

**Childhood experiences, a commitment to caring and care work with  
vulnerable children**

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**ABSTRACT**

This paper draws upon biographical interview material from a mixed-method British study of workers caring for vulnerable children: residential social workers, family support workers, foster carers and community childminders. It has two aims: (1) to identify the contexts - the particular events, circumstances and life course phases - that precipitated a move into their first occupation working with vulnerable children and young people; and (2) to analyse the main narrative resources that informants employed in explaining how they developed a commitment to care in general. It thereby suggests how workers are drawn to caring and when and why they take up this important work which is generally undervalued in the British context. In particular it demonstrates how childhood constitutes a critical interpretive resource suggesting the importance of negative as well as positive formative experiences in creating a commitment to care for others, vulnerable children in particular.

## KEY WORDS

Childcare workers, caring commitment, vulnerable children, childhood experience, biographical research

## **PAPER**

*'I suppose I've always kind of been in that caring role.'*

Childcare work is heavily gendered and generally undervalued in Britain (Owen 2003; Brannen and Moss 2003). The UK children's workforce is currently receiving considerable public policy attention in response to recent scandals concerning the care of vulnerable children (Laming 2003) and longstanding problems of recruitment and retention in this field (Eborall 2005; Children's Workforce Development Council 2006). A study that involves the most disadvantaged groups in society – children who are socially and emotionally vulnerable and often from disadvantaged families – provides an important test case for understanding the conditions under which this important work is taken up, and the sources of a commitment to caring for children and to work that is demanding and emotionally stressful.

The paper will discuss the theories and methods used, in particular the biographical interview approach. This will be followed by an analysis of the particular circumstances and contexts that workers said prompted them to enter childcare work in the first place. It will then turn to the paper's second analytic focus: to identify the main narratives concerning the genesis of a commitment to caring and will suggest how past adversity and unhappiness can form part of a narrative repertoire by which workers explain their commitment to care.

### **Theorising a commitment to caring**

Caring for vulnerable children is a paid job but needs to be theorised as more than work. Two sets of conceptualisations are relevant here. The first concerns the ethics of care (Tronto 1993, Sevenhuijsen 1998). As Tronto (1993) suggests, caring constitutes ethical practices that consist of four elements: attentiveness (caring about), responsibility, competence and responsiveness. The concept of an ethics of care is reflected in the notion of care commitments and responsibilities as ‘negotiated’ social processes and applied in their family research (Finch and Mason, 1993). Three aspects can be distinguished: (a) relational aspects whereby responsibilities are a product of interaction between individuals over time; (b) context specificity in which negotiations are embedded in concrete, particular and local situations and informed by knowledge of this context and of other actors; (c) negotiations that takes place with the self as people construct and confirm their identities as moral beings in wanting (and deciding) to care, and in the exchange of support (Finch and Mason, 1993). Negotiating care responsibilities therefore recognises both individual agency and the structural context: actions decided on the basis of what seems ‘right’ under given social conditions.

A second theorisation concerns the ‘capacity to care’ which, as Hollway (2006) discusses, relates to notions of subjectivity and intersubjectivity. Noting that care connotes suffering in Anglo-Saxon languages, she cites Levinas’ argument that we risk imposing the self upon the other, and the attendant consequences of omnipotence and dependence. Drawing on psychoanalytic theory, Hollway

(2006) argues that a capacity to care requires both identification with and differentiation from the other. When an individual recognises another's pain as being similar to one's own, such identification needs also to be accompanied by a recognition that the other is separate from the self or 'troubles will start that lead to failure to care' (p106).

Moreover caring about the other is not a fixed state but fluctuates. Caring is shaped in the formative period of the life course: it flourishes or is compromised as a result of early primary relationships and the way these extend across the life course and institutions and relationships (Hollway 2006: 127). People may feel 'called' to care about others and to care work because of particular experiences and events during the course of their lives. A study of the autobiographical writing of social workers found that a calling to this kind of work typically originated in social workers' childhoods (Cree 2003). Cree notes the significance of: 'a childhood marred in some way by loss or adversity. They (social workers) grew up knowing what it felt like to be 'different' or an 'outsider'. ...This in turn, led them to have a deep-seated desire to do something about it' (Cree, 2003).

In an analysis of fictional biographies - *Bleak House* and *The Shorn Lamb* - Hardy (2005) suggests that the commitment to do good can be understood not simply as a response to past adversity - in particular the loss of parents in childhood, but as *narrative* resources that an individual draws upon to deal with past pain.

