

Affective relationships with caregivers, self-efficacy, and hope of adolescents in residential care

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ABSTRACT

The transition to residential care (RC) is often experienced with fear and distrust, which, associated with a feeling of punishment and abandonment, may result in pejorative attributions and self-depreciation. These feelings may reveal a greater difficulty for youth to invest in social relationships and be open to reorganizing affective bonds with alternative significant figures. Developing quality affective relationships with caregivers in residential care may work as a protective factor for the biopsychosocial development of youth. The present study aims to analyze the associations between affective relationships with caregivers and self-efficacy, and future expectations of youth in residential care, as well as to test the mediating effect of hope on the previous association. The sample included 249 youth living in residential care, aged between 12 and 18 years. The results show that the quality of affective relationships with caregivers is associated with youth self-efficacy and hopes. A partial positive mediation of hope is also found. The results are discussed considering attachment theory and its contribution to relational mechanisms to promote self-efficacy and expectations of the future of youth living in residential care. The contributions of this study to the implementation of intervention guidelines will also be discussed.

1. 1 Introduction

The quality of relationships among youth living in RC is of utmost importance since their past relational experiences are often marked by absent, abusive, or negligent care (ISS, 2020; Quiroga & Hamilton-Giachritsis, 2016), encompassing greater vulnerability and difficulty in adapting to a new relational context (Costa et al., 2019b; Cyre et al., 2010; Hughes, 2004; Robinson, et al., 2009). The transition to RC is often experienced with fear and distrust (Costa et al., 2019b; Mota & Matos, 2008, 2015), which, associated with a feeling of punishment and abandonment, may result in derogatory attributions and self-depreciation (Alberto, 2002). These feelings may reveal a greater difficulty for youth to invest in social relationships and be open to reorganizing affective bonds with significant alternative figures (Costa et al., 2019a; Mota & Matos, 2015). However, contact with a caring receptive relational context may promote a sense of stability in youth, enhancing the development of a more positive adaptation (Collins et al., 2010;

Mota et al., 2021; Munson et al., 2010; Siqueira & Dell'Aglio, 2006). The relational experiences and caregiving environments can work as important opportunities for developing relational skills, with an increase in maturity and personal growth, promoting the development of internal working models that are more adaptive and positive towards themselves, others, and their future (Fernandes & Oliveira-Monteiro, 2016; Mota et al., 2021; Mota & Matos, 2010), which in turn, could contribute to enhancing the sense of self-efficacy (Luke & Coyne, 2008).

The perception of self-efficacy results from a set of cognitive, emotional, and relational processes that lead to the development of beliefs about one's abilities, determining how individuals feel, think, and behave (Bandura, 1997). The sense of self-efficacy can vary throughout life, namely in critical developmental moments as in adolescence (Bacchini & Magliulo, 2003). Youth with high self-efficacy tend to set more challenging goals, be more persistent, and explore more external environments (Franco & Rodrigues, 2018). Self-efficacy in youth seems to be related to the need for contact with relational

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experiences that prioritize their participation as agents of their evolution process (Tsang et al., 2012). Thus, contact with relational experiences that promote insecurity, devaluation, and reluctance toward the external environment may lead to the development of negative beliefs and low levels of self-efficacy (Tsang et al., 2012; Wright et al., 2017).

