



# THE IMPORTANCE OF SOCIAL CLIMATE FOR THE WELL-BEING OF YOUNG PEOPLE IN RESIDENTIAL YOUTH CARE

---

Dr. Jonathan Leipoldt, Developmental Psychology, University of Amsterdam



university of  
 groningen



NTNU

Faculty of Medicine  
and Health Sciences

Department of Mental Health

# RESIDENTIAL YOUTH CARE (RYC)

**When all other measures have failed. In Norway:**

- **3-5 placements** (41%) of which most involuntary (56%)
- As long as needed, average 3-6 months
- Cohabiting with around 5 other adolescents
- Treatment, school, activities, **a 'normal' life**

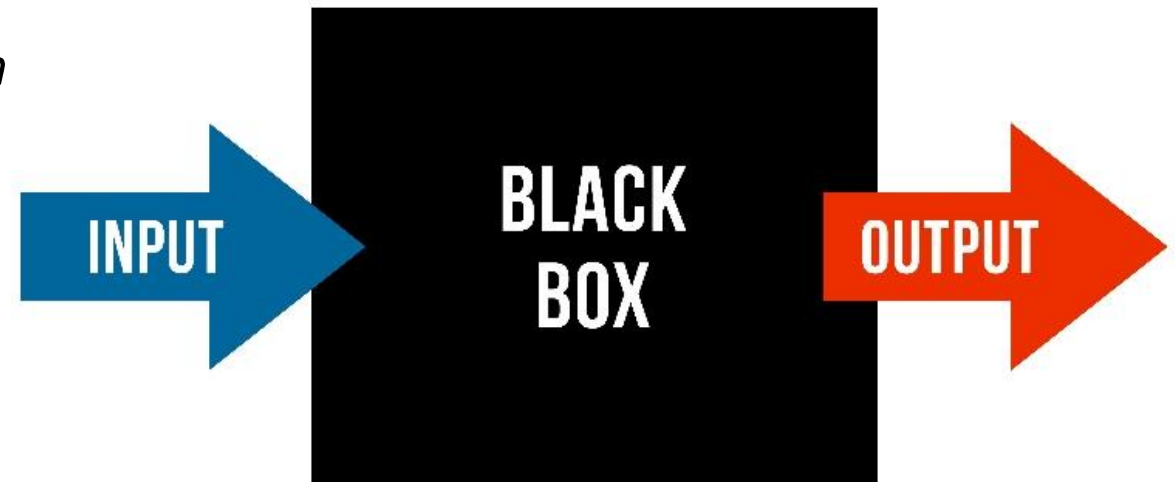


# THE “BLACK BOX” OF RYC

## Results of meta-analyses show:

Small to moderate effects of RYC

- Short-term results are positive
- Long-term results less convincing → *recidivism*
- **RYC = “Black Box”**
- What works? (effectiveness)
  - **How** does it work?



# A LAST RESORT

## Problems:

- Previous care unsuccessful → **prolonged suffering**
- Disappointment, distrust, negative expectations
- Negative starting point for attachment relationships

## Which may result in:

- Negative impact for **treatment motivation** (important for positive outcomes)

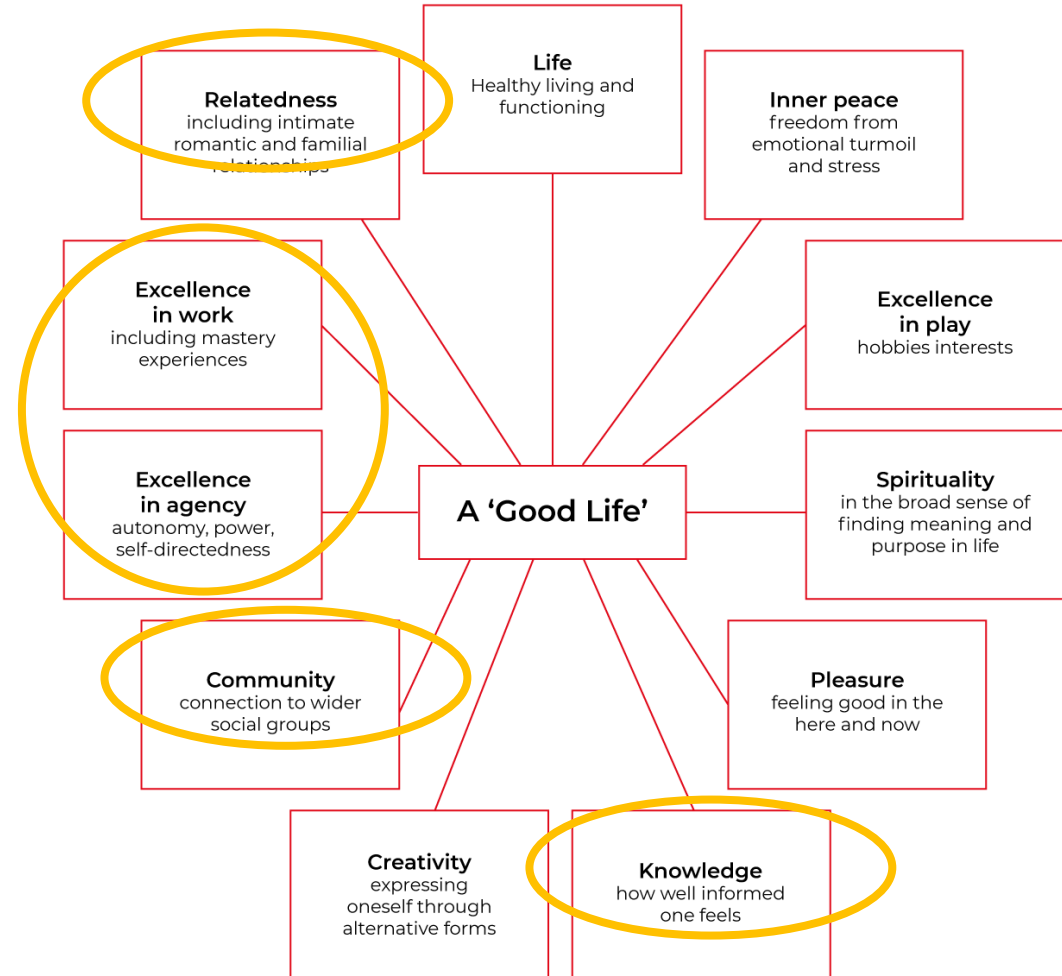
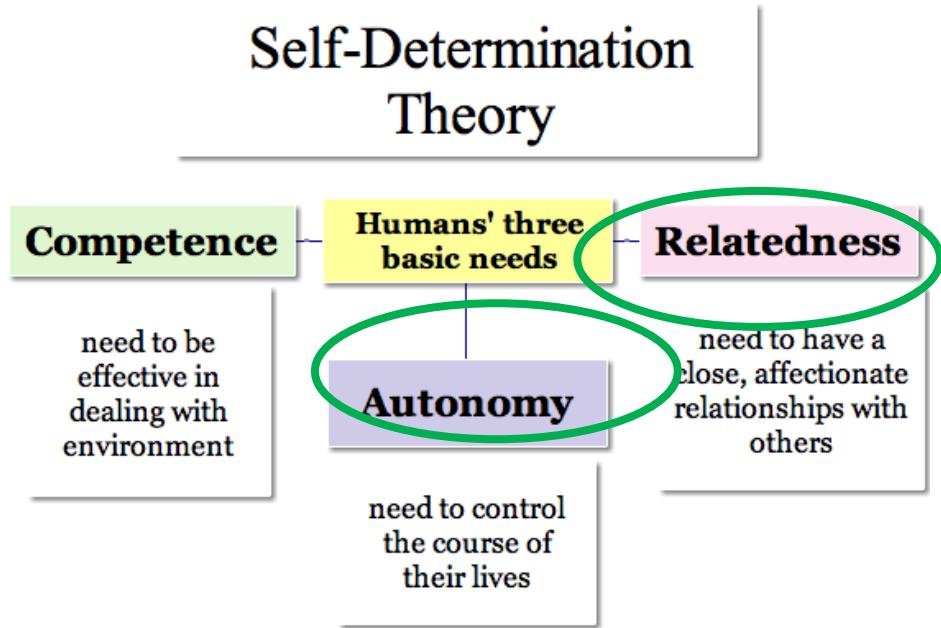
## We therefore need:

