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## **Introduction and background**

Concerns regarding poor outcomes for young people who grew up in out-of-home care are long-standing, with evidence of disadvantage and inequality consistent across diverse contexts (Stein and Ward, 2021; Strahl et al., 2020). In their systematic review of the evidence, Gyphen et al. (2017) found that care-experienced young people, in comparison with their peers in the general population, had poorer educational outcomes, lower engagement and earnings in employment, as well as increased risk of homelessness, mental health problems, alcohol and/or substance misuse and criminal justice involvement.

Seeking to understand and address poor outcomes for young people with out-of-home care experience (subsequently referred to as care-experienced) is complex. The extent to which outcomes are influenced by adverse experiences before out-of-home care (such as abuse and neglect) and/or during out-of-home care (such as placement and relationship instability) has been debated (for examples of attempts to disentangle these impacts see Baldwin et al., 2019; Forrester et al., 2009; Luke and O'Higgins, 2018; Staines, 2017). Reunification with birth families may be the preferred route for permanency but evidence suggests continued challenges for young people returning home as well as some indications of more positive outcomes for those who remain in care (Biehal, Sinclair and Wade, 2015; Carlson et al., 2019; Esposito et al., 2021; Font, Berger and Cancian, 2018; Taussig et al., 2001). For those who age-out / emancipate, the extent to which trajectories are inhibited by multi-level barriers during their transition from care has also been highlighted (Gyphen et al., 2017). Stein (2019, p.400) has previously observed that transitions to adulthood for young people leaving care are both “accelerated and compressed” while Rogers (2011, p.411) argued young people are propelled into “instant adulthood”. Hiles et al.’s (2013, p.2067) review of 47 international studies found social support availability varied greatly and noted many young people feeling “completely unsupported or lacking in specific types of support” when leaving care.

Compounding young people's disadvantaged position, evidence regarding the effectiveness of policies and interventions designed to support transitions from care and improve outcomes is limited (Taylor et al., 2021).

### **Understanding pathways and trajectories: The potential for turning points**

Despite this backdrop, the potential for young people to 'overcome the odds' (Stein, 2006; 2012) in spite of incredible adversity and disadvantage is acknowledged, and the concept of resilience is an important and recurrent focus of study (for example see Lou, Taylor and Folco, 2018; Nuñez, Beal, and Jacquez, 2021; Zabern and Bouteyre, 2018). One hypothesis for how resilience is achieved is that young people experience turning points; events and experiences which prompt "significant changes in the direction of their lives or perspectives" (Pinkerton and Rooney, 2014, p. 4). Drapeau and colleagues (2007, p.985) have suggested that turning points can set young people "on the path towards resilience".

The concept of 'turning points' has featured in diverse topic areas, with applicability across theoretical frameworks and research traditions (Legewie and Tucci, 2019; Zeller, 2014). Yet despite some broad consensus, it has been suggested that the concept is ambiguous and there is variation in how notions of turning points have been utilized and understood (see Legewie and Tucci, 2019; Reimer, 2014). For example, distinguishing between studies of turning points, Legewie and Tucci (2019, p.2) state the evidence base includes interest in subjective experiences, objective measures and case-holistic approaches which capture the "processual complexity" of the concept.

### **Studies of turning points in relation to out-of-home care experience**

Höjer and Sjöblom (2014) argue that turning points are an important concept in relation to care-experienced young people, who are likely to have experienced a number of influential events prior to, during, and while leaving the care system. Brady and Gilligan (2018, p.75) assert that

analysis of turning points provides a means “of conceptualising how a life event, episode, or transition may shape an individual's life trajectory”, with potential to offer valuable learning for policy and practice.

