

“Consumer” perspectives: Youths’ ratings of residential group care quality using a statewide sample

Aims: Residential group care is most often reserved for youth with higher-level needs beyond what can be managed in lower-level care settings. Research supports that residential care is effective for some youth. However, wide variation in service quality exists that likely impacts service outcomes. Increasingly, service providers are recognizing the importance of including consumer perspectives as a key part of facilitating high-quality and effective services. Despite this, the youth perspective has largely been left out when making decisions about policy and practice in residential care. This study addressed this gap by collecting and analyzing youth’s ratings of their care experiences residential group homes. **Methodology:** This study used data from the Group Care Quality Standards Assessment (GCQSA), an ongoing statewide effort in Florida to develop an evidence-based system aimed at facilitating quality residential care. The assessment is comprised of two sections. In section I, Program and participant information is collected and in section II scales measuring seven quality practice domains are presented. For each scale, youth are prompted to rate how true a statement is based on their experience (1 = Not at all, 2 = A little, 3 = Somewhat, 4 = Mostly, 5 = Completely). The sample included 450 youths placed in 127 licensed residential programs in Florida. The mean sample age was 14.77 (SD = 2.27) with a nearly equal number of females (50.9%) and males (48.6%). The majority were white (36.3%) or black (36%). Univariate analyses described youth and program characteristics and quality ratings on the GCQSA domains. A multilevel model was used to model associations between the total GCQSA scores and youth and program characteristics. **Findings:** Mean GCQSA scores indicated that, overall, youth reported receiving high quality care (M = 4.28, SD = .71). The domains with the highest mean ratings were Program Elements and Family, Culture, and Spirituality, and the domain with the lowest mean scores were Positive, Safe Living Environment and Pre-Discharge/Post-Discharge Processes. Results of the multilevel model revealed that youth rated the quality of care higher when their discharge plan included family reunification than non-relative care. Moreover, youth in programs using shift care and family style models rated their care experiences more positively than youth in shelters. **Implications:** These findings shed light on the quality of care experienced in residential settings from the youth perspective. On the one hand, these results run counter to longstanding assumptions about the negative care experiences within residential settings. Our findings lend credence to a more nuanced reality when the information is derived from multiple sources (i.e., 450 youth from 127 different group homes and shelters) and a comprehensive assessment of quality. Of equivalent importance, the results point to

areas that may be targeted for service improvements. We will discuss the alignment of these results with current policies within and beyond the United States along the importance of efforts to ensure youth input on their experiences are included in the development of policy and practice in residential care.

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Dr. Hui Huang is an associate professor in School of Social Work at Florida International University. Her social work training and areas of expertise are in child welfare, with most of her achievements related to evaluating macro-level interventions for children and families dually involved in child welfare and other public sectors. Dr. Huang (CO-PI) has been working with Dr. Shamra Boel-Studt on the project “A Pilot Test and Initial Validation of a Quality Rating Scale for Florida’s Residential Group Homes” since 2017.



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Dr. Huefner a Research Scientist at the Boys Town Child and Family Translational Research Center. His research for the last 19 years has focused on residential care. He has a Ph.D. in Organizational Social Psychology from Brigham Young University and 35 years of experience conducting research and university lecturing. Dr. Huefner has published or presented over 110 professional and scientific papers.