"No one saw us, and no one did anything" – young women with a history in out-of-home care narrate management of (in)visibility and intersecting identities

Mira Aurora Marlow, Hulda Mjøll Gunnarsdottir & Ingunn Studsrød

Published online: 26 Sep 2023.

Submit your article to this journal ↗

Article views: 31

View related articles ↗

View Crossmark data ↗

Routledge
Taylor & Francis Group

"No one saw us, and no one did anything" – young women with a history in out-of-home care narrate management of (in)visibility and intersecting identities

Mira Aurora Marlow ⓘD, Hulda Mjøll Gunnarsdottir ⓘD and Ingunn Studsrød ⓘD

Department of Social Studies, University of Stavanger, Stavanger, Norway

ABSTRACT

Dominating narratives about young women in out-of-home care typically depict them as 'troublemakers', 'victims' or 'damaged'. Such narratives undermine the importance of understanding how these young women manage difficult life circumstances and intersecting identities. This paper explores *how young women with a history in out-of-home care manage their personal stories and identities*. By applying an intersectional perspective, we explore the complexity of these young women's identities. This study draws data from eight narrative interviews with five young women with challenging personal stories. A feminist listening guide was adopted for the analysis. Our analysis identified the management of intersecting identities, (in)visibility and agency in participants' stories. Based on the analysis, we recommend an intersectional perspective in social work practice.

Introduction

This study explores narratives of young women with experiences in out-of-home care (housing collectives for unaccompanied minor refugees (UMR), foster care, residential care and youth psychiatric care). Women around the world experience discrimination regarding civil, cultural, economic, political and social rights (United Nations 2014). Gender accompanied by young age has been documented to contribute to marginalisation, as girls and young women (aged 10–29) have increased risk of intimate partner violence and sexual-based violence compared to boys and young men (UN Women 2020). Youth studies have an emerging focus on marginalisation, highlighting that young people at the margins of societies are in disadvantaged social positions (Pihl 2015) or disadvantaged geographical locations (Sarmento, de Cássia Marchi, and de Pina Trevisan 2018). Disadvantaged geographical locations include rural communities (Skattebol and Redmond 2019), low-income neighbourhoods (Galster, Santiago, and Stack 2016), countries exposed to wars and severe poverty and with limited developmental opportunities for young people (Heidbrink 2014). Furthermore, the European Union's children's rights strategy has identified that minors who cannot live with their parents, and are thereby looked after by the state, are disadvantaged and particularly exposed to poverty, exclusion and discrimination (European Commission 2006). Young people located at the outer borders of societies, such as out-of-home care, have limited access to resources, are excluded from majority groups and are often impoverished materially, have psychological issues (Mäkinen, Robinson, and Slotte 2020) and/or have ethnic minority backgrounds (Lems, Oester, and Strasser 2019). Children and young people who are placed outside of

their homes have frequently been subjected to childhood adversity, such as neglect and abuse, and often face psychological challenges (Greger et al. 2015; Jozefiak et al. 2016). Neglect refers to emotional and physical deprivation (Puetz et al. 2020). In out-of-home care, girls are more frequently exposed to chronic depression (Jozefiak et al. 2016), and after care, they face greater emotional struggles and receive less support than boys in similar situations (Berejena Mhongera and Lombard 2017).

This study explores how five marginalised young women (aged 17–26) with different ethnic backgrounds and diverse social locations in Norway manage their identities and challenging personal stories. Research on exposure to marginalization from young women's perspectives can benefit from a focus on their narrative voices. Deep insight into their perspectives can provide valuable knowledge about how intersectionality and challenging personal stories can be managed. This highlights the necessity of exploring how young women manage their disadvantaged social locations prior to, during and after out-of-home care. Hence, our research question is: *How do young women with a history in out-of-home care manage their personal stories and identities?*

Previous research

According to previous research, young women who live in out-of-home care are more at risk of developing long-term substance abuse problems and depression, although they respond better to treatment than men (Dahlberg et al. 2022). Girls and young women in Norwegian residential care are often diagnosed with and treated for anxiety due to their challenging childhood and youthhood (Oerbeck et al. 2021). They also appear to have a poorer quality of life and suffer more from low self-esteem than their peers (Jozefiak and Kayed 2015).

Stories told about disadvantaged children and young people affect how they view themselves and construct their identities and how society addresses their issues (e.g. Eckersley 2011). Research on young people's well-being claims that the focus of studies should 'shift from problems to solutions, from negative to positive attributes, outcomes and conditions' and emphasise young people's agency (Eckersley 2011, 628). Studies about girls and young women in out-of-home care indicate that, although they have been exposed to vulnerable and challenging life situations, they are still capable of building relationships and positive elements in their lives. For example, although some young women struggle to survive and have negative outcomes in their lives after out-of-home care, others have positive survival stories and construct positive identities (Refaeli 2017). Furthermore, Kohli and Kaukko (2018) found that unaccompanied minor asylum-seeking girls were stuck in residential care while awaiting asylum decisions but managed their lives and developed friendships with other residents and adults. These girls used coping strategies, such as hopeful mindsets, keeping cultural traditions alive, building trust between the residents and adults around them and having future plans.

The emphasis on young people's agency is central to understanding how they form positive identities and manage possible stigma (e.g. Davidson and Whittaker 2017). Davidson and Whittaker (2017) highlighted the stigma of being a young person with a history in residential care; however, they emphasised the importance of one's own efforts in making a better future while managing the stigma. Managing stigma has been found to lead to resistance and positive identity construction, with negative identity categories intersecting with positive ones (Elster 2020). Such intersecting negative and positive identity categories for young people with a history in residential care include losing family; being a victim of abuse, neglect or rejection; being a bad child; having been loved; being one who is moving on; being a survivor; being resilient; and being an agent in one's own life (Schofield, Larsson, and Ward 2017).

