and Strauss 1967, p. 45) in a process in which data collection and data analysis are not separated in time. This would have been ideal for my research, and for any with an inductive approach, but the limitations in term of time for my fieldwork made me dismiss the idea of applying it. Instead, the analysis of the

data was carried out completely after the fieldwork using the data gather during my time there.

However, what I could do was using reflection during my time off the field to prompt ideas to apply in my data collection. Thus, I sought to create a dialectic influence between the data collected, my reflection on it and further data collection so I could benefit from the ideas emerging from it. This way, despite not doing the proper analysis during data collection that a purely inductive approach such as grounded theory would have required, my data collected could still benefit from this approach.

On the other hand, my coding process, was not purely inductive, in the sense that I did not entered it with a neutral and objective perspective, but with my previously acquired knowledge, as I explain in the section below.

Coding

Data collected using qualitative methods is generally 'rich in detail but unwieldy and intertwined in content' (Ritchie et al. 2003, p. 220). Thus, it was required that I submitted my data to a process of coding that consisted in breaking it into parts in order to facilitate its analysis (Bryman 2016). Coding involves subjecting the data to a process of several stages consisting in gathering data into themes or categories that help the researcher to develop theories from it (Richards and Morse 2007). These stages, suggested by several authors such as Bryman (2016) or Flick (2014), and which I followed during my data analysis, are:

a) open or initial coding when the data is broken into concepts

b) axial or structured coding when I searched for relationships between these concepts, creating broader categories that include some of these concepts

c) selective coding when I looked for relationships between the different categories created previously and developed themes that encompass them

As I have previously indicated, my approach to coding was not purely inductive, since an inductive approach to data analysis requires a coding process that is

not influenced by existing ideas or concepts (Benaquisto 2008) so all the theory generated comes strictly from the data collected. However such view is not shared by all authors, since many believe ‘that this is not possible given most researchers' knowledge of their discipline and of the particular areas they are researching’ (Benaquisto 2008, p. 88-89). This was my experience during my research, since already from the data collection process I was inevitably reflecting on what I was observing and discussing in the light of the pre-existing knowledge about social pedagogy, and entered the analysis stage having done so. This way, the coding process was influenced by already developed theoretical notions so my findings were not emerging uniquely from my raw data, as a purely inductive approach would have required.

Thus, I decided to take an approach to coding which was mainly inductive but had some deductive elements, since the influence of prior ideas and framework means that the inductive process is also shaped by deductive processes (Kuczynski and Daly 2003). Linneberg and Korsgaard (2019) point out that incorporating both inductive and deductive elements allows the researcher to remain ‘open to surprises in the data while at the same time staying attuned to existing theories’ (p. 264). This way I could make use of my knowledge in the field and my reflection on it, taking a ‘perspective of theoretical sensitivity to existing concepts, ideas, and theory’ (Kuczynski and Daly 2003, p. 383) while having an open view on my data in order to extract relevant concepts that complemented and/or added to previously developed theories.

In order to do it I commenced my initial coding process using concepts that originated from the existing theory on social pedagogy and that I had identified in my data, alongside other concepts that were emerging from it. Then I searched in my data for information related to these concepts and there my coding process begun. Some examples of pre-existing notions that I used at the beginning of my coding process were risk management, formal/informal education, experiential learning, importance of relationships, and the political aim of social pedagogy. These notions informed the initial coding but then developed during the coding process in different ways. For instance, the approach to risk ended up being a wider category which included other

concepts within it, while the duality formal/informal education incorporated a third non-formal element.

The process of coding finished once I reached a theoretical saturation of the data, which is the point when doing further collection or analysis of data does not add more valuable information to the researcher (Strauss and Corbyn 1998). Thus, I continued carrying out the coding process until I considered that I had extracted all the relevant information available in the data and no new ideas were emerging from it.

In order to facilitate my coding process I made use of the CAQDAS (computer-assisted qualitative data analysis) software called NVivo, which I chose for being familiar with it. The advantages of using computer software are its efficiency storing the data under different labels and categories (Richards 2005) and the speedy means that they provide to retrieve it rapidly (Fielding and Lee 1991). I experienced the benefits of using this software to assist my analysis of the data but taking into consideration that, as Carvajal (2002) points out, they are just a tool and it was up to me as a researcher to do the 'process of interpreting and building results from the categories and the relations among them' (p. 3) that the coding process required.

Appendix 2 shows, as an example of my use of NVivo, some of the nodes that I used during my data analysis towards the end of the coding process when most of the concepts, categories and broader themes had been already developed.

The end of the coding process meant that my research findings had been taken shape and were ready for writing them up. I used the same structure that emerged through the coding process to report the findings obtained, classifying them in themes and categories which make it clearer to understand.

3.1.3. Ethical and other considerations

Ethics

No research is free from raising ethical issues and these cannot be ignored (Bryman 2016). Addressing the potential ethical issues of this research is not

only a requirement imposed by the ESRC (FRE 2012) but also essential to guarantee that the researcher has done everything in their power to avoid a negative impact on all the individuals involved in the research. Following Greig and Taylor's (1999) indication that it is important that 'all potential ethical dilemmas have been considered prior to embarking upon the research' (p. 144), I reviewed the potential ethical issues that could emerge during my research and decided how to deal with them in order to make sure that the research is ethically sound.

In order to review the potential ethical issues of this research I followed the ESRC's Framework for Research Ethics (FRE 2012) and its six principles which are:

- Research should be designed, reviewed and undertaken to ensure integrity, quality and transparency.
- Research staff and participants must normally be informed fully about the purpose, methods and intended possible uses of the research, what their participation in the research entails and what risks, if any, are involved.
- The confidentiality of information supplied by research participants and the anonymity of respondents must be respected.
- Research participants must take part voluntarily, free from any coercion.
- Harm to research participants and researchers must be avoided in all instances.
- The independence of research must be clear, and any conflicts of interest or partiality must be explicit' (p. 1 – 2).

Although these principles generally cover the main ethical standards in the UK, I needed to take into consideration that my fieldwork was going to take place in Spain where the ethical standards could be different. For cases like this, the ESRC's Framework for Research Ethics suggests that the researcher should collaborate with a local research organisation (FRE 2012). Thus, I searched for and found that the local University of Salamanca has a 'service for international relations and cooperation' which I contacted prior to start my fieldwork in order to learn the local ethical requirements for research. Furthermore, I discussed this with the gatekeeper for my case study and director of Santiago 1 to also

have another view on this. What I found is that the principles of the ESRC cover all the ethical requirements in Spain and therefore I could proceed with my fieldwork.

Ethical approval

In order to guarantee that this research complied with the ethical standards of the University of Edinburgh, I submitted an ethical self-audited ethical review. In this review the potential ethical issues of this research were identified, and the measures taken to avoid them explained. Therefore, my research design was studied by a research ethics committee who gave their approval and ensured that it met the ethical standards before I proceed to carry it out.

Informed consent

As it can be observed in the principles of the ESRC's FRE, informed consent plays an important role on making a research ethically sound, since the lack of consent of the individuals involved in a research study raises ethical issues (Bryman 2016). Taking this into consideration I decided that I was going to ask for informed consent of all the practitioners involved in the social pedagogic intervention at Santiago 1 by doing the following steps:

Firstly, I developed a research information sheet with detailed information about the purpose of my research, how data were going to be collected and treated, the measures taken to ensure confidentiality and anonymity and made it available to them (see appendix 3 and 4). Secondly, I asked for consent from all the practitioners involved. This was done individually and I gave them reassurance that their decision to whether participate or not would not be known by anyone else. This way I tried to ensure a voluntary consent free from coercion which, as Gallagher (2009) highlights is a key aspect of the informed consent. I discussed with them the details of my research and I asked them to give written consent by signing a consent form (see appendix 5 and 6). Thirdly, I also prepared particular consent forms to be filled by participants in the

interviews I was planning to carry out so they could understand what we were about to do and agree to have the interview recorded (see appendix 7 and 8).

In addition to this, I decided also to obtain verbal informed consent from the young people who live in the residential care institution that was going to be studied. I agree with Greig and Taylor (1999) who argue that as well as from significant adults, when possible, informed consent should also be sought from children involved in the research. The case study implied that I was going to be doing research in situations that involve the participation of these young people who would be 'aware subjects' (Alderson 2004, p. 100) of the research, and therefore I considered that it was essential that they also provided their consent for my research.

In order to do this, I prepared a research information sheet with similar information as I did for practitioners but adapted to young people so they could understand it better (see appendix 9 and 10). I left copies of it available for them to pick up and read. Furthermore, I explained to them during a residents assembly what my research was, how I was planning to do it and their role in it, and I invited them to question me during this meeting.

As Gallagher (2009) points out obtaining informed consent from children is complex as they can be easily influenced by peers or adult gatekeepers so I tried to stress that the choice was completely theirs. I invited them to discuss any concerns they could have about their participation in the research with me or with one of the practitioners who they felt close to. I made clear to them that they had at any point the opportunity to refuse my presence in particular situations where they could think I could have made them felt uncomfortable. This way I pretended to avoid an invasion of their privacy which, as Bryman (2016) points out, would pose an ethical issue.

Confidentiality and anonymity

Other aspects that can be considered, according to the ESRC's principles, as essential to avoid ethical issues during my research are confidentiality and anonymity. These are important aspects to be taken into consideration because

without them, the material produced from the research could potentially have a negative impact on participants and harm them (Bryman 2016). This was particularly true for my research where I was planning to observe how social pedagogues carry out their jobs and residents in their placements. Thus, my report could expose, for instance, poor practices of the social pedagogues that would mean a threat to their jobs or certain behaviours that would embarrass the young people involved. In order to avoid this, I chose to not use names when reporting the findings of my research to help guaranteeing the anonymity of the participants. However, as Bryman (2016) points out, there may be occasions where avoiding the use of real names is not enough to ensure anonymity because certain information might disclose the identity of the person involved. Therefore, I took this into consideration during my report of findings through a process of constant reflection on the potential implications of what I was reporting.

Another issue worth noting regarding confidentiality is the potential ethical problems that could have derived from a situation in which I had witnessed or been told about illegal behaviours or situations that threat my or other's physical or mental integrity. Given the profile of the young people residing in the place that I studied, this was something that could have potentially happened. For these cases the ESRC´s FRE (2012) suggests that the researcher identifies the systems or people who need to be informed in those situations. Thus, I decided that before I started my research I was going to discuss this with the manager of Santiago 1. He was very complying with this and told me the established procedures in relation to these situations and how I should proceed if they occurred. Luckily I did not have to make use of them but it was better knowing what to do should a complicated situation had occurred.

Quality considerations

Generalizability

The main criticism of a case study in terms of its trustworthiness as scientific research is that 'findings deriving from it cannot be generalized' (Bryman 2016, p. 64) and this has been troubling for its use (Yin 2003; Flyvbjerg 2006; Thomas and Myers 2015). Generalization of the findings of a research project, being able to extrapolate those findings to other subjects not taking part on the research, is usually of crucial importance when considering the validity of a research, particularly in traditional academic approaches 'which have emphasised neutrality and a positivist objectivity as prerequisites for serious science' (Fals-Borda 1987, p. 330) . Case studies, given that the researcher obtains all their findings from a particular individual case, offer 'little basis for scientific generalization' (Yin 1994, p. 9) and therefore their validity is often under scrutiny.

However, it has been argued that qualitative approaches need to abandon the traditional concepts of validity, generalizability and reliability (Mason 2018; Thomas 2015) as these are only relevant in the positivist tradition (Silverman 2005). Hence, the need of being able to generalize the findings of a research in order to make it scientific valid is contested, particularly in research projects with a qualitative approach. While, as Silverman (2005) points out, 'generalizability is a standard aim in quantitative research' (p.126) based on surveys and statistical analysis, it is not necessarily the case in research based on an ethnographic case study. It is going to depend on the aim of the researcher when choosing to carry out the case study since, as Thomas and Myers (2015) argue, they 'do not always want or need generalization' (p.15). Actually, according to these authors, a case study is often chosen as research method precisely when the researcher is more concerned about getting ´a rich picture and gaining analytical insights about it´ (p.15) than the possibilities of generalizing their findings since 'the real business of case study is particularization' (Stake 1995, p.7), not generalization. Along those lines,

Stenhouse (1978) had already pointed out that a ‘case study does not preclude an interest in generalization’ (p.49) and this was my approach in this research.

In the literature review which I carried out for this research showed that social pedagogy is a complex and dynamic, with a strong relationship with the social context in which it is embedded. These particularities mean that aiming to obtain generalizable findings from the study of a social pedagogic intervention would be too difficult a task. Thus, I decided that for this research it was more appropriate to focus on obtaining that rich picture and analytical insight which Thomas and Myers (2015) argue about than trying to obtain findings which could be generalized and applied to other cases.

While, as it has been argued, traditional concepts of generalizability rooted in the positivist tradition, does not apply equally to qualitative ethnographic researches like this, it cannot be overlooked that such research needs to be carried out at a high standard in order to produce scientific material. Hence, Mason (2018) argues that ‘qualitative researches should be accountable, and their research should be rigorous and of high quality’ (p.40) which can be achieved through ‘critical and reflexive practice’ (p.40). Therefore, I decided to take an approach to this research which included a great amount of reflexivity as explained next.

Reflexivity

Reflexivity has played an important role during the process of this research. The importance of reflexivity is highlighted by Bryman (2016) who indicates that ‘social researchers should be reflective about the implications of their methods, values, biases and decisions for the knowledge of the social world they generate’ (p. 393)

Furthermore, reflexivity is seen by D´Cruz and Jones (2014) as a moral action for value-led social professions where the commitment to ethical research acquires a major importance, which goes beyond complying with a good research practice.

For this research I considered important to take a reflexive stance particularly due to the implications of the methods I have chosen to use. As (Hamel et al. 1993) point out, case studies can be considered biased researches 'introduced by the subjectivity of the researcher, as well as of the field informants on whom the researcher relies to get an understanding of the case under investigation' (p. 23) and therefore I decided not to try to avoid such bias at all costs, since I do not think it is possible to do, but to use a reflexive stance to deal with it and have a critical approach in all stages of this research.

A reflection on my fieldwork

In this section I want to present an overview of my personal characteristics and a reflection of how they have influenced the design, development and outcomes of my research at Santiago 1.

As stated in the introductory chapter I have a Spanish background, qualifications in the social pedagogy equivalent in Spain called educación social (CGCEES 2013) and working experience in residential care in England and Spain. All these situated me in a favourable position in order to make a contribution to the development of social pedagogy in the UK. However, thanks to engaging in a reflective approach to this research, I also became aware that such background, experience and knowledge would have an impact on my research at all its stages. From its design to its report, this research has been influenced by me as a researcher and, although I have taken measures in order to try to reduce such impact as explained above, it has not been my desire to claim neutrality in my research but to make anyone accessing this research aware of how it has been shaped by my personal and professional characteristics. As mentioned earlier, case studies are sometimes considered biased researchers so, although I do not think that it reduces its value considering how rich in details and nuances they are and the contribution that they make to knowledge, readers need to be aware of how I might have impacted its outcomes.

During the design stage of this research, I learned that carrying out a participant observation means that I, as a person, was the 'key instrument' for collecting

the data (Denscombe 2007, p. 221). This implied that what I observed was going to be affected by my ‘selective attention’, ‘selective encoding’, ‘selective memory’ and ‘interpersonal factors’ (Robson and McCartan 2016, p. 324 – 5). As Thorne (2000) points out the data collected can be shaped by ‘understandings that the researcher has about what might count as relevant or important data in answering the research question’ (p. 68). In order to counteract this, I decided to take measures which help to reduce its impact such as using carrying out an early recording of observations and a methodological triangulation of different data collection methods (Stake 1995) that included my observations in the field but also several interviews with the perspective of some of the educators in the field.

During the development of my fieldwork I became aware of the fact that some of my personal characteristics were influencing how I had been able to access the research site and my data collection. Regarding my access to the research site I consider that the fact that I had a background on social pedagogy and was doing a doctoral study was seen as something valuable and admirable that contributed to their authorisation for access. This is a clear indicator of how my status as a qualified professional and doctoral student played an important role in allowing me to have and easy access to the research site, and made me wonder if I would have been granted access should I had not had such status.

My data collection was an aspect that was highly influenced by my personal characteristics and background too and facts such as that I am a white heterosexual male, middle age, middle class, able bodied and native Spanish speaker have had an impact in my possibilities of collecting data and how I had access to it. As D’Cruz (2000) points out, it is widely acknowledged that in research dynamics of power influence the possibilities of the researcher to access and collect data. I consider that my personal characteristics and status put me in a situation of power that facilitated me to carry out my research but also influenced the data collected as I explain next.

On the one hand, I consider that my personal characteristics played and background an important role in helping me building rapport with both educators and residents. As a person from outside Santiago 1 I had never met educators

and residents in the care home. This could have had a negative impact on my possibilities of engaging with them during my participant observation, but my position of power helped me to be positively regarded by them and to build the rapport needed for my research. However, I consider that it is possible too that my personal characteristics and power status influenced what residents and educators became more attached to me and provided me with information for my research. I consider that this has had an impact on my data collection for this reason, but also that some educators might have been more prone to share certain details of their intervention with me given my status in order to impress me or show that they were doing what they consider a good job. All this needs to be bared in mind when observing the findings of this research.

On the other hand, I also became aware that my personal characteristics and background affected my approach to the fieldwork and the data collection. My own social positioning facing this research and my previous knowledge in the field has surely influenced what aspects of the educative intervention at Santiago 1 have caught my attention and the interpretations that I made of them. Positionality in research is the social position from which a researcher carries out a research, and even if a researched tried, it can never be free of such positionality (Hall 1990). Positionality it is considered a space where objectivism and subjectivism meet (Bourke 2014) and it is that subjectivism that influences how the research is carried out by a particular researcher. Thus, I believe that if this research had been carried out with a researcher with a different positionality, such a person from an ethnical minority or a feminist woman, the data collected and how it would have been analysed would have probably brought a different perspective to the findings of this research. This does not compromise the validity of this research, but I consider that it is important to acknowledge the factors that have influenced it.

Language

Another aspect that I had to take in consideration was the language used in the placement where I carried out the case study. The main language used there is ‘Castellano’ which is widely known as plain Spanish. Since I am Castellano

native speaker, it was not an issue for me to carry out my participant observation and interviews. However, this required that, in order to make it available for the readers of my research report, some of the data collected had to be translated. In particular, I needed to translate the part of the interviews that I have used to report findings.

Since translation is a process that is very time consuming, and given the limitations of these research study, I considered that the best option was to translate only those pieces of data that I considered relevant to my research and which were included in my research report. This meant that I had to deal with information in English (from fieldnotes and diary) and Spanish (from interviews) during my data analysis. This posed an extra difficulty for my analysis and therefore I had to be cautious in order to make sure that relevant information was not missed due to the use of both languages.

Another implication of the language difference was that I found difficulties when having to translate certain Spanish words which do not exist in English or have a different meaning or connotation, and which were important to the understanding of what interviewees wanted to transmit. In those cases, I decided to maintain the translation as literal as possible. This means that in some cases readers might find expressions or words that are not commonly used in English but I believe that it was more important to be closer to the original word than adapting it for a better understanding of the audience as this could provoke that certain nuances or details get lost in translation.

Conclusion

This chapter has presented the methodology use for this research. It has shown the main philosophical assumptions underpinning it such as the realist epistemological standing point. Then it has explained the qualitative approach taken as the best approach to answer the research questions developed for this research.

The chapter has also explained the use of case study as the main research method for this research and the reasons behind the choice of this method, as it

was considered the most appropriate given the qualitative and inductive approach taken for this research. In this section it has also been explained the choice of Santiago 1 as a care home that exemplifies a residential care intervention based on social pedagogic notions.

Participant observation and semi-structured interviews have been described as the ethnographic methods for data collection and the combination of these two methods have provided a rich and valuable data. This chapter has shown that the participant observation was designed to be carried out throughout the fieldwork so aspects related to the setting, the people and the events could be observed, and the data was collected using fieldnotes and a research diary with information observed by the researcher. That information was used as a guide during semi-structured interviews with educators, allowing the observations of the researcher to be complemented with further data.

This chapter has also described the process followed by the researcher to analyse the data collected during the fieldwork. The data obtained during the participant observation and interviews was analysed through a coding process that allowed the researcher to create categories that helped to understand all the information present in the data and which were used to present the findings of the research.

The end of the chapter has shown all the considerations taken by the researcher during the design of this research. Ethical considerations have been given an emphasis due to the importance of developing a research that is ethically sound, while other considerations that have been discussed aimed to contribute to achieve a good quality in the research.

The next chapter focuses on the characteristics of the residential care home chosen as the case study for this research: Santiago 1. As a case study, this research presents findings obtained from a fieldwork carried out at this particular care home, and the following chapter aims to provide a picture of the characteristics of Santiago 1 and the people involved in it in order to allow for a consideration of the contextual factors when observing the findings of this research.

Chapter 4. Santiago 1

Introduction

This chapter is a description of the care home 'Santiago 1' in the city of Salamanca, Spain, which was chosen as the case study for this research. As a case study, this research includes some ethnographic methods of data collection described in the previous chapter which requires the researcher to provide a detailed picture of the case studied so its contextual factors can be taken in consideration when analysis the findings of the research. The aim of this chapter is to paint such detailed and clear picture through an explanation of the main characteristics of Santiago 1 as a care home and the people involved in it.

The chapter commences with a brief overview of the historical development of Santiago 1 as a care home since its creation in 1971 before showing the main regulations set by the government of the region of Castilla y León for children's homes that directly affect Santiago 1.

The chapter continues offering an explanation of the facilities of Santiago 1, including a detailed description of the different buildings and the use given to them. Afterwards, it shows the profile of the children residing in the care home and the reasons that lead to their placement at Santiago 1 and provides some statistical information about their characteristics.

The next section of this chapter describes the team of educators and other professionals working at Santiago 1 and their different roles within the care home before explaining the flat hierarchical structure they present as part of their educative intervention.

The chapter concludes with a description of the arrangements of the daily living and shows a picture of how the different times of the day are planned, the activities taking place in each of them and how the team member get organised and carry out these activities.

4.1.1. Brief look at its history

Santiago 1 opened its doors for the first time in 1971 as a home and a school from illiterate children coming from rural areas of the city of Salamanca. The home and school was created by priests from Escolapios order as a result of their vocation to educate the poorest members of the society. Their goal was to both help them becoming literate and learning a profession as a means to improve their situation in society.

However, through the years Santiago 1 adapted to the changing times and the different needs of those who they educated. Thus, in the 90's it underwent major changes to its nature. Hence, it was no longer managed by priests but by a team of professional educators, who shared their religious beliefs. Nowadays, although some of those educators still remain, the educators' team have secularised and no longer necessarily hold religious beliefs. On the other hand, it became a service for children in care primarily. Agreements were made between the care home and regional social services to receive children in care, becoming the care home that it is today.

Despite of the changes in nature, management and features of the service, Santiago 1 has remained focused in their aim to provide opportunities to improve the social integration of those who reside in it. This is an aspect that becomes clear in some of the characteristics shown in the findings chapter of this research.

4.1.2. Regulation

As explained in the previous chapter, regulation of children's homes in Spain is set by the government of the region, known as 'Comunidad Autónoma', which sets the requirements for residential care. Santiago 1 is placed in the city of Salamanca, which belongs to the region known as 'Castilla y León'. This region thus, has its own regulation for children's homes established in a law called 'Decreto 37/2004' (BOCyL 2004), which regulates the following aspects:

- What is considered a children home and who they can care for.

- The different types of care homes according to their purpose and characteristics.
- The authorisations required to open a care home and the procedures to do so.
- Requirements for the care homes in terms of facilities, staff, organisation and intervention, including some specific requirements for certain types of care homes.
- Control measures, including inspections.

Some of these regulated aspects which can be found in the mentioned Decreto 37/2004 and affect directly Santiago 1 are:

- Children care homes are exclusively for children under protection system, or children in care, and young offenders serving a sentence that places them in temporary residential care. These homes must aim to meet their physical, emotional, psychic and social needs, supporting them to return to their families of origin or prepare them for autonomous life.
- One care home can include several types of care homes within it, following the particular regulations for each of them.
- The care home must follow health, safety, technical, hygiene, evacuation and fire prevention, and accessibility policies.
- Care homes must be placed near community services.
- The facilities must meet requirements in terms of light, water, sewage, wiring, communication appliances, and so on, and must include independent dormitories, common areas and a furnished kitchen. It also must have a first aid kit and pedagogic and leisure material according to the age of the children residing in it.
- The staff of a care home must include a manager, a therapeutic team (can be internal or external), an educator for each six residents, and an optional team for services (cooking, cleaning, maintenance) who must be provided with basic educative notions to contribute to the educative intervention. Each resident must have an educator who is in charge of

their case and works closely with them and with the children's social services.

- The care home must have a general plan of intervention, which states the aims of their intervention and the running of the home, and individualised educative plan (PEI) for each resident, and produce an annual report of their intervention.
- The children over 12 years of age must be given the opportunity to contribute actively through suggestions in the running of the care home.

This regulation has a direct impact on the characteristics Santiago 1 in terms of facilities, members of the staff team and the educative intervention developed. The following sections of this chapter show some of the arrangements in terms of buildings and staff team

4.1.3. Facilities

Santiago 1 has grown considerably since it opened its doors. Initially it was a single building with room for around 50 residents but nowadays incorporates a system of 6 satellite homes accommodating almost another 50 young people. During the day all residents gather at the main building where they eat and prepare for the activities taking place and when night time approaches each of them goes to where they are placed which might be at the upper floor of the main building or at one of the satellite homes.

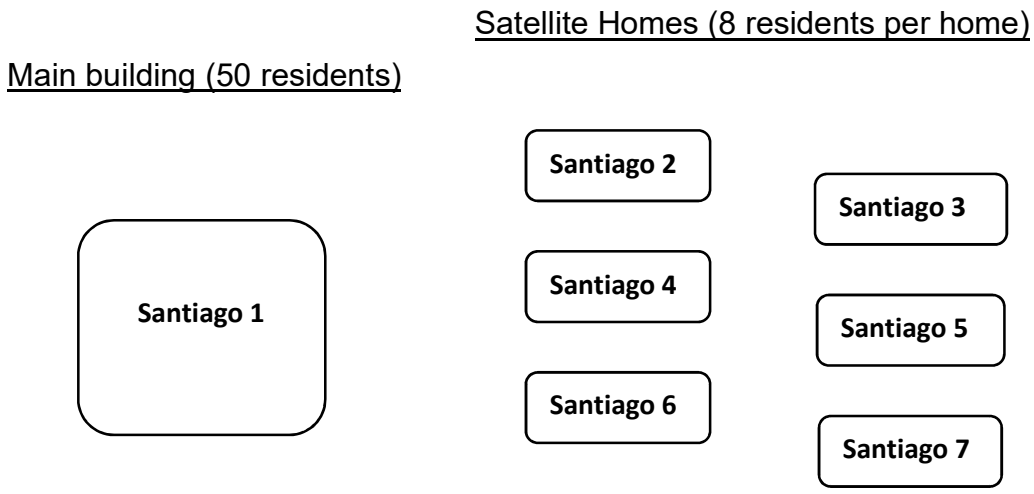


Figure 3. Structure of homes at Santiago 1

Main building

The main building is situated within the city of Salamanca, next to a river and it is a detached building partially surrounded by walls. Around it there are some open spaces, buildings of flats and a museum. Close to the main building there can be found some small shops, a bridge that crosses the river and a very popular touristic place that receives plenty of visitors every day.

This building serves as the gathering place where all residents spend the majority of the day. Inside it, there are three floors: a basement which can be accessed through inside stairs going down from the ground floor, the ground floor, and an upper floor that can be access by stairs too.

In the basement there is a big kitchen with several cooking appliances and storage rooms, some of them refrigerated. The kitchen is connected with a room that serves as a place for eating meals but also for other indoor activities when required. The room includes around 20 tables with chairs, each table with space for eight people, and one of the sides of it is all made of windows what allows plenty of light to come from the outside area at the back of the house. At the back of the room, there is a bar installed, with material to allow residents studying catering to practice. Occasionally they prepare dinners that are served

by these residents as if they were in a restaurant so they can improve their skills and put what they have learned into practice.

Following the corridor that give access to these rooms there is an exit to the back of the house, where there is a big outside space. That space is surrounded by a wall and has a service door used only as a fire exit and for transporting goods in and out of the house. There is an open space for playing sports and doing other activities, a marquee for the circus school and another roofed space used for workshops and storage.

In the ground floor, after crossing the main door, there is a small lobby with a couple of benches and access to the stairs going to the upper floor on the right and to the stairs leading to the basement on the left. In this space there is a big wall notice board with announcements, including the activities organised for the day and the cleaning and kitchen collaboration shifts. Following a corridor there several rooms for studying and doing workshops and some common areas to gather for different things. One on the rooms has around 20 computers set against two of its walls and desks and chairs in the middle of it facing a chalkboard placed on another wall. Another two rooms are filled with desks, chairs and storage furniture with scholar material, games and books. A last room is a prayer room, decorated to one side in Catholic motives and in the other side with Muslim motives. There are also two bathrooms, one for boys and one for girls, with several sinks and toilets each of them.

In the upper floor there are three small rooms on the left used for administrative purposes. One of them is used by the deputy director as their office for visits or private matters. Inside it there is a desk with a computer and bookshelves against one of the walls. From this office there is access to another room used as storage for documentation and is permanently locked up when not in use. The third room includes two desks with computers and bookshelves and a small table with some chairs. This room is used by the educators team to communicate with outside services by computer or by phone, to carry out one to one meetings with a resident, or as a private room for meetings with visitors, such as family members, amongst other uses.

Following the corridor there are several rooms. Five of them are bedrooms for residents. There are big rooms with two bunk beds each, accommodating four residents. In the room there are also wardrobes where residents keep their belongings. There are another three smaller rooms, used by the educators doing the night shift. Each of them has a bed, a desk and bookshelves. At the end of the corridor there are two bathrooms with sinks, toilets and showers.

Satellite homes

There are six satellites homes, each of them accommodating eight residents. These homes are regular family homes, larger than the average home as they need to accommodate the residents and the educator doing the night shift. These homes have different number of bedrooms, with different sizes, but most of the bedrooms accommodate from two (the majority of them) to four (only in a few cases). The bedrooms have single or bunk beds and wardrobes for belongings. Each of the homes has its own kitchen where the night meal is prepared and common areas for relaxing with sofas, televisions, and shelves with books, games, decoration and so on. At a first sight these homes do not differ much from a regular family home, and only some things such as fire extinguishers or signals required due to safety policies give the impression of being a care home facility. Each home has a nine places van allocated, which is used to transport residents living in it to and from the main building in Santiago 1, and also used to travel to other places for access to educational places, activities, trips, visits and whatever need arises during the course of the day.

Some areas of these satellite homes are also used for activities, when the house is big enough to have a spare space. Hence, one of the care homes has a room in the basement with several exercise machines, creating a space looking like a small gym. This space is used by sometimes when there is an activity organised that includes the use of these machines or when there is bad weather and another sport activity is cancelled. Another example is the space used for carrying out a radio workshop. It is a room in the top floor of one of the satellite homes. It is a room with the walls and ceiling covered with an anti-echo material where they record their radio programme. There they store the all the

equipment needed for it, including a computer, microphones and headsets, and a mixing board plus all the cables to make them work.

Other facilities

Furthermore, during the 90's Santiago 1 incorporated a set of facilities at the outskirts of the city where they have developed courses related to nature such as gardening or animal caring and also use to carry out a varied number of outdoors activities.

One of these facilities is a gardening centre. This centre includes a big green house for keeping plants, a farming area with a variety of vegetables and other plants, several rooms for storage of tools and machinery and a building with several rooms used for teaching. The gardening centre is used mainly as a place where residents can learn gardening and farming skills, both and carry out formal courses, but other activities are carried out in them, for example a farming school day for children in primary school that is discussed in the findings chapter. The other facility is a rehabilitation care centre for wild birds with health issues. It includes a small building, built by residents and staff from Santiago 1 some years ago, where birds leave and receive treatment and an outside area for birds to be observed by visitors. This centre is run by Santiago 1 with the help of volunteer veterinaries and people with animal caring interests, and some residents have the opportunity to participate in their care.

