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# Predicting Resilience in Young Adult Turning Point Stories: A Narrative Approach to Understanding Well-Being

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Predicting Resilience in Young Adult Turning Point Stories: A Narrative Approach to  
Understanding Well-Being

by

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Bachelor of Science, Honours Psychology

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THESIS

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## Abstract

One way to understand well-being is through the examination of narrative turning point stories, which are stories about an event or episode that represents an important change in one's life. To better understand what contributes to the well-being of young adults, this study examined predictors in adolescence of dimensions of turning point stories in young adulthood. Standardized measures of youth's prosocial behaviour, hyperactivity, self-esteem, family functioning and sense of community in Grade 9 were used to predict the following narrative dimensions of Grade 12 youths' ( $n=96$ ) turning point stories: affect transformation, specificity, ending resolution, personal growth, meaning-making and coherence. Results indicated that measures of adolescents' prosocial behaviour, hyperactivity, self-esteem, and family functioning were significantly correlated with various young adult turning point story dimensions. Simultaneous multiple regression analyses indicated that prosocial behaviour and family functioning were the most significant predictors of young adult turning point story dimensions. Prosocial behaviour was positively correlated with affect transformation, meaning making, coherence, specificity, and ending resolution and family functioning was positively correlated with the dimensions of affect transformation and meaning making. The underlying mechanisms influencing how stories are narrated were also explored. Qualitative analysis of these data showed that generativity, family support and community engagement were important factors facilitating affect transformation in Grade 12 youths' turning point stories. The findings suggest that personal, family and community factors influence how youth narrate important stories about turning points in their lives when they are older. The implications of these findings for primary prevention programs for youth are discussed.

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## Introduction

### My Turning Point Story

I begin this thesis with my own personal turning point story. My story reflects who I am, where I come from, how I ended up doing this thesis, and why I believe that this thesis is important.

My turning point story took place after I graduated from university and chose to work in New Hampshire at a wilderness therapy program for juvenile offenders. When I arrived in New Hampshire I was directed to be the leader of a group of ten boys. As a leader, I was responsible for the safety and well-being of this group of boys until they graduated from the program. I was completely alone and I had very little training or support. At first, our group was utterly dysfunctional. We were in a constant battle for power and I was called every horrible name you could imagine. I cried much more often than I laughed. One day when one of the boys was in a textbook state of conflict, screaming every swear word he could think of, all I thought to say was, "Can you please use more appropriate language?" As soon as the words came out of my mouth the boy stopped what he was doing, stared me in the face and said, "You think you are helping me by telling me to use appropriate language. Listen to what I am actually saying, what does the word *fuck* matter?" At that moment I changed as a person. Within the blink of an eye I was no longer interested in treating behaviour but rather I became interested in learning what shapes behaviour. I realized that by focusing on that boy's actions I had missed what he was trying to tell me. I had missed that he was trying to make meaning of past experiences and explain what had impacted his life story. That boy had experienced events in his life that for some reason he was not able to work through and

accordingly, he had ended up in my group and with the stereotype “juvenile offender” written across his forehead. Even worse, there I was continuing to limit him from working through those experiences at that moment. From that day forward I created a space for the boys in my group to share their experiences not only with me, but with one another. As a group we became much different. The changes did not come overnight, but with time we began to listen to one another, to respect one another and to be open with one another. I could tell that my small shift in attitude and approach was making a big difference in the healing and well-being of the boys. Most importantly, in the process we were all much happier and I began to laugh more often than I cried.

My turning point story has inspired me to learn more about what influences the way in which young adults make meaning of major life events. I want to explore factors that predict the way in which young adults narrate experiences, as a way to better understand what influences well-being. I want to do this because I believe that my story reflects the challenges that many communities are currently facing. It has generally become well-known that in Canada there have been increases in adolescent drug use, peer violence and abuse (HSBC, 2008; Canadian Mental Health Association, 2009); declines in academic performance (Marin & Brown, 2008); and an increase in adolescent and young adult mental health issues (Public Health Agency of Canada, 2009). Garbarino (1995) goes so far as to say that the environments in which children live today have become “poisonous to their development” (p. 4). Just like me and my group of 10 boys, some communities are attempting to redesign themselves, or to introduce programs that potentially can facilitate the development of youth competence and well-being. However, these tasks remain daunting as few researchers, practitioners, educators and

policy makers understand the key elements in a young person's life that promote well-being in young adulthood. In part, this is due to the limited way that well-being is often assessed in research. Just as I have a story, all youth have a story. And just like my turning point story, their story reflects who they are, where they come from, how they have come to be in the place they are in, and how they give meaning to their lives. It is our job as a community to encourage youth to share their stories in order to bring to light factors that promote youth well-being, so that the environments that young people live in today can begin to support, rather than poison, their development.

### **Purpose and Outline**

The purpose of this study is to (a) examine predictors of dimensions of turning point stories that are reflective of well-being in young adulthood; (b) explore how predictors may contribute to positive outcomes in turning point stories; and (c) help identify key elements for programs aiming to prevent poor developmental outcomes and promote well-being. Community psychology is committed to emphasizing the need for prevention and the promotion of well-being. This study aims to uphold community psychology's agenda by gaining an understanding of what contributes to the well-being of young adults.

The following literature review begins with a description of two different approaches to the assessment of well-being: traditional standardized measures of well-being and a narrative approach, which is the approach that will be taken in this study. The relationship between narratives and empowerment theory will be discussed to emphasize the importance of using narratives to understand well-being in young adulthood. Next, turning point stories will be introduced as the type of narrative that will

be explored in this study. The different dimensions of the turning point story will be described and a discussion of how the different dimensions relate to well-being in young adulthood will follow. The literature review will also discuss factors that will be included in the current study as predictors of dimensions of turning point stories in young adulthood. These factors will be examined within an ecological framework and related to adolescent well-being. This discussion will be followed by the identification of a gap in the literature that explicitly explores predictors in adolescence of narrative dimensions in young adulthood. The limited research in this area will be presented to emphasize the need to identify factors in adolescence that predict dimensions of turning point stories in young adulthood. Lastly, resilience theory will be introduced as a way of understanding factors that contribute to the well-being of youth.

## **Literature Review**

### **Well-Being**

**Traditional measurement of well-being.** Prilleltensky and Prilleltensky (2006) have conceptualized well-being in terms of multiple ecological levels: personal, relational, and collective. Thus, well-being consists not just of the personal dimensions of subjective well-being and personal growth, but also being embedded in a network of positive and supportive relationships and participating freely in social, community, and political life. Traditionally, to assess well-being researchers have relied upon standardized measures of subjective well-being (SWB) and psychological well-being (PWB). Measures of SWB relate to what many authors refer to as hedonic well-being (Bauer, McAdams & Pals, 2008; Keyes, Ryff & Shmotkin, 2002; Prilleltensky, Peirson & Nelson, 2001) and tend to be individualistic and based upon how good one feels about

one's life. One empirical measure that taps mainly into SWB is the Positive and Negative Affect Scale, which focuses on emotional experiences. Positive affect includes emotional experiences such as happiness, confidence, optimism, self-efficacy, positive coping and physical health, while negative affect includes emotional experiences such as depression, hostility and loneliness (Watson & Clark, 1992).

PWB also involves pleasure but emphasizes eudaimonic well-being and an enduring sort of happiness (Bauer et al., 2008; Keyes et al., 2002; Prilleltensky et al., 2001). Measures of PWB are based upon how meaningful one's life feels in addition to simply how good it feels. For example, Ryff and Keyes' (1995) measure of PWB assesses feeling good about one's life in six domains: autonomy, meaningful relationships, environmental mastery, purpose in life, self-acceptance and personal growth. While well-being can be assessed through psychometric measures of SWB and PWB, some authors have advocated for more holistic and meaningful approaches (e.g. Prilleltensky & Prilleltensky, 2006). One alternative way to explore well-being is through the examination of narratives or life stories, which is the approach taken in this study.

**A narrative approach to understanding well-being.** Another way of exploring well-being is through the examination of life stories. In narrative research, participants tell stories about momentous life experiences, often through interviews. Bruner (1990) suggests that human beings commonly use a narrative mode of thought, which allows us to understand ourselves and the social world around us. In other words, narratives are a universal, basic form not only of remembering but also of sharing and understanding experiences. Accordingly, McAdams (1993) suggests that narrative accounts of



momentous life events, such as high points, low points and turning points, combine to create the personal life story. Thus, narratives provide rich information not only about a person's experiences, but also about how those experiences shape and influence who he or she is (McLean, Pasupathi, & Pals, 2007). Moreover, narratives can highlight a sense of unity, purpose, meaning, and coherence in a person's life that are considered to be of prime importance for mental health and well-being (Habermas & Silveira, 2008). By examining narrative accounts of momentous life events, one can better understand how people perceive these experiences, what sort of meaning they have extracted from these experiences, and how well they have integrated the event into their greater life story (Bauer et al., 2008).

**Narratives, empowerment and young adulthood.** Where narratives meet community psychology is in the commitment to empowerment theory and research. The traditional approach to understanding well-being typically involves administering standardized measures that do not create the opportunity for dialogue or expression. Researchers use the data collected from these measures as a way to construct and tell peoples' stories for them. These constructed stories are often referred to by researchers as dominant cultural narratives. Dominant cultural narratives are attitudes, beliefs and assumptions that are made about individuals, groups or communities and communicated to all of society through mass media or social institutions (Rappaport, 1995). Such dominant cultural narratives often stereotype young adults in ways that can disempower them and lead to negative and narrow accounts of youth experiences (Rappaport, 2000). Narrative research aims to prevent the creation of misleading dominant cultural narratives by providing a space for young adults to tell their own stories in a way that is

personally meaningful. This is particularly important during young adulthood, as studies suggest that early adulthood may be the most transformative phase in the life course, characterized by dramatic adaptive changes in personal development (Obradovic & Masten, 2007). It is therefore essential that research aiming to promote the well-being of young adults provide them with the opportunity to create and tell their own stories, so that young adults are empowered to reflect on personal life goals, dreams, and plans that will help in their transition into adult roles. Moreover, empowering young adults to generate information about how personal beliefs, knowledge, identity and life experiences have shaped their life story is critically important in helping researchers and practitioners understand what young adults need for healthy development and well-being (McAdams, Josselson & Lieblich, 2006).

**Turning point stories.** In some cases, meaningful narratives focus on an individual's turning point, or an event or episode that represents an important change in one's life. A turning point story is the type of narrative that will be examined in this study.

As previously suggested, young adults' perceptions of turning point stories are particularly important as young adulthood is often characterized by new experiences and events that may have lasting effects on one's personal outlook on life. For example, it is suggested that some life events, such as those that are unexpected or difficult, are often not easily incorporated into the greater life story (Bauer et al. 2006). This is important to note as individuals often describe a turning point moment as when they were susceptible to an adverse or difficult situation such as a close family member or friend passes away, roots are torn up when one moves, parents divorce, or they experience an unplanned or

unwanted pregnancy. However, Pals and McAdams (2004), as well as Tedeschi and Calhoun (2004), suggest that the narrative reworking of such events may actually act as a coping mechanism and provide a sense of resolution, as well as promoting reflection and further personal exploration. Similarly, McAdams, Reynolds, Lewis, Patten, and Bowman (2001) identified that there are two types of stories that may emerge from turning point events: a redemptive story or a contamination story. A redemptive story follows a pattern in which the individual faces a challenging life event or situation and is able to move from an initially bad state to a more positive state. In contrast, in a contamination story, the sequence is the opposite, with an individual shifting from an initially good state to a bad state. Thus, it is important to understand how people construct turning point events in their lives, as these events have the potential for growth or deterioration. In addition, a description of a turning point event helps researchers understand how that person's experiences shaped his or her turning point event and how the person's narration of that event is related to the individual's well-being. For example, turning point stories have been found to contribute to and generate information about identity, problem-solving and coping strategies, future outlook, the development and maintenance of interpersonal relationships, and a generative concern for future generations (Frensch, Pratt, & Norris, 2007; McAdams, Josselson, & Lieblich, 2001). This information provides critical insight into the different mechanisms that people use to maintain well-being. One way to further understand how one constructs a turning point story is to examine the different dimensions of the turning point story.

**Dimensions of turning point stories.** The dimensions of the turning point story offer a more humanistic approach to the understanding of well-being. The dimensions

illustrate the process involved in generating a turning point story and how people perceive the turning point event. By examining the different dimensions of turning point stories, we get a glimpse of how people perceive life events, as well as how they understand and give meaning and continuity to their lives, which are of prime importance for well-being (Habermas & Silveira, 2008; McAdams, 2001; Pals, 2006). Before specifically discussing the relationship between dimensions of turning point stories and well-being, it is important to describe the different narrative dimensions that will be explored in this study.

One dimension of the turning point story is the story's level of *coherency*. Coherency refers to the extent to which the events of the story connect to form a meaningful whole (Pals, 2006). A highly coherent story describes events in a classic and interesting manner whereby the story builds to a high point, dwells on it, and is then resolved.

Another dimension is the story's level of *meaning making*. Significant events provide an opportunity to learn important life lessons from the event and to gain personal insight from the experience (McLean & Pratt, 2006). In turn, this meaning can be integrated into the greater life story and used to promote personal growth (McLean, 2005; McLean & Thorne, 2003). *Personal growth* is therefore another dimension of the turning point story and refers to positive personal development throughout the story. Past research indicates that turning points provide people with a second chance to author their life stories in a more valuable way (Pals, 2006; Tedeschi & Calhoun, 2004). Pals (2006) believes that by acknowledging and remaining connected to the feelings associated with

challenging life events, we can use the experience as encouragement to seek positive self-transformation and a healthier way of authoring our own life stories.

A story that contains positive self-transformation or personal growth may also demonstrate a high level of *ending resolution*. A story's ending resolution refers to the evidence of settled conflict or emotion within a story (King, 2001). A story that begins with a negative emotional experience and progresses to a well-resolved ending illustrates a high degree of *affect transformation* or a redemptive pattern within the story.

This study uses the dimensions of turning point stories discussed above as an approach to understanding well-being in young adulthood. This approach is based on research that has shown a relationship between the way in which one narrates significant life experiences and well-being. The following section highlights key research that has explored the association between well-being and dimensions of turning point stories.

### **Well-Being and Turning Point Stories**

There is limited research that utilizes a narrative approach to understanding well-being. Therefore, the appropriateness of a narrative approach to understanding well-being can be seen by the association between narrative dimensions and traditional standardized measures of well-being. For example, King et al. (2000) investigated the relationship between SWB and ending resolution in parents' stories about their child's diagnosis with Downs Syndrome. The parents whose stories lacked emotional closure and ended on a negative emotional note reported being more unhappy two years later than the parents of Downs Syndrome children whose narratives concluded with a positive, emotionally resolved ending. These findings suggest that the positive perception of past events may be important for happiness and life satisfaction. Likewise,

Pals (2006) found that coherency and positive resolution in the narratives of adult women at age 52 were positively associated with life satisfaction at age 61. Pals' (2006) findings emphasize that the way in which people narrate their experiences is associated longitudinally with well-being. Coherent and resolved turning point stories that end positively and contain personal growth contribute to new possibilities and ways of being that enrich life's meaning and contribute to well-being.

Bauer and McAdams (2004) also explored narrative themes of personal growth. They emphasized the relationship between personal growth in transition narratives and participants' emotional well-being. Bauer and McAdams (2004) recruited participants who had recently experienced a life transition in either their career or their religion. Participants were asked to describe a turning point or a conflict that occurred within their transition. Narratives were assessed for *integration* themes and *intrinsic* themes. Parallel to meaning making, Bauer and McAdams (2004) indicated that narrative integration is characterized by the participants' attempts to gain novel perspectives, explore new ideas, and learn more about themselves. Intrinsic motivation refers to themes of personal growth or relationships rather than to material possessions or status (Deci & Ryan, 2000).

Bauer and McAdams' (2004) findings showed that stories reflecting narrative integration and intrinsic motivation were positively associated with standardized measures of well-being. Participants who were happy told stories that focused on what they had learned from personally meaningful events and indicated a greater ability to evaluate life changes and derive meaning from them. Bauer and McAdams (2004) concluded that how one perceives significant life events corresponds to emotional

development and well-being. Similar to Bauer and McAdams (2004), Carlick and Biley (2004) explored the narrative dimensions of newly diagnosed cancer patients. Carlick and Biley (2004) explored narratives for redemptive patterns whereby the patients experienced deep pain but also gained new insights. Their findings indicated that the level of redemption in patient stories was positively associated with standardized measures of psychological well-being and positive coping strategies. McAdams (2001) also noted the importance of transformative positive tone in narratives. He found that redemptive sequences in young and midlife adults' narrative life stories were more predictive of psychological well-being than the overall positivity of participants' stories.

A considerable amount of research has indicated that the way in which people perceive and make sense of their significant life events is associated with standardized measures of well-being. This relationship between various dimensions of turning point stories and standardized measures of well-being illustrates how dimensions of turning point stories may be used as a way of understanding well-being. In addition, the relationship gives testimony to the use of turning point stories as a way of understanding well-being.

### **Predictors of Adolescent Well-Being**

As previously illustrated, some young adults are able to bring clarity, understanding and resolution to their narrative turning point stories, ending on a positive note and apparently contributing to their well-being. This study suggests that this ability may be promoted by factors experienced in adolescence, which help to generate turning point stories that reflect well-being in young adulthood. This section highlights commonly discussed measures of well-being in adolescence, which this study examines

as predictors of dimensions of turning point stories in young adulthood. In addition, these predictors are explored within an ecological framework. Bronfenbrenner's (1977) ecological model of human development encompasses an understanding of the interaction between the individual and the multiple social systems in which they are embedded. This perspective emphasizes that in order to understand well-being one must look not only at the individual but also at their interaction with the larger environment. This study reflects Bronfenbrenner's (1977) model of human development and considers personal and contextual factors that influence well-being.

**Personal.** Personal characteristics such as prosocial behaviour, hyperactivity and self-esteem have been found to influence many aspects of adolescent well-being.

***Prosocial behaviour.*** Prosocial behaviour represents a broad category of acts that are defined as being generally beneficial to another person or group (Hardy & Carlo, 2005; Hart & Fegley, 1995). Many authors suggest that adolescent prosocial behaviour precedes the display of generative behaviour, which emerges as adolescents settle into their adult roles (Erikson, 1963; Lawford, Pratt, Hunsberger, & Pancer, 2005; McAdams, de St. Aubin, & Logan, 1993). The main distinction between prosocial behaviour and generative behaviour is that prosocial behaviour demonstrates a general care orientation that encompasses responsiveness to human need or to nurture others (Hardy & Carlo, 2005; Hart & Fegley, 1995), whereas generative behaviour demonstrates a direct commitment to care for future generations (Erikson, 1963). During adolescence personal productivity and issues of identity and intimacy are more salient than issues of societal concern or generative action (Erikson, 1963). Accordingly, adolescents typically tend to engage in prosocial as opposed to generative behaviour and such prosocial behaviour is



often displayed through general helping acts (Scales, Benson, Leffert, & Blyth, 2000). For example, adolescents who display prosocial behaviour may show comfort to another person, invite others to join in a game, try to help someone who is hurt, or show encouragement to others. In adolescence, the tendency to engage in prosocial acts has been found to positively influence well-being.