Intersecting identities are constructed when young people narrate themselves and their pasts in interactions with others and when they tackle difficult experiences and stigmas (Schofield, Larsson, and Ward 2017). Young people in residential care can construct positive identities of being placed outside their homes and, in that way, manage their

intersecting negative identities (Jansen 2010). This is supported by Singstad et al. (2021), who found that emotional support from employees at residential care can have a positive impact on the quality of life and self-esteem among girls in their care. Similarly, Powers et al. (2018) highlighted the importance of self-determination, a form of casual agency (Wehmeyer 1995), in the positive development of young people's lives. Self-determination and self-regulation, accompanied by autonomy as management strategies, have a significant impact on how young people with a history in residential care manage obstacles in their lives (e.g. Powers et al. 2018).

Although studies on young women's perceptions and negotiations of their challenging backgrounds are emerging, knowledge about how young women with a history in residential care manage their challenging backgrounds and form their identities is scarce. However, there are a few exceptions (e.g. Jansen 2010; Refaeli 2017), and while a 'gendered data gap' exists (Criado-Perez 2019, p. XI), this reveals limitations in knowledge about marginalised childhoods and youthhoods of girls and young women, especially of those in out-of-home care, and on their identity construction. This further highlights how misrecognised and thus socially invisible young women at the margins are in both research and societies.

The following section outlines the paper's conceptual framing. Thereafter, the research methods and data are elaborated. Finally, after presenting the findings, we discuss them considering previous research and the conceptual framing.

Conceptual framework

Narrative approach

In this article, narrative is understood as an epistemological tool through which stories help locate people's experiences in time and space (Bruner 1986). An interactional and performative narrative perspective is adopted to address the embodied nature of storytelling, in which stories are told by and to embodied persons in social and cultural situations (Svahn 2017). We extend this to include the idea that the participants construct and manage their identities while narrating themselves, their experiences and lives (Svahn 2017), and through storytelling, the self is recreated (Wortham 2000). Consequently, the participants' narrative identities are 'multiple, fragmentary, unfinished and always changing' (Smith and Sparkes 2008, 24). This study focuses on small personal stories told by our participants. Small personal stories in research are sequences from life stories told in interview situations (Marlow, Sørly, and Kaatrakoski 2022). Life stories can focus on single episodes in a life or on certain aspects of a life narrative, and these are often described as 'topical life stories' (Bertaux 1981; Pérez Prieto 2006).

Intersectionality, agency and (in)visibility

Following the *non-additive principle* (Christensen and Jensen 2012) as an intersectional approach, we explore young women's narratives about being simultaneously positioned in multiple social identity categories (Phoenix 2011). These categories include young women, low socioeconomic status, having a history in out-of-home care and/or as an unaccompanied mirror refugee (UMR). These different identity categories are related to each other as overall forms of social distinctness or systems of oppression (Lanser 2010) and cannot be understood in isolation. Feminist intersectional theory has traditionally focused on how race, gender and socioeconomic class intersect (Crenshaw 1991; Hooks 2015). It has also been argued that many other unidentified identity categories have been neglected by intersectional theorists and may also impact privilege and marginalisation (Christensen and Jensen 2012). Marginalisation occurs when girls and young women are at the margins of societies and lack equal opportunities for full participation because of their intersecting

social identity categories (Lennox 2015). To analyse the intersections of marginalisation or privilege, we also need to consider the possibility of human agency (Lanser 2010).

Human agency can be understood in several ways, and some even deny the possibility of such agency, especially for marginalised people (e.g. Bevir 1999). Our account of agency is a hybrid of two approaches, both highlighted by relational aspects. The first is feminist agency, where marginalised young women can practise individual, shared and collective agency (Schlosser 2019), even in hostile environments (Meyers 2002). This can emerge when these young women need to take charge of their lives in harmful living conditions, help others in similar situations and become a part of organisations that aim to change oppressive structures in institutions, such as in child welfare services (CWS). The second approach follows Abebe's (2019) account, where agency is interdependent with space, time, families, communities and other people around the child or young person. Therefore, as agency cannot exist in a vacuum, there must be the possibility for marginalised young women to practise agency inside and outside of out-of-home care and construct identities of being agents in their own lives. A lack of possibility of being agents in their own lives and having their own needs recognised can contribute to invisibility in CWS, which is known as the 'invisible child' phenomenon (Ferguson 2017). The term 'invisible child' refers to social workers' incapability of facilitating a child-centred approach and therefore, failing to establish relationships that allow them to recognise children in need and immediate danger (Ferguson 2017).

Methods

Recruitment

Our data are derived from eight narrative interviews with five young women aged 17–26 with backgrounds in out-of-home care. Participants were invited to two rounds of interviews, but only three came to the second round. Those who did not participate in the second interview did not give any explanations for their decision. One participant was recruited through private and state-run Norwegian residential care facilities, where residents are under 18 years old and under the care of the state. Two participants were initiated after advertisements on social media. One participant was recruited through an organisation for young people with experiences with CWS. This participant helped recruit another young woman. Recruitment was dependent on several gatekeepers in CWS or out-of-home units, and in some cases, the gatekeepers refrained from granting access, as this group of young women is seen as particularly psychologically vulnerable. This had a great impact on access to participants and limited the data collection.

Table 1. Description of participants.

Participant (age)	Type of out-of-home care	Placement age	Length of care
Ida (26)	Foster care	12	5 years
	Child Welfare Service (CWS) group care institution		
Eva (21)	Youth psychiatric care	13	5 years
	CWS group emergency institution		
	Group treatment institutions for behavioural/psychological problems		
Mia (17)	CWS solitary emergency institution	15	3 years
	CWS solitary treatment institution for behavioural/psychological problems		
	CWS solitary treatment institution for substance abuse problems		
Ade (18)	Housing Collective for Unaccompanied Minor Refugees (UMRs)	16	2 years
Esi (18)	Housing Collective for UMRs	16	2 years

Three of the interviewees were from Norway, with one having immigrant parents and two from an African country who entered Norway as UMRs. Table 1 specifies the type of out-of-home care, age of placement and time spent at the facilities.