4.1.4. Residents' characteristics

Santiago 1 accommodates a large number of residents, around 100 of them, since they have 98 places allocated by the regional social services, although not all of them reside in its main building as explained below. The exact number of residents varies throughout the year as some of the reach adulthood and leave, others return with their families, finish serving their sentence or are moved into another a care home and also some new residents arrive. The profile of residents is varied and so is the reason why they are placed in Santiago. Out of the 100 residents, 16 of them are young offenders serving a sentence that places them in residential care for a certain period of time, while

the rest of residents are looked after children with a permanent residency at Santiago 1. It is important to note that despite of having different reasons for being placed in Santiago 1, the educative intervention is the same for all of them and no differences can be observed in the way both children in care and young offenders are worked with.

In term of ages, Santiago 1 accommodates children from 12 to 17 years old, although they have occasionally had residents with slight lower age, but this is rare. The majority of them, over 75%, were between 15 and 17 years of age at the time of this case study, showing that Santiago 1 is generally regarded by the regional children's services as a care home for young people who require preparing them for an independent life.

Regarding gender, there was a predominance of male residents over female residents, since 70% of them were male at the time of the study. This figure shows that the percentage of male residents in Santiago 1 is slightly lower than the national average which was 74%, as shown in the previous chapter. As explained before, such average has been influenced by the raising number of unaccompanied minors coming from other countries and included in the care system, as they are mainly males. At the time of this study, residents with a foreign origin were 28% of the total number of residents, with a majority of them coming from South American countries (19%) while also accommodating migrant minors from Africa (6%) and eastern European countries (3%). Another factor influencing the higher number of male residents is the fact that, at the time of the case study, out of the total of 16 young offenders accommodated, 15 of them were males while only one was a female.

In terms of disability, Santiago 1 does not accommodate people with disabilities who are generally placed in specific care homes for them. However, as I was told during my case study, two residents presented at the time certain cognitive deficiencies and this presented a challenge for educators at Santiago 1. They mentioned that the work carried out with them was similar to what they did to rest of residents, but being aware of their particular needs, paid special attention to provide more support to them by giving them more attention, being

more patient with their difficulties and helping other residents to understand their particularities and their reaction to certain situations.

4.1.5. Educators' team

Santiago 1 is formed by a team of approximately 40 people with different roles within the organisation. Such team includes professionals with qualifications in different areas such as psychology or pedagogy, but most of them are qualified in the field of social education. The roles are differentiated as follows:

Director

The director is the person with the highest responsibility in the team and the higher position in the hierarchy of Santiago 1. Their duty is to supervise the functioning of the care home at all levels, ensuring that the intervention carried out follows their general plan. The director is also the most visible face of Santiago 1 outside the care home not only in relation to social services, with whom they made arrangements for the number of places allocated to Santiago 1, but also with the press and other institutions interested in collaborations or training sessions. The director also participates in the day to day activities at Santiago 1 when outside commitments allow them to have time to do it.

Deputy Director

The role of the deputy director is to supervise that all paperwork required is up to date, to communicate with families, social services or any other institution or person needing to do so. They spend long time in an office inside Santiago 1 and meeting with visitors, but can be seen participating in some activities and events when is available.

Psychologist's team

There are two psychologists as part of the team at Santiago 1. Their role is to provide psychological support to residents through therapeutic sessions, produce psychological reports and derive residents to external services when required for more specific support. They usually meet residents in one to one sessions but also develop group sessions when they find it appropriate. Their

role also includes giving advice to the rest of the team from their clinical perspective. They can be occasionally seen participating in activities and events held the care home.

Coordinator

There is one coordinator who supervises the work of the shift coordinators and the educators. Their role also includes giving support when an incident happens or a member of the team requires help at some point. The coordinator participates in some of the activities taking place at Santiago 1, but usually stays in the main building so they can be easy found in case anyone requires their help.

Shift coordinators

There are also three shift coordinator, one of them working in the morning/early afternoon shift, one working in the late afternoon/evening shift and another one working on the weekend shift. The role of these coordinators is to organise the schedule for the day, supervise educators and make decisions when unexpected situations arise during their shifts. They also participate in the activities and events taking place during their shifts.

Educators

At Santiago 1 there are 30 educators who work in four different shifts: morning/early afternoon, late afternoon/evening, nights and weekends. During the night there are 9 educators on shift, one in each of the satellite homes and three in the main building, and during the day there are seven of them on each of the shifts. Their role is to organise and participate in the activities and events, supervise the residents and contribute to the development of the educative intervention. They spend most of their working time with the residents either during the activities or when other needs arise such as medical appointments or family visits amongst others. They also have the role of key workers for some of the residents and follow their cases and offer particular support of them.

Most educators have qualifications in social education and pedagogy but some of them have a more formal educational background. The latter have a

particular role as they take charge of the running of the formal courses organised within Santiago 1.

Cooking, cleaning and maintenance

There are two members of the team who are specifically appointed for cooking and cleaning duties, while another person is in charge of maintenance. Their role is to carry out those tasks alongside some residents and educators who get organise to engage in these activities on daily basis. As mentioned before, these members of the team receive training in order to learn basic educational notions as they spend time working alongside residents.

Volunteers

Some volunteers collaborate with Santiago 1 and participate in the activities planned or organised their own ones. Some of these volunteers come from a European volunteer programme and spend a period of time in the city of Salamanca collaborating with the care come. Santiago 1 offers them in return accommodation in a small flat they have available for this purpose. Some other volunteers are citizens from the area who decide to make a contribution to the care home by offering their time and skills. They usually collaborate during a few hours during the week, either participating or organising activities of their interest.

4.1.6. Hierarchy

Although different members of the team at Santiago 1 have different responsibilities, they have a considerable flat hierarchy in terms of designing and developing the educative intervention. Directors and coordinators have particular responsibilities in terms of hiring new members, making decisions about arrangements with the social services or supervising the rest of the team, but when it comes to plan the educative intervention they do not play a more important role than the rest of the team members. This flat hierarchy is purposively sought by all members of the team and reflects how they view themselves and residents as a group of people sharing a life-space and contributing to the day to day of the care home. Their approach to hierarchy

shows an educational intention for making residents and staff active participants of the intervention and having the experience of being empowered and responsible for their acts while they are at Santiago 1.

Certain mechanisms are in place at Santiago 1 that allows such a flat hierarchy regarding the educative intervention. One of them is the fact that educators are given freedom to propose and develop activities that they see can be positive for residents and make a contribution to the intervention. These initiatives need to be informed to coordinators so they can organise the shift but educators do not need to ask for permission or authorisation to develop and carry them out. Equally residents are encouraged to take initiative and propose and even organise their own activities. Another mechanism in place are assemblies that take place on weekly basis with the participation of educators and residents. In these assemblies decisions are made regarding home rules, incident management, tasks organisation, the development of activities and other aspects influencing the day to day functioning of the care home. In these assemblies decisions are made with the input of all the participants though dialogue and the reach of agreements. Finally, staff meetings are held regularly by educators and the rest of the team members to discuss issues arising and make decisions regarding the educative intervention. During these meetings, educators are given feedback by their workmates on their intervention. Although feedback from the directors and coordinators is usually valuable for the rest of the team due to their experience in the field, the team does not follow direct orders from them but try to reach agreements together about how to improve their intervention and deal with the problems they are facing.

4.1.7. Arrangements for daily living

The arrangements of the daily living at Santiago 1 are influenced by its size and configuration with a main building, satellite homes and outside facilities, but also by some characteristics of their intervention that will be later on discussed in this thesis, such as the development of formal educational courses, the use of a structured timetable or the emphasis of working in groups, for instance. A normal day at Santiago 1 is structured in three differentiated parts, each of them

with a different purpose and organisational arrangements, which are mornings, afternoons and evenings.

Mornings

In the morning residents and educators doing night shifts wake up, have breakfast and prepare for the day. This takes place in the place they have allocated as their main residence. Thus, residents accommodated in the satellite homes follow this routine in those homes while residents accommodated in the main building do it in that building. Residents and educators prepare their own breakfast, tidy the kitchen up afterwards and get dressed and cleaned before leaving to go to the main building where they all gather. Once they are all in the main building, the educators doing the morning shift arrive on duty and each of the residents goes to their educational placements. Those residents doing courses in the outside facilities are taken there by some educators in the vans available while those doing courses in the main building simply access to the facilities where such courses take place. There are also a number of residents who attend to mainstream schools and high school for education and they are transported there by educator in vans too. All this process is organised in advance by the educators, so they all know their allocated duty during the early morning in order to make it as quick as possible so residents are in time for the start of the classes. In the occasions when residents do attend to exceptional commitments such as medical appointments, court appearances or any other matters arising, it is the shift coordinator who carries out the organisation and allocates an educator to accompany them.

During the mornings educators on shift have different roles. Some of them are in charge of the formal education courses and spend the mornings with the residents taking those courses in the facilities allocated for it. Meanwhile the rest of the educators remain in the main building and do various tasks, such as accompany residents who are sick, have been temporarily excluded from their educational placements or have other commitments during the morning. Those residents who are sick remain either in their bedrooms or the communal areas while the rest of residents spend the morning carrying out school work in one

the rooms available in the main building with the supervision and support of the educators present or collaborate in the cooking and cleaning duties.

The directors, coordinators and members of the therapeutic team usually work part of the morning as well and carry out some of their specific duties during this time. Thus, it is usually in the morning when they communicate or meet with families, visitors, social services, and so on, produce reports and deal with issues arising. They also frequently spend some time participating in the formal educational courses and collaborate with the educators running them.

Towards the end of the morning and beginning of the afternoon, residents finish their educational hours and they all gather again in the main building for the main meal of the day, which takes place around 14:30h. At the entrance of the room the shift coordinator puts a paper on the wall with those residents and educators who are due to set up the tables and help out tidying out after the meal. Whose turn it is to do it follows a pattern agreed during assemblies, and usually is no more than once per week per person.

Afternoons

Following the main meal there is some time until planned activities begin at 17h. This time is usually free time for residents to be around the home or outside it but not going out of sight. During this time residents usually relax, have a nap, have a chat or play games such as table football or board games. Once a week this time is allocated for the general assembly and members of the team and residents join together in the big room used for having meals. This time is also used by educators to have their meetings once a week, being most of them present, as only those doing night shifts that week do not participate in them. Also, this time is used to organise the educators for the activities taking place later on. The shift coordinator produces a paper that they put on one of the walls of the entrance lobby with the schedule for the day. This paper shows all the activities taking place during the rest of the day, which educators are going to run or supervise each activity and which residents are going to participate in each of them. At this point there are frequently changes in the organisation of the activities because residents request sometimes to take part in a different activity that the one they have allocated at some point of the day. Educators

and the shift coordinator try to adapt to their likes when it is possible depending on the number of residents already participating and the educators and facilities available.

From 17h. to 20h. it is time for planned activities. Usually the first hour is used for school work and educators and residents go into the large rooms in the ground floor to do it. Educator offer support to those who need help and also make an effort to keep residents quiet so there is an atmosphere appropriate for studying. Usually at 18h. there is a small break and other activities start. These activities are very varied and some of them take place in the main building but other ones take place in the satellite homes or public spaces nearby. At these time volunteers coming to participate in the activities show up and the educators in charge of supervising the activity gather with the residents who are going to participate in it and go to the place where it is going to take place. The activities usually take one hour and residents and educators participate in two of them, so they usually finish these activities around 20h. At that time is when older residents are allowed to go out in the city on their own while those who are still not allowed to be out on their own and those who have received a sanction for not engaging appropriately in the previous activities hang around the main building.

The schedule just described usually follows such pattern for most of residents but it is flexible with their needs. For example when residents have dates for test or exams approaching they are allowed and encouraged to spend more time doing school work so they have sufficient time to study. Also when there are occasional events taking place in the city or being organised by Santiago 1, they adapt the schedule to adapt it to the times of the event.

Evenings

Around 21h. educators on night shift arrive and everyone gets ready to go back either to the satellite homes where they are allocated or to settle in the main building for the night. One educator is usually allocated to each of the satellite homes and they gather with the residents from that home, take the food that has been prepared for the night meal and leave in their van. Meanwhile, those

residents accommodated in the main building and the educators spending the night in it gather in the main eating room for the meal.

After eating and tidying up after the meal is time for residents to have a shower and settle for the night. During this time they usually watch T.V., use their mobile phones or simply chat and relax with their home mates and educators until bed time that is usually around 23h. for younger residents and midnight for older ones the latest. Educators usually stay around with them in the home and engage with them in an informal and relaxed atmosphere until bed time when they need to make sure everyone goes to their beds. Educators spend some time during the night preparing material for activities, doing paperwork or planning aspects regarding their intervention before they also go for a sleep when all residents are sleeping too.

Weekends and off school days

Weekends and days when residents do not have to go to their formal education courses, like bank holidays or school breaks, usually do not follow the pattern shown above. During these days residents spend more time in their allocated homes during the mornings and are given free time to do what they want to do without a fixed schedule. This time is also used for housekeeping tasks, carried out by educators and residents together such as cleaning, shopping or cooking the meals for the day.

During these days residents are also given time to do not planned activities that they do not have time to do during the weekdays, such as going to the hairdresser or clothes shopping. They also use this time to carry out leisure activities in smaller groups like going to the cinema or going out for a walk. Educators also use this time to do one to one sessions with the residents for key working purposes.

During weekends and days off school, educators organise events and larger activities that require more time to be carried out too. For example, they organise trips, cultural activities such museum visits or sightseeing, tourism, leisure activities such as horse riding or karting and participate in events taking place in the city or nearby that might be of interest for the residents. In some of

these activities participate a large number or residents but other ones are carried out with a smaller number of them, depending on the nature of the activity, but usually they tend to look for activities that they can do all of them together. For these activities, educators and residents gather in the main building and then travel in their vans to the place where it is going to take place. After these activities, all residents go back to the homes where they are accommodated accompanied by the educator doing the night shift as they do during weekdays.

Conclusion

This chapter has shown a picture of Santiago 1 aiming to help to understand some of the contextual factors that influence their educative intervention. The chapter has described a particular arrangement of the facilities of the care home with the use of satellite homes accommodating around half of the total number of residents as a complement of a main building where they gather during the day and which is used as the base of the rest of activities taking place. This is a very particular approach that allows Santiago 1 to accommodate a large number of residents that otherwise would have not been possible to have.

The chapter has also painted a picture of the characteristics of the residents who are children in care or young offenders serving a sentence that places them at Santiago 1. It has been shown that there is a mixed group of residents according to their gender who have a range of ages between 12 and 17 years old and different backgrounds. This chapter has also shown how the staff team comprises some professionals with management and coordination roles, a small internal therapeutic team, a large number of educators that forms the bulk of the team, a service team in charge of the housekeeping tasks and some volunteers that collaborate in the educative intervention. There have been also explained the flat hierarchical structure presented by the members of the team during the development of their educative intervention and some of the mechanisms in place that facilitate it.

This chapter has concluded with an overview of the daily arrangements at Santiago 1. It has shown how in the mornings the residents engage in formal educational courses, some of them run within the care home by educators in their different facilities. Meanwhile, it has been explained how late afternoons and early evenings are mainly used for the development of workshops, leisure activities, assemblies and staff meetings, and also to allow residents free time inside and outside the care home. It has also been shown that at the end of the day all residents return to the facilities that accommodate them where they settle for the night. There has also been explained how weekends are used for activities that cannot be carried out during the weekdays such as housekeeping tasks, leisure activities that take longer time or trips outside the city.

The next chapter is a large description of the findings of this research related to the characteristics of its educational approach and the features that the educative intervention at Santiago 1 present.

Chapter 5. Findings part 1

Introduction

This is the first of the two chapters which present the findings of my research after collecting and analysing the data obtained during the fieldwork. These chapters are of descriptive nature and show the characteristics of the social pedagogic intervention at Santiago 1 deriving from the analysis of the data carried out.

This chapter presents the findings that are related to the educational approach existing in the intervention at Santiago 1. As pointed out in the literature review chapter, this educational approach is at the core of the social pedagogic intervention, and this chapter describes the mechanisms in place at Santiago 1 as a result of that educational approach and how they are put into practice by the educators.

The chapter is divided in two sections. In the first section I describe the educational approach taken at Santiago 1 and how this covers all the three – formal, non-formal and informal – aspects of education providing examples for all of them. The second section is longer and covers the different educational strategies that are part of the social pedagogic intervention. These are working in groups, having an structured timetable, showing high expectations, developing a system of sanctions and rewards, focusing on the enjoyment of life, developing a therapeutic work, benefiting from experiential learning, preparing residents for the future and building relationships with them.

The findings are described following the data obtained from my participant observations and are complemented by quotes from the interviews carried out with the educators. These quotes provide examples and detailed explanations of the different aspects of the educative intervention from the views of the educators and are followed by my interpretation on those views.

5.1. A broad educational approach

One thing that became very obvious from the beginning of my fieldwork is that the educative intervention taking place at Santiago 1 aims to cover all the different aspects of education. As explained in an earlier chapter, given its conceptualisation in Spain, education is divided in three main fields: formal education, non-formal education and informal education. Usually educational institutions primarily focus in one of these fields (for example schools in the formal field, academies in the non-formal one and youth work in the informal side), but Santiago 1 seems to put emphasis not in one but in all of them. It's official name, Casa-Escuela Santiago 1 ("Home-school Santiago 1"), already provides an idea of their intention to carry out an educative intervention which is not at the more formal side of the educational spectrum (school) nor at the more informal one (home), but a combination of all its aspects. This seems to be given great importance at Santiago 1 as it can be seen in the words of several of the educators:

> *'It seems important to me (to include all fields of education) in the sense that in real life it is not only important the formal education. In the near future, when they (residents) get out of here, they are going to have a set of social skills, and skills to cope with their working life and personal life, and there are those three aspects what provide them with such skills'* (Interview 4).

> *'I believe that, since they (residents) live here 24 hours a day, 365 days, the way we do it is phenomenal. Otherwise, if you do not include one of the parts (referring to the different fields of education) it (the intervention) is incomplete.'* (Interview 5).

These educators transmit the idea that the educative intervention they carry out necessarily needs to cover all the fields of education and put emphasis on the fact that they would not be doing a good job if any of these aspects were missing. In other words, each of the fields of education seems to be as important as the rest of them, all part of a broad educative approach.

Under this broad approach, educative interventions take shape in several ways at Santiago 1. From training courses which are at the formal side of the spectrum to any informal activity at the opposite side, there is a large range of activities taking place every day, and all these activities have one key characteristic in common: they are planned with an educational intention. As one of the educators said in their interview: *"that is how we think about it; every workshop, every activity that we prepare has an educational purpose."* (Interview 8). Hence, most of the activities which are part of the agenda for educators and residents in any day at Santiago 1 seems to be there intentionally with a pedagogic purpose. An example of this can be found in one of the workshops they carry out, the 'circus school', which as one the educators pointed out, has a very strong pedagogic aim:

> *"we have the circus school. One could say that the circus school is useful to make a fool of yourself, or to learn to act like a clown. We play a lot with the double sense of those words. The circus school allows them to become fools or clowns but this implies a series of implicit values which are very important such as effort and sacrifice. To be able to start something and finish it through continuous effort, to learn through repetition while being demanding with themselves, those are values evidently pedagogic in essence. And this means that if they are able to keep the pace in the circus school they are developing skills that they can then transfer to other context such an academic context."* (Interview 8).

The educational purpose of the example of the circus school is clear. It is an activity that allows residents to be entertained and to entertain others while acquiring a wide range of manual and performance skills but also embeds several pedagogic values that educators try to transmit to them through this activity. Effort, sacrifice or perseverance are values than can be learned through an informal activity like this and which are also transferable to other dimensions of their lives.

Aiming for a better understanding of its broad educative approach, I have arranged the interventions observed at Santiago 1 into the different fields of

education as shown in the table below and which I detail in the following part of this section.

Table 4. Activities observed in relation to fields of education

Formal education	Non-formal education	Informal education
Formal courses and qualifications	Workshops	Everyday life
Alternative approach to formal education	Leisure activities	Free time

5.1.1. The formal aspect of education

Formal courses and qualifications

I have learned that in Santiago 1 formal education is considered the foundation of the future of the residents. Therefore, every one of them must be involved in a course in order to achieve a qualification, either at one of the courses offered by Santiago 1 or at a school or high school in the area. This is not negotiable and failing to comply with this usually means that the placement of the resident in Santiago 1 is reviewed and sometimes interrupted, when not finished, meaning that residents are moved into another placement within the child protection system.

Usually young people who arrive at Santiago 1 have a history of difficulties and failures at school and/or high school. In most of cases residents struggle to attend regularly to their educational settings, to comply with their rules and to be able to produce the academic work needed to pass their courses. Thus, at Santiago 1 they make an effort to support them to be able to overcome their difficulties and to achieve success in their formal education courses. An example of this support is out of school study.

> *"As part of our programme (…) we have the FPBs (basic professional qualifications) but we also have residents doing 'ESO' (compulsory*

secondary school) who go to their schools, we enrol them and then give them the support they need." (Interview 3).

Such support is given during specific time every working day in which residents enrolled in secondary school have to do their homework and revise for their exams with the help of educators who supervise their work.

However, the majority of residents are over the legal age for compulsory attendance at school (16 years old), and most of them are not enrolled in any school or college. Instead they are given the opportunity to take formal courses which are organised and carried out by the staff at Santiago 1 and its different premises. This shows how important it is in their view that residents acquire professional skills and qualifications.

> "A *step forward is that they obtain qualifications so when they get out of here, some of them in a few months and some in a year or two, they have recognised qualifications which can help them rebuild or build their life. Not recognised courses are fine but only once they are in, once they are qualified, if they have a qualification. Having professional skills is going to help them to work and give them advantage over others, that is fine, but they must have an official qualification."* (Interview 9)

This quote shows two sides of the educational purpose of the formal courses available at Santiago 1. On the one side is the possibility of acquiring skills that can be helpful for them in their future professional careers. These skills allow them to be better prepared in order to carry out their jobs, which is essential to show competence and to maintain those jobs. On the other side educators at Santiago 1 consider that formal courses provide them with recognised qualifications that can open doors form them in the labour market, so they have developed their courses in a way that they can be officially recognised and provide residents with qualifications as the following quote shows:

> *"We try to provide a range of basic professional qualifications, from 'grado medio' (NVQ level 2 equivalent) to 'grado superior' (NVQ level 3) but we even do sporadic courses, like courses for unemployed people, which are not part of the usual range."* (Interview 8)

These courses provide officially recognised basic professional qualifications in fields such as welding, gardening, cooking and catering, and give residents the opportunity to obtain not only skills but recognised qualifications for a future professional career.

Alternative approach to formal education

Although the courses provided at Santiago are officially recognised, the way they evaluate the performance of residents differs from the usual mechanisms typically used by educational institutions providing formal courses. This is based on an alternative approach which takes the focus away from the academic performance and places it on other aspects which they also consider essential in the residents' training. This approach is explained by one of the educators:

> *"Our (Spanish) education system is more oriented towards academic results. Not long ago we were discussing about exam marks, it seems that everything is now oriented towards the results obtained in an exam, which takes place in one moment in time and the person might be influenced by 50,000 things. An exam is something that should be taking into consideration, of course, because it shows your knowledge about a topic, but if a person is attending to their lessons every day, if he or she is trying to get things done, within their capabilities, even if they do not achieve the goals, we should give value to that."* (Interview 8)

This quote shows their alternative approach to formal education that differs from the usual approach in mainstream education. Following such an approach, in the courses taking place at Santiago 1, exams are only a small part of the assessment of the residents' performance, and aspects such us attendance, practical exercises or positive attitude have a strong influence in the results they achieve.

Such alternative approach to formal courses reflects the importance that educators at Santiago 1 give not only to the results obtained by residents while taking these courses but also to the skills and values learned in the process. Their focus seems to be on give residents the opportunity to put their skills into practice and to develop them while learning positive values doing so. Thus, the

final result or their possibility of showing the knowledge acquired through their course is not given as much importance as it is given to the learning opportunities that emerge for residents by engaging in those courses.

The 'Aula alternativa' (alternative classroom)

The alternative approach taken in Santiago 1 about formal education has led them to create what they call 'alternative classroom'. This is a course that is not formally recognised, for residents under 16 who should be at school but have been expelled. In the words of some of the educators:

> *"We have the 'alternative classroom' which are residents who cannot still enrol in professional training courses and who, given their social situation or conduct and so on, do not fit well in ordinary educational places."* (Interview 7)

> *"This 'alternative classroom' is the classroom for the dross, the illegal classroom. It is important to call it like that because words have their importance and it is necessary to point out that there is a number of people who are underage and should compulsorily be at school but they are not. And they are not given an alternative, they are simply expelled."* (Interview 8)

The 'alternative classroom' can be considered to be part of formal education since it is an alternative option for those residents who should be attending school. However, given the approach to formal education at Santiago 1 which has previously been explained, the 'alternative classroom' has been designed with the focus on practical learning rather than academic performance. While basic subjects are intended to be covered (mainly Maths and Spanish), the emphasis is on learning skills which can help those taking the course to be better prepared to learn a trade or to enrol in a professional course when they come to age. This can be observed in the following extracts from two educator's interviews:

> *"they have that option of the 'alternative classroom' where they learn things about certain trades, maintenance for example and other ones,*

and they also learn basic subjects. They continue to be enrolled in their schools, but they stay here and we work with them giving them certain training." (Interview 7)

"In the activities they do in the morning such as plant pruning, wine making or other things they learn how to do things. Due to their age they cannot take professional courses and through these activities they 'get hooked' to these jobs and that can be good because they might end up taking doing a professional course in the future such as gardening or wielding" (Interview 1)

These quotes highlight the importance given by educators at Santiago 1 to providing the opportunity to those residents who are failing in the mainstream education to continue engaged in formal education. Their aim with the alternative classroom is no keep give these residents the option of continuing with formal education despite their negative experiences in previous educational placements. This way they are trying to reconnect them with a formal education process that is more suitable to their needs as a result of their situation and previous experiences and to open doors for engaging in one of their formal courses when they come to age to do so. With the alternative class room educators show a commitment to help residents avoiding a disconnection with the formal education pathway so in the near future they can try to gain a recognised qualification, showing the strong importance they give to this.

5.1.2. The non-formal aspect of education

Workshops

In addition to the formal courses, at Santiago 1 they provide workshops which can be considered to be within the scope of non-formal education. The aim of these workshops is to provide an opportunity to the residents to develop skills and knowledge in fields which are not part of the formal education curricula. All the workshops are usually carried out by educators at Santiago 1, but they also very often invite people from outside with greater knowledge and experience in the specific field to participate in order to improve the quality of the workshop.

Some of the workshops taking place are informative discussions about topics which one way or another are relevant to the residents. An example of a workshop given to me by one of the educators was related to sexual education and health:

> *"one of the most important to me is the sexuality workshop. Due to their age, with 16 years of age, they have the hormones shot up, and for example knowing what STDs I think is very important for them, or things related to unwanted pregnancy. To carry out a workshop like this at Santiago 1 providing information was important since sometimes this is a topic which not even in the families is discussed."* (Interview 3)

This example shows an activity that allows residents to gain knowledge that is relevant to their daily lives related to their sexuality and the risks involved in not doing a responsible use of it. It can be observed that this is a planned activity that takes is organised and carried out by educators with a clear educational purpose. It does not embed knowledge typically learned through formal educational courses but provides residents a very valuable content. This activity can be classified as non-formal education since it does not offer the opportunity to learn aspects that belong to the formal curricula but nor can be considered informal education as it does take place in a planned way. Educators organise these activities with the educational intention of allowing residents to acquire a determined knowledge, it takes place in a space of time booked particularly for this activity and residents are aware in advance of the purpose of it. These are aspects that define non-formal educational activities.

Another type of workshops taking place at Santiago 1 are those in which residents are active participants. These workshops include, among others, activities related to dancing, music, theatre, radio, newspaper reading, painting or photography. One of the most popular workshops of this kind at Santiago1 is the already mentioned 'circus school' which is a workshop where residents and educators learn and practice circus-related skills such as acrobatics, juggling, magic, percussion or the use of unicycles and stilts. These workshops are aimed to allow residents to enjoy new experiences while developing their talents and abilities. As one of the educators said:

> *"these workshops seek to get the best out of them (residents) and to allow them to go through a process of self-discovery so they can say 'I am good at this' or 'I like this or that' (…) I think something that happens to these kids is that they have not been able to try things, and once they do it they realise that they are good in some of them and then develop their talents."* (Interview 1).

As it can be observed, these activities can be classified as part of the non-formal education following the characteristics of this side of education explained before. These activities are planned are organised in advance with an educational purpose which includes the discovery and development of talents and skills. As explained before, taking part in these activities allows residents to learn positive values but also gives them the opportunity to engage in the self-discovery process mentioned in the quote above regarding their own capabilities and interests. It seems that educators at Santiago 1 make an effort to provide residents with the opportunity to engage in these non-formal activities so they can develop a set of skills that otherwise might not even know they had. In order to achieve this, the non-formal educational activities are designed with a focus on practical experiences that can lead to such self-discovery process. Educators seem to give importance to the fact that residents have the opportunity to engage in activities that provide them with the opportunities to go through such experiences. Thus, they develop a large number of varied activities aiming to cover a wide range of experiences so residents can find those who fit better to their interests and skills.

5.1.3. The informal aspect of education

Leisure activities

A great of amount of the time that residents spend at Santiago 1 is used doing activities which are carried out for their enjoyment. These activities take place every day and also during weekends and holidays. The list of activities taking place at Santiago during my time there includes activities such as padel tennis, climbing, gym, skating, dancing, hip-hop singing, film watching, outing,

basketball, football and cinema, and weekend/holidays activities such as camping, horse riding, canoeing, work camps, cultural visits and trips to other countries in Europe among others. These activities are designed, organised and carried out by both residents and educators who participate actively on them. Residents suggest new activities that they would like to do and sometimes they self-organise them. Educators also suggest potential activities and help organise those which have a higher degree of complexity.

Although these activities provide fun and enjoyment for residents and educators, they are opportunities for educators to carry out what can be considered informal educative interventions. During these activities there are usually a great number of situations which emerge as opportunities for educators to help residents developing social skills, dealing with emotions, learning to work as a group or improving their self-esteem among many others. Sometimes it is a reprimand for something they have or have not done, sometimes is praise, sometimes is discussing about the best way of doing things, sometimes showing joy after doing nice things together. The list of opportunities and ways of dealing with them and extracting all their educative potential is endless, and educators take advantage of this in order to support residents to overcome their difficulties and improve in their personal development. Some example of these can be found in the following extracts from educator's interviews:

> *"it comes to mind now a colleague who used to do climbing and sometimes during the weekends would take like eight of them (residents) to do climbing on a hill and when they arrived to the top they would set their tents and spend the night there. He told me that once he took a resident with him who was quite a yob, and when they got up there they were looking at the stars at night and he said: 'I have had the same feeling that I used to have when breaking into houses to rob'. He said that he had that same feeling while climbing the hill so then the educator showed him that he could feel those same things without having to do any harm to others and without putting his future at stake."* (Interview 6)

> *"it seems very important to me to do sports with these kids and to carry out some healthy leisure. (…) moreover, it helps you to get closer to them. There are sports and activities which in certain moments allow you to achieve a greater understanding and complicity with them so you can achieve the targets that you have set. You can get information when you do things with them because it is the time when they loosen up and tell you more things."* (Interview 3).

In these quotes it can be observed some of the characteristics of the informal side of the education intervention carried out at Santiago 1. Unlike formal and non-formal education, the activities carried out as part of the informal education are not designed with the purpose of allowing residents to acquire knowledge and skills. Instead, the purpose of these activities is to allow residents to enjoy while creating a situation that allows learning opportunities to emerge naturally. This requires that educators are alert to make an educational use of these situations. Let's take the example shown in the first quote when an educator took residents to a climbing activity. In this situation the educator and the residents taking part on the activity enjoyed an activity that provided them with pleasure and trigged positive feelings in them. The educator took the opportunity that arose when the resident commented on the feeling they were experiencing and compared it with other life experiences to offer them a reflection on how they could achieve those positive feelings without causing any harm to others. In this case the educator has offered the resident the opportunity to engage in an enjoyable activity but also taken the opportunity emerging from the experience to carry out an educational intervention aiming to allow the resident to make a connection between positive experiences and positive feelings. This is an example of planned activities that can be classified within the informal side of education and which have a considerable presence in Santiago 1's education intervention.

Everyday life

Another side of the informal part of education takes place in multiple situations which are not planned but are part of the everyday life at Santiago 1. As one of the educators puts it:

> *"Here we do informal education which is the one in the moments at the corridors, the moments at the door, the moments when we are eating in the dining room… all those moments have an added value with these kids."* (Interview 9).