Despite this promise, the evidence base regarding turning points for care-experienced individuals is limited and studies vary considerably in their focus, sample, scope and findings. For example, some researchers have explored the relevance of the concept and sought to identify turning points within individuals’ lives. Based on interviews with 65 young people in Sweden, who had left state care between three months and three years previous, Höjer and Sjöblom (2014) identified both positive and negative turning points from individuals’ accounts. Negative turning points were prompted by difficult placements and transitions, whereas positive turning points often reflected meaningful relationships with social services and professionals, and/or family and supportive networks. In contrast, Pinkerton and Rooney (2014, p.1) concluded that “pivotal turning points” did not emerge from biographical interviews with young people leaving care (n=8) in Northern Ireland. Rather the authors observed gradual shifts in subjectivity; common across diverse individual experiences, young people tended to progress through phases of “loss of felt security,” “finding stability,” and “actualizing self,” which largely mapped onto experiences surrounding entry into care, time in care and after/leaving care.

In other examples, researchers have focused their interest in turning points in relation to specific issues. For example, Johnson and Mendes’ (2014) Australian study focused on young people (n=59) who experienced housing instability or homelessness during their transition from state care, with the authors exploring turning points for participants whose circumstances had significantly improved over time (n=32). Other researchers have examined turning points in relation to education (see Brady and Gilligan, 2018; Driscoll, 2013; Hass et al., 2014; Hollingworth, 2012; Refaeli and Strahl, 2014). For example, Brady and Gilligan (2018) present

a composite case study, from a study of care-experienced adults in Ireland, which includes consideration of turning points and argues that events and transitions (such as entry into care, ageing out of care and reconnecting with birth family), have the potential to support or undermine educational trajectories.

Despite variation in focus and findings, a recurrent feature across studies is an attempt to understand what prompts or facilitates positive turning points. A helpful contribution in this vein is Drapeau et al.'s (2007) identification of three types of turning points; those prompted by action, relationships with adults, and reflection. Derived from interviews with twelve adolescents in foster care (all identified as resilient), action turning points were prompted by achievement and a sense of accomplishment, which subsequently shifted young people's perceptions of situations and possibilities. Likewise, forging a trusting relationship with an adult supported growth and progression, while personal reflection also had the potential to generate a desire or belief in the possibility of change. In terms of facilitating change, contributions have similarly highlighted the importance of individual agency, as well as the availability of support and resources (see Brady and Gilligan, 2018; Driscoll, 2013; Gilligan, 2009; Hass et al., 2014; Hollingworth, 2012; Ibrahim, 2019; Johnson and Mendes, 2014; Refaeli and Strahl, 2014).

Offering an important critical consideration of turning points is Evans' (2019) analysis of biographical writings produced by care leavers (n=18) for publication in charity reports or websites. Evans concluded that turning points were a recurrent feature of the stories, in which young people typically depicted positive change resultant from the intervention of others. This included being taken into care, being supported by individual workers, being inspired and encountering 'near-misses' in respect of negative outcomes. For Evans (2019, p25), the narratives are reflective of a "common care leaver discourse" and cautioned against a reductionist group identity of care leavers as "survivors of the system".

## **Perceptions of turning points by experts-by-experience**

While the concept of turning points for care-experienced young people has generated international interest, the evidence base remains relatively limited, with broad scope for further study. Noteworthy from our review of the literature was the propensity for *researchers* to define and identify turning points from participants' data, as opposed to specifically using the language of "turning points" with participants. For example, Höjer and Sjöblom (2014) note that the language of turning points was not used with young people. In other examples, there was often a lack of clarity in this respect, and confirmation as to whether the term 'turning point' was used with participants was not reported (a notable exception to this is Hass et al., 2014). As such, there is an absence of data whereby young people explicitly reflect on their experience of turning points. As experts-by-experience (Preston-Shoot, 2009), care-experienced young people and adults are ideally placed to reflect on the relevance and helpfulness of the concept, the circumstances and effects of turning points, as well as who or what was influential.

Drawing on data from over one hundred care-experienced young people, all of whom were explicitly asked about turning points in their lives, this paper seeks to make an important contribution to the evidence base. In analyzing this data, we sought to answer the following research questions:

- Is the concept of turning points relevant and / or meaningful to care-experienced young people?
- How do care-experienced young people reflect on turning point experiences; what is the nature of the change, who or what was influential?
- What are the implications of the turning points identified by care-experienced young people for research, policy and practice?