Research findings are generally consistent in demonstrating that attitudes and competencies that support and reflect helping others are associated with well-being. For example, higher levels of helpfulness, sharing, and cooperation have generally been found to be related to numerous indicators of well-being, such as: friendship-making ability (Vernberg, Ewell, Beery, & Abwender, 1994), perceived self-competence (Cauce, 1986), low levels of loneliness (Inderbitzen-Pisaruk, Clark, & Solano, 1992) and low levels of aggression and behaviour problems (Hastings, Zahn-Walker, Robinson, Usher, & Bridges, 2000). Whereas these findings demonstrate that the attitudes and types of behaviour associated with prosocial acts are also associated with outcomes related to well-being, other studies have suggested that the actual experience of performing a prosocial act may promote adolescent well-being.

In a study involving 571 students in grades 6-8, Martin and Huebner (2007) explored the relationship between prosocial experiences and adolescent subjective well-being. Their findings indicated that adolescent self-reports of prosocial experiences were positively correlated with self-reports of life satisfaction and positive affect, as well as inversely correlated with negative affect. In other words, the more prosocial experiences that an individual engaged in the better they felt about themselves and the more life satisfaction they experienced. These findings suggest that the experience of engaging in

prosocial behaviour promotes well-being by making one feel good about one's self and one's life. Martin and Huebner (2007) suggest that prosocial experiences are particularly important during adolescence, as adolescents who feel good about themselves (high SWB) are likely to also engage in less risky behaviour. For example, adolescents who engage in more prosocial acts towards others have been found to be less likely to smoke marijuana and abuse alcohol (Youniss, Yates, & Su, 1997), perform poorly in school (Gutman, Sameroff, & Eccles, 2002), commit delinquent acts, or be arrested (Scales, Leffert, & Vraa, 2003).

Given that prosocial behaviour is associated with responsiveness to human need (Hardy & Carlo, 2005; Hart & Fegley, 1995), it comes as no surprise that research findings indicate participation in volunteer activities to be associated with prosocial attitudes and behaviours (Caprara & Steca, 2007; Pancer, Pratt, Hunsberger, & Alisat, 2007). For this reason, much of the research on adolescent prosocial behaviour has been explored through volunteering. For example, young people's tendency to participate in prosocial activities, such as volunteering, has been found to be associated with reduced levels of risk taking and improved levels of thriving, as indicated by academic achievement, positive affect and the development of positive peer relationships over the long-term (Caprara & Steca, 2007). In addition, volunteering has been shown to significantly influence human psychosocial development and identity development (Pancer et al., 2007) and lead to outcomes such as reduced behavioural problems (Vieno, Nation, Perkins & Santinello, 2007).

In summary, previous research illustrates that there is a relationship between the attitudes and behaviours associated with prosocial behaviour and well-being. In addition,

this research emphasizes the importance of creating opportunities for adolescents to engage in prosocial behaviour, so as to promote well-being.

***Hyperactivity.*** Adolescents with hyperactivity typically tend to act impulsively and have trouble focusing (Danckaerts, 1996; Lengua, 2003). Of course, many adolescents act this way at times, particularly when they are anxious or excited. However, increased levels of hyperactivity in adolescence have been found to influence well-being.

Research suggests that adolescents with high levels of hyperactivity often use unfavourable social problem-solving and decision-making skills. For example, Lengua (2003) indicated that adolescents with hyperactivity view aggression more favorably than their peers with lower levels of hyperactivity or no hyperactivity, and tend to respond with aggressive counterattacks to minimal provocation. Many authors suggest that such overreactions to minor inconveniences results in difficulties for adolescents to de-escalate their emotions and behaviour in situations that demand behavioural inhibition (e.g., Hinshaw, 1992; Lengua, 2003; Wheeler & Carlson, 1994). For example, Kokkonen and Pulkkinen (1999) investigated the role of emotional regulation in adolescents with hyperactivity. In their study, adolescents with low levels of hyperactivity demonstrated increased self-control and emotional regulation, which the authors suggested helps to keep internal arousal within a manageable range. The authors indicated that adolescents who control the display of negative emotions experience more positive affect, such as increased confidence and optimism about social relationships. On the other hand, low self-control leads to negative emotions, such as fear and anger that may be expressed in anxiety or aggressiveness. The impulsive, anxious and aggressive behaviour often

displayed by adolescents with hyperactivity has been shown by other authors to relate to low peer-group status (Wheeler & Carlson, 1994), unpopularity and peer rejection (Ronka & Pulkkinen, 1995), which are subsequently linked to externalizing problem behaviours, such as drug and alcohol abuse (Coie & Dodge, 1998; Farrington, 1995; Loeber & Farrington, 2000).

Children with hyperactivity are also vulnerable to significant problems with academic achievement. Common academic problems associated with hyperactivity include relatively low rates of work completion and accuracy on class-work assignments, as well as poor performance on tests (Hinshaw, 1992). In addition, these academic challenges often lead adolescents with hyperactivity to withdraw from school and to disassociate with the academic environment. In so doing, adolescents with hyperactivity have an increased likelihood of grade retention and placement into special education (Barkley, DuPaul, & McMurry, 1990). On the other hand, Kokko and Pulkkinen (2000) found that reduced hyperactivity at age 8 predicted school success and popularity at age 14, as well as length of education and stable work career by age 27.

Given the negative influence of hyperactivity on social problem-solving skills, the formation of social relationships, externalizing behaviours, and academic achievement, it is not surprising that many adolescents who are hyperactive have been found to also experience depression and loneliness (e.g., Laurent, Landau, & Stark, 1993). Alternatively, adolescents with reduced impulsivity and increased self-control have been shown to experience high levels of PWB (e.g. Rothbart, Ahadi, & Evans, 2000). These findings stress the importance of creating environments for young people that encourage emotional and behavioural control, so that adolescents have the skills and

competencies to appropriately respond to social situations, form healthy social relationships, participate in the classroom and most importantly, maintain well-being.

*Self-esteem.* In addition to prosocial behaviour and hyperactivity, self-esteem is another factor at the personal level that has been shown to have an influence on well-being. Self-esteem represents one's general or typical feelings of global self-worth and self-liking (Ciarochi, Heaven, & Davies, 2007). The relationship between self-esteem and adolescent well-being has been extensively discussed in literature. For example, Paradise and Kernis (2002) examined the extent to which an adolescent's level of self-esteem was related to Ryff's (1989) measure of PWB. Their findings indicated that adolescents with high self-esteem reported greater autonomy, environmental mastery, purpose in life, self-acceptance, positive relations with others, and personal growth. The relationship between self-esteem and SWB or general emotional states has also been explored. For instance, self-esteem has been shown to be significantly inversely related to depression (Pelkonen, 2003; Robinson, Garber, & Hilsman, 1995), suicide ideation (Palmer, 2004), and victimization (Slee & Rigby, 1993), and positively related to happiness (Furnham & Cheng, 2000). It should be noted that Pelkonen's (2003) study involved Finish adolescents and Slee and Rigby's (2003) research took place in Australia. Although there may be contextual factors that influence the development of self-esteem, self-esteem itself is considered to be a universal construct that is understood and measured similarly across contexts (Lindell & Whitney, 2001).

As illustrated by the previously discussed literature, self-esteem has been found to be associated with increased levels of SWB and PWB. However, similar to the current study, researchers suggest that self-esteem also has an influence on how individuals react

to everyday life experiences. For example, Kernis, Grannemann, and Barclay (1989) indicated that adolescents with high, stable self-esteem are less likely to become angry and hostile when faced by daily hassles. Similarly, adolescents with high self-esteem have been found to be less reactive to negative events (Greenier et al., 1999) and to see difficult situations as an opportunity to master their environment (Baumeister, Campbell, Krueger, & Vohs, 2003) These findings suggest that individuals with high self-esteem have increased levels of well-being, as indicated by positive self-feelings, which will not be questioned or threatened when faced with life's inevitable adversities.

At the personal level, the research suggests that prosocial behaviour, hyperactivity and self-esteem are related to well-being in adolescence. However, an individual is part of many social systems that impact well-being and these larger systems must be considered to gain a comprehensive understanding of well-being. In the following section, I will discuss factors within the family and community context that influence well-being in adolescence.

**Contextual.** Contextual factors such as an individual's level of family functioning and sense of community have also been found to influence many aspects of adolescent well-being.

**Family functioning.** Given that the family remains the main source of emotional support to adolescents (Grotevant & Cooper, 1985; Youniss & Smollar, 1985), it is important to extend an investigation beyond the individual and into the family context when exploring factors that impact well-being. Family functioning extends beyond the use of effective parenting practices and includes effective communication and problem solving skills amongst family members. Family functioning also relates to the readiness

of family members to help and support each other (Offord et al., 1987). Research has shown that relationships among family members have a considerable effect on adolescent well-being.

Jackson et al. (1998) suggest that effective communication is generally regarded as a central feature of good family functioning. As Steinberg et al. (1994) have indicated, where communication is open and families are willing to actively engage in problem solving, young people are likely to be satisfied with their family and experience less conflict. Such positive family functioning has been found to relate to adolescent well-being in terms of positive feelings of self-esteem, increased feelings of happiness and greater life satisfaction (Jackson, Bijstra, Oostra & Bosma, 1998).

In addition to effective communication, an adolescent's perceived sense of family support is also evidence of family functioning and impacts well-being. In a study involving 519 13-year-old adolescents from Singapore, Chong et al. (2006) found that adolescents who perceived their family as being supportive experienced low levels of emotional distress. Although the findings in this study are limited to Asian adolescents, other researchers have found similar findings with North American adolescents. For example, Bell and Bell (2005) found that adolescents from families with strong socioemotional bonds obtained higher self-esteem scores. Steinberg et al. (1994) suggest that the presence of a secure relationship with parents appears to provide a base that leads to feelings of increased personal control and efficacy allowing adolescents to make appropriate choices and take risks, as well as permitting them to cope better with the transition to adulthood. On the other hand, adolescents with poor parental support are more vulnerable to depressive symptoms in the face of adverse life events (Fivush,

Bohanek, Robertson & Duke, 2004), they engage more frequently in negative behaviours, such as drinking and use of drugs (Beiser et al., 2002; Bynum & Brody, 2004; Georgiades et al., 2007), and display higher levels of aggression (Noack & Puschner, 1999). These findings stress the importance of a healthy family environment during adolescence and provide strong support for the importance of family functioning with respect to well-being.

*Sense of community.* Just as it is important to consider the individual and family level factors that influence adolescent well-being, it is also essential to be aware of how an adolescent's community environment influences well-being. Sarason (1974) defined psychological sense of community as the feeling that one is part of a readily available, supportive, and dependable structure. McMillan and Chavis (1986) conceptualized sense of community as a systems level perception of the social environment in that it focuses on networks embedded within the larger system.

Several authors suggest that different qualities contribute to adolescents' sense of community, including opportunities to exert power (Prilleltensky et al., 2001), to be involved in school and community activities (Bateman, 2002), and to have places to congregate outside of school (Brodsky, O'Campo & Aronson, 1999). DaSilva, Sanson, Smart, and Toumbourou (2004) suggest that adolescents with a sense of belonging to a community are more altruistic and actively engage in such things as taking part in fundraising activities and supporting organizations that help disadvantaged people. Moreover, DaSilva et al. (2004) indicated that contributing to community life through social participation enhances adolescents' sense of control, domain specific self-efficacy and generally promotes well-being. For example, some studies have found that



adolescent participation in structured social activities positively affects academic achievement (Bartko & Eccles, 2003; Larson, 2000) and contributes to low levels of involvement in risky behaviours (Mahoney, Stattin & Lord, 2004). The qualities inherent in sense of community are considered so vital to human functioning that their absence is believed to produce feelings of isolation, alienation, loneliness, and depression (Sarason, 1974).

Pretty et al. (1993) have also investigated the relationship between adolescents' perceived sense of community and SWB. In their study, the SWB construct consisted of positive affect (happiness and enjoyment of life), negative affect (worry) and perceived efficacy (success in coping). The findings showed a significant association between sense of community and affective aspects of SWB (i.e., more happiness and less worry, as well as increased coping efficacy). Likewise, Davidson and Cotter (1989) found that adolescent sense of community significantly related to adolescent SWB, particularly happiness. In addition, similar to a sense of community, Abada, Hou, and Ram (2007) examined the extent to which perceived neighbourhood cohesion contributes to the subjective well-being of Canadian adolescents. Their findings indicated that perceived neighborhood cohesion was a protective factor for both health status and depression in Canadian adolescents.

Sarason (1974) highlighted the importance of sense of community in the statement: "The absence or dilution of the psychological sense of community is the most destructive dynamic in the lives of people in our society" (p. 96). From this point of view, sense of community becomes a vital component to consider in the promotion of adolescent and young adult well-being.

It has been illustrated that personal and contextual factors have a considerable influence on adolescent well-being. The literature suggests that in the promotion of well-being one must consider not only the individual but also the multiple social systems in which she or he is embedded (Bronfenbrenner, 1977). In addition, given the relationship between multiple factors in adolescence and adolescent well-being, one might expect the presence of these factors to influence the way in which people make sense of turning point events in young adulthood. In other words, the existence of factors that are associated with well-being in adolescence may help individuals to maintain well-being in the face of turning point events. Despite the significant amount of literature regarding factors that contribute to adolescent well-being, very little research has investigated this relationship longitudinally and with specific relation to dimensions of turning point stories.

### **Predictors of Narrative Dimensions**

Thus far, I have reviewed primarily cross-sectional studies of factors related to well-being. For example, I have shown that how turning point stories are narrated in young adulthood is associated with standardized measures of well-being at the same time-period. In addition, I have also reviewed research that demonstrates a relationship between personal and contextual factors and standardized measures of well-being in adolescence. However, very little research has explored which factors in adolescence predict how turning point stories are narrated in young adulthood.

Some research has explored predictors of well-being longitudinally and through the use of narratives. For example, Pals (2006) found a longitudinal relationship between how stories are narrated in early adulthood and standardized measures of well-being in

late adulthood. However, this study does not indicate a predictive relationship between adolescence and adulthood and did not assess well-being through the use of narratives. Narratives are a more comprehensive way of conceptualizing well-being as they help to understand how experiences are incorporated into the greater life story.

McLean (2005) suggested that positive parent-child relationships in adolescence provide guidance and encouragement for adolescents to resolve issues and find some underlying positivity within momentous life events. McLean's (2005) findings support the perspective of this study that family level factors in adolescence are associated with how people narrate turning point events. However, the study lacks a longitudinal perspective of how parent-child relationships in adolescence influence positivity within momentous life events in young adulthood. One study that does include a longitudinal perspective was conducted by Frensch, Pratt, and Norris (2007). Frensch et al. (2007) reported that several parenting factors when adolescents were 16 (parents' autonomy-encouraging practices, their emphasis on caring in stories of family value teaching, and adolescents' reports of authoritative parenting style) were associated with more generative themes in narratives at age 20. In addition, prosocial behaviours (caring for others through volunteer activities), as well as levels of prosocial reasoning (other-oriented perspective taking) at age 20 were associated with generative life story themes at this same time period. This study demonstrates that factors in adolescence and young adulthood are associated with narrative themes in young adulthood. However, Frensch et al.'s (2007) study does not discuss the dimensions of turning point stories that were used in this study directly. Young adults' perceptions of turning point stories are particularly important as young adulthood is often characterized by new experiences and events that

may have lasting effects on one's well-being (Bauer et al., 2008). It is therefore imperative to investigate factors that predict dimensions of young adult turning point stories that are reflective of well-being, in order to identify factors that should be targeted in programs that aim to prevent poor developmental outcomes and promote adolescent and young adult well-being.

### **Well-Being and Turning Point Stories: A Summary**

In comparison to the use of standardized measures to assess well-being, I propose the use of a more humanistic approach to understanding well-being by exploring the narrative dimensions of turning point stories. There is a limited amount of research that utilizes narrative dimensions as a way to understand well-being, and thus to illustrate the potential value of this approach I demonstrated the relationship between narrative dimensions and more traditional measures of well-being. In addition, this study proposes that certain factors experienced in adolescence help individuals to construct turning point stories that are reflective of well-being in young adulthood. To illustrate certain factors in adolescence that may be particularly important in promoting well-being in young adulthood, this review showed that research has found an association between commonly discussed personal and contextual factors in adolescence and standardized measures of adolescent well-being. Once again, reference to standardized measures of well-being was made due to the limited amount of research that assesses well-being through narrative dimensions. Thus, literature discussing standardized measures of well-being was used to show the value of how the well-being of young adults is assessed in this study. This review has also revealed the factors in adolescence that have been shown in previous studies to have a long-term influence on well-being. However, what has yet to be

discussed is a compelling theoretical explanation as to why certain factors in adolescence may have an influence on young adult well-being. The following section of this review will discuss resilience theory and why a focus on resilience theory is appropriate for this study.

### **Resilience Theory**

Resilience theory is used in the current study to explain why certain factors in adolescence may influence the dimensions of turning point stories that are reflective of well-being in young adulthood. In this section, I describe resilience theory and how the features of resilience theory are similar to the perspectives of the current study. In addition, I discuss why a focus on resilience theory is appropriate when exploring factors that predict how one constructs a turning point story.

**Description of resilience theory.** Resilience theory posits that resilience is a dynamic process, whereby individuals display positive adaptation to an experience of adversity. The term does not represent a personality trait or an attribute of an individual, but rather it is a two-dimensional construct that implies exposure to adversity and manifestation of positive adjustment outcomes (Luthar, Cicchetti, & Becker, 2000; Masten & Garmezy, 1985; Rutter, 2005, 2007). The two constructs *adversity* and *positive adaptation* each have specific operational definitions in contemporary resilience research. Adversity, often referred to as risk, typically encompasses negative life circumstances or adverse situations that are known to be associated with adjustment difficulties. Positive adaptation is less specifically defined and generally refers to the absence of maladjustment or to the presence of positive outcomes (Luthar et al., 2000). In the current study, individuals' turning point events are considered to be experiences

where individuals have faced considerable adversity and the dimensions of turning point stories are reflective of adaptation. In other words, a young adult may experience an adverse turning point event, such as their parents getting a divorce; however, they may narrate the event in such a way as to indicate that they experienced positive outcomes as a result of the experience. For example, an individual may indicate that they gained increased independence, more insight into relationships and formed stronger bonds with siblings as a result of their parents getting a divorce (Steinberg et al., 1994; Thomas & Gibbons, 2009). Such positive outcomes are captured by the dimensions of turning point stories and are reflective of positive adaptation in the face of adversity. It is important to note that not all turning point events begin with the experience of adversity. However, the turning point events being examined in this study primarily represent experiences that are known to be associated with adjustment difficulties. Examples of these experiences will be described in more detail below. The similarity between the constructs of resilience and turning point stories makes it appropriate to explore turning point stories within a resilience framework.

Resilience theory is highly relevant to prevention, education and interventions seeking to positively influence adolescent and young adult well-being. For example, applying resilience theory to research or youth development work implies attention to positive developmental outcomes as opposed to negative ones (Luthar et al., 2000). Whereas traditional research with at-risk populations tends to focus on maladjustment and pathology, resilience theory places an emphasis on positive outcomes and their antecedents. From a prevention and policy perspective, applying resilience theory implies a shift of emphasis to primary prevention. The interest lies in identifying what

promotes well-being in an attempt to prevent maladjustment rather than simply attempting to ameliorate maladjustment after it has already occurred (Luthar et al., 2000; Rutter, 2005). However, some may suggest that maladjustment is often the adverse situation being explored, such as in the case of a drug over-dose or a student being kicked out of school. Even in this circumstance, applying resilience theory implies an effort to build on the strengths of individuals and their environments to bring about positive change. Rather than focusing on the individual's deficits, resilience theory seeks to understand what assets youth, their families and their communities have and how these assets have supported healing and health (Benard, 1991). Understanding processes that contribute to positive adjustment or well-being under conditions of adversity can help to broaden understanding of youth development processes that may not be evident in more normative circumstances. Further, an understanding of factors and processes that promote positive outcomes as opposed to negative outcomes in a risk situation can be critical in expanding our understanding of how risk functions to influence well-being. Most importantly, identifying the assets that have supported well-being under challenging circumstances gives the prevention, education and youth development fields a clear sense of direction, as this understanding can be essential for informing prevention, education and policy workers about "what works," so that future efforts can be dedicated towards minimizing risk and promoting the healthy development of all youth.