Such theoretical insights shape how we understand a capacity and commitment to caring and how the decision to take up this kind of work unfolds. Moreover such commitment is a product of past and present actions, and of constraints and opportunities located in past, present and the future. Moreover, we can never know from a retrospective account why something ‘really happened’ while a prospective account on such a topic would be virtually impossible. In the study we could only recreate the processes by which people ‘come to care’ (the title of our book) through an analysis of the narratives about a commitment to caring and to care work that are framed in the present. In this study the task was facilitated by a biographic-interpretive methodology as we shall discuss.

### **Research questions, design and methodology**

The study’s four groups included: (a) residential social workers working in children’s homes, (b) family support workers, working either in local authority teams or family centres, (c) foster carers working either for a local authority or an independent foster agency, (d) community childminders (sometimes known as sponsored childminders) who care for children placed with them by social services.

The study (Brannen et al 2007) examined the development of ‘careers’ in childcare work in the context of their life course as a whole. It elucidated care workers’ understandings of their work in different settings, their experiences of

their work conditions, and how they managed their caring work and unpaid care within family life in the context of the policies available and the management practices of the different types of workplace. Following from its policy concerns it examined issues of recruitment and retention in the childcare workforce by including a prospective element to the study to examine whether and why care workers left or stayed in the childcare workforce.

The four groups were not intended to be representative of these groups of childcare workers. Rather the groups provided a number of theoretical contrasts: workers in home versus institutional settings; the different life course phases in which workers are recruited to different types of care work including the age and needs of the children cared for; and the different employment statuses of these workers (most British foster carers do not receive pay as such). The kinds of work they engaged in ranged from the highly stressful in terms of the level of needs of children and young people, with children in residential care having the greatest needs and young children placed with community childminders generally having lower needs.

The study adopted both quantitative and qualitative methods. It began with a postal survey in three very different local authorities: a London borough, a large county council in the south of England, and a metropolitan authority in the north of England. The aim was to assess workers' characteristics, attitudes to the work and work intentions. We surveyed 150 workers of each type across public,

voluntary and private sectors. Except for community childminders, this was achieved. Even though additional authorities were recruited in order to ensure sufficient numbers of the former (and also family support workers), many of the authorities approached had no identifiable scheme of community childminders. The survey participants were similar to those in other studies in being predominantly female, low educated, white (except for a substantial proportion of ethnic minority workers in one authority), and low paid (Simon et al, 2003; Triseliotis et al, 2000; Mooney et al, 2001; Mainey, 2003; Sinclair et al, 2004; Eborall, 2005). The response rate was 56 per cent (N=305), a good response for a postal questionnaire especially one that depended upon intermediaries sending it out. This compares well with other studies (e.g. Mainey (2003) for a study of residential social workers (33%); Sinclair et al (2004), a study of foster carers (61%); Mooney et al (2001) a study of childminders (62%)).

Twenty four biographical-narrative interviews were conducted with six workers in each group from the survey, with partners also included in the foster group if fostering was a joint activity. Interviewees were selected on theoretical criteria including parenthood, life course phase, gender, ethnicity and type of employer. A follow-up survey of the original survey group was conducted a year later by telephone. A series of semi-structured interviews was also conducted with managers of the workers in children's services and in children's homes in order to explore policy and practice concerning recruitment, retention, training and support for managing work and family life responsibilities.

### *A biographical approach*

A biography can be defined as a *story told in the present* about a person's *life in the past* and his or her *expectations for the future* (Nilsen 1996). Rather than seeing stories as separate, complete and self-sufficient they may be conceptualized as narrative practices ((Hyvarinen 2008, Gubrium and Holstein 2007) in which narrative activity is a sense-making process (Ochs and Capps 2001). Life narratives are also part of a repertoire that people tell themselves and others over time and therefore a key process in the development of identities.

Orhan Pamuk, the Nobel prize winning author, writes in *The Black Book* that we only know who we are by telling stories about ourselves and that ‘It is only when a man (sic) has nothing left to tell that he has come close to being truly himself’ (1994 p374).

In *Oneself as Another* Ricoeur (1992) refers to the identity building process as ‘emplotment’ – a perpetual weaving and reweaving of past and present events into motives, situations, characters, and actions in which stories are revised as lives unfold (Antze 1996). According to Ricoeur, this narrative work reveals endemic tensions in the creation of social identities ‘between the demand for concordance and the admission of discordances’. The past is ‘something to be worked through’ with consequences for the self.

A biographical approach also focuses on lives embedded in particular contexts and historical periods (Mills, 1959; Elder, 1985; Hareven and Masaoka, 1988). The notion of 'life course' had particular relevance in this study and refers to the progress of time not as a single pathway but in the sociological sense of life course as comprising a number of interconnected careers relating to work, parenthood, childhood and so on (Elder 1978). These career lines intersect at different points in time or proceed in parallel. The concept also had an agentic aspect in that people drive their own life course along different tramlines and sequence life course phases differently.