- Safe and caring **social climate** during stay where we can promote good **quality of life**

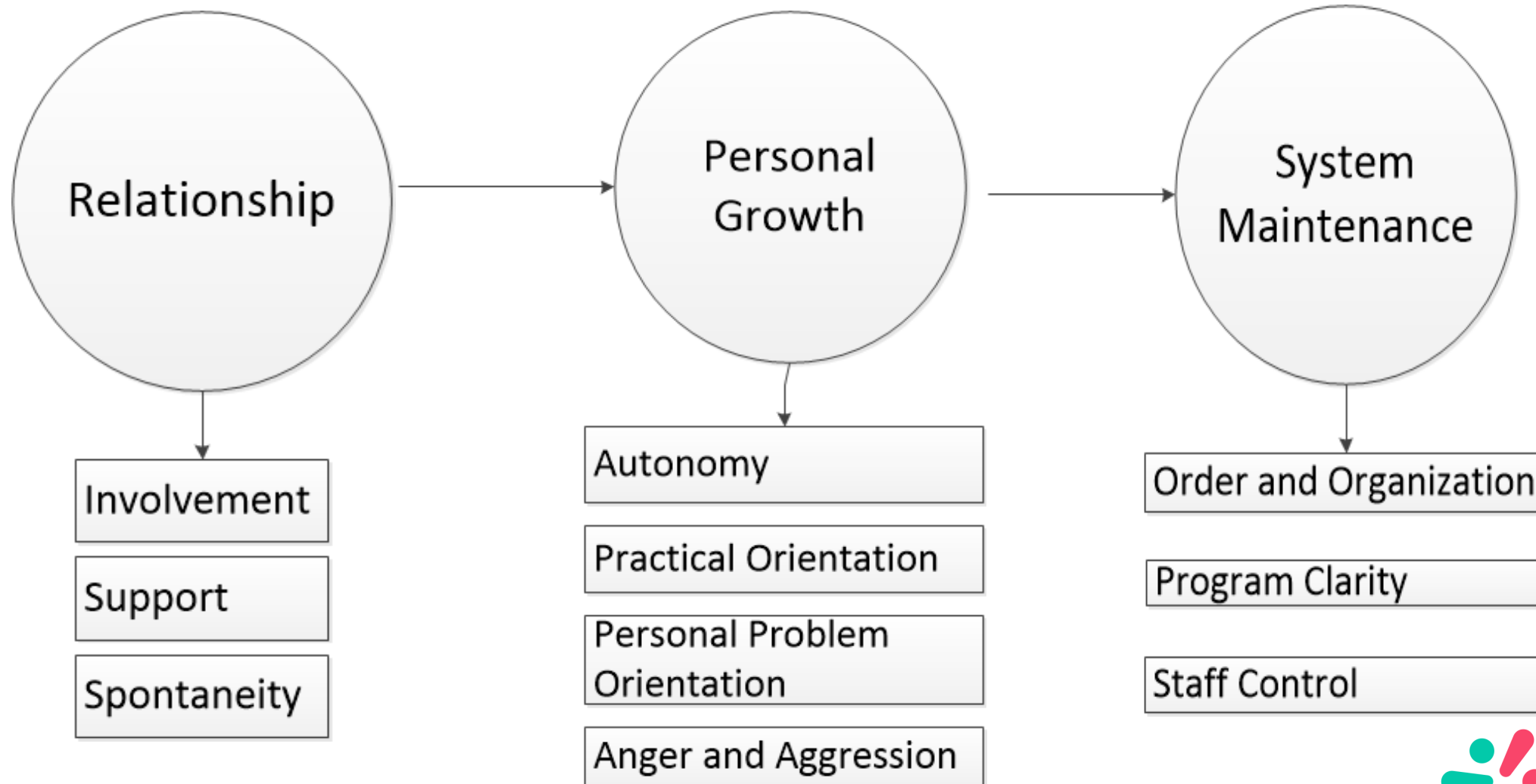
# SOCIAL CLIMATE IN RYC

“... the quality of the social and physical environment in terms of the provision of sufficient and necessary conditions for the physical and mental health, **well-being**, and **personal growth** of the residents, with respect for their human dignity and human rights as well as (if not restricted by judicial measures) their **personal autonomy**, aimed **at participation in society**”.

# SOCIAL CLIMATE – THEORY



# SOCIAL CLIMATE – OPERATIONALIZED



# RYC SOCIAL CLIMATE

## Scarce knowledge on:

- The **interplay** of **contextual factors** contributing to a positive social climate → determinants
  - Organizational & youth characteristics → Mostly studied as separate associations
  - Up to 30-50% of treatment outcome variance

## Important because:

- Heterogenous population of youth in RYC may have different needs in the living environment
- More knowledge on promoting durable positive outcomes, such as quality of life (QoL)