**Features of resilience theory and turning point stories.** There are four main features of resilience theory that are particularly relevant to the current study. These features include the following: (a) the presence of adversity, (b) an emphasis on predictors of adaptation, (c) the application of ecological frameworks, and (d) an emphasis on the mechanisms involved in resilience. Below, I discuss how the current study relates to the previously described features of resilience theory, in order to demonstrate the appropriateness of utilizing a resilience framework.

***Presence of adversity.*** Although the focus of resilience theory is on positive adaptation, a central feature of resilience theory is the presence of adversity, as an individual may only be deemed resilient if they show positive adaptation in the face of such adversity. There is considerable similarity between the types of turning point stories often described and the types of adverse experiences discussed in literature utilizing a resilience framework. Individuals often describe a turning point event as one in which they were susceptible to an uncontrollable adverse situation such as the passing of a close family member or friend, disruption due to moving, the divorce of one's parents, the illness of a family or friend, or exposure to extreme violence or abuse (Rutter, 1996). Literature utilizing a resilience framework has suggested that these same adverse situations pose a risk to well-being. For example, Eppler (2008) suggests that bereaved children are a vulnerable population, who are at increased risk for social impairment and psychopathology. In addition, many studies have explored resilience in children from divorced families. The literature suggests that although divorce does not affect all children uniformly, divorce increases children's risk of academic problems (Thomas & Gibbons, 2009), behavioural problems (Gullotta, Blau, 2008), and



depression (Steinberg, Lamborn, Darling, & Mounts, 1994). Furthermore, Robinson, Garber, and Hilsman (1995) indicate that transition to high school or university, particularly when the transition is associated with a neighbourhood change, places youth at increased risk for depression and externalizing behaviour problems. It is important to note that this study is not exploring factors that promote resilience in one particular type of adverse situation. Rather, this study uses resilience theory to highlight that there are different types of events in individuals' lives that have been shown to influence well-being.

*Emphasis on predictors of adaptation.* Similar to the perspective of the current study, resilience theory emphasizes that different conditions can promote adaptation to adverse situations. As well, these conditions can have a lasting influence on future well-being (e.g., Gilligan, 2000; Luthar et al., 2000; Masten & Garmezy, 1985). Many authors that conduct research within a resilience framework have explored such predictors of adaptation. For example, Barnes (1999) explored factors that are related to children's well-being following divorce. Findings indicated that extracurricular involvement in the community and quality peer relationships were found to be associated with well-being despite the experience of adverse family situations. These findings suggest that after divorce, neighborhood and relationship factors are important in helping adolescents to become productive and healthy adults. Similarly, Collishaw et al. (2007) longitudinally examined protective factors of psychiatric disorders in childhood sexual and physical abuse survivors. Their findings indicated that good quality relationships across childhood, adolescence and adulthood appear especially important for adult psychological well-being in the context of childhood abuse. The findings of the Barnes

(1999), as well as Collishaw et al. (2007) study are also similar to the perspective of the current study, which suggests that although some turning point events cannot be prevented from occurring, the presence of certain factors may influence how they are interpreted or handled and ultimately favor or obstruct future well-being. Most importantly, resilience theory and this study both suggest that the promotion of conditions and skills that can defuse such threats and strengthen both immediate wellness and future resilience should be prime goals (Cowen, 2000).

*Application of ecological frameworks.* The findings of Collishaw et al. (2007) and Barnes (1999) lead into the third similarity between resilience theory and how turning point stories are being explored in the current study. Whereas historically resilience was conceptualized as invulnerability (Anthony, 1974), more recent researchers criticize this perspective suggesting that resilience is a more dynamic process that is influenced by many factors. Accordingly, recent literature utilizing resilience theory is based on ecological frameworks, such as Bronfenbrenner's (1977) ecological model of human development, and Cicchetti and Lynch's (1993) ecological/transactional model, which stipulate that how people interpret or handle adverse situations is influenced by various factors that operate at various levels, including the community, family, school and the child (Luthar et al. 2000). In other words, it is what one brings to a situation from multiple contexts that influences how one adapts to challenging experiences. Thus, based on resilience theory, how one constructs a turning point story should be explored within an ecological context, such as the one employed in the current study, to understand factors that contribute to well-being under conditions of adversity.

*Emphasis on the mechanisms involved in resilience.* It is important to note that in addition to understanding what factors contribute to well-being under conditions of adversity, more recently resilience theorists are placing an emphasis on how such factors influence well-being in adverse situations (Luthar et al., 2000; Rutter, 2007). In other words, recent research utilizing a resilience framework is primarily interested in helping to explain why certain factors promote well-being. For example, in Quinton and Rutter's (1988) studies involving institution-reared children, it was found that positive family experiences had a substantial effect in leading to an increased tendency for the young people to exercise planning and foresight in relation to life transitions, such as careers and marriage. This tendency to exercise planning was further associated with a much improved social outcome in adult life. In Quinton and Rutter's (1988) research, planning in relation to life transitions was the mechanism underlying how positive family experiences lead to improved social outcomes in adult life. Attention to underlying mechanisms is viewed as essential for advancing theory and research in the resilience field, as well as for designing appropriate prevention programs and social policies (Dasilva, Sanson, Smart, & Toumbourou, 2004; Luthar et al., 2000, & Rutter, 1996). These authors suggest that the investigation of underlying mechanisms that facilitate well-being provide critical information not only about what supports adolescent well-being, but how environments can enhance adolescents' well-being. For that reason, the current study explores the mechanisms that facilitate positive outcomes in young adult turning point stories.

## Summary of Theoretical Framework

A focus on resilience theory is used to explore factors in adolescence that influence how one constructs a turning point story in young adulthood. As discussed above, there are four main features of resilience theory that are particularly relevant to the current study. These features include the following: (a) the presence of adversity, (b) an emphasis on predictors of adaptation, (c) the application of ecological frameworks, and (d) an emphasis on the mechanisms involved in resilience. To summarize, I will discuss how the previously described features of resilience theory fit within the context of this study and help to explain why certain factors in adolescence may have an influence on young adult well-being.

The focus of the current study is on the exploration of young adult turning point events, which in the context of this study is a situation whereby an individual experienced a considerable amount of adversity. However, based on resilience theory, the current study suggests that there are certain factors, or strengths, within an individual, an individual's family or within an individual's community that may help to promote resilience and well-being in the face of a turning point experience. These factors are referred to as *predictors of adaptation*. In other words, there are various factors from various levels of ecological analysis that an individual brings to an experience that may help them to maintain well-being in the face of adversity. The factors being explored in this study include: prosocial behaviour, hyperactivity, self-esteem, family functioning and sense of community. Furthermore, based on resilience theory this study is suggesting that the presence of such factors may lead individuals to utilize or access the resources they need to maintain well-being throughout a turning point event. Within this study,

these resources are referred to as *mechanisms of resilience*. Lastly, resilience in the current study is being indicated by the different dimensions of turning point stories that are reflective of well-being (see Figure 1).

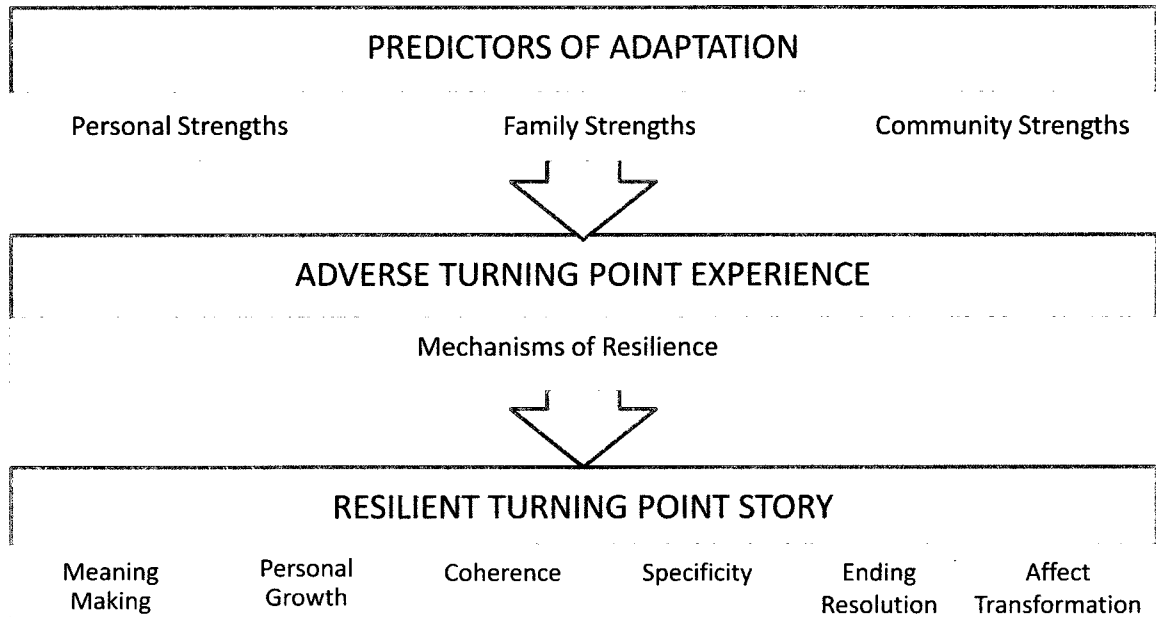


Figure 1. *Application of Resilience Theory to Turning Point Stories. Features of resilience theory within the context of turning point stories.*

### **Research Objectives, Hypotheses, and Question**

Based on my own experience, the research that I have reviewed, and the theoretical framework that guides this study, the objectives of this study are: (a) to examine predictors of dimensions of young adult's turning point stories that are reflective of well-being; (b) to explore how predictors may contribute to positive outcomes in turning point stories; (c) to identify key program components for programs that prevent poor developmental outcomes and promote well-being; and (d) to use a strengths-based approach to emphasize the need for prevention and the promotion of well-being. The hypotheses of this research are as follows:

1. Prosocial behaviour in Grade 9 will be directly associated with the meaning making, coherence, specificity personal growth, ending resolution, and affect transformation of turning point stories in Grade 12.
2. Teacher-rated measures of hyperactivity in Grade 9 will be directly associated with the meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12.
3. Self-esteem in Grade 9 will be directly associated with the meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12.
4. Parent ratings of family functioning in Grade 9 will be directly associated with the meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12.
5. Parent ratings of sense of community in Grade 9 will be directly associated with the meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12.

In addition to testing these hypotheses, I propose to seek answers to the question, “What are the important mechanisms that facilitate positive outcomes in young adult turning point stories?” by employing a qualitative analysis of relevant sections within life story interviews conducted with young adults.

## **Methodology**

The data used for this study were from Better Beginnings, Better Futures research. Better Beginnings, Better Futures (Better Beginnings) is a 25-year research demonstration project funded by the Government of Ontario that is designed to prevent social, emotional, behavioural, physical and cognitive problems in young children, promote the development of these children in those same areas, and enhance the ability of disadvantaged families and communities to provide for their children (Peters, Petrunka & Arnold, 2003). A longitudinal evaluation of Better Beginnings was conducted in five communities (three Better Beginnings communities and two comparison communities) between 1993 and 2010. While the current study is not a part of the longitudinal evaluation of the effectiveness of Better Beginnings in meeting the goals noted above, the data from this research were used to meet the current study's research objectives. The longitudinal nature of the data will provide the unique opportunity to address a significant gap in the literature regarding early predictors of dimensions of turning point stories. In addition, data from a prevention/promotion research project will be useful in meeting the current study's objective to emphasize the need for prevention of poor developmental outcomes and the promotion of well-being.

### **Sample Characteristics of Better Beginnings Project Sites**

This study used data from the five communities involved in the longitudinal evaluation of Better Beginnings. The three Better Beginning communities included Sudbury, Cornwall and Highfield, and the two matched comparison communities were Etobicoke and Ottawa Vanier (Peters et al., 2003). In the following sections I highlight

key sample characteristics from each of the Better Beginnings sites, as well as the comparison sites.

**Cornwall.** Cornwall is a medium-sized city in eastern Ontario. The four primary schools in the area served a high number of students from disadvantaged families. At baseline, 68% of children in the research cohort were from Francophone families and 24% were from single-parent families. The average annual household income was \$44, 800, and 15% of parents had university degrees (Herry, Peters & Arnold, 2003).

**Highfield.** Highfield is an ethnically diverse area in the northwest part of the metropolitan Toronto area. According to the 1996 census, 60% of the population of this area was made up of newcomers to Canada, with the largest groups being those from India and the Caribbean. Unemployment rates and the mean family income in this area have historically been lower than provincial averages (Nelson, Pancer, Hayward & Peters, 2005). Twenty-three percent of the Highfield sample was led by single-parents and the average annual family income was \$43, 800.

**Sudbury.** Sudbury, with a population of approximately 165,000, is the largest city in northern Ontario. The Sudbury Better Beginnings project is centered in the Flour Mill and Donovan areas. Of the 1,473 children enrolled in the elementary schools in these neighbourhoods at the beginning of the project, a total of 48% were from Anglophone families, 38% from Francophone families, and 14% from families with another primary language. Approximately 300 were of Aboriginal descent. Additionally, these neighbourhoods had problems with high crime rates, poor quality housing, low incomes, and few job opportunities (Bélanger, 2008). Twenty-seven percent of the



Sudbury sample was led by a single parent and the average annual family income was \$36,200.

### Comparison Sites

Of the comparison sites, Etobicoke was selected for its cultural and socioeconomic resemblance to the Highfield site, and Ottawa-Vanier for its resemblance to Cornwall and Sudbury. Another urban site in Ontario, with an appropriate mix of anglophone and francophone families, at the right socioeconomic level, could not be identified. Approximately 22% of the Ottawa-Vanier sample was led by a single parent compared to 24% in Cornwall and 27% in Sudbury. In addition, the mean family income in Ottawa-Vanier was approximately \$41,400 compared to \$44,800 in Cornwall and \$36,200 in Sudbury. Therefore, on both variables Ottawa-Vanier closely resembles Cornwall and Sudbury. In addition, both the comparison site in Etobicoke and the project site in Highfield had 23% of the sample led by single parents, as well as the mean family income in Etobicoke was approximately \$48,900 compared to \$43,800 in Highfield.

Table 1

#### *Key Site Characteristics in 1991*

Site	% Single Parent Families	Mean Annual Family Income
Cornwall	24	44, 800
Highfield	23	43, 800
Sudbury	27	36, 200
Ottawa-Vanier	22	41, 400
Etobicoke	23	48, 900

## **Sampling and Recruitment**

Participants were recruited for the Better Beginnings evaluation in a two-stage process for participation in the current study. Stage one took place in 1993 and included recruitment into the initial longitudinal evaluation of Better Beginnings. The initial longitudinal evaluation sample will be referred to in this study as the larger Better Beginnings sample. Stage two of recruitment took place in 2007 and 2008 and involved recruitment from the larger Better Beginnings sample into a sub-sample for the study of narratives, which is the sample that was used in this study. Below is a description of the recruitment of each sample in more detail.

**Larger Better Beginnings sample.** The sample for the present study was drawn from a larger sample of the Better Beginnings longitudinal research that began in 1993 when the children enrolled in Junior Kindergarten at 3-4 years of age and continued with data collection at Senior Kindergarten, Grades 1, 2, 3, 6, 9, and the most recent data collection at Grade 12 in 2007-2008. Children and their parents from the three Better Beginnings sites and two socio-demographically similar comparison sites participated in the research. By Grade 3, a total of 959 children and families had been recruited into the study through the children's schools. In the Better Beginnings and comparison sites, the sampling strategy was to invite all families to participate. The resulting self-selected sample for Better Beginnings ( $n = 601$ ) and comparison sites ( $n = 358$ ) represented 50 to 60% of the entire birth cohort in their respective neighbourhoods, based on school records. Sampling bias was tested using four indicators of behaviour and social skills as assessed by teachers, and no significant differences were found during the initial waves of data collection (1993-1994 and 1997-1998).

**Sample attrition.** Sample attrition (when no data were gathered from a family in a particular data collection period) occurred at an average of 10 % every three years. From Grade 3 to Grade 6 assessments, 9 % of Better Beginnings students and 15 % of comparison students were not retained in the study. Then, between Grades 6 and 9 there was a 7 % decrease in sample size from the Better Beginnings sites and a 10 % decrease in comparison sites. The retention rate from recruitment through to Grade 9 assessments was 74 % for Better Beginnings participants and 65 % for comparison participants. Reasons for smaller sample sizes included being unreachable/not located, declining without explanation, or a child's death. For the entire sample of those recruited into the longitudinal study, 333 of the 959 (34.7 %) families did not participate at ages 18-19. Thus, the sample retention rate was 65.3 %, which is similar to the 65 % retention rate reported in the Statistics Canada's National Longitudinal Survey of Children and Youth (NLSCY; Statistics Canada, 2007).

**Sub-sample for study of narratives.** In 2007-2008, a stratified random sampling strategy was used to recruit participants from the larger Better Beginnings sample into the Better Beginnings narrative research. Stratification was by site and gender with roughly equal numbers of males and females drawn from each site. For inclusion into the study, participants were to have continuously lived in the community since they were in elementary school and to have had a high level of participation in Better Beginning programs (for those in the Better Beginnings communities). These inclusion criteria were stipulated because youth were also asked questions about experiences in their communities both when they were young and currently (See Appendix A for informed

consent form). In addition, participants were given \$25.00 for participation in the life story interview.

The narrative sub-sample size was 96 (for  $n= 51$  males and  $n= 44$  females). Roughly equal numbers of males and females were drawn from each of the Better Beginnings and comparison communities: Cornwall (10 males and 10 females), Highfield (10 males and 8 females), Sudbury (13 males and 10 females), Etobicoke (10 males and 8 females) and Ottawa Vanier (8 males and 8 females). The narrative sub-sample did not differ from the larger Better Beginnings sample on several demographic variables: sex of respondent, immigrant status, or cultural identification. However, more participants in the narrative sub-sample than the larger Better Beginnings sample still lived in the same community at the time of interviews as they did when Better Beginnings research first began,  $\chi^2(1, N=543)=50.35, p=.00$  (See Table 2). Thus not surprisingly, the samples also differed in length of youths' residence in neighbourhood (in years),  $t(772)=3.97, p<.05$ . Participants in the narrative sub-sample had lived in their neighborhood for more years ( $M=5.33$ ) than participants in the larger Better Beginnings sample ( $M=4.00$ ). In addition, on average participants in the narrative sub-sample had a lower mean monthly household income ( $M=3496.75$ ) than participants in the larger Better Beginnings sample ( $M=3880.84$ ),  $t(458)=2.48, p<.05$  (See Table 3).