The biographic-narrative approach we adopted generated material in which individual childcare workers accounted for their commitment to care. It also allowed us to draw out the biographical 'facts' of the cases, for example their childhood and educational and work histories. In this paper we focus only upon one part of the care process namely how a *commitment to care* arises in their stories of particular periods in the life course and in particular contexts.

We invited interviewees to give a narrative of their own life (Wengraf 2001). Only after they had completed their free narratives did the interviewer pose follow up questions: first, 'narrative questions'<sup>i</sup> about selected aspects of the life story that did not disturb the sequence of the story(see Wengraf 2001); and second, for purposes of ensuring comparability of material, semi-structured questions that covered issues that had not emerged in informants' stories.

The advantages of a biographical approach are in affording the opportunity to informants to weave their own connections (Nilsen, 1996) and the generation of a sense of *gestalt* (Wengraf, 2001). For the researcher, it brings into the frame all the evidence relevant to understanding a person's life: both the 'facts' of their lives and the interpretations placed upon them. The 'facts' of the life are kept conceptually distinct from the 'told story' in order to draw out how people both directed and interpreted their lives and also how their lives were shaped by the contexts and events that surrounded them (Wengraf, 2001). In the following analysis we disentangle informants' narratives concerning the genesis of a commitment to care from the contexts and events that prompted their entry into care work with vulnerable children.

Invited to tell the story of their work and family lives, care workers were guided by the focus of the study – how and why they came to care for vulnerable children, and thus were predisposed to give accounts framed in these terms. Thus although the biographical approach assumes that people's accounts are *not* produced under the conditions of a traditional interrogative interview, they are nonetheless shaped by the research focus. It also takes account of the fact that while people make sense of their lives, they do so with hindsight – in the light of subsequent events and in the context of the present, the present research encounter, their current life experiences and their future orientations. Moreover,

as noted above, direct questions were asked about what had influenced their commitment to caring when this was not volunteered in the life story.

### **The contexts for entry into childcare work**

The analysis of the workers' life histories suggests that the first entry of these workers into occupations involving the care of vulnerable children typically occurred at critical moments in the life course or at particular life course phases. Often the start of a career in childcare work was part of a complex chain of events. We identified several 'moments' and phases that prompted a first move into childcare work, often with more than one being part of the story:

- a particular life-course phase, for example choosing a career on leaving school; and the post childbirth phase when many mothers were at home with young children and sought work to fit around their family responsibilities with paid work in the home, as in the case of those who became childminders;
- the occurrence of a significant life event such as one mother experiencing difficulties with one of her own children that led her to consider that she might be able to assist other young people with similar problems;
- seeking to find a route out of full-time motherhood via the take-up of voluntary work in the care field that ultimately led to paid childcare work;
- via a recommendation from a professional, family member or friend who suggested that a person might be suited to a childcare occupation;

- serendipity - just being in the right place at the right time, for example one woman's experience of working in an administrative job in a social services department led her to feel she wanted to work with vulnerable young people;
- the need to pursue a new career, for example a man who coming to the end of his service in the armed forces wanted similar challenging work that took him out of doors: he took up work with troubled young people and took them on 'outward bound activities'.

These contextual or critical moments arose from the contexts in which people lived their lives and their relationships with others. Many were gendered and represent ways in which childcare work provides opportunities to women seeking to move out of or contend with full-time motherhood. Some were fortuitous, as in the case of a male care worker who found employment as a chef in a residential care home which prompted him to change career and to train as a residential social worker. Others were more predictable as in the case of several female carers who described (gendered) preferences at leaving school to become nurses but lacked the qualifications; instead they trained to become nursery nurses (for which no upper secondary school qualifications were then required in the UK). Often more than one such factor featured. However the accounts that care workers gave for entering childcare are only part of the story they told. As we shall show, their narratives described their commitment to caring about others, children in particular.

Contextual explanations for why people entered care work with vulnerable children and a commitment to care are not therefore mutually exclusive. Together they form layers of explanation and understanding. Both are frames through which these different groups of childcare workers tell their stories and respond to the interviewer's questions. It is to the stories of the origins of a commitment to caring for others to which we will now turn.

### **Narratives: the genesis of a commitment to caring**

Childhood is a natural point to begin a life story, especially in a research project about work with children. For the female workers, it constituted an important part of their narrative repertoire in which to account for their interest in caring and care work. A degree of reflection by these workers upon their own childhoods is moreover unsurprising given their keen awareness of the disadvantage and possible damage experienced by the children they were caring for.