The interviews

The interviews were conducted in Norwegian between 2018 and 2019 and lasted between 22 and 78 minutes. Three participants were interviewed twice, and the time between these interviews was approximately one year. The first round of narrative interviews started with encouragement for free storytelling. The participants first talked uninterrupted while the first author took notes for the second phase, in which questions were asked to deepen the understanding of their narratives. The transcribed interviews were sent to the participants, who had the opportunity to change the text; however, none of them made any changes. For the second interviews, the first author constructed questions based on the first narratives.

Several measures were implemented to ensure ethical conduct, following guidelines by the Norwegian National Research Ethics Committees (2022). This included approval from the National Centre for Research Data informing participants about their right to withdraw their consent at any point in the study, ensuring written informed consent and paying close attention to the ethics of care, as the participants told stories about harmful environments. They had the opportunity to take breaks or leave if they wished to do so. After each interview, the participants were asked about their experiences while being interviewed and had the opportunity to talk and get further follow-up if needed.

Listening guide analysis method

The interviews were analysed using the feminist listening guide method, which centralises the participants' voices and experiences (Woodcock 2016). One of the benefits of this method is that it allows for analysing the gaps and silences in narratives, as these often tell plenty about the participants' relationships with others and what cannot be narrated (Brown and Gilligan 1992; Woodcock 2016). The narratives in this research had gaps, and sometimes silences highlighted difficult experiences, absences in memory or the lack of words to describe something. The analysis was conducted in four listening stages, which are illustrated in Figure 1

During the first listening, the 'plot' was listened to, and the objective was to gain an understanding of what was happening and how the events unfolded in the narratives (Brown and Gilligan 1992). The focus was also on the frequency of the words, the main metaphors, the 'emotional resonances' and the contradictions in the storytelling (Brown and Gilligan 1992, 27), and the silences and/or gaps in the story were identified and analysed (Woodcock 2016). During the second listening, the focus was on the narrator's 'self' in the form of 'I' poems and the relation with others ('us' and 'they') in the story. During the third and fourth listening sessions, the research questions were revisited to explore the ways in which themes interact or are in tension with one another (Brown and Gilligan 1992; Woodcock 2016). The
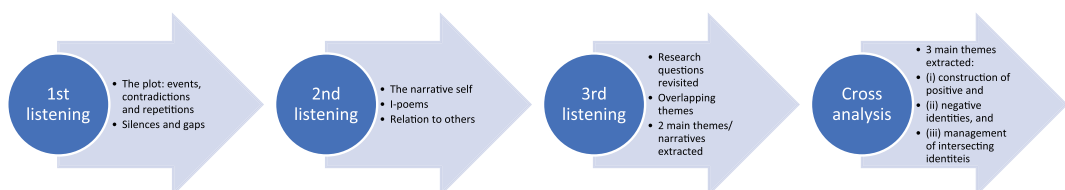

Figure 1. Analysis process and listening guide.

themes created in the first listening included identity construction and wounding experiences, agency and/or (in)visibility. These were further clustered into three main themes: (i) construction of negative identities, (ii) construction of positive identities and (iii) management of intersecting identities.

Findings

The data were analysed by reading all of the participants' stories. The transcripts were further explored for identity construction through storytelling. All participants told rich stories of marginalisation prior to, during and/or after out-of-home care and of identity construction while facing obstacles in their lives, which made their narratives relevant to this study. The first part of the findings focuses on the participants' negative identity construction, and the second part focuses on their positive identity construction through storytelling. The last part focuses on how intersecting negative and positive identities are managed.

Construction of negative identities

This section involves narratives of negative identities that the participants formed while experiencing challenges in their lives as girls and young women prior to and during out-of-home care. The participants' negative identities included a person being institutionalised, abnormal, dangerous, unwanted, a burden, an injecting drug addict, psychologically ill, a self-harmer, unworthy, unlovable and a bad girl or young woman. Such visible negative identities intersected with each other and with perceptions of being invisible and being a victim of emotional and physical deprivation, as well as with repressive policies. These negative identities are represented under the following themes: (i) neglected and invisible young women and (ii) marginalised and invisible young women.

Neglected and invisible young women
First in focus is Ida's (aged 26) pre-out-of-home care story. Ida has three younger siblings, and all of them lived with their drug-addict parents until Ida walked into the CWS office at the age of 12 and talked about the neglect that they faced every day. All of them were placed in foster care, although Ida was separated from her siblings. After several failed foster care placements, Ida moved into a child welfare institute (CWI) at age 15. In the study interview, Ida described the level of neglect and invisibility to the surrounding adults that she experienced as a girl:

> I'd a lot of teachers […] who maybe should have seen me more than they did then, who, guaranteed, knew about the situation, and saw how things were. Didn't bring food to school […] came in dangling and holey clothes, and too small clothes as well. So now, I feel, when I look back on things, I'm disappointed that we weren't moved out [from home] before and that no one saw us, and no one did anything.

Ida's narrative places her childhood experience of physical neglect in the context of social invisibility, where the adults around her and her siblings failed to recognise their condition as marginalised children of drug-addict parents. Ida's story shows the negative identity construction of an 'invisible child' and a victim of neglect and humiliation. This type of invisibility can make children feel unworthy and affect how they see themselves. However, Ida's expressed disappointment shows that she knew that the adults' denial of recognition and participation in the neglect was wrong, and Ida did not think that this was something that she or her siblings deserved. Therefore, Ida also constructed an identity of being mistreated.