Table 2

*Sex, Immigrant Status, Cultural Identification and Residence in Same Community Comparisons*

Sample	Sex of Respondent		Pearson Chi-Square		
	Male N(%)	Female N(%)	$p=.923$		
Narrative BB Sub-Sample	51 (54%)	44 (46%)			
Larger BB Sample	260 (52%)	237 (48%)			
Sample	Immigrant Status		Pearson Chi-Square		
	Born Canadian N(%)	Immigrant N(%)	$p=.359$		
Narrative BB Sub-Sample	60 (63%)	35 (37%)			
Larger BB Sample	311 (58%)	224 (42%)			
Sample	Cultural Identification				Pearson Chi-Square
	Anglo N(%)	Franco N(%)	Native N(%)	Other N(%)	$p=.908$
Narrative BB Sub-Sample	27 (28%)	29 (31%)	4 (4%)	35 (37%)	
Larger BB Sample	151 (28%)	165 (31%)	15 (3%)	202 (38%)	
Sample	Residence in Same Community*		Pearson Chi-Square		
	Youth live in same community as they did in 1993 N(%)	Youth live in other community N(%)	$p=.000$		
Narrative BB Sub-Sample	76 (82%)	17 (18%)			
Larger BB Sample	186 (41%)	264 (59%)			

Notes. \*Due to challenges with recruitment, although participants were to have continuously lived in the same community since 1993 for inclusion into the Narrative BB Sub-Sample, some participants were recruited for participation that had moved to other communities.

Table 3

*Sample Differences on Measures of Monthly Household Income and Length of Residence in Neighbourhood*

Sample Characteristics	Narrative BB Sub-Sample Mean (SD)	Larger BB Sample Mean (SD)	T-test
Monthly Household Income	3496.75 (2393.90)	4675.96 (3880.84)	$t(458)=2.48, p<.05$
Length of Residence in Neighbourhood (years)	5.33 (2.80)	4.0 (3.06)	$t(772)=3.97, p<.05$

There are numerous reasons why the samples may have differed on these measures. First, participants that had lived in Better Beginnings communities consistently over time were targeted for recruitment into the narrative sub-sample. Therefore, the difference in length of youths' residence in their neighborhood is expected. In addition, there may be a reciprocal relationship between the length of a youth's residence in their neighborhood, their current residence in the same community and the difference found in monthly household income. Better Beginnings programs are located in lower socio-economic communities. Families that continuously reside in those communities may do so due to a lack of financial opportunities that would cause them to relocate. Also of importance, those participants who lived in Better Beginnings communities and participated in Better Beginnings programs for a greater length of time may have had a greater desire to give back to the program by participating in this study.

## Measures

**Life story interviews.** In 2007 and 2008, data for the turning point stories were obtained from open-ended qualitative life-story interviews with the youth. All interviews were conducted in the youth's home and by the staff of the Better Beginnings Research Coordination Unit. The interview guides included a number of questions addressing several issues and topics; however, this study only focused on the turning point stories.

Youth were given the following instructions by the interviewer.

In looking back on your life, you may be able to identify certain key "turning points" - episodes through which you experienced an important change in your life. Please choose one key turning point scene and describe it in detail. If you feel your life story contains no clear turning points, then describe a particular episode in your life that comes closer than any other to qualifying as a turning point - a scene where you changed in some way. Please describe what led up to the event, what happened in the event, where and when it happened, who was involved, what you were thinking and feeling, and so on. Also, please tell me how you think you changed as a result of this event and why you consider this event to be a turning point in your life.

Participants were encouraged to describe their turning points in terms of a narrative story. Expectations were left open so that any experience that was deemed an important life change or turning point for the participant was acceptable as an answer to this interview question. The interviews were tape-recorded and transcribed verbatim.

**Coding.** In July of 2009, I gained access to the interviews. To quantify the qualitative data, I coded each turning point story on the following dimensions: specificity (1 = not specific to 5 = very specific), ending resolution (1 = very unresolved to 4 = very resolved), personal growth (0 = no personal growth to 2 = event explicitly promoted personal growth), meaning making (0 = no meaning reported to 3 = insight [explicit transformation of understanding of self or the world]), coherence (0 = no story or story is

too incoherent to understand to 3 = classic pattern in which story builds to high point, dwells on it, then resolves it), early affect and later affect (1 = very negative affect to 7 = very positive affect [See Appendix B for rating system of turning point stories]). Affect transformation was calculated for each turning point story by subtracting the scale value of early affect from the value of later affect. Affect transformation is an indicator of a classic redemption pattern in which a turning point story shifts from something that is initially challenging or negative to a positive outcome in the end (McAdams, 2006). I did not develop the rating system for any of the turning point story dimensions. The dimensions that I used in this study were developed by various other authors and have been examined in a range of other narrative research studies. The authors that developed the rating system for the specific narrative dimensions being used in this study include: Blagov & Singer (2004); McAdams, Diamond, de St. Aubin and Mansfield (1997); as well as Pratt and colleagues (e.g., Frensch, Pratt & Norris, 2007; Mackey, Arnold & Pratt, 2001; McLean & Pratt, 2006; Pratt, Norris, Arnold & Filyer, 1999).

Below is an example of a turning point story. This story was coded a 2 (1-7 scale) for early affect, a 3 (0-3) scale for coherence, a 4 (1-5) scale for specificity, a 4 (on a 1-4 scale) for ending resolution, a 2 (on a 0-2 scale) for personal growth, and a 3 (on a 0-3 scale) for meaning-making, a 7 (1-7 scale) for later affect and accordingly a 5 (later affect minus early affect) for affect transformation. Higher ratings indicate more coherence, specificity, ending resolution, personal growth, meaning making, and transformation in the story.



In high school things changed completely...when I was 16 I got pregnant... and after I had her I stopped going to school. I just stayed home to take care of her... I had nothing...and then I saw this commercial that said I could finish my high school through co-op, so now I am finishing school and I'm doing good now...this will help me because I want to be a fashion designer...and it makes me feel better and lets my mom be proud of me... so I'm doing everything I can to get that. I will make that goal so I can move a step forward instead of a step back.

In contrast, a different youth's story also about a pregnancy was coded a 1 (1-7 scale) for early affect, a 4 (1-4 scale) for coherence, a 3 (1-4 scale) for specificity, a 1 (on a 1-4 scale) for ending resolution, a 0 (on a 0-2 scale) for personal growth, and a 1 (on a 0-3 scale) for meaning-making, a 1 (1-7 scale) for later affect and accordingly a 0 (0-6 scale) for affect transformation.

The only turning point is my baby really. That's the only turning point because that's going to force me to grow up faster than I have to. I'm 18. I'm an adult but I'm not really an adult so I've got to learn to become a mother overnight whether I like it not. Now I've got to go out, get a job, support a kid, support me, I don't know if I can do it. My life hasn't even started yet and now it's basically going to end.

**Inter-rater reliability.** I was the primary coder of all turning point stories. A second rater, in the Masters of Developmental Psychology program at Wilfrid Laurier University, coded a sample of 23 stories for the purpose of establishing inter-rater reliability. I was blind as to which community the participant was from. To determine inter-rater reliability, correlation coefficients were calculated for each of the variables. Estimates of inter-rater reliability were quite high: specificity (.70), ending resolution (.92), personal growth (.96), meaning-making (.75), coherence (.71), early affect (.87), and later affect (.90).

**Standardized measures.** Standardized instruments were used to assess predictor variables in Grade 9 (2003-2005) of Better Beginnings and comparison communities (See Appendix C for scales and measures). Preliminary analyses indicated that variables collected at Grade 9 were better predictors of Grade 12 story dimensions than variables collected at earlier time periods. For this reason, I chose to use measures of predictor variables when the participants were in Grade 9. In the following sections I describe the measures that were used in this study.

***Prosocial behaviour.*** The youth version of the Prosocial Scale was used to assess youth's prosocial behaviour. The scale consists of 10 items and youth are asked to select how true the statements are for them. Examples of statements include, "I offer to help other young people (friend, brother or sister) who are having difficulty with a task", "I comfort another young person (friend, brother or sister) who is crying or upset" and "I encourage other people my age who cannot do things as well as I can." This scale was developed by the NLSCY and has a Cronbach's alpha reliability of .77. At the Grade 9 data collection for this sample, the reliability of this scale was .82.

***Hyperactivity.*** The teacher version of the Hyperactivity/Inattention Scale was used to assess children's level of hyperactivity. The scale includes seven statements about the feelings and behaviours of youth. Examples of statements include, "Is impulsive, acts without thinking" or "cannot settle on anything for more than a few moments." For each statement, teachers are instructed to circle the number that best describes how true the statement is for the student. Total scores range from a low of 0 indicating low hyperactivity, to a high of 14 indicating high hyperactivity/inattention. This scale was developed by the NLSCY with a reported Cronbach's alpha reliability of

.91. At the Grade 9 data collection, for the Better Beginnings sample, the Cronbach's alpha reliability of this scale was .92. The teacher version of this measure was selected for use in the current study based on the greater number of teachers that completed the measure in comparison to parents and youth.

***Self-esteem.*** A three-item Self-Esteem Scale was used to assess youth's self-esteem. The four items include statements such as, "In general, I like the way I am" and "Overall I have a lot to be proud of." Youth are asked to rate how true the statements are on a five point scale. This three-item scale was used with the National Longitudinal Survey of Children and Youth (NLSCY) and had a Cronbach's alpha reliability of .73. At the Grade 9 data collection, the Cronbach's alpha reliability of this scale was .75. Due to the fact that self-esteem essentially consists of how a person thinks about and evaluates the self (Ciarochi, Heaven, & Davies, 2007), youth self-reports are the only version available for this measure.

***Family functioning.*** A seven-item General Functioning Scale of the Family Assessment Device (FAD), shortened from the 12-item scale originally employed in the Ontario Child Health Study (Offord et al., 1987), was used to measure family functioning. This scale provides a global assessment of the quality of family functioning. Parents rate the entire family (which may include the extended family if the parents think it appropriate) on items such as, "In times of crisis we can turn to each other for support," "We express feelings to each other," "We can't talk to each other about sadness we feel," and "Making decisions is a problem for our family." On a four-point scale, parents rate how strongly they agree or disagree with the seven statements. Total scores range from a low of 7 indicating very poor family functioning, to a high of 28 indicating

excellent family functioning. At the Grade 9 data collection for this sample, the Cronbach's alpha reliability of this scale was .82. Better Beginnings research only used parent versions of this measure at Grade 9 data collection and, thus, I was restricted to using parents' assessments of family functioning in the current study. Despite this restriction, research has indicated that parent reports of family functioning are considered appealing because parents' perception of their family are often stable and less influenced by particular social situations at a given time (Chong et al., 2006, Steinberg et al., 1994).

*Sense of community.* A five item Sense of Community Involvement scale was used to assess parents' perceptions of their neighbourhoods. Items were derived from Buckner's (1986) measure of neighbourhood cohesion. On a four-item scale, parents were asked to rate their level of agreement with statements such as: "I feel like I belong to this neighbourhood" and "I feel like I am important to this neighbourhood." For this scale, low scores equal positive perceptions. For example, total scores range from 5 indicating very positive perceptions of their neighbourhood, to 28 indicating poor perceptions of their neighbourhood. At the Grade 9 data collection, the Cronbach's alpha reliability of this scale was .88. The parent version of this measure was used because youths' sense of community was not assessed at Grade 9 data collection. In addition, it is recognized that this measure does not directly assess sense of community. However, this measure does assess parents' perceptions related to community involvement and neighbourhood cohesion, which is considered to be associated with sense of community (Davidson & Cotter, 1991; Sarason, 1974; McMillan & Chavis, 1986). Also, research indicates that parental sense of community is related to youth sense of community and levels of community involvement (Kegler et al., 2005).

Table 4

*Summary of Predictor Measures*

Predictor Variable	Measure	Version	Reliability
Self-esteem	Self Esteem Scale (NLSCY)	Youth	This three-item scale was used with the NLSCY and had a reliability of .73. At the Grade 9 data collection, for the Better Beginnings sample, the reliability of this scale was .75.
Hyperactivity	Hyperactivity/ Inattention Scale (NLSCY)	Teacher	This seven-item scale was developed by the NLSCY with a reliability of .91. At the Grade 9 data collection, for the Better Beginnings sample, the reliability of this scale was .92.
Prosocial Behaviour	Prosocial Scale (NLSCY)	Youth	This 10 item scale was developed by the NLSCY and has a reliability of .77. At the Grade 9 data collection, for the Better Beginnings sample, the reliability of this scale was .82.
Family Functioning	Family Functioning Assessment Device (Ontario Child and Health Study)	Parent	The Family Functioning Scale consists of 12 items. Better Beginnings shortened the scale to 7 items. At the Grade 9 data collection, for the Better Beginnings sample, the reliability of this scale was .82.
Sense of Community	Sense of Community Involvement Scale (Derived from Buckner's, 1986 measure of neighbourhood cohesion)	Parent	The Sense of Community Involvement Scale consists of 5 items derived from Buckner's (1986) neighbourhood cohesion scale. The reliability at Grade 9 was 0.88.

## **Paradigmatic Stance**

A pragmatic stance was taken in this study. According to Onwuegbuzie and Leech (2005), a growth in the pragmatic researcher movement has the potential to reduce some of the problems associated with singular methods. Pragmatists suggest that paradigmatic purity limits the quality of research by restricting researchers to either quantitative or qualitative research methods (Greene, 2008). The central goal of pragmatism is to provide an alternative pragmatic stance that views the tensions and challenges between paradigms as complementary. Pragmatic researchers incorporate the strengths of quantitative and qualitative research methodologies in order to select methods based on their value for addressing underlying research questions and meeting research goals.

A pragmatic stance was selected in this study based on the notion that to test my research hypotheses and answer my research question, I would need to adopt contrasting methodologies. On the one hand, my hypotheses indicate my belief that the phenomena of interest are quantifiable, that is, that I can assign numbers to the turning point stories that are meaningful. For example, I can quantitatively code turning point stories on several dimensions in order to understand how turning point stories are reflective of well-being. This belief deems it appropriate to use quantitative research methods. On the other hand, my research question suggests that a participant's turning point story must be qualitatively explored as a whole to understand more fully the participants' experiences. Thus a qualitative approach must be used to explore the participant's stories. In a pragmatic design, these two methods can be merged within a single mixed methods investigation, reconciling the contrasting paradigms inherent in the research design (Onwuegbuzie & Leech, 2005). As indicated by Tashakkori and Teddlie (1998), "It is

perfectly logical for researchers to select and use differing methods, mixing them as they see need, and to seek to apply their findings to a reality that is at once plural and unknown” (p. 59). Accordingly, I adopted a pragmatist approach and used a mixed-methods design to meet the research objectives of the current study.

### **Research Design**

This study used a longitudinal, mixed method design. The rationale for using a mixed method design was to provide complementary data sets which together give a more complete picture of what contributes to the well-being of young adults. The integration of different methods in this study helped me to produce better results in terms of quality and scope. Also importantly, the additional use of qualitative data fits with goals of resilience theory and research. Research based on resilience theory aims to explore not only the factors that predict well-being under conditions of adversity, but also how well-being is facilitated under conditions of adversity so that we can better understand how to create environments that support well-being. Thus, the use of mixed methods in this study helped me to uphold the recent goals of resilience theory, as well as permitted me to test my hypotheses and answer my research question. Next, I will describe the mixed method design that was used in this study.

**Mixed method design.** I used an explanatory sequential design. This mixed methods design consists of two distinct phases: quantitative followed by qualitative. In this design, a researcher first collects and analyzes the quantitative data. The qualitative data are typically collected and analyzed second in the sequence and help explain, or elaborate on, the quantitative results obtained in the first phase. The second qualitative phase builds on the first quantitative phase, and the two phases are connected in the

intermediate stage of the study (Creswell, 2007). Due to the use of secondary data in this study, the qualitative data had previously been collected; however, the research question was developed based on the quantitative results and the quantitative results informed the qualitative analysis (described in more detail below). Thus, the two methods were separate but connected. The rationale for this approach is that the quantitative data and their subsequent analysis provide a general understanding of the research problem. The qualitative data and their analysis further help to explain those statistical results by exploring participants' views in more depth (Tashakkori & Teddlie, 1998; Creswell, 2007). According to Greene (2008) and Creswell (2007), often in the use of this design patterns and associations arising from the analysis of quantitative data can inform additional patterns to look for in analyzing qualitative data. Thus, this strategy is particularly useful in the current study that is interested not only in examining predictors of dimensions of turning point stories in young adulthood, but also in exploring the research question: what mechanisms facilitate positive outcomes in young adult turning point stories? In other words, this strategy will build on the initial quantitative findings that indicate factors that predict dimensions of turning point stories, by highlighting how these significant predictors may play out or are illustrated in turning point stories to facilitate well-being. This is crucial in research aiming to use a strength based approach to understand what assets in people, families and communities support well-being. In the next section, I discuss my analysis procedure, including the quantitative and qualitative analyses that were conducted.



## **Analysis Procedure**

**Statistical analyses.** To test the hypothesis that standardized measures of individual (prosocial behaviour, self-esteem, hyperactivity), family (positive family functioning), and community (sense of community) factors will be directly correlated with the dimensions of turning point stories, two different methods of analysis were used. First, Pearson correlations were computed between the standardized measures and the turning point story dimensions. Second, for those standardized measures that were found to be significantly correlated with at least one of the turning point dimensions, simultaneous multiple regression analyses were computed. The standardized measures were entered as the independent variables, while the turning point story dimensions were the dependent variables. The reason for entering only the significant predictors into the simultaneous multiple regression analyses was related to issues regarding power. According to assumptions of regression, based on the sample size of this study ( $n=96$ ), the maximum number of predictor variables that should be included into the regression to maintain a power of .80 could not exceed four (Cohen & Cohen, 1983; MVPstats, 2008). Therefore, to ensure the power of the findings I selected only the significant predictors for inclusion into the simultaneous multiple regression analyses.

**Qualitative analysis.** My process of qualitative analysis was based on the suggestions of Miles and Huberman (1994). I underwent a five-step process for my analysis, which I will describe in more detail below.

The first step of qualitative analysis included creating a conceptual structure for coding to tie my research question to the previous quantitative results. For example, in addition to examining which factors in adolescence predict turning point dimensions, I

was also interested in exploring the mechanisms that facilitated positive outcomes in turning point stories. To best answer my research question within the limits of this study, I decided that I would use a matrix analysis (Miles & Huberman, 1994) to show how the different codes that would be identified were illustrated in stories that were quantitatively rated as being low or high in affect transformation. To clarify, affect transformation is an indicator of a classic redemption pattern in which a turning point story shifts from something that is initially challenging or negative to a positive outcome in the end (McAdams, 2006). Thus, a matrix analysis to illustrate the codes that emerged in stories previously rated as high or low on affect transformation would be particularly useful in helping to answer my research question.

The second step of qualitative analysis included taking detailed notes on each story that would be used in the development of my original codebook. I used an inductive approach to coding (Corbin & Strauss, 1990, cited in Miles & Huberman, 1994) whereby I reviewed each story line by line within each paragraph. I took detailed notes on each story and these notes were descriptive rather than reflective. I drafted a summary sheet of my notes, which I used to complete the third step of analysis.

The third step of qualitative analysis included developing a list of descriptive codes. Codes were based on my previous notes and all codes that emerged in the data were included. Given that my analysis of quantitative data informed patterns that I looked for in analyzing the qualitative data, I was extremely careful to note all emerging codes that may have contradicted initial quantitative findings. I used Microsoft Excel to help sort the data into my matrix structure and created sub-codes (often referred to as child nodes using NVivo) where necessary.

The fourth step of analysis included reducing my codes and assigning themes. Themes represented a more abstract category that attributed to the codes and were based on several observations. This approach is generally referred to as open coding and axial coding, respectively (Corbin & Strauss, 1990). After the creation of descriptive codes and themes, I entered my fifth step of analysis that included organizing the data and counting the frequency of codes. Thus, I completed my matrix that included the themes and codes in rows, followed by quotes that illustrate each theme in the corresponding column. This cross-case analysis included all relevant, further-reduced data and condensed it coherently into one place in order to explore data across cases. I created a summary matrix to include in this study (See Table 5 for summary matrix).