## **Participants**

Participants included young adults (ages 18-22) from a Western US state who had been enrolled in the Fostering Healthy Futures (FHF) longitudinal study during pre-adolescence. Eligible participants included eight cohorts of youth (and their caregivers) who were enrolled in the FHF study between 2002-2009 during pre-adolescence. Participants were recruited for the original study if they met the following inclusion criteria at baseline: (1) they were 9-11 years old, (2) had been court-ordered into out-of-home care within the preceding 12 months by participating county child welfare departments, and (3) they were living in out-of-home care at the baseline assessment. FHF enrolled 91% of all eligible children at this baseline interview. For more details on the FHF design, including other studies using these data, see Combs et al., 2022; Evans et al., 2022; Taussig & Roberts, 2022.

The young adult interview, which is the focus of this study, occurred an average of 9.4 years after the baseline interview and 88.5% of those eligible were located and agreed to participate in a follow-up interview. The follow-up interview, conducted with 206 young adults, included a list of qualitative questions. Graduate student research assistants conducted the interviews in a private, quiet location. The interviews consisted of both qualitative and quantitative questions covering many domains of functioning. The turning point qualitative question, which is the subject of this paper, was not administered to the first 30 participants interviewed, as it was added later. In addition, 10 responses were unclear or unable to be coded, and 33 participants reported that they did not have a turning point. Thus, the final sample for this study was 133 participants.

Almost half of the study participants were female (47.9%) with the remainder identifying as male. Slightly over half (54.0%) of the participants identified as Latinx/Hispanic, 48.8% as White, 28.8% as American Indian, and 27.4% as Black/African American. Race and ethnicity

were coded in non-exclusive categories, as in the US (and especially among families involved in the child welfare system), there are high rates of racial/ethnic overlap and it is problematic to place children who self-identify as multi-racial or multi-ethnic into a single category (Chaiyachati et al., 2022). Participants' mean age in young adulthood was 19.5 years ( $SD = .94$ ). The majority of participants (88.8%) identified as heterosexual/straight in young adulthood.

It is important to recognize that although 100% of the sample is care-experienced, the majority of youth had attained child welfare-defined permanency before turning 18, with a quarter (26.5%) of the participants reporting that they aged-out/emancipated from care. Based on self-reports in young adulthood about their living experiences while growing up, 87.9% had lived with one or more relatives, 75.8% had lived in non-relative foster care, 52.6% had lived in congregate or group care, 45.2% had reunified with birth families, and 27.2% had experienced adoption (non-exclusive categories).

## **Procedures**

The current study was approved by the university's institutional review board and participants provided informed consent. Participants were typically interviewed in a public place with a private room (e.g., at a library, recreation center). Those who lived out of the area at follow-up were interviewed by phone. Participants received \$100 for completing the 3-4 hour interview. The open-ended turning point question used in this study was asked at the end of the interview. The question was read aloud by the interviewer and the response was audiotaped. Responses were transcribed and de-identified prior to coding.

## **Measure**

### ***Turning Point Qualitative Question***

A project-designed measure that consisted of 15 open-ended questions sought to gather participants' thoughts and appraisals of a host of issues, both related to their out-of-home care experiences as well as other life events. The question that was coded in the current study was, *Now, thinking back across your entire life, and all the experiences you've had (either related to out-of-home care or not), have you ever experienced a major turning point that changed the way you thought about something or how you behaved? If yes, what was the turning point? How old were you when that turning point happened?*

For young people who stated they had experienced a turning point, responses varied in length, ranging from one sentence (9 words) to nearly full-page responses (in excess of 1500 words), although the majority of responses were about a typical paragraph length (just under two hundred words). The average age young people reported experiencing a turning point was 15yrs.