The educative team at Santiago 1 seem to be aware of the educative potential of those moments and try to make use of it for educational purposes. In this case the activities are not planned but part of the day to day living. However, educators seem to be aware of the potential educative value that situations emerging from the daily routine offer. An example that illustrates this view is informal conversations that seem to have an important value for educators at Santiago 1. Whether these conversations allow residents to learn about any topic, educators to transmit support to residents or both to improve their relationship and bond, they all seem to be opportunities for adding something positive to the educative intervention. Examples for these can be found in the following extracts from some of the interviews:

> *"simply you are outside and, while other people are having a cigarette, a kid might come to you to ask you about something that they have curiosity about. Something about an urban tribe, or about a book or a film, plenty of things. Actually such initiative comes sometimes from both sides (resident and educator) and it is something really important."* (Interview 2).

> *"Here everything educates. Every time the conversation educates because every expression of support can get something good, that is in the day-to-day times together that we have."* (Interview 9).

These quotes show that informal conversations are regarded as having an educational potential by educators. These conversations emerge spontaneously and provide educators with the opportunity to transmit knowledge to residents regarding things they might be interesting for them but also to transmit support and to improve their relationships. These situation are clearly part of the informal education since neither they are planned or prepared in advance but emerge naturally during the daily leaving and are used with education purpose.

Other areas which seem to have importance for educators at Santiago 1 are those related to learning positive habits and ways of being. The educational value of aspects such as following time frames, improving health habits, keeping manners or having an attitude appropriate to the time and place is not only recognised but intentionally fostered as part of the educative intervention. As one of the educators told me:

> *"Very frequently there are kids who come and we can see in the day-to-day that they don't have a structured personal hygiene, time frames or eating habits. Sometimes we even need to start from the very basis, simply starting by having a time to wake up, a good diet, a personal hygiene and the order in their rooms and in general. All that needs to be worked on and reinforced because sometimes in certain cases they have never lived with certain order in their families and it needs to be constantly worked on."* (Interview 6).

In this statement it can be observed the importance that educators give to aspects of a daily routine related with health and hygiene. The educator highlights the fact that many of the residents coming to live at Santiago 1 do not have basic hygiene habits and they make an effort to help them acquiring those habits. This learning takes place during day to day activities which are not planned as an activity per se but included in the daily routine so they can be learned by residents. Therefore, as they are not planned activities, these learning processes can be considered part of the informal educational side of their intervention which take places at different times during the everyday live at Santiago 1.

Everyday situations in which conflict between residents or a resident and an educator arise are also used with an educative purpose by educators. Intervening in those situations allows educators to support residents in dealing with their emotions, handling relational problems, facing challenges and settling quarrels among other things. Such intervention is usually aimed to help residents to acquire skills which can be useful in future occasions in order to avoid conflicts or to handle them in a better way. The following interview extract exemplifies such learning opportunity:

> *"An intervention can be something really informal. It can be in a moment when a conflict has taken place and you separate the kids to talk to them afterwards. You can put them together so they talk their problems face to face in a controlled environment (…) things can be resolved because they can vent in that moment with mediation and some control."* (Interview 2).

This example shows how educators at Santiago 1 make use of conflict emerging between residents to use it with an educational purpose. It is obvious that conflicts are not planned so they try to be ready to intervene when a situation involving a conflict arises. In this situation educators try to make residents see that there are alternative ways to deal with their conflicts that includes communicating assertively instead of making use of aggression and violence. This is a good example of the use of informal education in situations that emerge during the normal interaction between residents and educators.

Free time

Free time is usually limited due to the amount of activities taking place at Santiago 1 and it is mainly during breaks between activities or after meal times that residents have some time for their own. During those breaks residents and educators normally go outside of Santiago 1 but do not leave the areas surrounding the premises. This time is used mostly to chat, smoke or simply chill out and educators also use it for organising who is going to supervise the following activities.

Sometimes residents older residents are allowed to have free time outside Santiago 1 on their own or in small groups, to spend some unsupervised time out around the city instead of participating in one of the organised activities. This time is also managed by the educative team with an educative intention. For example, free time is frequently given to residents as a reward for positive behaviour as expressed by one of the educators: *"It is important to allow them free time. To give a resident even 40 minutes to go for a walk is important because it is a way of rewarding them."* (Interview 2). Another way in which free time is used for educative purpose at Santiago 1 is managing it in a way that

might be positive for a resident. In the following example given by an educator, free time for residents is restricted with an aim of reducing their drugs consumption and facilitating communication with them:

> *"It is about restricting the free time so they reduce their consumption. And it is in that time when they are consuming less when we can have more meaningful conversations because when they are high whatever you say goes in one ear and out the other"* (Interview 4).

Finally, educators also acknowledge free time as opportunities for residents to experience what it is to be outside Santiago 1, to do things and even to make mistakes from which they can learn from. In words of one of the educators:

> *"related to the free time it is good that they see what there is outside. You cannot keep them here, so let them see what there is outside and if they have to do whatever so be it. So it is not like I am ok here but when I go out I mess it up. They have to go out and see that there is plenty of life out there."* (Interview 1)

This shows that educators understand the importance for residents to experience what it is like to be on their own and be responsible for what they do. The quote highlights that educators consider that it is important for residents to be given the opportunity to be responsible of their acts in the community even if that means that they engage in negative activities. This shows how educators are trying to make use of these times of freedom with an educational purpose, since allowing problems to emerge are also potential learning opportunities for residents about how to behave while they are out in the community and to learn from their mistakes. The approach educators have towards given free time to residents can also be considered part of the informal educational intervention at Santiago 1 as they make use of it as opportunities for residents to learn social skills and to maintain a positive behaviour outside the care home.

5.2. Educational strategies

5.2.1. Working in groups

> *"Everything is usually done in group; the circus, even singing in group, dancing, playing board games, cycling and playing sports. Everything is usually done in group."* (Interview 1)

As this quote from one of the interviews suggests, working in groups seems to be at the core of the educative intervention at Santiago 1. With only a few exceptions, the workshops, classes and activities taking place are always carried out in groups. The size of the groups varies according to the nature of the activity. Given the large number of residents very few of the activities are carried out with the whole group and they usually divide in smaller groups to make the organisation of the activity easier. For example, I could observe that during evening workshops and activities the residents are divided in groups of six to ten residents.

When I interviewed some of the educators I had the opportunity to ask them about the advantages and disadvantages of working in groups and they seemed to acknowledge that working in groups can create situations which might negatively affect their educative intervention. Some examples of this can be found in the following quotes from the interviews:

> *"That could be the negative side of it because they might learn behaviours and ways of acting (from other residents) which maybe are not the most appropriate ones."* (Interview 2).

> *"The disadvantage is that those who want to weasel out of doing something find it easier in a group because they can hide behind those who are doing it"* (Interview 3).

However, they all agreed that working in groups brings far more positive things to their educative intervention than negatives. In the following sections of this chapter I describe the main of these positive aspects according to what I learned during the interviews with the educators.

Conflict as an opportunity for learning

Doing activities in a group means that on many occasions situations of disagreement and conflict arise between educators and residents and also between residents. Most of the times such situations settle down soon after occurring but occasionally they escalate into bigger conflicts which usually involve verbal and, less frequently, physical violence. Although these situations are not pleasant for those involved in them (or as in my case observing them), they are also considered by the educators at Santiago 1 as very valuable opportunities for learning as I have already pointed out previously in this chapter.

On the one hand they believe that conflicts allow opportunities for residents *"to have conflicts, to get angry, to express emotions"* (Interview 1) which is seen by educators not only as a way for residents to release submerged feelings, but also as a way of learning to deal with their problems and to improve their relationships. In words of one of the educators:

> *"They have conflicts every day, they argue every day, but they also learn to deal with these conflicts by themselves. Here they can only reconcile and get closer to each other"* (Interview 1).

This quote shows how educators see conflicts between residents as an opportunity for them to learn how to deal with it and to reconcile and improve their relationship as a result, acknowledging an educational potential on it.

On the other hand, they allow educators to address issues that might be affecting the residents and which have emerged as a result of these situations:

> *"as a result of working in groups, of doing the workshops and activities in this way, the result is more positive than negative. When a negative, complicated aspect arises, a difficulty, it has to be seen not as a difficulty but as an opportunity to be able to work on and influence that difficulty. So there are situations in which is good that those difficulties surface so we can work on them. Otherwise, sometimes everything might seem very fine but all the issues are hidden and, in the moment when you less*

expect it, they might break out. Then, in the face of a suspicion, a doubt, it is better that it breaks out in that moment when the educator is there, in a controlled environment, so they can act upon it in that moment. (Interview 2).

In this other quote the educator highlights that conflicts are not only opportunities for residents to learn to deal with them by themselves, but also situations that allow educators to intervene and help them to learn to deal with it. Their approach seems to be that conflicts are opportunities to help residents to deal with their problems and it is frequent that educators can be seen interacting with residents who are having problems between them. During these interactions educators try to de-escalate the situation and help residents to communicate with each other, showing them a positive way to deal with problems and obtaining an educational value out of a negative situation.

Preparing residents to what society expects from them

Another educative potential of working in groups according to educators at Santiago 1 is that it helps residents prepare for what society might expect from them once they leave the care home. As they point out, everyday life in a western European society like the Spanish one implies going constantly through situations in which people interact with each other and working in groups allow residents to experience those situations and learn from such experiences. The following quotes are examples of their views:

"(working in groups) allows them (residents) to face real life situations which they are going to face one day when, for example, they are in high school, in a more normalised environment, in a job, with their family... Then being exposed to that situation in which they need to work together, they need to yield to others, ask others to yield to them when required is something very important too." (Interview 2).

This statement shows that working in groups at Santiago 1 provides opportunities for learning how to socialise and allows residents to acquire social skills in a controlled environment. Educators seem to acknowledge the importance of acquiring those social skills as a way to prepare residents for

what they are going to face in the future outside Santiago 1, and working in groups is a fertile ground for these skills to be developed and practiced.

In the same way, educators at Santiago 1 believe that working in groups allows residents to be better prepared to be part of an educational or working environment in the future. As mentioned in the previous chapter, educators give much importance to help residents to learn to be able to be part of the working force, and they consider that working in groups helps them preparing for that. In their own words:

> *"Our society tends to do everything as part of team. Working as part of a team is everywhere, in every company and it is also how it is in educative formal environments, always tending to work in teams. (…) it is important that they are able to get into a place and adapt themselves with another group, different and heterogeneous (…) it is an experience for the future. Individual working is tending to disappear and it is more about group work, working as part of a team"* (Interview 5)

This statement shows that educators at Santiago 1 consider that working in groups allow residents to learn social skills that are going to be valuable for them in a working environment. They consider that team work is an important feature to be mastered in order to get adapted to a working environment and believe that doing activities in groups allow residents to learn skills that make them be better prepared for the situations they are going to face while working in the near future.

Peer influence

Having residents working in groups also allows educators to try to obtain educational benefits from the influence that the group of peers has on each individual. One example of this is the pressure of the expectations that the members of the group has on each of them to behave in a particular way.

> *"All the work made at group level reinforces educationally many aspects. In an assembly, which takes place in group, working on something educative with a person in particular can help that person to realise what*

is expected from them. The pressure of the group, not as something negative but positive, can help them to realise that they are not behaving as the groups expects them to." (Interview 8).

It can be observed that activities carried out in groups at Santiago 1 are regarded by educators as situations where residents can influence in the behaviour of other residents through peer pressure. Educators seem to see such pressure as something positive that allows a group of residents to self-regulate their behaviours by learning what is expected from them by the rest of the members of the group. Thus, working in groups is seen as an opportunity for residents to learn from each other what expected behaviour are and pushes them to behave in a way that is accepted by the group.

Another aspect that they highlight as pedagogically helpful is the influence that established group dynamics have on newcomers, which seems to facilitate their adaptation to the daily routine at Santiago 1. As one of the educators pointed out:

> *"The fact that we work in groups seems to be helpful for new residents. When they arrive they are a bit lost but they quickly adapt because everything happens in a group or in small groups which go to do this, go to do that, and they soon join the spinning wheel and the strength of the group helps them to move forward".* (Interview 6)

Another positive aspect highlighted by this educator is that working in groups facilitates the adaptation of newcomers. This can be related with the previous quote commented regarding the impact of peer pressure and how it allows resident to real how to behave in groups. Educators seem to acknowledge that working in groups create a dynamic that allows residents to learn how to behave in given situations. This seems to be seen as particularly useful for new residents who can learn from those situations what the expected behaviours is and act accordingly, what in itself is already a learning process.

Finally, working in groups also allows residents to help and to learn from each other and the consequences that certain behaviours bring to other residents. They have the opportunity to interact and to observe things such as how other

residents react upon certain situations, how they deal with problems that they might have or what are the consequences of behaving in a particular way, and these are situations that they can learn from. This can be observed in the following quotes from the interviews:

> *"They might see someone behaving wrongly and receiving a punishment for it. They might see that it is a negative behaviour, not a bad consequence, and that might help them to say 'eh, I am going to avoid such behaviour because and know it is going to have such consequence'. So all the inappropriate and conflictive behaviours usually reduce significantly, and most of the learning taking place is positive"* (Interview 2).

In this case the educator highlights how working in groups allows residents to learn from the mistakes of other residents by seen the consequences that negative behaviour bring to them. Thus, working in groups allows educators not only to show a resident what a not acceptable behaviour is and that negative behaviours bring negative consequences, but also to give the opportunity for other residents to learn from those experiences. This way working in groups facilitates that what can be an individualised intervention for one resident can also be a learning opportunities for other members of the group.

A sense of belonging

Working in groups helps residents to develop a sense of belonging to Santiago 1, which according to the educators makes a great contribution in their pedagogic journey. During the interviews I found out that educators often refer to the group of educators and residents at Santiago 1 as a *"big family"* or even in a more evocative way as a *"tribe"* (Interviews 2, 6 and 7) and they agree that such vision or experience is usually shared by the residents too. They have even created a term, 'Santiagueros', meaning literally 'person from Santiago' and refers to all the residents and ex-residents of Santiago 1. Helping residents to build such sense of belonging is part of the educative intervention as explained by one of the educators in the following interview extract:

> *"We try to build a sense of belonging to something, it is something that we work on in the background. The kids that we have here very often do not feel as a part of almost anything, so it is difficult to work with them. It is difficult to be able to make them do something positive for themselves because, as I said before, what it is expected from them is something totally different to what they might be doing. If a kid does not have a rooted sense of belonging to something it is going to be more difficult for them, I believe. I think that pedagogically it is important to build a place in which they feel they belong to."* (Interview 8)

In this quote the educator highlights the importance that they give to residents developing that sense of belonging. They seem to acknowledge that a sense of belonging is positive for them since it allows them to create a feeling that facilitates a change in their behaviour. As they point out, residents usually arrive to Santiago 1 presenting difficulties to have a sense of belonging as they usually are derived from their families or other care services where they have experience a sense of failure and disengagement. Thus they make an effort to create an atmosphere that contributes to making resident feel as somewhere that they belong to, even for just a certain period of time in their lives. This is achieved through the encouragement for residents to actively participate and make a contribution in the development of daily activities, the life-space approach that will be later presented or by using a terminology that leads to the development of such sense of belonging, amongst other features of their intervention.

5.2.2. Structured timetable

The pedagogic intervention at Santiago 1 includes keeping the residents busy and allowing them a reduced amount of free time. In order to achieve this, the educators plan in advance all the activities taking place during the whole day and create a timetable which is displayed in a visible place in the home. Each resident is allocated several activities throughout the day so they are occupied during the different parts of the day. Formal activities take place in the morning and early afternoon and workshops, leisure activities or any other activity

usually take place during late afternoon, evening and weekends. This results in a highly structured day for residents and during my time at Santiago 1 I rarely saw residents with nothing to do for long periods of time or complaining of being bored. Such high level of occupation has a pedagogic purpose since it offers residents with opportunities of learning and enjoyment while reducing the situations in which having nothing to do can lead to undesirable behaviours.

Creating a positive dynamic

One of contributions of a very structured day to the educative intervention is that it helps create a positive dynamic which allows residents to engage with all the activities taking place. At every time residents know what activity they are expected to be doing and what they will be doing next and this helps them to be active and participative. In words of two of the educators:

> *"Having the kids busy is a very important premise because very often the fact that they are active, either in the morning with classes, in the evenings with workshops and activities or even in the night when they arrive to their houses to have a shower, clean, participate in preparing dinner, tidy up, washing dishes… if you think about it is all connected and very often we have a kid which starts with a good disposition and it is easier to keep them engaged if they have all the time planned and busy"* (Interview 2).

> *"From free time they usually end up badly, in quotation marks. Having all day structured makes things work and as soon as they tend to do nothing then they become lazy, bad habits appear… having the kids busy helps keeping a positive line."* (Interview 6).

These two quotes show some of the benefits that educators see in having a structured timetable for residents in their day to day living. In the first quote the educator highlights the importance of the momentum that such structure timetable provides. This momentum allows residents to stay engaged in the activities and creates a positive predisposition for them to continue with the next activity. Meanwhile, the second quotes shows that educators consider that it is when residents have free time that they develop negative habits and therefore

having an structured timetable that limits those periods is seen as beneficial for them.

Diverting negative thinking into positive

Another purpose of the highly structured day is to promote that residents keep their minds focused on the activities they are doing rather than on their personal issues. It seems that avoiding long periods of free time is made with the purpose of helping them staying away from negative thoughts while make a positive use of their time. In words of some of the educators:

> *"It has sense keeping then occupied because you can avoid their heads going into their addictions or their problems. (…) It seems very positive to me not only because there are busy but because there are doing something that contributes to their personal development in all senses"* (Interview 4).

In this quote the educator interviewed highlights that it is positive for residents to stay busy throughout the day. They seem to believe that it is beneficial for them as it helps diverting their thinking from their problems since they focus on the activity they are engaging in. Their aim is to create during all day situations that allow residents to engage in activities that contribute to their personal development while keeping them away from negative aspects of their lives.

Modifying negative habits

As educators at Santiago 1 explained to me, most of residents arrive there with a considerable number of negative habits which the pedagogic intervention in place tries to modify. Having a highly structured day seems to help them modify those habits by offering the possibility of developing new ones which can be beneficial rather than detrimental for their personal development. This is addressed by an educator in the following interview extract:

> *"It is about changing certain habits for other ones. Changing the habit of being in the clouds, senseless, and getting into trouble by the habit of attending to class. And same with their leisure time, instead of being*

sitting in a bench drinking alcohol or whatever being playing instruments or dancing. Such continuity, changing some habits with others and keeping the kids busy. They are kids with plenty of energy, and they need to spend it in something positive rather than in other stories." (Interview 6).

Educators seem to believe that a large number of activities can contribute for the creation of positive habits in residents that substitute negative ones. For example, as highlighted in this quote, educators try to engage residents in positive leisure activities so they develop a habit of doing them instead of doing negative things such as drinking alcohol as a way of spending their time.

Avoiding boredom

According to educators at Santiago 1, boredom is the cause of many of the troubles that residents find themselves in and having all day occupied in several activities help them reducing their possibilities of being bored. As the following interview extracts show they consider it an important issue which their intervention seeks to deal with:

"The fact that kids are busy all day is something good because they have less time to mess it up. They have less time to think about drugs, less time to think about messing it up because very often they do it because they are bored, not because they have bad intentions but because they are bored". (Interview 9).

In this quote the educator suggests that boredom leads to negative habits such as drug consumption. They seem to believe that it is boredom what leads some residents to engage in those negative habits and having an structured timetable allows them to be occupied with different activities throughout the day, reducing this way the possibility of them getting bored and developing negative habits.

5.2.3. Expectations

At Santiago 1, educators have high expectations on what the residents can achieve, regardless of their personal capacities and previous life experiences

outside Santiago 1. The high expectations in the residents' possibilities is easily recognisable in discussion with the educators at Santiago 1, since they transmit what I consider is a belief in the possibilities that each of the residents has in achieving their personal goals during their placement.

During my fieldwork I had the opportunity to witness residents experiencing difficulties in carrying out some activities due to mental and physical issues and I noticed how, day after day, educators did not give up on them and kept encouraging them to improve themselves. I noticed that no resident is considered unable to participate in the courses, workshops and activities and educators make an effort to allow them to overcome the difficulties that they might find in their way to achieving their goals.

Individual educational plan

Such expectations are transmitted to the residents upon their arrival when they discuss what goals they are trying to achieve during their placement at Santiago 1. Then, a personalised plan is designed which adapts to the individual needs and strengths of the resident and sets the goals that the resident is expected to achieve during their placement. These goals are usually related to different areas of the personal development of the residents and include aspects such us formal training, participation in the home, building relationships or personal organisation and hygiene among others. The aim in the designing of these plans is to set goals that are realistically achievable by the resident but at the same time ambitious so the resident progresses in their personal development. One of the educators explained this as following:

> *"With each kid we do an individualised intervention plan. In that plan we assess the skills and abilities that the kid might have and we really try to establish goals which are achievable by those kids. (…) the goals need to be personalised because if you set a goal which seems really far to the kid it is easy that they think that it is not worth making an effort because I will not get there anyway. But they also need high expectations so they can look back later on and say 'I thought I would not get here and look at me'.* (Interview 2)

In this quote the educator highlights that individualised goals are set for each resident depending on their capacities. Having such level of individualisation allows them to establish goals that are realistic for each resident so they can maintain the motivation towards achieving it. The educator also points out that residents need high expectations since that creates the opportunity for them to realise what they are able to achieve.

Demanding style

These high expectations can be also observed in the demanding style that educators have over residents and even over other themselves. It is frequent to observe how educators demand higher efforts from residents in what they are doing. It does not matter whether the resident is simply cleaning the dining room floor, working on a new dancing routine or welding two pieces of metal, educators always seem to be trying to push them to do it at the best standard. This demanding style does not allow residents just to do things in an acceptable way but pushes them in the right direction for doing them the best possible way. The following extracts show some of the educators views on this:

> *"We do it like that (demanding) in order to pass it on them. Very often we see how kids arrive here thinking that they are nothing and they might here that repeated many times over their lifetime. 'You are useless, you are not good for studying' and they end up believing it. Here we are demanding of them so they become demanding of themselves, so they learn to be demanding of themselves and get the best of them even if it is hard for them. The culture of effort is important and until they acquire that ability and learn to be persistent we need to be there to instil it."* (Interview 6).

This piece from one of the interviews shows that educators set high standards for residents in order to show them that they are able to achieve them. Educators seem to acknowledge that residents often arrive to Santiago 1 with a low self-esteem and self-concept and believe that being demanding with them when carrying out an activity helps them overcome such negative self-

conceptualisation. Furthermore, by setting high standards they aim to allow residents to learn values related to persistence and effort.

5.2.4. Sanctions and rewards

The use of sanctions and rewards play an important role in the educative intervention and are regularly used by educators to promote positive behaviours amongst residents and to transmit them the idea that their actions entails consequences. In words of two of the educators:

> *"It is important that we tell them either with a consequence, a sanction or simply with a comment or a chat so they know if they have gone too far or done something bad in some way, and also to reinforce as many positive aspects as possible, like an image of today´s society."* (Interview 2).

In this quote it can be observed how educators believe that sanctions and rewards help showing residents learning that both negative and positive actions have consequences. Educators mention that this is a mirror of the society they live in so by giving residents sanctions and rewards they are preparing them for the experiences they are going to go through once they leave Santiago 1.

Sanctions

Some examples of sanctions that I have had the chance to observe were reducing the amount of petty cash available for a resident to spend, not allowing a resident to go to the swimming pool with the rest of the group during a summer day afternoon, not having free time outside Santiago 1 and having to spend time alone in a room. These sanctions are the result of behaviours which are considered negative within the house such as use of any form of violence, lack of participation in activities, workshops or housekeeping tasks, stealing goods from other residents and drugs misuse. The following extracts from interviews show educators referring to their use of sanctions:

"When the check shows high use of drugs they don't have free time. They stay here although as you can see it is an open home and they can stay outside". (Interview 1).

"We always work with opportunities to achieve something. If they don't behave well in class then instead of going to play a sport they like or instead of doing an activity that they like, they will be doing extra studying because what they haven't done in class they have to do it in study time." (Interview 3).

These quotes show that certain behaviours like drug consumption or bad behaviour entails negative consequences for residents such as missing the opportunity of having free time away from the care home or playing sports. This way educators are trying to show residents that developing those negative behaviours means that they are going to lose something they like, trying this way to motivate them to make a change in those behaviours so they can do things they like doing.

Rewards

Rewards also seem to be a significant part of the educative intervention and positive behaviours usually allow residents to have greater chances of obtaining a positive outcome in their request for free time, money availability for personal expense or time to spend with their families in temporary leaves. The following interview extracts are examples of this:

"I think it is about rewarding. When they do three hours in class, then one and a half studying, then another one and a half doing an activity, it is time to reward them with some free time." (Interview 1).

"What they like the most is having free time, getting out of Santiago which is understandable, and a way of making them see that they need to make an effort and if they do so they will get some rewards." (Interview 7).

Rewards are understood by educators as a way to motivate residents to develop positive behaviours. In these quotes it can be observed how something

that residents really appreciate such as having more free time away from the care home is used as a reward when they, for example, have shown an effort in their study of the day. This way such behaviour is reinforced in the residents and makes it more likely to be repeated.

5.2.5. Enjoyment of life

Having the chance to experience enjoyment seems to play an important role at Santiago 1. A great effort is made to organise activities which give residents the opportunity to have fun such as holiday trips, horse riding tours, karting and quad races or canoeing among others. These activities are usually expensive but educators seem to think that they are worth spending money on. Educators at Santiago 1 consider that, given that most of the times residents come from life situations which have produced negative experiences for them, providing them with experiences of enjoyment can have a positive impact and can help to reverse the consequences of previous negative experiences. In words of one of the educators:

> *"there are terrible and dramatic stories of kids who had to mature very soon and lived situations which are unbearable (…) all these we try to change, we try to enjoy life so they say 'ey, life is beautiful'."* (Interview 6)

According to them, enjoyable experiences have the potential of allowing residents to discover positive feelings which can be a motivation for them to make an effort to improve their situation and to try to achieve positive outcomes in their lives. An educator explained this in the following interview extract:

> *"If something really catches their attention it is going to make them generate endorphins and a pleasure that they are going to be willing to experience again, and they are going to fight for it. Horse riding or trips abroad are things that many people struggle to understand (why they do them)."* (Interview 9).

This quote is an example of how educators use enjoyable activities such as horse riding or doing trips to give residents the opportunity to experience

positive feelings that can motivate them towards achieving a positive lifestyle that allows them to engage in this kind of activities.

5.2.6. Therapeutic work

I could observe that at Santiago 1 they carry out what can be considered therapeutic work which is not done separately by other professionals but by educators at Santiago 1 and as part of their educative intervention. This work sometimes takes the shape of formal sessions carried out by educators specialised in psychology and/or pedagogy (and formally trained as such) but also can be found in less formal ways of interacting with residents and even in the shape of standpoints taken by educators, as I describe next.

Therapeutic sessions

Each resident at Santiago 1 attends therapeutic sessions with educators specialised in psychology. In these therapeutic sessions they work with a Systemic Constructivist Model of Solution Focused Brief Therapy based on De Shazer's work (De Shazer 1982). This model allows them to help residents to focus on the potential solutions for their issues rather than on the causes of their problems, and sets a theoretical framework for their intervention.

In these therapeutic sessions, educators at Santiago 1 try to involve parents or other close relatives of the residents depending on their circumstances, since learning to find the support of those around you who are able to help you move forward is a key element on the model they follow. Sometimes such collaboration of family members is not possible or desirable, and some families are more willing to engage in therapy than others so it is not always possible to work along with the resident's families, but at Santiago 1 they make an effort to try to make it happen by keeping in touch with the families and trying to show them the importance of their implications in the therapeutic process. The importance of the involvement of the families as part of the therapeutic intervention is highlighted by some of the educators as following:

"it (therapeutic work) is individual and with the family. It does them and the family good, and for them is great because there they put all cards on the table, they see what are their weaknesses and take the same direction all together." (Interview 5).

"all the work we do with the kids, reinforcing their self-esteem, habits and so on and so forth, if their dad or they mum, when they get home, throw it all away, it is not a waste of the work we have done but it complicate things. Therefore, we need to work with their parents so they too have a transformation in their views of their kid, a change in their habits and a change in their perspective." (Interview 6).

In these quotes educators show that the therapeutic work allows them to work with residents' family members so they can be helped to overcome the difficulties that might have arisen between them and their relatives. Thus, educators seem to believe that through therapeutic work with families their intervention can also have a positive impact on the relationships that residents develop with their families so it does not become an obstacle for them in the present but also in the near future.

Avoiding labelling and prejudices

I have noticed that educators at Santiago 1 make an effort to avoid prejudices and labels affecting the way they work with all the residents. Regardless of their backgrounds, conditions or personal situation, all residents are treated equally and the educative intervention is carried out in the same way with all of them. The following interview extract shows an educator explaining this:

"Sometimes it is better not to read the reports, but simply make contact with the kid. If there is a kid with whatever mental disability or whatever, then you are limiting yourself in the way you interact with them, but if you interact with them in a natural way it might help them much more. (…) You are interacting with them without having prejudices about them, without thinking that they are less valid, that they have a disability." (Interview 1).

This shows an effort made by educators to avoid the negative impact that their expectations of the possibilities of the different residents might have in their capacity to achieve their goals during their placements. By treating all residents equally and applying the educative intervention the educators are transmitting them a positive message which focuses on their strengths and potential rather than in their difficulties and needs. It is explained metaphorically by one of the educators in the following interview extract:

> *"If we tell someone that they are useless, in the end they actually behave as someone that is useless with no alternative. Here our intention is different. They do not know that they should be flying high in the sky, they do not know that they have the ability to fly, and this is something that we tell them very often."* (Interview 8).

Improving self-esteem

Another way of doing therapeutic work at Santiago 1 consists in the efforts the educators make in order to actively try to improve the self-esteem of the residents. Educators seem to acknowledge that self-esteem issues are very common in their residents and design their educative intervention so it can help the gain it back. Thus, they put in place mechanisms such as public praising, giving residents responsibilities as soon as possible and developing activities and workshops which might be enjoyable but also achievable by residents, amongst others, since they consider that this can be a boost for their self-esteem. The following extract from an interview shows the emphasis that educators put on the development of residents' self-esteem:

> *"We want them to get the best of themselves. We want them to discover themselves so they can say, 'hey, I am good a this' or 'I like gardening, pruning, planting or whatever. I can work doing gardening and I am actually good at it."* (Interview 1)

In this case the educator highlights how engaging in practical activities can contribute to the development of the residents' self-esteem as it allows them to realise that they are capable to achieve things by going to the experience of actually achieving them. These experiences are believed to have a positive

impact on the self-esteem of residents so educators develop a wide range of activities which are opportunities to show residents what they are able to achieve.

5.2.7. Experiential learning

Pedagogic potential of experiences

Experiential learning is an important feature of the educative intervention at Santiago 1. Educators seem to acknowledge the pedagogic potential of the large quantity of experiences that residents go through during their placement and seem to embrace them as part of their intervention. These experiences are the result of both the activities organised by the educators, such as workshops, trips or courses, and the situations that naturally take place in Santiago 1, such as living together with many other people, building relationships with those around them or meeting people who are knowledgeable in different areas of life. The following interview extracts reflect their approach:

> *"If you can have a group of kids and manage to get them doing a bunch of flowers and do it with them, there is where they are going to practice patience, empathy or dealing with emotions and boredom, and that is the way of learning."* (Interview 6).

> *"They live with Arabs, with Gypsies, with Romanians, and that doesn't stop them to relate with anyone. It doesn't matter where they are from, at a given time I relate with you. It depends on them, on how they are and not where they come from. I believe that it is something rich for the kids."* (Interview 1).

The first quote shows how educators consider that going through the experience of doing a practical activity such as creating a bunch of flowers is a learning opportunity. The process of doing something creative, even if it is something very simple, is an experience regarded as entailing an educative potential as it allows residents to develop some skills such as patience or empathy. Meanwhile, in the second quote it can be observed that educators

also give importance to experiences that residents go through passively as sharing their life-space with residents from other background. Educators believe that these experiences also have a potential educative value as it helps residents to overcome prejudices and to share their cultural characteristics and values.

An alternative to classes

Educators at Santiago 1 seem to consider experiential learning as an alternative way of acquiring knowledge that differs from class-based methodologies. They put emphasis on the importance that this kind of learning experience has when working with young people who, in the majority of the cases, have shown great difficulties in adapting to class-based educational resources. This extract from the interviews show such emphasis:

> *"Traditional things such as working the vineyards, the olive trees, pig slaughtering are about going back to our roots without needing to sit down in a class to be told how things were done in the past. That way it would be falling on deaf ears, but this other way they can experience it and be able to do it while having a nice time."* (Interview 4).