Some were at pains to stress that their own childhoods had been happy (6/24), with some mentioning their good fortune in having 'caring parents'. However, others described unhappy childhoods (10/24). As autobiographies and novels about growing up suggest, a happy childhood provides a less powerful narrative in rhetorical terms than does an unhappy one. Yet, as we shall show, interviewees were less concerned with telling stories of their own misfortunes than with

showing how they were using these experiences to understand and help the children in their care.

Some gave no such evaluations and did not begin their stories in childhood (8/24). For example, a black male foster carer who had only relatively recently become a foster carer ventured at the start of his interview that he and his wife were ‘professional’ carers and had been motivated by the fact that, having taken advantage of the opportunity to educate themselves as new migrants to Britain, they felt they had something to give back to society. [We gained] ‘*a lot from this society and we needed to put something back into the society.*’ However later it became clear that his entry into fostering had been prompted by the loss of his job in the business sector.

A number of narratives can be identified that capture the genesis of commitment to caring about or for children. One narrative concerns wanting to care for children from being a child, a second relates to wanting to go into a caring occupation on leaving school. Another narrative concerned a desire (again often in childhood) to become a ‘good mother’, a theme that resonated with their understandings of childcare work and provided ‘tacit knowledge’ that they drew upon in their subsequent childcare work (Brannen et al 2007). A further narrative concerned a link made between an unhappy childhood and the desire and ability to identify with an unloved child. These narrative themes are not discrete but are often combined in an individual’s interview, as we shall indicate.

*Wanting to do care at a young age*

Several female childcare workers started their stories by noting that they had grown up in large families, had always been “around other children”, and always felt “very fond of children”. Several referred to having taken on caring responsibilities willingly for their siblings and for neighbours’ children when they themselves were children. A white working class family support worker in her mid forties who also said she had always wanted to be a nurse began her story thus:

*I’m the eldest daughter of a sibling group of five children. I parented from an early age myself within that family group. Which I suppose had a strong influence on my love of children and families and parents.*

Pat Foster, a 49-year old white family support worker from a working class background, similarly said she had wanted to have children from ‘a very young age’.

*I’ve always been what I think is very good with children. I’ve always felt that I understood their needs from a very young age. I was one of these young people who wanted to baby-sit and take children out for walks and things like that. And I’m the eldest of three – I don’t know if that’s significant at all.*

A white working class male foster carer noted:

*Even at home before I was married, I just loved kids and that, being around, specially the little ones.*

Several reported doing a significant amount of caring work in their own childhoods. In some cases it was clear that this had happened because there was no adult to step in. Many though seemed proud of having performed such caring activity as children and gave it as part of a justification for becoming caring adults.

*Wanting to enter a caring profession at a young age*

Caring occupations have been typically aspired to by young girls (for childcare workers see Cameron et al 2002), especially those born in the 1950s and 1960s. Such gendered career choices are shaped within families as well as in schools and by labour market structures. Susanne Grant, a black working class family support worker, worked with children with special needs. Early in her interview she recounted being heavily involved as a teenager in caring for her father and linked this to a decision in her twenties to enter caring work.

*I'm the youngest of 6 and my dad was (pause) had a stroke in his 40s, so I used to do a lot of caring for him. (Right) Well because my mum had two jobs. So he'd go off to a day centre in the morning and come back for lunch time. And she used to cook and leave his lunch in a flask and then I'd come home and she'd already have gone to her second afternoon job, cleaning job. So I used to do his dinners and get him ready for bed and whatever for when my mum came in. I used to go on little day centre trips with him... He used to go to an Afro Caribbean class on Tuesday. So he used to do that. And that's how I suppose I've always kind of been in that caring role.*

Susanne also helped take care of her nephews and nieces. She was very 'matter-of-fact' conveying little about her feelings at the time concerning the impact of caring on her life: she did not get any qualifications at school. Yet, interestingly, Susanne also described herself as a young person as being somewhat of a tomboy and more interested in playing football 'than sit and learn about silly babies'. However early on in her life story, Susanne stressed her interest in people with special needs. When asked about this later in the interview, she reflected upon the impact of caring for her father on her decision to do a nursery nurse course at the age of 22.

*As I said I think I've got an interest in medicine and you know, people with broken bones and odd syndromes and whatever. I think I've always had that. But I don't know if that was triggered off from my dad being ill with a stroke and*

*then he got Parkinson's disease. So maybe that (inaudible) was always there. Um, and then when I went to the nursery I ended up – not intentionally – but I ended up key working with two children with Down's syndrome and two with autism.*

### *Motherhood*

Motherhood was a key experience in relation to a commitment to caring.