Neglect in out-of-home care and invisibility were described by Mia (aged 17), who, at the time of the first interview, was in solitary residential care placement. Prior to residential care, Mia's father had been violent towards her throughout her childhood. Her psychological well-being deteriorated, and she started self-harming in secondary school. After attempting suicide, Mia ended up in psychiatric care at the age of 15, and afterwards, she was placed in the CWI. She narrated the following experiences of invisibility and neglect:

> It started that I just smoked something sometimes, and I ended up being an injecting junkie [Mia cries]. I got to the point where I was kind of sitting in the bathroom at home and injecting myself . . . but they just stayed on the other side of the door and talked with me. They knew what was happening inside the bathroom, but they never came in until they heard that I was really drowsy, and then they knew that I'd taken something. [Mia cries, a long pause] [. . .] I was kind of a bit disappointed that they did nothing with it because they saw . . . [. . .] It felt like no one cared if I was alive or [not].

Mia constructed several intersecting identities in her narrative, such as injecting drug addict, victim of neglect, unworthy of being helped and damaged girl. The shame she felt for being an injecting drug addict was visible, but she also expressed hope of receiving help to stop misusing drugs. Mia's disappointment in the residential care's employees can also be seen as frustration towards her own struggle to stop using drugs.

Being damaged came up in several other places in Mia's narrative, for example, when she explained how she was too sick to be placed with other girls in residential care due to her psychological instability. She missed being around other young women, and solitary placement contributed to her worsening psychological well-being and to feeling separated from the outside world and other young people. Mia's drug misuse escalated, and in the end, she was placed in a CWS solitary treatment institution for substance abuse problems, where her feelings of being isolated from the rest of the world deepened. This kind of otherness and feelings of being damaged was also described in other participants' narratives and led to feelings of invisibility and worthlessness, showing the intersection of invisibility and marginalisation.

Marginalised and invisible young women

Invisibility and marginalisation were narrated by Eva (aged 21). In her story about pre-out-of-home care, Eva constructed the identity of an unlovable child: 'No, I didn't feel it [that my mother loved me]. She didn't even want me to live with her'. This heavy burden led Eva to start self-harming through restricted eating and cutting and to sleep outside at the age of 12. After attempting suicide at age 13, she was placed in a psychiatric ward, where she stayed for approximately two years. She was left there because CWS thought that she was too sick to be placed in residential or foster care, and the staff at the psychiatric ward sought to get her out. This strengthened her feelings of being unwanted and unloved. At age 15, Eva was moved into a CWI. She narrated the following about her stay in one facility specialising in taking care of girls with self-harming issues:

> I've become kind of institutionalised. I've been taken out of the world where normal people are. Things were so different. Like, we couldn't have normal cutleries, and everything needed to be locked in, and it was kind of like a prison. [. . .] They thought that we were dangerous and sick . . . and then we became kind of like that. It has had consequences for how I think about myself.

Eva's narrative is located in institutional settings. One detail she mentions is the lack of access to normal cutlery, which substantially contributes to othering. Being institutionalised constructed her and her fellow residents' identities in a negative way as dangerous and sick. This also may have been caused by several things, such as the physical frames of the institutions, the attitudes of the employees and the recurring negative interactions. The unloving conditions in Eva's childhood, the years spent in the psychiatric ward and the attitudes of the residential care employees made Eva internalise the negative labels of being damaged, unlovable and institutionalised. The feelings of otherness lingered and contributed to her marginalisation as a young woman with a history in residential and psychiatric

care. Being someone who nobody wanted – not her mother, not the employees at the psychiatric ward or CWS – left marks on Eva and a stigma that has been difficult to shake, even in adulthood.

Experiences of being othered were also narrated by Ade (aged 18), who ended up in out-of-home care for UMRs at the age of 16 after a long flight from an African country to escape infinite military service and an uncertain future. She described her experiences of marginalisation, unworthiness and how her humanity was made invisible through objectification in her home country and during flight:

> [Human smugglers] didn't give us anything to eat or drink. They also beat us, and they spoke ugly words to us. We couldn't sleep. We were small, too. I just cried. I wanted to die . . . It was very difficult. [. . .] If you stay in [country of origin] and you are 16, after you finish school, you've to go to military service. I was imprisoned for two months, as [officers] thought that I would flee. After that, I thought, why stay if I don't have the right to study or to be free.

Ade's narrative locates the harsh experiences and identity construction of being a victim of othering and psychological and physical violence in the context of a society that practises repressive policies towards young people. She described her experiences during her flight from her home country, including the human smugglers' abuse of young refugees, and she constructed her identity while telling the story. Her story was filled with emotional and physical deprivation, which led her to wish for death instead of continuing the harsh journey. Feelings of worthlessness intersected with otherness, as Ade and the other young refugees were treated inhumanly.

Esi (aged 18) narrated similar experiences during her flight from the same African country as Ade. Marginalisation in their narratives can be seen in relation to repressive policies, their ages and their disadvantaged geographical locations. Visibility for them in their country of origin led to marginalisation, as it targeted them as subjects of forced military service at the age of 16, which they both wanted to escape. As they chose to flee, they became invisible to the authorities, which offered them a disguise but, at the same time, marginalised them at the hands of human smugglers. Marginalisation in Ade's and Esi's narratives was linked to a situation of despair and disempowerment, which was also found in other participants' narratives.

The negative identities of all participants were linked to marginalisation due to challenges within their families, or being in out-of-home care or in flight, placing them in disadvantaged social locations. The multiple social categories in which the participants were positioned intersect and relate to each other as overall forms of systematic oppression and locate the participants in the margins of societies or disadvantaged geographical locations.

Construction of positive identities

While managing and resisting challenges, invisibility and marginalisation, the participants also constructed positive identities. These identities included having stamina; being good, smart and survivors of violence; encountering neglect and repressive policies; and being agents in their own lives. The construction of positive identities was divided into two themes: (i) young women enacting agency and resistance and (ii) young women managing intersecting identities.

Young women enacting agency and resistance

Ida described how she took charge of her own life when in residential care. She managed to thrive at school, continued to study after high school and is now working as a learning disability nurse, against the advice of her social worker:

> I've always wanted to be a learning disability nurse, but my social worker said that, with everything I've experienced, it would be tough, and advised against health professional education. [. . .] But in the end, I didn't care what the social worker said and started to study to be a learning disability nurse. [. . .] It took four years [. . .] and I never went back to that social worker again [Ida laughs].