### **Analysis**

A two-phase analysis process was undertaken. Firstly, the three authors familiarized themselves with the data and developed an initial set of codes. These were compared and refined to develop a codebook. The codebook was subsequently applied across the data set, an iterative process, with adaptations and amendments made to the codebook as deemed necessary and agreed by the research team. Coding of the data set was shared across the team with sections allocated for independent analysis by two researchers (conducted in alternate pairings). Responses were subsequently compared and discrepancies resolved through discussion and / or in consultation with the third researcher.

This analysis enabled turning points to be categorized in relation to the circumstance (e.g. related to foster care, education, loss / death etc.) and reported effects (e.g. changes in attitudes

and behaviors). Further details of this process, including frequency reports and subsequent quantitative analysis undertaken can be found in *Authors* (forthcoming).

The second phase of analysis was undertaken by the lead author. Qualitative analysis was undertaken using both an inductive and deductive approach (Fereday, 2006). Young people's responses to the turning point question were revisited and codes from the initial analysis process were reviewed to explore themes and sub-themes emergent from the data (examples included relationships, interventions, responsibility). In addition, data were examined using a deductive approach, which involved considering participants' responses through existing conceptualizations and models of turning points within the literature.

## **Findings**

The majority of young people in our sample (4 in 5) reported having experienced a turning point. This section presents key findings from the qualitative analysis, with data excerpts included to showcase the range of ways young people reflected on turning points in their lives. Participants have not been assigned pseudonyms or numerical identifiers but it should be noted that each excerpt is attributable to a unique young person. The section explores the nature of turning point events and experiences, the resultant impact on young people's behaviors and/or attitudes, as well as the mechanisms of change. Young people's reflections are considered alongside differing conceptualizations and approaches to turning points within the wider literature (Legewie and Tucci, 2019; Reimer, 2014).

### **Turning point events and experiences**

Resonating with Rutter's (1996) claim that turning point experiences are varied and include those both within and beyond individual control, a broad range of events and experiences featured in young people's reflections on turning points. Those reported included events directly related to out-of-home care experiences, such as changes of caregivers,

entering/leaving care, as well as separation and reunification with birth families. Yet in other examples, turning points were not obviously connected to care experience, and may or may not have been indirectly related. These included the loss/death of a loved one, positive and negative experiences in education, social interactions or events, engagement in troublesome behaviors (with or without criminal justice involvement) and parenthood.

Importantly, in addition to variation in the nature of events and experiences discussed, there was also divergence in their apparent significance. While the magnitude of turning point experiences was sometimes evident (such as the death of a loved one), in other instances turning points were associated with more casual and seemingly inconsequential experiences. Two contrasting examples are provided below:

*Just graduating. I mean it was very hard to get through all of the schooling just with everything. I mean I did have ups and downs with my guardians but after I graduated, I realized that it's not all too bad. I mean I made it, so I know more is possible.*

*I used to just steal all the time. I mean, all the time. Anything I could get my hands on. And um, that was by far one of the hardest things, one of the hardest habits I've had to break. To be like, um, you know, a citizen or something like that. ... but um, I went to the DA's office. I got multiple tickets for that, you know, on my juvenile record. And thank God it's expunged now. ...But I got in trouble for it. And I went to the DA, and uh, I went to the DA for like the third time in like the past like 3 months. And the DA was like hey [participant's name], he knew me by name. And I was like um, this guy knows me by name, I need to stay, I need to stay outta here, you know.*

As argued by Gilligan (2009, p.31) turning points can be related to “seemingly innocuous” moments, as well as “highly visible” events. In the first example, the young person’s graduation was a turning point, with the achievement signaling resilience and success in spite of hardship. While graduating can be thought of as a socially significant and ‘visible’ event, this stands somewhat in contrast with the comments of the second quote. In this instance, engagement with the criminal justice system had occurred previously and the acquisition of ‘tickets’ and a ‘juvenile record’, while notable and ‘visible’ events, had not proved to be a turning point. Rather, this came from a brief and mundane greeting from the professional. This interaction proved significant for the young person as it communicated something about their developing persona and identity, and subsequently prompted a rejection of offending behavior. The reflections are consistent with Drapeau’s et al. (2007) categorization of turning points which include those prompted by individual action and achievement, as well as those initiated through personal reflection.