## Social climate as a '*nonprogrammatic factor*'

- Studied in a person-centered approach





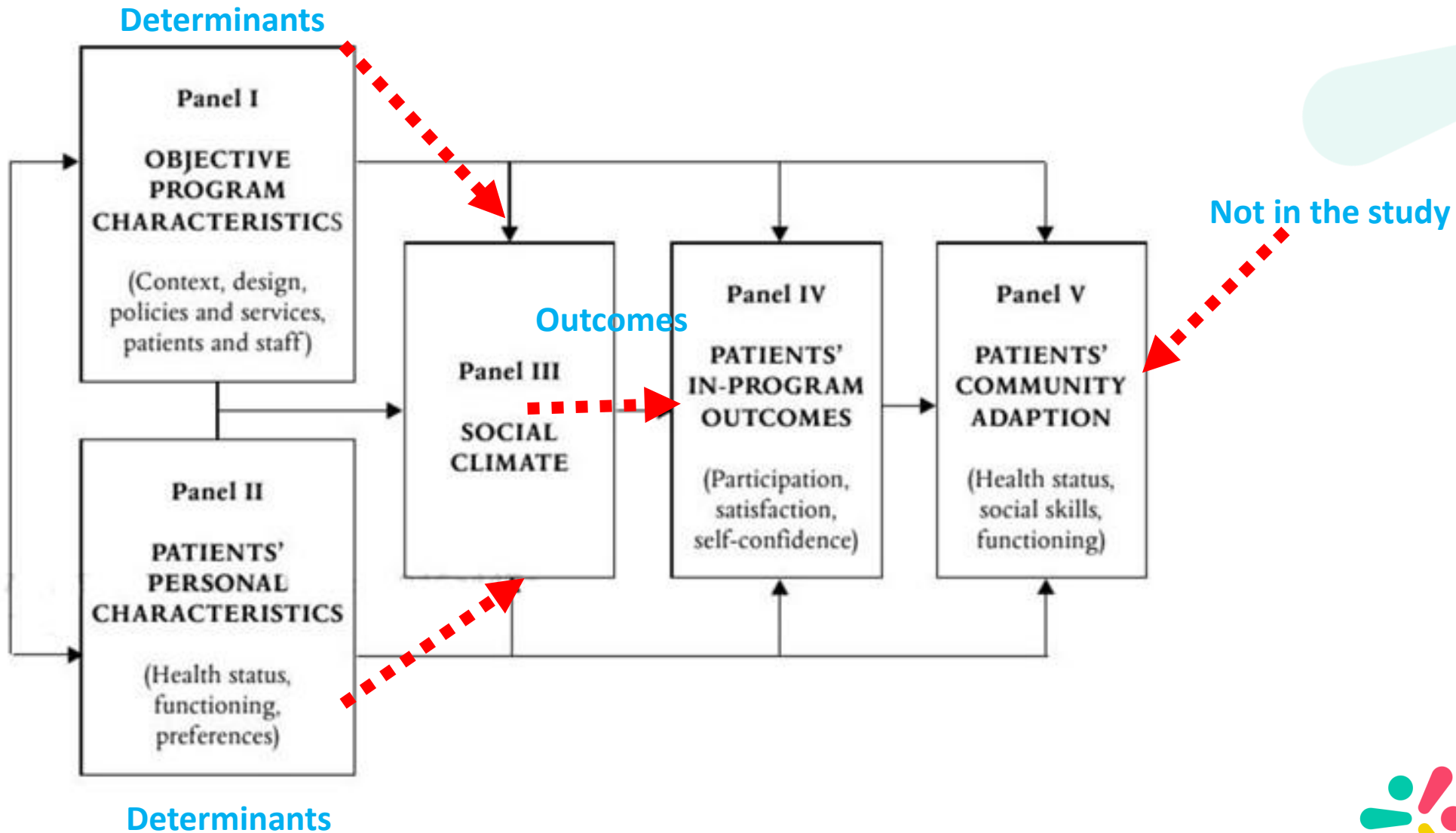
# RYC OUTCOMES

## Quality of Life

- Well-being in various life domains: Physical, emotional, school, friends, family
- Universal indicator of success
- Negatively related to psychopathology, but still possible to experience a high QoL.



# THEORETICAL ECOLOGICAL MODEL



# RESEARCH QUESTIONS

## Study 1 (research question 1)



How are RYC and youth characteristics associated with experienced social climate?


## Study 2 (research question 2)

How are RYC and youth characteristics associated with the treatment outcome 'quality of life' and does social climate play a role in this relationship?



## The interplay of youth and care characteristics with a positive social climate in therapeutic residential youth care

[Jonathan D. Leipoldt](#)<sup>a, b</sup>  , [Annemiek T. Harder](#)<sup>c</sup>, [Nanna S. Kayed](#)<sup>b</sup>, [Hans Grietens](#)<sup>e</sup>, [Tormod Rimehaug](#)<sup>b, d</sup>

[Show more](#) 



## The Mediating Role of Social Climate in the Association of Youth and Residential Service Characteristics and Quality of Life

[Jonathan D. Leipoldt](#)<sup>1, 2</sup>, [Annemiek T. Harder](#)<sup>3</sup>, [Nanna S. Kayed](#)<sup>2</sup>,  
[Erik J. Knorth](#)<sup>1</sup>, and [Tormod Rimehaug](#)<sup>2, 4</sup>



# METHOD

## Participants

- 142 staff leaders, 400 youth of which 57.5% female, average age 16.5 years ( $SD = 1.2$ )
- 76% of youth met criteria for at least one psychiatric diagnosis

## Materials

### **RYC Characteristics**

- *Questionnaire:* Size, Leader info, staff info, work experience, routines, spare time division, school, and daily routines

### **Youth Characteristics**

- *Interviews:* care history, organized family care, substance problems, school history, psychiatric interview (CAPA)
- *Questionnaires:* Emotion regulation (DERS), social climate (CPES), Quality of Life (KINDL-R)

# METHOD

## Procedure and Ethics

- Data collection ~2.5 hours, research assistants.
- Consent and ethics approval

## Analysis plan (RQ1)

- Step 1: Latent class analysis (LCA) for RYC and Youth characteristics
- Step 2: Three MANOVA's
  - IV: Results of LCA for RYC and Youth classes
  - DV: Social climate subscales per dimension

LCA conducted in Mplus and MANOVA's in SPSS.  $p < .05$  considered significant, Bonferroni / Tukey correction





# METHOD

## Analysis plan (RQ2)

### Structural Equation Modelling (SEM)

- RYC and youth characteristics as *dummy variables*
- Social climate and QoL as single *latent indicators*

Biases-corrected bootstrapped standard errors and Raykov's factor reliability



# RESULTS – STUDY 1

## RYC Characteristics

### Family-style RYC (54% of the sample)

- Small, cohabitation routine, private ownership, younger leaders, more acute placements, more friends

### Larger RYC settings (46% of the sample)

- Larger, 3x8 routine, urban localization, more staff, organized activities, long-term placements



# RESULTS – YOUTH CHARACTERISTICS

## Severe problems (38% of the sample)

- Girls, involuntarily placement, most psychiatric, emotion regulation, and school problems

## Incidental / crisis problems (36% of the sample)

- Substance or behavioral related incidents, less psychiatric problems

## Family problems (13% of the sample)

- Young first placement, parental problems, most no. of placements

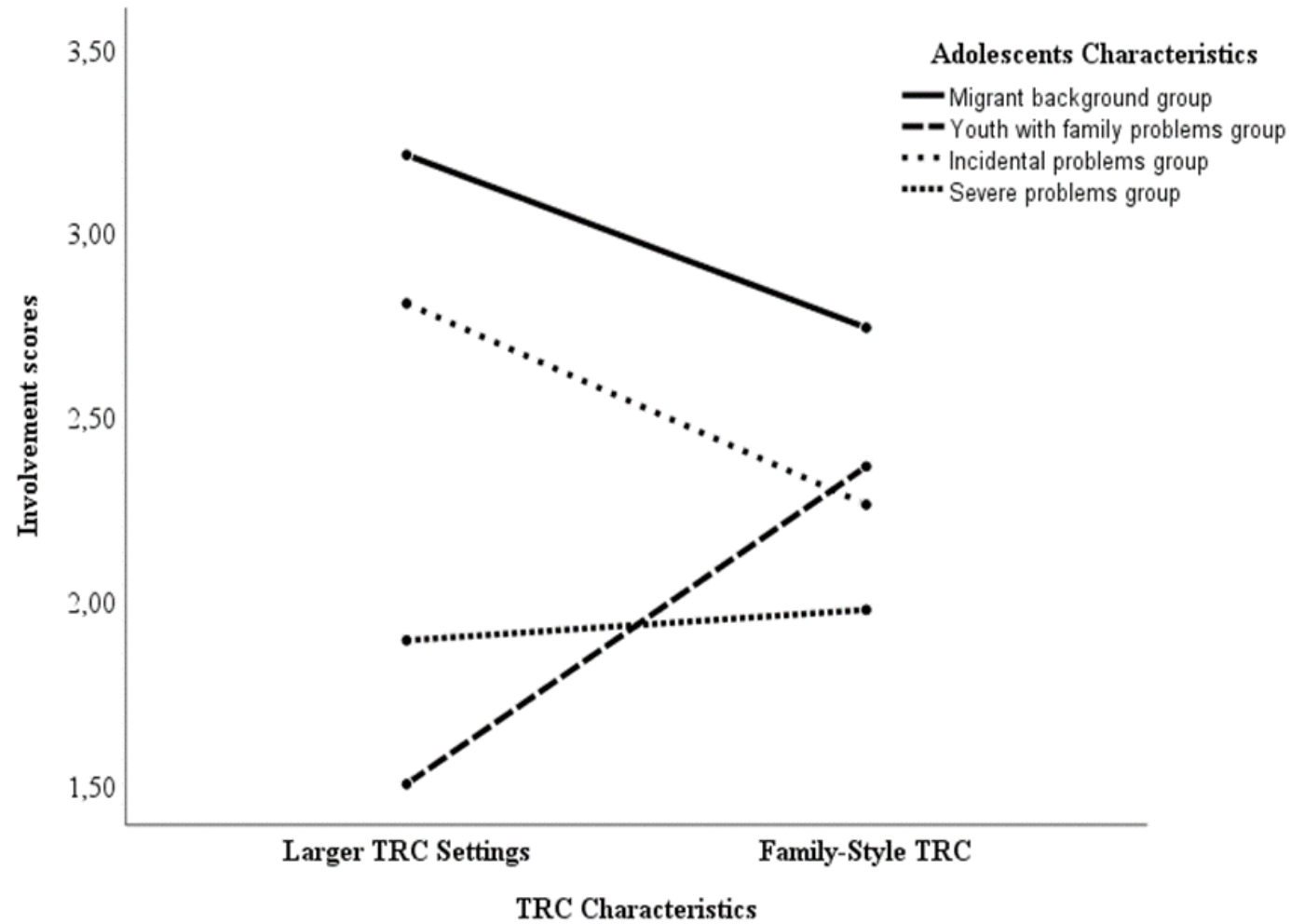
## Youth with a migrant background (13% of the sample)