Youth living in RC often assume a depreciative self-assessment, with negative beliefs about their abilities and feelings of inferiority (Granqvist et al. 2017; Lima, 2013; Perry et al., 2006). However, the possibility of developing meaningful and close affective relationships with caregivers in RC may help youth develop the ability to cope with adverse situations, manage anxiety and increase resilience and frustration tolerance (Calheiros et al., 2013; Cordovil et al., 2011; Mota et al., 2016). Contact with significant figures of affection who demonstrate and encourage learning skills and strategies seems to promote youth's readiness to implement ideas, thus creating a greater chance of success and self-efficacy (Moré & Sperancetta, 2010; Tsang et al., 2012). The affective relationships developed with caregivers seem to be also implicated in the vision and expectations that the youth create about their future, namely in what concerns hope (Ahrens et al., 2011). Future expectations seem to be related to plans, aspirations, and fears concerning events likely to happen in the near and distant future (Seginer, 2008). Future expectations embody hope as a construct concerning how individuals project and orient themselves toward their future (Ginevra et al., 2017). Hope can be considered an affective and cognitive trait that refers to the young person's perception of the possibility of achieving desired goals and being motivated to pursue these goals (Bryant & Harrison, 2015; Snyder, 2002). Thus, how youth perceive their future will have important repercussions on intrinsic motivation and youth's ability to successfully achieve goals (Rand, 2018; Sulimani-Aidan, 2017; Sulimani-Aidan & Benbenishty, 2011).

Figures of affection may influence youth's expectations, interests, values, and goals, and models for coping with multiple developmental tasks (Sulimani-Aidan, 2017; Sulimani-Aidan & Benbenishty, 2011). According to Collins et al. (2008), the support obtained through affective relationships contributes to a better biopsychosocial adjustment during adolescence and transition to adulthood, facilitating well-being and hope towards the future. Thus, youth who had the opportunity to develop positive affective bonds with their caregivers seem to have feelings of hope, showing a more optimistic and hopeful view of their future (Collins et al., 2008; Crespo et al., 2013; Fernandes & Oliveira-Monteiro, 2016).

The literature on the association between the quality of care provided by institutional caregivers and the youth's future expectations is scarce; however, studies indicate that greater support from staff and a feeling of safety in RC may be associated with better social adjustment in the future (Cashmore & Paxman, 2006; Schofield & Beek, 2005). In addition, the quality of relationships with institutional caregivers seems to play an important role in youth well-being and coping strategies, enhancing the development of a more positive and hopeful view of their future (Ahrens et al., 2011; Costa et al., 2020; Mota et al., 2016). Young people that reveal a more hopeful perspective about the future tend to aim for success, persist in their objectives and feel encouraged to believe strongly in their ability to achieve volitional goals (Verdugo et al., 2018), developing emotional strategies to overcome obstacles, which contribute to engagement in self-efficacy (Wright et al., 2017). In this sense, this study aims to explore the role of quality of the relationship with caregivers in RC in youth's self-efficacy. Furthermore, the sense of hope is expected to be a linking mechanism between the quality of relationships and youth self-efficacy.

2. Method

2.1. Participants

The sample consisted of 249 youth living in infant and juvenile RC settings, 111 boys (44.6 %) and 138 girls (55.4 %), aged between 12 and

18 years ($M = 15.55$; $SD = 1.66$). These adolescents lived in a RC institution due to a diverse set of adverse live situations, namely parental neglect or lack of family socio-economic conditions. The participating RC institutions did not include youth with mental disabilities/disorders or deviant behaviors (conduct disorders or substance abuse). The sample included in this study is homogeneous in relation to race and ethnicity. The length of time in RC ranges from 1 week to 16 years ($M = 35.61$ months; $SD = 38.52$), where 71 youth (28.5 %) have been in the institution for less than 1 year, 60 (24.1 %) between 1 and 2 years, 54 (21.7 %) between 2 and 4 years, and 64 (25.7 %) were living in the institution for more than 4 years.

2.2. Instruments

Sociodemographic Questionnaire. This instrument was constructed for the purposes of the current study to collect socio-demographic information regarding the youth's information (e.g., age and gender) and information on institutional variables (e.g., length of stay in RC). To prevent revictimization, information about the institutionalization process was provided by case managers.

