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# “Where I want to be”: Exploring salutogenic discourse in disadvantaged young women’s talk.

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## Background

The purpose of the paper is to explore disadvantaged young women’s talk about their experiences of trauma, struggle, structural disadvantage and behavioural risk using a salutogenic lens.

Such young women are typically labelled in neoliberal policy and practice as being ‘vulnerable’ however, they often resist this label in their talk about their experiences drawing on what Antonovsky (1996) describes as a ‘Sense of Coherence’. In doing so the young women exhibit comprehensibility, meaningfulness and manageability, as well as agency and resilience.

Gendered interventions provide the means to empower disadvantaged young women and it is through evaluations of such interventions that we can better understand their experiences.

## Methods

This paper draws on evidence from several evaluations of gendered interventions designed to support ‘vulnerable’ young women. The evaluations used a range of qualitative participatory methods using multiple creative means to explore disadvantaged young women’s lived experiences including:

- Focus group discussions
- In-depth interviews

Methods included, for example, the use of storyboards\* (see Figures 1 and 2). Data from the all evaluations were analysed using thematic analysis.

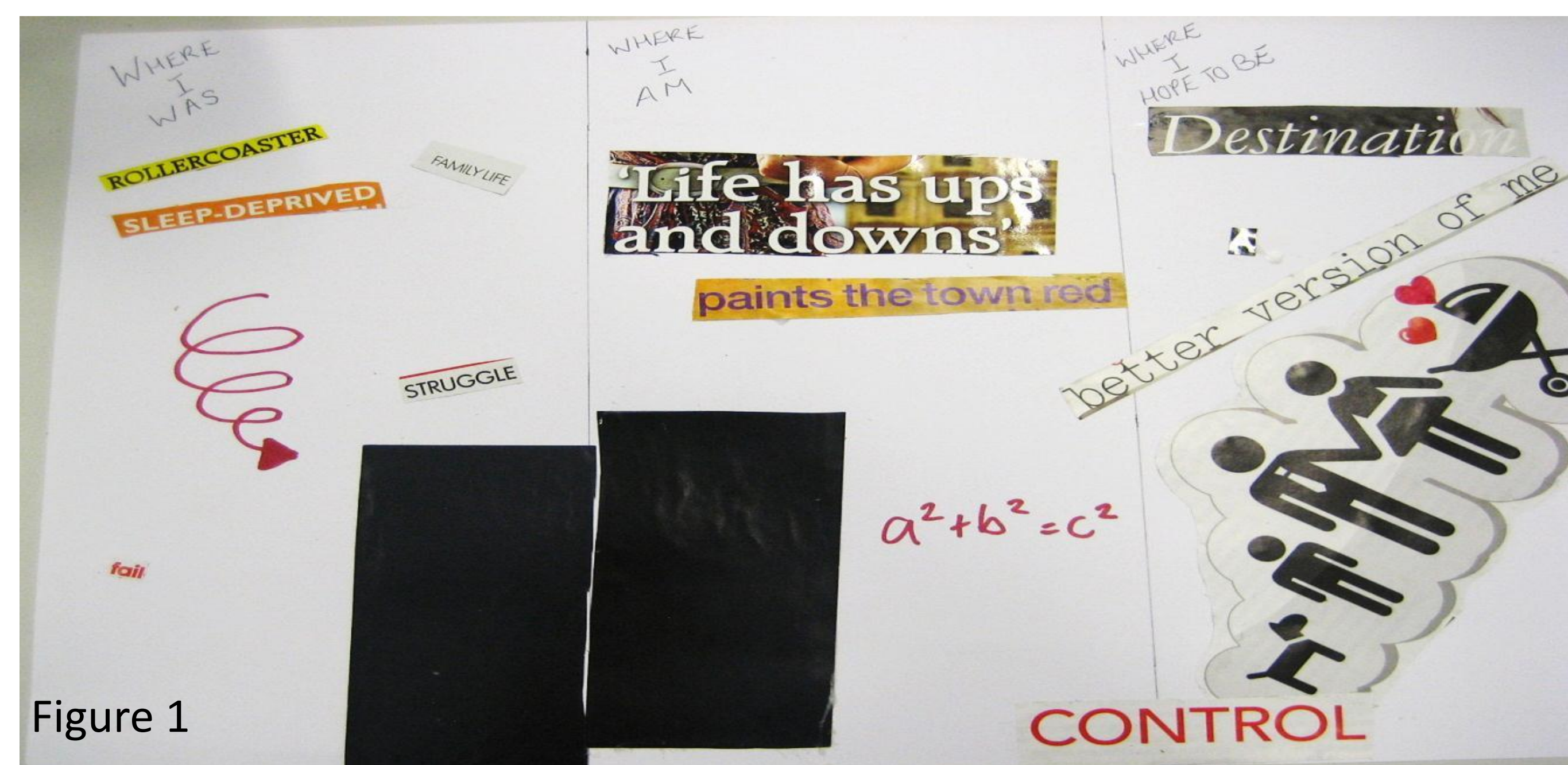


Figure 1

## Findings

A sense of coherence is derived from our experiences of, and responses to, life’s stressors and is concerned with how we make sense of the world (Eriksson and Lindström, 2008). Data across several evaluations reveal themes of comprehensibility, meaningfulness and manageability in the young women’s talk. The young women’s talk also included constructions of agency and resilience, despite the challenging circumstance of their lived experiences evidencing some of the impact of the gendered interventions they had been involved in.