- Voluntarily placed boys, aggression problems at home, less family contact

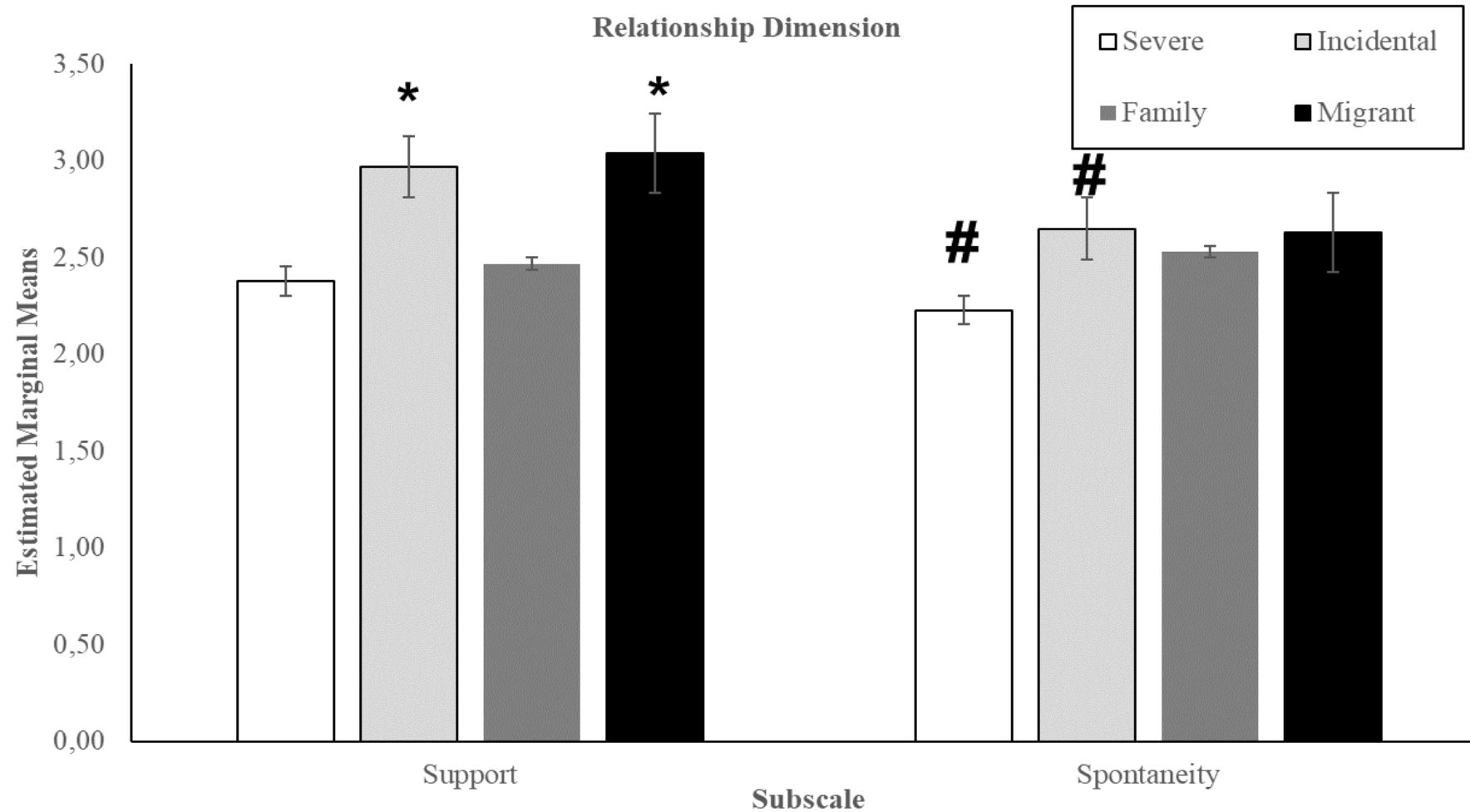




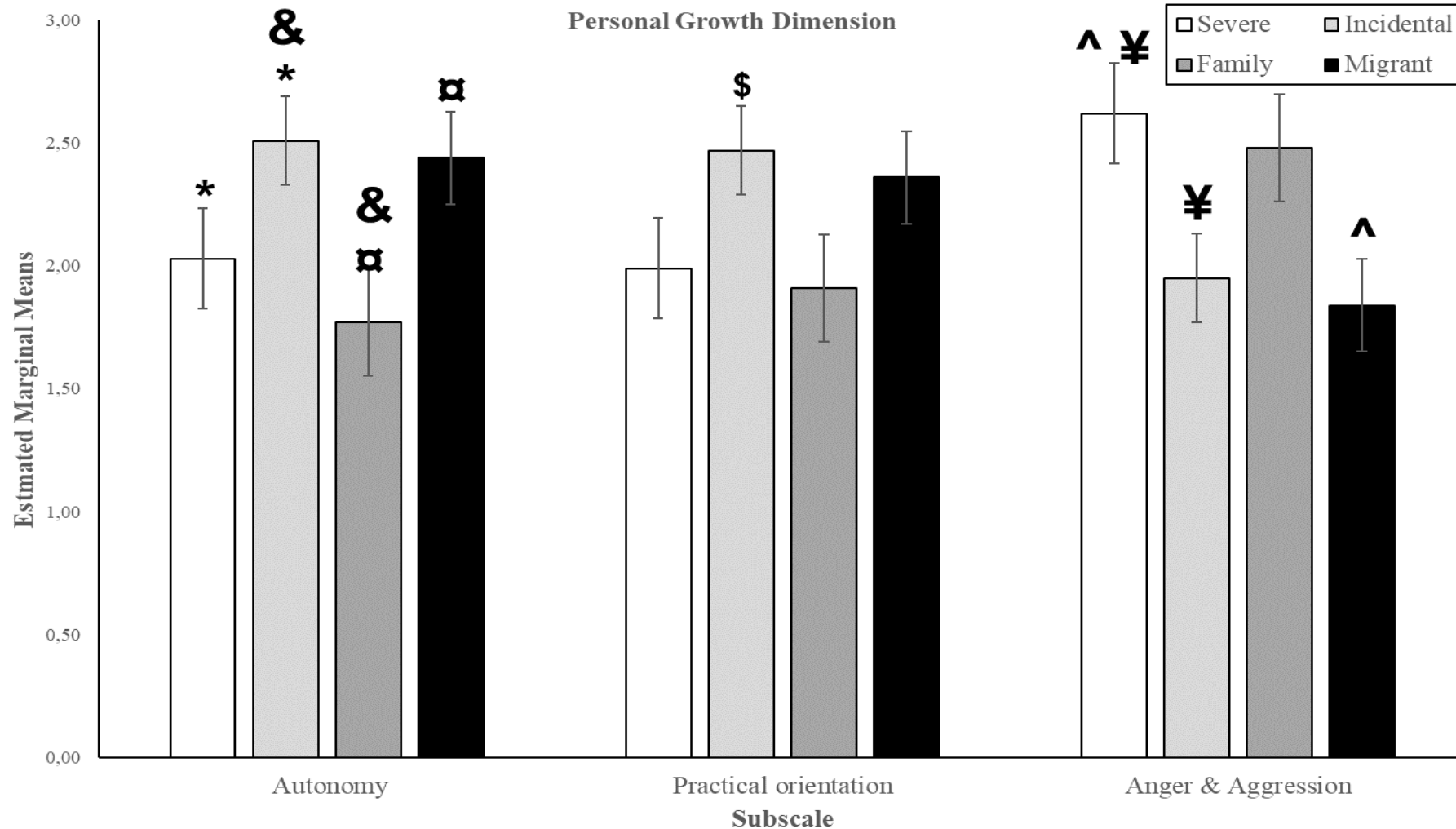
# RESULTS STUDY 1 – SOCIAL CLIMATE – INVOLVEMENT



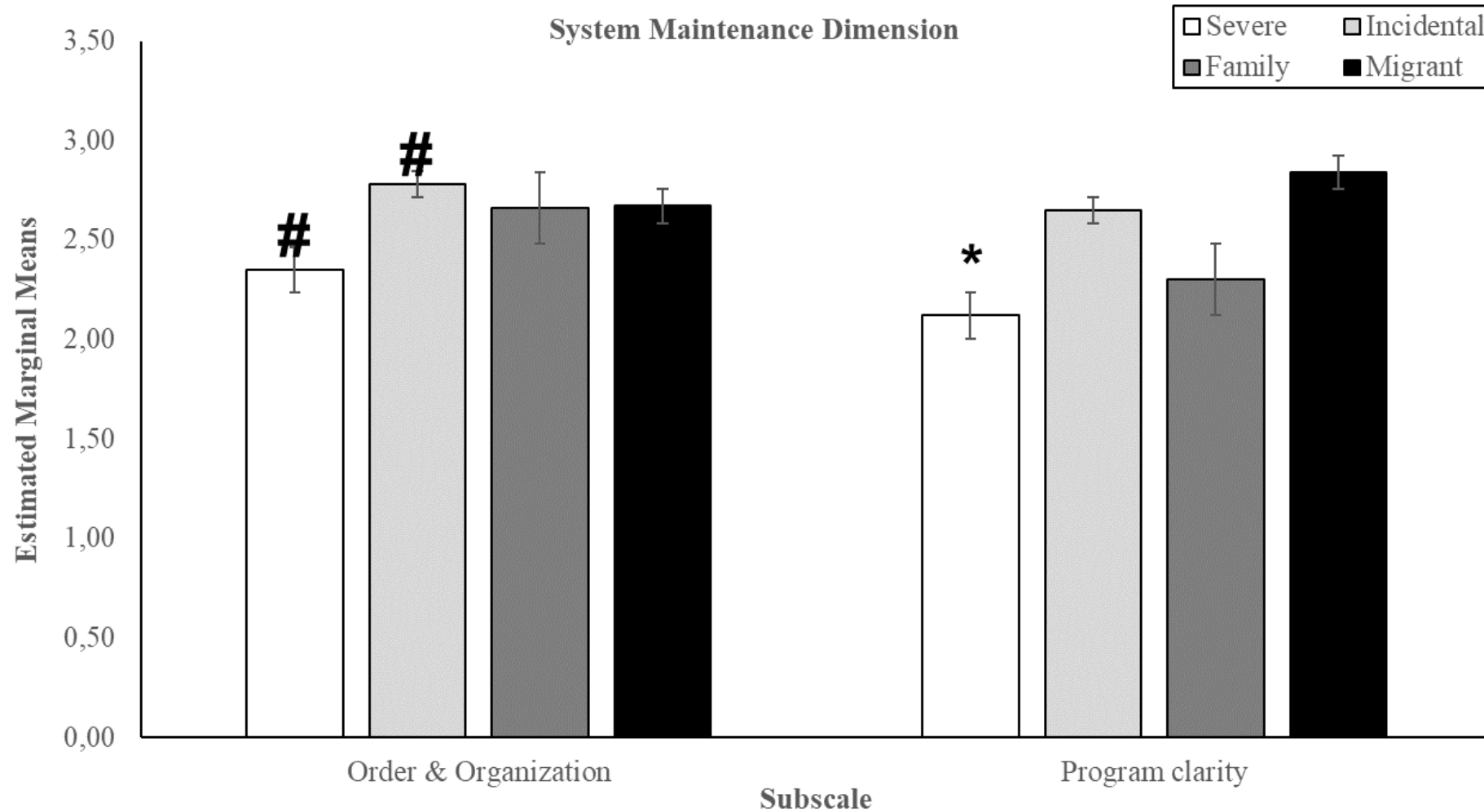
# RESULTS STUDY 1 – SOCIAL CLIMATE – RELATIONSHIP DIMENSION



# RESULTS STUDY 1 – PERSONAL GROWTH DIMENSION



# RESULTS STUDY 1 – SYSTEM MAINTENANCE DIMENSION



# RESULTS STUDY 2

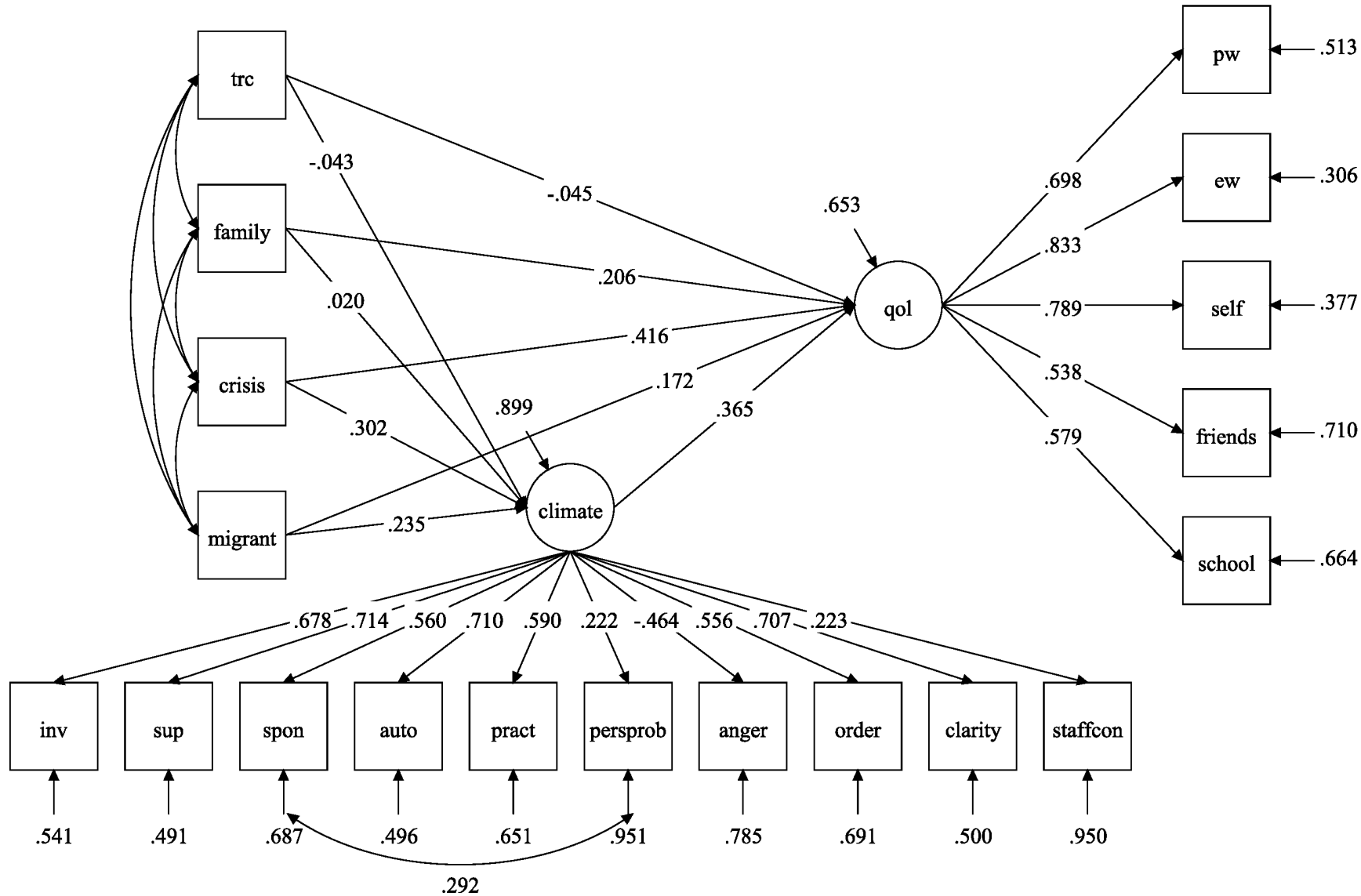
Variable	Family-Style RYC M (SD)	Larger group-style RYC M (SD)	Severe problems M (SD)	Incidental problems M (SD)	Family problems M (SD)	Migrant background M (SD)
Physical well-being	57.06 (25.27)	58.69 (25.67)	47.63 (22.10)	67.02 (21.47)	54.83 (29.71)	62.84 (25.77)
Emotional well-being	62.55 (23.94)	66.25 (24.62)	51.81 (23.47)	73.72 (18.84)	64.73 (24.25)	68.75 (25.38)
Self-esteem	46.59 (26.56)	47.51 (27.75)	34.23 (23.24)	55.81 (25.12)	50.29 (26.34)	58.33 (32.01)
Friends	67.17 (23.40)	69.28 (22.74)	61.43 (22.47)	74.21 (20.98)	64.29 (27.02)	69.88 (19.87)
School	53.40 (21.34)	54.81 (22.39)	44.59 (19.55)	60.58 (21.61)	58.33 (19.42)	57.35 (21.40)