While offering very different reflections, the examples resonate with Pillemer’s (1996, p.127) assertion that turning points are “concrete episodes that are *perceived* [our emphasis] to suddenly redirect a life plan”. In this way, it is the individual’s view and interpretation of the event that initiates the turning point, the significance of which may or may not be apparent to others.

### **Objective and subjective change**

The reflections above can also be related to Reimer’s (2014) proposal that analysis of turning points should consider the objective changes observable in individual’s lives, behaviors and situations, as well as the subjective changes in life satisfaction, self-image and future expectations. Reports of subjective and-/or objective change were recurrent features of young people’s data; 6 in 10 responses reported changes to behaviors and attitudes resultant from

turning points, while 3 in 4 reported moments of maturation and realization. In the above examples, the objective dimensions of young people's turning points are the validated achievement in education (graduation) and the desistance in criminal behavior. Similarly, subjective changes are apparent; in the first example, the young person realizes that 'more is possible' and aspirations are raised. In the second example, the young person's desistance from stealing conforms with notions of being 'a citizen'.

Both objective and subjective changes were also evident in other responses:

*The real age [of the turning point] is probably when I got out of the [child welfare] system. I thought about life and life got harder. There's not anyone there like when you're in the system; you pretty much have everything you know...you got people giving you a place to stay, you don't got to work, you got everything given to you...so when you get in the real world like I don't have my mom to go to right away, I don't have family to go to so it just made me...that's what gave me a good work ethic because you gotta work every day you gotta support yourself. If I go jobless, I can't just go ask someone for 100 bucks here and there. I gotta stay working I gotta support myself so just that's what being an adult is all about...taking care of yourself and not counting on other people to do it for you.*

The above example highlights that leaving care prompted reflection that support and resources were diminished. Objective change is apparent in the transition to independence and entering employment. Subjectively, although the young person does not specifically say they are happier or more satisfied, references to developing a 'good work ethic' and being self-sufficient suggest pride in their development and accomplishments. In a further example, a young person reflected on the influence of religion in their turning point:

*Um, when I started going to, um, church, ... when my mom died, we started going to church, and then, like I noticed when I would like, like pray, or like, go, stuff would just seem to be better, or I would feel better, or stuff would just turn around all of a sudden, or I would be in a better mood. And so, that's when I changed my attitude, my nasty attitude around, and just, went from there.*

Here, objective change is discernible through the loss of the parent and the subsequent attendance at church. Subjectively, the individual's belief in God was connected to improved mood, 'attitude' and outlook. Both examples highlight young people's agency and resilience in responding to adversity.

Yet objective and subjective change were not always discernible from young people's responses. Illustrative of this, in the following example, a young person describes reuniting with their birth family as their turning point:

*When I met my family, I guess it's just seeing them and how different they are to me. I guess I'm just grateful that [unclear] has shaped me to be who I am, how responsible I am for my age, how efficient, I have a good job, I have family...I'm not having problems .... I'm happy with my life, with what I've become and what I'm gonna do with my life.*

In this example, objective, measurable change is unclear; the reunion did not result in changed circumstances or behaviors, as the young person reports they were already doing well. Nevertheless, the reunion was subjectively significant, prompting feelings of gratitude for the care received and satisfaction with their subsequent trajectory. Viewed in this way, the family meeting may have proved a turning point because it enabled some emotional resolution with past experiences. As noted above, the significance of this event and its perception as a turning point would not necessarily be visible or known to others.