In this case educators acknowledge that the opportunity for residents of doing certain traditional jobs allows them to learn about these jobs and how they are carried out. Thus, they believe that going through the experience of doing these jobs with their own hands is a more effective way for residents to learn about it than if they were simply told about them.

5.2.8. Preparing for the future

Another aspect that caught my attention during my fieldwork was the emphasis that the pedagogic intervention had on preparing residents for their future outside Santiago 1. Instead of focusing on the past and work on how to deal with the background that residents have when they arrive at Santiago 1, educators are always encouraging them to look ahead, to think about what they want to do in their future and to work hard to be able to get it. Thus, most of the

activities and workshops are designed in a way that allows residents to develop skills and to have experiences which aim to prepare them for what it is yet to come, such as developing the capacity to access and maintain a job, to build and nurture relationships, to think critically and participate in society or to know nature and the world around them amongst others.

Experiencing today as it might be tomorrow.

One of the methods used to prepare residents for the future is to try to recreate life situations which residents will face once they finish their placement and leave Santiago 1. Those situations can be as simple as eating in a table with other people or as complex as having to cooperate in a working environment with someone who you do not trust or who has harmed you in some way. Thus residents have the possibility of experiencing those situations and, with the support and guidance of educators and other residents, learn from it and improve their chances of doing it better in their future. As I understand it, a simile to this would be that Santiago 1 is a training ground where residents practice and develop capacities which then will apply in their future life. The following quotes show how educators embrace this as part of their pedagogic intervention:

> *"They are in their home here, and they have to take care of it, to take care of their home mates and all the materials around. This is a training process because one day they will have to do the same in their homes or wherever they are."* (Interview 5).

> *"…so one day they will not be scared of travelling, or of having a neighbour that whatever, you know? and to have the courage to relate with everybody instead of locking themselves in a bubble."* (Interview 1)

It can be observed how the educator in the first quote is reflecting about what residents are going to experience when they leave Santiago 1. They consider that learning some aspects such as taking care of Santiago 1 as a home can help residents in the future when they need to take care of their own homes. Also the second quote shows how the educator believe that certain experiences lived by residents during their placement at Santiago 1, such as having the

possibility of travelling other countries or sharing the home with people with different backgrounds, can help them in the future as they will not be scared of these things.

Acquiring capacities for a better future

Another aspect of the pedagogic intervention aiming to prepare residents for the future is to provide them with "tools" (skills, qualifications, capacities) that they will be able to use outside Santiago 1 in order to achieve a good quality of life. This would include all the things that residents learn during the formal courses and the workshops taking place at Santiago 1 and go from learning to replace a bulb to knowing how to plan a trip or to achieving a qualification in catering. The following quotes from the interviews illustrate this point:

> *"…for example during the welding workshop in the morning the kids are great and do it fantastically, they want to learn and they have curiosity. This way they are enjoying, but they are not only enjoying now but also they are enabling themselves to one day in the future be able to enjoy life with fullness."* (Interview 2).

> *"A step forward is to obtain qualifications so when they leave, some in a few months, some in a year or two, they will have recognised qualifications which will allow them to rebuild or build their lives."* (Interview 9).

In the first quote it can be observed how the educator considers that a course like welding allows residents to enjoy but also to gain skills that are going to be valuable for them in their future. Equally, the second quotes shows that educators are reflecting on the future of residents and how obtaining qualifications while they are residing at Santiago 1 can help them to build their lives once they leave.

Thinking about the future

Finally, another method used in Santiago 1 is encouraging residents to think about themselves and their future. According to the educators, in most cases

residents do not slow down and think about what they want in their future and the consequences that what they are doing at the moment will have later in their lives. Thus it is often that educators talk to them and refer to how their future situations might be and what it is in their hands to have an impact on it and try to improve it. This can be observed in the following quotes from the interviews:

> *"…they come with the idea that they are underage and protected but, as every teenager does, they do not look at the future. Very often we have to tell them that next year they will be 18 and that if they continue doing what they are doing they will go to jail, and they need to start realizing that."* (Interview 6).

> *"They say 'I am about to be 18' and I tell them that being 18 is worse than being 17 because you have the same rights that you had but more obligations. They only stick to the idea that when they are 18 they will be able to go out, drink, etc. but when they are 18 they will have more responsibilities and obligations than rights, so we try to prepare them for that future."* (Interview 7).

These quotes show how educators try to encourage residents to think about their future when they leave Santiago 1 and to help them reflect on how certain negative behaviours or attitudes can have negative consequences for them when they reach adulthood. This shows a commitment from educators to help residents to reflect not only in the present but in their near future and connect what they are doing today with what they can achieve tomorrow.

5.2.9. Building relationships

Educators at Santiago 1 acknowledge the importance of building relationships with the residents in order to be able to intervene with them. According to their experience, their educative intervention is more effective once they have built a relationship with the residents. The trust that emerges from those relationships seems to allow residents to see the educators' support and advice as something that can be positive for them and to have more willingness to engage with their intervention.

Communication and information sharing seems to be one of the key aspects that is enabled by a good relationship between residents and educators. Such information sharing allows educators to have a better knowledge and understanding of the issues and needs of the residents, improves empathy between them and at the same time helps to make their relationship even stronger. The educators at Santiago 1 are therefore alert and willing to have a good conversation with residents when an opportunity emerges and embrace this as part of their intervention. The importance of building a strong relationship that enables a positive communication is highlighted by some of the educators in the following quotes:

> *"You share your day to day with them and build a relationship, bonds that are created between the kid and the educator. (…) It brings more possibilities to talk to them, to intervene with them. They allow you the room to access to some parts of their lives that, when you only see them three or four times a day, they would not allow you to access. Spending plenty of hours in a day with them, working together, creates a flowing relationship that allows you later to work with them."* (Interview 1).

> *"…moreover it helps you to get closer to them. Doing sports or activities and in certain moments you get such a complicity that you are able to achieve the goals that you set with them. With the information they give you, you can do lot of things and it these moments are important because it is when they relax and tell you things."* (Interview 3).

In these quotes educators show how spending time with residents and carrying out activities alongside them contribute to build a relationship with them. They acknowledge the importance of this process of relationship building as a way of knowing more about the residents and having the opportunity to obtain information that is going to allow them to help residents reaching their goals.

Conclusion

This chapter has presented the findings obtained in this research in relation with the educational approach of the intervention carried out at Santiago 1 and

described the different mechanisms and strategies that allow educators to put this approach into practice in the day to day living at the care home as part of their social pedagogic intervention.

The findings have shown how different sides of education are embraced and developed as part of the social pedagogic intervention at Santiago 1. Formal education is rarely found within care homes, but the findings show how educators have developed a series of formal courses that allow residents to acquire professional skills and to obtain officially recognized qualifications. Non-formal education initiatives have also been presented as findings of this research. Workshops and activities which are planned and carried out with the purpose of giving residents the opportunity to acquire knowledge that is not part of the curricula of formal education are part of the educative intervention at Santiago 1 too. The findings presented in this chapter have also shown that informal education is part of their education intervention. This side of education can be observed during the leisure and everyday life activities taking place at Santiago 1 which are also considered as learning opportunities with a strong educative potential by the educator at the care home.

This chapter has also shown findings that present strategies and mechanisms that reflect the educational purpose of the intervention at Santiago 1. This educational purpose can be observed in the organisation of the daily living at the care home, the attitude shown by educators and their understanding of the educative potential of building relationships with residents and the strategies developed in order to create learning opportunities for residents in different aspects of their intervention. These strategies include therapeutic work, learning processes based on experience or a focus on creating experiences that are going to be valuable for residents in their future, amongst others.

The next chapter is the second findings chapter in this thesis and presents the findings related to the approach to risk, participation and impact on the wider community of the social pedagogic intervention at Santiago 1 found in this research.

Chapter 6. Findings part 2

Introduction

This second findings chapter continues describing the findings obtained in this research by presenting the characteristics of the social pedagogic intervention at Santiago 1. This chapter presents findings obtained in this research which are related to aspects that are considered to be at the core of the social pedagogic approach as a particular approach to risk, an intervention based on the active participation of both residents and educators and the development of an intervention that relates with the wider community.

The chapter is divided in three parts. The first part shows findings related to the approach to risk present at the social pedagogic intervention at Santiago 1, the measures in place to manage it and the understanding of risk as having a potential educative value. The second part presents findings related to the participation of residents and educators on all the activities that are part of the day to day living at Santiago 1. The third and last part is related to the findings about how the educative intervention at Santiago 1 aims to have an impact on residents and their community, aiming for the social inclusion of the residents and the development of social values in their society.

As in the previous chapter, the findings are presented as the result of the observation carried out by the researcher. These observations are complemented with quotes extracted from the interviews with educators which provide examples and their perspective regarding the different aspects of the social pedagogic intervention described in this chapter.

6.1. Risk management

The way risk is conceived and managed at Santiago 1 shows a particular approach to risk in a social pedagogic intervention. How risk is conceptualised and the effects that this has on the practice at Santiago 1 is shown in the following sections.

6.1.1. Approach to risk

"Maybe the riskiest thing is not doing anything. That is a big risk" (interview 6)

I noticed that at Santiago 1 their approach to risk is not particularly strict, in the sense of allowing residents to carry out activities which involve certain risks. For example, I witnessed how residents used what could be considered dangerous tools, climbed a structure to dismantle it or hang from ropes in order to paint a wall. Educators at Santiago 1 seem to acknowledge the risk involved in these activities but decided to allow residents to carry them out and even sometimes encourage them to do it, which shows a particular understanding of risk. Such approach means that they understand that learning emerges from the experience of doing different activities and give more importance to provide a learning opportunity than to stay in the safe side. The following quotes address this aspect:

> *"That way (not doing activities which imply certain risk), they don't learn, they don't enjoy, they don't socialise which is an important part of being here, they don't gain independence. These are very important aspects of being here, being able to say that they can do things by themselves."* (Interview 3).
>
> *"…sometimes they need to have that risk (…) it is something that provokes learning for them, and it is something that they need to know how to deal with and if they cannot do it, they have to ask for help which is something very important too."* (Interview 2).

These quotes highlight some aspects that show the approach to risk taken at Santiago 1. In the first quote the educator acknowledges the importance of carrying out activities even if they pose certain risks for the residents. They emphasise the benefits that those activities offer as they allow residents to experience enjoyment and to gain social skills and independence. Thus, the educator seems to give more important to those benefits than to the potential risks that the activity entails, showing a particular approach to risk. The second quote shows how the educator also gives importance to the fact that residents

need to learn how to deal with risk and how they can be helped by educators in order to achieve this, what is also a learning process itself.

Educators also emphasise the impact that allowing residents to do risky activities has on their confidence and self-esteem:

> *"… it is about trust (…) giving them a hammer and allowing them to work with it for them is a boost on their confidence and it has an effect on their self-esteem."* (Interview 6).

They way educators allow risks to be taken is not out of control, rather the opposite, since they seem to know which residents can be allowed certain risky activities and which cannot, who might need their support to do it, and they explain residents how to carry out those activities minimizing the possibilities of having an accident. This can be observed in these quotes:

> *"I think they have risks everywhere. When something happens then we simply take them to hospital and that is everything, but of course we always try to do things safely, so they don't fall down."* (Interview 1).

> *"…there are risks but, how can I say this, I see it more like a semi-controlled risk (…) we try to do the activities that imply certain level of risk with a previous explanation and taking safety measures."* (Interview 2).

In these examples it can be observed how educators try to take safety measures so activities are done as safely as possible. However, it seems that knowing that doing certain activities entail a degree of risk does not impede educators to develop such activities but makes them being particularly cautious and concerned with trying to help residents understand the risks involved.

6.1.2. Drug misuse control

At Santiago 1 they have a zero-tolerance policy for drugs misuse but they face the issue of residents consuming drugs during the free time they spend outside the home which is an environment educators have no control over. Educators acknowledge that residents' behaviours are highly influenced by their drugs consumption as it can be observed in the following quotes:

"It is incredible how different their behaviour is when they are clean for three months or they are smoking. It can be seen in everything, the level of cooperation, the attention… quite often whether they are smoking or not is what makes them be good or quite the opposite." (Interview 6)

"We have seen many kids who are doing great when they are not consuming (drugs) but as soon as they consume they don't do it that way and get easily frustrated, and some others show an aggressive conduct which they don't show when they are not consuming. (Interview 3)

In these quotes educators highlight that consuming drugs affects residents in the way they behave. They believe that taking drugs has a negative impact on the ability of residents to be focused in whatever they are doing and also on their self-control as it leads them to be more frustrated and aggressive.

In order to tackle such issue, they decided to implement a weekly drug test which those residents who are under suspicion of abusing drugs must take. Those tests take place in the house under the supervision of educators and their results can be observed immediately after. Failing to take a test when required is considered as if they had taken it and the result had indicated that they consumed drugs in terms of the consequences for a resident.

This test is considered by educators at Santiago 1 as a tool they use as part as their educative intervention. On one hand, educators use the results of the drug tests to check whether a resident has maintained, reduced or increased the drug abuse, and then introduce consequences which can be either positive or negative for them. Usually having an improved result means that residents can spend time with their families over the weekend, when this is possible, or enjoy more free time and petty cash, while negative results means they are not allowed those. Examples of such use can be found in the following quotes from the interviews:

"Tests allow us somehow to reward them (residents) and to motivate them because if they are doing good and their tests results are positive we have material to work with them. (…) very often they are rewarded

with little things or a visit with their family, at the end of the day it is about motivating them." (Interview 5)

"We usually do them (tests) so we can have the results on Thursday or Friday and if there is any visit planned or some days off we can also assess them, as a requirement so to speak, so they have at least something to achieve." (Interview 2)

On the other hand, educators stress the importance of carrying out drug test so residents are aware of their own consumption. Not only educators have results they can use to reward residents, but also resident themselves can visually see where they are in terms of consumption and the progress that they make in this aspect of their lives. This seems to be an important part of the educative intervention at Santiago 1 as the following quotes show:

"Every week we do a drug test to see how they (a resident) are doing, mainly so they can see it, apart from punishing and all that, so they can see how they are. How they are related to the drug, whether they are good or not, whether they are controlling it or the drug is controlling them. It is about their control; it is another concept." (Interview 1).

"… they can see if they have not smoked during the week that their body is reacting and they are better and feeling better. They know the effect of stop smoking, sometimes it can only slightly be noticed and that means drugs remain in the body for long, but after two weeks they see is beginning to decrease so they can know their (drugs) effects." (Interview 5)

It can be observed in these quotes the emphasis that educators give to the fact that drug tests allow residents to be aware of their own consumption and the progress they are making in that regard. Educators seem to acknowledge the potentiality that the realisation of their drug consumption has for residents to be able to change their negative habits regarding to this.

6.1.3. Open house

At Santiago 1 I have experienced the welcoming atmosphere that has been created for outsiders who have the chance to visit it for various reasons. Instead of creating a space shared almost exclusively by residents and educators they seem to be willing to bring people from outside when there is an opportunity to do so. This is part of an open approach that educators indicate is very beneficial for everyone at Santiago 1. Hence, it is easy to find people participating on different activities around the home which are not part of the staff such as students doing placements, international and local volunteers, social workers from childcare services, members of local churches, associations and services or even people like me carrying out research among others. Although they consider having an open house is positive they are aware that it might bring some difficulties:

> *"*(speaking about visitors) S*ometimes situations arise which are uncomfortable, sometimes they don't understand us and sometimes we have to explain ourselves, sometimes everything is a little bit more complex than we would like it to be"* (Interview 8)
>
> *"I think risks are taken but nothing wrong happens. Here we could open to someone with the intention of doing evil but as far as I know it has never happened."* (Interview 4)

These quotes also show the approach to risk that educators at Santiago 1 have. They show an acknowledgement of the risks that are involved in being a care home that welcomes outsiders to collaborate with them in different ways but this does not stop them from doing it. They seem to give more importance to what these outsiders can contribute than to the risks involved since they continue to encourage and embrace it as something positive for their intervention.

There are several reasons why such open approach seems to be taken. One of them is to allow people from outside the home the opportunity to observe what happens at Santiago 1 and learn about their daily activities and the people taking part of it. According to educators this is an opportunity to give visibility to

all their work at Santiago 1 and to help fighting the prejudice that some people have against their residents based on stereotyped ideas.

> *"There are social workers coming, city councillors coming, all of them come here, and they see what this is in reality, because maybe from outside there is another view about Santiago 1."* (Interview 1)

> *"We want people to know, and you to know other people and to see that we are integrated and part of what is happening."* (Interview 6)

Educators seems to place an emphasis on the importance of allowing people from outside Santiago 1 to learn about their intervention and the life inside the care home. They believe that this helps people from outside it to have a clearer picture of the residents and what they do so this way they are not guided by prejudices or the views that general population has over children in care.

Another reason seems to be related to the learning possibilities that outsiders bring to residents at Santiago 1. Educators acknowledge the value that those people bring into the house in the shape of particular skills, relevant experiences, positive energy and enthusiasm or cultural variety among others, so they welcome and embrace the learning opportunity that arise from their visits. The following quotes exemplify this idea:

> *"It is facing kids with experience, it could be someone coming to do a placement, or a thesis, they can interact with them and talk about something interesting. They might tell them they live in Scotland and you are prompting them to be curious and to ask you simply what a PhD is or if you are in Scotland why did you go there. You are giving them a handful of possibilities to open that curious side".* (Interview 2)

> *"They* (residents) *see other things and what they do, and you identify yourself in them because the curiosity emerges (…) they show talents and the kids make question, they have a sight of models in which they can see themselves reflected in."* (Interview 6)

These quotes exemplify how educators see outsiders as having a potential to make a contribution to their educative intervention. Their characteristics and

experiences are seen as something that can prompt the curiosity of residents and make them want to learn more about them. Also they consider that outsiders developing activities can be seen as models for residents and this might help them discover interests and be motivated towards setting and achieving new personal goals.

6.1.4. Progressive independence

Another aspect observed at Santiago 1 is the progressive independence that they provide residents with. Starting from the point where they are not allowed to go out or to have money, residents are given the opportunity to do things by themselves as their placement at Santiago 1 progresses. These steps into independence seem to be used by educators as key moments in which they evaluate residents in relation to how they are managing such freedom and observe how they are doing in terms of personal development. The following quotes are examples of such an approach:

> *"During the first days they are in observation and then in adaptation, which is when they start to go out. Autonomy is something that some achieve earlier some later. I was going to say some never achieve it completely, but they usually achieve it."* (Interview 2)

> *"During the first weekend they don't go out, and they have their petty cash controlled. Then we start observing how they react. If during the first week you tell them they have no petty cash and they react badly, or they are someone who goes and work well."* (Interview 1)

These educators highlight two aspects of their intervention, such as allowing residents the possibility of going out on their own and having petty cash money, that are not granted when they first arrive to Santiago 1 but progressively later on. According to these educators this allows the team to be able to observe the particularities and the needs of the residents when they arrive so they are better prepared to assess whether those aspects are beneficial for them at that point. Also educators use this a way of motivating newcomers to settle and engage with the daily routine at Santiago 1 since they offer these residents the

opportunity to earn their authorisation to go out and have money as a reward for showing a positive behaviour.

6.2. Participation

All people present at Santiago 1, both residents and educators, have a very participative role in plenty of the activities taking place there. Their involvement in such activities depends on aspects such as their roles within the house, the time they have been there or the responsibilities they held, but it can be said that they are all active members of Santiago 1. This seems to be an strategy developed as part of their intervention with a clear educational purpose as it can be observed in the following sections.

6.2.1. Educators' roles

Role modelling

When an activity takes place at Santiago 1 not only residents but also educators participate actively in it. Although educators have also the responsibility of looking after the rest of participants and ensuring that the activity takes place without incidents, educators and residents participate alike. Educators do not merely facilitate or monitor the activity. During my time at Santiago 1 I do not recall witnessing an activity such as playing sports, carrying out workshops, doing leisure trips or house maintenance work in which educators were not fully engaged alongside residents as participants.

Participating actively in the activities allows educators to be role models for residents and create learning opportunities about positive and adequate behaviours and values in different areas of everyday life. For example, an educator participating in a sport activity can help residents to learn about aspects such as effort to achieve goals, team collaboration, limits of competitiveness or rules abiding by leading by example. The following quotes show how educators stress the importance of such role modelling for their intervention:

"Leading by example, if educators do it why would we not do it too? If we want kids to do something we do it and that motivates them to do it too." (Interview 5)

"We always lead by example. If I want a kid to do something, then I must do it myself. If I want them to clean I must clean first. If I want them to set the table, I do it first. If I want them to be organised, to be an organised person with a clean room and everything, then I must have mine like that first. It is leading by example: you cannot ask a kid to do something that you don't do." (Interview 1).

In these quotes it can be observed that educators make an effort to lead by example in aspects of the everyday life. They seem to acknowledge the importance of this as a way to be models of behaviour for residents but also to motivate them to behave like them. Doing tasks like cleaning or setting the table themselves allows educators to ask residents to do them too with higher possibilities of success than if they just told them to do it, as they have shown with their example that it is the expected way to behave in that situation.

Skills and knowledge

During my time at Santiago 1 I could observe that educators are skilled and knowledgeable. Most of the educators which I had the opportunity to work alongside showed skills and knowledge in several fields. For example, an educator could be leading a group carrying out a musical activity and showing good skills for it and then move on to practice a sport at a good level too, while another educator could be dancing break-dance with a group of residents before supporting other residents who need to write down an essay for an English course. It seems that they consider very valuable having educators with a wide range of skills because they add to the richness of the intervention and because such skills can be learned by those residents who have interest in them. The following quotes show some thoughts from educators regarding it:

"It is important because we are actually doing modelling about something, so it is better that it is done by someone with plenty of experience and knowledge who will probably be able to facilitate learning

and give accurate and practicable information to be assimilated well." (Interview 2)

"I realised that I could contribute, I could contribute with crafts workshops because I am good at it, and then I ended up giving the food handling course to residents doing the kitchen course. Also, in the Morocco project, because studying cooperation I have done a lot of things, I help out with medication, also because my father is a pharmacist and I have worked in his pharmacy. It is like take advantage of everything from everyone." (Interview 4).

These educators highlight the importance of having a wide range of skills and knowledge for their role of educators. On the one hand, having certain practical skills allows educators to make use of them in activities and to give residents the opportunity of learning from them. On the other hand, knowledge and experience can help educators to deal with the countless needs and situations that arise in a care home of this size and with the amount of residents and activities they have.

Being there

Educators at Santiago 1 approach their time there with an attitude of spending time not in a separated sphere of their life, but in an integrated part of it instead. I noticed that they saw little distinction between their professional and personal life but understood both as a whole. A good example of this approach is the fact that many educators involve their families in different activities taking place at Santiago 1. It is common to see some of their children being part of a day out with residents or going with the educators and residents on a holiday trip. This attitude towards their work place can be appreciated in the following sentences:

"Some educators bring their children here at lunch time. Their kids can be playing and sharing time with residents. It is a bit like doing life here instead of coming and say I only work weekends." (Interview 2)

"You get emotionally attached and I believe is the most beautiful way of doing this. You suffer and go through things, but you cannot work with

people and be apathetic. For me it doesn't make much sense, you would be missing the best of this job. If you renounce to this, you are missing the best of this job. You would not be suffering, probably, but you would be enjoying much less, and it is a way of doing your job less effective." (Interview 6)

This shows that educators do not take their participation in Santiago 1 simply as a job, but they also have an emotional attachment with their role and with the residents they work with. Thus, their presence in the house does not seem to be understood simply as their obligation but as something they value and enjoy.

Bidirectional learning

At Santiago 1 they make emphasis in considering that learning processes taking place there are not unidirectional. From my first day I learned that educators at Santiago 1 do not only provide learning opportunities for residents, but also engage in learning processes themselves. Residents learn from educators but also educators learn from residents, and they both learned from experiencing different life situations during their time at Santiago 1.

For example, educators usually take part in activities in which they are skilled since this allows them to be a reference for residents who would like to learn those skills. However, this is not always the case, and there are many occasions in which residents are more skilled than educators so learning takes place the other way around. Actually, since I had the chance to participate in a wide range of activities, I could experience plenty of situations in which I had the opportunity to learn different skills from residents. The following quotes show how educators verbalise it:

"Everything comes handy for living, learning. I don't know how to weld but I can learn to weld. I don't know how to juggle but I can learn to juggle. I come here as an educator but, well, also learning new things is good for me so I can teach them as well". (Interview 5)

> *"To me, for example, new technologies are too much. I grew up with the same old marbles and bottle caps and quite often technology gets out of my hand so yes, there I learn a lot from them."* (Interview 3)

Learning skills from each other is a good example of bidirectional learning and these quotes show how educators learn some skills from residents during the course of their intervention. However, bidirectional learning is not only reflected on the acquisition of practical skills. Educators at Santiago 1 consider that they learn as much as residents do from all the life experiences that they go through together and which allow them to grow at other levels such as personal or emotional levels. The following quotes are good examples:

> *"It (working at Santiago 1) teaches you a lot about yourself, where your limits are, how is your patience, how you are doing in terms of eagerness, everything. They (residents) are showing you that, it is like they do an x ray of you and show it to you."* (Interview 6)

> *"…from colleagues is more at professional level or how to intervene with the kids. I believe that when it is learning from the kids maybe you learn deeper things about emotions and things like that."* (Interview 4)

In these quotes educators highlight that their participation in the intervention at Santiago 1 is also a learning process for them. They seem to be aware that the experiences and situations lived with the residents and workmates provide them with an opportunity to learn more about themselves at a personal level in aspects related with emotions, patience or self-control.

6.2.2. Resident's participation

Contributing

Santiago 1 is a big residence and it needs plenty of work to keep it clean and in good condition. Residents and educators are organised in shifts for cleaning tasks. Each week there is a time reserved for cleaning the houses which are part of Santiago, and the residents and educators have to clean their bedrooms

and common areas during this time. Other everyday cleaning tasks such as cleaning the dining room after mealtimes are carried out by a different group every week. The willingness of the residents to participate in these tasks is not usually great and very often educators need to monitor them so they do it. On occasions residents refuse to do it and educators need to take measures such as having serious conversations and even reducing rewards so they understand the importance of living in a clean environment. Educators seem to give great importance to this so not only the house remains clean and tidy but residents acquire good cleaning habits and develop responsibility over the house and their personal spaces.

> *"Many of them come here not knowing how to grab a brush, and that is something an 8 years old kid can do. So you put them to sweep, it is about making them feel this house and theirs so they take care of it."* (Interview 4)

> *"At personal level, being able to take care of something by yourself is something important. Cooking, knowing how to clean, a basic project for having independence, it is important the cleaning and be part of taking care of living in a clean and tidy environment. It also facilitates the inside order and it is a way of taking care of ourselves and regulate between us, it happens too."* (Interview 6)

In these quotes it can be observed how educators value that residents contribute doing housekeeping tasks not only to learn how do it and keep the house running but also help them developing a feeling that Santiago 1 is their home so they take care of it.

Assemblies

At Santiago 1 decisions that are likely to affect to residents and educators are made in assemblies which take place every day. Usually, a couple of the on-shift educators and a small number of residents take part in the assemblies in representation of the rest of the residents. These representatives are chosen by the residents themselves, and their mission is to raise issues that might be

affecting them, propose changes in the running of the place, suggest new potential activities and have a say on all matters that affect them. They also carry out a bigger assembly on weekly basis where all residents and educators are present and given the opportunity to participate and raise issues to be discussed and agreed upon.

The assemblies are taken seriously by both residents and educators and, although sometimes are more effective than others in terms of outcomes, they are given importance as part of the educative intervention and educators consider themselves and residents as human beings at the same level, sharing their time within Santiago 1 and learning from each other. Allowing the decision-making process to take place in assemblies rather than being the educator's task reflects such approach and contributes to create an atmosphere of equality.

> *"We always listen to their opinion and proposals, we are always open, but the most formal place where they are all together is in the assembly, the big one here, and then in the homes after dinner where each home is going to deal with their issues. That is good that kids and educators we all feel that we can put whatever on the table and be listened to."* (Interview 5)

> *"We try to orient them. It is very often that it is them who want to know what is going on because it is their home. It helps a lot the participation both of educators and kids. As you said there are moments when it is individualised but usually is all collective, we are a big family and that is what we have to make them see, that this is their home, and this is their family and they need to deliberate between them for many things".* (Interview 7)

These educators highlight how important it is for them to create an atmosphere where everyone can be listened be able to communicate in order to solve the issues bothering them. Assemblies play this role as they are time specifically set for it. Moreover, educators point out that these assemblies contribute to

create a sense of belonging in residents as it helps them feel that Santiago 1 is their home and that they can contribute with their ideas and suggestions to it.

Taking responsibilities and leading by example

Residents at Santiago 1 make a considerable contribution towards choosing, planning and carrying out the leisure activities that take place at Santiago 1. Educators encourage them to suggest activities of their like that they do not usually do but could potentially be developed. This way, residents always have the choice of doing activities which they can enjoy. Then together they explore the options available and decide whether it is possible to carry them out or not, and which steps are needed to plan them, including aspects such as obtaining equipment required, booking spaces if necessary or inviting external people to help them develop the skills needed in the activity. Once the activity is set up and running, usually at least one educator accompanies the residents participating and also take part on it. However, I have also witnessed cases in which activities like dancing or singing take place without an educator participating on them, and the residents would organise and carry it out.

On the one hand, educators stress the importance that residents taking responsibilities has for their own benefit and how it helps them to improve self-esteem and acquire helpful skills. For example, in the following quote the educator points out how useful it is to allow residents to lead activities as it helps them developing a positive feeling of self-sufficiency:

> *"If there is a kid who can lead the activity better than the educator so let's let them do it. It is going to be more useful. (…) I believe that for the kid is something that makes them feel like 'I can do this, there is no need for someone to be overlooking at me'. It is giving them a responsibility. It is like I am trusting them."* (Interview 1)

On the other hand, educators point out that residents leading by example help other residents to engage in the activity and to see those organising as positive examples for themselves. This can be observed in the following quote:

> *"Sometimes we tell some kids that they should participate more, not only leading workshops or activities but also leading by example to smaller kids. At the time of, for example, having a shower, not being messing around in the room but influencing them and telling them to do it quickly and do things right."* (Interview 2)

Here the educator highlights how leading by example can help residents to show other residents how to behave in aspects as simple as having an shower without making a mess.

Becoming educators

An aspect of Santiago 1 that caught my attention was the fact that some of the current educators were previously residents when they were underage and then continued to be part of it as educators. This seems to be a strategy followed at Santiago 1 since they believe that residents that become educators can provide a lot of richness and quality to the intervention since they have had the experience of what is like to be a resident. This brings an interesting new point of view to the educative team and they seem to be willing to continue doing it as they value it. In order to achieve it they provide those residents who show skills and value with the opportunity to take a course which can qualify them so they can take a role in the house and continue being there.

> *"Since this house started plenty of people have come as residents and ended up as educators. Who better than someone who has been a kid inside to know how this works and how they feel."* (Interview 6)

> *"Here we have educators who have previously been kids in the house. They came as kids and then they stayed being part of the educative team. We have had a bit of everything, some good experiences and some bad experiences. There have been kids who have been and others who have not been able to deal with the pressure that meant to be part of an educative continuum".* (Interview 8).

In the first quote the educator interviewed highlights the potential of having educators who were residents of the care home as they can better understand

residents and their feelings. However, the second quote shows an educator indicating that this is not something easy to achieve since some residents have failed trying to become educators due to the pressure of having to provide an educational intervention.

6.3. Relating with wider community and society

This final part of findings addresses the educative intervention carried out at Santiago 1 which relates in different ways with the outer community and society. This seems as another mechanism that illustrate some of the characteristics of a social pedagogic approach and that has a strong influenced in their educative intervention. Educators at Santiago 1 believe in the importance of developing an educative intervention which goes beyond the institution itself and which constantly remains in contact with the community where they belong and the society. This allows them to avoid making residents live in some king of micro-society inside the home and helps them to be more integrated and active participants in the community, aiming for an intervention with social justice at its core. The following points show how they incorporate such aspect in their educate intervention.

6.3.1. Social inclusion

Being seen in the community

At Santiago 1 they make an effort to be heard and seen by people in their community. Not only educators and residents at Santiago 1 take part on many activities outside of their premises and using public spaces or facilities, but they also carry out specific activities in order to show what they do, to make their voices and to help changing the negative vision that some people in the community have about young people in care and residential care home.