In summary, the process of qualitative analysis followed the steps outlined by Miles and Huberman (1994) and involved making notes, identifying codes, reducing codes to themes, clustering and counting, and exploring data across cases. Initial conclusions were checked back against transcripts and I was once again careful to note emerging codes and themes that may have contradicted any initial conclusions.

Table 5  
*Summary of Coding Scheme*

Themes	Codes	Sub-codes	Frequency of Cases in Stories Rated High on Affect Transformation (4-6) (n=45)	Frequency of Cases in Stories Rated Low on Affect Transformation (0-3) (n=51)
Generativity	Shift from focus on self to focus on others		23	3
	Aspiration to make a contribution	Family Community Society	15	1
Family Support	Unconditional support		21	2
	Source for advice and communication		16	3
Community Engagement	Opportunities for participation within the community	Co-op Community programs	14	0
	Relationships within the community	Non-familial adults Peers	19	5

## Results

### Quantitative

**Preliminary analyses.** Preliminary analyses were conducted to determine the normality of the data and to see if the number of predictors in the study could be reduced.

**Tests of normality.** All of the distributions were tested for normality. Although not all statistical tests require normality, based on the Central Limit Theorem it is assumed in multiple regression analyses that data are normally distributed. The assumption of normality requires that the sample distribution approximates the normal distribution and is not skewed in either the positive or the negative direction. Skewness is the degree of departure from symmetry of a distribution. A positively or negatively skewed distribution violates the assumption of normality (Fox, 1997). Kurtosis is another indicator of normality and is the degree of peakedness of a distribution (Fox, 1997). Skewness was determined in this study based on whether the level of skewness exceeded the critical value of .503 and kurtosis was determined based on whether the level of kurtosis was less than or equal to -.78 or greater than or equal to 1.33. All critical values were obtained from skewness and kurtosis critical value tables, which provide the critical values for different selections of alpha and for various samples sizes.

Distributions for many of the variables being included in this study were skewed and therefore violated the assumption of normality (See Table 6). To facilitate the examination and modeling of data, data transformations were conducted in order to normalize the distributions. To transform the data, all negatively skewed cases were squared and all positively skewed cases underwent logarithmic transformation to the base of 10. Data transformations were conducted using SPSS and based on suggestions

by Fox (1997). After conducting data transformation, each variable met the assumption of normality except for the dimension of personal growth (See Table 6). For the purpose of this study, personal growth was included in the analyses; however, findings relating to personal growth should be interpreted critically. All tables indicate whether a variable was successfully transformed and which method of transformation was used to meet the assumption of normality.

The means, medians and standard deviations for the standardized measures and the narrative dimensions were also calculated and they are included in Table 6. Means for standardized measures were moderately high for prosocial behaviour, family functioning and sense of community, while the mean for hyperactivity was moderately low. Mean scores were in the middle to high end of the range for most dimensions.

*Preliminary correlational analyses.* Correlational analyses were conducted to determine if the number of predictors in this study could be reduced or a composite measure could be formed. Correlations were tested between the predictor variables at Grades 3, 6 and 9 and also between each predictor variable and the dimensions of turning point stories. Preliminary results indicated that the predictor variables were not highly correlated, as only two correlations between predictor variables were significant (family functioning and sense of community and sense of community and self-esteem) and the significant correlations were fairly weak. Thus, each predictor primarily taps into different dimensions and a composite measure could not be formed (See Table 7). In addition, prosocial behaviour, hyperactivity, self-esteem and family functioning at Grade 9 were the only predictor variables that were significantly correlated with turning point story dimensions. To reduce the number of predictors in this study, as well as to increase

the power of the findings (See Methods Section), the insignificant predictor (sense of community) was not included in future analyses and only the predictors found to be significant were included (prosocial behaviour, hyperactivity, self-esteem and family functioning).

Table 8 shows the intercorrelations between turning point story dimensions. All intercorrelations were significant, with correlations ranging from .43 to .75. The strongest correlation was between ending resolution and personal growth ( $r=.75$ ), while the lowest was between ending resolution and specificity ( $r=.43$ ).

Table 6

*Means, Medians, Standard Deviations, Ranges, Skewness and Kurtosis of all Measures*

Predictor Variables at Grade 9							
	N	$\bar{X}$	M	SD	Range	Skewness	Kurtosis
Prosocial Behaviour (youth self-report)	75	11.3	11.3	4.0	0-20	-.214	.188
Self-esteem (youth self-report)	74	16.3	17	3.14	6-20	-1.010*	.941
Squared Self-esteem	74	320.3	324	68.2	.70-1.30	-.410	.942
Hyperactivity (teacher rated)	56	4.1	3.9	4.5	0-14	.941*	-.399
Log (10) Hyperactivity	56	.50	.48	.42	1-1.18	.111	-.579
Family Functioning (parent rated)	88	23.8	24	2.7	17-28	-.267	-.565
Sense of Community (parent rated)	87	9.1	9	2.5	5-20	1.037	3.294*
Sense of Community Log (10) Sense of Community	87	.94	.95	.12	.70-1.3	-.097	.322
Young Adult Turning Point Story Dimensions at Grade 12							
Affect Transformation	96	3.1	3	1.7	-1-6	-.399	-.641
Coherence	96	2.3	2	.8	0-3	-.644*	-.384
Squared Coherence	96	5.7	4	3.10	0-9	-.124	-.692
Meaning Making	96	2.3	3	.9	0-3	-.909*	-.368
Squared Meaning Making	96	5.9	9	3.48	0-9	-.463	-.762
Personal Growth	96	1.5	2	.7	0-2	-1.135*	-.155
Specificity	96	3.3	3	1.3	1-5	-.232	-.651
Ending Resolution	95	3.3	3	.8	1-4	-.952*	.329
Squared Ending Resolution	95	11.7	9.00	4.62	1-16	-.498	-.755

Notes. \*value exceeds skewness critical value of .503 indicating skewness or kurtosis critical values of -.78 or 1.33



Table 7

*Intercorrelations between Predictor Measures*

Predictor Measures	Log (10) Hyperactivity	Prosocial Behaviour	Family Functioning	Log (10) Sense of Community
Squared Self-esteem	-.038	.082	.013	-.218*
Log (10) Hyperactivity		-.253	-.117	-.143
Prosocial Behaviour			.002	.188
Family Functioning				-.278*

Notes. \* $p < .05$

Table 8

*Intercorrelations between Turning Point Story Dimensions*

	Squared Coherence	Squared Meaning Making	Personal Growth	Specificity	Squared Ending Resolution
Turning Point Story Dimensions					
Affect Transformation	.664**	.623**	.658**	.658**	.611**
Squared Coherence		.632**	.620**	.735**	.618**
Squared Meaning Making			.559**	.504**	.593**
Personal Growth				.467**	.751**
Specificity					.433**

Notes. \*\* $p < .01$

**Correlational analyses.** Tables 9 and 10 illustrate the relationships between turning point story dimensions and standardized outcome measures. I found that prosocial behaviour was significantly correlated with affect transformation ( $r=.280$ ,  $p<.05$ ), coherence ( $r=.315$ ,  $p<.01$ ), meaning-making ( $r=.258$ ,  $p<.05$ ), specificity ( $r=.268$ ,  $p<.05$ ) and ending resolution ( $r=.259$ ,  $p<.05$ ). Hyperactivity was significantly negatively correlated with meaning making ( $r= -.275$ ,  $p<.05$ ), personal growth ( $r= -.295$ ,  $p <.05$ ) and ending resolution ( $r= -.279$ ,  $p<.05$ ). Self-esteem was significantly correlated with meaning making ( $r=.204$ ,  $p<.05$ ), personal growth ( $r=.229$ ,  $p<.05$ ) and ending resolution ( $r=.251$ ,  $p<.05$ ). In addition, family functioning was significantly correlated with affect transformation ( $r= .284$ ,  $p <.01$ ) and meaning making ( $r=.261$ ,  $p<.05$ ).

**Regression analyses.** Simultaneous multiple regressions were run using prosocial behaviour, self-esteem and family functioning as predictors of each narrative dimension. Due to the low sample size for the hyperactivity measure ( $n=56$ ), it was not included as a predictor in the regression analyses. I found that prosocial behaviour was a significant predictor of affect transformation ( $\beta = .321$ ,  $p<.01$ ), coherence ( $\beta =.341$ ,  $p<.01$ ), meaning making ( $\beta=.272$ ,  $p<.05$ ), specificity ( $\beta=.313$ ,  $p<.01$ ) and ending resolution ( $\beta=.277$ ,  $p<.05$ ). Family functioning significantly predicted affect transformation ( $\beta = .275$ ,  $p<.05$ ) and meaning making ( $\beta= .273$ ,  $p<.05$ ). Self-esteem was not significant with any of the turning point story dimensions. The model for affect transformation, coherence and meaning making was significant at the .01 alpha level and personal growth, specificity and ending resolution were significant at the .05 alpha level. In addition, prosocial behaviour, self-esteem and family functioning accounted for between 12% and 18% of the variance in the outcome measures (dimensions of turning

point stories). Specifically, prosocial behaviour, self-esteem and family functioning accounted for 18.3% of the variance in affect transformation, 18.1% of the variance in coherence, 16.9% of the variance in meaning making, 14.6% of the variance in specificity, 14.2% of the variance in ending resolution and 12.2% of the variance in personal growth.

Table 9

*Correlations between Predictor Variables at Grade 9 and Grade 12 Turning Point Story Dimensions*

Turning Point Story Scene Dimensions	Predictor Variables			
	Personal Behaviour (youth self-report)	Personal Log (10) Hyperactivity (teacher rated)	Contextual Squared Self-esteem (youth self-report)	Contextual Family Functioning (parent rated)
Affect Transformation	.280*	-.184	-.022	.284**
Squared Coherence	.315**	-.221	.097	.154
Squared Meaning Making	.258*	-.275*	.204*	.261*
Personal Growth	.207	-.295*	.229*	.209
Specificity	.268*	-.166	-.048	.163
Squared Ending Resolution	.259*	-.279*	.251*	.136

Notes. \* $p < .05$ , \*\* $p < .01$ , Prosocial Behaviour ( $n=75$ ), Hyperactivity ( $n=56$ ), Self-esteem ( $n=74$ ), Family Functioning ( $n=88$ )

Table 10

*Simultaneous Regression Predicting Young Adult Turning Point Story Dimensions from Grade 9 Prosocial Behaviour, Self-esteem and Family Functioning*

Turning Point Story Scene Dimensions	Grade 9 Predictors			Overall Model <i>F</i> (df)
	Personal	Contextual		
Affect Transformation	Prosocial Behaviour <i>B</i> (Beta) .142 (.321)**	Squared Self-Esteem <i>B</i> (Beta) -.002 (-.067)	Family Functioning <i>B</i> (Beta) .174 (.275)*	<i>R</i> <sup>2</sup> .183 5.151** (3, 72)
Squared Coherence	.266 (.341)**	.005 (.118)	.238 (.214)	.181 5.088** (3, 72)
Squared Meaning Making	.229 (.272)*	.006 (.133)	.328 (.273)*	.169 4.692** (3, 72)
Personal Growth	.040 (.212)	.002 (.209)	.046 (.171)	.122 3.198* (3, 72)
Specificity	.104 (.313)**	-.001 (-.074)	.100 (.209)	.146 3.930* (3, 72)
Squared Ending Resolution	.323 (.277)*	.014 (.211)	.194 (.118)	.142 3.741* (3, 72)

Notes. \**p* < .05, \*\**p* < .01

## Summary of Hypotheses

**Hypothesis 1.** Hypothesis one indicated that prosocial behaviour in Grade 9 would be directly associated with the meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12. There was some evidence to support this hypothesis, as Pearson correlations indicated that prosocial behaviour was positively correlated with affect transformation ( $r=.280$ ), coherence ( $r=.315$ ), meaning making ( $r=.258$ ), specificity ( $r=.268$ ) and ending resolution ( $r=.259$ ). In addition, simultaneous multiple regression analyses indicated that prosocial behaviour in Grade 9 significantly predicted meaning making ( $\beta=.272$ ), coherence ( $\beta=.341$ ), specificity ( $\beta=.313$ ), ending resolution ( $\beta=.277$ ) and affect transformation ( $\beta=.321$ ).

**Hypothesis 2.** Hypothesis two indicated that teacher-rated measures of hyperactivity in Grade 9 would be directly associated with meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12. There was some evidence to support this hypothesis, as Pearson correlations indicated that teacher-rated measures of hyperactivity in Grade 9 was significantly negatively correlated with the dimensions of meaning making ( $r=-.275$ ), personal growth ( $r=-.295$ ) and ending resolution ( $r=-.279$ ) in Grade 12.

**Hypothesis 3.** Hypothesis three indicated that self-esteem in Grade 9 would be directly associated with meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12. There was some evidence to support this hypothesis, as Pearson correlations indicated that self-esteem in Grade 9 was significantly correlated with various turning point story

dimensions, such as meaning making ( $r=.204$ ), personal growth ( $r=.229$ ) and ending resolution ( $r=.251$ ) in Grade 12. However, simultaneous multiple regression analyses indicated that self-esteem did not significantly predict any turning point story dimensions.

**Hypothesis 4.** Hypothesis four indicated that parent ratings of family functioning in Grade 9 would be directly associated with meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12. There was some evidence to support this hypothesis, as Pearson correlations indicated that parent-rated family functioning in Grade 9 was significantly correlated with the dimensions of affect transformation ( $r=.284$ ) and meaning making ( $r=.261$ ) in Grade 12. In addition, simultaneous multiple regression analyses indicated that family functioning significantly predicted affect transformation ( $\beta=.275$ ) and meaning making ( $\beta=.273$ ).

**Hypothesis 5.** Hypothesis five indicated that parent ratings of sense of community in Grade 9 would be directly associated with meaning making, coherence, specificity, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12. This hypothesis was not supported, as parent ratings of sense of community in Grade 9 were not significantly correlated with any dimensions of turning point stories in Grade 12.

### **Qualitative**

Many participants began the narration of their turning point story with a discussion about how challenging, traumatic, or difficult their turning point event was for them. However, as participants continued to narrate their stories, often a shift occurred



whereby the participants began to discuss new outlooks they gained from the situation or positive outcomes they experienced as a result of going through what they went through. I was interested in exploring the mechanisms that facilitated this shift in outlook and experience of positive outcomes. Based on my use of an explanatory sequential design, I analyzed the qualitative data independently from the quantitative data. To organize my findings, I used a matrix analysis to show how the different themes and codes that were identified were illustrated in stories that were rated as being low or high in affect transformation (story shifts from something that is initially challenging or negative to a positive outcome in the end). Three main themes were evident that facilitated positive outcomes in young adult turning point stories: (a) the theme of generativity, (b) family support, and (c) community engagement. I will discuss each theme in more detail below along with samples of quotes that represent each theme that was identified.

**Generativity.** The theme of generativity was the most prevalent theme in young adult turning point stories. Young adult turning point stories that indicated a high level of affect transformation revolved around the overall goal of caring for others and the survival, well-being, and development of human life in succeeding generations. Central to this theme in the current study was a shift in focus from the “self” to a focus on “others”, and the aspiration to make a contribution to a family, community, or to society. In the following section, I will outline in more detail how generativity was shown to facilitate positive outcomes in turning point stories, by describing each code and sub-code that was found within each theme.

The first code within the theme of generativity was the “shift from a focus on self to a focus on others”. As previously stated, many of the young adults’ turning point

stories began with a discussion about how challenging, traumatic, or difficult their turning point event was for them. Naturally, this discussion tended to revolve around the “self” and the personal feelings, often negative feelings, which were associated with the turning point event. However, as young adults proceeded to narrate their stories, many of them began to talk about the positive outcomes they experienced as a result of this initially challenging event. This move from a primarily negative focus to a primarily positive focus was often facilitated by a clear shift from a focus on self to a focus on others. For example, one young adult described her turning point event as when her sister got kicked out of school for fighting on her behalf. She began her story with a description of her feelings, which were primarily negative.

I think a significant part of my life that changed was uh, when my sister actually got kicked out of high school for me because she got into a fight to defend me...She actually lost a scholarship for me so I felt bad...So I kind of feel like, it was my fault why she didn't get to go to her dream school.

However, as she proceeded to tell her story she began to take the focus off of herself and to place it on others. She said:

I stopped caring about just me, and I started thinking more about, like, the way everything, like, affects everyone else. Honestly from then on it's like okay honestly these fights and stuff have to like stop, my sister got herself kicked out of high school, for me, like that's like crazy and not cool....Then from then on it's just like honestly, I'm going to stop this. Like for someone to maybe get killed over like an argument or a fight like, that's not worth it...I am better than that.

In this story, the young adult's shift in focus away from herself and onto others was accompanied by a shift from a primarily negative focus to a more positive focus. The young adult realized her potential, as indicated by the statement “I am better than that”, and decided that she no longer wanted to be involved in fights.

Another young adult's turning point story focused on the time when the young adult learned that he was going to be a dad. In this story, the shift from a focus on self to a focus on others helped to settle feelings of fear and anxiety associated with the unplanned pregnancy. He began his story with a description of primarily negative feelings. He stated:

Honestly, probably the best way of putting this is that I didn't know what to think. I was scared, very scared. I am against abortion so I already knew for sure the kid was staying...I was wondering if I was going to be a good dad or not and if (girlfriend) and I were going to stay together.

However, the story became more positive after the emphasis in the story shifted off of the young adult and onto his child. He said:

Maturity wise it felt like I was getting better. My responsibilities were getting more prioritized. Okay I am making money, I should save it I am not going to go spend it. Now there is a little one growing inside her stomach and it is not about me anymore it is about her (baby). I was really excited as the days went on...and now that she is born, I feel like I was ready and I am proud and I have this feeling inside like I am proud to be a dad.

In this story, the shift off of himself and onto his daughter helped to settle his fears and anxiety and led to the positive outcome of feeling proud to be a dad.

Some young adults did not demonstrate this same shift from a focus on self to a focus on others, and accordingly those turning point stories were often rated as low on affect transformation. For example, in one young adult's turning point story that was about getting kicked out school for fighting, similar to the previously described story, she stated:

Like screw school, like screw this like, I don't want to be here like I don't care about like- no one, everyone can say they care and shit and it's just like I don't care like what they have to say to me....Like I was just like I'm going to do what I want and like you're not going to like stop me.

The focus of this young adult's turning point story remained on the "self". Accordingly, this young adult's story began and concluded on a negative note and she did not discuss positive outcomes or things that she learned from the experience.

A second code was the "aspiration to make a contribution." Generativity was also illustrated by a young adult wanting to make a lasting contribution that would benefit others or improve the future of successive generations. In particular, young adults mentioned wanting to make a contribution to their family, community, or to society in the future and in turn, this aspiration facilitated the development of positive outcomes. For example, one young adult's turning point story was about when his girlfriend broke up with him un-expectedly. He began his story with a description about how upset he was about the event. The young adult said:

Well, my girlfriend broke up with me without giving me a- me a reason. I found out about it and I came home and I was crying and I refused to go to school because of how broke down I was, uh people, my friends were scared for my life my mom thought I was suicidal.

However, the story slowly shifted to becoming more positive when he began to talk about how the event helped him to realize that he can have a positive impact on others and in particular his family.