General Self-Efficacy Scale (GSE) (Chawarzer & Jerusalem, 1995; Portuguese adaption by Araújo & Moura, 2011) - This self-report questionnaire assesses youth general self-efficacy. It consists of 10 items (e.g., "I can remain calm when facing difficulties because I can rely on my coping abilities"), with a Likert-type response scale ranging from 1 (*Not at all true*) to 4 (*Exactly true*). All items are formulated in the positive direction, indicating that high values on the scale correspond to the presence of high general self-efficacy. The analysis of internal consistency in the present sample showed a value of $\alpha = 0.89$. Confirmatory analysis showed adjusted values for the one factor model, $\chi^2/df = 2.465$; CFI = 0.953; RMSEA = 0.077.

Vision About Future (Ginevra et al., 2016; Portuguese version of Nunes et al., 2018) - This self-report questionnaire assesses youth's orientation towards optimism, pessimism, and hope regarding their future. It consists of 19 items (e.g., "I feel that I will get along quite well"), with a Likert-type response scale ranging from 1 (*does not describe me at all*) to 5 (*describes me very well*). To adapt the instrument to the objectives of the current study, we only used the hope dimension (7 items). The analysis of internal consistency in the present sample showed a value of $\alpha = 0.87$. Confirmatory analysis showed adjusted values for the one factor model, $\chi^2/df = 2.028$; CFI = 0.982; RMSEA = 0.064.

Relationship with Significant Figures Questionnaire (Mota & Matos, 2005) - This self-report questionnaire assesses the perception of the quality of the youth relationship with teachers, school staff, and institutional staff from RC, based on attachment theory. It consists of 28 items (e.g., "I feel valued by the careworkers of the institution where I live"), with a Likert-type response scale ranging from 1 (*strongly disagree*) to 6 (*strongly agree*). For the purposes of the current study, we chose to use only the questions concerning the institutional staff (14 items). The analysis of internal consistency in the present sample showed a value of $\alpha = 0.92$. Confirmatory analysis showed the following values for the one factor model, $\chi^2/df = 3.243$; CFI = 0.913; RMSEA = 0.095.

2.3. Procedure and data analysis

This research resulted from the collaboration of two universities in the North of Portugal, University of Trás-os-Montes and Alto Douro and Faculty of Psychology and Education Sciences, University of Porto, and the Portuguese Institute of Social Security, providing the possibility to establish contact with RC institutions. Child and youth care institutions with youth aged 12 to 18 years old in the district of Porto (Portugal) participated in the research, being selected considering their availability and interest to participate in the study. All participants signed an informed consent or assent form (in the case of participants younger than 18 years) where the principles of voluntariness, ethics, and confidentiality were guaranteed. In youth under 16 years of age, informed

consent was also filled out by the professional responsible for the young person. In this research, we used a quantitative and cross-sectional methodology. The factorial structure of all measures was assessed through Confirmatory Factor Analysis (CFA). Structural equation models were performed and testing mediation analyses. All results were analyzed and interpreted based on a significance value of $p < .05$. CFA and the model were evaluated using the chi square test, CFI and RMSEA. Reference values for acceptable adjustment values were the following: $CFI \geq 0.90$ and $RMSEA < 0.10$ (Kline, 2016).