This section has provided some insight into the range of events and experiences that young people associated with turning points in their lives. Thus far, the data have highlighted young people's agency, revealing a propensity to reflect on aspects of their lives and an ability to change attitudes and behaviors. Gilligan (2009) argues that enduring positive change resultant from turning points is reliant on several key factors: opportunity, readiness, agency and a sustaining context. An event or situation must provide opportunity for positive change or development, the individual needs to be ready and able to recognize the opportunity, as well as willing and able to exert agency to capitalize on the opportunity (factors which have been evident in the examples above). Finally, for change to be sustained, there must be practical and/or emotional advantages. The following section will consider young people's 'sustaining context' and detail how support networks and resources sometimes featured in turning point accounts.

### **Relationships and resources**

Relationship and resources were recurrent features within many young people's turning point accounts. This included examples where individuals acted as drivers and motivators for change, provided support to enable positive development and/or enhanced young people's potential.

The following comments both refer to key relationships as motivators for change or pursuit of goals:

*... when I was pregnant I just kinda thought to myself that um, now I don't only have to take care of myself but I also have to take care of my baby. ... And so I got my GED [General Educational Development – a test of high school-level skills] and then I ended up going to school for medical assisting, and I graduated, and ended up getting jobs... So my priorities changed most definitely to my son and making sure that he had diapers and clothes and everything a baby needs.*

*I think my major turning point was losing my mom, cause it wasn't like more of a loss, but more like pushing me towards a goal of finishing high school and doing what I got to do. Like being the man that my mom wanted me to be.*

Young people's agency is again apparent in these examples but their strength of feeling towards the individual is integral to the turning point, providing both inspiration to change and the sustaining context for continuation. In the first example, the young person's turning point was finding out they were going to become a parent. The impending status change and accompanying responsibilities motivated the individual to (re)engage in education and employment, and the sustaining context is discernable in their ability to provide for the child's needs. In a somewhat contrasting example, the second quote relates to a young person being motivated to (re)engage in education following the death of their parent whereby the sustaining context is the imagined pride of the deceased. The examples resonate with those of Colbridge, Hassett and Sisley (2017), whose study of identity development similarly noted bereavement and parenthood as turning points for female care leavers.

In other instances, young people reflected on tangible support provided by others, with reflections positioning key individuals as bearing direct responsibility for their altered trajectories. For example:

*Yeah, like the last home I moved into was my foster grandma's. When I went there I felt like everything was ok because I just liked being around her and every time I had a problem she helped me and every time I did something wrong she'd get on my case like she'll tell me this is how you do this, don't do this next time, try not to do this next time. Always giving me words of encouragement and helped me graduate and helped me get through college.*

The comments of this young person suggest that the turning point was moving to a new caregiver, whose guidance and continued support enabled them to succeed in education. The reflection does not suggest an immediate change in behavior or attitude, but, rather, the unwavering acceptance from the caregiver fostered a belief that ‘everything was OK’, thereby containing mistakes and setbacks, and enabling educational achievement. Such reflections resonate with Drapeau et al.’s (2007) suggestion that turning points can be prompted by relationships with adults who support growth and progression.

Similar sentiments of persistence and support were also sometimes apparent in respect of teachers:

*...when I got close to graduating that's what changed me, made me grow up. Because I had a teacher and everybody gave up on me, and my schooling, and they were like "oh, he's just gonna drop out, you know" [but] this one teacher she said "I'm not gonna let that happen" and she'd tutor me after school and help me get all of my credits. And I did. I graduated on time, and I walked across stage because of her-because she didn't give up on me.*

The reflection resonates with the suggestion by Hass et al. (2014), that turning point opportunities are created and facilitated through the interaction of personal and environmental factors. While the young person recognizes their maturity and motivation to graduate, the support of the teacher is positioned as central to their turning point.