Total QoL <sup>1</sup>	57.23 (18.92)	59.54 (18.64)	48.06 (15.88)	66.60 (15.67)	58.72 (18.71)	63.08 (20.12)



# RESULTS STUDY 2

Variables	Direct effect $\beta$ (SE)	Indirect effect $\beta$ (SE)	Total effect $\beta$ (SE)	$R^2$	RRC
<b>Social Climate</b>				.10*	.83
RYC	-.04 (.06)	-	-		
Family	.02 (.07)	-	-		
Incidental	.30 (.06)**	-	-		
Migrant	.24 (.06)**	-	-		
<b>Quality of Life</b>				.35**	.77
RYC	-.05 (.06)	-.02 (.02)	-.06 (.06)		
Family	.21 (.07)*	.01 (.02)	.21 (.07)*		
Incidental	.42 (.06)**	.11 (.03)**	.53 (.05)**		
Migrant	.17 (.08)*	.09 (.03)*	.26 (.07)**		
Social climate	.37 (.07)**	-	-		

# RESULTS STUDY 2



# CONCLUSIONS – STUDY 1

## Main findings

- Social climate **most negatively** perceived by youths with **severe problems**.
- Youth with a migrant background → most positively, less problems
- Youth with family problems **more involved in family-style care**.
- Future research should focus on **longitudinal associations** with RYC outcomes
- Findings regarding **heterogenous RYC-population** highlight needs for **tailored environments** with clear expectations