Margaret Henderson, a white working class foster carer, described her own upbringing in wholly positive terms. Throughout her interview she referred back to her experience of being a mother and saw this as the only necessary resource for fostering. She began her account thus suggesting how fostering was a 'natural' extension of parenting:

*We had three girls of our own, (Yes) and they all sort of grew up, got married and left home, kind of thing. And me and my husband thought that we had a 3 bedroom house (Yeah) and we both always loved children and we just felt so empty. And we thought we could offer someone a home.*

For some women their narratives stressed the importance of full-time motherhood so that employment was considered incommensurate with their identities as mothers. Brenda Reeves, a middle class mother in her forties with two young children who had given up her career and taken up fostering, said:

*'I don't want to [go out to work]. I suppose cos I'm older. I'm 40, you know I wouldn't want to go and retrain myself for another job to go out to work, if you know what I mean. My job is looking after children, or my [former] job is teaching ... children.'*

However she also located her commitment to caring in her own early life in which she too suffered set-backs (although she did not elaborate). Moreover she noted that as a middle class mother fostering agencies did not expect her to understand what the foster children in her care had been through.

(At assessment she was told) *'Oh no but you don't understand, you were brought up in a middle class family.'* And I said *'Yeah but I still have gone through my own personal heavy life, you know, that I've had my own failures.'*

Pat Foster (referred to above) had had a child at a young age and had determined to be with them rather than work despite the financial need. She stayed at home until her two children were in secondary school (normative for British mothers in the 1970s). Pat suggested that her mother's lack of sensitivity to her own needs and anxieties as a child had influenced her own mothering. In particular she described a process by which she came to 'over empathise' (her words) with children. Moreover, judging her own mothering from the vantage point of being a care worker, she now considered that she may have been 'overprotective' towards

her own children and may have projected her own insecurities on to them and would have done better to have worked.

*I recognise [now] that probably some of the insecurities that I thought my children felt at not being with me were actually about me projecting that onto them, and that they would have coped actually quite well without me, thank you very much. You know what I mean? And I think (pause) so it's more about me not wanting to (pause), and if there was going to be any pain around for them I didn't want to have to deal with their pain.*

Her change of view is sustained in a different context in which it is now normative for mothers to work. It was also gained through greater insight into herself.

Both Pat and Brenda refer to past negative experiences when they were growing up. However the degree of hurt in these experiences was probably less than those referred to in the following narrative.

#### *Understanding and identifying with the unloved child*

This next narrative suggests how a deprived childhood can become a *transforming* resource creating a determination to help those similarly deprived.

The stories told by several care workers described traumatic childhoods and how

having been vulnerable children themselves they had come to understand both their own experiences and feelings and those of children in their care.

Such unhappy personal experiences were however only briefly referred to. For example, Mary Haywood was a 47-year old white foster carer who had been a lone parent for many years. In her opening narrative, she described having spent the first 12 years of her life in care (she never knew her parents). She gave little more than the bare, shocking facts. *“If you ask me why I got into foster caring basically I think it was because I was in a children’s home till I was 12 myself.”* Mary was taken into care when she was a few days old. Because of her physical characteristics she said she was difficult to place and had been through 47 placements. She described the children’s home as ‘horrendous’ and recalled how she had been made to feel ‘different’. Aged 12, she was adopted and developed a good relationship with her adoptive parents. Mary’s account focused on the development of a deep sense of moral responsibility towards vulnerable children that had emerged against the background of her own childhood.

*I could never see any child out on the street or anything like that, or in trouble. I mean I just live for kids. I mean they bring me so much light and life. You know there is so much baggage that comes with kids through maybe their own parents’ problems and things like that, which is pushed onto the child, you know. And childhood, because I never had a very happy childhood, I mean I was always*

*watching my back, always fighting for my own things to be kept safe, you know I don't think any child should have that worry or problems and burdens on them.*

Mary's story suggests redemption. This was achieved through the love of her adoptive father and her late husband and by becoming a mother herself. She now looks back at her past in terms of 'cared for status' and the society of the time ('Because that's what I was').

*(I) Never wanted children when I was young. Cos I never wanted to think that I couldn't love them the way that I (pause) you know I would never want to fail them and make them feel like I felt unloved. And you know just the problems of society if you like when I was younger. Because that's what I was. In my eyes. And I think that's (pause) But then you meet somebody don't you and you fall in love, and then you have a child."*

But her past is not left behind: she describes been assiduous in ensuring that neither her own child nor any of the very many children she has fostered came home to find her not there.