In other examples, young people positioned their engagement with therapeutic support and counselors as turning points in their lives:

*Yes, it was probably when I was around 13 or 14 and that was when I had a therapist who really helped to have me realize that what happened wasn't my fault and that it*

*didn't have to affect me if I didn't want it to and that I could be a be a functioning adult without it affecting me.*

*... when I got done talking to my counsellor of feeling all that guilt that all of that was my fault, that my parents would always be fighting and abusing. Once I realized that it wasn't my fault, I got a sense of making a brighter future for myself...It really has changed me drastic behavioral-wise.*

In both instances, the young people were able to find emotional resolution from past experiences, thus freeing them for a more positive future. The reflections can be related to Bernard's (2004, p.46) notion of 'turnaround people'; individuals who "help youth see the power they have to think differently and construct alternative stories of their lives". The concept was similarly drawn on by Hass and colleagues (2014) to highlight the potential for key individuals to provide instrumental advice and support to facilitate turning points opportunities.

In addition to supportive caregivers and professionals, resources and structural influences were also sometimes discernible in young people's responses:

*So all through high school, like all through middle school ...I knew I was better than most even though the situations I was in, I knew it wasn't a healthy situation. So I would like strive to do good in school and be really good, like the ideal person. So basically like halfway through high school, I knew I was going to be able to go to college ... And then I got a full ride scholarship to whatever I wanted to do, to whatever university I choose. ..., and it made me shift, like oh I actually have an opportunity ... like the door opening to anything I want, it's all up to me. Like it doesn't go around my family, my background, where I live, how far it is to have to commute, how much money I have,*

*my status. It's basically, you have the money for four years do whatever you like. So that was the best turning point.*

The young person's response described sustained efforts to succeed in education. The comments suggest that progression to higher education would have been achieved with or without the available resources. However, the scholarship opportunity elevated the young person's trajectory, enabling multifaceted barriers and disadvantage to be overcome. Evident again is the potential for the turning point to be unnoticeable to observers. The young person was doing well in education, but being offered the scholarship was considered the turning point, as opportunities were greatly increased.

This section has highlighted the influence of support and resources in young people's turning points. Across the data, young people referred to a range of individuals including family members, caregivers and professionals who both inspired and/or were considered instrumental in the altered trajectories. Likewise, the availability of resources, including youth programs and groups, as well as education scholarships, similarly had the potential to initiate and enhance turning point opportunities. Importantly, the reflections in this section lend support to suggestions that as well as encapsulating isolated events and experiences, turning points should also be thought of as processes, reliant on both individual and contextual factors, with antecedents and subsequent follow-ups (Gilligan, 2009; Refaeli and Strahl, 2014).

## **Discussion**

This paper sought to make a much-needed contribution to the evidence base, whereby young people explicitly discussed and reflected on their experience of turning points. While it is important to note that 1 in 5 reported not having a turning point, the concept appeared to resonate with the majority of young people in our sample. As a result, our findings provide

valuable insights into the nature of turning point events and experiences, their perceived impact, and the people and resources facilitating change.

Despite the ambiguous nature of the concept (Legewie and Tucci, 2019; Reimer, 2014), young people's data were remarkably consistent with the range of ways turning points have previously been interpreted and applied by researchers. For example, the data revealed turning points linked to actions and achievements, positive relationships and personal reflections (Drapeau et al., 2007). Young people referenced both objective and subjective change (Reimer, 2014) and highlighted the potential for turning points to arise from specific events (of varying significance), or as extended processes (Gilligan, 2009; Refaeli and Strahl, 2014). Mechanisms of change similarly captured the importance of individual agency, as well as the influence of relationships and resources (Hass et al., 2014).

In light of the relatively underdeveloped evidence base in respect of turning points for care-experienced young people, we hope the findings will encourage further study. The concept of turning points was understood by young people and they were able to confirm or refute its resonance within their own lives. Pillemer's (1996, p.127) assertion that turning points are "concrete episodes that are *perceived* [our emphasis] to suddenly redirect a life plan" lends particular support to direct engagement of young people who are best placed to consider what, if any, events and experiences impacted on their trajectories. As has been apparent from our data, there is potential for seemingly mundane events and interactions to have powerful impact. In addition, our data revealed nuances in experiences and interpretations that may not have emerged without the language of turning points.