# CONCLUSIONS – STUDY 2

## Main findings

- No effect of RYC characteristics on QoL → few differences
- A positive social climate is associated with a higher QoL
- Youth with severe problems perceive the social climate and their QoL most negatively

## Findings of the mediation

- QoL increases for the incidental problems and migrant background group
- Youth with severe problems can even have a more negative QoL if they perceive the social climate negatively
- Illustrates importance of social climate and concerns for the low QoL of the severe problems group

# LIMITATIONS & IMPLICATIONS

## Limitations

- Correlational design → Limits our understanding over time
- Single latent construct for social climate and QoL
- Homogeneity in RYC characteristics

## Implications

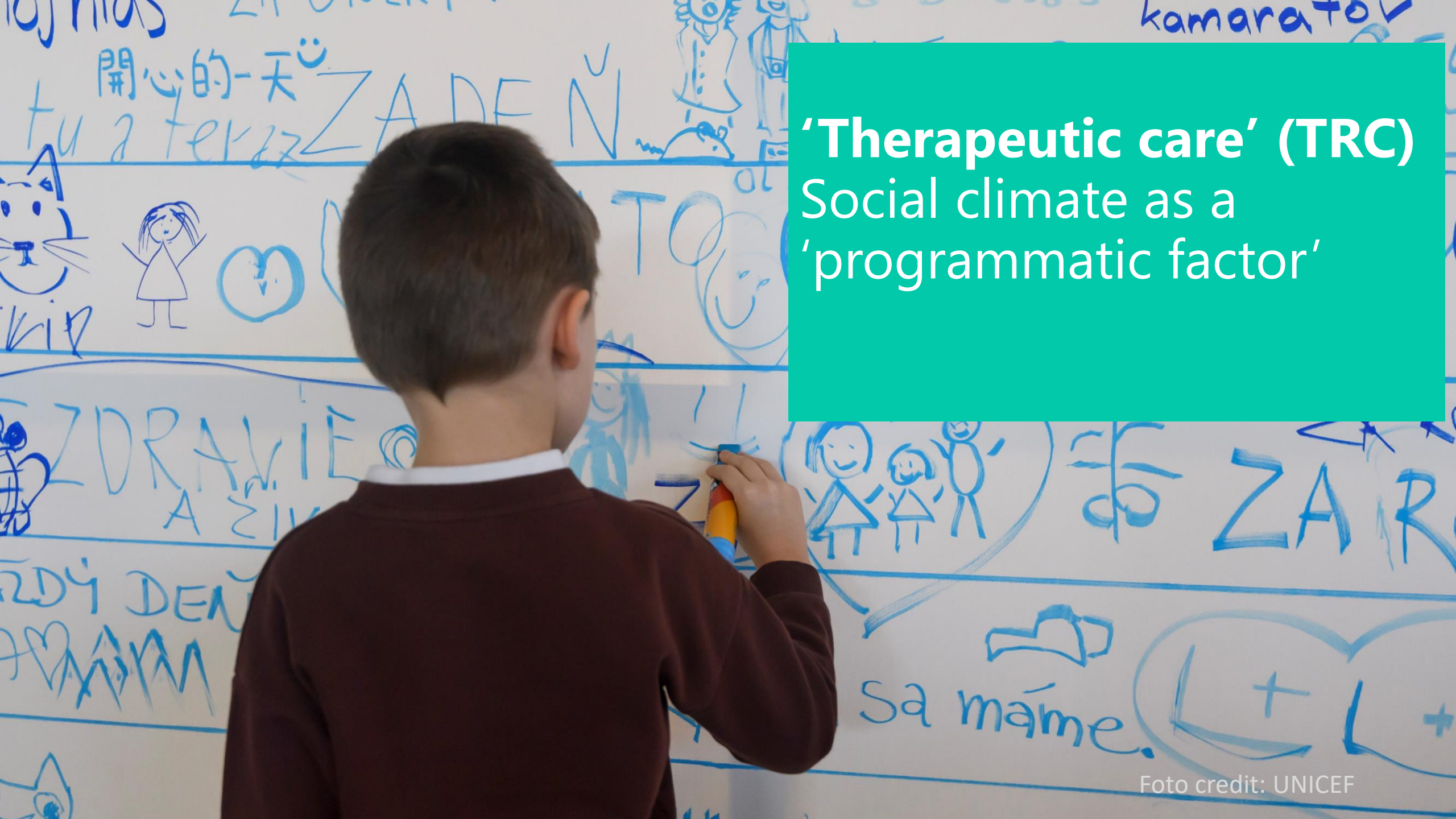
- **Continuous dialogue** about social climate, starting at intake
- Shared decision-making → increasing **autonomy**
- Routine Outcome Monitoring (ROM) on social climate, QoL, and mental health  
→ **use in treatment** and **share results** (e.g., in an app).
- *Future research* on longitudinal effects, more detailed QoL and social climate investigations