Later, Ida described herself:

I think it is great that I've managed so well against the odds because things could have gone pretty bad, right? [...] I've always been good and nice, and I got to hear it as well [from the institution's employees].

Ida's narrative locates positive identity categories (e.g. one who resists the identity of being too vulnerable to study health professional education, one who has done well in life and one who was a good girl) into life during and after out-of-home care. Her personal story also shows how positive identity construction is dependent on how marginalised young women with a history of out-of-home care are perceived by the social workers. While Eva was categorised negatively by the out-of-home care employees and adopted those negative identities, Ida was categorised positively and thus adopted positive identity categories.

Participants further narrated that they had taken charge of their own lives and made changes to better their situations. For example, in the second interview, Mia said that she had been seven months sober. As young women who have managed their own lives and acknowledged the possibility of changing their future for the better, they have shown resistance and agency. The participants' positive identity formations also intersected with their constructions as victims of violence and neglect, as they did not feel they deserved these negative experiences in their childhoods and youthhoods.

Negative experiences have led the participants to the self-realisation of what has happened to them and have formed their identities in multiple ways. They have also managed to see strength in themselves, as Ade described in the following narration:

At first, we travelled from [country of origin through several African countries] and afterwards to Italia, then to Germany, and then I came here [Norway]. It wasn't easy. It was very difficult. [...] I don't know how to explain how I managed to come here. I just believed that I could do it. It meant everything to me. [...] I just thought that Norway was the best, and that's why I came here.

Ade located her narrative in the context of fleeing and pre-out-of-home care. This sequence shows Ade's determination to change her life for the better and resist repressive policies in her home country by fleeing. In addition, during the interview, Ade constructed several positive identities, such as a survivor of her country's repressive policies, a survivor of violence and an agent in her life. This shows that agency can be enacted in restricted conditions and emerge when facing challenges in life to help marginalised young women resist repressive policies.

The analysis also revealed that the participants have multiple intersecting identities, such as those of victim and survivor of violence and repressive policies, sick and healthy, good and bad girl, or young woman. The participants acknowledged their restricted agency as children, yet they appeared to take agency in their narratives. The participants' stories about challenging experiences, marginalisation and invisibility intersected with narratives of agency, survival and visibility. All participants narrated the survival of harsh realities and visibility in their lives. Visibility intersected in the stories of how they were being cared for, loved and acknowledged by significant others.

Young women managing intersecting identities

Agency was illuminated when participants managed their identities while they limited or modified the narrations of their lives, depending on the circumstances and to whom they were telling their story. Keeping the past invisible can have a protective aspect, which Eva narrated well:

I feel that people are kind of 'oi!' right away [if I tell them that I've lived in out-of-home care], and I've scars on top of that. I just want people to not know that much about it [...]. Like, it's not me, so . . . if it's someone who I get to know, I will say it if it falls out naturally, but not so that I, like, lay it all out or like, now, I'll tell about it . . . if it kind of comes out naturally, so I either say it or not.

Here, the weight is on Eva's willingness to tell, or not to tell, other people about her past in out-of-home care, but also on how Eva is much more than her past and her scars. She points out that her former life in out-of-home care does not define her as a person by stating, 'it's not me'. This can be

interpreted as Eva not accepting an identity solely as a former girl in child welfare or as a psychiatric patient. She is conscious of how, when and with whom she shares this information. She manages her personal story and identities and thus constructs her identity as an agent in her life. This shows the importance of challenging problematic categorisations in social work practice with marginalised young women and highlights their multiple intersecting identities.

Eva made another attempt to limit past visibility and manage identities when deepening questions were asked based on the first narrative:

> Interviewer: Can you tell more about what happened at home and with your mother?
>
> Eva: Not really because it is a bit like I can't bear to talk about it . . . everything is kind of left behind . . . So, I get so stressed out if I take it up again. If that's ok?
>
> Interviewer: Yes, of course.

This can be interpreted as an example of acting out agency. Eva drew a line at what she wanted to reveal in her interview about her relationship with her mother. She appeared to do this to protect herself, both in terms of not evoking difficult emotional states and of letting difficult experiences rest. This might reflect a lack of trust in the interviewer or Eva's desire to move on from this part of her past and no longer let it define her identity. While managing her challenging personal story, Eva constructed how she and her mother would be seen by controlling her identity and the visibility of her past. The experience of emotional neglect intersected here with agency, and while managing what to tell, Eva constructed herself as one who has left the past behind, thus becoming one who has survived and moved on. This creates a gap in Eva's narrative, and the silence around the untold is interesting. Gaps and silences in narratives are not unusual, and from our point of view, they are as important as the spoken words. Gaps can indicate that the participant cannot describe the event, cannot remember or does not want to talk about something (Loots, Coppens, and Sermijn 2013). Wounding events can also go beyond description or be humiliating experiences that the teller would rather forget, and they can even retraumatise the teller (Bohmer and Shuman 2019). Similar management of identities was also found in other participants' narratives, highlighting the necessity of providing room for renarration of one's own personal story in social work practice. It is important to understand the power and meaning of silence and gaps in narratives, as this can indicate that the relationship between the service users and the social work practitioners is not strong enough or that the service users are not ready to share their story.

Discussion

This study has explored how young women with a history of out-of-home care manage their personal stories and identities. The participants narrated constructions of multiple intersecting positive and negative identities while facing neglect, physical and psychological violence and repressive policies. The analysis further shows how the women manage their intersecting identities, challenging experiences and marginalised locations through the act of storytelling. The women's struggles to manage identities of negligence and (in)visibility can be understood as a dynamic process between agency, resistance and construction of intersecting identities. Other studies have shown that managing stigma and constructing positive identities are connected to agency, self-determination, self-regulation and resistance (Davidson and Whittaker 2017; Jansen 2010; Powers et al. 2018).