**Comprehensibility** – being able to understand and predict what might happen:

*“It’s been a big major part of my recovery in all avenues from domestic violence and drink as well and boundaries and have better relationship with the key people in my life like my kids and my family (service user, project supporting women with complex need)*

**Meaningfulness** – believing that life is worthwhile:

*““it’s still something that’s getting into you, that’s making you feel worthwhile which is to me the main thing to me, to feel as though I am somebody” (service user, project supporting women’s mental health)*

**Manageability** – believing that things are with your control and/or that you have the ability to manage them:

*But like it’s helped me a lot like how to deal with it and stuff and if things aren’t right what happens [...] Like I’ve still got my child (service user, project supporting women experiencing abuse)*

**Agency** – having a feeling of control over actions and the consequences of them:

*I felt, for me personally talking is a massive therapy for me. So being able to, it felt quite good to be able to tell people exactly what personally I would have wanted (service user, project supporting women who had experienced sexual violence)*

**Resilience** – having the capacity to recover from adversity:

*‘It’s a question of I’ve got to do it if I want to get XXX out of my life and get on the track, on the right track looking after myself and realising where this violence comes from’ (service user, project supporting women experiencing domestic violence)*

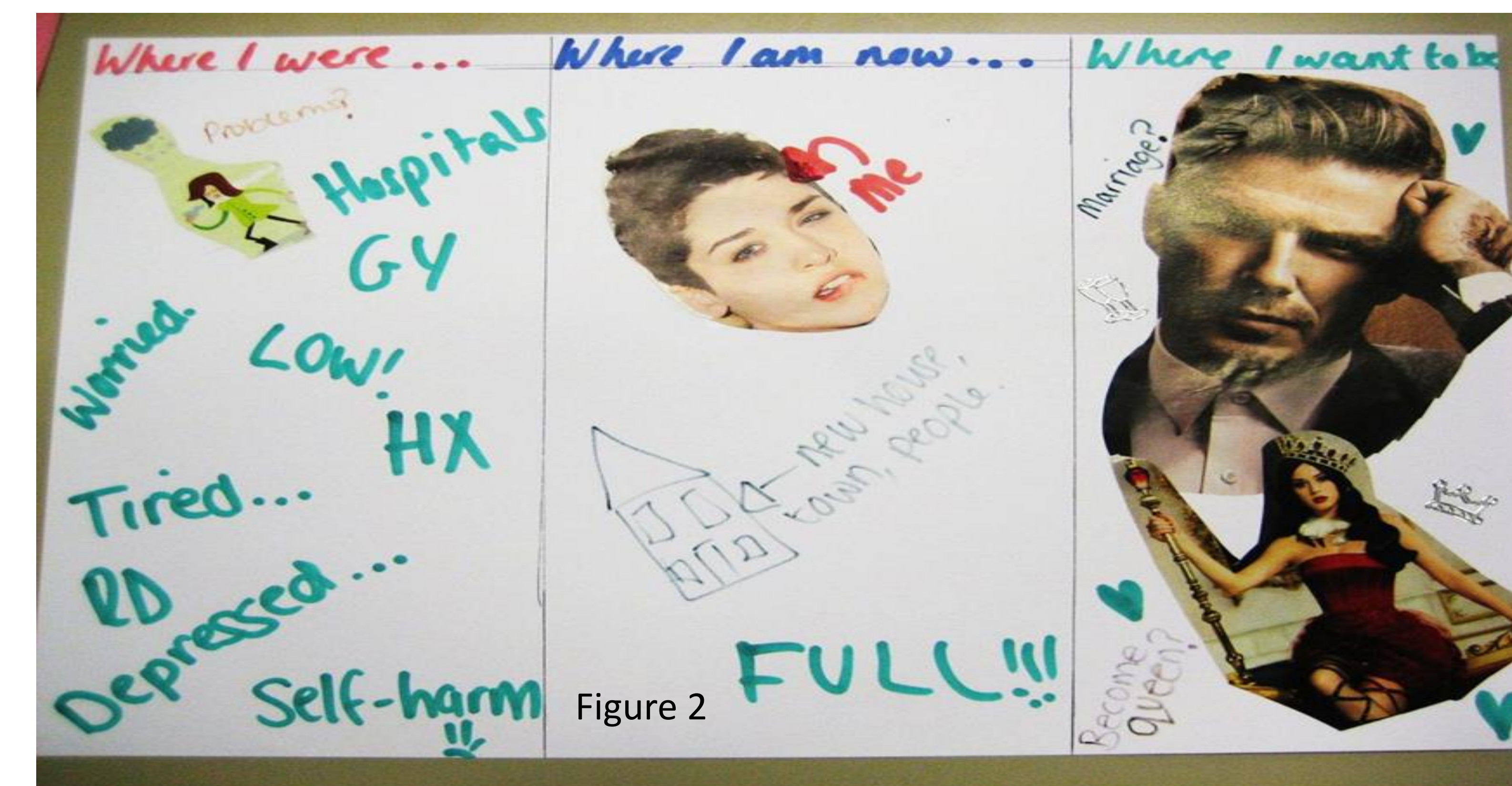


Figure 2

## Discussion and Conclusions

Contrary to the singular portrayal in public health policy of disadvantaged young women as ‘vulnerable’, the data from the evaluations show that they construct themselves and their experiences in more salutogenic, agentic ways demonstrating a ‘sense of coherence’ within their lived experiences that, in turn, provide meaning and function. It is also clear from the data that the young women concerned experience the impact of structural disadvantage and have disproportionately less access to the ‘generalised resources’ that Antonovsky (1996) argues are so crucial to supporting wellbeing.

Nevertheless, this evidence shows that appropriately designed gendered interventions can have a positive impact on such young women promoting empowering ways of being enabling the attainment of improved subjective health and wellbeing.

## References

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- Eriksson, M. & Lindström, B. (2008) A salutogenic interpretation of the Ottawa Charter. *Health Promotion International*, 23, 190-199.

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