A good example is the radio workshop which takes place once a week. In this workshop residents learn how to use radio equipment, but also have the opportunity to express their opinions and views on the latest news by recording

a radio programme which is later available on their website. This activity clearly aims to help residents to learn skills related to radio and also to create a channel through which their voices can be heard by the community. The radio workshop is not the only example of their aim to be seen. At Santiago 1 they organise several events during the year in which they show members of the community some of the outcomes of their work. These events include performances of their circus school, theatre plays or exhibitions in which members of the public can see examples of what residents do in workshops and formal courses.

> *"By participating in something social here in Salamanca you are allowing people to know the work done by these kids. Maybe they say 'these are from a residential care home' and anyone would point a finger at them and grab their bags tightly, and here they are seeing them in a situation where they are enjoying and doing something positive, and that makes them doubt."* (Interview 2)

> *"We want people to see the good side of them. Some are good at playing* (instruments) *some good at singing, some very good at playing sports, some very good at studying, there are a bit of everything. And we want all that to be seen…"* (Interview 3)

In these quotes it can be observed the importance that educators give to create opportunities for people from the community to see residents at Santiago 1 participating in activities and events. They believe that there is negative stereotype for children in care and think that being able to show people that residents engage positively in those situations can help them see residents from a different point of view and challenge their preconceived assumptions about them.

Making a contribution

In addition of their aim to be seen, at Santiago 1 they also organise and participate in events in which their aim is to make a contribution to the community. An event organised by them in which I participated was a farm school day prepared and carried out by residents and educators at Santiago 1

for children in early years of primary schools. In this event those children had the opportunity to learn from residents and educators about aspects of the rural world, such as bread and chorizo making, use of aromatic herbs or tractor and horse riding. This is a good example of an event aimed to make a contribution to the community while also giving residents the opportunity to use and improve their skills in planning and carrying out the event, as much as making them feel valuable.

At Santiago 1 they also participate in events which are hosted by other organisations such as cultural days, fundraising events or initiative hoping to raise awareness about social issues. The way they participate varies depending on the nature of the event. Sometimes they contribute preparing a show which can include a circus performance, a theatre play or dancing and singing amongst others, and other times they just take part in the activities programmed by the event organization. Participating in these events seems like a great opportunity for residents and educators to make a contribution in the community using their own skills and also to gain awareness of issues that affect to people in our society while enjoying and spending time with other members of the community.

> *"Here sometimes there are events like the world human rights days, a day against domestic violence, and we always from Santiago do a passacaglia music show to contribute with society."* (Interview 1)

> *"It is also bidirectional because for them it is very enriching and of course being contributing to the improvement of other people's lives."* (Interview 4)

Here educators highlight that making a contribution in social events outside Santiago 1 is valuable for both the community and the residents. While the social events benefits from their participation that contributes to collaborate with issues affecting the community and society, it is also an enriching experience for residents who make that contribution as it helps them developing a sense of belonging to that community, experiencing a positive feeling of helping other

people in need and other aspects already mentioned such as challenging the prejudices existing towards them, amongst other positive outcomes.

Learning of traditions

During my time at Santiago 1 I learned that they frequently participate in and organize traditional events which nowadays are rare to see out of very rural environments. Such events include wine yard caring and grape harvesting, bee-keeping, traditional pig slaughtering or the feast of the lamb. Educators at Santiago 1 seem to understand that this offers an opportunity for residents to learn from the experience and values that traditional events can offer while learning at the same time a series of skills that could open doors up for them in the future.

> *"The effort is to carry a previous knowledge, but not only that, but also that it can be taught by someone who has that experience, who can tell you about their own life. Someone who has spent all their live with wine yards and dedicated to it can communicate the deeper aspects of agriculture."* (Interview 2)

> *"Apart from traditions things like cooperatives, pigs slaughter, wine making, we do bee-keeping, we harvest olives… These are closed activities not always available, but not being a banker is better, a banker is not better than a farmer, I mean, there needs to be a bit of everything."* (Interview 3)

Educators seem to value the opportunity to learn from people with experience in these traditional jobs and see that residents obtained plenty of knowledge engaging in these activities with them. Carrying them out educators also seem to try to challenge the views that residents have over these jobs and to give them the opportunity to experience them, learn skills and see alternative ways to make a living out of resources available in the rural areas.

6.3.2. Social values

Multiculturalism

At Santiago 1 it is easy to find people from different backgrounds, cultures and nationalities. From residents to educators the percentage of those with international backgrounds is very close to those with a local background. This fact has a very considerable impact in the educative intervention carried out and it is embraced as a learning opportunity. Thus it can be found that a great number of activities which include celebrations, dancing and singing, game playing, cooking or even the circus school are heavily influence by the different cultures present at the house.

> *"We do dances from Puerto Rico, dances from Brazil, belly dancing. We do food from all over the work, we do couscous, we do tallin… and that enriches people. There are kids and educators from all nationalities, so you transmit the good from your culture and the other ones from theirs."* (Interview 1)

> *"… to reach a bit of interculturality which is inside and which is respected by everyone here. And also to work with it so it is not only something nice that is here and I live with it but also to go a step beyond, that they would like to know why this or that, the origins of your country, your culture, it is another way of learning."* (Interview 2)

In recent years, Santiago 1 has experienced the influence of a number of residents coming from Morocco, usually unaccompanied minors who have migrated for different reasons. Some of them lived in Santiago 1 for some time before moving on but others are still involved and collaborate or work as educators in the home. These residents brought into Santiago 1 several aspects of their culture, such as habits, beliefs, arts and language. At Santiago 1 these was seen as an educational opportunity and the multiculturalism existing in the house was embraced as part of the educative project in the home. Thus Santiago 1 is today a home where Moroccan culture is present in many aspects of the daily life. An example is the room in the home destined to carry out

religious celebrations or activities which is called the 'chapel-mosque'. It is decorated with motifs from both Christian and Muslim religions and holds their pertinent holy books. Other examples that I found are the choice of alternatives in food made according to their cultural needs, decoration around the house, traditional celebrations and diverse activities carried out with the intention of learning about different aspects of their culture.

Embracing part of the Moroccan culture also brought to the residents and educators of Santiago 1 a greater awareness of the social and economic situation of parts of that country, and in particular from the impoverished areas where many of the Moroccan residents come from. Such conscientization, as Freire would call it (Freire 1968) leads to an interest amongst residents and educators in making a contribution towards the improvement of the conditions of the people, and in particular the children, living in those areas. This interest triggered the creation of the educative project that residents and educators from Santiago 1 carry out in the southern part of Morocco every summer, in which they use their skills learned in their courses to help develop rural schools. This project is a great success year after year and has an extraordinary educative value.

> *"We go to Morocco two months and the idea is a real living together, us (educators), kids and everyone at Santiago 1 gets enriched."* (Interview 8)

> *"The project in Morocco, is a great thing. We go two months to contribute with another country, we are leaving our border, doing something very… And the message you give to kids here when they go there and they see and they learn things."* (Interview 1)

As it can be observed this project is regarded as a great learning opportunity in which educators and residents come out of their comfort zones and make a contribution while learning lot of things about a different culture, their way of living and the economic difficulties that some of them go through. This is considered having a great educational potential for residents as they have the opportunity to experience what it is to live in impoverished areas in Morocco

and to develop empathy and understanding of the situation on many of the children migrating to Spain.

Awareness of societal issues

At Santiago 1 educators and residents learn and contribute raising awareness of issues affecting their society in *general* and their lives in particular. For such a purpose, they prepare certain activities to commemorate international or national days aimed to create conscience about social issues. Some examples I found were their commitment with the International Day for the Elimination of Violence against Women. Since many of the residents in Santiago 1 have experience violence against women in their social environment or even in their own skin, the celebration of this international day has a big repercussion within the care home. As a result, several activities were prepared by educators and residents, including reflection groups, talks of victims of violence and the creation of a big banner to show at the home's door claiming for an end of such issue that affects many women in their society. Other examples are their participation in a gathering claiming for 'Zero Poverty' as part of a national movement and their contribution to an education day in which they shared their educational experiences hoping to help improving educational projects in other settings.

> *"We always try to tell them which day it is, for example the day against domestic violence or breast cancer day. We always try that they see what that is about because many of them will not know what it is.* (Interview 3)

> *"Actually these are the problems of society. They (residents) are the reflex of the problems of society (…) domestic violence, sexual roles, immigration, poverty, everything that happens in society is happening here and we work with news from outside but it is just a reflex of what happens here."* (Interview 6)

These quotes show how educators make an effort to make residents aware of the problems of society and how these affect them. They try to make these

problems visible to residents in order to help them to understand that many of the issues they have faced in their lives are actually the result of some of these problems. Educators believe that this allows resident to reach a better understanding of these issues and helps them cope with their problems in a better way.

Conclusion

The first part of this chapter has presented an approach based on a management on risk that creates mechanisms of risk avoidance while recognising that risk is an intrinsic aspect of the daily living. This approach puts emphasis on the educative potential that activities entailing certain risks offer to residents and embraces this risk as a learning opportunity for them to learn how to deal with it.

The second part of this chapter has shown that the educative intervention at Santiago 1 promotes the active participation of educators and residents in the planning and development of all the activities taking place at the care home. The findings have presented an understanding from educators of the educative potential that a full participation of residents offers to them and how their own participation also entails learning opportunities for both educators and themselves.

In the last and third part of this chapter it can be found how the social pedagogic intervention at Santiago 1 aims to have an impact not only on the residents but also in their society. Mechanisms and strategies have been described that show an emphasis on promoting social inclusion by an active participation of residents in their communities and creating opportunities for members of the community to see a positive side of this residents to challenge prejudices and negative views, and to foment and develop positive social values in residents and members of the community embracing multiculturalism and awareness of issues at societal level.

The next chapter presents a discussion on the findings described in this and the previous chapters in the light of the current situation of residential child care in the UK and the understanding of the social pedagogic approach in this field.

Chapter 7. Discussion of findings

Introduction

The findings of this research have provided some interesting examples of how a social pedagogic approach to residential care is put into practice at Santiago 1. This chapter offers a discussion of the key findings that I believe provide answers to the research questions that frame this research. In it I identify aspects from the findings that exemplify how theoretical foundations of social pedagogy are put in practice at Santiago 1 and discuss this in the light of the UK context.

The chapter starts with a discussion of the importance of the social aspect of social pedagogy and how the intervention developed in Santiago 1 aims to have an impact not only the residents but in the community around it. Then it continues highlighting how the attitude shown by the educators of the care home facilitate the pedagogic intervention. Next the chapter shows that relationships between educators and residents are a cornerstone of the social pedagogic approach since it facilitates a communication and dialogue key for the educational element of the intervention. The importance of activities is the next characteristic discussed. They appear as a common ground that not only enhances those relationships but also create a great amount of learning opportunities. It continues discussing how the size of Santiago 1 facilitates the development of group activities and a social everyday life which also has a great educative potential. The educational approach is discussed next by showing how the social pedagogic approach taken has a focus not on the deficits and problems of the residents but in their future and the learning opportunities that can be provide provided. Finally, the chapter shows how the risk approach taken at Santiago 1 is not risk adverse but it embraces risk as an opportunity for learning and developing a sense of responsibility and empowerment in the residents.

7.1. The social aspect of social pedagogy

One of the aspects in the findings that stands out and that I want to discuss is related to the *social* aspect of social pedagogy since this is a key aspect of the conceptualization of social pedagogy.

The importance educators at Santiago 1 place on the socializing aspect of their intervention shows that it is a cornerstone of their pedagogic work. Through their work, they not only provide learning opportunities for the children they work with but are also doing educational work with their communities and society. Hence, their educative intervention is not limited to supporting children in care to participate and be integrated in their communities, which Bryderup and Frørup (2011) identify as an aim of social pedagogy - they go a step further. For example, it is their intention to be seen in the community (findings chapter, point 6.3.1). As it has been described, many of the activities they carry out take place outside their physical walls and/or produce outcomes which reach people outside. Thus, sports are played in public spaces where residents get together with other young people; musical and artistic performances take place in community events and celebrations, radio and cinema workshops include content related to social problems and produce material which becomes available to the public through the internet, and so on. By doing this they demonstrate a clear aim to show a positive face of children in care, to fight the prejudice existing towards them, to place the focus on what they have to offer to the community rather than on the problems they might create. The outcome of the social pedagogic intervention reaches, therefore, not only the targeted group but the community in which they live, triggering situations which become learning opportunities for all people involved. This way their intervention shows many of the features related to the *social* aspect of social pedagogy as a commitment to social justice (Cameron and Moss 2011), and a sense of empowerment that changes people's standards of living (Úcar 2013). These aspects have resonance with what is known as 'critical pedagogy, which has a strong emancipatory and activist element' (Moss and Petrie 2019, p.397)

This characteristic of the social pedagogic intervention becomes relevant given that stigma and exclusion are common experiences for children in care in the

UK as they are seen as “abnormal” or “damaged” (Kools 1997). This is visible nowadays, for example, in how children in care acknowledge being stigmatised and bullied by peers given their “in care” situation (Rogers 2017). Social pedagogy offers an approach that can potentially improve that situation by empowering children in care and having an impact on the community, challenging the negative views and prejudice that exist towards them.

Given the importance of this social aspect, I consider there is a risk in trying to establish a social pedagogic approach to work with young people in care individually or in isolation from their social context and community, as this would involve missing the intrinsic educative impact that a social pedagogic intervention has in that community. As Hämäläinen (2003) points out, social pedagogy is education through and for society and communities opposing individualistic approaches to education. This means that social pedagogy does not only support individuals constructing their own lives but also contributes to constructing the social sphere (Eichsteller and Holthoff 2011), as Santiago 1 exemplifies. Thus, social pedagogy in practice cannot be concerned only about individual development but also seeks an educative intervention that goes beyond the individual, or a close group for this matter, and has an impact on the community around them.

In relation to this matter, Spain arguably offers a context that welcomes and facilitates the implementation of a social pedagogic approach oriented towards the development of society. The long tradition pointed out in the literature review of a social pedagogy concerned with helping people with socio-economic difficulties set the foundation of a practice committed with social justice. The definition of social pedagogy found in the literature review by Quintana Cabanas (1994) shows the concern of social pedagogy with working with individuals but also with groups and with having the social inclusion of the people working with as its final aim.

The risk, in my view, is trying to implement a social pedagogic practice in a country like the UK where the current residential care system, like most of the rest of responses to social problems, ‘tend to be located at the level of the individual, detached from social and wider community context’ and where ‘case

management and deficit based approaches have reinforced the focus on the individual at the expense of broader social-educational approaches' (Smith and Whyte 2008, p. 21-22). The neoliberal ideology prevailing nowadays is an ideology of individualism that tends to look for the causes and solutions of social problems at an individual level (Fenton 2020) and as a result, social work initiatives are less concerned with social justice and equality (Ferguson 2004). Attempts to introduce social pedagogic practice while maintaining the current individualistic approach would inevitably miss those social educational aspects of social pedagogy involving a risk of reducing it to a series of more or less useful methods for individual intervention which would in reality work as instruments to control social problems (Eichsteller and Holthoff, 2011). Therefore, if there is a desire to put a social pedagogic approach into practice in a residential care setting for young people not only the residents individual problems should be considered, but the whole social context and how an intervention can have an impact at societal level that contributes to the social inclusion of the residents.

7.2. Social educators' attitudes

As Petrie et al. (2006) indicate, one of the principles of social pedagogy is that pedagogues and the children they work with "are seen as inhabiting the same life-space" (p.22) and not in hierarchal and separated domains. This seems to be the case at Santiago 1 where I could observe how educators fulfil the responsibilities associated to their roles while at the same time cohabiting and sharing a life-space with the residents, which can be observed in practice in different ways.

A situation that exemplifies this in practice at Santiago 1 which can be found in one the findings chapter (point 5.1.3) is how some educators bring in their families, friends or other people they know to participate in the daily life of the care home. This includes special occasions such as celebrations or holidays but also daily activities. I could observe how some of the educators' children use to eat at meal times with the rest of people at Santiago 1, study in one of the study rooms in the afternoon alongside some of the residents, or participate in sports

or other leisure activities with them. Moreover, I witnessed how educators' friends would come and play instruments, sports or dance with them and the residents. The fact that some of the educators decide to do this indicates that they do not see Santiago 1 just as a workplace but as a place where they somehow inhabit during certain periods of time in the week, and that time can be therefore shared with their families and friends. Thus friends and family and their workplace do not seem to be part of different domains in their lives but part of the same one.

Developing such an approach towards their workplace and their role in it facilitates the development of an attitude that seems key in a successful social pedagogic intervention. On the one hand, it allows educators to embrace the educative intervention as something that is part of their lives, identifying themselves better with the aims of the institution and developing a motivation to carry out their work that is easily noticeable. This is reflected, for example, in how several educators refer to the people of Santiago 1 as a 'big family' for them or even as a 'tribe' (see findings chapters, points 6.2.2 and 5.2.1). This shows that educators have developed a sense of belonging in their workplace and see their work as part of their lives. This is particularly relevant taking into consideration that residential care work in the UK is currently a field in which job burnout symptoms are often present among workers and there are considerably high levels of job dissatisfaction and staff turnover (see Candice 2008). Undoubtedly this attitude is far from being able to solve these problems alone if other aspects such as professional recognition and qualifications are not improved, but can indeed contribute to create a favourable working environment in which educators can make greater contributions to the intervention.

On the other hand, this attitude also facilitates educators building relationships with residents (see below for discussion on the importance of relationships in social pedagogy). The strength of this attitude is that it creates an atmosphere where relationships can develop in a more natural and honest way since it reduces the gap between the professional and the service user usually present in residential care (Smith 2012).

However, in the development of such approach, some aspects need to be taken into consideration to avoid potential issues that could emerge. One is concerned with the balance between the professional and personal life for educators. As indicated in the literature review, an idea at the core of social pedagogy is what has been called the 3 P's, which refers to professional, personal and private selves. In social pedagogy, educators not only make use of their professional self in order to carry out their intervention, but also require making use of their personal self since their role includes building personal relationships with the people they work with, leaving only the private self out of their job. Nevertheless, this approach might blur the line between personal and private selves and make difficult for educators to find an appropriate balance. Bringing families and friends to participate in your workplace or spending family holidays with the people you work with are situations which can potentially put educators in situations that are not easy to handle. For example, dilemmas may arise if educators find themselves having to make a decision in a certain situation in which an option is better for their family and other option is better for the people they work with. Such dilemmas might emerge as a result of this approach so, although they are not insurmountable problems, they are going to require special care from educators.

A good practice that might help educators to deal with these potential issues includes being a reflective practitioner. The findings of this research show that educators at Santiago 1 present a high level of reflection that can be observed, for example, in how they think about and explore the educative potentiality of all the activities taking place the care home and how to extract such potentiality. An example of such reflection was presented in chapter 5 point 5.1.3, where an educator describes how conflict can become a learning opportunity for residents and how educators can act to facilitate this learning. The benefits of a reflective practice have long been acknowledged in the UK (see Schon 1983) and, as highlighted in the literature review, this is also considered a key element of the social pedagogic approach. In this case reflection can be particularly helpful for educators since being able to reflect on their practice and how they balance their different 'selfs' can help them anticipate certain situations or dealing with

them, and making decisions about what might be or might be not helpful to do can mitigate the impact of those potential issues.

7.3. Building relationships

It is broadly acknowledged that relationships between educators and the people they work with play a key role in social pedagogy (see literature review 2.1.1). In words of Petrie et al. (2006), referring to children in care, 'the relationship between the child and the pedagogue is seen as the basis for a "good" upbringing' (p.23). Educators make use of their personal self to create a bond with the people they work with and this becomes a central element of their intervention. The importance of building a relationship-based practice in child care is an aspect that has already raised interest in the UK (Ruch 2005) and a social pedagogic approach can facilitate it.

As shown in the findings of this research (chapter 5.2.10) educators at Santiago 1 demonstrate that relationships are an important part of their intervention. Particularly, they stressed how building relationships with residents facilitates communication with them and allows the interchange of information and a dialogue which is key for their educative intervention and which otherwise would be very difficult to develop. For example, in chapter 5 (5.1.3) it was noted that one of the educators interviewed pointed out that the complicity achieved with residents by playing sports together facilitates the communication between them.

Such communication allows educators to understand children's personal characteristics and their needs while opening a way to transmit aspects such as ideas, values or suggestions. Thus, listening and communicating becomes not only a way to foster those relationships, as pointed out by Petrie et al. (2006, p. 25) but also a result of that relationship. These aspects become a positive outcome of their relationships and, according to educators at Santiago 1, are great facilitators of their educative intervention.

Being able to develop the relationship with residents depends of several factors as I had the opportunity to observe during the time I spent at Santiago 1. One of

them, as discussed earlier, is the approach of educators towards their workplace and how they develop an attitude that facilitates the development of relationships with residents. Such attitude can be observed, for example, in findings chapter 5 (5.1.3), in the section describing the informal educational value found in everyday activities. In one of the quotes cited there, the educator interviewed highlights the importance of taking the initiative to talk to residents during breaks. This shows a commitment of the educator to create opportunities for communicating with residents in a relaxed moment of time that can contribute to build their relationships.

Another factor that influences the development of relationships between educators and residents is time, since building relationships is not something that can be achieved in a short period of time. In chapter 5 (5.1.10) it can be observed how educators stress that spending long hours and working together with residents are key aspects in the building relationship process. The importance of time in order to build relationships might seem as something very obvious, but considering, once again, the high levels of staff turnover present in current residential care in UK, it seems worth noting that the development of a social pedagogic approach would require achieving higher levels of professional satisfaction. This satisfaction can encourage them to remain for larger periods of time in their jobs so relationships with residents have the opportunity to develop and strengthen.

Another aspect that seems to contribute to the improvement of relationships between educators and residents at Santiago 1 is the amount of daily activities that they do together. As I will discuss later in this chapter, programmed activities in which both educators and residents participate are at the core of the educative intervention at Santiago 1. One of the advantages of carrying out a large number of activities together is that it allows educators and residents to spend plenty of time together participating in those activities hand to hand and this creates a fertile ground for relationships to develop. As Boddy (2011) points out ‘the relationship is rooted in action’ (p. 119)

However, the time that educators spend with residents is not limited to these structured activities since they are also together with them doing everyday

things such as eating during mealtimes, playing games during free time, cleaning the premises or simply socializing during breaks between activities. Thus, it was common for me to find educators playing table tennis or football with residents during breaks, chatting with them outside the doors while they have a cigarette or helping out cleaning the dishes after a meal, amongst many other situations that could exemplify this. The importance of these moments was stressed by educators at Santiago 1 (see findings chapter 5.3.1) as a foundation for the informal part of their educative intervention, and one of the aspects that they highlight is precisely that they contribute to relationship building.

Thus, a social pedagogic approach requires educators to actively seek to spend time with residents, both in programmed and also informal activities that are part of the daily routine, in order to have better opportunities to build relationships with them. Allowing for the time to carry out these activities needs a series of conditions that are not always present in UK residential care placements at present, as highlighted by the social educators who participated in the pilot program carried out some years ago (Cameron et al. 2011). It would require that the amount of bureaucratic work (usually known as paperwork), that includes writing reports, keeping writing records of daily activities, developing risk assessments or keeping file records up to date does not take too much of the time that an educator is on shift, otherwise their time available to spend with residents would be limited. Smith (2009) points out that frequently residential care workers find themselves frustrated with the amount of rules and procedures which distance them from those who they have to care for. Therefore, where such tasks represent a considerable amount of educators' time on shift, changes would need to be considered, such as the implementation of improved recording systems that allows them to carry out the bureaucratic work quicker or a reduction in the number of them to be done on daily basis.

To conclude this point regarding building relationships with residents I would like to highlight an aspect which I believe must not be overlooked if good social pedagogic practice is to be put in place and which is related to the nature of those relationships. Educators should not confuse building positive relationships

with building camaraderie or a superficial relationship with the residents. As highlighted in the literature review, role modelling is an essential part of the social pedagogues' intervention and this includes setting and following norms and limits.

Setting and following norms and limits can lead to situations of conflict with residents but, handed appropriately, conflicts, rather than damaging those relationships, provide learning opportunities and strengthen the pedagogic relationship. The understanding of conflict as a learning opportunity can be found as part of the findings of this research (see chapter 5.1.3) and has already being pointed out by authors such as Kleipoedszus (2011) who argues that:

> '*…a conflict resulting from a challenge can be a positive element of a pedagogical relationship between the professional and the young person; rather than avoid conflicts, the pedagogue should see them as an opportunity for growth.*' (p. 126)

This element of the intervention is at the basis of what Bryderup and Frørup (2011) call *structured social pedagogy* which focuses on 'aspects relating to behaviour, that is to say rules, structures and adult control' (p.93) and which play an important part of the interventions that I observed at Santiago 1. Educators occasionally needed to take a strict or directive attitude in order to enact the role already mentioned, and imposing sanctions on residents, as well as rewards, was an important part of their educative intervention (see findings chapter 5.2.4).

It needs to be noted that while not being strict with residents when required might not be helpful when trying to build a positive relationship with them, becoming disproportionately imperative or authoritarian might be as inadvisable or worse. This can be linked with the well-researched field of parenting styles and Baumrind (1967)'s research claims that an authoritative approach to education produces more positive outcomes than authoritarian or permissive styles in important aspects such as 'academic performance', 'increased competence, autonomy and self-esteem', 'less deviance' and 'peer group

orientation' (Smetana 1995, p. 229). Therefore, finding the right balance in the educative style seems to be key for educators in a social pedagogic intervention.

7.4. Activities

In the educative intervention at Santiago 1, activities take most of the time of residents and educators and therefore play a vital role. Whether these are programmed (chapter 5.2.2) or part of the everyday life (chapter 5.1.3), designed to learn something in particular (chapter 5.1.1) or part of the leisure (chapter 5.1.2), or aimed at obtaining a qualification (chapter 5.1.1) or at the enjoyment of life (chapter 5.2.5), activities create a great number of learning opportunities for residents and also for educators. The findings chapter is full of examples of the educative potentiality of carrying out activities as, by instance, they contribute to relationship building, facilitate the acquisition of practical skills, allow room for conflict to take place in a controlled environment, create situations in which residents can experience success and enjoyment and allow educators to act as role models and residents to be active participants of their learning. Activities provide then an important tool if their educative potential is extracted by educators in a social pedagogic intervention.

As observed during my time at Santiago 1, the activities which are part of their educative intervention are of a different nature and yet all of them contribute to create learning opportunities. As shown in figure 4, these range from more to less formal and include formal educative activities such as professional training courses as well improvised activities during free time, non-formal learning activities, planned leisure activities, trips and holidays and everyday tasks.

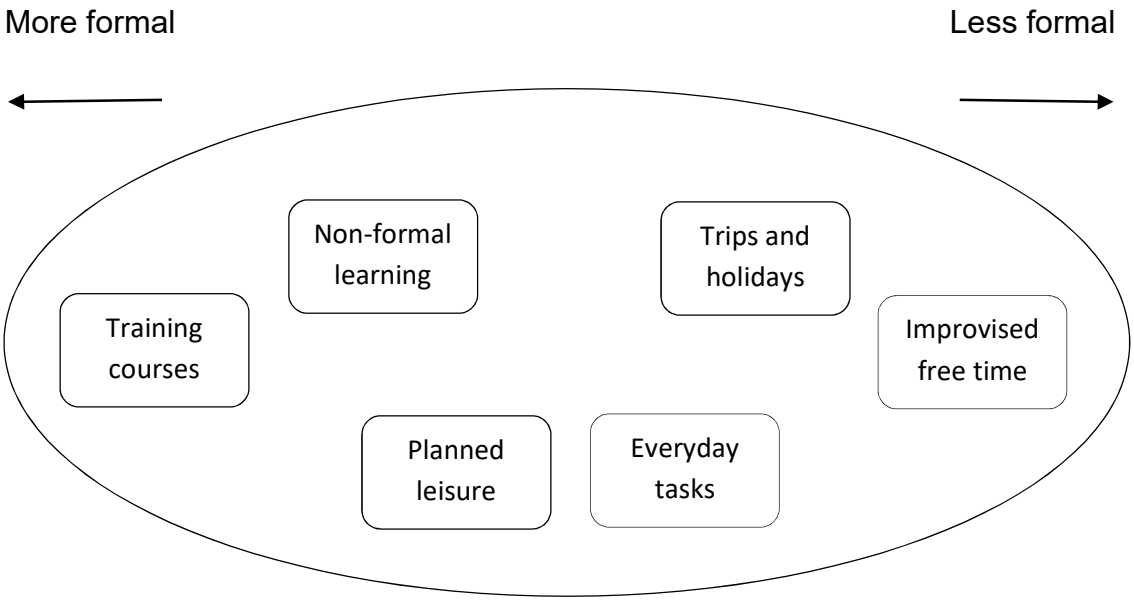


Figure 4. Range of activities at Santiago 1 according to degree of formality

The development of activities with an educative aim that can be found within such range of formality/informality at Santiago 1 shows an approach to education that goes beyond its formal side. In the literature review of this research I already pointed out how in a social pedagogic approach education is understood not only as a transmission of knowledge but as a way of engaging with people and the world around them (Smith 2019b). Thus informal education can be considered within a social pedagogic approach as valuable as education's formal side, and the findings of this research have shown how educators at Santiago 1 stress the importance of the educational potential of day to day activities. An example can be found in the findings chapter 5.1.3 where an educator highlights the educative potential of times when they are eating together or passing by in a corridor or at the entrance door. All these seemingly mundane activities are seen within a social pedagogic approach as learning opportunities that require educators to be aware of them and be ready to turn spontaneous situations into deliberate educational interventions (Smith 2016, 2019).

An important notion of the social pedagogic approach related with the use of activities is an aspect that has already been pointed out and defined as 'the common third' (see literature review 2.1.1). This notion refers to the educative potential of activities which offer a common ground for social pedagogues and the people they work with to negotiate, plan and do tasks together (Grunwald and Thiersch 2009). The benefits of such common ground are numerous since among other benefits this facilitates breaking the gap and the hierarchical relationship between the professional (social pedagogue) and the service user (Smith 2012), allows for relationships to emerge and develop and creates educative opportunities through, for example, role modelling or dealing with conflict and promotes an active participation in the intervention.

The participation of residents and their involvement in all stages of the activities, from planning to developing, is a key element of the social pedagogic intervention at Santiago 1. Not only because an active participation is one of the children's rights (UNICEF 2008), which should be enough reason to ensure this in any social intervention with children, but also because its potential benefits are in line with the aim of the social pedagogic approach to empower children through 'their active involvement in decisions that affect them' (Eichsteller and Holthoff 2011, p.44).

As Santiago 1 exemplifies (see findings chapter 5.2) in order to obtain activities' full educative potential in children´s residential care, residents must be active - rather than passive- participants in the activities taking place. A good example of how to put this into practice can be found in the findings chapter (5.2.3) where it is explained how Santiago 1 residents engage with participation by suggesting, organising and carrying out leisure activities that they like but are not in place. This way they are not mere participants of an activity prepared for them but organisers of their own ones. Educators at Santiago 1 stress the importance the active participation of residents in the daily life at the care home has for their self-esteem, and how this also allows residents to be role models for other residents.

Assemblies are another example of how to implement participation in practice (see findings chapter 5.2.2) as these give residents the opportunity to have their

voice heard in an environment where is not easy unless measures like this are in place. Assemblies are a place of dialogue, participation and discussion which contribute to put educators and residents at a same level since decisions are made together in them. This has already been highlighted as an important aspect of a social pedagogic approach by Petrie et al. (2006) who pointed out that 'dialogue is seen as a critical tool in resolving the practical and emotional problems experienced by young people, every day, with pedagogues routinely encouraging discussion and decision-making by groups and individuals' and the daily assemblies carried out at Santiago 1 seem as a way to put this into practice.

However, being a common ground for educators and residents is not the only reason why activities are so frequently used as part of the intervention at Santiago 1. The fact that these are used by educators as opportunities for experiential learning and also as positive live experiences for residents stood out during my observations in the field.

As discussed in the literature review of this research, the theoretical roots of social pedagogy are grounded in the thinking of educational theorist such as Dewey, Rousseau and Pestalozzi (Smith 2019) who shared a view of education as the result of an interaction between the person and their environment. This interaction creates a process of real experience which is at the heart of the educational process (Dewey 1938). The educative intervention at Santiago 1 seems to embrace that notion and puts it in practice by developing a wide range of practical activities which provide residents with opportunities for engaging in educational experiences within their environment. Examples can be found in the findings chapter (5.2.7) and include the summer camp in Morocco or working the vineyards. Participating in these activities allows residents to, on the one hand, acquire certain skills and on the other hand embrace positive values and ideas related to the experience they have gone through. This idea requires educators to carefully select and prepare activities which combine both a skill development base and a value base, so residents have the opportunity of learning from them.