Other care workers reported abuse and neglect in childhood and had to take major responsibility for their younger siblings. Eileen Wheeler, aged 41, a white community childminder and foster carer, was the second of eight siblings and came from a poor working-class background. She and all seven siblings were

taken into care. Eileen reported remembering little of her early life beyond having a ‘very unhappy time’ living with her aunt and then later with her grandmother, having to care for her siblings. But Eileen was clear: “*I think it’s made me the person I am now, a stronger person.*” Later in the interview, she referred implicitly to her own childhood in describing the empathy she now felt for needy children:

*I think I can meet their needs. Because I have a lot of empathy for the backgrounds they come from. All the different types of abuse I can see the children come in – their eyes, their face. It just reminds me of my past (Yeah) and how deprived I was. And I think I can give a lot to them emotionally. I hope. (laughs) And I understand where they’re coming from. Although people say ‘Oh they’re awful.’ They’re not – they’re kids. So they’re not to blame for that, what’s happened to them..... If they’re angry and aggressive. I have a lot of understanding why they’re like that. I wasn’t a very nice child. [...] I was quite a little thug. (laughs) (inaudible) But I suppose you know like you have to have an understanding why these children are like this. If they’re bullying other children - they’re bullying for a reason, you know. Or they’re stealing or they’re lying, you know. There’s a reason for it all. And I have an understanding of it, did it myself.”*

Through the process of reflecting on her own childhood, Eileen developed an understanding not only of her own feelings at the time but also of children in similar circumstances.

In this next narrative a commitment to caring is both about wanting to be a good mother to her children but also about ensuring that children who have been through similar unhappy childhood experiences to her own learn to stand up for themselves. Debra Henry, a black foster carer aged 44 from a working class background, described a childhood marked by a long separation from her parents from a young age, migration to Britain aged 10 when she was reunited with her mother and met her stepfather and her younger (half) siblings for the first time. The reunion had unhappy consequences in which she was abused by her mother: *my mum didn't like me like that, she just liked me as a slave and a servant.*

In her long interview Debra suggested how an unhappy childhood made her *resist* the oppression of adults. Just as she sought both as a child and still as an adult to speak up for herself and develop self esteem, she also wanted to facilitate this for her own children and those in her care. Debra described wanting to be free from to be the person she felt had been denied her. She sought also give them the love she had been refused. She reflected on how her mother's treatment of her had made her determined that she and other vulnerable children should exercise agency – that is to be free to become '*the person that you want (to become)*' and to be rescued from being 'a nobody'.

*So I suppose that's what being with my mum has taught me. I suppose it's made me hard like that I suppose. Not hard in the sense as in (pause) I think the love that I deem that I should have had, I made sure they got instead. And I made sure when you're (pause) as they're growing that you're becoming the person that you want. I don't want you to become nobody, I want you to become who you choose to become.'*

## **Discussion**

This paper has provided a multi-faceted explanation for how the childcare workforce 'comes to care' for vulnerable children. It has sought to demonstrate how a biographical approach gave rise to an analytic focus and processual picture that has illuminated (a) the conditions under which childcare workers described first entering a childcare occupation and (b) the main narratives concerning how they accounted for a commitment to caring. It is important to reiterate a methodological caveat. This is the fact that, despite the opportunity given to the study informants to set the parameters for the telling of their stories of their careers in caring and care work, their stories are shaped by the focus of the study which was on this topic. Moreover where informants did not include in their initial life stories an account of their caring commitment or their entry into care work the interviewers were directive in posing such questions at a later phase of the interview.

There are a number of issues that merit further discussion. The first concerns the unanticipated finding that workers' own childhoods emerged as an important reference point in their narratives. Childcare workers' stories in some cases demonstrate that as children they were carers as well as recipients of care. The criteria by which children's caring work is assessed has to be understood in relation to current contexts, in particular girls' increased educational expectations and opportunities. Caring work done by children is by today's standards seen as exploitative when it adversely affects their educational opportunities and development. Moreover this perception is also shaped by the fact that such work is often invisible and that children are dependent on adults and desirous of their parents' love. Yet adults may still consider such caring work by children in positive terms, seeing it as instilling a disposition to care in adulthood while also being mindful of children's education, which makes burdensome caring problematic. Moreover, children also show that they too are disposed to care about others and are agents in practising an ethic of care *during* childhood, even though they see the 'proper work' of children as school work (see Brannen et al, 2000 for a study of children aged 11/12 and their experiences of family life). The public discussion of children as carers perhaps needs to be more nuanced and cognizant of the fact that children are active participants in caring relationships.

A second unexpected finding relating to childhood is that both the positive and negative accounts of childhood offered by childcare workers suggest that childhood provoked in many an early commitment to caring. In Tronto's concept

of care (Tronto, 1993), a key aspect is the condition of ‘being attentive’ to others who need care, which she sees as a key prerequisite for becoming a caring person in society. The theoretical point that can be made here is that caring is a processual, life course experience: the experience of receiving or giving care *in childhood* is understood and interpreted by some workers as encouraging attentiveness *in adulthood* to the needs of others (vulnerable children).