3. Results

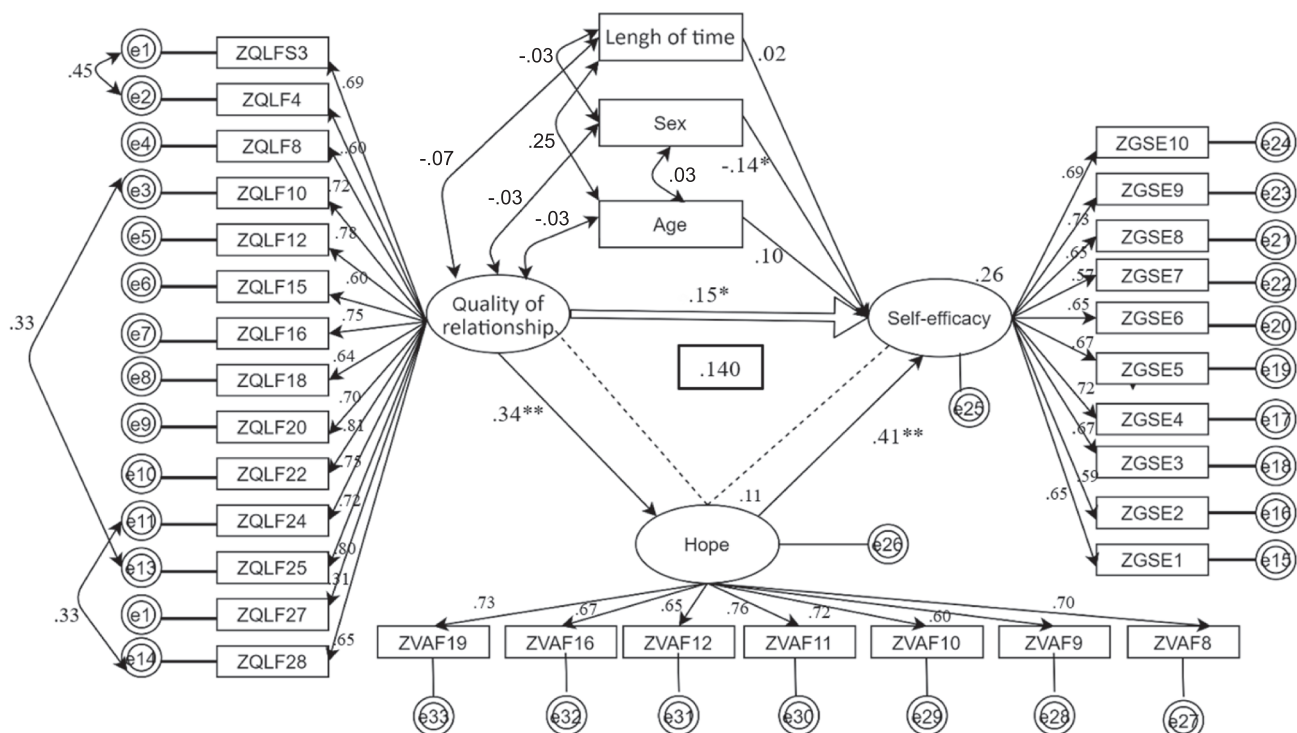
In the present study, the quality of the relationship with caregivers predicts positively self-efficacy ($\beta = 0.29$) and hope ($\beta = 0.33$). In turn, hope positively predicts self-efficacy ($\beta = 0.42$). After introducing the mediating variable hope in the final model, and using the bootstrapping procedure, the initial association between the quality of the relationship with caregivers and self-efficacy loses magnitude ($\beta_{\text{initial}} = 0.29$; $\beta_{\text{final}} = 0.15$) and maintains significance. A partial positive mediation is thus observed ($SE = 0.07$, $p = .03$, $\beta = 0.14$, 90 % CI [0.07;0.21]), where hope mediates the association between quality of relationship with caregivers and self-efficacy. The variables sex, age, and length of time in RC were controlled in the model. Sex shows an effect on self-efficacy, with males presenting higher self-efficacy, while age and length of RC do not present significant effects on youth's self-efficacy. The model presented the

following fit indices ($p < .001$, $\chi^2/df = 2.160$; $CFI = 0.872$; $RMSEA = 0.068$) (See Fig. 1). Although CFI is under the expected threshold, it is justified by the high number of parameters to be estimated.

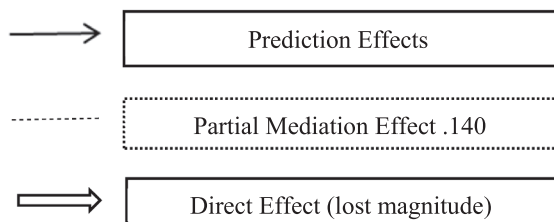
4. Discussion

The main objective of the present study was to analyze the associations between youth representations of quality of affective relationships with caregivers, self-efficacy, and hope, as well as to investigate the mediating effect of hope on the association between relationship quality with caregivers and youth self-efficacy.