Nonetheless, the participants identified themselves as (un)recognised by the adults around them. Feelings of (in)visibility lingered and affected their identity construction. The participants con-structed and managed their identities while narrating their experiences and lives (Svahn 2017), and through the act of storytelling, their selves were recreated (Wortham 2000). It is important to

remember that the participants' narrative identities are always 'multiple, fragmentary' and in flux (Smith and Sparkes 2008, 24).

Young people who are 'seen' in CWS are not necessarily recognised, nor do they necessarily get the help that they need (Ferguson 2017). Hence, we found that invisibility intersected with neglect and marginalisation, and agency intersected with resistance and management of identities and (in)visibility. This finding is similar to previous research on girls and young women in out-of-home care (Kohli and Kaukko 2018; Refaeli 2017). This was also evident in the young women's narratives of negative identities. The way other people view and address marginalised girls and young women has a significant impact on how they see themselves and their feelings of belonging (Heng and White 2018), and this contributes to their identity construction and can deepen their marginalisation. Furthermore, negative narratives can contribute to the experiences of being unwanted and invisible or unheld (Ferguson 2017).

Additionally, our participants' narratives indicated agency in attempts to manage their lives, even in hostile environments (Meyers 2002), while previous research has shown the risks of developing problems, such as substance abuse and psychological issues (Dahlberg et al. 2022; Jozefiak and Kayed 2015; Oerbeck et al. 2021). Management and agency emerge, for example, when contacting CWS, running away, fleeing and resisting negative and stigmatising identity categories and storytelling. Following Abebe's theories (Abebe 2019), the narratives revealed acts of agency through the young women's descriptions of adults inside and outside of out-of-home care units. Their stories helped them define whether their helpers had contributed to or limited their opportunities to improve their lives. A relational understanding of agency emphasises how it is interdependent on 'others' and is always a continuum that needs to be negotiated between adults, communities and the child or young person (Abebe 2019). Agency can only be possible if there is room to exercise it (Abebe 2019). This highlights the need to focus on young women's agency in out-of-home care and to leave room for them to practise it.

Limitations of the study

One limitation of this study is the small number of participants. Despite concerted efforts to recruit more young women with experience in out-of-home care, it proved challenging to access and gain trust from this group. Additionally, some interviews were brief due to the sensitive nature of the topics discussed and the prioritisation of participant well-being. Nonetheless, the narratives presented in this study offer a valuable and distinctive perspective on the experiences of young women with a background in out-of-home care in Norway, as shared by the participants.

Conclusion

To conclude, the participants' narratives are understood as compasses for navigating their challenging personal stories. Through agency, constructing intersecting identities and managing (in) visibility, the young women emphasised strength and empowerment by presenting their stories as a starting point to gain knowledge for social workers in practice. Social workers need knowledge regarding intersectionality among minors in out-of-home care and the complexity related to both individualistic and collective dimensions. Social workers must respect marginalised girls' and young women's needs to be visible or invisible in certain situations and must understand the protective and complex nature of invisibility. We must provide space and opportunity for these girls and young women to practise their agency, as this cannot happen in a vacuum. Agency is interdependent with the people around these young women and must be seen as something dependent on the relational circumstances and social context (Abebe 2019).

The practical implications of this study reveal that the intersectional perspective in social work practice can help in understanding the complexity of the identities of marginalised young women in out-of-home care. To achieve this, social workers need to pay close attention to the small stories of everyday life and how they fit into the dominating narratives that reproduce and recirculate big stories. Further research needs to focus on these stories and resist stereotypical categorisation of marginalised girls and young women as 'troublemakers', 'victims' and 'damaged'.

Disclosure statement

No potential conflict of interest was reported by the author(s).

ORCID

Mira Aurora Marlow http://orcid.org/0000-0003-4402-8577
Hulda Mjøll Gunnarsdottir http://orcid.org/0000-0001-8633-9096
Ingunn Studsrød http://orcid.org/0000-0001-8408-1706

References

Abebe, T. 2019. "Reconceptualising Children's Agency as Continuum and Interdependence." *Social Sciences (Basel)* 8 (3): 81. https://doi.org/10.3390/socsci8030081.

Berejena Mhongera, P., and A. Lombard. 2017. "Who is There for Me? Evaluating the Social Support Received by Adolescent Girls Transitioning from Institutional Care in Zimbabwe." *Practice (Birmingham, England)* 29 (1): 19–35. https://doi.org/10.1080/09503153.2016.1185515.

Bertaux, D. 1981. "Introduction, Biography and Society: The Life History Approach in the Social Sciences." In *Biography and Society: The Life History Approach in the Social Sciences*, edited by D. Bertaux, 5–15, Beverly Hills, California: SAGE Publications.

Bevir, M. 1999. "Foucault and Critique: Deploying Agency Against Autonomy." *Political Theory* 27 (1): 65–84. https://doi.org/10.1177/0090591799027001004.

Bohmer, C., and A. Shuman. 2019. "Political Asylum Narratives and the Construction of Suspicious Subjects." In *Technologies of Suspicion and the Ethics of Obligation in Political Asylum*, edited by. B. M. Haas and A. Shuman, 245–264. Ohio University Press. https://doi.org/10.2307/j.ctv224v04m.14.

Brown, L. M., and C. Gilligan. 1992. *Meeting at the Crossroads: Women's Psychology and girls' Development*. Harvard University Press.

Bruner, J. S. 1986. *Actual Minds, Possible Worlds*. Harvard University Press.

Christensen, A.-D., and S. Q. Jensen. 2012. "Doing Intersectional Analysis: Methodological Implications for Qualitative Research." *NORA - Nordic Journal of Feminist and Gender Research* 20 (2): 109–125. https://doi.org/10.1080/08038740.2012.673505.

Crenshaw, K. 1991. "Mapping the Margins: Intersectionality, Identity Politics, and Violence Against Women of Color." *Stanford Law Review* 43 (6): 1241–1299. https://doi.org/10.2307/1229039.