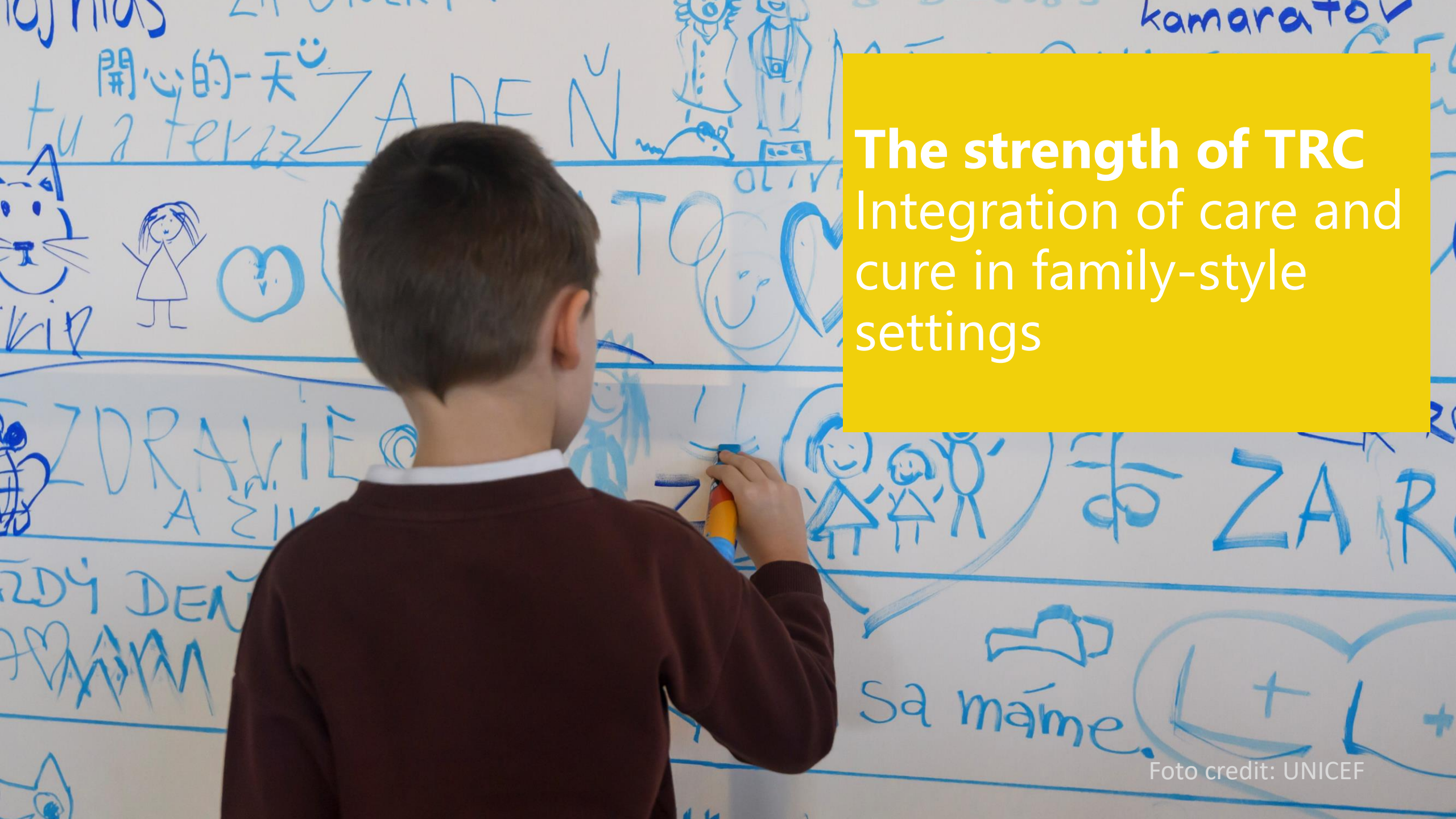


**Care and cure**  
Integrate mental health and trauma-sensitive care in RYC





**'Therapeutic care' (TRC)**  
Social climate as a  
'programmatic factor'



**The strength of TRC**  
Integration of care and  
cure in family-style  
settings





**Thank you – Hvala!**

Jonathan Leipoldt, University of Amsterdam

[j.d.leipoldt@uva.nl](mailto:j.d.leipoldt@uva.nl)