The results showed that the quality of the relationship with caregivers has a positive and significant effect on the self-efficacy of youth in RC. These results emphasize the importance of caregivers in providing responsive care capable of influencing how the youth see themselves and their beliefs about their abilities (Costa et al., 2020; Mota et al., 2021). The provision of secure and affective relationships by professional caregivers may allow the reconstruction of a secure attachment and consequent reorganization of youth's internal models, and consequently the development of a more positive self-efficacy (Drapeau, et al., 2007; Siqueira & Dell'Aglio, 2006). Caregivers as "second chance secure base figures" (Graham, 2005) can induce a sense of security and comfort, which may lead to increased self-knowledge and recognition of oneself as worthy of love and affection (Costa et al., 2019a; Costa et al., 2020; Fernandes & Oliveira-Monteiro, 2016; Luke & Coyne, 2008). These



* $p < .005$ ou ** $p < .001$



(PARTIAL) MEDIATION EFFECT:

Relationship quality - Hope - Self-efficacy: $SE = .066$;

$p = .034$; $\beta = .140$; $CI_{90\%} [.069; .205]$.

Fig. 1. Representative model of the mediating effect of hope on the association between quality of relationship with caregivers and self-efficacy.

experiences may allow the development of a sense of inner confidence, reflected in more positive beliefs about their abilities to perform tasks, solve problems and achieve personal goals (Sulimani-Aidan, 2017; Sulimani-Aidan & Benbenishty, 2011; Tsang et al., 2012).

The results also showed that the quality of the relationship with caregivers positively affects future expectations, namely hope for the future of youth in RC. Research shows that a sense of support and a positive appreciation can promote feelings of hope and more positive future expectations (Sulimani-Aidan, 2017; Sulimani-Aidan & Benbenishty, 2011; Schmidtt et al., 2016). This result addresses the need to pay particular attention to the reconstruction of personal projects inducing hope for the future with youth through the creation of a supportive emotional environment.

Results also indicate that hope may explain the association between the quality of the relationship with caregivers and the youth's self-efficacy. Secure relationships with significant figures seem to protect young people and promote a sense of belonging (e.g., Costa et al., 2020; Mota et al., 2016), and more positive perspectives about their future (Lovu et al., 2016). According to Verdugo et al. (2018), young people's hope is strongly correlated with success and persistence in objectives. The emotional strategies developed about hopeful perspectives help them to overcome obstacles and promote self-efficacy (Wright et al., 2017).

The quality of relationships of youth in RC can influence perceptions about the future and consequent feelings of hope about achieving goals and dreams (Lovu et al., 2016; Sulimani-Aidan, 2017; Sulimani-Aidan & Benbenishty, 2011). In RC, youth often develop feelings of insecurity and hopelessness about the future, marked by the negative belief that they are not worthy of love and a promising future (Granqvist et al. 2017; Lima, 2013). However, the youth's negative ideas about their future can be subject to reorganization with the help of the institution's caregivers (Cashmore & Paxman, 2006; Schofield & Beek, 2005). Through relationships based on the free expression of emotions, dialogue, reflection, and understanding, it becomes possible for youth to think reflectively about themselves, assign new meaning to their lives, and increase hope for the future (Costa et al., 2020; Mota et al., 2016; Schmidtt et al., 2016; Sulimani-Aidan, 2017; Sulimani-Aidan & Benbenishty, 2011). In turn, rebuilding expectations and increasing hope for the future may facilitate and promote the development of goals and objectives and the consequent motivation to achieve them (Sulimani-Aidan, 2017; Sulimani-Aidan & Benbenishty, 2011). It is worth pointing out that there are few studies that analyze the mediating role of future expectations between the quality of youth's relationship with caregivers and self-efficacy. The results obtained allow us to highlight the importance of the quality of the relationship established between youth and caregivers in a RC setting, particularly in the development of a more positive view of themselves and others, and in the possibility of recreating a safe space for inspiring feelings of hope for the future.