Then I thought about it and realized I felt, more open to the world around me and, eventually I just felt like I needed to do, do something more than just walk around people and make jokes. I wanted to help others, so I came home and started helping my mom more with uh with the stuff she's doing now which is uh, she baby-sits and she helps with her work and everything. I help with her volunteering work. Our garden...I want to while I'm here just give people more of an impression of who I really want to be and who I actually am. That's what I started doing and uh ever since I've just been someone I can actually go to sleep at night, believing I've done some good during the day so that- that's just become part of who I am now.

In this story, the young adult's aspiration to make a contribution to his family facilitated affect transformation, whereby the young adult concluded his story by explaining how he felt proud about who he had become. In another story, the young adult's aspiration to contribute to her community helped her to feel more positive about her son who has a disability. She began her turning point story by discussing the "hurt" she feels about being a single mom to a child with a disability. "I'm here, I'm trying to do better, and I have a son who is disabled and it hurts me." However, as the story progressed she indicates how her son helped to motivate her to make a contribution to her community, so that her son can live peacefully and have a good future.

I mean it's the only thing that keeps you up, and it's the only thing that kind of keeps you, keeps your head up high and because of him, you want to um get involved in the community, you want your community to be better because you don't want anything to happen to him. So, it's like, it's a motivation that gets you going, it gets you going, it gets you to think as to what you can do better, to improve the environment so that your son can live peacefully, because you don't want a bad future for him. You want him to do better than what you went through...there's so many children out there with disabilities that need help and with just a simple pair of hands, you can do so much, I mean no one ever thinks about the many things that they can do to help, to help out our community.

This story concluded on a positive note, when the young adult indicated how her newly formed perspective will be helpful to her in the future. She said: "It's changed me a lot in my sense of thinking, and I think it's gonna' really help out into the future."

Lastly, generativity was also illustrated by the aspiration to make a "contribution to society" more generally. For example, one young adult's turning point story was about being forced to take a leadership program at school. He discussed being "resentful and stigmatized" for being chosen for the program. However, the story took a drastic shift

when he began to discuss how he could use what he learned from the experience to make a contribution to society.

That's when I actually started to mature and realize like just because you're a young black male doesn't mean you have to stick to the status quo society sets for you. You could achieve greatness and uh show folk like look; "here I am a young black male, you know, like yeah, I was in the 'hood, yeah, I seen violence, but it doesn't mean I have to partake in it". It just showed that I could, and hopefully by doing this later on in my life I could come back and like talk to the other young black youths and help them and then maybe someday something will change...I feel good, like, knowing that I can do something...that I can do that.

This young adult's turning point story shifted away from the initial negative feelings that were associated with the turning point event and became more positive when the young adult became aware of his aspiration to contribute to society. The young adult indicated that he felt good knowing that he could help change the status quo by helping other young black youth.

**Family support.** It was evident that the family also acted as a mechanism in turning point stories to facilitate affect transformation. In stories that were rated "high" on affect transformation, young adults indicated the family as a source of support that not only helped them to get through the experience, but also helped them to view the experience in a more positive way. In particular, the family acted as a source of support in two different ways. The family provided unconditional support to young adults, and the family acted as a source for communication and advice. Each of these codes will be discussed in more detail below.

In stories that were rated as high on affect transformation, young adults often perceived their family to be a source of "unconditional support." In other words, young adults indicated the perception that their family does not only support them when things

are going well or according to a particular plan, but also when things are challenging or difficult. Accordingly, young adults indicated that the unconditional support provided by a member(s) of their family helped them to view their turning point event differently. For example, when one young adult was discussing her turning point story about her first year in university and how the pressure led her to often “panic and go home crying”, she indicated that the unconditional support provided to her by her parents helped her to calm down and realize that things would be all right. This young adult’s perception of unconditional support provided to her by her parents is illustrated in the quote below.

(Parents would say) just do your best, we don’t care if you don’t like make it to this or that, so, they’ve really been like my support group...They calm me down like right away because it feels just like you’ve got someone who will love you no matter what, so, why, why like worry so much about something that’s either not in your hands or that you did your best at.

In another turning point story, the young adult also perceived her family to be a source of unconditional support. However, this story was about a young adult’s decision to quit her current job and go back to school to become a hair stylist. The young adult indicated being stressed and unhappy because she wasn’t sure that she had made the right decision to leave her job. However, she suggested that the unconditional support provided to her by her parents helped her to find happiness again. The perception of unconditional support is evident when the young adult said, “like my parents, like they’re- they’re like, do whatever you want as long as you love it. And like because of that now I’m happy...and I think that’s what counts.” In this case, the unconditional support acted as the mechanism that helped her to find happiness in the challenging situation.

Whereas in some turning point stories, such as the stories described above, the unconditional support provided by families helped young adults to transform a negative

experience into a more positive experience, in others the lack of unconditional support made an already challenging situation more challenging. Accordingly, in stories that were rated as low on affect transformation, the perception of unconditional support from the family was often not evident. In some stories there was simply no mention of family support whatsoever, while in others a lack of unconditional support was more explicit. For example, in one story a young adult was describing how she had been raped by one of her co-workers. She described how bad the event was for her and how she felt like it was her fault. She said, “Seriously when it happens, you seriously think it’s your fault...after I was puking and oh, it was so bad.” This young adult continued to discuss the aftermath of this event and the lack of unconditional support she received from her mom. She said, “I got raped by one of my co-workers, but I think what affected me the most, like when my, six months later my mom kicks me out when I had just been through that.” In this story there was a lack of unconditional support provided to the young adult throughout the turning point event, as well as there was a lack of affect transformation or positive outcomes in the turning point story.

In some circumstances, the family acted as a “source for communication and advice.” In stories that were rated “high” on affect transformation, young adults often indicated communicating to a family member(s) in order to vent about a situation and in turn, also indicated receiving advice that promoted positive outcomes in their turning point event. For example, one young adult’s turning point story was about a challenging end to a friendship with her best friend. The young adult described how difficult the situation was and how she felt depressed after choosing to end the friendship.



It was just hard and I went through mad (used to mean extreme, not the emotion) depression...Just always crying and just not knowing what to do with yourself like, all I was doing was drinking and trying to take away my problems and stuff ... it was just hard, because you're body just feels like it wants to die. It was bad.

The story shifted to a more positive focus when the participant decided to use her sister as source for communication and support. Accordingly, the young adult describes how the event has led to positive outcomes, such as gaining strength and individuality.

Then I decided to talk to my sister. She pulled me out of it and she told me to like, look on the bright-side, you know who you can trust and who you can't, like so I, that's why I always stuck with (sister) because I always, I have always known her obviously since I was born, so I always trust her... and now I am stronger, it made me grow up, it made me look at people differently, who are trustworthy and who are just back stabbers....and I am more of an individual.

In another story, the young adult also indicated how using her family as a source for communication and advice helped her to find positivity within a challenging situation. In this story, the young adult's turning point event was the birth of her daughter, which had taken place when she was a teenager, and was initially unwanted. The young adult indicated being overwhelmed with the situation when she said: "That's when my whole life changed and I became like adult right away. Like I knew I needed to grow up and fend for myself and have a job you know? You just see all the responsibility that comes, and it is scary." However, she later indicated that talking to her mom helped her to get through it and to make her stronger and more responsible.

I really think it was meant to be. 'Cause like I'm not saying it was easy but it was like it, you know like we did have our rough times where there was times when we were really broke and we did need help you know? But um, if I needed help like I said I usually would call- like I still call my mom to talk it out with her. She has helped make me really responsible... You know like it's made me stronger.

In addition to the family acting as a positive source for communication, in some stories the lack of support and communication within families promoted deterioration, or

as described above, worsened the already challenging situation. For example, in one story also about a teen pregnancy, the young adult talked about how she is going to miss out on her “20’s” because she got pregnant. “Now, after 18 years of my life I give up, I’m basically not going to have 20’s now.” The story continues to be negative when she indicates that her dad won’t listen or try to understand her. “I’m not going to get an abortion, that’s what my dad wants, I’m 4 months, where am I going to go get an abortion? I have tried to tell him that I am not getting it, but he won’t listen, like ever. That’s like, all we talk about.” The story concludes on a negative note when she says: “I’m not going to have my life, my life is over.” In this story, the young adult indicated being frustrated with the lack of positive communication she has with her dad about her pregnancy. Accordingly, the story began and ended with negative statements related to the pregnancy.

In another story, a young adult discussed his “coming-out about being gay” and the lack of support he received from his family. The young adult said:

We got in the biggest fights and, like I said we didn’t talk for a year. Um, it was probably the hardest time. Uh what everyone thought my grandparents too. Like my grandfather pulled me into his shed one day, and like, shut the door and, why are you gay? What do you think you’re doing? You’re supposed to have kids that’s what, you’re supposed to be doing these days and blah blah blah. Like I didn’t even know what to say like, that day like just made me, stop talking to them. And my dad like I just, I couldn’t do it...like I am not doing anything wrong, but I feel like I am.

In this young adult’s turning point story, the lack of unconditional support received from his family was also associated with a lack of positive communication within his family. Accordingly, there was low affect transformation in this young adult’s turning point story.

**Community engagement.** The theme of community engagement was also evident in young adult's turning point stories. In particular, community engagement was illustrated by the codes "opportunities for participation within the community" and by "relationships within the community". For example, young adults who told turning point stories with high affect transformation often mentioned how an opportunity to participate within the community or how particular relationships within the community encouraged them to find positivity within their turning point event. The theme of community engagement will be discussed in more detail below.

In discussing their engagement to the community, young adults often described how participating in various aspects of the community was helpful or useful. For example, young adults discussed how participating in co-operative (co-op) placements within the community, as well as participating in community programs (programs offered at an organization or centre within the community) helped them to gain a new outlook in life or to see the positive within a challenging situation. An example of how participation in a co-op placement helped to facilitate affect transformation was illustrated in a young adult's turning point story about being diagnosed with an anxiety disorder. The young adult began her story by stating, "the diagnosis made me feel helpless and like I had a big sticker slapped across my forehead." However, her story shifted to becoming more positive when she began discussing her participation in a co-op placement in the community with people with disabilities.

When I went to co-op I thought, well I really like this...They're so fun and loving and they always help each other out. And I was just amazed by how positive all their energy was and how happy they were. 'Cause I always thought, oh people who are handicapped they're probably depressed...But working there, they're still normal people. I have social anxiety, they have, you know, they're autistic or there's one girl, she's schizophrenic. You know, it doesn't make you

less of a person, she can still think, she can still feel, still have fun. And I actually miss it, I really miss it, and I thought well, maybe, I don't have community hours yet, so maybe I could go back and do community hours there....it made me realize that I'm a stronger person, that I don't have to give up just because I have anxiety.

In this turning point story, the co-op placement facilitated a positive change in how the young adult perceived herself. Participating in the co-op placement helped to facilitate a shift from viewing her anxiety as something that made her different in a negative way, to something that made her unique in a way that she feels good about.

In another turning point story, the young adult described how her involvement in a community program helped her to regain her feelings of self-worth after dropping out of high school.

(Name of community program) really made me realize that they believe in me, they made me realize that I can do these things, I'm not hopeless. Cause I always used to say, oh I'm useless, I'm worthless, I can't do anything, what's the point, you know? And at (name of community program), they got me to cope, they got me integrated. They kind of made me believe in myself again, type of thing? I didn't think I could do anything, I didn't think I would graduate and now it's like oh my god, I'm actually going to graduate. It may be later, but I'm still doing it. It's better than people who just drop out and give up.

In this story, the feeling of being integrated within a community program facilitated personal transformation and promoted the positive outcome of deciding to go back to school.

Relationships within the community also helped to facilitate affect transformation within young adult's turning point stories. In addition, there were various forms of relationships that young adult's discussed. Primarily, young adults indicated relationships with non-familiar adults and peer relationships to be particularly helpful or useful when experiencing a turning point event. For example, one young adult's turning point story

was about getting his first job and the challenge he experienced balancing his work and school life. He began his story with a description of how difficult it was and how unsure he was that he could maintain his grades. However, he indicated that his relationship with his two bosses helped him to stay motivated and to graduate from high school. This was evident when he said: “When I first started working for (name) and (name), they always pushed me to do good in school, no matter what...they pushed me, pushed me, pushed me, never gave up on me...So, now I have graduated.” In another story, the young adult indicated how his peers helped him to get back on track after he experienced a severe illness. He said: “But then I remembered all the people that hung out with me and that I had a great time playing sports with...that helped me turn back on track towards my future.”

The role of peers in facilitating affect transformation was illustrated in another young adult’s turning point story about her friend being murdered. She stated, “...it affected me a lot... it did hurt when he died and I wasn’t, I felt kind of lost in that moment.” As the young adult continued to tell her story, she discussed how her relationship with a friend helped her to use the event as a learning experience.

She says:

I got to her house as soon as I can and then, I just stayed with her for 2 days just, crying and just, thinking of life and, things that we can change so we don’t end up the same way...even though it’s sad that I- that he’s gone it, it has um, made me reflect on life and made me, change the way, the things that I was doing and my point of view on life. And she and I talked about what we can do to make it better.

In the previously described stories, relationships with non-familiar adults and peers helped to transform negative feelings and perceptions associated with a turning point event into more positive feelings. In addition, these relationships facilitated the

development of positive outcomes despite the experience of challenging situations. The absence of positive relationships with non-familiar adults and peers had a negative influence on young adult turning point stories. Young adults who told stories that were rated as being low on affect transformation either did not indicate a relationship with non-familiar adults and peers, or indicated a less positive relationship. For example, one young adult indicated that his turning point story was about moving to a new house and community. At the beginning of his story, he discussed how when he started at his new school he began to do a lot of drugs and to drink more often. He proceeded to explain why he started this behaviour.

When I got into the school I, I was basically an outsider to the world ...I guess I was living a lifestyle that I really didn't want to get into, but since the people that I were uh hanging out with did a lot of these things, I um, basically got influenced into doing it.

In this story, the young adult's experience of being an outsider to the world, combined with the formation of less healthy peer relationships, led him into an undesired lifestyle. Although the young adult shed some insight into why he began this less healthy lifestyle, he concluded his story in such a way as to indicate that he had little hope that he would be able to exit this undesired lifestyle. He stated: "There aren't really people here who don't do that stuff, so I guess that I uh, well uh, I guess that is just the way it is going to be for me." Accordingly, this story indicates how a lack of positive peer relationships is associated with a lack of affect transformation in young adult's turning point stories. Similarly, in another turning point story also about a move to a new community, a young adult's lack of connection to people within the community negatively influenced his ability to feel settled and positive in his new neighbourhood. For example, in discussing the challenging experience of moving to the new community, the young adult stated:

When I moved here, like here people don't go outside and play basketball. That doesn't happen here...That's what I realized when I moved to (location name) that it's different. Most people do go to school, but they come home and go on the computer...so that is just what I do now...it kinda sucks.

It is evident in this story that the young adult's lack of community engagement and connection to people within the community was associated with the young adult's apparent inability to find positivity within a challenging situation.

### **Discussion**

In this section, I discuss and interpret my research findings in more detail. To begin, I provide a description of the usefulness of a narrative approach in helping me to meet the research objectives of this study. Next, I discuss the results regarding the relationship between standardized measures of well-being and dimensions of young adult turning point stories. In the interpretation of the results, I discuss how past research helps to indicate how factors may have had or not had an influence on each dimension. I then provide a more thorough interpretation of my results, with specific attention to the mechanisms found to promote positive outcomes in young adult turning point stories. After I discuss my overall findings, I outline the limitations of this study as well as the major contributions of this study to practice.

#### **Usefulness of a Narrative Approach**

Narratives, and in particular, turning point stories, have not been widely used as a way of understanding well-being. Previous research has primarily used standardized measures to assess well-being, which do little to allow an understanding of the lived experiences of adolescents and young adults.

The examination of youths' turning point stories in this study provided useful information on three levels that helped me to meet the research objectives. Firstly,

because previous research has indicated that narrative dimensions are correlated with indicators of well-being, including individual happiness (Bauer & McAdams., 2004), life satisfaction (King et al., 2000), and emotional well-being (Pals, 2006), quantitatively examining the relationship between factors in adolescence and dimensions of young adults' turning point stories provided a general understanding of what factors in adolescence contribute to the well-being of young adults.

The second way in which young adults' turning point stories were valuable to this study and in helping me to meet the research objectives was at the level of qualitative analysis. An exploration of the young adult turning point stories as a whole allowed for a greater understanding of the particularities of their experiences, specifically with relation to problem-solving and coping strategies. Accordingly, I was able to explore in more depth how predictors may have facilitated positive outcomes in turning point stories.

Thirdly, the use of narratives in this research was essential in helping me to use a strengths-based approach to identify key components for prevention programs. Collecting narratives provided a space for young adults to tell their own stories in a way that was personally meaningful. In doing so, young adults were empowered to reflect on personal life goals, dreams and plans that would help them in their transition into adult roles. Thus, a narrative approach empowered young adults to generate information about how personal beliefs, knowledge, identity and life experiences have shaped their life story, which was critically important in this study in helping me to understand what young adults need for healthy development and well-being.



In the following section, I discuss the results in relation to the first objective of this study, which was to examine the predictors of dimensions of young adults' turning point stories that are reflective of well-being.

### **Relationship of Turning Point Story Dimensions to Standardized Measures**

The hypotheses of this study were that standardized outcome measures of hyperactivity, prosocial behaviour, self-esteem, family functioning, and sense of community in Grade 9 would be directly associated with the meaning making, coherence, personal growth, ending resolution, and affect transformation of turning point stories in Grade 12. These hypotheses were derived from resilience theory, which indicates that different factors can promote adaptation to adverse situations. As well, these factors can have a lasting influence on future well-being (Gilligan, 2000; Luthar et al., 2000; Masten & Garmezy, 1985). Findings indicated that four of the predictor measures (prosocial behaviour, hyperactivity, self-esteem and family functioning) were related to various turning point story dimensions. However, one of the predictor measures (sense of community) was not found to be predictive of any turning point story dimensions.

**Personal factors.** At the personal level, prosocial behaviour was found to be positively associated with various turning point story dimensions; specifically prosocial behaviour was positively associated with the dimensions of affect transformation, coherence, meaning making, specificity, and ending resolution in young adult turning point stories. In simple language, adolescents who reported that they engaged in prosocial behaviour in Grade 9 tended to tell stories when they were older that were specific and coherently connected, whereby the events in the story built to a high point,

were dwelled on, and then were personally resolved. In addition, young adults who engaged in prosocial behaviour when they were younger tended to gain more insight into their turning point event and to transform a challenging situation into a positive learning experience.

Based on past research, there are numerous possibilities as to why prosocial behaviour may have had an influence on each of these turning point story dimensions specifically. For example, previous research indicates that adolescents who engage in prosocial acts experience more positive affect, optimism, and improved thriving over the long-term than adolescents who engage in fewer prosocial acts (Caprara & Steca, 2007; Martin & Huebner, 2007). Thus, it may be that adolescents' who engage in prosocial behaviour bring a more positive outlook to challenging situations that helps them to view turning point events as an opportunity to learn important life lessons and gain personal insight from challenging experiences. In doing so, adolescents are able to settle conflicts and emotions associated with the event and to transform negative situations into positive learning experiences.

It is important to note that prosocial behaviour was most significantly correlated with the dimensions of specificity and coherence. One possible explanation for the relationship between prosocial behaviour and these dimensions is that prosocial activities in adolescence provide a context for learning and promote individuals to gain maturity and communication skills (Pancer et al., 2007). For example, prosocial experiences are often volunteer experiences or other experiences that are typically characterized by working with others in a helpful fashion (Hardy & Carlo, 2005; Hart & Fegley, 1995). These types of experiences may build communication skills that become valuable when

articulating and describing a turning point experience.