Criado-Perez, C. 2019. *Invisible Women: Exposing Data Bias in a World Designed for Men*. London: Chatto & Windus.

Dahlberg, M., K. M. M. Boson, M. Anderberg, and P. Wennberg. 2022. "Long-Term Outcomes for Young People with Substance Use Problems in Outpatient Treatment: Gender-Specific Patterns." *Frontiers in Psychiatry* 13 (Article 888197). https://doi.org/10.3389/fpsyt.2022.888197.

Davidson, E., and L. Whittaker. 2017. "The Marginalisation of Care: Young Care leavers' Experiences of Professional Relationships." In *Youth Marginality in Britain: Contemporary Studies of Austerity*, edited by S. Blackman and R. Rogers, 1st ed., 191–206. Policy Press. https://doi.org/10.46692/9781447330530.013.

Eckersley, R. 2011. "A New Narrative of Young People's Health and Well-Being." *Journal of Youth Studies* 14 (5): 627–638. https://doi.org/10.1080/13676261.2011.565043.

Elster, J. 2020. "Youth Voices in Post-English Riots Tottenham: The Role of Reflexivity in Negotiating Negative Representations." *The Sociological Review (Keele)* 68 (6): 1386–1402. https://doi.org/10.1177/0038026120915706.

European Commission. (2006). *Towards an EU Strategy on the Rights of Child* (p. 10) [Communication]. https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52006DC0367&from=EN.

Ferguson, H. 2017. "How Children Become Invisible in Child Protection Work: Findings from Research into Day-To-Day Social Work Practice." *The British Journal of Social Work* 47 (4): 1007–1023. https://doi.org/10.1093/bjsw/bcw065.

Galster, G., A. M. Santiago, and L. Stack. 2016. "Elementary School Difficulties of Low-Income Latino and African American Youth: The Role of Geographic Context." *Journal of Urban Affairs* 38 (4): 477–502. https://doi.org/10.1111/juaf.12266.

Greger, H. K., A. K. Myhre, S. Lydersen, and T. Jozefiak. 2015. "Previous Maltreatment and Present Mental Health in a High-Risk Adolescent Population." *Child Abuse & Neglect* 45:122–134. https://doi.org/10.1016/j.chiabu.2015.05.003.

Heidbrink, L. 2014. *Migrant Youth, Transnational Families, and the State: Care and Contested Interests*. University of Pennsylvania Press. https://doi.org/10.9783/9780812209679.

Heng, L., and J. White. 2018. "Employing Intersectionality and the Concept of Difference to Investigate Belonging and Inclusion." In *Belonging: Rethinking Inclusive Practices to Support Well-Being and Identity*, edited by A. Guerin, 95–106. Vol. 36. Leiden, Boston: Brill Sense.

Hooks, B. 2015. *Feminist Theory: From Margin to Center*. Routledge. https://doi.org/10.4324/9781315743172.

Jansen, A. 2010. "Victim or Troublemaker? Young People in Residential Care." *Journal of Youth Studies* 13 (4): 423–437. https://doi.org/10.1080/13676261003801770.

Jozefiak, T., and N. S. Kayed. 2015. "Self- and Proxy Reports of Quality of Life Among Adolescents Living in Residential Youth Care Compared to Adolescents in the General Population and Mental Health Services." *Health and Quality of Life Outcomes* 13 (1): 104–104. https://doi.org/10.1186/s12955-015-0280-y.

Jozefiak, T., N. S. Kayed, T. Rimehaug, A. K. Wormdal, A. M. Brubakk, and L. Wichstrøm. 2016. "Prevalence and Comorbidity of Mental Disorders Among Adolescents Living in Residential Youth Care." *European Child & Adolescent Psychiatry* 25 (1): 33–47. https://doi.org/10.1007/s00787-015-0700-x.

Kohli, R. K. S., and M. Kaukko. 2018. "The Management of Time and Waiting by Unaccompanied Asylum-Seeking Girls in Finland." *Journal of Refugee Studies* 31 (4): 488–506. https://doi.org/10.1093/jrs/fex040.

Lanser, S. S. 2010. "Are We There Yet? The Intersectional Future of Feminist Narratology." *Wai Guo Wen Xue Yan Jiu* 32 (4): 32–41.

Lems, A., K. Oester, and S. Strasser. 2019. "Children of the Crisis: Ethnographic Perspectives on Unaccompanied Refugee Youth in and En Route to Europe." *Journal of Ethnic and Migration Studies* 46 (2): 1–21. https://doi.org/10.1080/1369183x.2019.1584697.

Lennox, A. 2015. "Feminist Theory and Social Justice." In *Feminist Theory, Crime, and Social Justice*, edited by A. Van Gundy, 1–23, Oxfordshire, England, New York: Routledge.

Loots, G., K. Coppens, and J. Sermijn. 2013. "Practising a Rhizomatic Perspective in Narrative Research." In M. Andrews, C. Squire, and M. Tamboukou edited by, *Doing Narrative Research* 108–125. 2nd. Sage. https://doi.org/10.4135/9781526402271.n6.

Mäkinen, V., J. Robinson, and P. Slotte. 2020. "Rights and Justice Towards the Margins." In *Rights at the Margins: Historical, Legal and Philosophical Perspectives*, edited by V. Mäkinen, J. Robinson, P. Slotte, and H. Haara, 1–27. Vol. 316. Leiden, Boston: Brill.

Marlow, M. A., R. Sørly, and H. K. Kaatrakoski. 2022. "Personal Stories of Young Women in Residential Care: Health-Promoting Strategies and Wellbeing." *International Journal of Environmental Research and Public Health* 19 (24): 16386. https://doi.org/10.3390/ijerph192416386.

Meyers, D. T. 2002. *Gender in the Mirror: Confounding Imagery*. Oxford University Press. https://doi.org/10.1093/0195140419.001.0001.