The fact that the educative intervention at Santiago 1 included a large number of leisure activities, trips, holidays, celebrations and so on caught my attention and was later confirmed by the educators as an aim of their intervention so residents can have positive compensatory life experiences. As shown in the findings chapter (5.2.5) educators pointed out that often residents have not had the opportunity to enjoy those positive experiences as many of them come from difficult family backgrounds or have lived through negative life situations, and they consider that those experiences have positive effects on them. Nevertheless, not only activities of pleasure and entertainment provide positive experiences but also learning activities since they provide residents with opportunities for experiencing creating things with their own hands, setting goals and achieving them or overcoming difficulties amongst other benefits. These are also positive experiences with the potential of improving their self-esteem (see findings 2.6.3), helping them to discover their strengths ('gifts'), triggering the improvement of motivation towards the achievement of further goals and so on.

Finally, a last aspect to highlight regarding activities is the need for educators to be skilled in various ways in order to be part of the social pedagogic intervention. Smith (2012) already indicates that social pedagogues 'have a repertoire of artistic, sporting and cultural skills that they can share with those they work with' (p.50) and after what I observed at Santiago 1 this seems to be the case. As I have already discussed, educators participate hand in hand with residents in a wide range of activities, from training courses to leisure plans, and in order to do it they need to bring with them a varied set of skills.

As I could observe during my fieldwork, a normal day of an educator at Santiago 1 can include teaching welding skills to a group of residents in the morning as part of their formal learning, collaborating in cooking lunch, participating in a daily assembly with residents, practising with the percussion group in the afternoon and carrying out a workshop consisting in a discussion about women's rights before having dinner. This example shows how diverse the activities of an educator can be and how, to make a contribution to these, they must draw on a wide range of skills.

However, bringing a wide range of skills is not always enough as new activities emerge which might be new to an educator and to which they need to adapt. This becomes a learning process for educators who find themselves acquiring new skills regularly. During my time at Santiago 1, I could observe, and also experience myself, how educators were participating in activities such as break-dancing or juggling for which they had no previous experience or skills (for example see educator referring to learning how to juggle in chapter 6.2.1). This allows a process of bidirectional learning where both educators and residents learn from each other and the experience but also requires that educators have a an open mind approach to try new things and to involve themselves in learning processes alongside residents.

7.5. Shape and size of Santiago 1

The size of Santiago 1 in terms of buildings, number of residents, educators, activities and so on (see chapter 4) is something that caught my attention powerfully since my arrival there. As pointed out in the literature review (chapter 2.1.2) the tendency in the last decades, not only in the UK but in many European countries, has been to avoid big institutions in favour of smaller family-like homes until the current situation where the average number of children per care home in the UK is four. This shift was related to concerns about institutionalization outcomes and abuse, together with the growing idea that a better care can be provided by family like homes. Therefore, the fact that Santiago 1 is such a big institution compared with the current tendency is an aspect that stands out. The findings of this research indicate that such big size provides benefits for the implementation of a social pedagogic intervention but also some negative effects, all of which I discuss about in the next paragraphs.

One of the issues of big institutions links precisely with the process of institutionalization that children in care residing in them use to go through. Institutionalization and the problems emerging from it were already identified by Goffman (1961). More recently, van Ijzendoorn et al. (2020) have pointed out that nowadays institutionalisation problems are related to poor standards of care, ‘associated with negative developmental outcomes’ (p. 716) and a lack of

quality in terms of 'the extent of the training staff receive, the rate of staff turnover, the child-to-caregiver ratio, the quality of food, and the standard of hygiene and health care, as well as factors that are essential for the provision of engaged and responsive carer behaviour' (p.704). However, this does not seem to be the case in Santiago 1. The standards of hygiene, health care and food are high enough at all levels, while the ratios and turnover of staff seems more than appropriate too. Meanwhile, the features of the social pedagogic intervention that are discussed in this thesis show that educators level of engagement and the standards of care are high. Therefore, according to my findings, it would not be correct to consider Santiago 1 as an institution in which institutionalization at these levels might be a problem, rather the opposite. Furthermore, it needs to be taken in consideration the age of residents cared for since institutionalization is found to have a particularly negative impact on development for children at an early childhood stages (Berens and Nelson 2015), especially if living under conditions which are more typical of old fashioned orphanages than of today's care homes and their standards in countries such as Spain or the UK.

Group work and the possibilities that this offers for a social pedagogic intervention seems to be the great benefit of an institution the size of Santiago 1. The importance of group dynamics and the need for social pedagogues to make use of them as a resource for their intervention is something that already has been pointed out (see chapter 2.1.1). As I have already discussed, bringing residents and educators together to do activities in groups can be very beneficial for the educative intervention as it creates many learning opportunities educators can make use of, while contributing to relationship building, role modelling, enjoyment of life and so on. At Santiago 1 this idea is clearly embraced by the educators as they schedule a daily routine in which most activities, and very frequently all of them, in a day are carried out in groups.

This is facilitated by the size of the institution both regarding the buildings and facilities, and also the number of people participating. In terms of space, having big rooms inside the main building allows for physical space for carrying out group study, workshops, debates, video projections and so on while spaces

outside the building but inside the facilities are places where dancing, circus practice or physical games can take place. The importance of how space shapes what we do was already discussed by Maier (1987) and the physical characteristics of Santiago 1 become relevant for their social pedagogic intervention. The same situation is found when considering the number of residents and educators available to participate in the activities taking place. Having such large numbers means that it is easy to find a group of people who find interesting and are willing to join a great variety of activities. If residents want to organise a football game or a dancing group it is not difficult for them to find enough people to join so these can be carried out. The same applies when an educator wishes to start a particular workshop, such as the radio station for example (see findings chapter 5.1.2), as they easily find some residents amongst all of them who are interested in the subject and want to give it a try.

Considering how key group work and the development of activities are for a social pedagogic intervention like Santiago 1's, it might be considered as to whether the move towards small and family like care homes occurred in the last decades has not been detrimental to the possibilities of developing a social pedagogic approach. I struggle to visualise how educators could develop a group work based intervention in a home with three or four residents and usually just one educator with them. It seems feasible to organise certain activities to be carried out as a group but the possibilities are very few compared with those in a big institution. It is debatable whether such change has been beneficial for looked after children or not since there is no evidence that indicates so (Bullock et al. 2006) and the findings of this research suggest that it might have been too extreme as it has left very little space for big institutions that seem to have something to offer. For a social pedagogic approach to be implemented the possibility of retracing some of the steps taken and considering the benefits that bigger institutions might have should be taken into consideration.

7.6. A focus on the future

The social pedagogic intervention at Santiago 1 has been designed with a focus on the residents' future which is built in the present, while past issues are given very little attention. Educators develop an intervention with residents aiming to change their social situation so doors can be opened for a better future for them. As explained earlier in this chapter social pedagogy´s social intervention is not only designed to have an impact on the residents but also on their local community, always looking to improve their chances of social inclusion.

An aspect of their intervention that materialises the focus on the resident´s future is their therapeutic approach based on a solution focused therapy (see findings chapter 2.6.1). One of the few planned activities based on individual attention are therapeutic sessions with the psychologists who are part of the staff and which are carried out individually between the resident and the therapist. In these sessions they focus the therapeutic work on moving forward, looking for solutions to present and short-time needs and issues instead of attending to deficits and traumas from the past. There is some empirical work suggesting that this can be an approach with better outcomes for children in care (see Gharabaghi and Groskleg 2010). This contrasts with current tendency in childcare standards setting in both the UK and Spain to promote a focus on deficits, deficiencies and trauma suffered (see literature review 2.4.2, Fernández del Valle and Zurita 2000). Given the findings of this research, I believe that it should be at least debatable whether exceptions to this tendency should be considered, particularly for profiles such as young people close to reach adulthood, bearing in mind that a focus on their future and potentialities can be more beneficial for them at that stage.

Although it can be argued that therapeutic work is not part of an educational but of a psychological intervention, the fact that this approach is chosen at Santiago 1 shows the institution´s values and focus revolve around what residents can achieve in the present and how they can better prepare themselves for the near future. Such approach seems to be in line with one of the characteristics of social pedagogy since, as point out, it 'draws on people's inherent capabilities and potential' (p.16).

Another feature of their social pedagogic intervention that shows their approach towards the future of residents is the development of formal courses within Santiago 1 which allow residents to learn skills related to a profession but also to obtain a qualification (see findings chapter 1.1.1). As Francis (2009) points out 'young people who drop out of school without finishing a course of study, or who leave without relevant qualifications, run a higher risk of being unemployed or trapped in low-income work' (p. 20) and this an idea that seems to be shared by educators at Santiago 1. Establishing officially recognised courses involves an amount of work not to be underestimated as it includes for example preparing facilities, developing curriculum or adapting to official requirements, and therefore the fact that they have taken the trouble to do it shows how important they consider it is for residents to finish their placements having achieved an official qualification.

According to Francis (2009), the importance given in the UK to children in residential care obtaining professional qualifications is not as much, resulting in an intervention that delivers poor outcomes in terms of qualifications obtained by looked after children due to the lack of expectations from social workers and carers about their possibilities and the lack of educational support amongst others. Thus, the implementation of a social pedagogic approach with a strong emphasis in improving the future of children in residential care can arguably lead to an improvement in these situations as it can help professionals to develop higher expectations for children in care.

7.7. Risk approach

The findings of this research have shown an approach to risk that has been pointed out as a particularity of social pedagogy and that differs from the current approach to risk in residential care in the UK.

As Smith (2012) argues 'the dominance of risk perspectives in contemporary practice' (p. 52) is an obstacle for the implementation of social pedagogy in the UK. As pointed out in the literature review, there is a risk-aversion approach extended throughout social services (Beddoe 2010) influenced by the development in recent years of what has been defined as a 'risk society' (Beck

1992). As a result of such risk-aversion approach, the way measures related to health and safety in current practice in residential care are understood and put into practice creates a limitation of the opportunities of carrying out activities which involve a certain degree of risk in favour of a risk-free safer approach. It has been argued that staff working in care homes are usually seen 'prioritizing safety over the potential benefits of activities which may carry a small degree of risk' (Milligan and Stevens 2006, p. 239). This not only affects the development of what is considered good practice (Milligan and Stevens 2006) but also means that a social pedagogic intervention will be difficult to implement since its approach to risk is very different as Santiago 1 exemplifies.

As showed in the findings chapter (point 6.3.1) the approach to risk of educators at Santiago 1 does not prioritise safety before anything else. They acknowledge that certain activities are not completely risk-free for residents but are willing to go ahead with them because they consider that what they might gain from doing them is greater than the risk taken. It caught my attention how they do outdoor activities such as kayaking in the river or climbing, use tools like circular saws or drills and take trips to other countries in Europe and Morocco amongst other things and consider these activities as something essential for their intervention due to its educational value. Educators at Santiago 1 seem to put risk and learning opportunities in a balance and quite often the latter weighs more. This shows an approach to risk in social pedagogic interventions that allows residents to obtain the benefits of engaging in activities even when they entail certain risks (see Milligan and Stevens 2006, Milligan 2011) and educators to have the confidence of allowing them without the fear to be blamed existing in risk-averse approaches (SCCYP 2010).

According to what I could observe, educators are aware of the risks involved and frequently take measures to minimise it but very rarely decide not to carry out something because it is too risky. For example, in findings chapter 6.1.4, it can be found that educators at Santiago 1 provide residents with a progressive independence. This shows that they acknowledge the risks involved in allowing residents to go out on their own so they take measures such as letting this happen progressively while assessing the individual needs of the resident to observe the level of the risk involved in it. These are measures that, while giving

the educators some control over the potential risks, do not prevent residents to actually go out on their own if they have an appropriate age to do so, since educators consider that there is an education potential behind it.

Furthermore, educators at Santiago 1 understand that taking certain risks can be something with an educative value itself, as residents have the opportunity to learn to manage it by themselves. Such understanding can be observed in findings chapter 6.1.1 as an educator stresses the importance of residents being allowed to take risks with the support of educators as a way of learning how to deal with it. Such educative potential has already been pointed out by several authors (see literature review, social pedagogy and risk) and can be considered a characteristic of the approach to risk within social pedagogic interventions.

Moreover, by allowing residents to engage in activities that entail certain risks, educators are putting part of the responsibility to stay safe in the residents themselves, which involves showing trust in them and can be also beneficial to them. As Eichsteller and Holthoff (2011) point out, 'placing trust in children, in their competence and responsibility, can be an empowering experience for them, not only strengthening the relationship but also their self-confidence' (p. 43) adding even more value to this approach to risk.

The approach to risk of a social pedagogic perspective that has showed the educative intervention at Santiago 1 seems beyond what might be possible to take in the current residential care system in the UK. As Smith (2012) points out 'the proliferation of external regulation that surrounds social care in the UK is dissonant with social pedagogical models that give precedence to ideas of professional judgment and trust' (p. 52). Therefore the potential implementation of social pedagogy in this field would imply mayor changes in the regulation of residential child care and would have an impact on the current approach to risk. As pointed out in the literature review, it has been argued that the current risk-aversion practice existing in residential care services for children in the UK could precisely be challenged by implementing a social pedagogic approach (Milligan 2011) that would imply a different perspective in the approach to risk.

Thus, on the one hand, such regulation in residential care would need to allow more space for staff working with children in residential care to carry out activities which might suppose certain levels of risk while acknowledging it as good practice. Some of the suggestions highlighted in the literature review such as creating a system for residential care that is less 'risk-averse' and more 'risk-sensible' (Munro 2011), developing a notion or 'risk competence' instead of 'risk assessment' (Eischteller and Holthoff 2009) or making risk assessments that acknowledge the importance of children taking certain risks (McGuinness et al. 2007) would create an approach to risk in concordance with the one embedded in the social pedagogic approach, making it more likely to be implemented successfully in the UK.

On the other hand, this change would need to go hand by hand with an empowerment of the professionals working in residential care. One of the potential benefits that a social pedagogic approach to risk brings to educators it that it provides them with a framework to justify their decisions regarding developing activities with a certain level of risk and allows them to take such decisions more confidently (Milligan 2011). If they have to be spending more time carrying out lengthy and tick-box oriented risk assessments (Munro 2010) than organising activities or to be more concerned about the negative consequences that an incident might have on them than the potential positive outcomes for the children they work with (SCCYP 2010), the social pedagogic approach hardly could be implemented. As shown in this research, educators taking a social pedagogic approach in residential care need to be qualified professionals in an environment which supports their professional decisions and values the importance of an educative rather than a caring or protective approach.

Conclusion

This chapter has offered a discussion of some of the standing aspects of the social pedagogic intervention at Santiago 1 observed in the previous findings chapters in the light of the relevant literature in the field.

The chapter has stressed the importance of the social pedagogic approach in Spain as a commitment for social justice that aims to have an impact not only in the residents of residential care but also in their society in order to work towards their social inclusion. It has been argued that the implementation of a social pedagogic approach require a change in the individualist focus of current social care services in the UK.

The discussion has continued pointing out how the attitude of social pedagogues in residential care is a key element of the educative intervention studied in this research. The attitude of social pedagogues towards their workplace, understood as a place that is part of their lives, contributes to the development of a sense of belonging and facilitates building relationships with residents that facilitates their educative intervention, but requires a high level of reflexivity to maintain the balance between their private, personal and professional selves.

The importance that building relationships with residents has for the educative intervention in residential care has also been discussed in this chapter, as such relationships improve the communication between educators and residents which is key for a successful educative intervention. It has been discussed how these relationships require educators and residents spending long time together and how these relationships should not be based on a sense of camaraderie but have their foundations in an authoritative style that set limits and norms.

This chapter has also shown the variety of activities ranging from formal to informal education developed as part of the educative intervention at Santiago 1 that shows an educational approach within social pedagogy for residential child care. Activities are a common ground for educators and residents where the educative intervention can take place but are also mediums for the experiential learning which is at the core of the social pedagogic approach to take place. It has also been shown the importance for social pedagogues to have a wide range of skills and knowledge in order to develop these activities and extract their educational potential.

The size of Santiago 1 has also been discussed as an element that impacts on its educational intervention. In a time when the tendency in residential care

have been to move from big institutions to smaller care homes offering a family-like environment, Santiago 1 shows the potential of big size care institutions to provide a group based educative intervention that facilitate the development of a social pedagogic approach.

This chapter has also included a discussion about the focus on the future that is present in the educative intervention at Santiago 1 as part of a social pedagogic approach that draws on the capabilities and potential of residents. They show a focus not in the residents' past and problems but in their possibilities for improvement in the near future though their therapeutic work and their emphasis on providing residents with professional qualifications.

Finally the chapter has offered a discussion about the particular approach to risk of social pedagogic interventions in residential care and how this can be observed in the practice at Santiago 1. This approach differs from the current risk-aversion approach in the UK and shows a management of risk that does not impede certain activities with an educative potential to be carried out while acknowledges how taking risks in a controlled environment can help residents to learn to deal with it. The potential implementation of a social pedagogic approach in the UK would require, thus, a review of the regulations about health and safety for residential care and the empowerment of educators in order to allow the development of the approach to risk found in social pedagogic interventions.

Chapter 8. Conclusion

This final chapter shows a conclusion of the whole research study. I start with an overview of the research with a reminder of its aim, rationale, research questions and methodology chosen for its purpose. Then I continue showing an overview of the discussion of the findings obtained in this research and the characteristics of the social pedagogic approach studied. Next, I summarise what in my view is the contribution made by this research in the light of the findings obtained and the limitations of the research. Finally, I include a section with the implications of the findings of this research for a potential implementation of a similar approach in the UK for policy and practice and make suggestions for further research studies.

8.1. Overview of the research design

The aim of this research was to contribute to the emerging field of social pedagogy in the UK, which has attracted attention lately as an alternative approach for a residential care system in need of improvement. The review of the literature available shows that social pedagogy is a discipline that it is only beginning to be known and understood in the UK and reflects an evident need of research to establish the foundations for its development in this country.

Meanwhile, social pedagogy is a well-established discipline and profession in many European countries with a theoretical body of knowledge built over the years and an extensive practice experience to rely on. Some of the main research studies carried out (Cameron 2004, Hallstedt and Högström 2005; Janer and Úcar 2018; Janer and Úcar 2019), which focused on how social pedagogy is conceptualised and put into practice in these countries, have proved to be very useful in the process of discovery of this discipline in the UK.

My proposal for this research was to explore social pedagogic in practice in Spain, as this is one of the European countries with a long tradition in this field, in order to contribute to the understanding and development of this discipline in

the UK. Given that in social pedagogy theory and practice are constantly informing and shaping each other, the idea of building on a practical experience to generate knowledge about the discipline foundations became particularly relevant and useful.

Considering the gaps observed and the potential contribution that this research could have in the development of social pedagogy in the UK, I developed the following research questions:

- What are the characteristics of a social pedagogic approach in a Spanish residential child care facility?
- How do such characteristics fit with existing knowledge from the emerging discipline of social pedagogy in UK?
- What might be learned from such social pedagogic approach facing the implementation of social pedagogy into residential childcare practice in the UK?

In order to answer these questions, I designed a methodology with an inductive approach, as my aim was not to test any hypothesis but to look for the theoretical framework underpinning a social pedagogic intervention from a study of its practice. This methodology consisted in a case study of a residential care home, which embraced many of the core principles of social pedagogy named Santiago 1.

For the case study, I chose a qualitative approach and used ethnographic methods for data collection, combining participant observation and semi-structured interviews. Given my inductive approach, the choice of case study and qualitative methods was ideal as it allowed me to achieve the level of depth and richness in the details that I needed to obtain data with enough quality to be able to build ideas from it.

8.2. Overview of the discussion of findings

The findings of this research have shown interesting aspects of a social pedagogic intervention which can contribute to the understanding of the discipline. Those findings have been discussed in chapter 7 and such discussion can be summarised as follows.

The importance of the "social" aspect of social pedagogy

One of the most interesting findings of this research, in my view, is that the social pedagogic intervention goes beyond the individual, as it seeks to make an impact not only on the target group but also on the community and society in which they live. It is social as it is an educative intervention for and through the society so it does not fit with an individualistic approach to education that focuses on the acquisition of skills, values, knowledge and so on at individual level. This is visible in Santiago 1 in the amount of activities that they carry out with and for the community with the aim to make a contribution to it but also to educate in the views that the society have about children in care. It is also reflected in how they do educational work with the residents addressing cultural and societal problems that affect them from a critical perspective. This way the social pedagogic intervention becomes political as it seeks an empowerment of the people on the target group and works towards social justice by promoting the social integration of children in care through their education but also the education of the society.

Educator's attitude

Sharing a life space with people they work with has already been highlighted as a key principle of social pedagogy and this becomes clear at Santiago 1. Educators demonstrate an attitude which shows that they not see Santiago 1 simply as a working space but as part of their lives. It allows them to embrace the social pedagogic intervention as something of their own and to put their personal selves at its service. This does not only facilitate educators to flourish as professionals but contributes to create an atmosphere of equity and trust in

which relationships between educators and residents can develop in a natural way.

Building relationships

Building relationships with the people they work with has been pointed out as an essential element of a social pedagogic intervention. The experience observed at Santiago 1 confirms that, if enough time is allowed and favourable conditions set, such relationships can develop and contribute positively to the educative intervention. In particular, educators stressed how their relationship with residents facilitates a degree of communication and dialogue not only improves such relationship in a positive cycle but also improves their mutual understanding and learning.

Educational value of activities

Activities are at the core of the social pedagogic intervention at Santiago 1 and take place during most of the day. Formal educational activities such as professional courses, non-formal ones like workshops or planned leisure and informal activities which are part of the day to day life are all given a strong educative value. Thus, educators make use of them as situations which can prompt learning opportunities for residents and contribute positively to the intervention in several ways.

Firstly activities allow educators and residents to spend shared time and carry out tasks together. This feature, which has been defined as ‘the common third’, facilities closing the gap between the residents and educators as professionals and the built of relationships between them. Secondly, through the involvement on their planning and the participation in them residents engage in processes of experiential learning which are very valuable for the acquisition of skills and values. Learning from and through the experience is part of the social pedagogic intervention and it is facilitated by the large amount of activities developed. Thirdly, through these activities, residents have the opportunity to experience joyful and positive life situations and outcomes that contribute to the

improvement of their self-esteem and can also act as motivators for them to want to achieve further goals.

Working in groups

Group work has been highlighted as an important feature of a social pedagogic intervention. As I observed, educators at Santiago 1 acknowledge the educative potential of working with residents in groups and make use of it as part of their intervention. Working in groups creates learning opportunities in aspects such as dealing with conflicts, role modelling, teamwork and support, relationships building and so on. Hence, almost every activity taking place is carried out in groups. This demonstrates the importance that a social pedagogic approach gives to group work and its benefits at the expense of a more individualised intervention. This approach does not match current standards for good practice in residential care where an individualised attention to the particular needs of children and young people is considered very beneficial for them and something to be achieved.

The use of group work is greatly facilitated by the size of Santiago 1. While the tendency in the UK and other European countries in the recent decades have been to switch from big institutions to small family-like care homes, Santiago 1 accommodates around 100 residents, in composed of big sized facilities and has an educator's team of around 40 professionals. Such numbers allows them to develope a wide range of activities and provide residents with plenty of diverse opportunities to experience during their placement at the care home.

A focus on the future

An interesting aspect of the social pedagogic intervention is that educators encourage residents to focus and think about their future and how to achieve their goals and not in the issues and difficulties that are part of their past. This is visible in several features of their intervention such as a therapeutic work that focuses on problem solving of the obstacles that residents might find in their progression or the development of formal courses aiming to provide residents

with not only skills but also qualifications that allows them to access the labour market.

Risk approach

The way risk is understood and dealt with has been highlighted as a feature in which social pedagogy differs from the current approach in residential care in the UK. While regulations in UK for residential care homes create a working culture in which safety is prioritised, the social pedagogic approach entails putting in a balance the risk and the potential educative benefits of activities. Thus, educators at Santiago 1 allow residents to carry out tasks or activities involving a certain degree of risk if they consider that they pose a learning opportunity for them. Moreover, I found that educators understand that allowing residents to take risks has an educative value itself. They consider that it is a way to empower them by showing trust and putting responsibilities in them to deal with such risk. This way risk is not only something to avoid at all costs in a social pedagogic intervention but an aspect to embrace as part of it.

8.3. Contributions of this research

This research has described a social pedagogical approach for residential child care in Spain that in some ways differs from most Northern European countries with traditions of social pedagogy. In particular, the findings of this research show a socio-educational model with a pedagogic intervention for and through the community that is very unusual in individualistic approaches to residential child care like the one present in the UK.

Many of its characteristics can be found in the current understanding of social pedagogy in the UK developed drawing from the tradition of this discipline in countries such as Germany and Denmark. Thus, it shows notions that are considered key principles in that understanding of social pedagogy, such as the relationship between social pedagogues and residents as a core element of their intervention, the use of activities as a common third that enhances those relationships and creates learning opportunities or an approach to risk which embraces its educational potentialities. The findings provides a wide range of

examples of how this characteristics are put in practice that can be helpful to anyone with an interest in learning how those theoretical notions can be developed in a day to day intervention. However, this research has also shown characteristics of a social pedagogic approach which either do not hold the same importance in its northern-European counterparts or have not been given special attention in the UK.

8.4. Limitations of this research

The main limitation of this research comes from the nature of the ethnographic research methods used since, as shown in the methodology chapter (3.1.2) the researcher becomes the instrument for data collection and frequently, as it has been my case, also carries out the analysis of that data (Denscombe 2007). Therefore, the researcher acts as a filter shaped by their previous knowledge, perspective, expectations, aspects that attract their attention, capabilities and so on, which has an impact on the outcomes of the research. While this does not compromise the validity of this research as it would have done if a positivist approach had been taken in Silverman (2005), it does limit the contribution made.

The nature of the approach taken implies a limitation for this research but so does the nature of the subject studied. As already shown, in social pedagogy the relationship between its theory and practice is dynamic and complex (Eichsteller and Holtoff 2011; Storø 2012) practice in particular. Therefore, research studies like this, although valuable in the time when they are done, need to be carried out with regularity as they can become outdated sooner than usually happens in other disciplines. If the theoretical body knowledge of social pedagogy is to reflect what it is done in its practice while as the same time providing practitioners with a framework for their intervention as it is desirable (Storø 2012), then research studies need to be carried out regularly and reflected upon or this will not be achieved.

Considering that this research project has been designed as part of a three year PhD programme, further limitations come from practicalities such as the time and resources available. For example, I considered adding a document analysis

as a third data collection method that would have added valuable data from another perspective but I finally had to dismiss the idea as I could not encompass the participant observation, interviewing and carrying out the document analysis by myself in the time available. Moreover, longer time in the field would have allowed me to focus my attention in nuances of the social pedagogic practice and its complexity, resulting in richer outcomes. Equally, the contribution of those outcomes could have been greater had, for example, a multidisciplinary team of researchers been available to carry out the research as they would have contributed with their perspectives and knowledge to it.

Finally, another limitation of this research was the absence of the views of residents since, as explained in the methodology chapter, I did not carry out interviews with them. I considered that doing interviews with residents was more intrusive than doing a participant observation with them and would have had a negative impact on their daily lives. Moreover, I considered that, in the context of my research with limited time and human resources available, the contribution of those interviews to the quality of my data was not going to pay off the effort and time to transcribe, translate and analyse them. Such decisions have created a limitation for this research as it does not include the views of residents as part of the findings of this research

8.5. Implications for a potential implementation of a social pedagogic approach in residential care in the UK

Following the characteristics of the social pedagogic intervention observed through this research, I have pointed out implications for an approach like to be implemented in the UK bearing in mind its current residential care system. These implications can be classified according to its impact on policy, practice and future research.

Implications for policies

The benefits that a social pedagogic intervention might offer as a result of working in groups of residents in residential care suggest that the tendency of reducing the size and number of children in care homes should be

reconsidered, at least regarding homes for young people. The social pedagogic approach shows that bigger care homes provide educative opportunities particularly for young people. Therefore, the possibility that these larger homes might have a place in a social pedagogy based residential care system should be reassessed.

The social pedagogic approach creates interventions with a clear educative component. Meanwhile, the current residential care system in the UK is based on an approach which prioritises protection. This aspect is, to a great extent, embedded in the current residential care culture, even its name is a reflection of this. For the implementation of a successful social pedagogic intervention, the current approach to risk and its management in residential care needs to change. In a social pedagogic approach, residents are encouraged to engage in activities which might pose a certain level of risk as their educative potential is given more importance than such risk. Furthermore, the risk in itself is embraced as an opportunity for empowering residents as they take responsibility for dealing with it. A change of this culture can start by a review of the existing regulations for health and safety that, as it has been discussed in this research, create a risk-averse environment that is not compatible with a social pedagogic approach, since an educational perspective would not be possible to be taken in the current residential care in the UK where the regulations and culture are based on an approach risk aversion and avoidance. Therefore, if a social pedagogic approach wants to be implemented, an emphasis on the importance of taking a new educative perspective should be reinforced and reflected in the regulations around residential care.

In order to implement the approach to risk required for social pedagogic intervention, an aspect that becomes key is the empowerment of the professionals involved in it. Current staff at residential care homes are usually more concerned about the negative consequences of carrying out activities with the residents they work with than the benefits they might bring to them. In a social pedagogic approach those workers would need to be qualified and trained and carry out their work in an environment in which their professional decisions and their educational perspective are valued so they have the confidence about their intervention. Qualification and training in social pedagogy

is something that has just started to develop in some pilot initiative as it has been shown in this research, but these initiatives are punctual and disconnected. The creation framework for a professional qualification and the development of social pedagogy as an academic discipline can contribute to create a workforce more prepared to implement a social pedagogic approach. The implementation of a social pedagogic approach would also benefit from having trained and qualified staff in the sense that educators need to have a wide range of skills and capacities, besides an open mind to learn new ones, so they can offer a wide range of different activities to residents. This is strongly beneficial for the intervention as it improves the chances to give residents the opportunity to have new, valuable and motivating experiences for them.

Implications for practice

What I have referred to as “the social aspect of social pedagogy” should not be overlooked. Social pedagogy has an intrinsic component of social engagement and there is a risk in trying to reduce it to a simple strategy or method as it can become a mere instrument of social control. Therefore, it would be a mistake to take certain aspects of the social pedagogic intervention and try to fit them as part of the current individualistic approach to residential care in the UK. If social pedagogy is to be implemented, the approach in residential care would need to incorporate a social dimension that currently does not feature.

A social pedagogic intervention would require professionals who are able to take a reflective approach to their work. Unlike other professions in which the personal and the professional selves can be easily separated, the social pedagogic approach implies that professionals need to use part of their personal selves in order to be able to build relationships with the people they work with and to embrace the intervention as their own. Such personal involvement needs to be handled with care or the professionals might find their private lives being affected by their jobs and undesired effects might appear. Thus, taking a reflective stance towards their personal involvement, and strengthening measures such as supervision that facilitate it, becomes a necessary way to deal with that situation. This implies that professionals

working in residential care under a social pedagogic approach would need to have appropriate training in this aspect so they can become aware of it and develop the skills and attitude to be able to take a reflective stance to their roles.

For a social pedagogic approach to be taken in residential care the current professional sense of identity and confidence need to improve. Relationships between educators and residents are a core element of the intervention and these need time to develop. Thus, a working environment in which the levels of staff professional dissatisfaction and turnover are considerably high is not suitable for a social pedagogic intervention as they are an impediment to those relationships to develop.

Besides the need of time in the long term to build relationships, educators should have availability to carry out activities with residents, both planned and part of the day to day, since they are a fertile ground not only for their relationship to develop but also for a great amount of learning opportunities to arise. Residents can learn through the experience of doing those activities, from educators acting as role models, in the interaction with other residents and so on. In order to have the availability to plan and carry out activities, educators cannot spend too much of their time on shift doing other activities such as bureaucratic duties which are time-consuming tasks. Therefore, these should be reviewed and reduced if a social pedagogic approach is to be implemented while other measures such as an increase on the staff ratio can also be helpful to allow educators to be available to do activities with residents.

In order to build fruitful and positive relationships with residents, educators should take an approach similar to the authoritative style in parenting education. Particularly when working with young people, educators need to be aware that limits and structure are strongly needed by residents at that age but also that approaches too permissive or authoritarian are counterproductive. Thus, they should have the appropriate training to acquire such knowledge and develop the skills needed to put it in practice.