UNIVERSITY  
OF AMSTERDAM



university of  
 groningen

# REFERENCES (1)

- Andrews, D. A. (2011). The impact of nonprogrammatic factors on criminal-justice interventions. *Legal and Criminological Psychology, 16*(1), 1–23.  
<https://doi.org/10.1348/135532510X521485>
- Attar-Schwartz, S. (2017). Experiences of victimization by peers and staff in residential care for children at risk in Israel from an ecological perspective. In A. V Rus, S. R. Parris, & E. Stativa (Eds.), *Child maltreatment in residential care* (pp. 269–299). Springer International Publishing AG. [https://doi.org/10.1007/978-3-319-57990-0\\_13](https://doi.org/10.1007/978-3-319-57990-0_13)
- Cantora, A., Mellow, J., & Schlager, M. D. (2014). What about nonprogrammatic factors? Women’s perceptions of staff and resident relationships in a community corrections setting. *Journal of Offender Rehabilitation, 53*(1), 35–56. <https://doi.org/10.1080/10509674.2013.861315>
- Chen, H., Cohen, P., Kasen, S., Johnson, J. G., Berenson, K., & Gordon, K. (2006). Impact of adolescent mental disorders and physical illnesses on quality of life 17 years later. *Archives of Pediatrics & Adolescent Medicine, 160*(1), 93. <https://doi.org/10.1001/archpedi.160.1.93>
- De Swart, J. J. W., Van den Broek, H., Stams, G., Asscher, J. J., Van der Laan, P. H., Holsbrink-Engels, G. A., & Van der Helm, G. H. P. (2012). The effectiveness of institutional youth care over the past three decades: A meta-analysis. *Children and Youth Services Review, 34*(9), 1818–1824. <https://doi.org/10.1016/j.childyouth.2012.05.015>
- Deci, E. L., & Ryan, R. M. (2000). The “What” and “Why” of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry, 11*(4), 227–268.  
[https://doi.org/10.1207/S15327965PLI1104\\_01](https://doi.org/10.1207/S15327965PLI1104_01)
- Dey, M., Landolt, M. A., & Mohler-Kuo, M. (2012). Health-related quality of life among children with mental disorders: A systematic review. *Quality of Life Research, 21*(10), 1797–1814.  
<https://doi.org/10.1007/s11136-012-0109-7>
- Farmer, E. M. Z., Wagner, H. R., Burns, B. J., & Richards, J. T. (2003). Treatment foster care in a system of care: Sequences and correlates of residential placements. *Journal of Child and Family Studies, 12*(1), 11–25. <https://doi.org/https://doi.org/10.1023/A:1021349907744>
- Hair, H. J. (2005). Outcomes for children and adolescents after residential treatment: A review of research from 1993 to 2003. *Journal of Child and Family Studies, 14*(4), 551–575.  
<https://doi.org/10.1007/s10826-005-7188-9>
- Harder, A. T., & Knorth, E. J. (2015). Uncovering what is inside the “black box” of effective therapeutic residential youth care. In J. K. Whittaker, J. F. del Valle, & L. Holmes (Eds.), *Therapeutic residential care with children and youth: Developing evidence-based international practice*. (pp. 217–228). Jessica Kingsley Publishers.

# REFERENCES (2)

- Harder, A. T., Knorth, E. J., & Kalverboer, M. E. (2012). Securing the downside up: Client and care factors associated with outcomes of secure residential youth care. *Child & Youth Care Forum*, 41(3), 259–276. <https://doi.org/10.1007/s10566-011-9159-1>
- Hawkins-Rodgers, Y. (2007). Adolescents adjusting to a group home environment: A residential care model of re-organizing attachment behavior and building resiliency. *Children and Youth Services Review*, 29(9), 1131–1141. <https://doi.org/10.1016/j.childyouth.2007.04.007>
- Jozefiak, T., Kayed, N. S., Ranøyen, I., Greger, H. K., Wallander, J. L., & Wichstrøm, L. (2017). Quality of life among adolescents living in residential youth care: Do domain-specific self-esteem and psychopathology contribute? *Quality of Life Research*, 26(10), 2619–2631. <https://doi.org/10.1007/s11136-017-1603-8>
- Jozefiak, T., Kayed, N. S., Rimehaug, T., Wormdal, A. K., Brubakk, A. M., & Wichstrøm, L. (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>
- Jozefiak, T., & Wallander, J. L. (2016). Perceived family functioning, adolescent psychopathology and quality of life in the general population: A 6-month follow-up study. *Quality of Life Research*, 25(4), 959–967. <https://doi.org/10.1007/s11136-015-1138-9>
- Kayed, N. S., Jozefiak, T., Rimehaug, T., Tjelfaat, T., Brubakk, A. M., & Wichstrøm, L. (2015). *Resultater fra forskningsprosjektet psykisk helse hos barn og unge i barneverninstitusjoner [Results from the research project mental health in adolescents living in child welfare institutions]*. <https://bufdir.no/Bibliotek/Dokumentside/?docId=BUF00002834>
- Knorth, E. J., Harder, A. T., Zandberg, T., & Kendrick, A. J. (2008). Under one roof: A review and selective meta-analysis on the outcomes of residential child and youth care. *Children and Youth Services Review*, 30(2), 123–140. <https://doi.org/10.1016/j.childyouth.2007.09.001>
- Knorth, E. J., Meijers, J. P. M., Brouwer, A., Jansen, E., & Du Prie, H. (2004). Changing the horizon: Client feedback as a driving force behind innovations in residential child and youth care. In H. G. Eriksson & T. Tjelflaat (Eds.), *Residential care: Horizons for the future* (pp. 23–37). Ashgate.
- Leipoldt, J. D., & Strijbosch, E. L. L. (2020). Een positief leefklimaat in gezinshuizen en residentiële leefgroepen [A positive climate in family-style group care and residential youth care]. In A. T. Harder, E. J. Knorth, & C. Kuiper (Eds.), *Uithuisgeplaatste jeugdigen. Sleutels tot succes in behandeling en onderwijs* (pp. 109–117). SWP Publishers.
- Moos, R. H. (2009). *Community oriented programs environment scale manual: Fourth edition*. Mind Garden.
- Moos, R. H., & Lemke, S. (1996). *Evaluating residential facilities. The multiphasic environmental assessment procedure*. Sage.



# REFERENCES (3)

- Palmer, T. (1995). Programmatic and nonprogrammatic aspects of successful intervention: New directions for research. *Crime & Delinquency*, 41(1), 100–131. <https://doi.org/10.1177/0011128795041001006>
- Ravens-Sieberer, U., & Bullinger, M. (2000). *KINDL-R questionnaire for measuring health-related quality of life in children and adolescents - Revised version 2000*. <http://www.kindl.org>
- Reime, M. A., & Tysnes, I. B. (2021). Youth experiences of and views on un-locked coercive placement in residential child care. *YOUNG*, 29(1), 12–27. <https://doi.org/10.1177/1103308820937560>
- Singstad, M. T., Wallander, J. L., Greger, H. K., Lydersen, S., & Kayed, N. S. (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, Article 29. <https://doi.org/10.1186/s12955-021-01676-1>
- Stams, G. J., & Van der Helm, P. (2017). What works in residential programs for aggressive and violent youth? In P. Sturney (Ed.), *The Wiley Handbook of Violence and Aggression* (pp. 1–12). John Wiley & Sons, Ltd. <https://doi.org/10.1002/9781119057574.whbva116>
- Strijbosch, E. L. L., Wissink, I. B., Van der Helm, G. H. P., & Stams, G. J. J. M. (2019). Building a positive group climate together: How monitoring instruments are part of an improvement process in residential care for children. *Children and Youth Services Review*, 96, 266–277. <https://doi.org/10.1016/j.childyouth.2018.11.051>
- Van der Helm, G. H. P., Kuiper, C. H. Z., & Stams, G. J. J. M. (2018). Group climate and treatment motivation in secure residential and forensic youth care from the perspective of self-determination theory. *Children and Youth Services Review*, 93, 339–344. <https://doi.org/10.1016/j.childyouth.2018.07.028>
- Van der Helm, P., Beunk, L., Stams, G.-J., & Van der Laan, P. (2014). The relationship between detention length, living group climate, coping, and treatment motivation among juvenile delinquents in a youth correctional facility. *The Prison Journal*, 94(2), 260–275. <https://doi.org/10.1177/0032885514524884>
- Wallander, J. L., & Koot, H. M. (2016). Quality of life in children: A critical examination of concepts, approaches, issues, and future directions. *Clinical Psychology Review*, 45, 131–143. <https://doi.org/10.1016/j.cpr.2015.11.007>
- Whittaker, J. K., Del Valle, J. F., & Holmes, L. (2015). *Therapeutic residential care with children and youth: Developing evidence-based international practice*. Jessica Kingsley Publishers.
- Willis, G., & Ward, T. (2013). The good lives model: Evidence that it works. In L. Craig, L. Dixon, & T. A. Gannon (Eds.), *What works in offender rehabilitation: An evidence based approach to assessment and Treatment* (pp. 305–318). John Wiley & Sons.