The variables gender, age, and length of RC were also controlled in the model. The results highlight a significant effect of male gender on youth's self-efficacy. The results presented seem to be corroborated by previous studies and justified by cultural and gender stereotypical orientations surrounding the development of self-efficacy (Rossi et al., 2020; Tsang et al., 2020; Weber, 2018). Although self-efficacy has been associated with age (Bacchini & Magliulo, 2003) the results of this study did not show an effect of age on youth's self-efficacy. This could be due to relational and affective experience of youth in RC, frequently marked by depreciation and discredit (Granqvist et al. 2017) being implicated in lower levels of self-efficacy throughout life (Wright, et al., 2017). We also can point out that the negative experiences of young people before the RC context may hinder the progressive development of self-efficacy over time, so the lack of significance may be related to the absence of variance.

Finally, the results also suggest no effect of the length of RC on youth's self-efficacy. The literature points to contradictory results regarding the effect of the length of RC on youth (Baker, et al., 2005;

Dell'Aglio & Hutz, 2004; Ringle et al., 2010). While it is found that a long period in RC can have a negative effect on youth development (Dell'Aglio & Hutz, 2004), it can be seen as a protective factor (Costa et al., 2019a; Ringle et al., 2010) and has had greater opportunities to build closer relationships (Baker et al., 2005; Fernandes & Oliveira-Monteiro, 2016). Thus, creating closer emotional bonds could affect how youth perceive their lives and their self-efficacy beliefs (Moré & Sperancetta, 2010). However, there could be organizational dimensions that could interfere with the quality of care that could contribute to explain the distinct contribution of the length of stay on psychosocial adaptation and quality of care as youth to caregiver's ratio, the high staff turnover, as well as the youth's previous relational experiences (Colton & Roberts, 2007; Costa et al., 2019a; Quiroga, & Hamilton-Giachritsis, 2016; Strolin-Goltzman et al., 2010).

4.1. Practical implications, limitations, and future directions

The present study presents practical contributions that may lead to a better understanding of the importance of safe and quality affective relationships with caregivers in the development of youth's self-efficacy beliefs and expectations for the future.

The evidence found features the importance of increased attention to the relationships with significant figures within RC. Specifically, it highlighted the importance of developing responsiveness and sensitive care, recognizing the importance of attachment on youth development, and the subsequent implications on youth self-efficacy and hope for the future. Likewise, the present study stresses the relevance of caregiver's emotional well-being, in their role as active agents in the affective experience of youth. In this sense it also highlighted the need for the inclusion of more specialized training for caregivers, that allows a reflection on their practices and personal implications, through supervision and psychological intervention (Knorth et al., 2010). Thus, promoting caregivers' well-being (with better working conditions, more stability, increased staff, and permanent supervision) may be key to promoting improvements in the quality of RC. Research has been highlighting those caregivers are in a privileged position to provide the emotional environment for children and youth psychosocial adjustment as "second chance secure base figures" (e.g., Costa et al., 2020). This ability seems to result from the close interplay between caregivers' intrapersonal and organizational and RC environmental dimensions (e.g., Kind et al., 2020; Leipoldt et al., 2019). However, systemic interventions that focus simultaneously on organizational and relational dimensions are scarce (e.g., Ainsworth & Fulcher, 2006; Morison et al., 2019; Palareti & Berti, 2010). According to Anglin (2004) conceptual model, RC settings are living environments with different system levels of operations, hierarchical roles, and competing interests, that struggle with congruence considering the child's best interest. Van der Helm et al. (2018) underline the importance of living group climate, particularly as an indicator of youths development of self-determination. Ecological and systemic dimensions of care, namely social climate, consistency and cohesiveness between services, and vertical and horizontal collaborative relationships, are recommended to improve RC work conditions (e.g., Anglin, 2004; Hair, 2005).