The active participation of residents is a key element in the social pedagogic intervention since experiencing things by themselves, taking responsibilities or

engaging in debates and decision-making processes are, among other outcomes of such participation, aspects that have a strong educative value and provide psychological benefits to residents. In order to implement successful social pedagogic intervention, measures need to be taken so residents can impact on the decisions made regarding the functioning of the care home and also participate actively in the planning and development of the activities taking place in it.

Implications for future research

When applied to residential care for looked after children, social pedagogy offers an educational approach with the potential to improve the current residential care system in the UK. However, as shown in this thesis, its implementation requires major changes in the way residential care is currently conceptualized, regulations and practice, and would benefit from a professional qualification creating a workforce of trained social pedagogues. All these changes need a strong commitment and investment and therefore research in the field is needed to support such decision and guide the steps to be taken.

The pilot programme carried out by members of the Thomas Coram Research Unit in London (Cameron et al. 2011) is a good example of a research project which has shed light on the benefits of a social pedagogic approach and the changes needed to implement it. However this programme observed how social pedagogues developed their job in residential care homes in England while maintaining the contextual factors in which they had to work unchanged. Thus, they did not succeed in the exploration of all the potential of social pedagogy as those factors are very influential and can limit the possibilities of the development of a social pedagogic intervention. I suggest that further research needs to explore how social pedagogues develop their work in an environment where the external conditions do not limit their possibilities to carry it out. I am aware that regulations for residential care cannot be changed or overlooked so these are always going to affect research initiatives developed in the UK, but other influencing factors discussed in this thesis can be adapted so the intervention studied can be as close as possible to a social pedagogic one.

This research has focused on social pedagogues and their intervention and explored the theoretical framework underpinning their practice. However, as Kirkwood et al. (2019) argue tools and research are needed to carry out evaluations of the outcomes that the social pedagogic approach achieves on the children in care. For this matter, it would be interesting to explore the views and experiences of these children, not only of those currently in care but also those who are now adults but benefited from it while they were under aged. They can provide with information and a perspective that can be very valuable in order to assess the impact of the social pedagogic approach. Equally interesting would be to explore the outcomes that a pedagogic intervention has on the community. Analysis on the views and attitudes of community members towards children in care through surveys, document analysis of articles related to them in paper news or in social media, for example, would provide with a very interesting perspective on the impact of this approach not only in residents, pedagogues and institutions but also in the wider community.

Another interesting option for further research is to continue exploring and learning from the experience that other European countries have to offer in the field of social pedagogy. This thesis discusses the findings of one case study but there are many other places where a study like this could be carried out. This would provide not only with further examples and knowledge regarding social pedagogy and its practice but also with the opportunity to design comparative studies with the potential of providing richer and deeper knowledge about this field.

REFERENCES

Ainsworth, F. and Thoburn, J. (2014) 'An exploration of the differential uSAGE of residential childcare across national boundaries', *International Journal of Social Welfare*, 23(1), pp. 16-24.

Alderson, P. (2004) 'Ethics', in Fraser, S., Lewis, V., Ding, S., Kellett, M. and Robinson, C. (eds.) *Doing research with children and young people*. London: SAGE, pp. 97 - 112.

Alderson, P. (2005) ' Designing ethical research with children', in Farrell, A. (ed.) *Ethical Research with Children*. Maidenhead: Oxford University Press.

Anglin, J. and Knorth, E. (2004) 'Competing declarations on residential care for children and youth. Stockholm versus Malmö: international perspectives on rethinking residential care. ', *Child & Youth Care Forum* 33(3), pp. 141-149.

Arksey, H. and Knight, P. T. (1999) *Interviewing for social scientists: An introductory resource with examples*. London: SAGE.

Atkinson, P., Coffey, A. and Delamont, S. (2003) *Key themes in qualitative research: Continuities and changes.* Walnut Creek, California: Altamira Press.

Bain, K and Evans, T. (2013). *The Internationalisation of English Social Work: the Migration of German Social Work Practitioners and Ideas to England.* RHUL.

Barclay, A., and Hunter, L. (2007). 'Blurring the Boundaries: The Relationship between Secure Accommodation and "Alternatives" in Scotland', in Kendrick, A. (ed.) *Residential Child Care: Prospects and Challenges*. London: Jessica Kingsley Publishers.

Bates, P. and Lymbery, M. (2011) 'Managing Risk in a Risk Averse Society', in Taylor, R., Hill, M. and McNeill, F. (eds) *Early Professional Development for Social Workers.* Birmingham:BASW.

Baumrind, D. (1966) 'Effects Of Authoritative Parental Control On Child Behavior', *Child Development*, 37 (4), pp. 887-907.
.
Bebbington, A. and Miles, J. (1989) 'The Background of Children who enter Local Authority Care', *The British Journal of Social Work*, 19(5), pp. 349-368.

Beck, U. (1992) *Risk Society: Towards a New Modernity*. London: Sage.

Becker, H. S. and Geer, B. (1957) 'Participant observation and interviewing: A comparison', *Human Organization*, 16(3), pp. 28-32.

Beddoe, L. (2010) ‘Surveillance or Reflection: Professional Supervision in “the Risk Society”’, *The British Journal of Social Work*, 40(4), pp. 1279–1296.

Beinum, M. (2009) ‘Mental health and children and young people in residential care’ in Kendrick, A. (ed.) *Residential Child Care: Prospects and Challenges*. London: Jessica Kingsley Publishers.

Benaquisto, L. (2008) ‘Codes and Coding’ in Given, L. (ed.) *The SAGE encyclopedia of Qualitative Research.* Thousand Oaks: SAGE.

Bengtsson, E., Chamberlain, C., Crimmens, D. and Stanley, J. (2008) *Introducing Social Pedagogy into residential child care in England*. London: National Centre for Excellence in Residential Child Care

Berens, A. E. and Nelson, C. A. (2015) 'The science of early adversity: is there a role for large institutions in the care of vulnerable children?', *The Lancet*, 386(9991), pp. 388-398.

Bernard, H. R. (2013) *Social research methods: Qualitative and quantitative approaches*. London: SAGE.

Berridge, D. and Brodie, I. (1998) *Children’s Homes Revisited*. London: Jessica Kingsley Publishers.

Boada, M. and Casas, F. (2010) ‘Educación y jóvenes ex-tutelados: revisión de la literatura científica española’, *Educación XXI. Facultad de educación UNED*, 13, pp. 117-138.

BOCyL (2005) D*ecreto 54/2005, de 7 de julio, por el que se regula el régimen de organización y funcionamiento de los centros específicos destinados a la atención residencial de menores con medidas o actuaciones de protección*.

Boddy, J. (2011) 'The Supportive Relationship in Public Care: The Relevance of Social Pedagogy’, in Cameron, C. and Moss, P. (eds.) *Social pedagogy and working with children and young people: Where care and education meet*. London: Jessica Kingsley Publishers, pp. 105-124.

Boddy, J., Cameron, C., Moss, P., Mooney, A., Petrie, P. and Statham, J. (2005) *Introducing pedagogy into the children’s workforce*. London: University of London. Institute of Education. Thomas Coram Research Unit.

BOCyL (2004) Decreto 37/2004 por el que se regulan los requisitos mínimos y específicos de autorización para la apertura y funcionamiento de los centros destinados a la atención de menores con medidas o actuaciones de protección

BOE (1996) *Ley de Protección Jurídica del Menor*.

BOJA (2013) *Boletín Oficial de la Junta de Andalucía*.

Bourke, B. (2014) ‘Positionality: Reflecting on the Research Process’. *The Qualitative Report,* 19(33), pp. 1-9.

Boylan, J., Dalrymple, J. and Ing, P.(2000) 'Let’s do it! Advocacy, young people and social work education', *Social Work Education*, 19(6), pp. 553-563.

Bravo, A. and Fernández del Valle, J. (2001) 'Evaluación de la integración social en acogimiento residencial', *Psicothema, 13 (2)*, p.197-204.

Bravo, A. and Fernández del Valle, J. (2009) 'Crisis y revisión del acogimiento residencial. Su papel en la protección infantil', *Papeles del psicólogo*, 30(1), pp. 42-52.

Brinkmann, S. and Kvale, S. (2009) *Interviews. Learning the Craft of Qualitative Research Interviewing.* London: SAGE.

Bryderup, I. and Frørup, A. (2011) ‘Social Pedagogy as Relational Dialogic Work: Competencies in Modern Society’, in Cameron, C. and Moss, P. (eds.) *Social Pedagogy and Working with Children and Young People. Where Care and Education Meet*. London: Jessica Kingsley Publishers, pp. 85-104.

Bryman, A. (2016) *Social research methods*. Oxford: Oxford University Press.

Bullock, R., Clough, R., Ward, A. and Wood, S. (2006). *What Works in Residential Child Care: A review of research evidence and the practical considerations*. London: Jessica Kingsley Publishers.

Bullock, R., Little, M. and Millham, S. (1993) *Going home: The return of children separated from their families*. Dartington: Dartmouth.

Bullock, R., and McSherry, D. (2009) ‘Residential care in Great Britain and Northern Ireland’. In Courtney, M. and Iwaniec D. (eds.), *Residential Care of Children: Comparative Perspectives*. Oxford: Oxford University Press.

Burgess, R. G. (2002) *In the field: An introduction to field research*. London: Routledge.

Candice, L. (2008) ‘Causes and Treatment of Burnout in Residential Child Care Workers: A Review of the Research’, *Residential Treatment For Children & Youth*, 24:3, pp. 197-229.

Cameron, C. (2004) 'Social Pedagogy and Care: Danish and German practice in young people's residential care', *Journal of Social Work*, 4(2), pp. 133-151.

Cameron, C. (2016) ‘Social Pedagogy in the UK today: findings from evaluations of training and development initiatives’, *Pedagogía Social, Revista Interuniversitaria.* 27, pp. 199-223.

Cameron, C. and Moss, P. (2011) 'Social Pedagogy: Current Understandings and Opportunities', in Cameron, C. and Moss, P. (eds.) *Social pedagogy and*

working with children and young people: Where care and education meet. London: Jessica Kingsley Publishers, pp. 7-32.

Cameron, C. and Petrie, P. (2009) 'Social Pedagogy and its Prospects in England's Children's Services', *European Journal of Social Education*, (16/17), pp. 49-61.

Cameron, C., Petrie, P., Wigfall, V., Kleipoedszus, S. and Jasper, A. (2011) *Final report of the social pedagogy pilot programme: development and implementation*. London: University of London. Institute of Education. Thomas Coram Research Unit.

Campos, G., Ochaíta, E. and Espinosa, M. Á. (2011) 'El acogimiento residencial como contexto de desarrollo desde la perspectiva de sus profesionales', *Educación y diversidad*, 5(1), p. 59-71.

Cannan, C., Berry, L. and Lyons, K. H. (1992) *Social work and Europe*. London: Macmillan.

Care of Children Committee (1946) *Report of the Care of Children Committee [Chairman: Myra Curtis]* London: HM Stationery Office.

Carvajal, D. (2002) 'The artisan's tools. Critical issues when teaching and learning CAQDAS', *Forum: Qualitative Social Research*, 3(2).

Casas, F. (1988) 'Las instituciones residenciales para la atención de chicos y chicas en dificultades sociofamiliares: apuntes para una discusión', *Menores*, 10, pp. 37-50.

Casas, F. and Fernández del Valle, J. (2002) 'Spanish social protection system', *International Journal of Child & Family Welfare*, 3, pp. 112-128.

Casas, F., Montserrat, C. and Malo, S. (2010) *Young people from a public care background pathways to education in Spain. The case study report*. Available at: http://tcru.ioe.ac.uk/yippee (Accessed 24 June 2021).

CGCEES (2013) *La profesión de la Educación Social en Europa. Estudio Comparado*. Barcelona: CGCEES.

Chamseddine Habib Allah, M. (2013) 'Aproximación historica a una de las profesiones sociales: la educación social', *Revista de Educación Social*, 17, pp. 1 - 13.

Charmaz, K. (2000) 'Grounded theory: objectivist and constructivist methods', in Denzin, n. k. and Lincoln, Y. S. (eds.) *Handbook of qualitative research. 2nd Edition.* Thousand Oaks: SAGE.

Charmaz, K. (2006) *Constructing grounded theory*. London: SAGE.

Cifuentes Martín, M. C., García Barriocanal, C., Jadraque Almoguera, H., Marrón Zapardiel, M., Sainz Lozano, M., Torres García, S., Vázquez Gallardo, R. and Viu Masedo, M. Á. (2002) *La función del educador en el acogimiento residencial*. Madrid: Consejería de Educación.

Committee on Homeless Children (1946) *Report of the Committee on Homeless Children*. Edinburgh: H. M. Stationery Office.

Coussée, F., Bradt, L., Roose, R. and Bouverne-De Bie, M. (2010) 'The emerging social pedagogical paradigm in UK child and youth care: Deus ex machina or walking the beaten path?', *British Journal of Social Work*, 40(3), pp. 789-805.

Cresswell, J. W. (1998) 'Qualitative inquiry and research design: Choosing among five traditions'. London: SAGE.

Cruz, L. (2011) 'Sobre el acogimiento residencial y las condiciones socioeducativas en las que se debe desarrollar la medida', *Pedagogia i Treball Social. Revista de Ciències Socials Aplicades*, 2, pp. 66-88.

D´Cruz, H. (2000) 'Social Work Research as Knowledge/Power in Practice' *Sociological Research Online*, 5(1).

D´Cruz, H. and Jones, M. (2014) *Social work research in practice: ethical and political contexts*. Los Angeles: SAGE.

Davidson, J., Wilkinson, C., Docherty, B. and Anderson, M. (2009) *Higher Aspirations, Brighter Futures: NRCCI Workforce Report.* The Scottish Institute for Residential Child Care

DCSF (2010) *Short breaks: safeguarding the welfare of disabled children.* Department for Children, Schools and Families. Available at: https://www.gov.uk/government/publications/short-breaks-for-disabled-children (Accessed 15 July 2021)

De la Herrán, A., García, C. and Imaña, A. (2008) 'Informe sobre el acogimiento residencial en centros de protección de menores: la vivencia de jóvenes ex residentes y sus familias', *Revista Iberoamericana sobre calidad, eficacia y cambio en educación*, 6(3), pp. 139-155.

Delgado, L., Fornieles, A., Costas, C. and Brun-Gasca, C. (2012) 'Acogimiento residencial: problemas emocionales y conductuales', *Revista de investigación en educación*, 10(1), pp. 158-171.

Denscombe, M. (2007) *The Good Research Guide: For Small-Scale Social Research Projects: For small-scale social research projects. 3rd Edition*. Maidenhead: McGraw-Hill International.

Department for Education (2019) *Children looked after in England, year ending 31 March 2019*.

Department of Health (1992) *Choosing with care / report of the Committee of Inquiry into the Selection, Development and Management of Staff in Children's Homes ; Chairman; Norman Warner.* London: HM Stationery Office.

Department of Health (2001b) *Children looked after in England: 2000/2001. Bulletin 2001/26*. London: HM Stationery Office.

Department of Health. (2020) *Children in Care in Northern Ireland 2018/19.* London: HM Stationery Office.

Dewey, J. (1938). *Experience and Education*. New York: Macmillan Company.

DOG (2005) *Diario Oficial de Galicia número 156, Martes 16 de agosto de 2005*.

Domingo, J. (2003) 'Evolución y situación actual de los recursos de protección de menores en España', *Revista del Ministerio de Trabajo y Asuntos Sociales,* 45(1), pp. 13-30.

Domínguez Alonso, J. and Mohedano Menéndez, R. (2014) 'El acogimiento de menores en el actual sistema de protección a la infancia: La importancia del contexto', *AZARBE, Revista Internacional De Trabajo Social Y Bienestar*, 3, pp. 149-155.

Doyle, M. and Smith, M. K. (2007-2013) 'Jean-Jacques Rousseau on education', in *The encyclopedia of pedagogy and informal education* [http://www.infed.org/thinkers/et-rous.htm. *Retrieved: 6-July-2021].*

Eichsteller, G. and Holthoff, S. (2009) 'Risk Competence - Towards a Pedagogic Conceptualization of Risk'. *Children Webmag.* Available at: http://www.thempra.org.uk/downloads/risk.pdf (Accessed 10 July 2021)

Eichsteller, G. and Holthoff, S. (2011) 'Conceptual Foundations of Social Pedagogy: A transnational perspective from Germany', in Cameron, C. and Moss, P. (eds.) *Social Pedagogy and Working with Children and Young People. Where Care and Education Meet*. London: Jessica Kingsley Publishers, pp. 33-53.

Emerson, R. M., Fretz, R. I. and Shaw, L. L. (2012) *Writing ethnographic fieldnotes. 2nd edition*. London: University of Chicago Press.

Fals-Borda, O. (1987) 'The application of Participatory Action-Research in Latin America', *International Sociology*, 2(4), pp. 329-347.

Fenton, J. (2020) 'Talkin'Bout iGeneration: A new era of individualistic social work practice?'. *The British Journal of Social Work*, 50(4), pp. 1238-1257.

Ferguson, I. (2004) 'Neoliberalism, the third way and social work: The UK experience'. *Social Work and Society*, 2(1), pp. 1-9.

Fernández del Valle, J., Álvarez, E. and Bravo, A. (2003) 'Evaluación de resultados a largo plazo en acogimiento residencial de protección a la infancia.', *Infancia y Aprendizaje*, 26(2), pp. 235-249.

Fernández del Valle, J. and Bravo, A. (2007) 'La evaluación de programas de acogimiento residencial de protección infantil' in Blanco A. and Marín, J. R. (eds.) *Manual de Intervención Psicosocial*. Madrid: Prentice Hall.

Fernández del Valle, J., Bravo Arteaga, A., Martínez Hernández, M. and Santos González (2012) *Estándares de calidad en acogimiento residencial especializado. EQUAR-E.* Ministerio de Sanidad, Servicios Sociales e Igualdad.

Fernández del Valle, J., Bravo Arteaga, A. and Santos González, I. (2009) *SERAR: Sistema de Evaluación y Registro en Acogimiento Residencial*. Oviedo: Nieru.

Fernández del Valle, J., Canali, C., Bravo Arteaga, A. and Vecchiato, T. (2013) 'Child protection in Italy and Spain: Influence of the family supported society ', *Psychosocial Intervention*, 22(3), pp. 227-237.

Fernández del Valle, J. and Fuertes Zurita, J. (2000) *El acogimiento residencial en la protección a la infancia*. Madrid: Pirámide.

Fernández del Valle, J. and Smith, M. (2015) 'European context of the RESME project', in Timomen-Kallio, E., Pivoriene, J., Smith, M. and Fernández del Valle, J. (eds.) *On the borders between residential child care and mental health treatment in Europe*. Turku University of Applied Sciences Turku, pp. 8-18.

Fernández Millán, J. M., Hamido-Mohamed, A. and Ortiz Gómez, M. d. M. (2009) 'Influencia del acogimiento residencial en los menores en desamparo', *Electronic Journal of Research in Educational Psychology*, 7(2), pp. 715-728.

Fernández Millán, J. M., Mohamed, A. H. and Fernández Navas, M. (2011) *Educación social y atención a la infancia*. Pirámide.

Fielding, N. and Lee, R. (1991) *Using computers in qualitative research*. London: SAGE.
Flick, U. (2014) *An introduction to qualitative research*. London: SAGE.

Flyvbjerg, B. (2006). 'Five Misunderstandings About Case-Study Research', *Qualitative inquiry*, 12(2), pp. 219-245.

Forrester, D. (2008) 'Is the Care System Failing Children?', *The Political Quarterly*, (79), pp. 206-211.

Francis, J. (2009) 'Could do Better! Supporting the Education of Looked after Children', in Kendrick, A. (ed.) *Residential Child Care: Prospects and Challenges*. London: Jessica Kingsley Publishers, pp. 19-33.

FRE (2012) *Framework for Research Ethics* Available at: http://www.esrc.ac.uk/_images/Framework-for-Research-Ethics_tcm8-4586.pdf. (Accessed 2 June 2021)

Freire, P. (1986) *Pedagogy of the oppressed*. New York: Continuum.

Fuertes Zurita, J. and Fernández del Valle, J. (1996) 'Recursos residenciales para menores', in De Paúl, J. and Arruabarrena, M. (eds.) *Manual de protección infantil*. Barcelona: Masson.

Fuertes Zurita, J. and Fernández del Valle, J. (2001) 'Acogimiento residencial', *Manual de protección infantil*, pp. 409-470.

Gallagher, M. (2009) 'Ethics', in Tisdall, K. M., Davis, J. and Gallagher, M. (eds.) *Researching with Children and Young People: Research Design, Methods and Analysis.* London: SAGE, p. pp. 11.

Gharabaghi, K., & Groskleg, R. (2010). A social pedagogy approach to residential care: Balancing education and placement in the development of an innovative child welfare residential program in Ontario, Canada. *Child Welfare*, *89*(2), p.97.

García Barriocanal, C., De la Herrán Gascón, A. and Imaña Martínez, A. (2012) *El acogimiento residencial como medida de protección al menor*. Madrid: Defensor del Menor de la Comunidad de Madrid.

Garrett, P. M. (2008) 'Social Work Practices: silences and elisions in the plan to 'transform' the lives of children 'looked after' in England', *Child & Family Social Work*, 13(3), pp. 311-318.

Garrido Arroyo, M. C. (2009) *Pedagogía Social*. Badajoz: Universidad de Extremadura.

Gerring, J. (2007) *Case study research: Principles and Practices.* Cambridge: Cambridge University Press.

Gillham, B. (2000) *Case study research methods*. London: Continuum.

Glaser, B. and Strauss, A. (1967) *The discovery grounded theory: strategies for qualitative inquiry*. Chicago: Aldin.

Goffman, E. (1961) *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates*. Garden City N.Y.: Doubleday.

Gomm, R. (2008) *Social research methodology*. New York: Palgrave Macmillan

Graña Gomez, J.L. and Rodriguez Biezma, M.J. (2010) *Programa Central De Tratamiento Educativo Y Terapéutico Para Menores Infractores.* Agencia De La Comunidad De Madrid Para La Reeducación Y Reinserción Del Menor Infactor

Greener, I. (2011) *Designing social research: A guide for the bewildered*. London: SAGE.

Greig, A. and Taylor, J. (1999) *Doing Research with Children*. London: SAGE.

Grietens, H. (2014) ' European perspective on the context and content for social pedagogy in therapeutic residential care', in Whittaker, J. K., del Valle, J. F. and Holmes, L. (eds.) *Therapeutic residential care for children and youth*. London: Jessica Kingsley Publishers, pp. 288-300.

Grunwald, K. and Thiersch, H. (2009) 'The concept of 'lifeworld orientation' for social work and social care', *Journal of Social Work Practice*, 23(2), pp. 131-146.

Guest, G., Namey, E. and Mitchell, M. (2013) *Collecting Qualitative Data: A Field Manual for Applied Research.* SAGE.

Hall, S. (1990) 'Cultural identity and diaspora' in Rutherford, J. (ed.), *Identity: community, culture, difference*. pp., 2-27. London, England: Lawrence & Wishart.

Hallstedt, P. and Högström, M. (2005) *The recontextualisation of social pedagogy: a study of three curricula in the Netherlands, Norway and Ireland*. Malmö högskola: Lärarutbildningen.

Hämäläinen, J. (2003) 'The concept of social pedagogy in the field of social work', *Journal of Social Work*, 3(1), pp. 69-80.

Hamel, J., Dufour, S. and Fortin, D. (1993) *Case study methods*. London: SAGE.

Hammersley, M. and Atkinson, P. (2007) *Ethnography. Principles in practice. 3rd edition.* London: Routledge.

Hatton, K. (2013) *Social pedagogy in the UK: Theory and practice*. Lyme Regis: Russell House Publishing Ltd.

Hawkins, P., & Shohet, R. (2012) *Supervision in the helping professions*. Maidenhead: Open University Press.

Hayden, C. (2010) 'Offending behaviour in care: is children's residential care a 'criminogenic' environment?', *Child & Family Social Work,* 15(4), pp. 461-472.

Heron, G., and Chakrabarti, M. (2003). 'Exploring the perceptions of staff towards children and young people living in community-based children's homes'. *Journal of Social Work*, 3(1), pp. 81-98.

Holman, B. (2013) *Champions for Children, Revised Edition: The Lives of Modern Child Care Pioneers*. Bristol: Policy Press.

Ingram, R., & Smith, M. (2018) *Relationship-based practice: emergent themes in social work literature*. (IRISS Insights; No. 41). Institute for Research and Innovation in Social Services

Janer, À. and Úcar, X. (2018) 'An international comparison: Social pedagogy training', *Journal of Social Work*, 19(2), pp. 253-275.

Janer Hidalgo, À. and Úcar, X. (2019) 'Social Pedagogy in the World Today: An Analysis of the Academic, Training and Professional Perspectives', *The British Journal of Social Work*, 50(3), pp. 701-721.

Jeffs, T. and Smith, M. K. (1997, 2005, 2011). *'What is informal education?',* The encyclopedia of pedagogy and informal education. *[https://infed.org/mobi/what-is-informal-education/. Retrieved: 6-July-2021].*

Jorgensen, D. L. (1989) *Participant observation: A methodology for human studies*. London: SAGE.

Kahan, B. and Levy, A. (1991) *The Pindown experience and the protection of children: The report of the Staffordshire Child Care Inquiry 1990*. Staffordshire, County Council.

Kendrick, A. (2008) 'Residential Child Care', in Kendrick, A. (ed.) *Residential Child Care: Prospects and Challenges*. London: Jessica Kingsley Publishers.

Kendrick, A. (2012) 'What research tells us about residential child care', in Davies, M. (ed.) *Social work with children and families*. Basingstoke: Palgrave Macmillan, pp. 287-303.

Kendrick, A. (2015) 'Residential child care', in Wright, J. (ed.) *International Encyclopedia of the Social and Behavioral Sciences. 2nd ed.* Oxford: Elsevier, pp. 534-539.

Kendrick, A., Steckley, L. and McPheat, G. A. (2011) 'Residential child care: learning from international comparisons', in Taylor, R., Hill, M. and McNeill, F. (eds.) *Early Professional Development for Social Workers*. Birmingham: British Association of Social Workers, pp. 81-87.

Kirkwood, A. (1993) 'The Leicestershire Inquiry 1992'. Leicester: Leicestershire County Council.

Kirkwood, S., Roesch-Marsh, A. and Cooper, S. (2019) 'Evaluating Social Pedagogy in the UK: Methodological Issues', *Qualitative Social Work*,18(1), pp. 8-23.

Kleipoedszus, S. (2011) 'Communication and Conflict: An Important Part of Social Pedagogic Relationships', in Cameron, C. and Moss, P. (eds.) *Social Pedagogy and Working with Children and Young People. Where Care and Education Meet*. London: Jessica Kingsley Publishers, pp. 125-140.

Knorth, E. J., Harder, A. T., Zandberg, T. and Kendrick, A. J. (2008) 'Under one roof: A review and selective meta-analysis on the outcomes of residential child and youth care', *Children and Youth Services Review*, 30(2), pp. 123-140.

Kools, S. M. (1997) 'Adolescent Identity Development in Foster Care', *Family Relations*, 46(3), pp. 263-271.

Kuczynski, L. and Daly, K. (2003). *'*Qualitative methods as inductive (theory generating) research: psychological and sociological approaches' in Kuczynski, L. (ed.) *Handbook of Dynamics in Parent- Child Relations,* pp. 373- 392*.* Thousand Oaks CA: Sage

Kvale, S. and Brinkmann, S. (2009) *Interviews: Learning the craft of qualitative research interviewing*. London:SAGE.

Lindon, J. (2011*) 'Too Safe for Their Own Good? Helping Children Learn about Risk and Life Skills*'. London: Jessica Kingsley Publishers.

Linneberg, M. S., and Korsgaard, S. (2019) 'Coding qualitative data: a synthesis guiding the novice', *Qualitative Research Journal*, 19(3), pp. 259-270.

Little, M., Kohm, A. and Thompson, R. (2005) 'The impact of residential placement on child development: Research and policy implications', *International Journal of Social Welfare*, 14(3), pp. 200-209.

López, M., Del Valle, J. F., Montserrat, C. and Bravo, A. (2010) *Niños que esperan. Estudio sobre casos de larga estancia en acogimiento residencial*. Madrid: Ministerio de Sanidad y Política Social.

López, M., Delgado, P., Carvalho, J. and Fernández Del Valle, J. (2014) 'Características y desarrollo del acogimiento familiar en dos países con fuerte tradición de acogimiento residencial: España y Portugal', *Universitas psychologica*, 13(3), p. 865-880.

López Noguero, F. (2005) 'Inadaptación social y educación social especializada" con" jóvenes: nuevas perspectivas', *Revista de Educación*, 7, pp. 61 - 72.

Lorenz, W. (1994) *Social work in a changing Europe*. London: Routledge.

Lorenz, W. (2008) 'Paradigms and politics: understanding methods paradigms in an historical context: the case of social pedagogy', *British Journal of Social Work*, 38(4), pp. 625-644.

Maier, H. W. (1987). The space we create controls us. *Child & Youth Services, 9*(2), 153–160.

Maillo, I., Rodríguez, A., Ruiz, V. and Torrego, Y. (2011) 'Intervención en residencias de protección de menores Madrid, España: Universidad de Alcalá.', in Torrego, J. C., Boal, M. and Bueno, A. (eds.) *Alumnos con altas capacidades*

y aprendizaje cooperativo. Un modelo de respuesta educativa. Madrid: Universidad de Alcalá, pp. 429-503.

Malmö Declaration. (1990) 'FICE International Bulletin, No. 2', *International Federation of Educative Communities,* Zurich, Switzerland.

Martín, E. and González, M. (2007) 'La calidad del acogimiento residencial desde la perspectiva de los menores', *Journal for the Study of Education and Development*, 30(1), pp. 25-38.

Martín, E., Rodríguez, T. and Torbay, Á. (2007) 'Evaluación diferencial de los programas de acogimiento residencial para menores', *Psicothema*, 19(3), pp. 406-412.

Martinez, M.J. and Fernandez, R. (2009) 'Recursos específicos en la red de protección', *Revista de Psicología y Educación,* 1(4), pp. 191-199.

Mason, J. (2018) *Qualitative researching. Third ed*. Los Angeles: SAGE.

Mc Grath-Lone, L., Harron, K., Dearden, L., Nasim, B., and Gilbert, R. (2016). 'Data Resource Profile: Children Looked After Return (CLA)', *International journal of epidemiology*, 45(3), pp. 716–717.

McGuinness, L., Stevens, I. and Milligan, I. (2007) '*Playing it Safe? A study of the regulation of outdoor play for children and young people in residential care'.* Glasgow: Scottish Institute for Residential Child Care.

Milligan, I. (2009). Introducing social pedagogy into Scottish residential child care: An evaluation of the Sycamore Services social pedagogy training programme.

Milligan, I. (2011) 'Resisting risk-averse practice: The contribution of social pedagogy', *Children Australia*, 36(4), pp. 207–213.

Milligan, I. and Stevens, I. (2006) *Residential Child Care: Collaborative Practice.* London:SAGE.

Minguez Álvarez, C. (2000) 'Pedagogía Social: epistemología, modelos y praxis', *Revista de Ciencias de la Educación*, 180, pp. 175 - 206.

Morente, F. and Dominguez, M. (2009) 'Menores infractores en instituciones de reforma. Una mirada desde dentro', *Revista Española de Investigaciones Sociológicas*, 126, pp. 71-106.

Moreno Manso, J.M., García-Baamonde, M.E. and Blázquez Alonso, M. (2010) 'Desarrollo lingüístico y adaptación escolar en niños en acogimiento residencial', *Anales de Psicología,* 26(1), pp. 189-196.

Morrison, T. (2005) *Staff supervision in social care : making a real difference for staff and service users*. London: Pavilion Publishing and Media Ltd

Moss. P. and Petrie, P. (2019) ‘Education and social pedagogy: What relationship?’. *London Review of Education*, 17 (3), pp. 393–405.

Muižnieks, N. (2013) *Report*. Strasbourg: Commissioner for Human Rights.

Munro, E. (2010) ‘Learning to reduce risk in child protection’, *British Journal of Social Work*, 40(4), pp. 1135–1151.

Munro, E. (2011). *The Munro review of child protection: final report, a child-centred system* (Vol. 8062). The Stationery Office.

Muñoz, R., Redondo, E. and Torres, B. (1998) *Manual de buena práctica para la atención residencial a la infancia y la adolescencia*. Madrid: FAMPI.