The turning points identified by young people in this study were connected to an array of positive and negative experiences, some of which were directly or indirectly related to care experience and some of which were seemingly unrelated. Notable from our analysis was that

the vast majority of young people discussed their turning points positively. Even when describing challenging events, few young people reported negative consequences to their trajectories, but rather, reflections were repeatedly framed as overcoming adversity and initiating positive growth or change. Young people's narratives were typically self-affirming and suggested some meaning-making of past challenges and experiences.

Such consistently positive framing suggests benefits for young people experiencing and/or reflecting on turning points, a finding which has implications for child welfare practice. For professionals engaged with care-experienced individuals, the findings encourage an acknowledgement of the ongoing potential for turning points, despite past adversity and/or current challenges. Importantly, the potential to influence turning points for young people was not limited to particular professional groups, but opportunities for influence and inspiration were available from caregivers, peers, relatives, as well as adult professionals (e.g., caseworkers, teachers, therapists). In this way, the findings have wide applicability with relevance for anyone involved with care-experienced young people. We hope the findings serve as a reminder of the powerful influence professional and caregivers' actions and words can have for young people, with turning point experiences initiated from seemingly casual interactions, as well as from extended and established relationships.

The findings suggest a myriad of opportunities to help facilitate turning points. This may involve direct work with young people, where relationships communicate continued belief in young people's potential and optimism for the future, and/or through the co-ordination of young people's care and the facilitation of access to available support and resources. Similarly, engaging young people in discussions of turning points may be a helpful tool in encouraging reflection on accomplishments, progress and supports. Such reflections offer opportunities to support the development of agency, bolster self-esteem and aspiration, as well as offering

reassurance, that in the event of future adversity, young people have the personal resources/assets to navigate and create meaning.

### **Strengths and Limitations**

Before concluding, it is important to highlight some key strengths and limitations.

To date there has been limited explicit exploration of turning point experiences with care-experienced young people. The sizable sample of over one hundred young people and the use of an explicit question about turning points make an important contribution to the evidence base and are key strengths of the study.

The diversity of care experience within the sample is both a strength and limitation. Varied care experiences reflect the heterogeneity of the care population and the study provided opportunity to explore turning points in the context of such diversity. Nevertheless, we acknowledge broad variation across the sample both in terms of duration and type of care experience (including foster, kin and/or congregate placements) and outcome (including reunification, adoption and emancipation). Related to this, we similarly acknowledge the varied characteristics and needs across our sample and the potential for intersectional disadvantage.

The FHF interview was an extensive interview lasting up to four hours. The diversity and length of the interview may have impacted on participants' responses and further research prioritizing consideration of turning points would be valuable. In addition, interviews were conducted with participants aged between 18 and 22 and further research is needed to explore turning points for care-experienced adults across the life course.

Finally, in thinking through the implications of our findings we revisited Evans' (2019, p25) critique of turning points and cautioning against a reductionist group identity of care leavers as "survivors of the system". We acknowledge that our approach of asking young people about turning points in their lives, may inadvertently suggest that they should have had one, and by extension, may unintentionally contribute to an unhelpful discourse.

## **Conclusion**

In conclusion, we wish to assert the potential utility of turning points for young people, professionals who support them, and researchers. The extent to which the idea of turning points resonated with young people in this study and the consistently positive ways in which reflections were framed, warrants further exploration and has the potential to contribute to understandings of resilience. We acknowledge that efforts to address adverse outcomes for care-experienced young people will likely require widescale review and investment in child welfare policy and practice, and that positive outcomes are not simply generated by young people themselves thinking differently about their situations. We nevertheless believe that the idea of turning points has the potential to be relevant and helpful for both professionals and young people in recognizing potential, promoting agency, and supporting growth and change. Viewed in this way, rather than contributing to an unhelpful discourse (Evans 2019), notions of turning points may serve to counter pervasive stereotypes of a homogenous, traumatized group of children and young people, destined for poor outcomes (Bakketeig et al. 2020; Evans 2019).

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