Theorizations of the individual’s capacity to care have tended to assume that lack of care in childhood is an obstacle for the development of caring competences, so that the victim is seen as having the potential to become a possible perpetrator (see Hollway 2006 for a critique). So that while a supportive or caring childhood may become a powerful personal resource that translates into a concern to work with vulnerable children, having a difficult childhood in which care was lacking is typically considered a handicap preventing people from feeling or being able to care. As some of the psychological research has suggested, childhood trauma has been found to adversely affect attachment (van Ijzendoorn, Schuengel and Bakermans-Kranenburg 1999).

However such theorizations are static and fail to recognize the potential for human agency and change. As discussed earlier, the capacity to care may be theorised differently (Hollway, 2006) so that it depends both upon primary relationships but also on the development of close relationships over time in which processes of both identification with and differentiation from the other take

place. For the care workers in our study who described traumatic childhoods, in particular the feeling of being unloved as a child (by a parent), this produced in them a determination or resolution *not* to reproduce unloving relationships. In short, over time individuals not only identified with the negative experiences of those in their care but also rejected the models of care that their parents and other family members had provided (Kellerhals et al, 2002) and sought to develop different models. The experience of being unloved as a child seemed to have been, or was in the process of being, transformed into a resource enabling childcare workers to identify with similarly unloved children and in some cases to help them create resistances against such experiences. Some carers described becoming strong persons through continuing personal struggle and sought to make children in their care similarly strong. The process of resource development also takes place through ongoing relationships with others. For one man a commitment to caring was shaped by marrying a partner who had experienced a loving childhood that contrasted with his own. He suggested how his own resources had been strengthened by hers.

A further theoretical point is that most care workers (in the study and in the population) were women. There is therefore an implicit gender bias both in the cultural narratives of caring but also in the ‘events’ that precipitated many into childcare work. There is also a generational bias in that the lives studied are embedded in gendered structures and opportunities that relate to particular historical periods. For example, many women came from working class

backgrounds and lacked educational qualifications at school leaving age. Thus as the educational opportunities, aspirations and achievements of new generations of women rise, these findings may not be indicative for the future.

For the present situation however the findings have some important policy implications. In particular a focus on childhood and its implications for care work with vulnerable children has hitherto been ignored by researchers and by policymakers and practitioners. In particular the findings about the significance of workers' own childhood may help to shape the training and support offered to childcare workforces in the recent UK policy initiatives concerning professional development and the creation of core skills in childcare work<sup>ii</sup>. For those concerned with developing training, they may facilitate greater understanding of the kinds of experiences, dispositions and values that different groups of childcare workers bring with them to the work so that these can be built upon and the relevant support provided. A focus upon the relevance of workers' own childhood experiences would seem an important issue for reflection for those concerned with making a difference to the lives of vulnerable children and young people. Such reflection may help to extend the capacities of those who are currently among the lesser qualified in society but who are taking responsibility for caring for some of society's most disadvantaged children.

While public policy needs to address the undoubted institutional barriers to recruitment notably the gendered connotations of the work, the low skills

required and the low financial rewards offered, it needs also to take account of and build upon the *attractions* of the work to *particular groups* and the kinds of contexts and moments that precipitate recruitment into childcare work (Brannen et al 2007; Statham et al in press). If it fails to do so it risks failing to recruit and retain workers who are highly committed to children. As this study demonstrates, care work is carried out in the context of lives that are forged by circumstances and events over the life course and by the agency of people themselves. Personal histories are not set in stone; they run alongside the present and can be an important motivator for a continuing and future desire to help others.

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### **References**

Antze, P. (1996) 'Telling stories, making selves: memory and identity in multiple personality disorder', in P. Antze and M. Lambek (eds) *Tense Past: Cultural Essays in Trauma and Memory*, New York: Routledge. [3-25]

Brannen, J., Heptinstall, E. and Bhopal, K. (2000) *Connecting Children: Care and Family Life in Later Childhood*, London: Routledge Falmer.

Brannen, J and Moss P (eds) (2003) *Rethinking Children's Care*, Buckingham: Open University Press.

Brannen, J, Statham, J, Mooney, A and Brockmann, M (2007) *Coming to Care: The work and family lives of workers caring for vulnerable children*, Bristol: Policy Press.

Children's Workforce Development Council (2006) *Recruitment, retention and rewards in the children's workforce*.

<http://www.cwdcouncil.org.uk/projects/rrr.htm>

Cree, V (ed.) (2003) *Becoming a Social Worker*, London: Routledge

Eborall, C. (2005) *The State of the Social Care Workforce 2004*, The second skills research and intelligence annual report, Leeds: Skills for Care.