During the present study, some limitations were also identified, namely the exclusive use of self-report instruments, which may have increased the risk of the content being subjectively perceived by the participants, the existence of responses based on social desirability, and common method variance. As a limitation, we also recognize that this is a cross-sectional study and, therefore, it is impossible to make causal relationships between the variables. Likewise, this limitation may raise questions regarding the possibility that youth with greater self-efficacy and hope may be more prepared to develop and report higher-quality relationships. Also, the present study did not account for the nested structure of the data by means of multi-level analysis. Although the subcontexts in which young people were included were identified, ethical considerations limited the pairing of young caregivers in their

respective institutions. To this extent, the results were analyzed considering relationships with caregivers in general, so the results should, therefore, be interpreted with caution.

As future clues, we identified issues such as the development of a longitudinal study on the quality of affective relationships with caregivers in RC, and its relationship with self-efficacy and expectations for the future of youth. In future research it would also be pertinent to compare data according to the composition of the RC settings (e.g., organizational characteristics of RC settings, as child to caregiver ratio, units' dimension), as well as to expand the number of participants and the geographical area of the sample, to consider a representative sample of the youth living in RC in Portugal. Similarly, it would also be relevant to obtain more accurate information on the quality of the relationships established between youth and caregivers, highlighting the importance of assessing the caregivers' perspective and understanding issues related to their characteristics (e.g., role in the institution and experience). In this sense, it would be pertinent to complement the study with a qualitative approach by conducting interviews to obtain more specific information on how hope is built in the relationships with the caregivers.

Additionally, for further studies, concerning international advertisements, it would be relevant to implement comparative measures in the context of RC and foster care, to analyze the relevance of personalized care and the close experience in a family environment for youths attachment and psychosocial adjustment (Li et al., 2019). Gutterswijk et al. (2020) findings suggest that youth treated in foster care have better outcomes than youth in RC, which according to the universal declaration of Children's Rights support that treatment in foster care should be the first option. Souverein et al. (2013) reinforce the evidence for the effectiveness of non-residential treatment for youth with severe behavioural problems and/or criminal behaviour is sparse if considered as an alternative for secure residential youth care. De Valk et al. (2016) points out that residential youth care settings should provide youth with safe environments where they are supported and treated, however, there are aspects of residential youth care that threaten its effectiveness, and which may also undermine children's rights.

Even so, considering that Portugal is currently reviewing legal frameworks regarding out-of-home care, and is still in a transition phase towards foster care, it is important to continue investing in the quality of the relational and organizational dynamics of RC. Although there is already some differentiation in Portugal regarding specialized RC (e.g. disability or deviant behaviour), more measures would be necessary, namely the promotion of specialization concerning mental health and special needs. Since the long-staying of young people in the RC measure, especially when they enter older, and present a level of affective disorganization undermines the building of their life projects, improves and promotes more autonomy transition settings, and the articulation with the family in life projects would be recommended (Sulimani-Aidan, 2017).

Compliance with ethical standards

- **Funding:** This work was supported by the FCT (Foundation for Science and Technology) funded project CareME (PTDC/PSI-ESP/28653/2017).
- **Ethical Approval:** This study considers data privacy and ethical procedures following Helsinki Declaration and the General Data Protection Regulation. The study received previous ethical approval from Ethics Committee of the Faculty of Psychology and Education Sciences, University of Porto (reference: 2019/09–5).

Informed consent.

- **Consent to Participate:** Informed consent and assent were obtained from all individual participants included in the study.

Authors' contributions: Francisca Babo and Catarina Pinheiro

Mota conceived the presented idea and developed the theory. Francisca Babo, Beatriz Santos, and Helena Carvalho gathered the data. All authors were involved in the statistical analysis. Catarina Pinheiro Mota supervised all the work carried out throughout the different stages. Paula Mena Matos supervised the findings of this work. All authors discussed the results and contributed to the final manuscript.

Research involving human participants and/or animals.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Data availability

The data that has been used is confidential.

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