Overall, the relationship between prosocial behaviour and various turning point story dimensions supports previous research indicating the positive influence of young people's prosocial behaviour on well-being over the long-term (e.g. Caprara & Steca, 2007; Martin & Huebner, 2007). Moreover, the relationship between prosocial behaviour and various dimensions of turning point stories emphasize the need for settings to encourage and create opportunities for adolescents to engage in prosocial behaviour, so as to promote healthy development and well-being over the long-term.

Although hyperactivity was not included in the simultaneous multiple regression analyses, the significant negative correlation between hyperactivity in adolescence and various young adult turning point story dimensions is worth noting. Specially, hyperactivity in adolescence was significantly negatively correlated with meaning making, personal growth and ending resolution in young adult turning point stories. Therefore, there is evidence that lower levels of hyperactivity in adolescence positively influence the way that young adults narrate their turning point event when they are older. The most notable finding was the relationship between hyperactivity and the dimension of personal growth. This finding demonstrates that young adults who experienced lower levels of hyperactivity in adolescence not only viewed their turning point experience as an opportunity to gain insight into the situation, but also indicated positive personal development as a result of the experience. These findings are similar to the findings of Lengua (2003), which indicate that adolescents with lower levels of hyperactivity tend to respond to critical feedback more positively and to integrate feedback into future behaviour more than adolescents with higher levels of hyperactivity. Similarly, previous

research related to hyperactivity in adolescence indicates that adolescents with low levels of hyperactivity experience increased self-control and emotion regulation (Kokkonen & Pulkkinen, 1999). Thus, within the context of the turning point stories, it is likely that lower levels of hyperactivity helped to de-escalate emotions associated with a challenging turning point event, thereby providing the opportunity for young adults to gain insights into the situation and to resolve negative emotions associated with the experience. Lengua (2003) also indicated that lower levels of hyperactivity were associated with positive affect, confidence and optimism. It is possible that individuals with lower levels of hyperactivity carried these assets with them into the situation, encouraging them to use the experience as an opportunity for personal development.

The relationship between hyperactivity in adolescence and various turning point story dimensions demonstrates that hyperactivity influences the way that individuals maintain well-being throughout turning point events in their lives. More specifically, these findings indicate that the level of hyperactivity that one experiences in adolescence influences the way that young adults perceive life events when they are older, as well as how they understand and give meaning and continuity to their lives, which are of prime importance for well-being (McAdams, 2001).

The last personal level predictor that was explored in this study was self-esteem. Pearson correlations indicated that self-esteem was positively associated with various turning point story dimensions, such as meaning making, personal growth and ending resolution. However, simultaneous multiple regression analyses indicated that self-esteem was not a significant predictor of any turning point story dimensions. There are various possibilities that may help to explain these findings.

Firstly, it is important to discuss the possibilities as to why self-esteem was found to be significantly correlated with the dimensions of meaning making, personal growth and ending resolution. Greenier (1999) indicates that adolescents with high self-esteem are likely to view challenging situations as an opportunity to master the environment (Greenier, 1999). One way to interpret Greenier's (1999) finding within the context of turning point stories is that this tendency would promote young adults to view a turning point event as another opportunity to master a situation. For example, young adults with high levels of self-esteem may be likely to search for meaning within their turning point event in order to grow and learn from it. In addition, Greenier (1999) also indicates that adolescents with high self-esteem tend to be less hostile or angry when faced with life's challenging situations. Therefore, it is possible that young adults with high self-esteem were less hostile or angry when faced with their turning point event, which would help them to settle conflicts associated with the event and to demonstrate resolution when narrating their story. Interestingly, although not significant, correlations also indicated a negative relationship between self-esteem and the dimensions of affect transformation and specificity. It is possible that adolescents with high self-esteem may view challenging situations as positive experiences and may be less likely to articulate the negative in an adverse situation. In such a case, a turning point event would be framed as a positive experience and, thus, it would be less likely that the narration of the event would explicitly illustrate affect transformation, as there was no threat to personal well-being or negative experience to transform. However, the latter perspective does not account for the negative relationship found between self-esteem and the dimension of specificity. One possibility for this relationship is that young adults who face

considerably negative turning point experiences may tend to be more descriptive and specific when narrating their story, as the event may have created greater disruption in their life. A young adult with high self-esteem may not feel the same need to be specific and detailed when narrating their turning point event, as the event may already be settled and may not have created as much disruption to their personal well-being. To better understand the relationship between self-esteem and turning point stories, future research could explore the relationship between adolescent self-esteem and the type of turning point stories narrated by young adults. For example, it would be interesting to explore whether individuals with higher self-esteem narrate more positive turning point stories when they are older than individuals with low self-esteem.

Secondly, it is also important to briefly discuss possibilities as to why self-esteem was no longer found to be significant when entered into the simultaneous multiple regression analyses. Often, when a predictor variable is significant in Pearson correlational analyses but not in regression analyses it is due to issues of multicollinearity, which is a statistical phenomenon in which two or more predictor variables in a multiple regression model are highly correlated (Cohen & Cohen, 1983). However, this possibility can be ruled out as self-esteem was not significantly correlated with prosocial behaviour or family functioning. Another possibility may be due to measurement error within the self-esteem scale. When a predictor variable has a lower Chronbach's alpha reliability (internal consistency), then the correlation between the predictor variable and the criterion variables (turning point story dimensions) will be attenuated, that is, smaller than the actual correlation of true scores. Although the Chronbach's alpha reliability of the self-esteem scale was .75, which is larger than the

Chronbach's alpha reliability of .73 that was used in the National Longitudinal Study of Children and Youth, some researchers suggest that Chronbach's alpha reliability for a scale should be .80 or higher. By correcting for attenuation, one can estimate what the true correlation would be if one could measure self-esteem with perfect reliability. If I were to use this measure of self-esteem in future research, I would correct for attenuation to gain a more thorough understanding of the relationship between self-esteem and dependent measures.

**Contextual factors.** The present study adds to the considerable amount of literature indicating that positive family functioning in adolescence influences well-being throughout emerging adulthood (Bell & Bell, 2005; Gray & Steinberg, 1999). Measures of family functioning, a scale designed to capture a family's level of support for one another, openness to emotional expression and communication when the participant was in Grade 9, was positively associated with the dimensions of affect transformation and meaning making in young adult turning point stories. In other words, young adults who experienced positive family functioning in adolescence used their turning point event as an opportunity to learn lessons and gain insights into the situation, thereby transforming the situation from being a primarily negative experience into a more positive experience. These findings are similar to those of Chong et al. (2006), who found that adolescents who perceived their family as being supportive experienced low levels of emotional distress. Moreover, Bell and Bell (2005) found that adolescents from families with strong socioemotional bonds reported higher life satisfaction. It is therefore possible that adolescents from high functioning families feel more confident exploring their turning point story in order to gain new meaning or insights that help to maintain well-being.

There are other possibilities as to how family functioning may influence affect transformation in young adult turning point stories, which will be discussed in more detail in the following section. Nonetheless, the relationship between family functioning and the turning point story dimensions of meaning making and affect transformation stresses the long-term effects of family experiences on well-being. In addition, these findings highlight the important role that the family plays in promoting well-being.

Despite the considerable amount of literature suggesting that sense of community has an influence on well-being (McMillan & Chavis, 1986; Sarason, 1974; Scales et al., 2003), sense of community was not found to predict any dimensions of young adult turning point stories. The main factor likely relating to this finding was the inappropriateness of the scale selected to measure adolescents' sense of community. The scale used in this study was a parent version, which did not directly measure adolescents' sense of community. It is likely that the parent version of this measure did not adequately capture the adolescents' sense of community. This limitation was expected, as no standardized outcome measures used in Grade 9 had measured adolescents' sense of community specifically. Future research should investigate the relationship between adolescents' sense of community and narrative accounts of momentous life events more thoroughly.

Overall, the quantitative results of this study indicate that personal, as well as contextual level factors longitudinally influence the way that adolescents narrate momentous life events when they are older. These results are consistent with the perspective of resilience theory, as the results indicate that different factors can promote adaptation to adverse situations and can have a lasting influence on future well-being



(e.g., Gilligan, 2000; Luthar et al., 2000; Masten & Garmezy, 1985). Moreover, it is interesting to note that prosocial behaviour and family functioning, the significant predictors in the simultaneous multiple regression analyses, were both related to the dimensions of meaning making and affect transformation in young adult turning point stories. These results highlight the particular importance of prosocial behaviour and family functioning in helping young adults to extract positive meaning from experiences and more significantly, helping them to move from an initially negative state to a more positive state. In practical terms, these findings demonstrate the importance for programs aiming to promote youth well-being to actively work and engage with families, as well as to create opportunities for adolescents to meaningfully participate in prosocial behaviour.

By examining the different dimensions of turning point stories, I was able to get a glimpse of how people perceive life events, as well as how they understand and give meaning and continuity to their lives, which are of prime importance for well-being (McAdams, 2001). Furthermore, by exploring the relationship between factors in adolescence and dimensions of turning point stories in young adulthood, I was able to develop a general understanding of what factors may contribute to well-being in young adulthood. In the following section, I highlight the qualitative findings and the ways in which these findings help to explain how the significant predictors in this study may have facilitated positive outcomes in young adult turning point stories.

## **Mechanisms Facilitating Positive Outcomes in Young Adulthood**

The second objective of this study emerged from the quantitative results. I was interested not only in what factors predict the narrative dimensions of young adult turning point stories, but also how factors may have facilitated positive outcomes in young adult turning point stories. To meet this research objective, I looked for the mechanisms that facilitated the dimension of affect transformation in young adult turning point stories. The qualitative component of this study was based on resilience theory and research that emphasizes the importance of mechanisms and understanding how well-being is promoted under conditions of adversity. In this section, I discuss the qualitative findings and how they may relate to the significant predictors that were identified.

**Generativity.** Many of the young adults who experienced a challenging life event or situation and were able to move from an initially bad state to a more positive state demonstrated the theme of generativity in their turning point story. The theme of generativity was particularly interesting, as many authors indicate that prosocial behaviour precedes the display of generative behaviour, which emerges as adolescents settle into their adult roles (Erikson, 1963; Lawford, Pratt, Hunsberger, & Pancer, 2005; McAdams, de St. Aubin, & Logan, 1993). Based on previous research relating to prosocial behaviour and generativity, it is therefore likely that prosocial behaviour in adolescence contributed to the display of generativity in young adult narratives.

There were two different ways that generativity was illustrated in young adult turning point stories to facilitate positive outcomes. Firstly, many young adults indicated a clear shift in focus from the self to a focus on others. For example, young adults indicated a clear moment in which they realized their actions affected others as well as

themselves, or a time in which they started to care about others in addition to themselves. In turn, this shift in focus helped young adults to resolve conflicts and promoted positive outcomes in turning point events. Hardy and Carlo (2005) and Hart and Fegley (1995) indicated that adolescents who engage in prosocial behaviour demonstrate a general care orientation that encompasses responsiveness to human need and to nurture others. Moreover, Frensch (2000) indicated that individuals who engaged in prosocial acts in adolescence continued to engage in acts with a prosocial orientation in adulthood. Thus, it is likely that the care orientation associated with prosocial behaviour in adolescence carried forward into turning point events, and helped individuals to view the situation from an “others oriented” perspective.

Family functioning in adolescence may also have encouraged a shift in emphasis from a focus on self to a focus on others in young adult turning point stories. For example, Frensch et al. (2007) demonstrated that adolescent reports of kindness and caring within their family climate were associated with generative themes in life stories at age 20. A family climate that emphasizes caring and compassion, characteristics captured in the family functioning scale, may have influenced generative development by encouraging adolescents to care for others in addition to themselves. Other authors suggest that generativity emerges from a demand for other-oriented perspective taking (Lawford et al., 2005). This perspective also fits well within the context of this study, as some individuals may have viewed their turning point event as an opportunity to shift their focus off of themselves and onto others. This shift in focus may have created the opportunity for them to gain new insights into themselves and to learn valuable life lessons that helped them to resolve the conflicts within their story.

Secondly, some young adults indicated how an aspiration to make a contribution to a family, community, or to society helped them to transform their negative turning point event into a positive opportunity for self-transformation. For example, young adults indicated that their turning point helped them to see the contribution that they could be making to better the lives of others, which in turn led them to feel better about themselves or their situation, or motivated them to reach their full potential. Prosocial behaviour in adolescence represents a broad category of acts that are defined as being generally beneficial to another person or group (Hardy & Carlo, 2005; Hart & Fegley, 1995), and thus perhaps individuals that engaged in prosocial behaviour in adolescence were more apt to view their turning point event as another opportunity to care for or nurture others. In addition, research indicates that during adolescence personal productivity is more salient than issues of societal concern or generative action (Erikson, 1963) and accordingly, adolescents typically tend to engage in prosocial as opposed to generative behaviour (Frensch, 2000). It is possible that as adolescents entered into adulthood, their focus shifted towards an interest to make a more substantive and lasting contribution to others, which young adults carried with them into times of stress or conflict. In doing so, generativity helped young adults to view turning point events as an opportunity for self-transformation, whereby they could take pride in how their new behaviour was making a lasting impact on others.

The current longitudinal findings suggest that an adolescent's tendency to engage in prosocial behaviour has a lasting influence on well-being. More specifically, prosocial behaviour may influence well-being by encouraging adolescents to use other-oriented perspective taking, as well as motivate adolescents to make a contribution to others.

Such generative perspective taking and action is important, as it helped the young adults in this study to narrate challenging life events in healthier and more positive ways when they were older. Once again, these findings suggest the need for settings to encourage and create opportunities for adolescents to engage in prosocial behaviour, so as to encourage the display of generativity over the long-term and promote the well-being of young adults.

**Family support.** Young adults who transformed a challenging turning point event into a primarily positive experience, as indicated by affect transformation, also often perceived their family to be a source of unconditional support and used their family as a source for communication and advice. Thus, although there are numerous ways in which family functioning may influence affect transformation in young adult turning point stories, this study identified two ways in particular that may have been useful for the young adults in this study.

The present findings suggest that family functioning in adolescence may provide adolescents with the perception that they are unconditionally supported, which in turn helps to promote well-being in challenging situations. This finding is consistent with previous research. For example, Steinberg et al. (1991) suggest that the presence of a secure relationship with parents appears to provide adolescents with a base that leads to feelings of increased support, personal control and efficacy, allowing adolescents to make appropriate choices and take risks, as well as permitting them to cope better with the transition to adulthood. Furthermore, Ystgaard, Tambs, and Dalgard (1999) indicated that people who feel an overall sense of support and encouragement from others grow to feel more worthy and satisfied with themselves and their abilities to overcome life

challenges. It is therefore possible that family functioning in adolescence created a base of support, which helped adolescents to feel safe exploring their turning point events in a proactive way, as well as helped them to feel in control and confident that they could cope with their turning point event.

In addition, family functioning may also be important in the initial working through of difficult or disruptive life events. Young adults with high affect transformation in their stories indicated using their family as a source for communication and advice. For example, many young adults indicated communicating to a family member(s) in order to vent about a situation and in turn, indicated receiving advice that promoted positive outcomes in their turning point event. McLean (2005) found that older adolescents and young adults are more likely to initially share their self-defining memories with family than with peers, and to do so for the purpose of emotional regulation. Previous research and the current findings suggest that parents and other family members have the opportunity to play an active role in how adolescents initially understand their challenging life events. In addition, the advice that young adults indicated receiving as a result of this communication suggests that parents may be able to directly structure the ways that their children think about turning point events, helping them to understand, reconstruct and resolve their difficult life experiences when they are older.

The ways in which family functioning appears to facilitate positive outcomes in turning point stories counters the common belief that once children reach adolescence, they no longer need or want to communicate with their parents (Bell & Bell, 2005; McLean, 2005). Rather, the current longitudinal findings suggest that an adolescent's

family remains important, as earlier family functioning may instill in adolescents a perception that they are unconditionally supported, as well as encourage adolescents to use their family as a source for communication and advice in times of conflict or throughout challenging experiences. Thus, earlier family functioning provides adolescents with the support they need to narrate challenging life events in healthier and more positive ways. These findings emphasize the importance of maintaining a trusting and open relationship with children throughout the period of adolescence and into young adulthood, so as to provide adolescents and young adults with the capacity to maintain well-being throughout turning point events in their lives.

**Community engagement.** Community engagement was the third theme that was identified as a mechanism of positive outcomes in young adult turning point stories. In particular, opportunities for participation within the community, as well as relationships within the community were found to facilitate affect transformation in young adult turning point stories. These findings are similar to those of Barnes (1999), which indicated that extracurricular involvement in the community and quality peer relationships were associated with well-being despite the experience of adverse family situations. However, based on the previous quantitative results that indicated parent-rated measures of sense of community to be an insignificant predictor of turning point story dimensions, I was not expecting to identify this theme within the turning point stories. Nevertheless, given the importance of identifying not only what predictors promote well-being in young adulthood, but also how such factors promote well-being, it is important to discuss the various ways that the predictors may have contributed to positive outcomes in turning point stories.

In discussing community engagement, young adults who told turning point stories with high affect transformation often mentioned how their participation in the community helped them to find positivity within their turning point event. In particular, opportunities to participate in co-operative education placements and programs located within the community were indicated to be particularly useful. Research indicates that prosocial behaviour in adolescence is often displayed through volunteering within the community (Caprara & Steca, 2007; Pancer et al., 2007). It is possible that prosocial behaviour in adolescence, if displayed through volunteering or prosocial acts within the community, may have encouraged adolescents to participate in co-operative education placements and to continue engaging with the community in various ways. Also, previous participation in prosocial activities may have helped adolescents to feel confident accessing different opportunities for participation within the community, as they had previously engaged with the community in other ways. Similarly, Steinberg et al. (1991) suggest that the presence of a secure relationship with parents provides a base that leads adolescents to feel comfortable taking risks. It is therefore possible that high family functioning may have also helped adolescents to feel comfortable exploring different roles within the community.

Young adults also indicated that relationships within the community helped them to better understand their turning point event, to resolve the conflicts associated with the event, and to view their turning point event in a more positive way. Prosocial behaviour, as well as family functioning, have been found to influence the formation of peer relationships (Caprara & Steca, 2007) and friendship-making ability (Vernberg et al. 1994) respectively. It is likely that these factors helped adolescents to develop positive



peer relationships within the community that they could turn to when faced with a challenging situation.

It is important to note that although adult-rated sense of community was not found to be a significant predictor of young adult turning point story dimensions, it may still be possible that the theme of community engagement relates to previous sense of community. With the use of a more accurate measure of adolescent sense of community, it is possible that the predictor would have been more related to dimensions of young adult turning point stories. Nonetheless, these findings further emphasize the important influence that prosocial behaviour and family functioning may have on helping young adults to understand, reconstruct and resolve their difficult life experiences when they are older. Also importantly, these findings highlight the important role that the community plays in promoting the well-being of young adults.

Overall, the qualitative findings support the perspective of resilience theory, which suggests that although some turning point events cannot be prevented from occurring, the presence of certain factors may influence how they are interpreted or handled and ultimately favor or obstruct future well-being. In addition, the findings in this study support ecological theories of human development, indicating that resilience and well-being is a dynamic process that is influenced by many factors at different levels. Similar to Prilleltensky and Prilleltensky (2006), the findings emphasize that well-being consists not just of the personal dimensions, but also being embedded in a network of positive and supportive relationships and participating freely in social and community life.