Elder, G (1978) Family history and the life course in T K Hareven (ed.) *Transitions: The family and the life course in historical perspective*. New York: Academic Press

Elder, G (1985) Perspectives on the life course. In G Elder (ed.) *Life Course Perspectives: Trajectories and Transitions 1968-1980* Ithaca and London: Cornell University Press.

Felstead, A. and Jewson, N. (2000) *In Work at Home: Towards an Understanding of Homeworking*, London: Routledge.

Finch, J. and Mason, J. (1993) *Negotiating Family Responsibilities*, London: Routledge

Fostering Network (2006) *Statement on the Government's Announcement of National Minimum Fostering Allowances*, Press release, 27 July, [www.fostering.net/news](http://www.fostering.net/news)

Gubrium, J and Holstein, J (2007) Narrative Ethnography in *The Handbook of Emergent Methods* in S Hesse-biber and P Leavy (eds.) New York: Guilford Press

Hardy, R (2005) *Doing good and winning love: Social work and fictional autobiographies by Charles Dickens and John Stroud* TITLE? Oxford: Oxford University press.

Hareven, T. K. and Masaoka, K. (1988) 'Turning points and transitions: perceptions of the life course', *Journal of Family History*, 13, pp 271-89.

Hollway, W (2006) *The Capacity to Care: Gender and ethical subjectivity*,  
London Routledge

Hyvarinen, M (2008) Analysing narratives in P Alasuutari, L Bickman, J  
Brannen (eds) *The handbook of Research Methods* London: Sage

Kellerhals, J., Ferreira, C. and Perrenoud, D. (2002) 'Kinship cultures and  
identity transmissions', in B. Bawins-Legros (ed) 'Filiation and identity: towards  
a sociology of intergenerational relations', *Current Sociology*, 50, 2: Monograph  
1, March.

Laming, Lord (2003) *The Victoria Climbié Inquiry Report*, London: The  
Stationery Office.

Mainey, A. (2003) *Better Than You Think: Staff Morale, Qualifications and  
Retention in Residential Childcare*, London: National Children's Bureau.

Mills, C. W. (1959 [1980]) *The Sociological Imagination*, London: Penguin  
Books.

Mooney, A., Knight, A., Moss, P. and Owen, C. (2001) *Who Cares?  
Childminding in the 1990s*, Bristol: The Policy Press.

Mooney, A. (2003) 'Mother, teacher, nurse? How childminders define their role', in J. Brannen and P. Moss (eds) *Rethinking Children's Care*, Buckingham: Open University Press. [131-146]

Nilsen, A. (1996) 'Stories of life – stories of living: women's narratives and feminist biography', in *NORA: Nordic Journal of Women's Studies*, 4, 1 [15-31].

Ochs, E and Capps, L (2001) *Living Narrative: Creating lives in everyday storytelling* Cambridge MA: Harvard University Press

Owen, C (2003) 'Men in the nursery' in J. Brannen and P. Moss (eds) *Rethinking Children's Care*, Buckingham: Open University Press.

Ricoeur, P. (1992) *Oneself as Another*, Chicago, IL: University of Chicago Press.

Sevenhuijsen, S (1998) *Citizenship and the Ethics of Care*, London: Routledge

Simon, A., Owen, C., Moss, P. and Cameron, C. (2003) *Mapping the Care Workforce: Supporting Joined-up Thinking: Secondary Analysis of the Labour Force Survey for Childcare and Social Care Work*, London: Institute of Education.

Sinclair, I., Gibbs, I. and Wilson, K. (2004) *Foster Carers: Why They Stay and Why They Leave*, London: Jessica Kingsley Publishers.

Statham, J., Brannen, J. and Mooney, A. (in press 2008) Mobility within the children's workforce: evidence for a new policy? *Journal of Social Policy*

Triseliotis, J., Borland, M. and Hill, M. (2000) *Delivering Foster Care*, London: British Agencies for Adoption and Fostering.

Tronto, J. (1993) *Moral Boundaries: A Political Argument for the Ethics of Care*, London: Routledge.

van Ijzendoorn, M H Schuengel, C, and Bakermans-Kranenburg, M J (1999) Disorganised attachment in early childhood: meta analysis of precursors, concomitants and sequelae *Development and Psychopathology*, 11 225-249.

Wengraf, T. (2001) *Qualitative Research Interviewing: Biographic Narrative and Semi-structured Methods*, London: Sage Publications.

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<sup>i</sup> Narrative questions are those that seek stories of events and situations rather than argumentation or explanation (Wengraf 2001).

<sup>ii</sup> of the creation of a Children's Workforce Development Council and the publication of a Children's Workforce Strategy (HM Government 2005)