Narey, M. (2016) *Residential Care in England. Report of Sir Martin Narey’s independent review of children’s residential care*. London: Department for Education.

Neuman, L. (2011) *Social research methods: Qualitative and quantitative approaches*. London: Pearson education.

NISW (1988) *The Wagner Report: Report of the Independent Review of Residential Care, 1988: A Positive Choice (Report and Recommendations)*. London: National Institute for Social Work.

NSCPP (2021) *Looked after children.* Available at: https://learning.nspcc.org.uk/children-and-families-at-risk/looked-after-children (Accessed 3 June 2021).

NSCPP (2021b) *Statistics briefing: looked after children.* Available at: https://learning.nspcc.org.uk/research-resources/statistics-briefings/looked-after-children (Accessed 15 June 2021)

Nuñez, V. and Planas, T. (1997) 'La educación social especializada. Historia y perspectivas: una propuesta metodológica', in Petrus Rotger, A. (ed.) *Pedagogía social*. Barcelona: Ariel, pp. 40-55.

NYA (2007) *Involving children and young people – an introduction*. Leicester: The National Youth Agency.

Observatorio de la infancia (2011) *Boletín de Datos Estadísticos de Medidas de Protección a la Infancia*. Madrid: Ministerio de Sanidad, Servicios Sociales e Igualdad.

Observatorio de la infancia (2020) *Boletín de Datos Estadísticos de Medidas de Protección a la Infancia (21). Madrid:*. Madrid: Ministerio de Derechos Sociales y Agenda 2030.

Ofsted (2021) *National Statistics. Main Findings: children’s social care in England 2021.* Available at: https://www.gov.uk/government/statistics/childrens-

social-care-data-in-england-2021/main-findings-childrens-social-care-in-england-2021 (Accessed 15 July 2021)

O'Reilly, K. (2005) *Ethnographic methods*. Abingdon: Routledge.

Paget, B., Eagle, G. and Citarella, V. (2007) *Social Pedagogy and the Young People's Workforce: A Report for the Department for Education and Skills*. Sheffield: CPEA Ltd.

Palacios, J. (2003) 'Instituciones para niños:¿ protección o riesgo?', *Infancia y aprendizaje*, 26(3), pp. 353-363.

Pellicano, L., Hill, V., Croydon, A., Greathead, S., Kenny, L., and Yates, R. (2014) *My Life at School: Understanding the experiences of children and young people with special educational needs in residential special schools*. Children's Commissioner.

Pérez Serrano, G. (2004) *Pedagogía social, educación social: construcción científica e intervención práctica*. Humanes: Narcea Ediciones.

Petrie, P. (2001) 'The Potential of Pedagogy/Education for Work in the Children's Sector of the UK', *Social Work in Europe*, 8(3), pp. 23-25.

Petrie, P. (2005) 'Nineteenth century understanding of care work', in Boddy, J., Cameron, C. and Moss, P. (eds.) *Care Work: present and future*. London: Routledge, pp. 34-49.

Petrie, P. (2013) 'Social Pedagogy in the UK: Gaining a Firm Foothold?', *Education Policy Analysis Archives*, 21(37), pp. 1 - 12.

Petrie, P., Boddy, J., Cameron, C., Heptinstall, E., McQuail, S., Simon, A. and Wigfall, V. (2009) *Pedagogy - A holistic, personal approach to work with children and young people, across services*. London: Thomas Coram Research Unit, Institute of Education, University of London.

Petrie, P., Boddy, J., Cameron, C. and Wigfall, V. (2006) *Working With Children In Care: European Perspectives*. Maidenhead: McGraw-Hill International.

Petrie, P. and Chambers, H. (2009) Richer lives: creative activities in the education and practice of Danish pedagogues: a preliminary study: report to Arts Council England. Thomas Coram Research Unit, Institute of Education, University of London, London.

Petrus Rotger, A. (1997) *Pedagogía social*. Barcelona: Ariel. Cap.

Pilling, N., McGill, P. and Cooper, V. (2007) 'Characteristics and experiences of children and young people with severe intellectual disabilities and challenging behaviour attending 52-week residential special schools', *Journal of Intellectual Disability Research,* 51(3), pp. 184-196.

Punch, K. F. (2014) *Introduction to social research: Quantitative and qualitative approaches*. London: SAGE.

Quintana Cabanas, J. M. (1994) *Pedagogia Social. 2nd Edition*. Madrid: Libros Dykinson.

Quintana Cabanas, J. M. (1997) 'Antecedentes históricos de la educación social', in Petrus Rotger, A. (ed.) *Pedagogía social*. Barcelona: Ariel. Cap.

Richards, L. (2005) *Handling Qualitative Data: A Practical Guide*. London: SAGE.

Richards, L. and Morse, J. (2007) 'Coding', in Richads, L. (ed.) *Readme first for a user's guide to qualitative methods*. London: SAGE, pp. 133 - 151.

Ritchie, J., Spencer, L. and O'Connor, W. (2003) 'Carrying out qualitative analysis', in Ritchie, J. and Lewis, J. (eds.) *Qualitative research practice: A guide for social science students and researchers*. London: SAGE, pp. 219-262.

Robson, C. and McCartan, K. (2016) *Real world research*. Oxford: Blackwell Publishing.

Roesch-Marsh, A, Cooper, S and Kirkwood, S. (2015) *Social pedagogy pilot project evaluation.* Edinburgh: University of Edinburgh.

Rogers, J. (2016) ''Different' and 'Devalued': Managing the Stigma of Foster-Care with the Benefit of Peer Support', *The British Journal of Social Work*, 47(4), pp. 1078-1093.

Rubin, H. J. and Rubin, I. S. (2011) *Qualitative interviewing: The art of hearing data*. London: SAGE.

Ruch, G. (2005) 'Relationship-based practice and reflective practice: holistic approaches to contemporary child care social work'. *Child & Family Social Work*, 10(2), pp. 111-123.

Sáez Carreras, J. S. (1997) 'La construcción de la pedagogía social: algunas vías de aproximación', in Petrus Rotger, A. (ed.) *Pedagogía social*. Barcelona: Ariel. Cap.

Sáez Tejerina, M. L. (2001) *Manual de intervención individual con menores residentes, Volumen I: modelo teórico y metodología*. Valencia: Generalitat Valenciana.

Sainero, A., Bravo, A., and Del Valle, J. F. (2014) 'Examining needs and referrals to mental health services for children in residential care in Spain: an empirical study in an autonomous community', *Journal of Emotional and Behavioral Disorders*, 22(1), pp. 16-26.

SCCYP Scotland's Commissioner for Children and Young People (2010) *Go Outdoors! Guidance and good practice on encouraging outdoor activities in residential child care.*

Schensul, S., Schensul, J and Le Compte, M. (1999) *Essential Ethnographic Methods*. Altamira Press: Oxford.

Schofield, G., Larsson, B. and Ward, E. (2017) 'Risk, resilience and identity construction in the life narratives of young people leaving residential care', *Child & Family Social Work,* 22(2), pp. 782-791.

Schon, D. (1983) *The reflective practitioner: how professionals think in action*, London: Temple Smith.

Scott, J., Ward, H. and Hill, M. (2009) 'The health of looked-after children in residential care' in Kendrick, A. (ed.) *Residential Child Care: Prospects and Challenges*. London: Jessica Kingsley Publishers.

Scottish Government. (2020) *Looked After Children: a data cube spreadsheet*. Available at: https://statistics.gov.scot/data/looked-after-children (Accessed: 27 October 2020).

Sellick, C. (1998) 'Children at Risk in Central and Eastern Europe Perils and Promises. United Nations Children's Fund (Unicef) Economies in Transition Studies Regional Monitoring Report No 4', *Child & Family Social Work*, 3(1), pp. 71-72.

Shaw, J. (2012) 'Professionals' perceptions of offending in children's residential care', *Child & Family Social Work,* 17(3), pp. 359-367.

Sikandar, A. (2015) 'John Dewey and His Philosophy of Education', *Journal of Education and education Development*, 2(2), pp. 191-201.

Silverman, D. (2005) *Doing qualitative research*. London: SAGE.

Silverman, D. (2006) *Interpreting Qualitative Data*. London: SAGE.
Sindic de Greuges (2018) *Centros De Protección Específicos De Menores Con Problemas De Conducta.* Observatorio del Menor. Comunitat Valenciana.

Skinner, A. (1992) *Another kind of home: a review of residential child care*. London: H.M. Stationery Office.

Smetana, J. (1995) 'Parenting Styles and Conceptions of Parental Authority During Adolescense', *Child Development,* 66(2), pp. 299-316.

Smith, M. K. (1996, 2008). 'Johann Heinrich Pestalozzi: pedagogy, education and social justice', in *The encyclopedia of pedagogy and informal education.* [https://infed.org/mobi/johann-heinrich-pestalozzi-pedagogy-education-and-social-justice/. Retrieved: 6-July-2021].

Smith, M. (2009) *Rethinking Residential Care. Positive Perspectives*. Bristol: The Policy Press.

Smith, A.B. (2011) ' Respecting children's rights and agency: Theoretical insights into ethical research procedures', in Harcourt, D., Perry, B. and Waller, t. (eds.) *Researching Young Children's Perspectives: Debating the Ethics and Dilemmas of Educational Research with Children*. London: Routledge.

Smith, M. (2012) 'Social pedagogy from a Scottish perspective', *International Journal of Social Pedagogy*, 1(1), pp. 46 - 55.

Smith, M. (2013), 'Supporting children's upbringing: connecting across the generations'. *Relational Child and Youth Care Practice*. 26(4), pp. 16-22.

Smith, M. K. (2016, 2019) 'Animate, care, educate. The core processes of pedagogy' in *The encyclopedia of pedagogy and informal education,* [https://infed.org/mobi/animate-care-educate-the-core-processes-of-social-pedagogy/. Retrieved: 05-July-2021].

Smith, M. K. (2019) 'Social pedagogy' in *The encyclopedia of pedagogy and informal education*, [https://infed.org/mobi/social-pedagogy-the-development-of-theory-and-practice/. Retrieved: 29-October-2020].

Smith, M. and Monteux, S. (2019) 'Social pedagogy and its relevance for Scottish social welfare', *Iriss Insight*, 49.

Smith, M. and Whyte, B. (2008) 'Social education and social pedagogy: reclaiming a Scottish tradition in social work', *European Journal of Social Work*, 11(1), pp. 15-28.

Stake, R. E. (1995) *The art of case study research*. London: SAGE.

Stanford, S. (2010) '"Speaking Back" to Fear: Responding to the Moral Dilemmas of Risk in Social Work Practice', *The British Journal of Social Work*, 40(4), pp. 1065–1080.

Statswales (2020) *Children looked after*. Available at: https://statswales.gov.wales/Catalogue/Health-and-Social-Care/Social-Services/Childrens-Services/Children-Looked-After (Accessed: 28 October).

Stenhouse, L. (1978) 'Case study and case records: towards a contemporary history of education', *British Educational Research Journal*, 4(2), pp. 21-39.

Stevens, I. (2010) *Social Pedagogy and its links to Holding the Space*. Strathclyde: Scottish Institute for Residential Child Care.

Stockholm Declaration on Children and Residential Care (2003). Children and Residential Care Conference, May 12–15. Available at: www.children-strategies.org/ Declaration 2003/Stockholm Declaration PDF english.pdf (Accessed: 28 October 2021).

Storø, J. (2012) 'The Difficult Connection between Theory and Practice in Social Pedagogy', *International Journal of Social Pedagogy*, 1(1), pp. 17–29.

Storø, J. (2013) *Practical social pedagogy: Theories, values and tools for working with children and young people*. Bristol: Policy Press.

Strauss, A. and Corbin, J. (1998) *Basics of qualitative research techniques*. Thousand Oaks: SAGE.

Thomas, G. (2015) *How to do your case study*. London: SAGE.

Thomas, G. and Myers, K. (2015) *The anatomy of the case study*. London: SAGE.

Thorne, S. (2000) 'Data analysis in qualitative research', *Evidence Based Nursing*, 3(3), pp. 68-70.

Tolfree, D. (1995) *Roofs and Roots: The care of Separated Children in the developing world*. Brookfield, VT: Arena.

Torío López, S. (2006) 'Evolución y desarrollo de la pedagogía social en España. Hacia una pedagogía social en construcción', *Estudios Sobre Educación*, 10, pp. 37 - 54.

Úcar, X. (2013) 'Exploring different perspectives of Social Pedagogy: towards a complex and integrated approach', *education policy analysis archives*, 21(36), pp. 2-19.

UNICEF (2008) *Understanding the Convention on the Rights of the Child.* Avaliable at: http://www.unicef.org/crc/index_understanding.html (Accessed 25 July 2021).

Utting, W. B. (1991) *Children in the public care: a review of residential care*. London: H.M Stationery Office
.
Van IJzendoorn, M., Bakermans-Kranenburg, M., Duschinsky, R., Fox, N., Goldman, P., Gunnar, M., Johnson, D., Nelson, C., Reijman, S., Skinner, G., Zeanah, C. and S Sonuga-Barke, E. (2020) 'Institutionalisation and deinstitutionalisation of children 1: a systematic and integrative review of evidence regarding effects on development', *The Lancet. Psychiatry*, 7(8), pp. 703–720.

Verschuren, P. (2003) 'Case study as a research strategy: some ambiguities and opportunities', *International Journal of Social Research Methodology*, 6(2), pp. 121-139.

Vrouwenfelder, E., Milligan, I., and Merrell, M. (2012). Social pedagogy and inter-professional practice: Evaluation of Orkney Islands training programme.

Whyte, K. J. (2009) What's So New about Social Pedagogy? Available at: http://www.childrenwebmag.com/articles/social-pedagogy/whats-so-new-about-social-pedagogy. (Accessed 10 October 2020)

Yin, R. K. (1994) *Case study research: Design and methods. 2nd Edition*. London: SAGE.

Yin, R. K. (2009) *Case study research: Design and methods. 4th ed.* Thousand Oaks, CA: SAGE.

Yin, R. K. (2012) 'Case study methods', in *APA handbook of research methods in psychology, Vol 2: Research designs: Quantitative, qualitative, neuropsychological, and biological.* Washington, DC: American Psychological Association, pp. 141-155.

APPENDICES

Appendix 1 – Interviews Guide

Formal, non-formal and informal education	- Officially recognised courses and qualifications - Milani's pedagogic approach - Workshops - Leisure activities - Free time
Educative approach	- Groupwork - Keeping residents busy - High expectations and demanding style - Sanctions and rewards - Enjoyment of life - Therapeutic sessions
Resident's involvement	- Assemblies - Running activities - Contribution to house keeping
Educator's role	- Participation and role modelling - Bidirectional learning - Skilled and knowledgeable - Living there
Risk management	- Approach to risk - Progressive independence - Drug misuse control - Open house
Social inclusion	- Being seen in the community - Making a contribution - Learning of traditions
Social values	- Multiculturalism - Society's issues awareness

Appendix 2 – Use of Nvivo

Nodos

Nombre	Recursos	Referencias	Creado por
1. Different aspects of education	7	15	VPO
Aula alternativa	4	5	VPO
Everyday life	7	20	VPO
Free time	3	3	VPO
Leisure activities	5	12	VPO
Milani's pedagogic approach	4	5	VPO
Officially recognised courses	5	10	VPO
Workshops	7	12	VPO
2. Educative style	0	0	VPO
Avoid atributions	2	3	VPO
Build relationships and emotional attachment	4	8	VPO
Discover talents and raise self esteem	1	2	VPO
Enjoyment of life	8	16	VPO
Experiential learning	5	11	VPO
Groupwork	0	0	VPO
Educators	5	9	VPO
Residents	9	36	VPO

Appendix 3 - Research information sheet

RESEARCH INFORMATION SHEET

Research project: *Developing social pedagogic residential care in the UK: the contribution of Spanish theoretical models and practice.*

Funding body: Economic and Social Research Council (ESRC).

Researcher: Victor Paz Oliva. PhD candidate, University of Edinburgh.

Research supervisors: Dr. Mark Smith. Head of Social Work, University of Edinburgh.

Dr. Gale Macleod. School of Education, University of Edinburgh.

Purpose of the research

The aim of this research is to explore the social pedagogic approach to residential care services for young people in care in Spain. The researcher is seeking to analyse these approaches both at theoretical and practical levels.

Research methods: Case Study

This research project includes a 5 months case study at the residential institution 'Santiago 1', where the researcher will collect data related to how the social pedagogic approach is put into practice, including aspects such as the institution organisation, design and implementation of educative interventions and strategies or management of behaviours and relationships with residents. The methods that will be used to collect this data will be participant observation, document analysis and interviews with some of the research participants.

Research participants

All the residents and workers at Santiago 1 will be invited to participate in this research. The participation will be by all means voluntary and informed consent will be sought from all the participants at the beginning of the research. The agreement to participate in this research will imply that:

- The participant accepts that the researcher will be able to observe and interact with them during the activities taking place at the residential care home, as far as this does not impede the normal development of these activities, and will be able to use this information as data for his research.
- The participant might be invited to be involved in one to one interviews with the researcher.
- The researcher will access to meeting minutes, care plans, educative intervention designs and other documents in place created by the participants in case they were relevant for the purpose of the case study.

- The participant accepts that the information collected by the researcher will be used for producing a final research report and for dissemination of findings.

Confidentiality and anonymity

In order to guarantee that the information collected during the case study is not used for other purposes than this research project, all the information will remain confidential and only the researcher will have access to this. These include fieldnotes written by the researcher, records from interviews, documents, and any other sources of information, which will be destroyed 5 years after the research project finishes.

Also, in order to guarantee the protection to the participants of the research, the information used in the final research report will be anonymised. No personal details or identifying characteristics of the participants will be disclosed and therefore their identities will not be revealed.

Benefits of this research

This research will contribute to the understanding and development of social pedagogy as a discipline, and the findings will provide an opportunity to reflect on the potential benefits of its implementation in the UK. It also has the potential to provide information and motivation to those leading residential care initiatives embracing a social pedagogic approach.

Dissemination of findings

The findings of this research will be presented in the research report which will be part of the final thesis of the researcher. This thesis will be accessible in electronic format from the University of Edinburgh library. Also the researcher might disseminate findings through academic journals and presentations in conference or other events. In addition to this, the researcher will provide 'Santiago 1' with a purposely created document summarising these findings for all participants to have access to them.

For further information

The researcher will be able to provide further details about any of the aspects of this research should it be required, either in person or by email. For any inquires please write an email to:

v.paz-oliva@sms.ed.ac.uk

Appendix 4 – Research information sheet, Spanish version

HOJA INFORMATIVA SOBRE LA INVESTIGACIÓN

Para educadores

Proyecto de investigación: *Desarrollando la educación social desde el acogimiento residencial en el Reino Unido: la contribución de los modelos teóricos y la práctica en España.*

Institución financiadora: Economic and Social Research Council (ESRC).

Investigador: Víctor Paz Oliva, Universidad de Edimburgo.

Supervisores: Dr. Mark Smith. Head of Social Work, Universidad de Edimburgo.

Dr. Gale Macleod. School of Education, Universidad de Edimburgo.

Propósito de la investigación

El objetivo de esta investigación es explorar el enfoque educativo en hogares de acogida para menores en España. El investigador busca analizar este enfoque tanto a nivel teórico como práctico.

Método de investigación: Estudio de caso

Este proyecto de investigación incluye un estudio de caso en el hogar de acogida 'Santiago 1' donde el investigador recogerá información relacionada con la puesta en práctica del enfoque educativo, incluyendo aspectos como la organización del centro, el diseño e implementación de la intervención y estrategias educativas, o el manejo de las relaciones con los menores residentes y de su comportamiento. Los métodos para dicha recogida de información serán la observación participativa del investigador, el análisis de documentos del centro y entrevistas con algunos de los educadores que deseen participar en la investigación.

Participantes en la investigación

Todos los educadores en 'Santiago 1' serán invitados a participar en esta investigación. La participación será totalmente voluntaria y el investigador pedirá el consentimiento informado de todos los participantes al inicio de la investigación. La decisión de participar en esta investigación implicará que:

- El participante acepta que el investigador observe e interactúe con él durante las actividades que tengan lugar en el hogar de acogida, siempre y cuando no se impida el normal desarrollo de las mismas, y que utilice la información recogida como parte de su investigación.

- El participante puede ser invitado a llevar a cabo una entrevista con el investigador con el objetivo de recoger más información relevante a la investigación.

- El investigador pueda acceder a documentos creados por los participantes tales como proyectos educativos colectivos e individuales, diseño de actividades, hojas de seguimiento de residentes u otros documentos que puedan aportar información relevante para la investigación.

- El participante acepta que la información recogida por el investigador sea usada para producir una tesis doctoral y otros documentos o presentaciones que sirvan para diseminar las conclusiones de la investigación.

Confidencialidad y anonimidad

Con el objetivo de que la información recogida durante el estudio de caso no pueda ser usada para otros objetivos que no sean esta investigación, toda esta información será tratada con confidencialidad y solamente el investigador tendrá acceso a ella. Esto incluye las notas de campo que escriba el investigador, grabaciones de entrevistas, información recogida de documentos y cualquier otra información recogida por el investigador. Toda esta información será destruida pasados 5 años.

Además, con el objetivo de garantizar protección para los participantes de la investigación, la información que sea incluida por el investigador en la tesis final será anonimizada. Esto quiere decir que cualquier información personal sobre los participantes será modificada para que su identidad no pueda ser descubierta.

Beneficios de esta investigación

Esta investigación contribuirá al entendimiento y el desarrollo de la educación social como disciplina y las conclusiones servirán como oportunidad para reflexionar en los beneficios potenciales de la implementación de un enfoque educativo en hogares de acogida en el Reino Unido. Además tiene el potencial de ayudar y motivar a aquellos que quieran poner en marcha hogares de acogida con dicho enfoque.

Diseminación de las conclusiones

Las conclusiones de esta investigación serán presentadas en un informe que será parte de la tesis doctoral del investigador. Dicha tesis será accesible en formato electrónico a través de la biblioteca de la Universidad de Edimburgo. El investigador también podrá intentar diseminar dichas conclusiones a través de revistas académicas y presentaciones en conferencias u otros eventos.

Además, el investigador proveerá a 'Santiago 1' con un documento que resuma las conclusiones de la investigación y que sirva para que los participantes, y todo aquel que lo desee, puedan tener acceso a ellas.

Para más información

El investigador puede dar información más detallada sobre cualquier aspecto relativo a esta investigación a quien lo solicite, tanto en persona como a través de la siguiente dirección de email.

v.paz-oliva@sms.ed.ac.uk

Appendix 5 – Informed consent form

INFORMED CONSENT FORM

Research project: *Developing social pedagogic residential care in the UK: the contribution of Spanish theoretical models and practice.*

Researcher: Victor Paz Oliva, PhD candidate, University of Edinburgh.

Name of participant: _____

Role of participant at Santiago 1: _____

By signing this form I confirm that:

- I have read the information sheet and understood the purpose of this research, the implications of my participation and the use that will be given to the information collected by the researcher during his time at Santiago 1.

- I understand that the information collected will remain confidential and only available to the researcher and for the purpose of this research. I also understand that in the case that this information included a disclosure of child abuse or neglect, the researcher might need to breach the confidential conditions agreed. Thus, in agreement with the participant involved, the researcher might report such disclosure to the pertinent authorities, including Police and Social Services as required.

- I have been informed by the researcher that anonymity will be maintained in the report that will follow this research, and therefore the real identity of the participants will not be disclosed.

- I am aware that my participation in this research is voluntary and that I will be able to withdraw from it at any point during the research process.

- I agree to participate in this research.

Signature **Date**

Appendix 6 – Informed consent form, spanish version

FORMULARIO DE CONSENTIMIENTO INFORMADO

Trabajadores de Santiago 1

Proyecto de investigación: *Desarrollando la educación social desde el acogimiento residencial en el Reino Unido: la contribución de los modelos teóricos y la práctica en España.*

Investigador: Víctor Paz Oliva, Universidad de Edimburgo.

Nombre del participante: _____

Rol del participante en Santiago 1: _____

Al firmar este formulario confirmo que:

- He leído la hoja informativa y entiendo el propósito de la investigación, las implicaciones de mi participación y el uso que será dado a la información recopilada por el investigador durante su estancia en Santiago 1.

- Entiendo que la información recopilada se mantendrá en confidencialidad y será solamente accesible por el investigador y para el propósito de esta investigación. También entiendo que en el caso de que esta información incluyera una revelación sobre un caso de abuso o negligencia de algún menor, el investigador podría romper las condiciones de confidencialidad acordadas e informaría sobre dicha revelación a las autoridades pertinentes, incluyendo la Policía y los Servicios Sociales si fuera necesario.

- He sido informado por el investigador de que se mantendrá el anonimato de los participantes en la investigación, y que, por tanto, mi identidad y la identidad del resto de participantes no será revelada.

- Soy consciente de que mi participación en esta investigación es voluntaria y que puedo decidir abandonarla en cualquier momento durante el proceso de la misma.

- Estoy de acuerdo en participar en esta investigación.

Firma **Fecha**

Appendix 7 – Interview consent form

INTERVIEW CONSENT FORM

Research project: *Developing social pedagogic residential care in the UK: the contribution of Spanish theoretical models and practice.*

Researcher: Victor Paz Oliva, PhD candidate, University of Edinburgh.

Name of participant: _____

About the interview:

- The interview will have an expected duration of _____ minutes approximately.
- The participation in this interview is completely voluntary, and the interviewee will have the possibility to refuse to answer any of the questions or even to finish the interview at any point should they want to.
- The interview will be audio recorded so the researcher can have later access to what was said during it. This record will be maintained confidential and will not be shared with anyone else. 5 years after the end of this research project the interview record will be destroyed. The participant is invited to discuss with the researcher further details about the recording process.
- Different parts of this interview could be quoted in the final research report but, in order to guarantee anonymity, the name or any identifying characteristics of the participant will not be disclosed.

By signing this form I confirm that:

- I have read and understood the research information sheet and the information above.
- I am aware of the confidentiality and anonymity arrangements made for this research.
- I agree to participate in this interview.

Signature **Date**

Appendix 8 – Interview consent form, Spanish version

FORMULARIO DE CONSENTIMIENTO PARA ENTREVISTA

Proyecto de investigación: *Desarrollando la educación social en acogimiento residencial en el Reino Unido: la contribución de los modelos teóricos y la práctica en España.*

Investigador: Victor Paz Oliva, Universidad de Edimburgo.

Nombre del participante: _____

Sobre la entrevista:

- La entrevista tendrá una duración aproximada de _____ minutos.
- La participación en esta entrevista es completamente voluntaria, y el entrevistado tendrá la posibilidad de rehusar contestar a cualquiera de las preguntas o incluso a dar por concluida la entrevista en cualquier momento si así lo quisieran.
- La entrevista será audio-grabada para que el investigador pueda tener acceso a lo que se dijo en ella posteriormente. Esta grabación se guardará confidencialmente y no será compartida con nadie más. Al acabar este proyecto de investigación la grabación de la entrevista será destruida. El participante está invitado a hablar sobre el proceso de grabación más detalladamente con el investigador.
- Diferentes partes de esta entrevista podrían ser citadas en el informe final de la investigación, pero, para garantizar el anonimato, el nombre o cualquier otra característica que ayude a la identificación del participante no serán incluidos.

Al firmar este formulario confirmo que:

- He leído y entendido la hoja informativa de la investigación y la información que aparece en este formulario.
- Soy consciente de las medidas tomadas en esta investigación para garantizar la confidencialidad y el anonimato.
- Estoy de acuerdo en participar en esta entrevista.

Firma **Fecha**

Appendix 9 – Research information sheet for young people

RESEARCH PROJECT AT SANTIAGO 1

Who Am I?

My name is Victor, I am a student at the University of Edinburgh. I am also a social educator and have been in different children's homes in the recent years.

What am I doing at Santiago 1?

I am planning to spend a few months at Santiago 1 trying to learn about what happens in the care home. I would like to learn things such as how educators are organised, what activities take place, how the relationship between residents and educators is or how they act in different everyday situations. Once I learn all that I will write a document for the University called 'thesis' so others can learn also from my experience here.

Why am I doing it?

Because I think that Santiago 1 can be considered a good example that could help other people running care homes to do it better for the young people in them.

How am I going to learn all these things?

I am planning to spend 3 months at Santiago 1 and I will learn all these by observing and participating in the activities, reading documents and doing interviews with some of the social educators.

What do I need from you?

All I need from you is your permission to include what I observe from you and what I talked about with you in my research document. This means that you would be a participant in my research. I don't need you to do anything else.

What if you don't want to participate?

Your participation in this research is completely voluntary so you can decide not do take part in it. If that if your wish you only need to tell me or tell one of your educators so he or she can tell me. In this case I will still be present in many of the activities but I will not include anything that you do or educators do with you in my research document.

There is also the possibility that you agree to participate in the research but then you would like something not to be included in the research document (for example if you have had an argument with someone and you don't want that to be included). That is not a problem, just find a way to let me know and I will not include it.

What if you decide to participate but then change your mind later on?

That is absolutely fine, all you need to do is telling me or telling an educator to let me know.

Does this mean that everyone can know what you do or say?

Not really. First of all not everything that I observe or talk about will be included in the final document, only a few things that I think might be important. Secondly I am planning to anonymize the participants of the research. This means that I will not be using real names or give personal information about participants in my research document. This way people might know what you did or say but they will not know that it was you who said or did it.

What if you are not sure about something?

If you need any more information please ask me or one of you educators and we will give you all the information you need.

Appendix 10 – Research information sheet for young people, Spanish version

PROYECTO DE INVESTIAGICÓN EN SANTIAGO 1

¿Quién soy?

Mi nombre es Víctor, soy un estudiante de la Universidad de Edimburgo (Escocia). También soy educador y he trabajado en varios hogares de acogida, en España y en el Reino Unido.

¿Qué estoy haciendo en Santiago 1?

Tengo pensado pasar unos meses en Santiago 1 intentando aprender cómo funciona la casa. Me gustaría aprender cosas como la organización de los educadores, las actividades que se realizan, la relación entre educadores y residentes y cómo actúan ambos ante las situaciones que se dan en Santiago 1 en el día a día. Una vez haya aprendido todo ello escribiré un documento para la Universidad llamado 'tesis doctoral' donde incluiré todo lo aprendido en mi experiencia para que otra gente pueda aprender de ella.

¿Por qué estoy haciendo esto?

Porque pienso que Santiago 1 es un buen ejemplo de hogar de acogida y puede servir a otras otras personas que dirigan hogares de acogida a hacerlo mejor en beneficio de los chavales que allí se encuentren.

¿Cómo voy a aprender todas esas cosas?

Tengo pensado pasar unos 3 meses en Santiago 1 y aprenderé a base de observar y participar en las actividades, leyendo documentos y hacienda entrevistas a algunos de los educadores.

¿Qué necesito de ti?

Lo único que necesito es tu permiso para incluir lo que observe de ti y lo que hablemos en mi investigación. Esto significa que te convertirías en un participante de esta investigación. No necesito nada más por tu parte.

¿Qué pasa si no quieres participar?

Tu participación en esta investigación es totalmente voluntaria, así que puedes decidir no participar en ella. Si ese fuera tu deseo simplemente dímelo o avisa a uno de los educadores para que me lo diga. En este caso yo seguiría estando presente en las actividades pero no incluiría nada de lo que hicieras o dijeras en mi investigación.

También existe la posibilidad de que decidas participar en la investigación pero que en un momento dado pase algo que no quieras que sea incluido como información para la investigación (por ejemplo una discusión que hayas tenido con alguien). En tal caso simplemente dímelo y no lo incluiré.

¿Qué pasa si decido participar pero luego cambio de idea?

No hay problema, puedes decidir si participar o no en cualquier momento. Simplemente dímelo o avisa a un educador para que me lo diga.

¿Si participo en la investigación todo el mundo podrá saber lo que he dicho y hecho?

No, en realidad no. En primer lugar no todo lo que observe y hable estará incluido en el documento final de la investigación, solamente unas pocas cosas que considere que pueden ser importantes. En segundo lugar tengo pensado que la participación en la investigación sea anónima. Esto quiere decir que no usaré nombres reales ni daré detalles personales sobre los participantes cuando explique lo que he aprendido. De esta manera puede ser que la gente lea lo que dijiste o hiciste, pero no sabrá que fuiste tú el que lo dijo o lo hizo.

¿Qué pasa si tengo dudas aún sobre algo relacionado con esta investigación?

Si necesitas más información simplemente habla conmigo o con alguno de los educadores y te explicaremos lo que necesites.