Norwegian National Research Ethics Committees. (2022). *Guidelines for Research Ethics in the Social Sciences and the Humanities*. https://www.forskningsetikk.no/en/guidelines/social-sciences-humanities-law-and-theology/guidelines-for-research-ethics-in-the-social-sciences-humanities-law-and-theology/.

Oerbeck, B., K. R. Overgaard, V. Hjellvik, L. Lien, and J. G. Bramness. 2021. "The Use of Antidepressants, Antipsychotics, and Stimulants in Youth Residential Care." *Journal of Child and Adolescent Psychopharmacology* 31 (5): 350–357. https://doi.org/10.1089/cap.2020.0123.

Pérez Prieto, H. 2006. *Historien om räven och andra berättelser: Om klasskamrater och skolan på en liten ort - ur ett skol- och livsberättelse perspektiv* (Research 2006:52). http://urn.kb.se/resolve?urn=urn:nbn:se:kau:diva-723.

Phoenix, A. 2011. "Psychosocial Intersections: Contextualising the Accounts of Adults Who Grew Up in Visibly Ethnically Different Households." In *Framing Intersectionality: Debates on a Multi-Faceted Concept in Gender Studies*, edited by M. T. H. Vivar, H. Lutz, and L. Supik, 137–152. Routledge. https://doi.org/10.4324/9781315582924.

Pihl, J. 2015. "Epistemological and Methodological Challenges in Research Concerning Youth at the Margins." In *Youth ´at the margins´: Critical Perspectives and Experiences of Engaging Youth in Research Worldwide*, edited by. S. Bastien and H. B. Holmarsdottir, 41–63. Sense Publishers. https://doi.org/10.1007/978-94-6300-052-9_3.

Powers, L. E., A. Fullerton, J. Schmidt, S. Geenen, M. Oberweiser-Kennedy, J. Dohn, M. Nelson, R. Iavanditti, and J. Blakeslee. 2018. "Perspectives of Youth in Foster Care on Essential Ingredients for Promoting Self-Determination and Successful Transition to Adult Life: My Life Model." *Children and Youth Services Review* 86:277–286. https://doi.org/10.1016/j.childyouth.2018.02.007.

Puetz, V. B., E. Viding, M. I. Gerin, J.-B. Pingault, A. Sethi, A. R. Knodt, S. R. Radtke, B. D. Brigidi, A. R. Hariri, and E. McCrory. 2020. "Investigating Patterns of Neural Response Associated with Childhood Abuse V. Childhood Neglect – Corrigendum." *Psychological Medicine* 50 (8): 1408–1408. https://doi.org/10.1017/S0033291719001752.

Refaeli, T. 2017. "Narratives of Care Leavers: What Promotes Resilience in Transitions to Independent Lives?" *Children and Youth Services Review* 79:1–9. https://doi.org/10.1016/j.childyouth.2017.05.023.

Sarmento, M. J., R. de Cássia Marchi, and G. de Pina Trevisan. 2018. "Beyond the Modern "Norm" of Childhood: Children at the Margins as a Challenge for the Sociology of Childhood." In *Theorising Childhood: Citizenship, Rights and Participation*, edited by. C. Baraldi and T. Cockburn, 135–157. Springer International Publishing. https://doi.org/10.1007/978-3-319-72673-1_7.

Schlosser, M. 2019. "Agency". *The Stanford Encyclopedia of Philosophy*. In E. N. Zalta edited byVol. Winter volume 29 :Metaphysics Research Lab, Stanford University https://plato.stanford.edu/archives/win2019/entries/agency/.

Schofield, G., B. Larsson, and E. Ward. 2017. "Risk, Resilience and Identity Construction in the Life Narratives of Young People Leaving Residential Care: Risk, Resilience, Identity and Residential Care." *Child & Family Social Work* 22 (2): 782–791. https://doi.org/10.1111/cfs.12295.

Singstad, M. T., J. L. Wallander, H. K. Greger, S. Lydersen, and N. S. Kayed. 2021. "Perceived Social Support and Quality of Life Among Adolescents in Residential Youth Care: A Cross-Sectional Study." *Health and Quality of Life Outcomes* 19 (1): 29–29. https://doi.org/10.1186/s12955-021-01676-1.

Skattebol, J., and G. Redmond. 2019. "Troubled Kids? Locational Disadvantage, Opportunity Structures and Social Exclusion." *Children's Geographies* 17 (1): 76–89. https://doi.org/10.1080/14733285.2018.1487031.

Smith, B., and A. C. Sparkes. 2008. "Contrasting Perspectives on Narrating Selves and Identities: An Invitation to Dialogue." *Qualitative Research* 8 (1): 5–35. https://doi.org/10.1177/1468794107085221.

Svahn, J. 2017. "Jag har bara ADHD å så": Identitetskonstruktion och normalisering i resursskoleelevers berättelser." In *Fortelling og forskning: Narrativ teori og metode i tverrfaglig perspektiv*, edited by R. Sørly and B. H. Blix, 125–139, Stamsund: Orkana akademisk.

United Nations. (2014, November 1). *Women's Rights are Human Rights*. https://www.ohchr.org/en/publications/special-issue-publications/womens-rights-are-human-rights.

UN Women. (2020). *Facts and Figures: Ending Violence Against Women*. https://www.unwomen.org/en/what-we-do/ending-violence-against-women/facts-and-figures.

Wehmeyer, M. L. 1995. "A Career Education Approach: Self-Determination for Youth with Mild Cognitive Disabilities." *Intervention in School and Clinic* 30 (3): 157–163. https://doi.org/10.1177/105345129503000305.

Woodcock, C. 2016. "The Listening Guide: A How-To Approach on Ways to Promote Educational Democracy." *International Journal of Qualitative Methods* 15 (1): 160940691667759. Article 160940691667759. https://doi.org/10.1177/1609406916677594.

Wortham, S. 2000. "Interactional Positioning and Narrative Self-Construction." *Narrative Inquiry* 10 (1): 157–184. https://doi.org/10.1075/ni.10.1.11wor.