## **Limitations**

Many of the limitations of this study relate to the use of secondary data. Firstly, the use of secondary data restricted my ability to conduct member checks to ensure data quality. Since the time of data collection, many of the participants in this study had relocated, as well as had not consented to being contacted again for further involvement. In qualitative research, a member check, also known as informant feedback or respondent validation, is a technique used by researchers to help improve the accuracy, credibility, validity, and transferability of the study (Fisher & Anushko, 2008). However, estimates of inter-rater reliability of this study were conducted to help ensure data quality, and were found to be quite high for each turning point story dimension. In addition, steps to qualitative analysis followed the suggestions of Miles and Huberman (1994). Nonetheless, I encourage future researchers to share all findings with the participants for feedback and verification, as well to gain a more thorough understanding of the young adults' experiences. It would also be interesting to qualitatively analyze the stories for each narrative dimension in addition to quantitatively coding each dimension. By doing so, the reliability of each dimension would be increased, and one would capture the participants' voices more fully.

A second limitation related to the use of secondary data was that I was limited to which measures could be used as predictors in this study. Standardized instruments were used to assess predictor variables in Grade 9 (2003-2005) of Better Beginnings and comparison communities (See Appendix C for scales and measures). Consequently, in order to conduct a longitudinal, correlational analysis, I was restricted to using the predictor measures that had been previously used in Better Beginnings research, as

opposed to measures that would best capture the predictors of interest (e.g., parent version of the Sense of Community Involvement Scale as opposed to a youth measure of sense of community). However, the measures that were used in this study had strong reliability and had been found in previous research to relate to the predictors of interest in this study (Davidson & Cotter, 1991; Sarason, 1974; McMillan & Chavis, 1986). Future researchers could expand on this study by exploring other predictors of narrative dimensions, as well as to explore how predictors relate to other types of narratives, for example high points and low points.

The final limitation associated with the use of secondary data was that I did not conduct the interviews with participants. Although I conducted all data analyses, the interviews had been previously conducted by community researchers associated with Better Beginnings. Also, some of the interviewers conducted thorough and thoughtful interviews with the young adults, while others were less thorough, which limited the depth and scope of the responses. In addition, because I did not experience that interaction with the participants, there was a natural level of distance between me and the young adults involved in this study. To help address this issue, I did my best to become as immersed as possible in their stories and consistently reflected on my role as “researcher” in this study. I did my best to capture the young adults’ stories entirely and respectfully. Overall, despite the previously described limitations, the use of secondary data in this study was essential in helping me to meet the research objectives, as it provided the unique opportunity to address a significant gap in literature regarding early predictors of dimensions of young adult turning point stories. Accordingly, the use of

secondary data permitted me to longitudinally explore through the use of a novel approach what contributes to the well-being of young adults.

There are three other limitations of this study that do not relate to the use of secondary data. Firstly, participants in the narrative sub-sample differed from the larger Better Beginnings sample on some characteristics. For example, participants in the narrative sub-sample had a lower mean monthly income, had lived in their neighbourhood longer, and more still lived in Better Beginnings neighbourhoods at the time of interview. Although there are numerous reasons as to why there may have been differences between the samples, such as the process of recruitment that included targeting participants that had lived in Better Beginnings communities consistently over time, future research should aim to use a more representative sample. In addition, it would be interesting to analyze in more depth the relationship between turning point story dimensions and the types of stories narrated. This addition to the analyses would help to further bring to light the most pressing turning points experienced by young adults living in socio-economically disadvantaged communities, and whether there are certain types of events that pose the greatest threat to well-being.

Secondly, another limitation of the current study is that the analysis used to examine the relationships between standardized measures in adolescence and narrative dimensions was correlational and therefore no cause and effect conclusions can be made. However, because extensive previous research suggests a relationship between the predictors used in this study and well-being (e.g. Bell & Bell, 2005; Martin & Huebner, 2007; Pals & McAdams, 2004; Tedeschi & Calhoun, 2004), as well as resilience theory, which postulates a longitudinal relationship between assets in adolescence and long-term

well-being in adverse situations (Gilligan, 2000; Luthar et al., 2000; Masten & Garmezy, 1985), I can suggest in the present study that earlier predictors seem likely to influence narrative dimensions in young adulthood. Similarly, because of the use of secondary data I was not able to develop an interview protocol that explicitly connected mechanisms to significant predictors of affect transformation in young adult turning point stories.

However, once again based on previous research, I was able to provide possible explanations for the association between earlier predictors and the mechanisms in the turning point stories. Although this is a limitation within this study, I believe that the use of an explanatory sequential design was essential in helping me to explore my results in more detail and further understand what contributes to the well-being of young adults. I suggest that future research continue to explore how factors in adolescence predict well-being in young adult turning point stories. Furthermore, future research should explore predictors of other outcomes of turning point stories, as the narrative dimensions used in this study are only one set of outcomes related to well-being.

Lastly, we cannot control when participants will experience their turning point events throughout their lives. For example, some participants in the current study narrated turning point events that they experienced while they were in elementary school, while others narrated turning point events that they experienced in young adulthood. This is a limitation to the current study because it is possible that these events are somehow stored differently within our memories, depending on their durations and saliency. Perhaps certain characteristics of turning point stories, such as meaning making, may differ between events that occurred in emerging adulthood as opposed to one from earlier childhood (McLean & Thorne, 2003). However, since the life story is

constantly changing and growing, and the way in which we interpret our life events are influenced by past memories as well as current perception, it is likely that the meaning making, as well as other characteristics in participants' turning point narratives from childhood, are largely a measure of their current reflection upon these events (McAdams, 2001). In the future, it would be beneficial to ask participants to tell a turning point story from a specific time in their lives, or to control statistically for when the turning point events happened in participants' lives.

### **Contributions**

Despite the limitations of this study, there are numerous contributions that this study makes to those interested in supporting healthy youth development. The main contributions relate to the last two research objectives of the study, which were to identify key program components for programs that prevent poor developmental outcomes and promote well-being; and to use a strengths-based approach to emphasize the need for prevention and the promotion of well-being.

The major contribution from this research for practice is that if we hope to promote the well-being of adolescents and provide adolescents with the assets they need for healthy development, then meeting their basic human needs for caring, contribution, support, listening, guidance, engagement, participation, and relationships, must be the primary focus of any prevention, education, and youth development effort. This supports Bronfenbrenner's (1977) ecological model of human development, which indicates that well-being is affected by the interaction between the individual and the multiple social systems in which they are embedded. Furthermore, this study demonstrates that we should not rely solely on identifying broadly defined factors but rather, extend our search

to the mechanisms involved in protective processes. In doing so, we are able to gain a more complete picture not only of what contributes to the well-being of young adults, but how various factors may contribute to well-being. This study and resilience theory moves the prevention, education, and youth development fields beyond their focus on program and what we do to an emphasis on process and how we do what we do. In other words, promoting well-being requires meeting basic human needs for caring, contribution, support, listening, guidance, engagement, participation, and relationships that are a part of every interaction and every intervention no matter what the focus.

This study also illustrates that there are common experiences in the lives of Canadian youth living in socio-economically disadvantaged circumstances that are considered particularly challenging or important, as similar experiences appeared across turning point stories: teen pregnancy; moving away from home; death or divorce; or academic, athletic or arts-related achievements. In addition, as illustrated in the story vignettes dealing with teen pregnancies, two young people who find themselves in similar situations may experience very different outcomes from those situations. Even a situation such as a teen pregnancy, which could be a negative outcome for a young person, can lead to very positive outcomes for some individuals, such as an opportunity to learn valuable life lessons and to gain motivation for self-improvement. This suggests that it was not a particular event(s) for the participants that influenced the well-being of young adults, but rather what youth brought to those events that influenced how they maintained well-being. Thus, this study also provides a rationale for moving our narrow focus in the youth development field from a risk, deficit, and pathology focus to an examination of the strengths adolescents, their families, and their communities have

brought to bear in promoting healing and health. The examination of these strengths and the acknowledgment that everyone has strengths and the capacity for transformation may give the prevention, education, and youth development fields not only a clear sense of direction, informing us about “what works”, but also mandates that we move beyond our obsession with deficits, a weaker practice that has harmfully labeled and stigmatized youth, their families, and their communities. In addition, the knowledge that everyone has strengths grounds practice in optimism, hope and possibility, which are essential components in building motivation (Luther et al., 2000). Not only does such motivation help to prevent burn-out of practitioners working with at-risk youth, but the motivational message will also be transferred to the youth, supporting and promoting well-being.

### **Conclusion**

My own turning point event showed me that every person has a story and their life story reflects who they are, where they come from, and how they have come to be in the place they are in. Moreover, I learned from my turning point event that by simply asking youth to share their story, I could better understand what they needed. This study demonstrated these same learnings. By exploring young adult turning point stories, I was better able to understand their experiences, how they perceived these experiences, what lessons or insights they gained from their experiences, and what they used to help maintain well-being throughout the experience. It is now my hope that in our attempt to develop responsive families, schools, and communities to support our youth that we do not forget, just like I did, to stop and ask youth to share their story. I know that I will not forget because this study demonstrates the power of stories in helping us to understand how environments support the healthy development of young people. Furthermore, this study illustrates that a narrative approach to data collection can produce significant



added value in understanding what contributes to well-being. I encourage other researchers to consider using a narrative approach to understand well-being in order to allow for richer depth of understanding of human experiences.

## Appendix A

### Better Beginnings, Better Futures Research

#### Wilfrid Laurier University

#### Informed Consent Statement

#### Trajectories to Delinquency in At-Risk Youth: A Nine-Year Longitudinal Follow-Up Study of Better Beginnings, Better Futures – Youth Narratives and Youth Perceptions of Preventing Criminal Activity

Dr. Geoffrey Nelson, Dr. Mark Pancer, Dr. Colleen Loomis, & Ms. Ashley Van Andel

Department of Psychology

You are invited to participate in a research study on youth stories. The purpose of this research is to understand your story about yourself, your participation in community programs, your community, and crime in your community. The principal researchers for this project are Dr. Geoffrey Nelson, Dr. Mark Pancer, and Dr. Colleen Loomis, who are professors in the Psychology Department at Wilfrid Laurier University. Altogether, 160-170 youth will be interviewed for this research. Approximately 120 youth will participate in individual interviews and another 40-50 youth will participate in focus group interviews.

#### **INFORMATION**

This research is part of the Better Beginnings, Better Futures research in which you have participated. This aspect of the research involves participation in an individual interview. The interview will be conducted by the Site Researcher, who is the contact person for Better Beginnings research activities in your neighbourhood. This person is part of what is called the Research Coordination Unit, a group made up of university-based researchers and Site Researchers from other Better Beginnings and comparison communities. The interview will be arranged at a time and place that is convenient for you.

During the interview, the Site Researcher will ask you a number of questions about your life, beginning with your life before you entered school and continuing up to today. We will give you the questions in advance so you have a chance to think about them. You are free not to answer any question or to pass on any question that is asked. The interview will last no more than one hour. With your consent, the Site Researcher will tape-record the interview. There is no deception involved in the research.

#### **RISKS**

We do not believe that you will experience any major risks to your well-being by participating in the focus group interview. It is possible that if you have had a negative experience in your life, that you may find yourself becoming upset recalling such an experience.

## **BENEFITS**

We do envision significant benefits to your participation in this study. First of all, you may find it interesting to reflect back on your life and some of the experiences that you have had. Second, your experiences in the community and participating in community programs could be useful in improving community programs and services for youth. Finally, the results of this study will make a contribution to the research literature on the importance of youth involvement in the community.

## **CONFIDENTIALITY**

Your responses to the interview questions will be kept completely anonymous. That is, your name will not be associated with anything you say during the interview. We will keep everything you say confidential and private. After the interview is completed, the research team will provide you with a typed copy of the interview transcript, which you can correct or edit and return to us. The transcription of the interview will be identified by code number and stored in a locked filing cabinet to protect the confidentiality of your responses. Please note that your name will not be associated in any way with your responses. Quotations from you may be used in write-ups /and or presentations on this research. However, the quotations will not contain any information that allows you to be identified. Should you consent to the use of your quotations, they may be used in write-ups and/or presentations on this research. The following research assistants will have access to the interview data for the purpose of transcription or analysis: Ashley Van Andel, Lisa Armstrong, Julian Hasford, Stacey Garwood, and Daniele Bellehumeur.

All audio files of digitally recorded interviews will be stored on a secure (password protected) website at Queen's University. We maintain confidentiality for the interviews. Only in the case where there is suspected child abuse (either the youth being abused or the youth abusing a sibling or someone else), do we report this abuse to authorities to child welfare authorities. Transcriptions of the interviews will be stored in a locked filing cabinet in Dr. Nelson's research room. All information will be deleted by April 30, 2017. Dr. Loomis will erase the digital recordings and Dr. Nelson will ensure paper transcripts are destroyed.

## **COMPENSATION**

You will receive \$25 in appreciation for your participation in the interview.

## **CONTACT**

If you have questions at any time about the study or the procedures, or if you experience adverse effects as a result of participating in this study, you may contact the Site Researcher, [name], at [address], and [phone number], or Dr. Geoffrey Nelson at (519) 884-0710, extension 3314. This project has been reviewed and approved by the Wilfrid Laurier University Research Ethics Board. If you feel you have not been treated

according to the descriptions in this form, or your rights as a participant in research have been violated during the course of this project, you may contact Dr. Bill Marr, Chair, [bmarr@wlu.ca](mailto:bmarr@wlu.ca), University Research Ethics Board, Wilfrid Laurier University, (519) 884-0710, extension 2468.

### **PARTICIPATION**

Your participation in this study is purely voluntary and you have the right to decide that you do not want to take part in the research. Your decision to take part or to not take part will in no way affect your usual educational, health or community services. If you withdraw from the study, we will not transcribe any of your responses to the interview. You have the right to omit or withdraw your response to any question or procedure without penalty. You will still receive \$25 even if you don't answer all of the questions.

### **FEEDBACK AND PUBLICATION**

The research team will prepare a summary of the results. A summary will be sent to you when all the data have been analyzed, by April 30, 2010. In addition to the summary for participants, we plan to present the results of the research at professional and scientific conferences and to publish the findings in professional and scientific journals. In the Better Beginnings sites, we will also be making a research presentation to the community. The results of some of this research will appear in Ashley Van Andel's undergraduate honour's thesis in Psychology. Research presentations will be held at the three Better Beginnings sites sometime in the spring of 2010. This will be a joint presentation by researchers from Laurier and Queen's universities.

### **WHERE CAN I GET ADDITIONAL HELP OR RESOURCES IF I NEED THEM?**

During the interview there may be things that have been discussed which you may have concerns about. If you have any questions or concerns about yourself or your family, the researcher will be handing out to all participants a list of names and phone numbers of people and agencies in your community that can assist with any questions or concerns that you might have.

If you have any questions concerning the collection of this information, please contact:

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## Appendix B

### Rating System of Turning Point Stories

#### **Early Affect/Later Affect**

- 1 - Very Negative Affect or No Story
- 2 - Negative Affect
- 3 - Somewhat Negative Affect
- 4 - Neutral Affect
- 5 - Somewhat Positive Affect
- 6 - Positive Affect
- 7 - Very Positive Affect

#### **Coherence**

- 0 - no story or too incoherent to understand
- 1 - chronological pattern involving a description of successive events
- 2 - interesting chronological pattern in which events are described in detail and interestingly
- 3 - classic pattern in which story builds to high point, dwells on it, then resolves

#### **Meaning-Making**

- 0 - No Meaning Reported
- 1 - Lesson Reported
- 2 - Vague Meaning
- 3 - Insight (Explicit Transformation of Understanding of Self, World, etc)

#### **Ending Resolution**

- 1 - Very Unresolved or No Story
- 2 - Somewhat Unresolved
- 3 - Somewhat Resolved
- 4 - Very Resolved

#### **Personal Growth**

- 0 - No Personal Growth or No Story
- 1 - Some Vague Evidence of Personal Growth
- 2 - Event Explicitly Promoted Positive Development

## Appendix C

### Scales and Measures

Scales	Items
<p><b>Prosocial Scale (NLSCY)</b></p> <p><i>Youth Version</i></p>	<p><b>Read the following statements and choose the answer that best describes you.</b></p> <p><i>Scale: 2 = Often or Very True</i>  <i>1 = Sometimes or Somewhat True</i>  <i>0 = Never or Not True</i>            Possible scale range 0 to 20.</p> <p>D.1a I show sympathy to (I feel sorry for) someone who has made a mistake.            D.1d I try to help someone who has been hurt.            D.1h I offer to help clear up a mess someone else has made.            D.1m If there is an argument, I try to stop it.            D.1s I offer to help other young people (friend, brother or sister) who are having difficulty with a task.            D.1y I comfort another young person (friend, brother or sister) who is crying or upset.            D.1cc I help to pick up things which another young person has dropped.            D.1ii When I am playing with others, I invite bystanders to join in a game.            D.1mm I help others my age (friends, brother or sister) who are feeling sick.            D.1oo I encourage other people my age who cannot do things as well as I can.</p>
<p><b>Self Esteem Scale</b></p> <p><b>(NLSCY)</b></p>	<p><b>Choose the answer that best describes how you feel.</b></p> <p><i>Scale: 5 = True</i>  <i>4 = Mostly True</i>  <i>3 = Sometimes True/Sometimes False</i>  <i>2 = Mostly False</i>  <i>1 = False</i>            Possible scale range 4 to 20.</p> <p>C.1a In general, I like the way I am.            C.1b Overall I have a lot to be proud of.            C.1d When I do something, I do it well.</p>

<p><b>Hyperactivity/Inattention Scale (NLSCY)</b> <i>Teacher Version</i></p>	<p><b>Below is a list of statements about the feelings and behaviours of children. For each statement, please fill in the circle for the number that best describes this student now or within the last six months. Please fill in only one of the four circles for each statement.</b></p> <p><i>Scale: 2 = Often or Very True 1 = Sometimes or Somewhat True 0 = Never or Not True</i></p> <p>Possible scale range 0 to 14.</p> <p>D.2 Cannot sit still or is restless. D.9 Is easily distracted, has trouble sticking to any activity. D.15 Cannot concentrate, cannot pay attention for long. D.18 Is impulsive, acts without thinking. D.22 Has difficulty waiting for his/her turn in games or groups. D.38 Is inattentive. D.39 Cannot settle on anything for more than a few moments.</p>
<p><b>Family Functioning (FAD) Scale</b></p>	<p>Here are some statements about families and family relationships. Families take different forms. Here I would like you to think of your experience in your own family. For each statement, please tell me whether you strongly agree, agree, disagree or strongly disagree.</p> <p><i>Scale: 4 = Strongly disagree 3 = Disagree 2 = Agree 1 = Strongly agree</i></p> <p>Possible scale range 7 to 28.</p> <p>H.1 In times of crisis we can turn to each other for support.* H.2 We avoid discussing our fears and concerns. H.3 There are a lot of bad feelings in our family. H.4 We feel accepted for what we are.* H.5 We are able to make decisions about how to solve problems.* H.6 We don't get along well together. H.7 We confide in each other.*</p> <p>*reverse coded</p>



<p><b>Sense of Community Involvement Scale (derived from items by Buckner, 1986)</b></p>	<p>Could you tell me how much you agree or disagree with these statements? Scale: 4 = Strongly disagree 3 = Disagree 2 = Agree 1 = Strongly agree Possible scale range 5 to 20. O.13 I feel like I belong to this neighbourhood. O.14 If some change was going to be made in my neighbourhood that I did not like, I would try to stop it. O.15 I feel I am important to this neighbourhood. O.16 I would be willing to work with others on something to improve my neighbourhood. O.17 I like to think of myself as similar to the people who live in this neighbourhood.</p>
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