Positive and Negative Peer Contagion in Residential Care
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Introduction
The goal of residential care programs is to provide effective treatment for troubled youth, minimizing those situations where youth might run the risk of getting worse. Policy and system reformers who are critical of residential care often contend that behavior problems in youth in these settings get worse due to the influence of negative peers (Friman et al., 1996; Roca et al., 2009).

Concern about negative peer contagion for youth in group care settings has been long-standing and widely shared (Osgood & Briddell, 2006). There is strong evidence that the influence of negative peers is significantly associated with problem behavior in youth (Huefner, Dishion, & Lansford, 2006), but research examining negative peer influence has been conducted in naturally occurring peer groups (Gifford-Smith, 2005) and may have limited relevance to group treatment settings (Weiss et al., 2005).

Recent research that has specifically looked for negative peer contagion has not found evidence supporting it being an issue in the residential care program examined. Specifically, there is no relationship between exposure to deviant peers and an individual’s externalizing behavior patterns over time (Lee & Thompson, 2006), youth with more serious problems showed the greatest improvement (Huefner et al., 2009), and having a higher percentage of troubled youth (those identified as conduct disordered) in a residential home was not related to the total number of problem behaviors within the home (Huefner et al., 2012). Each of these studies used clinical diagnosis (ODD and/or CD) as the criterion for negative peer.

Previous research using diagnoses to identify negative peers has not found evidence for negative peer contagion in residential care. Additionally, previous research has not examined the potential for positive peer contagion in residential care. Our present study used youths’ expressed level of problem behavior to examine the impact of both negative and positive peers on changes in problem behavior in a residential care program.

Method
Participants
We used clinical record data for 886 youth admitted to the Boys Town Family Home Program from January 2010 through June 2013.

The program uses an adaptation of the Teaching Family Model, where highly trained married couples supervise the treatment of 6 to 8 same-sex youth living in a residential home.

At the time of admission:
- Average age was 15.7 (SD = 1.5)
- 62% male, 56.4% minority
- 46.6% were wards of the state
- Youth had an average of 3.2 (SD = 3.4) prior placements
- Average age at first out-of-home placement was 12.8 (SD = 3.9)
- Youth had an average of 13.8 (SD = 5.3) identified presenting problems.

Measure
- Behavioral functioning
  - Daily Incident Report (DIR). A daily report of 36 noteworthy problem behaviors observed by direct-care staff. E.g., (selected items):
    - Runaway
    - Property damage
    - Substance abuse
    - Theft
  - Non-cooperative behavior
  - Physical Assault on staff
  - Gang behavior
  - Restraining

Analysis
- Using the sum of all 36 DIR behaviors, the sum of problem behaviors per month for each youth was calculated.

- Youth who entered during the dates were identified as “target youth.”
- Homes where 50% of the youth expressed problem behavior equal to or above the overall average were coded as negative-peer for that month (occurred 13.7% of the time).
- Homes where 50% of the youth expressed problem behaviors were coded as positive-peer for that month (occurred 47.7% of the time).
- Homes that were not coded as either negative- or positive-peer were coded as neutral-peer for that month (occurred 38.8% of the time).

- We used Hierarchical Linear Modeling (HLM) to examine the impact of positive versus negative peers on target youths’ behavior. Level 1 variables were Time, and two time varying dummy-coded covariates that indicated whether more than 50% of peers were negative or more than 50% of peers were positive.

Results
Table: Statistics from Hierarchical Linear Analysis

<table>
<thead>
<tr>
<th>Source</th>
<th>Intercept</th>
<th>Positive Peer (person month)</th>
<th>Positive Peer (person level)</th>
<th>Month</th>
<th>Month*</th>
<th>Positive Peer (dummy code)</th>
<th>Negative Peer (dummy code)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Coefficient</td>
<td>S.E.</td>
<td>T-ratio</td>
<td>d.f.</td>
<td>p-value</td>
<td>Coefficient</td>
<td>S.E.</td>
</tr>
<tr>
<td></td>
<td>-3.6</td>
<td>0.9</td>
<td>-3.9</td>
<td>185</td>
<td>.001</td>
<td>-0.2</td>
<td>0.1</td>
</tr>
</tbody>
</table>

Figures: Impact of Positive and Negative Peers on Problem Behavior

Overall Results for Positive/Negative Influence

- We found evidence of both positive and negative peer influence.
- When more than 50% of the behavior problem levels above average in their level of misbehaving, their impact on the target youth is significantly positive.
- When more than 50% of the youth in a home are not committing any negative acts, their impact on the target youth is significantly positive.
- Family teacher experience has an influence on the relationship of positive versus negative peers on the target youth, but the impact of negative peers remains.
- In terms of actual practice, only 13.7% of the months met the “negative peer” level, while 47.7% of the months met the “positive peer” level. So in practical terms, while the potential for negative peer influence cannot be ignored, overall positive peer influence was much more common in the program.
- Tracking and manipulating the percentage levels youth in a home who are at or above the organizational level of misbehavior has the potential to empower service providers to limit the possibility of negative peer contagion.

Directions for Future Research
- Are there other variables that mitigate the impact of negative peer influence (e.g., age, sex, extracurricular activities)?
- Are there within-home differences in the over-time stability of positive versus negative influence? Are some homes therefore more toxic and others more therapeutic, and what contributes to these conditions?
- Are there within-youth patterns of positive versus negative stability over time (i.e., can we identify individual’s that are positive versus negative behavior leaders)?
- Are there some types of behavior that are more susceptible to positive and negative peer influence?

References

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